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# Publication trends in a high impact journal: the case of *World Psychiatry*

Bakthavachalam Elango and James Hartley

## Introduction

Scientometrics is a scientific field dealing with all aspects of people or group, matter and phenomena in science and their relationships. Bibliometric methods are generally accepted for analyzing the publication patterns, and such tools have been widely applied to measure the scientific production and research trends in many academic journals (Arya, 2013; Elango and Rajendran, 2012; Jain *et al.*, 2015, Kalita, 2016, Khan, 2016; Rajendran *et al.*, 2011; Santhakarhikeyan *et al.*, 2014; Srirak and Sirisathitkul, 2016; Young *et al.*, 2015).

*World Psychiatry* is the official journal of the World Psychiatric Association (WPA). It is circulated free to members and aims to disseminate research findings in the field of mental health. There have been three issues per year since 2002, and *World Psychiatry* has been published in collaboration with Wiley-Blackwell since 2008. The journal has been abstracted and indexed in Web of Science since 2006.

*World Psychiatry* currently has an impact factor of 26.56 (JCR, 2017) and it is the highest ranked journal of the 140 journals indexed under the category of Psychiatry. According to JCR 2017, it is ranked 34th in SCIE and 1st in SSCI in terms of its impact factor. The journal is available in English and other languages such as Arabic, Chinese, French, Russian, Spanish and Turkish. The editor-in-chief is Prof. Mario Maj of Primo Policlinico Universitario, Italy (and there are 30 people on the editorial and advisory board).

The major objectives of the journal are (Maj, 2010):

- to reach psychiatrists for disseminating the information on recent research developments in clinical as well as in a language

that can be assimilated by the vast majority of them; and

- to support the voice of psychiatrists of different world regions by encouraging submission of research papers, commentaries and reports.

## Bibliometric case study

The major objectives of this study are to study:

- yearly growth;
- authorship pattern;
- citation patterns and the growth of impact factor;
- prolific contributors – authors, institutes and countries;
- performance of editors;
- highly cited papers; and
- trends in keywords.

The data for this study were obtained from Thomson Reuters' (now it is known as Clarivate Analytics) "Web of Science". Software programs such as "HistCite", "intcoll.exe" and "Pajek" were used to analyze these publications and to determine international collaboration among the different countries. Further, "Leximancer", a computer-aided program was used to generate a concept map. Manual coding was carried out to determine the number of authors who contributed to individual papers.

A total of 673 papers were published in *World Psychiatry* from 2006 to 2015. Figure 1 shows that the highest number of papers ( $n = 98$ ) was published in 2015, and the lowest number ( $n = 51$ ) in 2010; a slight decline was seen in the number of papers published between 2006 and 2010, but there was a steady increase after that.

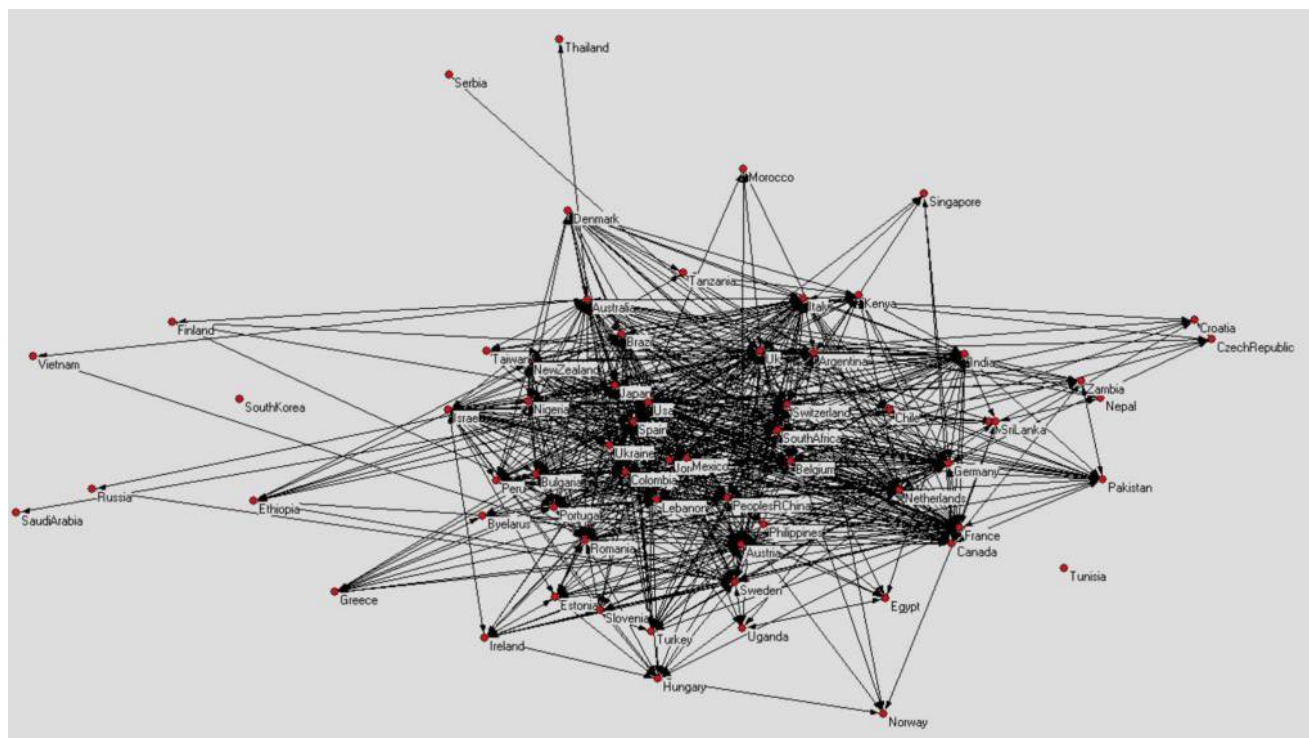
Scientific papers are indexed under various document types in the Web of Science. More than 97 per cent of the papers were published as editorials (56 per

cent), articles (31.7 per cent) and letters (9.5 per cent). Very few publications were published as reviews, news items, etc. This large percentage of papers published as editorials contrasts with that reported in an earlier study also on a high impact journal *Nature Nanotechnology* where more than 50 per cent of publications were published as articles (Elango, 2017). As the journal is an organ of an international professional association, the journal expects to publish commentaries or similar items on specific themes to educate their members or the purpose to create awareness.

Table I provides information about the impact factor and its growth for *World Psychiatry*. The journal received its first impact factor of 3.896 in 2008. Since that date, the impact factor has increased gradually to reach 20.205 in 2015. This increase can be partly attributed to some popular studies that were published in 2013 and 2014 (Andersson *et al.*, 2014; Chesney *et al.*, 2014; and Cuthbert, 2014). In terms of growth, more than 40 per cent of the growth in the journal's impact factor occurred between 2012 and 2013 and the lowest growth occurred in 2014. Overall, there was almost 400 per cent growth in the impact factor for *World Psychiatry* from 2008 to 2015.

Table II provides information about authorship patterns among the publications of *World Psychiatry* and the number of citations per paper. There were 1997 authorships for the 672 papers, with almost 3 authors per paper. The range of authorship lays between 1 and 40 authors per paper. Only one paper was anonymous in 2011. This was published by World Health Organization (2011) and dealt with the revision of ICD-10 classification. ICD-10 is the tenth revision of International Statistical Classification of Diseases and related Health Problems by the World Health Organization. It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances

**Figure 1.** International collaboration network



**Table I.** Impact factor and its growth by year

Year	IF	Growth in %
2008	3.896	–
2009	4.375	12.29
2010	5.562	27.13
2011	6.233	12.06
2012	8.974	43.98
2013	12.846	43.15
2014	14.225	10.73
2015	20.205	42.04

and external causes of injury or diseases. Codes are grouped under 22 chapters (<http://apps.who.int/classifications/icd10/browse/2010/en>).

More than half of the papers published in *World Psychiatry* were by single authors (51.71 per cent) followed by two authors (17.38 per cent) and three authors (9.81 per cent). In terms of citation impact, papers published between 2006 and 2015 received on an average of 12.19 citations. Only single authored papers received lower citations per paper than the others. Papers with co-authors had more citations, and this result agrees with those found in

**Table II.** Authorship patterns and citations per paper

# Authors	# Papers	% of 673	CPP
1	348	51.71	7.11
2	117	17.38	10.92
3	66	9.81	15.86
4	30	4.46	20.37
5	27	4.01	11.85
6	18	2.67	17.67
7	11	1.63	15.91
8	10	1.49	12.50
9	5	0.74	10
>9	40	5.94	43.57
Anon	1	0.15	62
Total	673	100	12.19

earlier studies (Hartley and Cabanac, 2015; Leimu and Koricheva, 2005).

In total, 1,499 unique authors were responsible for 672 papers published during 2006-2015. The majority of the authors (approximately 82 per cent) had only one paper in the first 10-year period and only 11 per cent of authors had two papers. There were 14 productive authors with at least seven papers each: among these, four are editorial board members of the journal. Maj

(who is also the editor-in-chief of the journal) contributed most papers to the journal (23 papers), followed by Gureje (11) and Corell (10). Maj contributed most of his papers as editorial material. In terms of citation impact, De Hert had the highest CPP with 93.63 followed by Correl (CPP = 61.3) and Stein (CPP = 60).

The journal has ten editorial and advisory board members from low and middle-income countries (32 per cent of 31), and this is the only journal having one third of editorial board members from low and middle-income countries among the top ten general psychiatry journals (Pike et al., 2017). Of the editorial board members, nine members did not publish any paper in the journal. Among the editorial board members (N = 31), chief editor Maj published most papers (n = 23) and also received a number of citations from *World Psychiatry* publications as well as from other publications in WoS. Advisory board member Katschnig received the highest citations per paper with 51.5 (GCScore), even though he had only two papers in the journal. Other papers by editorial board members Kallivayalil, Lieh-Mak, Lolas, Lopez-Ibor, Munk-Jorgensen and Okasha also

**Table III.***Characteristics of highly cited papers (TC ≥ 55)*

Author	Title	TC	Coll. type	DT
<a href="#">Kessler et al. (2007)</a>	Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative	378	International	Article
<a href="#">De Hert et al. (2011)</a>	Physical illness in patients with severe mental disorders. I. Prevalence, impact of medications and disparities in health care	316	International	Article
<a href="#">De Hert et al. (2009)</a>	Metabolic syndrome in people with schizophrenia: a review	175	International	Review
<a href="#">McGorry et al. (2008)</a>	Early intervention in psychosis: concepts, evidence and future directions	144	National	Review
<a href="#">Cuthbert (2014)</a>	The RDoC framework: facilitating transition from ICD/DSM to dimensional approaches that integrate neuroscience and psychopathology	143	Single authored	Article
<a href="#">De Hert et al. (2011)</a>	Physical illness in patients with severe mental disorders. II. Barriers to care, monitoring and treatment guidelines, plus recommendations at the system and individual level	142	International	Article
<a href="#">Wang et al. (2007)</a>	Delay and failure in treatment seeking after first onset of mental disorders in the World Health Organization's World Mental Health Survey Initiative	127	International	Article
<a href="#">Corrigan et al. (2009)</a>	Self-stigma and the "why try" effect: impact on life goals and evidence-based practices"	123	Co-authored	Article
McFarlane, AC (2010)	The long-term costs of traumatic stress: intertwined physical and psychological consequences	93	Single authored	Article
Cicchetti, D (2010)	Resilience under conditions of extreme stress: a multilevel perspective	86	Single authored	Article
Bond, GR; Drake, RE; Becker, DR (2012)	Generalizability of the Individual Placement and Support (IPS) model of supported employment outside the USA	77	Institutional	Article
Black, DW (2007)	A review of compulsive buying disorder	76	Single authored	Review
Wakefield, JC; First, MB (2012)	Validity of the bereavement exclusion to major depression: does the empirical evidence support the proposal to eliminate the exclusion in DSM-5?	69	National	Article
Cloninger, CR (2006)	The science of well-being: an integrated approach to mental health and its disorders	68	Single authored	Article
Katschnig, H (2010)	Are psychiatrists an endangered species? Observations on internal and external challenges to the profession	67	Single authored	Review
Thornicroft et al. (2010)	WPA guidance on steps, obstacles and mistakes to avoid in the implementation of community mental health care	66	International	Article
Sato, M (2006)	Renaming schizophrenia: a Japanese perspective	64	Single authored	Article
<a href="#">Reed et al. (2011)</a>	The WPA-WHO Global Survey of Psychiatrists' Attitudes Towards Mental Disorders Classification	63	International	Article
<a href="#">Sartorius et al. (2010)</a>	WPA guidance on how to combat stigmatization of psychiatry and psychiatrists	63	International	Article
WHO, 2011	A conceptual framework for the revision of the ICD-10 classification of mental and behavioral disorders	62	Corporate	Article
Hasler, G (2010)	Pathophysiology of depression: do we have any solid evidence of interest to clinicians?	60	Single authored	Article
<a href="#">Andersson et al. (2014)</a>	Guided internet-based vs face-to-face cognitive behavior therapy for psychiatric and somatic disorders: a systematic review and meta-analysis	60	International	Article
Zisook, S; Shear, K (2009)	Grief and bereavement: what psychiatrists need to know	59	Institutional	Article
<a href="#">Braff et al. (2008)</a>	Advances in endophenotyping schizophrenia	58	National	Article
<a href="#">Morgan et al. (2006)</a>	First episode psychosis and ethnicity: initial findings from the AESOP study	58	Institutional	Article

received citations from other publications in WoS, but these publications have not been cited in the subsequent *World Psychiatry* papers.

Among the 673 papers, 38 did not provide any information about where the authors were based. Overall, authors from

762 institutions were responsible for 635 papers in the first 10-year period, and the majority of the institutions (68 per cent) had only one paper. The single heading WHO groups together institutions that include the various regional offices and departments of World Health Organization located in

China, Switzerland, Italy, Egypt, Philippines, the UK and Denmark. All the 13 most productive institutions are universities that provide general education except WHO, and New York State Psychiatric Institute and Hospital. Kings College London had the most papers with



50 papers, followed by the University of Naples (28) and Harvard University (24). In contrast to this, Harvard University was the top most productive institution in the high impact journal *Nature Nanotechnology* (Elango, 2017). Indeed, the top most productive institution in the field of psychiatry is Harvard University (Igoumenou *et al.*, 2014), and it also ranks first for psychology (Ho and Hartley, 2016).

In total, 75 of the 673 papers did not indicate where the authors originated from, but the remaining data show that authors located in 64 countries were responsible for 598 papers. Among these 64 countries, only 11 had more than 20 papers during 2006-2015 in *World Psychiatry*. It is observed from the analysis that the contribution of low and middle-income countries is only 11 per cent of the total papers in the first 10-year period, and this is in contrast to the proportion of editorial board members (32 per cent). The top two countries, the USA and UK, accounted for 62 per cent of total papers, and this result is in agreement with the findings of an earlier study on scientific production in psychiatry (Biglu *et al.*, 2011).

Figure 1 visualizes the network of international collaboration between the authors. Each node represents one country, and the interconnecting (edge) line denotes the collaboration between the countries. Countries having more collaborations with other countries fall in the center of the network (e.g. the USA, Japan and Spain), while countries having less collaborations are mapped in the outer layer of the network (e.g. Russia, Thailand and Vietnam). Two countries (Tunisia and South Korea) were not integrated in this collaboration network, as these countries were not involved in any international collaboration.

Recently, Elango (2016) proposed an innovative method to determine highly cited papers and the following formula has been used here:

$$MC \text{ in HCP} = \frac{TC}{TP} \times \frac{\sum Y_n - Y_i}{N}$$

where:

MC = minimum citations;

HCP = highly cited papers;

TC = total citations received by the papers (i.e. 8,204);

TP = total papers (i.e. 673);

$Y_n$  = date of database access for citations (accessed on June 28, 2016, and taken as 2015);

$Y_i$  = one of the year of publications in a data set; and

$N$  = number of years (i.e. 10).

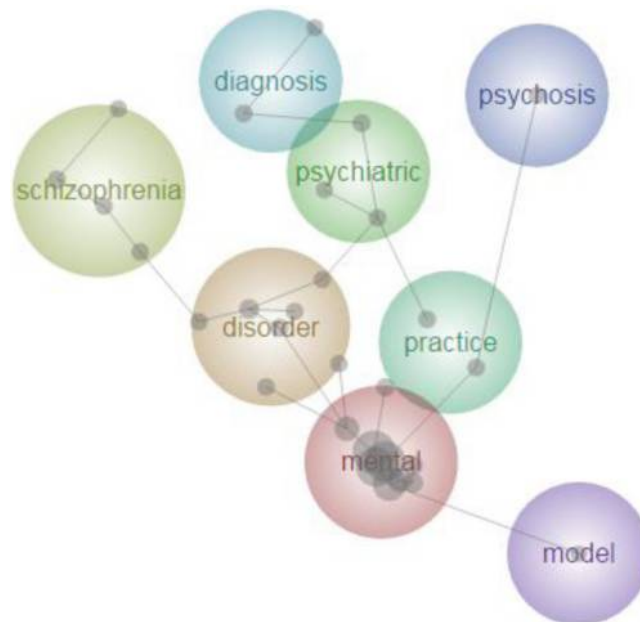
By substituting the appropriate values for *World Psychiatry* in the aforementioned formula, the minimum number of citations needed for a publication to be called a highly cited paper is 55. In this study, 25 publications met this criterion and Table III lists their characteristics. The citations received by the 25 most cited papers totaled 2697 (approximately 33 per cent) of all citations, with an average of 108 citations each. Of these 25 papers, eight had a single author and nine involved international collaborations. Thus, almost 70 per cent of the most cited papers were co-authored, a result that supports the notion that co-authored papers generally receive more citations than single authored ones (Hartley and Cabanac, 2015). Only 4 (16 per cent) papers were published as *reviews*, while the remaining 21 papers (84 per cent) were *articles*.

The results of face-to-face community surveys conducted on

lifetime prevalence and age-of-onset distributions in 17 countries in Africa, Asia, the Americas, Europe and the Middle East were published in the top cited paper (Kessler *et al.*, 2007). A group led by De Hert has three highly cited papers (ranked second, third and sixth): a review was conducted on the prevalence and incidence of metabolic syndrome in patients suffering from Schizophrenia (De Hert *et al.*, 2009) and reported prevalence rates of different physical illnesses as well as important individual lifestyle choices, side effects of psychotropic treatment and disparities in health-care access, utilization and provision that contribute to the poor physical health outcomes (De Hert *et al.*, 2011a, 2011b).

The content of documents can be analyzed by examining the key words. Two types of keywords were analyzed: keywords provided by the authors and words in the publication titles. The authors provided 603 unique keywords. It can be seen that the top six of these author keywords (that appeared ten times or more) were *schizophrenia* (chronic and mental disorder), *depression* (common but serious mood disorder), *mental health* (psychological well-being or absence of mental illness), *diagnosis* (general term in the field of medicine and it is the

Figure 2. Concept map of publication titles



identification of the nature of an illness), *classification* (more general term) and *psychosis* (loss of contact with reality). Figure 2 shows how the top keywords, *schizophrenia*, *mental*, *diagnosis* and *psychosis* can be visualized in a concept map.

A software analysis tool called “Leximancer” (retrieved from [www.leximancer.com](http://www.leximancer.com)) was used to build a concept map for the titles of publications in *World Psychiatry*. For this, a text file containing titles of publications was constructed and uploaded into the software tool. Figure 2 shows that there were eight important themes in the titles of papers published in *World Psychiatry*: *model*, *diagnosis* and *practice* are more general terms in the field of medicine. *Psychiatric* is the medical specialty which deals the study of mental disorder. *Schizophrenia* is the severe mental disorder and *Psychosis* is characterized as the loss of contact with reality. *Mental* is a term related to the mind, and this term can be used in the combination of health or disorder, in the field of psychiatry.

### Concluding remark

This study highlighted the variety of characteristics of the journal *World Psychiatry* that can be used to understand the characteristics of a high impact psychiatry journal. Further, bibliometric studies of this kind will help us to assess the publication patterns of specific journals and core authors, as well as establish international partners for future research projects.

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