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Accessibility to editorial information in Oral and Maxillofacial Surgery journals: The authors' point of view



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ABSTRACT

Objective: To evaluate the accessibility to editorial information in Oral & Maxillofacial Surgery journals. **Material and methods:** A cross-sectional study using the WOS—Web of Science database in three categories: “Surgery,” “Otorhinolaryngology,” and “Dentistry, Oral Surgery & Medicine” was designed. Journals were filtered by title and classified under three headings: OMFS specialty; OMFS subspecialty and related sciences; and multidisciplinary journals. Specialty scope (OMFS vs. other); impact factor; path for the manuscript; blinding policy; accessibility to reviewers' criteria; and percentage of acceptance.

Results: Only 46 of 330 journals met the inclusion criteria. All OMFS journals provided comprehensive information about the review process, compared to 5 of 27 (18.5%) of Oral Surgery and related sciences periodicals. Most specialty journals do not inform about the blind review mode used (20 of 33; 60.6%). Generally, information about the reviewers' assessment criteria is scarce, but is available from all OMFS journals, which also state the percentage of manuscript acceptance (100% vs. 14.8%).

Conclusions: OMFS JCR journals provide adequate information about their editorial process in terms of path for the manuscript, accessibility to reviewers' criteria, and percentage of acceptance. Additional efforts are needed to increase accessibility to information about blinding policy and average time from submission to acceptance.

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1. Introduction

Transparency is one of the basic principles of science (Schultz and Blalock, 2007) and scientific journals have a key role in the current processes of knowledge “production.”

Accessibility to editorial information is useful for both readers and authors: the former can weigh the level of transparency and scientific reputation of the journal, and the latter can use this information to select the most adequate publication to submit their manuscripts (Sprowson et al., 2013). Choosing a journal can be challenging due to the disparity of the information available (Søreide and Winter, 2010). Occasionally, even journal titles are vague and do not reflect the contents of the publication (Welch, 2012).

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Within this framework, selecting a journal is a multifactorial process (Søreide and Winter, 2010) that considers the area of interest of the publication—specialty vs. general scope (Özçakar et al., 2012; Shokraneh et al., 2012), overall reputation of the journal, Impact Factor (Lee et al., 2002), accessibility, peer review (Søreide and Winter, 2010), turn-around time for publication (Welch, 2012), and manuscript acceptance rate (Søreide and Winter, 2010; Shokraneh et al., 2012; Welch, 2012).

Awareness of these factors would permit an informed and more appropriate selection of journals. Despite the benefits of this approach for authors and journals, these issues have not been investigated so far in the Oral and Maxillofacial Surgery (OMFS) literature.

Thus, the aim of this study has been to elucidate the accessibility of readers and researchers to the most relevant issues of the editorial process of journals reporting about this area of knowledge.

2. Material and methods

A cross-sectional study was undertaken in September 2014 using the WOS–Web Of Science database (ISI Web of Knowledge/ Journal Citation Report 2013). The investigation was restricted to three subject categories: “Surgery” (204 journals), “Otorhinolaryngology” (44 journals), and “Dentistry, Oral Surgery & Medicine” (82 journals). Journals were filtered by title, selecting those including the terms “Maxillofacial Surgery” or “Craniofacial Surgery,” or “Oral Surgery” or “Head and Neck Surgery” and their counterparts in different languages. Journals detailing in their author guidelines the acceptance of Oral Surgery manuscripts were also included in the study. The selected journals were classified under three headings: Group 1: OMFS specialty journals; Group 2: journals focused on particular aspects of OMFS and related sciences; and Group 3: multidisciplinary journals with broad, general scopes that accept Oral Surgery manuscripts.

Every journal Web site was accessed in order to record the following variables: thematic nature of the journal (specialty scope, i.e., OMFS vs. other); impact factor; information about the path for the manuscript (flow-chart); blinding policy; accessibility to the reviewers’ evaluation criteria; and percentage of manuscripts accepted for publication (top rating).

Both the identification of the journals and data collection were independently undertaken by two observers using a sheet designed for the purpose. In case of discrepancy, data were reassessed until an agreement was reached.

3. Results

A total of 330 potentially eligible journals were identified, and only 46 met the inclusion criteria (Fig. 1): 6 OMFS journals, 27 Oral Surgery and related sciences periodicals, and 13 multidisciplinary publications (*Journal of Dental Research; Clinical Oral Investigations; International Journal of Oral Science; Acta Odontologica Scandinavica; Dental Traumatology; BMC Oral Health; Head & Face Medicine; Gerodontolgy; Journal of Applied Oral Science; Quintessence International; CRANIO; Journal of Dental Sciences; and Journal of Orofacial Pain*).

All OMFS journals provided comprehensive information summarizing the peer-review process in a flow-chart, whereas only 5 of

27 (18.5%) periodicals in Group 2 (Oral Surgery and related sciences) provide this information (Tables 1 and 2).

Regarding masking mode, the vast majority of specialty journals do not inform about the blinded review mode used (20 of 33; 60.6%), and those who detail the process are unevenly distributed into single-blinded (n = 9; 27.3%) and double-blinded (n = 4; 12.1%) review. Double-blinded review seems to be an exclusive feature of orthodontics and orthognatic surgery journals.

Generally, information about the assessment criteria (checklists) used by the reviewers is scarce, but it is available from all OMFS journals (Table 1). Regarding turnaround times for publication, only *Clinical Implant Dentistry and Related Research, Journal of Periodontology*, and *Journal of Periodontal Research* detail this information. OMFS periodicals also state the level of requirement set for their manuscripts more frequently than other specialty journals (100% vs. 14.8%).

4. Discussion

Impact factor is a controversial bibliometric index; but, either alone or combined with other parameters, it still is the most frequent criterion used by authors for selecting a journal (Søreide and Winter, 2010; Shokraneh et al., 2012; Özçakar et al., 2012). This circumstance made us limit our study to periodicals included in the *Journal Citations Report*, so a questionable selection bias has to be assumed. An additional consequence is that certain periodicals with a generalist scope (surgery, reconstructive journals) that may publish OMFS papers lay out of the bounds of this investigation.

The obvious first step of the process of selecting a journal to which to submit a scientific manuscript has to do with its area of interest, scope, audiences, and use of the periodical (subspecialty, specialty, or multidisciplinary) (Özçakar et al., 2012). According to this criterion, our study categorized the publications into three groups (OMFS journals, subspecialty & related sciences periodicals, and journals with a wider, multidisciplinary scope).

Transparency in reviewing and improved effectiveness of the process appear to be common demands among authors (Seligmann, 2003; Sprowson et al., 2013), but only 15.1% of JCR OMFS and specialty journals clearly define their peer review policy and detail the overall process.

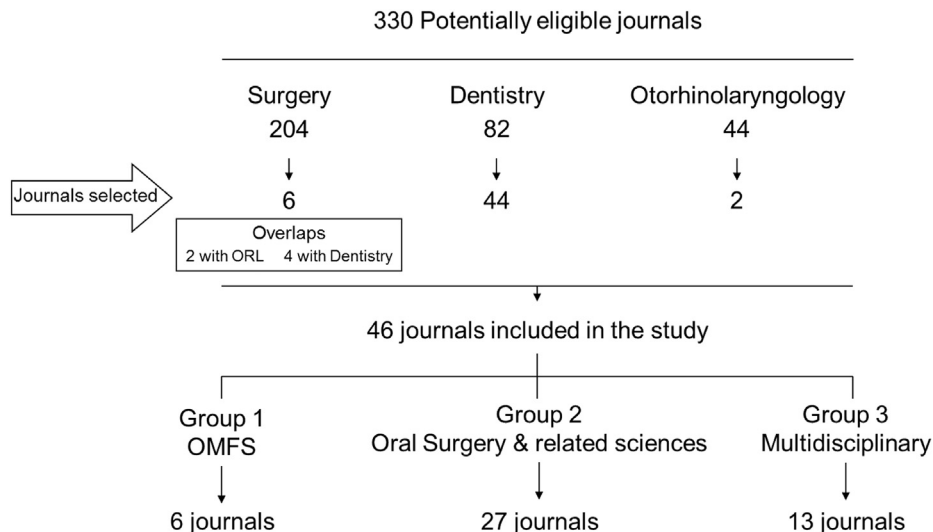


Fig. 1. Flow-chart of the study.

Table 1
Summary of the information provided by Oral and Maxillofacial Surgery JCR journals.

Group 1. Specialty journals (Oral & Maxillofacial Surgery Journals)	Impact factor	Flow-chart, peer-review	Blinding policy	Checklist evaluation criteria	Information about decision time	Top rating
J Craniomaxillofac Surg	2.59	Yes	NG	Yes	No	25%
Int J Oral Maxillofacial Surg	1.35	Yes	NG	Yes	No	25%
J Oral Maxillofacial Surg	1.28	Yes	NG	Yes	No	25%
Br J Oral Maxillofacial Surg	1.13	Yes	NG	Yes	No	25%
Oral Maxillofac Surg Clin North Am	0.48	Yes	NG	Yes	No	25%
Rev Stomatol Chir Maxillofac Chir Orale	0.29	Yes	NG	Yes	No	25%

NG, not given.

Peer-review implies some type of blinding (masking vs. unmasking), which editors consider important for the process (Sprowson et al., 2013). The superiority of one approach over another has yet to be clearly demonstrated, since existing evidence is still weak for both single and double blinding (Gervás and Pérez Fernández, 2001; Richards, 2007). Double-blinding (authors and reviewers are masked to each other) may have a potential for reducing selection biases and would place on an equal footing reviewers and authors (Gervás and Pérez Fernández, 2001; Watine and Friedberg, 2004), which is particularly valued by the latter, chiefly by those less experienced (Jefferson et al., 2002; Cho and Park, 2013; Regehr and Bordage, 2006). Unfortunately, this masking pattern is referred to by only 12.1% of OMFS and related journals.

Knowledge of the reviewers' evaluation criteria is another aspect appreciated by the authors, as well as information about speed of peer review (average time from submission to first decision, average time for the second round of review, and time from acceptance to publication) (Welch 2012), even though

these time lapses may vary over time for a given journal. In this sense, a large proportion of Oral and Maxillofacial Surgery journals already allow authors to access their reviewer guidelines (Sprowson et al., 2013). The average timing of editorial review is highly valued by scientific authors, but the editors' efforts for shortening the turn-around time for review (McCalmont, 2010) often face some trouble in finding highly qualified reviewers ready to devote up to 3 h of unpaid work to the review process (Black et al., 1998). These difficulties increase when dealing with highly specialized manuscripts, for which identifying and contacting experienced reviewers may be time consuming.

The level set for accepting a manuscript (top rating), along with the impact factor, has been considered as the best predictor for quality (Lee et al., 2002; Søreide and Winter, 2010) and a key criterion for selecting a journal to which to submit a manuscript (Frank, 1994; Shokraneh et al., 2012; Welch, 2012; Frank, 1994; Shokraneh et al., 2012; Welch, 2012). This information was available from all OMFS journals.

Table 2
Summary of editorial information provided by OMFS subspecialty and related sciences journals.

	Impact factor	Flow-chart peer-review	Blind-policy	Check-list evaluation criteria	Information about decision time	Top rating
Group 2. Subspecialty Journals (Orthodontics & Orthognatic Surgery)						
American Journal of Orthodontics and Dentofacial Orthopedics.	1.43	Yes	Double	Yes	No	25%
European Journal of Orthodontics.	1.39	No	Double	No	No	NG
Orthodontics & Craniofacial Research	1.28	No	Single	No	No	NG
Angle Orthodontics	1.27	No	NG	Yes	No	NG
Cleft Palate	1.10	No	Double	No	No	NG
Journal of Orofacial Orthopedics	0.81	No	Double	Yes	No	NG
Korean Journal of Orthodontics	0.37	No	NG	No	No	NG
Australian Orthodontics Journal	0.26	No	NG	No	No	NG
Group 2. Subspecialty Journals (Oncology, Oral Pathology & related sciences)						
Oral Oncology	3.02	Yes	NG	Yes	No	25%
Oral Diseases	2.40	No	Single	No	No	NG
Journal of Oral Pathology	1.87	No	Single	No	No	NG
Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology	1.26	Yes	NG	Yes	No	25%
Medicina Oral, Patología Oral y Cirugía Bucal.	1.09	No	NG	No	No	NG
Group 2. Subspecialty Journals (ORL, head and neck surgery & related sciences)						
Head & Neck	3.00	No	NG	No	No	NG
Otorhinolaryngology: Head and Neck Surgery	1.72	Yes	Single	Si	no	NG
Group 2. Subspecialty Journals (Implants, periodontal surgery & related sciences)						
Journal of Clinical Periodontology	3.61	No	Single	No	No	NG
Clinical Oral Implant Research	3.12	No	Single	No	No	NG
Periodontology 2000	3.00	No	NG	No	No	NG
Clinical Implant Dentistry and Related Research	2.79	No	NG	No	Yes	NG
Journal of Periodontology	2.56	No	NG	No	Yes	NG
J of Periodontal Research	2.21	No	Single	No	Yes	NG
European J Oral Implantology	2.01	No	Single	No	No	NG
Int J Oral Maxillofac Implants	1.49	No	Single	No	No	45%
Implant Dentistry	1.11	No	NG	No	No	NG
The International Journal of Periodontics & Restorative dentistry	1.00	No	NG	No	No	NG
Journal of Oral Implantology	0.97	No	NG	No	No	NG
Implantologie	0.26	No	NG	No	No	NG

NG: Not given.

5. Conclusion

Based on our results, we conclude that OMFS JCR journals provide adequate information for authors about their editorial process in terms of path for the manuscript (flow chart), accessibility to the reviewers' assessment criteria, and level of requirement for publication (top rating). However, additional efforts aimed at increasing authors' accessibility to information about blinding policy and average time from submission to acceptance may be useful for authors willing to submit their manuscripts for publication.

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