

REVISTA ESPAÑOLA DE CARDIOLOGÍA 2004: Activity, International Dissemination, and Scientific Impact

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At the Congress on Cardiovascular Diseases held in Madrid in October, 2004, we informed the Board of Directors of the Spanish Society of Cardiology (SSC) and the General Assembly of members about the journal's recent activities. In addition we held our annual meeting with the Editorial and Advisory Committees of REVISTA ESPAÑOLA DE CARDIOLOGÍA.

At this meeting we presented detailed data on the activities carried out in 2004 and on new guidelines adopted recently, and engaged in an interesting exchange of views regarding editorial policies and potentially useful future strategies. Here we summarize for all our readers the most relevant information on how the journal and our editorial policies have developed.¹⁻⁴

ARTICLES RECEIVED, REVIEWS, AND TIME TO PUBLICATION

During 2004 we received for review a total of 376 articles, representing a 34% increase with respect to 2003. As Figure 1 shows, the increase was similar for all types of article (Original Articles, Brief Reports, and Images in Cardiology), confirming the trend of the last few years. The number of manuscripts submitted from other countries increased from 51 in 2003 to 70 in 2004. The largest proportions of manuscripts were from Mexico (39%) and Argentina (20%). The number of manuscripts received in English also increased from 6 in 2002 to 9 in 2003, and to 14 in 2004.

Because of measures taken to try to reduce the time to decision on manuscripts, we achieved a substantial improvement in time to receipt of the reviewers' reports (mean 23 days, median 21 days) (Figure 2), and thus approached our ambitious but reasonable goal of receiving reviewers' reports within 2 weeks. It is important to recognize here the efforts of all members of the Editorial Committee to complete their excellent re-

views within this short timeline. Their critiques and comments are decisive not only because they aid us in the increasingly difficult task of choosing manuscripts for publication, but also because they also help to improve the scientific quality of those papers we eventually do publish. Especially worthy of mention is the work of those serve as advisors to REVISTA ESPAÑOLA DE CARDIOLOGÍA; although they are not members of the Editorial Committee, they have provided generous assistance with their excellent reviews (Table 1). The Editors wish to take this opportunity to offer our express appreciation for their invaluable help.

Another aspect we found interesting is that reviewers' reports are becoming more detailed and rigorous. Figure 3 shows how reviewers' recommendations have changed during the last few years. It is clear that the number of original articles initially accepted has declined, and that the number of reviews recommending rejection has increased. These increasingly critical reports may be nothing more than a reflection of the widely-held perception that the credibility and quality of REVISTA ESPAÑOLA DE CARDIOLOGÍA are on the rise.¹⁻⁴ As a result, only the best articles are being recommended for acceptance from among an increasingly large pool of submissions.

At the editorial office in the *Casa del Corazón* in Madrid, Spain, an additional motive for satisfaction has been the time to publication achieved during 2004. The period from manuscript receipt to publication has decreased significantly from 11.3 months in 2003 to 8.1 months for original articles published during 2004. Prompt publication of original articles is one of the variables that researchers notice most when they choose which journal to submit their results to. We can therefore say with some pride that our current publication times are similar to, and in many cases lower than, those offered by the most prestigious international publications considered leaders in the area of cardiovascular research. Accordingly, we will sustain our efforts to ensure that our authors continue to benefit from this prompt publication time.

PRIZES AND SUPPLEMENTS

We have expanded our policy of awarding prizes

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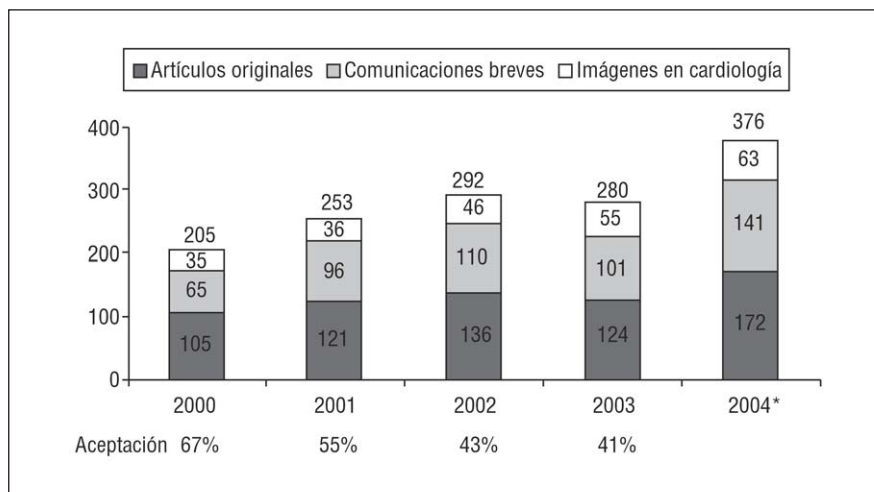


Figure 1. Changes in the number of manuscripts received and percentage acceptance rates. *Fourth trimester data based on best estimate.

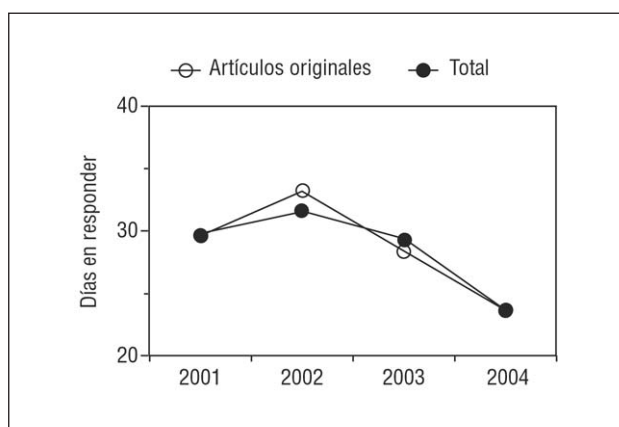


Figure 2. Changes in mean time to receipt of reviewers' reports.

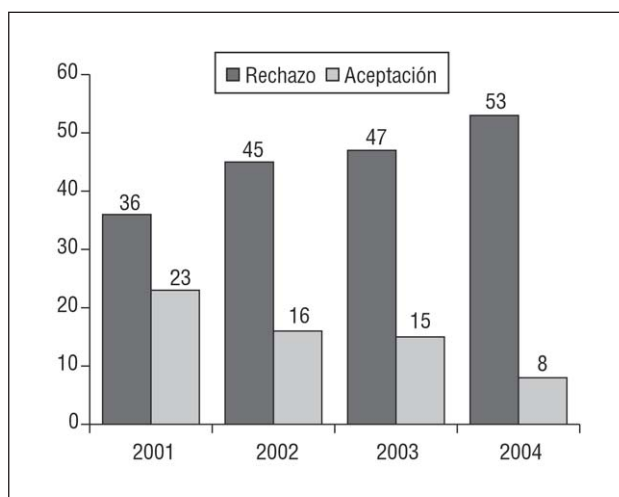


Figure 3. Changes in reviewers' recommendations for original articles. "Reject" indicates that after the first round of review, both reviewers recommended rejection or one recommended rejection and one requested major changes. "Accept" indicates that after the first round of review, both reviewers recommended acceptance or minor changes.

for the best articles published in the journal (Table 2). In addition to the prizes awarded by the journal for the best articles published with the greatest medium-term and long-term international impact, additional prizes have been created by different scientific sections of the SSC for articles dealing with specific areas of interest. In all, 18 different prizes worth a total of 50 778 euros are now being awarded in 9 different areas.

There has also been a notable increase in the number of supplements. During 2004 a total of 9 appeared (compared to 5 in 2002 and 6 in 2003). Two of them (abstracts presented at the SSC annual congress and the Joint Symposium of the American Heart Association, the SSC and the Interamerican Society of Cardiology) appeared as issues of REVISTA ESPAÑOLA DE CARDIOLOGÍA; the other 7 supplements were published as REVISTA ESPAÑOLA DE CARDIOLOGÍA SUPLEMENTOS. The number of articles published in these supplements has also increased exponentially from 7 in 2000 to 52 during 2004.

DISSEMINATION

It is important to draw attention to the increased dissemination of REVISTA ESPAÑOLA DE CARDIOLOGÍA, achieved mainly through its two electronic editions. Figure 4 shows the trends in the number of visitors to our Spanish and English websites. Of particular interest is the 130% increase (in comparison to 2003) in visitors to our on-line English-language edition during 2004. The number of complete articles downloaded in pdf format has also increased significantly. In 2004 a total of 8900 articles in English were downloaded—a 117% increase compared to the 4100 complete articles in English downloaded in 2003. It is clear then that at this time the greater dissemination and internationalization of our journal are fomented by our electronic editions, and particularly by our on-line English-language edition.

TABLE 1. List of Advisors Who Reviewed Manuscripts for REVISTA ESPAÑOLA DE CARDIOLOGÍA in 2004

Harry Acquatella	Román Freixa	Eduardo Otero Coto
M. Teresa Alberca Vela	Pastora Gallego García de Vinuesa	Manuel de Oya Otero
Luis Almenar Bonet	Juan C. Gallego Page	Jesús Palomo Álvarez
Carlos Almería Valera	Mario J. García	Agustín Pastor Fuentes
Jordi Alonso	Francisco García Gallego	Nicasio Pérez Castellano
Norberto Alonso Orcajo	José A. García Robles	Esther Pérez David
Francisco J. Alzueta Rodríguez	Luis García-Guereta Silva	Leopoldo Pérez de Isla
Elena Andradás Aragonés	Alberto Goday	Matías Pérez Paredes
Alejandro Aris Fernández	José M. Goicolea Ruigómez	Jesús C. Peteiro Vázquez
Felipe Atienza Fernández	Javier Gómez	Xavier Pintó
Camino Bañuelos de Lucas	M. Teresa González Alujas	Francisco Pomar Domingo
Joaquín Barba Cosials	Enrique González Hernández	Felipe Prosper
Roberto Barriaes Villa	Francisco J. González Vilchez	Luis Puente
Julián Bayón Fernández	Ángel Grande Ruiz	Manuel Rey Pérez
José Bermejo García	Jesús Gutiérrez Morlote	Josep Rodés Cabau
Vicente Bodí Peris	José M. Hernández García	Miguel A. Rodríguez García
María Bordons	J. Ignacio Iglesias Garriz	Inmaculada Roldán Rabadán
Raúl J. Burgos Lázaro	Luis J. Jiménez Borreguero	Rafael J. Ruiz Salmerón
Francisco E. Calvo Iglesias	Pablo Lázaro y de Mercado	Daniel San Román Sánchez
Luis Calvo Orbe	Rubén G. Leta Petracca	Marcelo Sanmartín Fernández
José L. Cantalapedra Alsedo	Joan Llevadot González	Luis Serés García
José A. Casasnovas Lenguas	Ramón F. López Palop	Javier Serrano
Eduardo Castells Cuch	Iñigo Lozano Martínez-Luengas	Santiago Serrano Fiz
Antonio Coca Payeras	Alicia Maceira González	José A. Serrano Sánchez
José J. Cuenca Castillo	Nicolás Manito Lorite	Jacobo Silva Guisasola
M. Jesús del Cerro Marín	Josep M. Manresa Domínguez	Lorenzo Silva Melchor
Juan F. Delgado Jiménez	Pedro Marcos-Alberca Moreno	Marta Sitges Carreño
Exuperio Díez-Tejedor	Jorge Martinell	Ignacio Terol Esteban
Juan M. Durán Hernández	Manuel Martínez Sellés	Jorge Toquero Ramos
M. Pilar Escribano Subias	Luis Masana	José M. de la Torre Hernández
Elena Esteban Paul	Rafael Melgares Moreno	José Tuñón Fernández
Jordi Estornell Erill	Javier Moreno Planas	Celia M. Vaticón Herreros
Manuel L. Fernández Guerrero	José L. Moya Mur	Nicolás Vázquez González
Ignacio Fernández Lozano	Roberto Muñoz Aguilera	Juan I. Zabala Argüelles
Juan Fernández Yáñez	Enrique Novo García	J. Antonio Zabala Goiburú
Consuelo Fernández-Miranda	Mercedes Ortiz	Javier Zueco Gil

BIBLIOMETRIC ASPECTS

The year 2004 saw a further improvement in our impact factor (Figure 5). Our current impact factor of 0.959 means that on average, during 2003 almost every article published in the journal in 2001 and 2002 was cited once. This increase confirms that REVISTA ESPAÑOLA DE CARDIOLOGÍA is becoming consolidated as the leading publication on cardiovascular disease in Spanish. Indeed, it now has the second-highest impact factor of all medical journals published in Spanish. Moreover, its immediacy index (citations received during the same year) for 2004 was 0.47.

The impact factor is a simple index obtained by dividing the number of citations to published articles by the number of articles published, so it cannot be expected to evaluate all features that go into a journal's quality, credibility and scientific impact.⁵ In fact, this parameter has been found to have as many as 19 limitations in its ability to reflect important aspects of a publication's quality and scientific impact.⁶ Curiously,

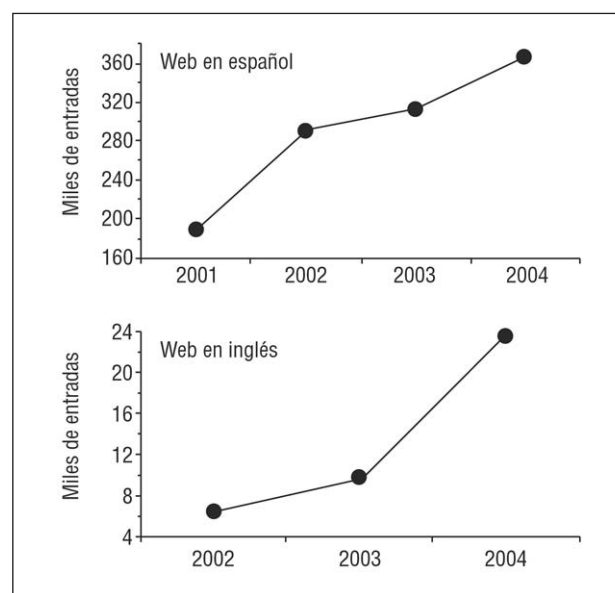


Figure 4. Numbers of visitors to Spanish and English websites in recent years. (The English website first appeared in 2002.)

TABLE 2. List of Prizes Awarded in 2004 for Articles Published in REVISTA ESPAÑOLA DE CARDIOLOGÍA
<p>1. SEC Prize for articles published in REVISTA ESPAÑOLA DE CARDIOLOGÍA</p> <p><i>First Prize</i> Marrugat J, Solanas P, d'Agostino R, Sullivan L, Ordovas J, Cerdón F, et al. Estimación del riesgo coronario en España mediante la ecuación de Framingham calibrada. Rev Esp Cardiol 2003;56:253-61.</p> <p><i>Second prizes</i> García Castelo A, Muñiz García J, Sesma Sánchez P, Castro Beiras A. Utilización de recursos diagnósticos y terapéuticos en pacientes ingresados por insuficiencia cardíaca: influencia del servicio de ingreso (estudio INCARGAL). Rev Esp Cardiol 2003;56:49-56. Arós F, Cuñat J, Loma-Osorio A, Torrado E, Bosch X, Rodríguez JJ, et al. Tratamiento del infarto agudo de miocardio en España en el año 2000. El estudio PRIAMHO II. Rev Esp Cardiol 2003;56:1165-73.</p>
<p>2. SEC Prizes for articles published in REVISTA ESPAÑOLA DE CARDIOLOGÍA with the greatest international impact</p> <p>Articles most cited in the long term</p> <p><i>First Prize</i> Permanyer Miralda G, Brotons C, Moral I, Ribera A, Calvo F, Campreciós M, et al. Pacientes con síndrome coronario agudo: abordaje terapéutico (patrones de manejo) y pronóstico al año en un hospital general terciario. Rev Esp Cardiol 1998;51:954-64.</p> <p><i>Second Prize</i> Brotons C, Moral I, Ribera A, Pérez G, Cascant P, Bustins M, et al. Tendencias de la morbimortalidad por insuficiencia cardíaca en Cataluña. Rev Esp Cardiol 1998;51:972-6.</p> <p><i>Second Prize</i> Chorro FJ, Egea S, Mainar L, Cánoves J, Sanchis J, Llavador E, et al. Modificaciones agudas de la longitud de onda del proceso de activación auricular inducidas por la dilatación. Estudio experimental. Rev Esp Cardiol 1998;51:874-83.</p> <p>Articles most cited in the medium term</p> <p><i>First Prize</i> Fiol M, Cabadés A, Sala J, Marrugat J, Elosua R, Vega G, et al. Variabilidad en el manejo hospitalario del infarto agudo de miocardio en España. Estudio IBERICA (Investigación, Búsqueda Específica y Registro de Isquemia Coronaria Aguda). Rev Esp Cardiol 2001;54:443-52.</p> <p><i>Second Prize</i> González Juanatey JR, Alegría Ezquerro E, Lozano Vidal JV, Llisterri Caro JL, Isidoro González Maqueda JM. Impacto de la hipertensión en las cardiopatías en España. Estudio Cardiotens 1999. Rev Esp Cardiol 2001;54:139-49.</p> <p><i>Second Prize</i> Arós F, Loma-Osorio A, Bosch X, González Aracil J, López Bescós L, Marrugat J, et al. Manejo del infarto de miocardio en España (1995-99). Datos del registro de infartos de la Sección de Cardiopatía Isquémica y Unidades Coronarias (RISCI) de la Sociedad Española de Cardiología. Rev Esp Cardiol 2001;54:1033-40.</p>
<p>3. Pediatric and Congenital Cardiology Section Prize</p> <p><i>Prize-winning articles:</i> Bialkowski J, Kusa J, Szkutnik M, Kalarus Z, Banaszak P, Bermúdez-Cañete R, et al. Cierre percutáneo de la comunicación interauricular. Resultados a corto y medio plazo. Rev Esp Cardiol 2003;56:383-8. Vázquez-Antona CA, Muñoz-Castellanos L, Kuri-Nivón M, Vargas-Barrón J. Obstrucciones a la vía de salida del ventrículo izquierdo en la transposición de grandes arterias. Correlación anatomocardiográfica. Rev Esp Cardiol 2003;56:695-702.</p>
<p>4. Izasa Awards for articles on interventional cardiology</p> <p><i>First Prize</i> Rodríguez M, Suárez de Lezo J, Pan M, Romero M, Segura J, Pavlovic D, et al. Cierre percutáneo de comunicaciones interauriculares grandes. Rev Esp Cardiol 2003;56:888-93.</p> <p><i>Second Prize</i> López-Palop R, Pinar E, Lozano I, Carrillo P, Cortés R, Saura D, et al. Comparación de parámetros de expansión de stents implantados con técnica convencional o directa. Estudio aleatorizado con ultrasonidos intracoronarios. Rev Esp Cardiol 2004;57:403-11.</p>
<p>5. Amersham Health Award for the best publication on nuclear cardiology</p> <p>Coma-Canella I, García-Velloso MJ, Macías A, Villar L, Cosín-Sales J, Martí-Climent JM, et al. Disminución de la reserva de flujo coronario en pacientes con insuficiencia cardíaca no isquémica. Rev Esp Cardiol 2003;56:354-60.</p>
<p>6. Nonhospital Cardiology Section Prize</p> <p>Freixa R, Blanch P, Ibernón M, Padró J, Delso J, Sobrepera JL, et al. Identificación de factores responsables de anticoagulación oral excesiva en pacientes ambulatorios con cardiopatía. Rev Esp Cardiol 2003;56:65-72. Ruiz Ortiz M, Romo Peñas E, Franco Zapata M, Mesa Rubio D, Anguita Sánchez M, López Granados A, et al. Un protocolo prospectivo permite incrementar la utilización de anticoagulación oral en pacientes con fibrilación auricular crónica no valvular. Rev Esp Cardiol 2003;56:971-7.</p>
<p>7. Hypertension Section Prize</p> <p>López-Mínguez JR, Fuentes ME, Doblado M, Merchán A, Martínez A, González R, et al. Papel pronóstico de la hipertensión arterial y de la diabetes mellitus en los pacientes con angina inestable tratados con stents coronarios. Rev Esp Cardiol 2003;56:987-94.</p>
<p>8. Cardiac Stimulation Section Prize</p> <p>García-Bolao I, Macías A, Alegría E, Berenguel A, Gavira JJ, Azcárate P, et al. Tratamiento de la insuficiencia cardíaca avanzada mediante estimulación biventricular. Experiencia inicial en una serie de 22 casos consecutivos. Rev Esp Cardiol 2003;56:245-52.</p>

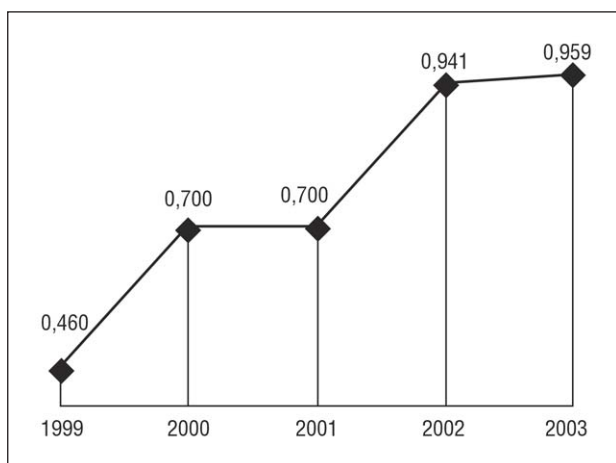


Figure 5. The impact factor for REVISTA ESPAÑOLA DE CARDIOLOGÍA.

although this indicator is widely accepted, we have been surprised at how little authors and even some members of the Editorial Committee know about how it is calculated. This makes it important to recall here that the impact factor for 2004 will be calculated as the total number of citations during that year to articles published in REVISTA ESPAÑOLA DE CARDIOLOGÍA during the years 2002 and 2003, divided by the total number of articles published in the journal during 2002 and 2003. Thus the importance of citing very recent articles (published in the last 2 years) in new research articles with a view to increasing this popular bibliometric indicator.

NEW EDITORIAL POLICIES

This year we have made changes to adapt our policies to the most recent recommendations of the International Committee of Medical Journal Editors (ICMJE, better known as the Vancouver Group). In the current recommendations technical aspects have been resolved for the most part, and the latest update centers mainly on newer issues of editorial ethics.^{7,8} During the summer of 2004 the ICMJE examined an interesting issue raised by the suggestion that all clinical trials should be registered from the start in a specific registry that fulfills standard requirements for quality, accessibility and independence.^{9,10} The ultimate aim is for the availability of scientific information not to be conditioned by the biases that work in favor of publication of studies that yield positive

results. Approval in Spain of new laws regarding clinical trials, necessary in part to adapt our national legislation to the current European Directive, is a step in the same direction. At REVISTA ESPAÑOLA DE CARDIOLOGÍA we have been following the debate closely in order to modify editorial policies as necessary to take these new issues into account in an appropriate manner.

One more new feature introduced recently in REVISTA ESPAÑOLA DE CARDIOLOGÍA IS THE SECTION CALLED CLINICAL PRACTICE GUIDELINES of the European Society.¹¹ Since October 2004 we have published 4 such guidelines. In a world that is also globalized in scientific terms, we feel that publication of these guidelines in our journal will help to enhance their dissemination to all health professionals devoted to the study of cardiovascular diseases.

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