

## REVISTA ESPAÑOLA DE CARDIOLOGÍA 2005: Activity and Scientific Recognition

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Each year the Editor's Page in the December issue of REVISTA ESPAÑOLA DE CARDIOLOGÍA summarizes the highlights regarding the activities, dissemination and scientific repercussion of our journal.<sup>1,2</sup> This gives our readers an idea of the work undertaken during the year, explains new aspects of our editorial policies, and reports on the journal's position in terms of its scientific impact.<sup>1-5</sup> As a hint to what is in store for readers below, we would like to anticipate that from this standpoint that the journal deserves to be congratulated on its achievements.

Some of the topics discussed here were reported to the Board of Directors of the Spanish Society of Cardiology (SEC) and during the General Assembly at the Congress on Cardiovascular Diseases held recently in Barcelona. This information was also communicated in detail at the annual Editorial Board meeting, which generated some interesting discussions on the goals we should aim for in the future.

### SCIENTIFIC IMPACT

This year REVISTA ESPAÑOLA DE CARDIOLOGÍA has reached a milestone in terms of bibliometric performance<sup>6,7</sup>: our impact factor has doubled with respect to last year—an unprecedented improvement<sup>6</sup> (Figure 1). The increase in this popular indicator consolidates our publication's preeminent position among medical journals published in Spanish. Moreover, we are now ranked 28th in the select club of 71 cardiovascular journals indexed by the Institute for Scientific Information.<sup>6</sup> The total number of citations received by the journal has also shown a clear increase (Figure 2). An improvement that is all the more notable since it has come about during a period when notably, this was achieved with a stable self-citation rate. Our immediacy index has shown a spectacular improvement, a result that confirms the currency of the journal's coverage of the discipline and places us in a privileged position<sup>6</sup> (Figure 3).

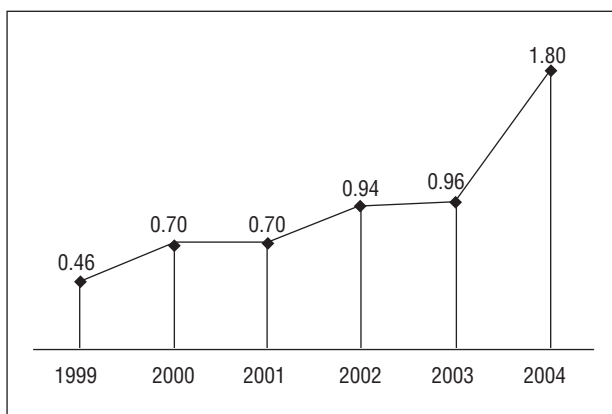


Figure 1. Time trend in the impact factor of REVISTA ESPAÑOLA DE CARDIOLOGÍA.

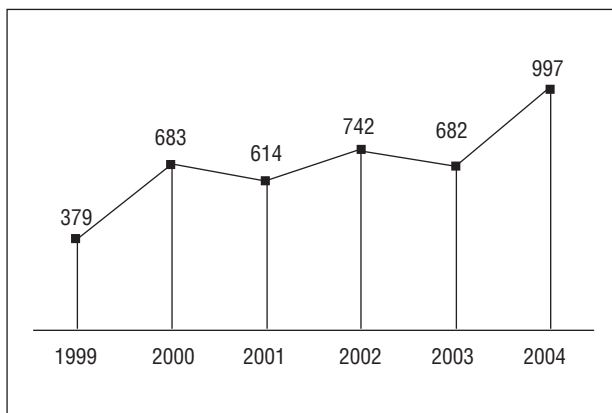


Figure 2. Time trend in the number of citations received.

A recent Editor's Page essay analyzed in detail the importance and implications of these improvements in our bibliometric indicators.<sup>7</sup> On this occasion, then, we simply wish to congratulate and express our appreciation to our authors and reviewers for their efforts, without which it would not have been possible to attain the status we currently enjoy. This position is the fruit of concerted efforts, ambitious and carefully designed editorial strategies,<sup>1-3</sup> and of the unconditional support of the SEC

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in its entirety. For us as editors it is deeply satisfying to offer researchers working in cardiovascular diseases such an attractive bibliometric profile. We would also like to remind readers of the importance of actively citing recent articles in REVISTA ESPAÑOLA DE CARDIOLOGÍA in subsequent research articles published in our journal or—a key consideration—in other international journals. The level of quality we have attained means that we can cite articles published in the journal with pride whenever it is scientifically appropriate to do so. This will stimulate the dissemination of our contents, maintain and perhaps further improve our bibliometric indicators, and complete the “circle of prestige” by attracting articles of higher quality to our pages.<sup>7</sup>

### ARTICLES RECEIVED, REVIEW PROCESS, AND TIME TO PUBLICATION

In 2005 we received a total of 454 articles for review. This number is similar to the number of submittals received last year and confirms that our publication is an attractive medium for researchers. The number of manuscripts from countries other than Spain has increased to a total of 85 (Figure 4), including a substantial number of submittals from Cuba (18%), Argentina (9%), and Mexico (9%). Another noteworthy development is the rise in the number of manuscripts being submitted in English (Figure 5). The exponential increase in this number means that we now need to adapt to this new situation, in which our journal has become a consolidated international scientific publication. We therefore need to acquire the capability to review increasing numbers of manuscripts in English, and we also need to guarantee prompt translation into Spanish for those submittals that are accepted.

We are satisfied with the turnaround times our reviewers have been achieving (a median of 20 days to receipt of the first round of reviews), although we will continue to insist on the importance of reducing this time further. Two independent reviewers and a member of our team of methodological and statistical experts evaluate the manuscripts. Thus, we should express our appreciation to all members of the editorial board for their invaluable aid, and our special thanks to all external reviewers who have advised us on the suitability of the manuscripts we have received (Table 1). Their reviews facilitate the difficult process of selecting which papers will be published, and also help enhance the scientific quality of the manuscripts that are eventually accepted. We editors, however, must ensure that the increasingly detailed and critical reviews we receive do not lead to lengthy exchanges with the authors that might needlessly prolong the time taken to reach our final decision.

During 2005 mean time from manuscript reception

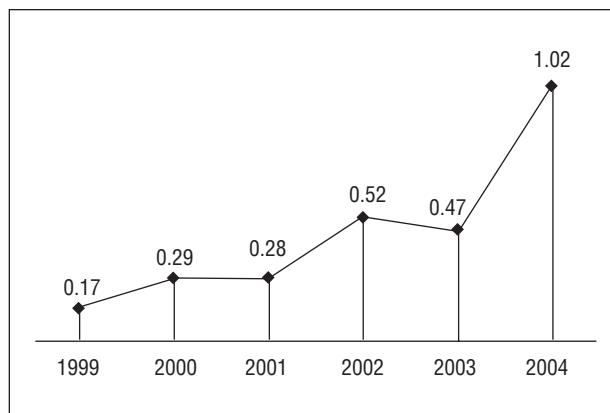


Figure 3. Time trend in the immediacy index of REVISTA ESPAÑOLA DE CARDIOLOGÍA.

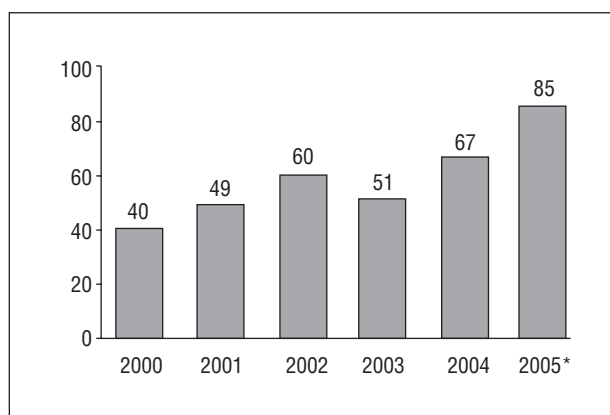


Figure 4. Time trend in the number of manuscript submittals from other countries.

\*Data for the last 3 months of 2005 are estimates.

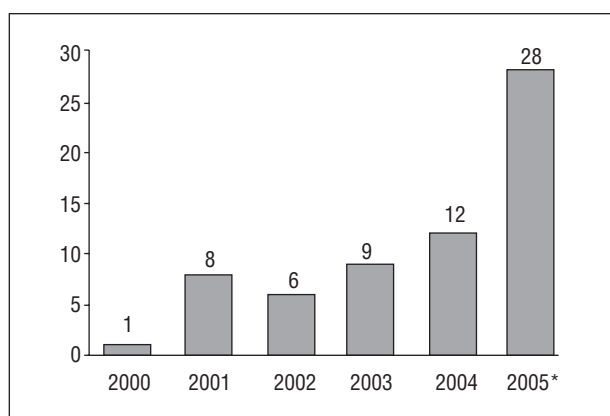


Figure 5. Time trend in the number of manuscripts submitted in English.

\*Data for the last 3 months of 2005 are estimates.

to publication was 10.3 months for original articles. By way of comparison, our estimates based on data for the first semester of 2005 show that this period is still

TABLE 1. List of Advisors Who Reviewed Manuscripts for REVISTA ESPAÑOLA DE CARDIOLOGÍA During 2005

Arístides de Alarcón	Jordi Estornell	Antonio Ordóñez
María T. Alberca	Manuel L. Fernández-Guerrero	Eduardo Otero
Luis Almenar	Ignacio Fernández-Lozano	Manuel de Oya
Carlos Almería	Juan Fernández-Yáñez	Gemma Pastor
Ángel María Alonso	Pastora Gallego	Agustín Pastor
Norberto Alonso	Juan C. Gallego	Nicasio Pérez-Castellano
Elena Andradás	Francisco García-Gallego	Leopoldo Pérez de Isla
Alejandro Aris	J. Alberto García-Lledó	Armando Pérez de Prado
Felipe Atienza	José M. García-Páez	Matías Pérez-Paredes
Pablo Avanzas	José A. García-Robles	Jesús C. Peteiro
Manuel Azqueta	Luis García-Guereta	Xavier Pintó
Joaquín Barba	José M. Girona	Luis Puente
Roberto Barriales	Javier Gómez	Juan Quiles
Antonio Bayés	Manuel Gómez	Manuel Rey
Julián Bayón	María T. González-Alujas	Josep Rodés
José Bermejo	Francisco J. González-Vílchez	Miguel A. Rodríguez-García
Vicente Bodí	Ángel Grande	José Manuel Rubio
José Oriol Bonnin	Jesús Gutiérrez-Morlote	Manuel Sabaté
Araceli Boraita	José M. Hernández-García	Daniel San Román
María Bordons	J. Ignacio Iglesias	Marcelo Sanmartín
Carlos Brotons	Luis J. Jiménez Borreguero	Susana Sans
Raúl J. Burgos	Miguel Josa	Javier Serrano
José A. Cabrera	Santiago Lamas	Manuel Serrano
Francisco E. Calvo	Pablo Lázaro	Juan Ramón Siles
Luis Calvo	Rubén Gabriel Leta	Jacobo Silva
José L. Cantalapedra	Joan Llevadot	Lorenzo Silva
Carlos Caramelo	María López-Gil	Marta Sitges
José A. Casasnovas	Ramón F. López-Palop	Luis Tercedor
Eduardo Castells	Íñigo Lozano	Jorge Toquero
María J. del Cerro	Nicolás Manito	José M. de la Torre
Antonio Coca	Josep M. Manresa	José Tuñón
Gregorio Cordovilla	Pedro Marcos-Alberca	Celia M. Vaticón
José J. Cuenca	Manuel Martínez-Sellés	Nicolás Vázquez
Diego F. Dávila	Luis Masana	Carlos Vilches
Juan F. Delgado	Gonzalo de la Morena	Raquel Yotti
Juan M. Durán	Javier Moreno	Juan I. Zabala
Roberto Elosua	José L. Moya	J. Antonio Zabala
María P. Escribano	Concepción Muñoz	
Elena Esteban	Gloria Oliva	

slightly longer than the time to publication in other cardiovascular journals such as the *European Heart Journal* (9.2 months), *Circulation* (8.8 months), and the *Journal of the American College of Cardiology* (7.4 months). Nonetheless, it should be recalled that these journals use electronic manuscript management systems that have yet to be implemented by our journal.

## PRIZES AND SUPPLEMENTS

The year 2005 saw an increase in the number of prizes awarded for the best articles in REVISTA ESPAÑOLA DE CARDIOLOGÍA (Table 2). In addition to the prizes awarded by the journal to articles with the greatest international impact, a number of scientific working groups within the SEC award prizes in

pertinent areas. This year 19 prizes worth a total of 59 793 euros were awarded in 9 different categories.

During 2005 we published 9 supplements, which is twice the number published as recently as 4 years ago (4 supplements in 2001). The number of articles appearing in supplements has increased substantially to 59 this year, up from 23 articles in 2001.

## DISSEMINATION

Currently our 2 electronic editions (in Spanish and English) constitute the journal's most effective tool for dissemination. Especially noteworthy is the number of visits to the online English edition on our website ([www.revespcardiol.org](http://www.revespcardiol.org)) (Figure 6). Likewise, the number of full article downloads in PDF format has increased significantly. In 2005 a total of 13 177

TABLE 2. Articles in REVISTA ESPAÑOLA DE CARDIOLOGÍA That Were Awarded Prizes in 2005

**1. Prizes awarded by the Spanish Society of Cardiology (SEC) for best articles published in REVISTA ESPAÑOLA DE CARDIOLOGÍA**

## First Prize

González M, Ruiz Ros JA, Pérez-Paredes M, Lozano ML, Giménez DM, Martínez-Corbalán F, et al. Efecto de la administración precoz de pravastatina en los valores de proteína C reactiva y de interleucina-6 en la fase aguda del infarto de miocardio con elevación del segmento ST. *Rev Esp Cardiol.* 2004;57:916-23.

## Second Prizes

Álvarez-León EE, Elosúa R, Zamora A, Aldasoro E, Galcerá J, Vanaclocha H, et al. Recursos hospitalarios y letalidad por infarto de miocardio. Estudio IBERICA. *Rev Esp Cardiol.* 2004;57:514-23.

Muñiz García J, Gómez Doblas JJ, Santiago Pérez MI, Teresa Galván E, Cruz Fernández JM, Castro Beiras A. Efecto de un programa sencillo de educación de los profesionales en el cumplimiento de medidas de prevención secundaria en el momento del alta hospitalaria tras un síndrome coronario agudo. Proyecto CAM. *Rev Esp Cardiol.* 2004;57:1017-28.

**2. SEC prizes for articles published in REVISTA ESPAÑOLA DE CARDIOLOGÍA with the greatest international impact**

## Articles most cited in the long term

## First Prize

Cabadés A, López-Bescós L, Arós F, Loma-Osorio A, Bosch X, Pabón P, et al. Variabilidad en el manejo y pronóstico a corto y medio plazo del infarto de miocardio en España: el estudio PRIAMHO. *Rev Esp Cardiol.* 1999;52:767-75.

## Second Prizes

Cabadés A, Echanove I, Cebrián J, Cardona J, Valls F, Parra V, et al. Características, manejo y pronóstico del paciente con infarto agudo de miocardio en la Comunidad Valenciana en 1995: resultados del Registro PRIMVAC (Proyecto de Registro de Infarto Agudo de Miocardio de Valencia, Alicante y Castellón). *Rev Esp Cardiol.* 1999;52:123-33.

López-Bescós L, Cosín J, Elosúa R, Cabadés A, De los Reyes M, Arós F, et al. Prevalencia de angina y factores de riesgo cardiovascular en las diferentes comunidades autónomas de España: Estudio PANES. *Rev Esp Cardiol.* 1999;52:1045-56.

## Articles most cited in the medium term

## First Prize

Marrugat J, Elosúa R, Martí H. Epidemiología de la cardiopatía isquémica en España: estimación del número de casos y de las tendencias entre 1997 y 2005. *Rev Esp Cardiol.* 2002;55:337-46.

## Second Prizes

Osca J, Quesada A, Arnau MA, Osa A, Hervás I, Almenar L, et al. Péptido cerebral natriurético. Valor diagnóstico en la insuficiencia cardíaca. *Rev Esp Cardiol.* 2002;55:7-15.

De Velasco JA, Cosín J, López-Sendón JL, De Teresa E, De Oya M, Sellers G. Nuevos datos sobre la prevención secundaria del infarto de miocardio en España. Resultados del Estudio PREVESE II. *Rev Esp Cardiol.* 2002;55:801-9.

**3. Pediatric and Congenital Cardiopathy Section Prize**

Aranda Granados PJ, Concha Ruiz M, Casares Mediavilla J, Merino Cejas C, Muñoz Carvajal I, Alados Arboledas P, et al. Incidencia e impacto clínico de la estenosis del homoinjerto pulmonar tras el procedimiento de Ross. *Rev Esp Cardiol.* 2004;57:29-36.

**4. Izasa Awards for articles on interventional cardiology**

## First Prize

Suárez de Lezo J, Torres A, Herrera I, Pan M, Romero M, Pavlovic D, et al. Efectos de la movilización de células madre mediante el uso de factor estimulante de colonias granulocíticas en pacientes con infarto agudo de miocardio anterior revascularizado percutáneamente. *Rev Esp Cardiol.* 2005;58:253-61.

## Second Prize

Martín M, Morís C, Lozano I, Llana JM, Vega F, Fernández F, et al. Tratamiento percutáneo de las afecciones de la aorta torácica. Una labor multidisciplinaria. *Rev Esp Cardiol.* 2005;58:27-33.

**5. Amersham Health Award for the best article on nuclear cardiology**

Perezto-Valdés O, Candell-Riera J, Oller-Martínez G, Aguadé-Bruix S, Castell-Conesa J, Ángel J, et al. Localización y cuantificación del área en riesgo mediante tomografía computarizada por emisión de fotones simples de perfusión miocárdica durante la oclusión arterial coronaria. *Rev Esp Cardiol.* 2004;57:635-43.

**6. Nonhospital Cardiology Section Prize**

Salvador MJ, Sebaoun A, Sonntag F, Blanch P, Silber S, Aznar J, et al. Estudio europeo del tratamiento ambulatorio de la insuficiencia cardíaca realizado por cardiólogos europeos. *Rev Esp Cardiol.* 2004;57:1170-8.

Gimeno Orna JA, Lou Arnal LM, Molinero Herguedas E, Boned Julian B, Portilla Cordoba DP. Influencia del síndrome metabólico en el riesgo cardiovascular de pacientes con diabetes tipo 2. *Rev Esp Cardiol.* 2004;57:507-13.

**7. Hypertension Section Prize**

## First Prize

Rivera M, Talens-Visconti R, Salvador A, Bertomeu V, Miro V, García de Burgos F, et al. Hipertensión y valores de NT-proBNP. Su importancia en el diagnóstico de insuficiencia cardíaca. *Rev Esp Cardiol.* 2004;57:396-402.

## Second Prize

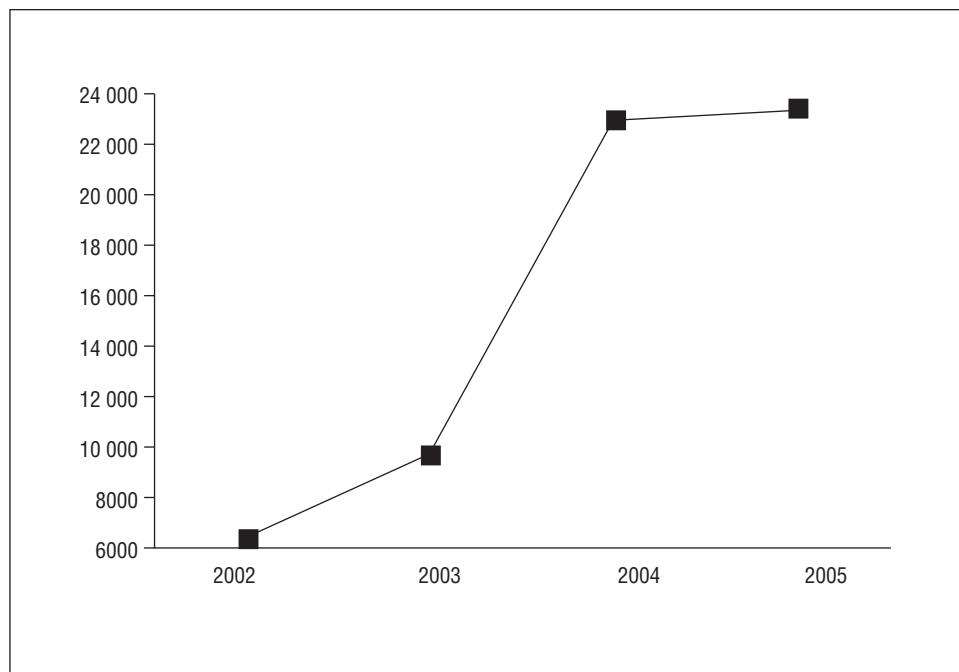
García Ortiz L, Santos Rodríguez I, Sánchez Fernández PL, Mora Santiago MC, Arganda Maya J, Rodríguez Corral MT. Efectividad de una intervención de mejora de calidad en la reducción del riesgo cardiovascular en pacientes hipertensos. *Rev Esp Cardiol.* 2004;57:644-51.

**8. Cardiac Stimulation Section Prize**

López Ayerbe J, Villuendas Sabate R, García García C, Rodríguez Leor O, Gómez Pérez M, Curós Abadal A, et al. Marcapasos temporales: utilización actual y complicaciones. *Rev Esp Cardiol.* 2004;57:1045-52.

**9. ABBOTT Award for the best article on acute heart failure**

Macín SM, Perna ER, Címbaro Canella JP, Alvarenga P, Pantich R, Ríos N, et al. Características clinicoevolutivas en la insuficiencia cardíaca descompensada con disfunción sistólica y función sistólica preservada. *Rev Esp Cardiol.* 2004;57:45-52.



**Figure 6.** Time trend in visits to our website in English.

articles in English were downloaded, compared to 8900 in 2004 and 4100 in 2003.

This year we have tried to shorten the time to publication of the full English text online. Translation and editing are necessarily rigorous, labor-intensive processes; nonetheless, our goal has been to make the English online version of articles available not longer than 2 months after publication of the original Spanish-language edition.

## EDITORIAL POLICIES

In the last 2 years we have adapted our policies to new international requirements for editorial quality.<sup>4,5</sup> In this connection we remind authors that manuscripts submitted to REVISTA ESPAÑOLA DE CARDIOLOGÍA must now be accompanied by a signed declaration of potential conflict of interest. Moreover, we are cognizant of the problems created by redundant publication, particularly now that all of our articles are translated into English and can be accessed freely via a number of major international databases. Thus, if authors are in any doubt regarding the possibility of duplicate publication (even if duplication is only partial), the solution is clear: any duplication should be communicated frankly to the editorial board.<sup>8</sup>

The rapid translation and publication in our journal of the European Society of Cardiology (ESC) Clinical Practice Guidelines<sup>9</sup> has been a considerable editorial challenge which we feel we have met satisfactorily. To date we have published a total of 10 such documents. When it has been possible to arrange early translation

with the ESC, mean time to publication has been 2.5 months after initial publication in the *European Heart Journal*. As a result of our pioneering initiative in this field, translation will soon be initiated at other national journals of the ESC.

This year REVISTA ESPAÑOLA DE CARDIOLOGÍA participated for the first time in the official meeting of the HEART (Heart Editors Action Round Table) group, and in a meeting of cardiology journals organized by the ESC. We trust that involvement in these emerging forums for editors will help us to further enhance our publication's international dissemination and prestige.

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