Submission pattern, initial screening of manuscripts and publication audit for the Year 2011

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Pattern and number of submissions of manuscripts for publication is considered as one of the important vardstick to judge the health of any biomedical journal. Looking from this perspective it is heartening to note that there has been a significant increase in the number of manuscripts being submitted to Pakistan Journal of Medical Sciences for publication by research scientists from many countries of the world for the last couple of years. The total number of papers received during 2011 were 931 from 26 countries as against 740 from 27 countries during 2010. In particular there has been significant increase in submissions from China, Islamic Republic of Iran and Turkey as the authors are keen to publish their research work in journals which carry an Impact Factor. Submissions from Pakistan have also increased during 2011 significantly two hundred five as against just one hundred thirty six during 2010. (Table-I)

Out of total submission of 931 during 2011, nine manuscripts were withdrawn by the authors as they were keen to get it published immediately and we could not oblige them while twenty manuscripts were rejected after screening for plagiarism. Total number of articles published during 2011 was 307 of which one hundred eighty four were being processed from the Year 2010 while one hundred twenty three were new submissions during 2011. (Table-II)

After initial screening a total of six hundred seventeen (66%) manuscripts were not accepted for further processing, internal and external review, due to the following reasons:

- * The authors failed to read and follow instructions for authors.
- * As a policy we do not accept KAP studies, simple survey reports etc.
- * The manuscripts were too lengthy. Due to pressure on limited space available, we accept

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Table-I: Manuscript received by Pak J Med Sci (2006 – 2011)

		(2000 -	2011)			
Country	2006	2007	2008	2009	2010	2011
Australia	-	-	-	01	01	-
Austria	-	-	-	-	01	-
Bangladesh	07	07	06	07	10	10
Bahrain	-	-	01	-	-	-
Brunei	-	01	-	-	-	-
Cameroon	-	-	-	2	-	-
Canada	-	-	-	-	-	01
China	01	-	01	-	29	64
Egypt	02	-	-	01	02	01
France	-	-	-	-	-	02
Germany	-	-	-	-	01	-
India	04	21	06	10	17	20
Ireland	-		02	-	_	-
Iran	90	149	169	170	262	292
Iraq	03	02	04	09	06	05
Jordan	14	10	04	09	04	06
Kuwait	02	02	-	01	_	02
Malaysia	03	01	03	04	09	08
Moroccoo	-	-	-	-	_	01
Nepal	01	-	-	-	02	01
Netherland	01	-	-	-	_	-
New Zealand	l -	-	_	_	_	01
Nigeria	16	32	34	33	31	16
Oman	03	01	_	01	01	01
Pakistan	90	98	123	146	136	205
Palestine	05	05	04	05	03	04
Poland	03	01	01	01	_	_
Romania	_	-	_	01	_	_
Russia	02	-	_	_	_	_
Saudi Arabia	11	11	21	20	14	32
South Africa	-	01	03	-	06	-
South Korea	-	-	02	03	02	04
Sudan	-	-	_	02	03	02
Syria	-	-	-	-	01	-
Thailand	-	-	01	01	_	-
Taiwan	-	-	-	-	03	09
Tunisia	-	-	01	03	_	_
Turkey	02	05	34	80	187	235
UAE	-	-	04	03	02	04
USA	-	02	_	01	01	01
UK	08	06	05	01	05	04
Westindies	-	-	-	-	01	-
Total (42)	268	354	427	498	740	931

Table-II General statistics for the Year 2011

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Total new submissions	931
Total number of manuscripts rejected	617
Number of manuscripts published	307
- From 2010 184	
- From 2011 123	
Manuscripts published from Pakistan	93
Manuscripts withdrawn by authors 9	
Manuscripts rejected due to plagiarism	20

only between 2500-3000 words for original article, 1500 words for case report and special, brief communications and up to 3500 words for Reviews. There are restrictions on the number of references as well for manuscripts in each category though in some cases, there can be some relaxation in the number of words.

- * The subject of the manuscript was not of much interest to our readers and it was found to be more suitable for some specialty journal or local publication in that particular country from where it has been submitted. As a policy we concentrate on Asia Pacific Region and accept only those manuscripts which are relevant to our readers.
- * Except, rare cases, animal studies are not accepted.
- * The manuscripts had too many deficiencies, it was incomplete submission, did not carry Letter of Undertaking signed by all authors and Ethics Committee approval which are must before we start processing the manuscripts further.
- * There were too many figures, illustrations tables and the authors had failed to convey the message effectively.
- * The manuscripts which have greater chances of citation are preferred i.e. original research, new techniques, innovations etc.
- * There were too many authors and even on enquiry the authors failed to satisfy about the contribution of each author, hence such manuscripts are also not entertained.
- * RCTs did not conform to CONSORT statement.
- * Most importantly, we have our own financial as well as human resource limitations. We accept only that number of manuscripts for further processing, internal and external review which we can manage in time. We do not want to keep the authors waiting for too long as they may get it published in some other journal early.
- * All new submissions are scanned for plagiarism through special software and manuscripts with more than 15% similarity score are returned

to the authors with detailed report. Some of them might consider rewriting, revising and resubmitting the manuscript later.

As regards the number of manuscripts accepted for publication after peer review, there has been significant increase in number from China, Turkey, Islamic Republic of Iran as well as Pakistan. (Table-III). Further analysis of manuscripts received and accepted from Pakistan during the Year 2011 shows that most of the submissions and publications were from cities like Karachi, Lahore, Rawalpindi-Islamabad, Hyderabad and Peshawar which is not at all surprising as it also reflects the academic interest of the healthcare professionals from medical institutons from these cities. (Table-IV and V)

Table-III: Manuscripts Published by Pak J Med Sci (2006 – 2011)

	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(2000 -	2011)			
Country	2006	2007	2008	2009	2010	2011
Australia	-	-	-	01	-	-
Bangladesh	01	05	05	04	04	04
Bahrain	-	-	-	01	01	-
Brunei	-	01	-	-	-	-
Canada	01	-	-	-	-	-
Cameroon	-	-	-	-	01	
China	-	-	-	-	01	18
Holland	01	-	-	-	-	
India	06	10	05	-	02	01
Iran	38	89	83	72	64	78
Iraq	02	02	01	02	01	03
Jordan	06	07	04	01	04	-
Kuwait	-	02	01	-	01	-
Malaysia	-	01	01	04	01	09
UAE	-	-	02	03	02	-
Nigeria	03	13	21	13	10	09
Nepal	-	01	01	-	-	-
Oman	-	03	-	01	01	-
Palestine	03	02	04	01	02	-
Pakistan	48	81	61	70	56	93
Poland	-	01	-	-	-	-
Russia	-	01	-	-	-	-
Saudi Arabia	06	08	05	09	11	06
South Africa	-	-	-	02	03	02
South Korea	-	-	-	02	01	02
Sudan	-	-	-	-	01	-
Thiland	-	-	-	02	-	-
Taiwan	-	-	-	-	-	02
Turkey	01	03	02	24	34	74
UK	04	04	05	02	02	05
Sri Lanka	-	-	01	-	-	-
UAE	-	-	-	-	-	01
USA	-	02	01	-	-	-
Total	120	236	203	214	203	307

Table-IV: Manuscript received from Pakistan (2011)

Abbottabad	2
Azad Kashmir	1
Bahawalpur	6
Dera Ismail Khan	2
Faisalabad	4
Hyderabad	35
Islamabad/Rawalpindi	21
Karachi	78
Khairpur	1
Kohat	1
Lahore	23
Multan	10
Nawabshah	5
Peshawar	14
Quetta	1
Sialkot	1
Total	205

Impact Factor: As per Thomson Reuters Journal Citation Reports for the Year 2010, Pakistan Journal of Medical Sciences is one of the ten science (medical included) journals from Pakistan which has got an Impact Factor at present although a few more Pakistani medical journals are likely to be included in the list in the coming years. We had an Impact Factor of 0.203 for the first time in 2009 when we had total citations of 198 from 176 articles.2 However, our IF reduced to 0.166 in the Year 2010 despite the fact that we had two hundred seventy five (275) citations from 208 articles in 2010 as against 198 during the previous year but since we had published more manuscripts, it has its effect.3 Keeping all these things in mind, we as a policy do not encourage acceptance of case reports unless they are very rare. We also do not entertain those case reports which are combined with review of literature.

Although there is lot of controversy regarding Impact Factor^{4,5} but it is still regarded as one of the important criteria to judge and evaluate the quality of a journal and many institutions including Higher Education Commission in Pakistan gives it lot of importance. In order to increase our journal's visibility we continue to have online as well as print version of the journal though it is quite expensive. We continue our efforts to further improve the quality of manuscripts accepted for publication but so far we could not increase the frequency of publication from Quarterly to Bi-monthly or monthly due to lot of constraints although at times an additional issue is published to clear the backlog of accepted manuscripts.

Constant efforts are also on to increase the reviewer's data base. At present the updated list of

Table-V: Manuscript published from Pakistan (2011)

Bahawalpur	3
Faisalabad	3
Hyderabad	13
Islamabad	2
Karachi	48
Lahore	7
Mirpurkhas	3
Multan	4
Nawabshah	2
Peshawar	4
Rawalpindi	4
Total	93

our reviewers data base as on January 30th 2011 has two hundred nineteen of which ninety five are from overseas. With the induction of more and more reviewers, we will be able to reduce the peer review process time. We have already made some progress but still at times, manuscripts pertaining to certain disciplines have to wait for too long as we do not wish to over burden our reviewers. We have made some investment in installing new software. Services of bibliographers and statisticians have also been acquired. A distinguished medical editor Dr. Behrooz Astaneh Head Dept. of Medical Journalsim at Shiraz University of Medical Sciences in Iran has been appointed Ombudsman for the journal to attend complaints, redress grievences of authors if any. Facility of direct online submission was made available to the authors since January 2010 and the e journal system that we use offers many advantages to the authors who can view the progress of their manuscripts directly by logging on to our website. It has also accelerated the whole review, proofing process though the authors still find some difficulty to use this. Based on our personal experience, our advice to all other journals who wish to switch on to direct website submissions will be to make this shift gradually as some of the authors as well as reviewers find it a bit difficult to learn and follow.

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