

Journal Articles

2020

## Ensuring editorial continuity and quality of science during the COVID-19 storm: the ICM experience

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#### **Recommended Citation**

Bein T, Vargiolu A, Citerio G, Jaber S, Schetz M, Aneman A, Arabi Y, Brown K, Mayo P, Shankar-Hari M, . Ensuring editorial continuity and quality of science during the COVID-19 storm: the ICM experience. . 2020 Jan 01; 46(10):Article 7212 [p.]. Available from: https://academicworks.medicine.hofstra.edu/ publications/7212. Free full text article.

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### **LETTER**

# Ensuring editorial continuity and quality of science during the COVID-19 storm: the ICM experience

Thomas Bein<sup>1\*</sup> and Alessia Vargiolu<sup>2,3</sup> on behalf of the ICM Editorial Board

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#### Dear Editor,

High-quality peer reviews are absolutely necessary in medical journals, for publishing quality manuscripts [1]. To guarantee this in view of the increasing volume of scientific production, journals are managed by competent scientific editors who rely on a large number of qualified reviewers. Time, energy, experience, critical thinking and knowledge of the current scientific trends are needed to write a good review [2]. Reviewers are usually unpaid and their efforts are little acknowledged. To compensate this situation, Intensive Care Medicine (ICM) has been rewarding its reviewers for years with EU-CME credits. Identically, many journals are facing difficulties in finding appropriate reviewers who would do the job in a timely manner. The results of the survey, Why do reviewers decline to review? [3], showed that the most important factor responsible for the reviewers' decision not to take up the job was existing workload. Since the outbreak of the SARS-CoV-2-related disease (COVID-19) swept over the intensive care units (ICUs) worldwide in the early months of 2020, we were interested to know whether the massive workload caused by the overwhelming ICU admissions and the confrontation with a new and challenging disease might have limited the peer-review activity of those experts caught in the clinical storm. Therefore, we analyzed the manuscript submissions to ICM and the responses of the invited reviewers (acceptance vs. 'impracticalities', defined as the sum of declines, un-invitations or task terminations due to non-response) from January to April 2020, and compared the findings of peer-review activity with the same time span in 2019 (Table 1). From January 1st to April 30th 2020, there was a considerable increase in submissions (1201 total submissions, 617 of which were COVID-related) over the comparable time in 2019 (554 total submissions). In both cases, the average percentage of advanced rejections was around 60. This workload has been managed in-house, coordinated by the Editor-in-Chief on a daily basis. In 2019, 180 manuscripts were sent to 1.271 reviewers. In the comparable period of 2020, 296 manuscripts were sent out to 1.741 reviewers. In 2020, the percentage of impracticalities (declines, un-invitations, or terminations due to non-response, mostly due to work overload) of reviewers on absolute submissions was higher between January and March than in 2019 but it returned to the level of the previous year at the beginning of April (see Electronic Supplemental Fig. 1). Furthermore, there was no difference in the percentage of late reviews (2020: 13.8%; 2019: 15.8%, p = 0.29) or the average number of late days (2020: 2.1 days; 2019: 1.5 days, p = 0.93).

Despite the rapid and massive increase in workload for intensive care health professionals due to the 'Corona crisis' at the beginning of 2020, looking "Death in the Eye" [4], our findings suggest that, overall, the peer-review activity in high-quality intensive care journals has not suffered a crisis and does guarantee the continuity of one of the columns of quality in science. Our editorial responsibility is to 'avoid research waste during the COVID-19 pandemic and plan for the future' [5]. It is not foreseeable at the moment, whether and how such an exceptional situation for intensive care medicine will continue, disappear, or even return. We should be grateful to all the committed reviewers of many medical journals: they help to promote science—not only about COVID-19.

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Table 1 Summary of ICM and reviewers workload during January 1st-April 30th 2019 compared to the same period in 2020

	2019	2020
Total submissions	554	1201
Need approval	0	1 <sup>a</sup>
Sent back to authors	0	3 <sup>a</sup>
Withdrawn	3	2
Managed submissions	551	1195
Accepted in-house (%)	16 (2.9)	37 (3.1)
Rejected in-house (%)	321 (58.2)	755 (63.2)
Any disposition term without review <sup>b</sup>	34 (6.2)	107 (8.9)
Sent out for revision	180 (32.7)	296 (24.8)
Total reviewers invited	1271	1741
Accepted invitation (%)	853 (67.1)	1118 (64.2)
Declined invitation (%)	264 (20.8)	359 (20.6)
Un-invited before agreeing (%)	143 (11.2)	210 (12.1)
Terminated before agreeing (%)	11 (0.9)	54 (3.1)
Average days to response	0.6	0.5
Average days from agreement to review completion	5	4.7
Revisions submitted on time (%)	554 (64.9)	716 (64.1)
Revisions submitted late (%)	206 (24.2)	223 (19.9)
Un-invited after agreeing (%)	14 (1.6)	19 (1.7)
Terminated after agreeing (%)	79 (9.3)	143 (12.8)
Pending revisions (%)	0 (0)	17 (1.5) <sup>c</sup>

Even if the workload is more than doubled in 2020 with respect to the same period in 2019, the overall capability and efforts made by both ICM Editors and Reviewers dampened the impact of COVID-19 outbreak on the managing process of manuscripts. Rows highlighted with light blue background color show the "impracticalities" reported by reviewers

#### **Electronic supplementary material**

The online version of this article (https://doi.org/10.1007/s00134-020-06207-y) contains supplementary material, which is available to authorized users.

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#### Acknowledgements

ICM Editorial Board: Giuseppe Citerio, Department of Medicine and Surgery, School of Medicine and Surgery, University of Milano - Bicocca, Milan, Italy. Samir Jaber, Department of Anaesthesia and Intensive Care, Montpellier Saint Eloi University Hospital, and PhyMedExp, University of Montpellier, INSERM, CNRS, Montpellier, France. Miet Schetz, Division of Cellular and Molecular Medicine, Clinical Department and Laboratory of Intensive Care Medicine, KU Leuven University, Leuven, Belgium. Anders Aneman, South Western Sydney Clinical School, Faculty of Medicine University of New South Wales, Sydney, Australia. Yaseen Arabi, Intensive Care Department, King Saud bin Abdulaziz University for Health Sciences and King Abdullah International Medical Research Center, Rivadh, Saudi Arabia, Katherine Brown, Cardiac and Critical Care Division, Great Ormond Street Hospital NHS Foundation Trust, London, UK. Alain Combes, Sorbonne Université INSERM Unité Mixte de Recherche (UMRS) 1166, Institute of Cardiometabolism and Nutrition, Service de Médecine Intensive-Réanimation, Institut de Cardiologie, Assistance Publique-Hôpitaux de Paris (APHP) Hôpital Pitié-Salpêtrière, Paris, France. Michael Darmon, Unité de Médecine Intensive et Réanimation, Hôpital Universitaire Saint-Louis, Assistance Publique-Hôpitaux de Paris, and Faculté de Médecine,

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<sup>&</sup>lt;sup>a</sup> At the moment of the present data analysis, there are still some pending submissions in 2020

b It includes the following dispositions given directly by Editors: Change for a letter, Reject and Transfer to ICMx, Revise before review

<sup>&</sup>lt;sup>c</sup> At the moment of the present data analysis, there are still some pending revisions in 2020

#### Compliance with ethical standards

#### **Conflicts of interest**

The authors declare no conflicts of interest.

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Published online: 19 August 2020

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