





Editorial

The path toward editorial quality[☆]

O caminho da qualidade editorial

Since I began my functions as editor of RBO, I proposed myself to draw the attention of readers and authors to what, in my point of view, a medical journal should inform; in addition, our aim is that RBO be read.

The other qualities that may be added to the journal (for instance, impact factors and quotes on specific search engines) are values that must be considered secondary. In our view, a good medical journal is reliable in the analysis of issues published and, besides, should be read by most people interested in the area. The quality indicators will result naturally.

In any way our point of view rule out the importance of the indices that are used to qualify journals of a scientific nature, and the goal of achieving them remains one of the cornerstones of our editorial management. To be linked to a major publisher is an important factor to achieve one of the validation indices considered important, i.e., indexation factors. Undoubtedly, after a year of coexistence with our great publishing house, we could perceive the enormous difference in logistics and support, and that this should be considered as a positive factor in the analysis of a journal.

Over the years, we noticed that the deterioration of the fundamental goals of medical journals began to occur, initially in a sporadic and limited basis, until reaching levels that, in our view, deserve consideration.

The indexation, which should be seen as a recognition of the quality, suffered some distortions.

To publish in indexed journals has become a bargaining chip for academic competitions and even for professional development. In our university environment, the Coordenação de Aperfeiçoamento de Pessoal de Nível Superior (CAPES), which regulates postgraduate programs, considers that a paper published in a journal with impact index 4 or above is worth 10 times more than a paper published in RBO; an article with index 1.6 is worth six times more. It is worth noting that there is no orthopedic journal with impact 4 worldwide. This

misplaced appreciation of indexation caused some strange attitudes in the educational and scientific publication milieu. Some indexed journals charge for the analysis and publication of original works. We emphatically disagree with this custom, as certainly it can generate hidden interests that resemble the highly criticized "conflict of interest". Now I wish to explain why this is my interpretation:

- The fact that a physician is serving as consultant for a particular company gives us the right to imagine that he (she) will demonstrate bias on the publication of the result of usage of material produced by the company in question.
- The fact that an author is paying for his (her) paper review and approval also gives us the right to imagine that the acceptance of the work will be facilitated.

A good strategy is to hold a high impact factor.

Lately, several new journals have been created. To demonstrate the consequences of this expedient, the journal Science, of unquestionable tradition and quality, published in its latest issue (2013; 342:60–5) an interesting text from an author who has forged a job on a forged product, made in a forged institution and with forged authors, entitled "Who's afraid of peer review institution?" This author created this false paper about a chemotherapic agent and sent it to 400 journals. At the time of publication of his interesting experience in Science, the work had already been accepted in more than 150 journals in the world!

Another good business: to have a scientific journal for publication.

Here in RBO we chose a safe, slow and progressive path toward our international indexation, seeking to promote the scientific production of Brazilian orthopedics within its limits. Our goal has been a demand for increasing quality in the articles, an upgrade of our editorial board and the dissemination

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of the methodology required for the production of scientific papers.

We believe that a work of good quality, carefully evaluated and criteriously corrected serves as an example for better works in the future. Certainly, to teach by example is a long, but safe, task.

The indexation of RBO, now in international systems, continues to be one of our goals, but always within our limits.

To SBOT and RBO, to be read by the Brazilian orthopedic community is our better business idea.

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