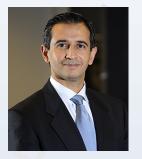
CELEBRATING 15 YEARS OF CGH

Anniversary Tribute From the Editors of *Clinical Gastroenterology and Hepatology*









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he year 2017 marked the 15th anniversary of Clinical Gastroenterology and Hepatology. Over the course of the past several months, we dedicated special content in Clinical Gastroenterology and *Hepatology* to celebrate this landmark year. This content included commentaries from authors of 5 high-impact articles published in Clinical Gastroenterology and Hepatology since its launch in 2003. The authors discussed the motivation for their studies and how their research advanced the field to where it is now. 1-5 We also developed an online collection of some of the key articles published in Clinical Gastroenterology and Hepatology over the years. We now conclude the anniversary tribute with a special article co-written by all Editors-in-Chief Emeriti of Clinical Gastroenterology and Hepatology. In the following sections, they discuss their vision, focus, and experiences (all good!) as they shepherded Clinical Gastroenterology and Hepatology to its current stature.

Michael Camilleri, MD, AGAF; *Clinical Gastroenterology and Hepatology* Editor-in-Chief 2003–2007

It hardly seems possible that *Clinical Gastroenterology* and *Hepatology* is 15 years old! I vividly recall the first



year during which the Mayo Clinic-based Board of Editors (BOE) set about to achieve the tasks at hand: ensuring we had enough content to publish the journal every 2 months for the first year and monthly thereafter. The BOE meetings were like a journal club, as we solicited articles for this new clinical practice journal of the American Gastroenterological Association (AGA) Institute; with a promise of future citation in Medline, and, hopefully, a respectable impact factor. I promised colleagues in academia that I would return the favor if they submitted their work to the new journal! I had to write many book chapters by the end of our tenure as editors!

Here are 3 examples of memorable articles published during our tenure:

- The identification of BRAF mutation and MINT31 hypermethylation in a familial colorectal cancer syndrome suggesting an origin in the serrated pathway of colorectal cancer development.⁶
- The first publication in the gastroenterology literature on assessment of hepatic fibrosis with magnetic resonance elastography.⁷
- Documentation through the TREAT registry of **Q8** similar mortality rates between infliximab- and non-infliximab-treated patients with inflammatory bowel disease, and the role of disease severity and prednisone use in increased risk for serious infection with infliximab⁸; this article recently was showcased as part of the 15th anniversary tribute.²

Our tenure culminated in a commentary that captured the spirit of Ernest Hemingway's *Moveable Feast*: "If you are lucky enough to have lived in Paris as a young man, then wherever you go for the rest of your life it stays with

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you, for Paris is a moveable feast." My successor, Mel Wilcox, kindly noted in his debut commentary when taking the helm, "After only 5 years of publication, *Clinical Gastroenterology and Hepatology* received a remarkable score of 5.465, debuting at a rank of eight out of 50 gastroenterology- and hepatology-related journals." ¹⁰

C. Mel Wilcox, MD; *Clinical Gastroenterology and Hepatology*Editor-in-Chief 2007–2012

The Birmingham team was privileged to take the reins from Dr Camilleri and his colleagues after their inaugural and highly successful 5-year tenure. Our task was to build upon the early success of Clinical Gastroenterology and Hepatology with our primary mission, which our BOE kept in constant focus: to publish interesting, immediately relevant, and timely clinical research. To achieve this goal, we further enhanced the scope of this journal by creating new sections, including "Abstracts From Around the World," in which we summarized recent gastroenterology and hepatology literature; and "Practice Management: Opportunities and Challenges," in which a salient or potentially contentious issue related to clinical practice was discussed. We continued to publish the popular "Education Practice" section, in which, using a case-based format, a relevant clinical issue was succinctly reviewed with current recommendations were provided; this also included systematic reviews and other timely review articles. We also had brief topical reviews on radiologic aspects of digestive disorders. Such offerings yielded the breadth of scope to appeal to our widely diverse readership. Furthermore, we engaged clinical and translational researchers worldwide, a major focus of the AGA.

There was much anticipation regarding the release of the impact factor in 2008. As noted by Dr Camilleri, our initial value of 5.465 was remarkable for such an infant journal. With such a respectable impact factor, manuscript submissions began to flow in from international researchers given the importance of impact factor to international academicians—particularly in Europe and Asia—where such a measure is used for promotion. To illustrate the *impact* of the impact factor, the number of submissions in 2007 was 807. Over the next 5 years, it essentially doubled such that, in 2012, 1693 manuscripts were submitted. Likewise, in 2007, 60% of submitted manuscripts were domestic, whereas in 2012 foreign submissions comprised 64% of submissions. This was a dramatic turnaround.

Many significant and enduring observations were published during our tenure:

- A significant focus during our tenure were topics related to colon cancer screening and colonoscopy given their importance to our clinical community.
- Liver disease was a hot topic, and the importance of fatty liver disease was emphasized in our pages on multiple occasions.¹²
- Some of our topics were prescient, leading to now well-established treatments for the management of disease.¹³
- We aimed to provide a broad spectrum of articles with important observations also made in the fields of nutrition, radiology, and surgery, often intersecting with these sister disciplines.¹⁴
- Novel mechanistic studies were infrequent but highly relevant. 15
- Finally, several outstanding precedent-setting reviews were published. 16

In closing, after reviewing the Table of Contents of our 5 years, I felt like I was taking a walk down memory lane. Each manuscript was like a child that you birthed and cared for in their young years. I know I can speak for all the editors in saying how much of a labor of love being an editor was and that we all miss it (and our fantastic AGA staff) dearly when the time comes to hand off the baton.

Hashem B. El-Serag, MD, MPH, AGAF; Clinical Gastroenterology and Hepatology Editor-in-Chief 2012–2017

Our BOE came at a time when *Clinical Gastroenter-ology and Hepatology* was clearly up and coming, with a solid impact factor and a growing number of submissions. We also started at a time when many established journals that had the advantage of immediate name recognition were jockeying for a higher impact factor by partly becoming so selective that their printed versions looked anorectic. We could not afford this given the relative youth of *Clinical Gastroenterology and Hepatology*, and therefore we strategically embarked on the seemingly difficult goal of increasing the number of published articles while also increasing the quality of articles and hence the journal's impact factor.

To achieve our goal, our board departed from the convention of having all of its members from the same

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