

From the Editor-in-Chief

WE HAVE NOW COMPLETED YET ANOTHER year in the sequence of “Cardiology in the Young”, and one that has not been without its difficulties. We have done our best to keep you, our readers, up to date with the major changes that have taken place with regard to publication of the Journal over the past 12 months, and you have read several messages from our new publishers, Cambridge University Press. Just to remind you of our publishing history, for the first five years of our existence, the Journal was published by its founder, Bill Henry, in the style of a cottage industry, with setting of the issues taking place in Bill’s back kitchen, but with the issues printed in Hong Kong. In the middle part of our existence, we were pleased to be taken in hand by Greenwich Medical Media, and Geoff Nuttall and his team, with our own interests ably managed by Gavin Jamieson. Then, at the turn of last year, we became aware that Greenwich Medical had been subsumed by Cambridge University Press. As has been explained in the previous messages from our new publisher,¹ this acquisition has had very many benefits for “Cardiology in the Young”. The intervening period of change, nonetheless, has not been without its problems, not least the ability to publish the individual fascicles of the Journal in keeping with their promised month. Fortunately, the teething problems have now been overcome. With the support of Geoff Nuttall and Gavin Jamieson, who also moved to Cambridge University Press along with the Journal, and facilitated by Zoe Browne at Cambridge, we are now beginning to meet our publishing deadlines. From my position in the Editorial chair, things can only continue to improve. Already we are conducting much more of our business using the electronic medium, but as yet this is being done in “home-made” fashion. Within the very near future, those submitting to the Journal will be able to do this exclusively in electronic fashion. As is the case with so many other Journals, they will then be able to track the progress of their submissions through the electronic website. The process of refereeing will also be electronic, and all of this will increase the efficiency of the reviewing and editorial process.

In a more recent communication from our publishers, Gavin Jamieson discussed the potential impact of so-called “open access” publishing,² and my co-editor, Ted Baker, will be contributing his thoughts on this

important topic in the first issue of next year. One of the alleged advantages of one form of open access is to give authors the facility to have their papers published without the potential constraints of peer review. I remain to be convinced that such a process has any value whatsoever. Indeed, I am firmly of the opinion that, without appropriate peer review, published papers are of limited value. The process of peer review, of course, must be transparent and fair. We are extremely fortunate in “Cardiology in the Young” that we have a dedicated Editorial board, supplemented by an equally dedicated team of reviewers, who undertake the difficult task of providing unbiased peer review. In the current issue, we list the very many busy people, in addition to the members of the Board, who have undertaken this task over the last year, ensuring that all the work published in our pages is authoritative and interesting. We thank them all. Many, if not most, of these reviewers continue to accept my invitation to sign their reviews, and reveal their identity to the authors. I remain convinced that this is the best way of providing an unbiased review, and I know from the comments received during the Editorial process that our authors also appreciate knowing who is responsible for the criticisms they receive. I recognise also that, in certain circumstances, things can become tricky. In such instances, I respect the wish for anonymity. But this does not occur very often. Furthermore, in circumstances where the authors consider a given review to have been unjustified, I am always open to further discussion, and am prepared to seek additional arbitration. In reality, there are very few papers submitted to the Journal that do not have some intrinsic merit. I see the role of the review process as being to select out the very best from the material submitted, rather than being one of censorship. Thus far, our authors seem to support this approach!

It is also the case that we are receiving increasing numbers of manuscripts for potential publication, and the standard of these submissions continues to improve. We hope that, in the fullness of time, this will also be reflected in an increase in our impact factor, since we recognise fully that authors are under increasing pressure to publish their work in Journals with high impact factors. But we all know that the diagnosis and treatment of malformation of the heart in the young is very much a “niche” subject, so we are pleased simply to receive increasing numbers of

well-researched and well-written manuscripts. In this respect, I would also remind all those submitting to the Journal of the need to prepare their manuscripts according to the "Instructions to Authors". Increasingly we are returning submissions in the first instance because authors have ignored our instruction to "AVOID ALL ABBREVIATIONS". It remains my firm conviction that the use of any abbreviation is of value only to the author, and does nothing to improve the ability to read or understand the manuscript. Some confusion has existed over the course of this year, since there were conflicting "instructions" issued on our various websites during the transition from Greenwich Medical Media to Cambridge University Press. Everything is now rationalised. Those intending to submit works to the Journal are encouraged to read the "Instructions" as contained in www.journal.cambridge.org/jid_CTY, and are requested to follow them to the letter prior to submitting their work.

Finally, as we move towards another New Year of publication, I should emphasise our joy that the Journal has been adopted by the European Association for Paediatric Cardiology as their official journal. Starting with the February issue of 2005, over 400

members of the Association will receive regular copies of the Journal. We hope that not only will this encourage them to read thoroughly all the material published in the pages, but that they will increasingly see "Cardiology in the Young" as the prime forum for publication of their researches. It will now be our privilege to work with the President and officers to ensure that we can act as a conduit for communication between the Association and its members. We are convinced that such collaboration will ensure an even better quality of the Journal for the future. In the firm anticipation that, on this occasion, this issue of the Journal will be in your hands in the early weeks of December, I close by wishing all our readers a very enjoyable festive season.

Robert H. Anderson
Editor-in-Chief

References

1. Jamieson G. From the Publisher. *Cardiol Young* 2004; 14: 117.
2. Jamieson G. From the Publisher. Open access: the future of academic publishing? *Cardiol Young* 2004; 14: 471–472.

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