

# Indian Journal of Orthopaedics dedicated to education, care and research

Medicine is a science of diagnosing, treating, or preventing disease and damage to the body and mind. It has developed enormously based on scientifically evolved innovations. It is a biological science and biology is not stationary, hence the medicine has to evolve. To match the wide variety and complexities of clinical problems of huge population the medicine requires out of box thinking which is evidence based to provide pain relief economically to one and all. The journals play an important role in scientific development. They provide a forum where a small piece of research is reviewed by peers and their critical analysis provides a new insight, offers solutions, and opens new fields for research. Once an article is accepted, it is circulated to one and all to be read, used, and critically analyzed. This brings a small change in the clinical practice. The summation of a series of minor changes in clinical practice brings about a major transformation in the thought process and treatment offered.

The journals have to evolve to contribute to the development in the field of science. The *Indian Journal of Orthopaedics* has also evolved over the years from two issues per year to the present state of six issues per year with wider visibility. As we have entered into a new year, this is the time to look back and review what we have achieved in the last 5 years and plan for the coming year.

## COVER PAGE AND LOGO

The new cover page design [Figure 1] was introduced last year to make it more attractive and give in nutshell few glimpses of articles published inside. The newly designed logo [Figure 2] of *Indian Journal of Orthopaedics* is taken from the emblem of Indian Orthopaedic Association (IOA). Education, care, and research, the prime objectives of IOA and *Indian Journal of Orthopaedics (IJO)*, are printed on the

logo for an everyday gentle reminder of the objective. The logo will be printed on every article published and on cover page. I am sure in due course of time this would become symbolic of *Indian Journal of Orthopaedics*.

## MANUSCRIPT MANAGEMENT

The manuscript submission is increasing and we have shown an increase of almost 2.5 times in the overall submissions in the last 5 years [Figure 3]. Two hundred and twenty articles were submitted by the overseas authors from 39 countries, which include original articles, review articles, perspective articles and editorials. This increase in the submissions was the reason of increasing frequency of publication of IJO from four to six issues per year.

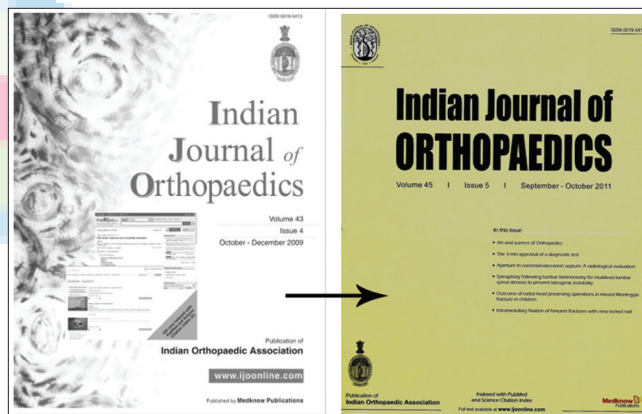


Figure 1: Old and new cover page of the Journal

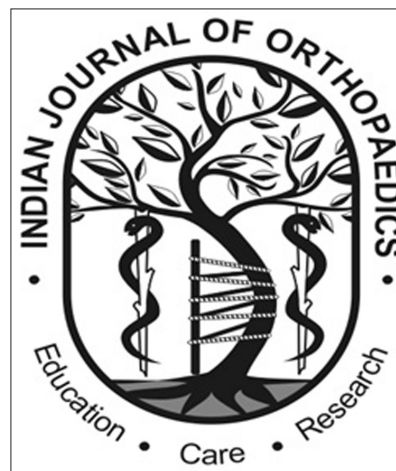


Figure 2: Logo of Indian Journal of Orthopaedics

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Our review timelines have substantially improved with submission to publication time of approximately 70 days from 105 days and the decision publication time from 95 to 42 days. Our submission to decision time has increased by 15 days [Figure 4]. This is largely because of delay in the review process. We have approximately 40% increase in submission this year alone. Hence we require over 2500 reviews every year and the need for reviews will further increase by at least 20% this year. We appeal to all to participate in the review process and a prompt review for faster decision making.

### CITATIONS AND IMPACT FACTOR

We are registering an upward trend for the citation of articles published in IJO. This year alone, we have recorded a substantial increase by 50% in citations [Figure 5]. We have received the first impact factor for the year 2010, which is recorded as 0.285. It looks a small impact factor. As was mentioned in my editorial on impact factor.<sup>1</sup> It is calculated by dividing the number of citations received in 1 year for articles published 2 years before by the number of total articles published in those 2 years. For calculating the impact factor of 2010, the articles published in 2008 and 2009 were

considered. The IJO was visible on PubMed in late 2009 only. For most of 2008 and 2009, it was not visible. Considering the facts; 0.285 is not a poor beginning. The impact factor is an ongoing process and we are confident that it will gradually improve in the times to come. We, the members of IOA, can contribute to the impact factor by ensuring that we publish our good work in IJO and cite the articles published in IJO in subsequent publications.

### REVENUE GENERATION

Our subscription has almost doubled in the last 5 years. However, this must further increase by many fold. Even if all medical colleges and diplomate of national board (DNB) institutions start subscribing the journal, we can increase the subscriptions manifold. We have shown almost 500% increase in the advertisement revenue in the last 5 years, so much so that we have moved from quarterly to bimonthly publication of IJO without increasing IOA contribution to the journal. Our expenses have increased in the last 5 years in view of increased print pages and increased postages. The gap between IOA contribution and spending is widening suggesting improved revenue

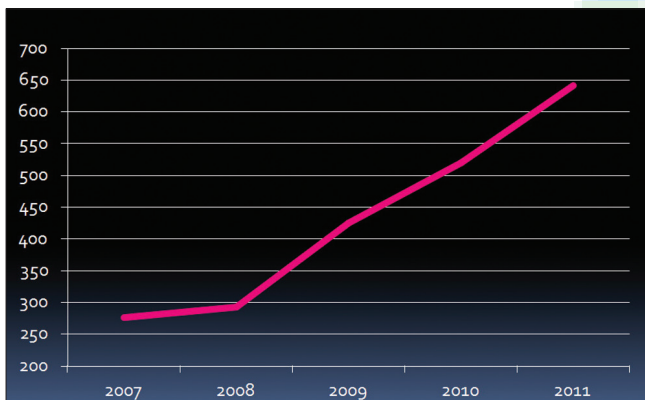


Figure 3: The graph shows year wise continued increase in manuscript submission to *Indian Journal of Orthopaedics* from 2007 to 2011

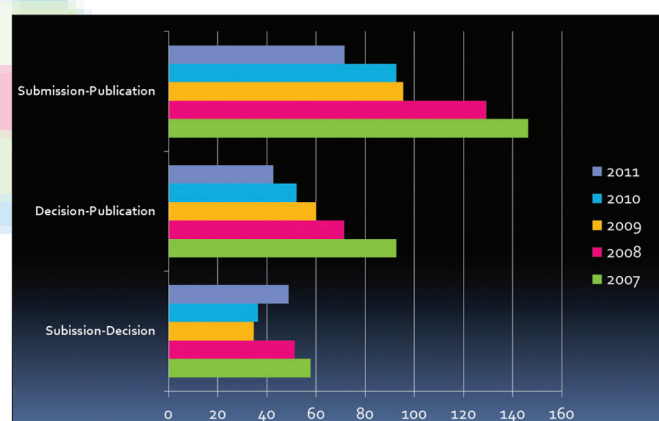


Figure 4: The bar diagram shows review timeline from 2007 to 2011

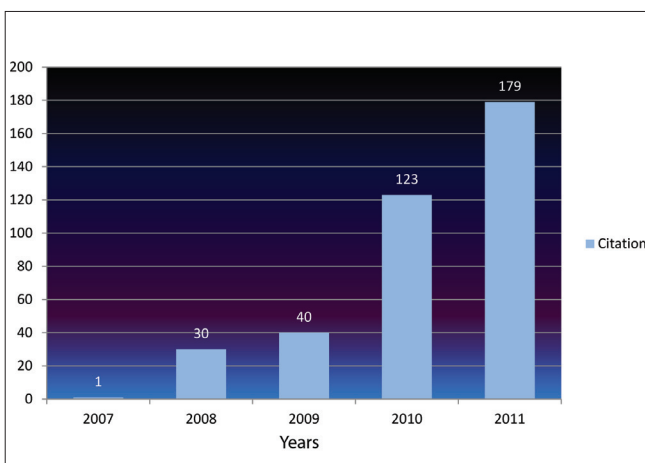


Figure 5: Citation of articles published in *Indian Journal of Orthopaedics*



Figure 6: Bar diagram shows year wise spending and breakage of spending by *Indian Journal of Orthopaedics* (IJO) in printing, mailing and admin while sky blue bar shows *Indian Orthopaedic Association* (IAO) contribution to IJO

generation [Figure 6]. In the last 5 years, the share of IOA's expenditure out of the total has been reducing. IOA was spending 60% of the total expenditure in 2007; but now, only 40% revenue comes from IOA [Figure 7]. We have good savings for the infrastructure, so at any point of time our sudden infrastructural requirement will not be affected because of deficiency of finances.

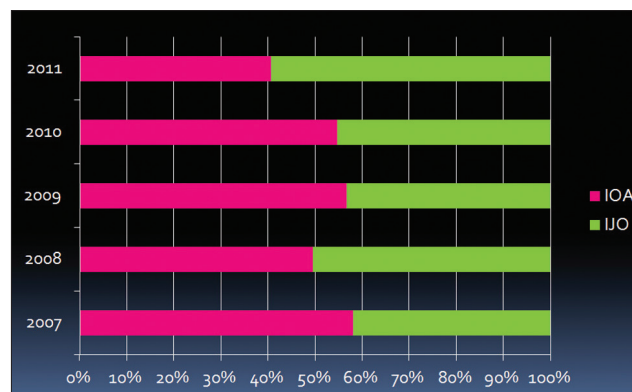
## AWARDS

We award 2 best published articles every year. We have a transparent mechanism of awarding authors for the quality of publication. The articles are evaluated on a structured proforma by two experts. The paper by Dr. Ajay Puri<sup>2</sup> on "Extra corporeal Irradiated tumour bone: A reconstruction option in diaphyseal Ewing's sarcoma" was awarded the Dr. SN Buxi best clinical research paper award for 2010. In basic research category, the award went to an article by Dr. Shyam K. Saraf<sup>3</sup> titled "Decal bone matrix as a local antibiotic delivery vehicle in a MRSA-infected bone model: An experimental study." A new award has been instituted this year, i.e. "Dr. SM Tuli best published case report award," that will be awarded in 2012.

## FUTURE

Once we agree that indigenous research can only provide solutions to our clinical problems, we have to research more and publish more. We now have established work plan for six issues per year. At present, we are just printing 600 print pages of scientific material every year. We can increase the size of issues and increased total print pages to 1500. It all depends on the members/researchers to use the IJO to its capacity. We have to expand our editorial board to include lot many surgeons to its fold. Please participate as reviewers/members of the editorial board in various capacities. At the moment, we receive only few applications for the editorial board positions. Please join editorial team as reviewers/editors.

To become a journal of highest quality, one needs financial support, intellectual intensity of the readership, authors,



**Figure 7:** Bar diagram shows year wise percentage of IOA contribution to total spending

researchers and reviewers, and desire to enter in high league. We have all in plenty. We are just ready to take a high leap. This year is my last year as an editor and I shall be handing over the baton to new editor. I am more than confident that IJO will continue to explore new horizons and I personally believe only together we can attain a bigger height.

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