BJCVS is now in the Thomson Scientific (formerly ISI)

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I am pleased to begin this Editorial by sharing an auspicious note with the colleagues: Brazilian Journal of Cardiovascular Surgery (BJCVS) was accepted into the Thomson Scientific (formerly ISI) database, which gathers the most important scientific publications in the world. Me and the BJCVS team have been waiting anxiously for this answer since the beginning of the year. And finally, in June we received the official announcement and we could celebrate another achievement, whose merits is extended to all members of the Brazilian Society of Cardiovascular Surgery (BSCVS).

Thus, our journal equates once and for all to the best international journals, completing a journey that began with the indexation in the Scielo, in addition to other important databases, such as Scopus, Pubmed/Medline and now Thomson Scientific. With greater visibility, the chance of the journal to have more hits and citations increases, also allowing the Impact Factor increase.

As with Medline, the fact that we are already indexed does not mean an end, but a new period of great responsibility in respect to the quality of content and presentation of the journal both in printed and online editions. Thomson Scientific is very rigorous in evaluating journals. If it notices a drop in quality with no further adjustments, the exclusion is almost certain.

But I am convinced that we can maintain and even raise the scientific level of BJCVS. The Continuing Medical Education (CME), deployed in volume 24.1, has achieved great repercussion, showing the correct deployment of this system. In this volume, there are four articles with this tool: “Results of the establishment of an organizational model in a cardiovascular surgery service” on page 116, “Surgical treatment of partial anomalous pulmonary venous connection to the superior vena cava”, on page 133; “Basic notions of heart rate variability and its clinical applicability” on page 205, and “Bicuspid aortic valve: theoretical and clinical aspects of concomitant ascending aorta replacement” on page 218.

To access them, simply click on icon CME. When clicking on it, a questionnaire with questions and multiple choice answers about the content will be opened. After answering, the system will indicate how many questions were answered correctly, for example, 20%. When this occurs, the reader should continue the test, rereading the article and answering again the questions wrongly answered. We ask the readers to answer the tests, not only to accumulate points, but to know the tool, making criticisms and suggestions, that are always welcome.

In May, we requested to the Brazilian Medical Association (AMB), the approval for that the points earned by those professionals who undergo testing may be used for revalidation of Specialization Course.

My concern in making that the BJCVS is in the vanguard is also a reflection of the current moment of the Brazilian scientific production. The disclosure, in early May, that the scientific production in Brazil, as measured by the number of articles indexed in Thomson Scientific, increased 56% in 2008 when compared with 2007, making the country move from 15th to 13rd place in the world ranking of published articles, surpassing countries like Russia and the Netherlands, provoked antagonistic responses (read on page 258, the reproduction of the text about the subject published in the Informativo FAPESP).

The government and its organs, such as Capes, celebrate the achievement. But the scientists, although pleased with the increased Brazilian participation, criticized the methodology for the disclosure of the indexes and also the statement that the increase would be the result of public investments. Polemics aside, it is a great opportunity to discuss the role of Brazilian scientific journals.

Although there is an urgent need for classification, QUALIS ignores very important factors when based solely on the number of citations. We can not compare a Specialty Journal with a Journal with a general scope. It would be unfair to compare BJCVS with the New England Journal of Medicine, for example, because the latter has more than 200 years, and publishes one issue a week or more, and has a huge catchment area, including our specialty. The impact reaches above 50, when the best journal of our specialty reaches barely 3.0! It is known that there are no easy solutions, but a deep discussion on the current model is necessary.

In March, the 36th Congress of BJCVS took place in Belo Horizonte, MG. Once again, the event achieved success. We had a fruitful meeting of the Editorial Board of BJCVS,
This edition presents, as always, articles of excellent level. I highlight the Editorial “The Troubled heparin issue in the Brazilian market and the search for solutions” on page III, which deals with the measures being taken by BSCVS to solve the serious problem of lack of heparin, including clinical study with the heparins of porcine origin, which aims to ensure quality and standardization of the product to be placed on the market. I also recommend the video “Repair of the total anomalous pulmonary venous connection” (http://www.rbccv.org.br/video/Conexao_Anomala2/), always remembering that we are open to collaboration in this and other sections of BJCVS.

Have a good reading with my warmest regards,

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