

Swiss Medical Weekly entering its 5th year as an English-language general medical journal

On behalf of the Editorial Board, the staff and the publishers, the time has once again come round to thank our authors, referees (see list page 36) and editorialists for their outstanding contribution to the success of our journal during the past year. Our peers have done a fine job in helping to improve many papers, as has our statistician in his task of scrutinising all manuscripts based on statistical analysis: which more often than ends with authors revising their work! A thriving SMW is now entering its 5th year since leaving behind its long tradition as a multilingual journal. Once more the submission rate has increased during the past year, as has our impact factor – to the present level of 1.16, a figure well above that of our continental European competitors covering, like us, the entire field of clinical sciences. We are convinced that our open-access publication policy has contributed to this result, which is essential for many of our authors. Our commitment to quality is reflected in a rise in the rejection rate, which reached 82% in the first half of 2004 and has, hopefully, contributed further to this success story.

Our wish for 2005 is to obtain more submissions from neighbouring European countries. We also look forward to publishing one or two additional papers per issue. To this end we are introducing an International Advisory Committee (see page 1) functioning as ambassador between scientific communities abroad and the journal.

The International Committee of Medical Journal Editors (ICMJE) has decided to require

that papers presenting clinical studies will henceforth only be considered for publication in their member journals if entered in a public registry no later than the beginning of patient enrolment. It is planned that ICMJE journals will impose this requirement for all studies starting after July 1, 2005. The reasons for this policy are all too clear, given the fact that some studies with negative results have not been published in the past, or that clinical scientists have even been prevented from reporting negative results. On the other hand, favourable results have been over-reported, e.g. by covered duplicate publications. Furthermore, study outcomes have been selectively reported and sometimes even the study objectives in protocols have been changed during reporting [1–5]. The Editorial Board of SMW endorses the future requirement for a registry or, better perhaps, registries. We insist, however, that such registries be easily accessible to our future authors and, in view of the importance of clinical studies not supported by profit-making organizations, at no extra cost. We shall address this problem in an editorial during the next few months and attempt to provide our contributors with a practicable and reasonable solution.

In the meantime, we wish you a happy and a successful New Year and hope to hear from you at an early date.

Andreas Schaffner

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