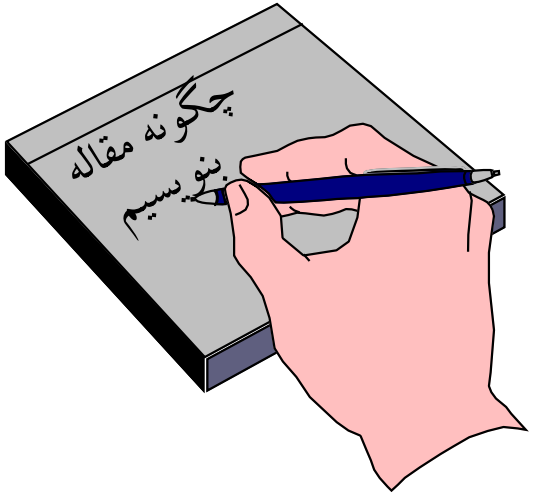
معاونت تحقیقات و فناوری
مرکز توسعه و هماهنگی پژوهش

دانشگاه علوم پزشکی و خدمات بهداشتی درمانی تبریز

چگونه مقاله بنویسیم؟



دکتر مرتضی قوجازاده

Ghojazadehm@tbzmed.ac.ir

Functional characteristics of databases and research platforms

Timeliness of online and print publications

- A month and a week for online publication should be specified
- Usually, issues are printed and dispatched to indexing services and libraries within 2 weeks following online publication
- A quarterly schedules - Jan, Apr, July, Oct, or Mar, Jun, Sep, Dec, or Feb, May, Aug, Nov
- Bimonthly schedules - Jan, Mar, May, Jul, Sep, Nov, or Feb, Apr, Jun, Aug, Oct, Dec

Editorial board

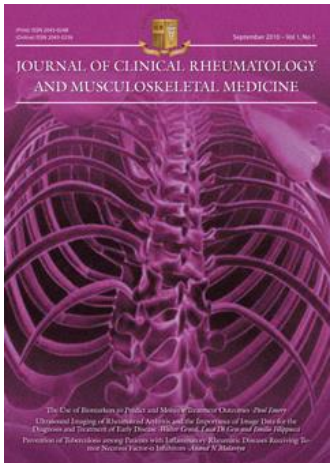
- **Experienced and active editors capable of improving each and every section of the submissions**
- **Editors qualifications (membership)**
- **Smaller journals – shorter list of editors**
- **Editors publications in the journal**
- **Editorials on the quality of a journal**
- **Editors meeting**

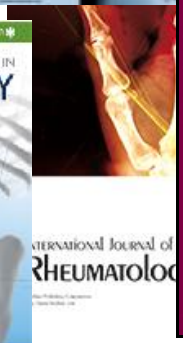
Internationalization of peer review

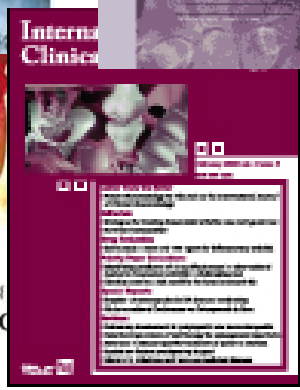
- ✓ **Critical for indexing**
- ✓ **Rapid internal review**
- ✓ **External review**
- ✓ **Ethically sound, constructive, detailed, comprehensive, educational and confidential peer comments**
- ✓ **Best reviewers**
- ✓ **Good journals publicize list of reviewers, timelines of peer-review, rates of rejection and acception**

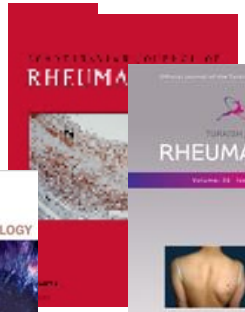
Scope, coverage and content

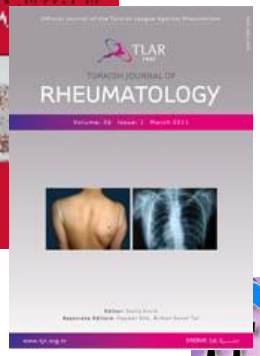
- **Originality (title, scope, content, professional and geographical representation)**
- **Additional value - content of international importance**

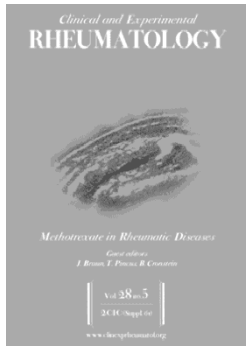


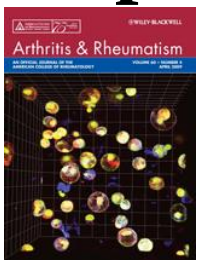


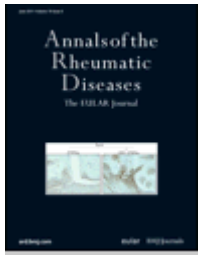


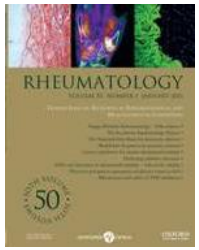












Indexing and Visibility

- **Indexing by Thomson Reuters (IF)**
- **Indexing in Scopus (SJR)**
- **Journals without IF can be good quality journals (widely visible and catalogued)**
- **Visibility of an article is dependent on title page, title, authors' affiliations, address, abstract, keywords, refs**
- **Timeliness of publications (peer review and processing)**

Dovepress
open access to scientific and medical research

Open Access Rheumatology: Research and Reviews

Article Processing Statistics:

10 Days From submission of manuscript to first editorial decision (including peer-review)

Factors of high journal impact

- ✓ English language
- ✓ Medline® indexing
- ✓ Availability of full-texts in PubMed Central
- ✓ Scopus® indexing
- ✓ High SCImago Journal Rank
- ✓ High journal h index
- ✓ Published Journal Impact Factor (JCR®)

Biomedical research platforms and their influence on article submissions and journal rankings: An update.

Giuseppe Lippi[1], Emmanuel J Favaloro[2], Ana-Maria Simundic[3]

Biochemia Medica 2012;22(1):7–14

Rheumatol Int (2012) 32:1861–1867
DOI 10.1007/s00296-011-2276-1

REVIEW ARTICLE

Diversity, value and limitations of the journal impact factor and alternative metrics

Lutz Bornmann · Werner Marx · Armen Yuri Gasparyan · George D. Kitas

Indian J Med Res 132, August 2010, pp 119-122

Editorial

Biomedical Journals in India: Some critical concerns

Table. Some common problems encountered in scientific publishing in India

Journals	Editors
• Not on time	• Flawed/biased peer review
• Poor accessibility & coverage	• No check on simultaneous duplicate submission
• Poor technical editing	• Poor statistics
• Inferior quality of content	• No systems of data sharing
• No checking of authenticity	• Checks on plagiarism/duplicate publication
• Bias in sample selection	• Poor scientific editing
• No novelty in most cases	• Authorship/contributorship issues
• Study design not clear	• Conflicts of interest (COI) not declared
• Authorship	• Industry sponsored research/Financial COI
• Ethics	• Registration of clinical trials
• References not checked	• No co-ordination among other journals
	• Unprofessional

Indexing databases for different disciplines

- Biomedicine
- Biology
- Chemistry
- Psychology
- Information and Library

- MedLine
- Biological Abstracts (TR)
- Chemical Abstracts (CAS, ACS)
- PsychInfo (APA)
- LISA
- Library, Information Science & Technology Abstracts (LISTA)

- Sociology

- Sociology Abstracts (ProQuest)

Multidisciplinary Databases and Web Platforms

Thomson Reuters (ISI) WoK

Web of Science (SCI)

- SCI Expanded
- SSCI
- A&H CI
- Conference Proceedings CI

- Index Chemicus
- Current Chemical Reactions

- Current Content
- BIOSIS Previews

SciVerse Scopus

Google scholar

DOAJ

HINARI

Multidisciplinary Biomedical Abstracting/Indexing Databases

MedLine

EMBASE

Specialist Biomedical Abstracting/Indexing Databases

Global Health

POPLINE (POPulation information onLINE)

Cumulative Index to Nursing and Allied Health Literature (CINAHL)

PsychINFO

Web of Science highly selective approach

- **>12,000 top journals in natural sciences, social sciences and arts and humanities are covered**
- **Over 2,000 journals are reviewed and 10% are accepted for coverage annually**
- **WoS regularly updates coverage by identifying and evaluating promising new journals and deleting “less useful” journals**

Web of Science application

- The evaluation starts with the submission of 3 consecutive current issues at a time of publication
- Issues may be submitted in print, online or both
- Online cover letter includes journal title, ISSN, publisher's name and address, chief editor's name and address, brief description of the scope and uniqueness of the journal
- Address print issues to **Thomson Reuters, 1500 Spring Garden Street, Fourth Floor, Philadelphia, PA 19130**
- Online application at

http://science.thomsonreuters.com/mjl/selection/

Update on an application at

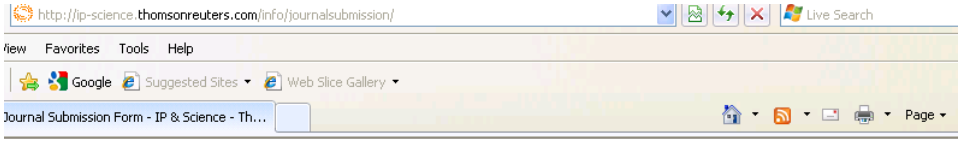
http://ip-science.thomsonreuters.com/info/jrneval-status/

kathy.junkins@thomsonreuters.com

Katherine Junkins Baumgartner , Editor, Editorial Development

Web of Science main selection criteria

- ✓ **Timeliness of publication according to a stated frequency**
- ✓ **International reach: informative journal titles, descriptive article titles and author abstracts, complete bibliographic information for all references (in Roman alphabet), full address for corresponding authors**
- ✓ **Full texts in English**
- ✓ **Peer review**
- ✓ **Funding information**
- ✓ **Citation analysis of the articles, authors and editorial board members**



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IP & Science › Forms › Electronic Journal Submission Form

ELECTRONIC JOURNAL SUBMISSION FORM

This form is for the submission
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**Indicates required field*

JOURNAL DETAILS

Journal title *
Acta Informatica Medica

Print ISSN
0353-8109

URL *
http://www.aim.scopemed.org

e-ISSN
1986-5988

Editor-in-Chief
Izet Masic

Publisher name *
AVICENA, d.o.o., Sarajevo

Publisher Address
AVICENA, d.o.o., Sarajevo. Add

1st Year of Publication
1993

Most Recent Issue (Vol, Iss, Yr)
Vol 20, N1, 2012

Freq (# of Issues per Year)
quarterly (4 per year)

Country of origin
Bosnia

YOUR CONTACT DETAILS

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Izet Masic

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Editor

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Journal Scope
Acta Inform Med covers issues i

Unique features distinguishing this journal
Acta Inform Med covers issues o

SUBMIT

Public, environmental & occupational health

- 158 journals in 2011 JCR science edition

Rank	Abbreviated Journal Title (linked to journal information)	ISSN	Total Cites	Impact Factor
1	AM J EPIDEMIOL	0002-9262	31658	5.216
2	ENVIRON HEALTH PERSP	0091-6765	28595	7.036
3	SOC SCI MED	0277-9536	25187	2.699
4	AM J PUBLIC HEALTH	0090-0036	24979	3.926
5	CANCER EPIDEM BIOMAR	1055-9965	18818	4.123
6	AM J TROP MED HYG	0002-9637	17305	2.592
7	MED CARE	0025-7079	14411	3.411
8	STAT MED	0277-6715	13901	1.877
9	J CLIN EPIDEMIOL	0895-4356	13767	4.271
10	INT J EPIDEMIOL	0300-5771	13378	6.414

ISI Web of Knowledge℠

Journal Citation Reports®

Rank	(linked to journal information)	ISSN	Total Cites	Impact Factor
1	EPIDEMIOL REV	0193-936X	2589	7.583
2	ENVIRON HEALTH PERSP	0091-6765	28595	7.036
3	INT J EPIDEMIOL	0300-5771	13378	6.414
4	EPIDEMIOLOGY	1044-3983	8476	5.566
5	ANNU REV PUBL HEALTH	0163-7525	3298	5.451
6	AM J EPIDEMIOL	0002-9262	31658	5.216
7	J TOXICOL ENV HEAL B	1093-7404	1003	4.725
8	EUR J EPIDEMIOL	0393-2990	4178	4.713
9	B WORLD HEALTH ORGAN	0042-9686	10247	4.641
10	J CLIN EPIDEMIOL	0895-4356	13767	4.271

Public, environmental & occupational health

Rank	Abbreviated Journal Title (linked to journal information)	ISSN	Total Cites	Impact Factor
101	J OCCUP ENVIRON HYG	1545-9624	858	1.189
102	J PUBLIC HEALTH DENT	0022-4006	1093	1.186
103	PSYCHOL HEALTH MED	1354-8506	805	1.178
104	OCCUP MED-OXFORD	0962-7480	1796	1.136
105	TRAFFIC INJ PREV	1538-9588	700	1.079
106	INT J CIRCUMPOL HEAL	1239-9736	575	1.060
107	ASIA-PAC J PUBLIC HE	1010-5395	511	1.056
108	FAM SYST HEALTH	1091-7527	346	1.055
109	ARH HIG RADA TOKSIKO	0004-1254	275	1.048
110	INT J OCCUP ENV HEAL	1077-3525	666	1.035
111	AUST J RURAL HEALTH	1038-5282	635	1.000
111	RADIOPROTECTION	0033-8451	143	1.000

RSPH
ROYAL SOCIETY FOR PUBLIC HEALTH
VISION, VOICE AND PRACTICE

Ranking 91st out of the 157 journals in the ISI Public, Environmental & Occupational Health category

2011 Journal Impact Factor: 1.350
© Thomson Reuters Journal Citation Reports 2012

33	EUR J PUBLIC HEALTH	1101-1262	2680	2.728

Journals from: subject categories MEDICAL INFORMATICS VIEW CATEGORY SUMMARY LIST

Sorted by: Impact Factor SORT AGAIN

Journals 1 - 20 (of 23)

MARK ALL UPDATE MARKED LIST

[1 | 2]

Ranking is based on your journal and

Mark	Rank	Abbreviated Journal Title (linked to journal information)	ISSN	JCR		
				Total Cites	Impact Factor	5-Year Impact Factor
☐	1	J MED INTERNET RES	1438-8871	2017	4.409	5.357
☐	2	J AM MED INFORM ASSN	1067-5027	4071	3.609	4.329
☐	3	STAT METHODS MED RES	0962-2802	1835	2.443	2.988
☐	4	INT J MED INFORM	1386-5056	2056	2.414	2.492
☐	5	MED DECIS MAKING	0272-989X	2851	2.329	3.003

urnal Summary List

ls from: subject categories SOCIAL SCIENCES, BIOMEDICAL VIEW CATEGORY SUMMARY LIST

by: Impact Factor SORT AGAIN

ls 1 - 20 (of 37)

UPDATE MARKED LIST

[1 | 2]

Ranking is based on your journa

Mark	Rank	Abbreviated Journal Title (linked to journal information)	ISSN			
				Total Cites	Impact Factor	5-Y Imp Fac
☐	1	AM J BIOETHICS	1526-5161	1224	4.083	3
☐	2	AIDS BEHAV	1090-7165	3241	3.494	3
☐	3	PSYCHO-ONCOLOGY	1057-9249	5161	3.339	3
☐	4	EVOL HUM BEHAV	1090-5138	2277	3.113	4
☐	5	SOC SCI MED	0277-9536	25187	2.699	3

ournal Summary List

ls from: subject categories COMMUNICATION VIEW CATEGORY SUMMARY LIST

by: Impact Factor SORT AGAIN

s 1 - 20 (of 72)

UPDATE MARKED LIST

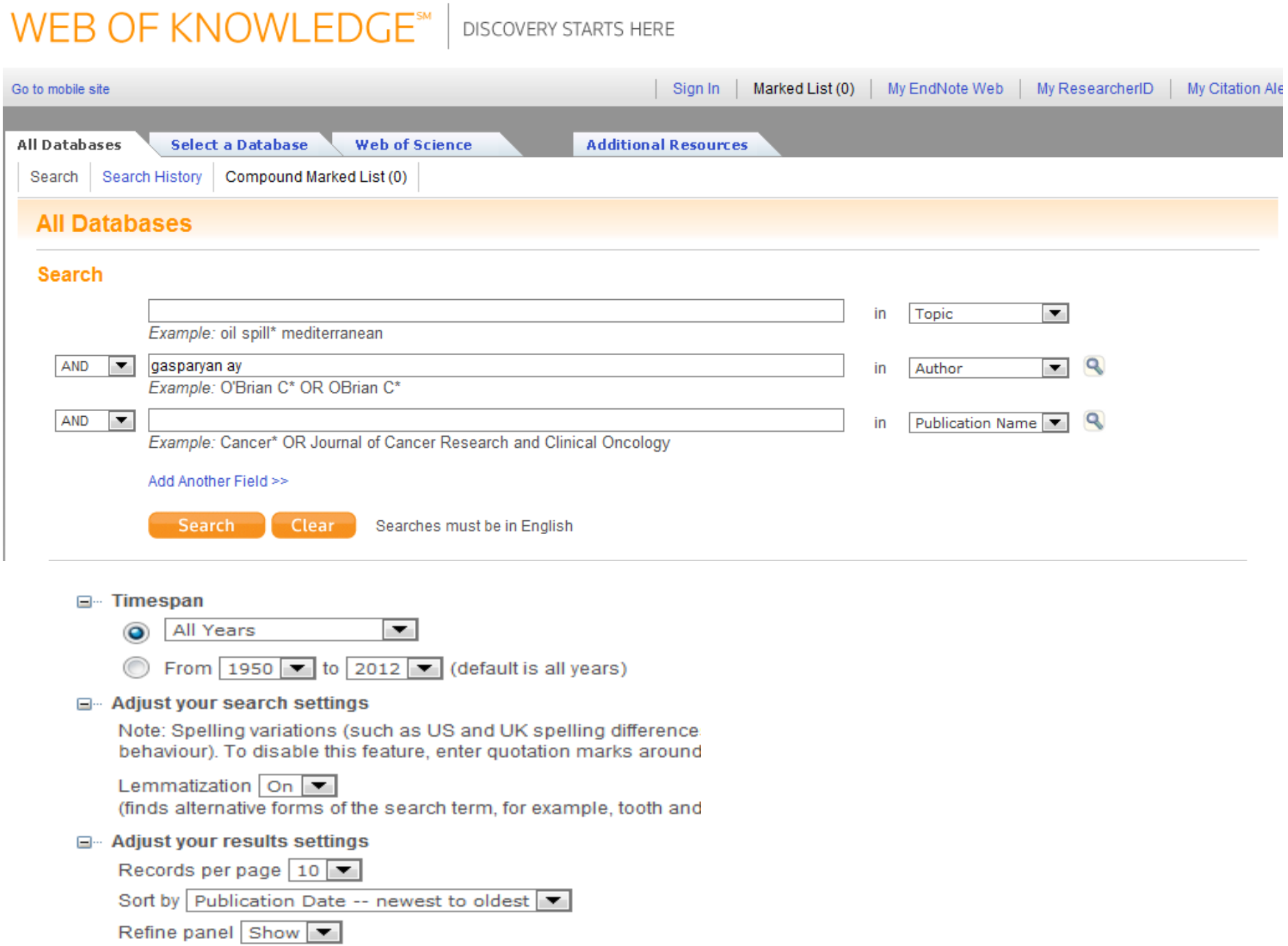
[1 | 2 | 3 | 4]

Ranking is based on your journal and

Mark	Rank	Abbreviated Journal Title (linked to journal information)	ISSN	JCR		
				Total Cites	Impact Factor	5-Year Impact Factor
☐	1	CYBERPSYCHOL BEHAV	1094-9313	2438	2.710	2.732
☐	2	COMMUN MONOGR	0363-7751	1037	2.540	1.984
☐	3	J COMMUN	0021-9916	2503	2.452	3.841
☐	4	PUBLIC OPIN QUART	0033-362X	3546	2.247	4.020
☐	5	J COMPUT-MEDIAT COMM	1083-6101	1744	2.172	4.568
☐	6	SCI COMMUN	1075-5470	493	2.077	2.022

Web of Science and Researcher ID

Armen **Gasparyan** C-9174-2009 - **ResearcherID**.com
www.**researcherid**.com/rid/C-9174-2009
E-mail: a.**gasparyan**@gmail.com. URL: http://www.**researcherid**.com/rid/C-9174-2009. Subject: Biochemistry & Molecular Biology; Cardiovascular System **...**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Topic
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AND
gasparyan ay
Author
Example: O'Brian C* OR OBrian C*
AND
Publication Name
Example: Cancer* OR Journal of Cancer Research and Clinical Oncology
Add Another Field >>
Search
Clear
Searches must be in English
Timespan
All Years
From 1950 to 2012 (default is all years)
Adjust your search settings
Note: Spelling variations (such as US and UK spelling difference
behaviour). To disable this feature, enter quotation marks around
Lemmatization On
(finds alternative forms of the search term, for example, tooth and
Adjust your results settings
Records per page 10
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Web of Science (formerly SCI)

- **Web of Knowledge® (WoK) includes Web of Science® (WoS)**
- **WoS –multidisciplinary citation index with >12,000 journals covered from the 1970s**
- **WoS – subscription database**
- **>5,600 institutions are subscribers of WoS**
- **In 2005, TR launched the WoS Century of Science covering papers in sciences, social sciences, arts and humanities back to 1900**
- **Abstracts, references and citations are tracked**
- **WoS is the source for JCR and JIF**

WoS vs Scopus vs Google Scholar

- **Scopus offers 20% more coverage than WoS**
- **Google Scholar offers results of inconsistent accuracy**
- **PubMed is an optimal tool in biomedical electronic research**
- **Scopus covers a wider journal range, but is limited to articles after 1995**

Falagas ME et al. Comparison of PubMed, Scopus, Web of Science, and Google Scholar: strengths and weaknesses. FASEB J 2008;22(2):338-42.

WoS vs Scopus vs Google Scholar (2)

- **328 articles in JAMA, Lancet, and N Engl J Med from 1999 to 2000**
- **Total citations analysed up to 2008**
- **Google Scholar > Scopus > Web of Science – total citations**
- **Scopus >Web of Science - citations from non-English sources**
- **Web of Science > Scopus – citations from editorials and letters**

Kulkarni AV, Comparisons of citations in Web of Science, Scopus, and Google Scholar for articles published in general medical journals. JAMA 2009;302(10):1092-6.

- **Free (2004)**
- **Indexes all types of literature, non-peer-reviewed sources (books, theses, abstracts, newspapers)**
- **Functions similar to Scirus, Scopus, WoS**
- **Calculates *h* index using data from "cited by"**

(http://scholar.google.com/citations)

- **Limitations: non-selective, time-consuming, no clear indexing criteria, dependent on availability of sources in primary online databases**

- **Calculating Google the h index (http://scholar.google.com/citations)**

Google scholar Dinarvand R Search Advanced Scholar Search

Scholar Articles and patents anytime include citations Create email alert

User profiles for **Dinarvand R**

Rassoul **Dinarvand**
Professor of Pharmaceutics, Tehran University of Medical Sciences
Verified email at tums.ac.ir
Cited by 1427

The use of thermoresponsive hydrogels for on-off release of molecules
R Dinarvand... - Journal of controlled release, 1995 - Elsevier
Two responsive delivery devices are described from which the release of molecules is dependent on the temperature of the milieu. The devices utilise thermoresponsive hydrogels which possess a lower critical solution temperature (LCST). A novel thermoresponsive ...
Cited by 85 - Related articles - All 4 versions

Schiff\'s Bases and Crown Ethers as Supramolecular Sensing Materials in the Construction of Potentiometric Membrane Sensors
F Faridbod, MR Ganjali, **R Dinarvand**, P Norouzi... - Sensors, 2008 - mdpi.com
Abstract: Ionophore incorporated PVC membrane sensors are well-established analyticaltools routinely used for the selective and direct measurement of a wide variety of mplex biological and environmental samples. Potentiometric sensors ...
ted articles - All 12 versions

Rassoul Dinarvand

Professor of Pharmaceutics, Tehran University of Medical Sciences
Drug delivery - nanomedicine - nanotechnology - drug targeting
Verified email at tums.ac.ir
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Citation indices

	All	Since 2007
Citations	1427	1300
h-index	19	18
i10-index	40	40

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Title / Author	Cited by	Year
Schiff\'s Bases and Crown Ethers as Supramolecular Sensing Materials in the Construction of Potentiometric Membrane Sensors F Faridbod, MR Ganjali, R Dinarvand, P Norouzi, S Riahi Sensors 8 (3), 1645-1703	93	2008

MEDLINE ® (Medical Literature Analysis and Retrieval System Online)

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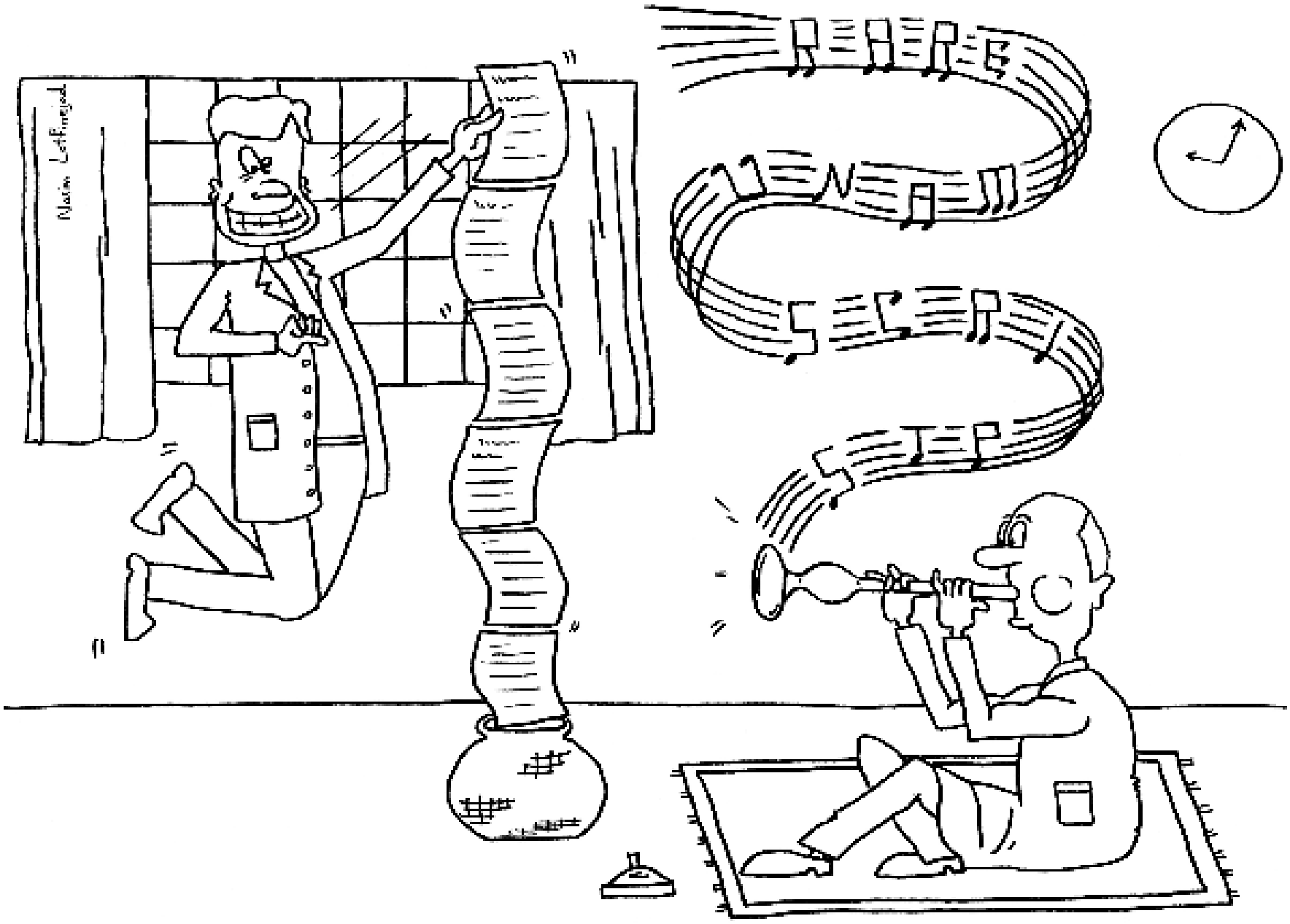
- ✓ **>21.6 mln records from >5,500 journals**
- ✓ **Journals from life sciences, biomedicine, sociology, communication, scientometrics, chemistry and physics with relevance to health and biology**

- **Priorities - original items, evidence base, specific scope, geography, structured abstracts**
- **Language is not an indexing criterion**
- **Quality main texts and abstracts are critical for indexing**
- **Main advantage - MeSH (Medical Subject Headings) thesaurus for Boolean search**
- **Limitation - covers abstracts only, mainly since 1950s and selectively to 1809**
- **Search engine - US NLM's National Center for Biotechnology Information's Entrez system**

MEDLINE
U.S. National Library of Medicine

PubMed



Int J Rheum Dis. 2010 Oct;13(4):367-73. doi: 10.1111/j.1756-185X.2010.01549.x.

Behcet's disease in Iran: analysis of 6500 cases.

Davatchi F, Shahram F, Chams-Davatchi C, Shams H, Nadji A, Akhlaghi M, Faezi T, Ghodsi Z, Larimi R, Ashofteh F, Abdollahi BS.

Behcet's Disease Unit, Rheumatology Research Center, Shariati Hospital, Tehran University of Medical Sciences, Kargar Avenue, Tehran, Iran. fddh@davatchi.net

Abstract

OBJECTIVE: To identify the clinical picture of Behcet's disease in a large cohort of patients (6500) in Iran, over a period of 35 years, and compare them with other large series from around the world.

METHODS: Patients with Behcet's disease from all over Iran were seen in the Behcet's Disease Research Unit by a multidisciplinary team (rheumatologists, dermatologists, and ophthalmologists). Diagnosis was based on 'expert opinion'. Data were collected on a standardized data sheet (105 items), and stored in an electronic database. Data were updated at each follow-up.

RESULTS: Male to female ratio was 1.22 : .00. The mean age at onset was 26 years ± 11.3. The frequency of symptoms were: oral aphthosis 97.3%, genital aphthosis 64.6%, skin manifestations 64.9% (pseudofolliculitis 54.5%, erythema nodosum 22.5%, other lesions 7%), pathergy phenomenon 52.5%, ophthalmologic manifes-tations 56.8% (anterior uveitis 41.2%, posterior uveitis 44.9%, retinal vasculitis 32.1%), joint manifestations 37.4% (arthralgia 17.2%, monoarticular arthritis 7.6%, oligoarthritis 16.8%, ankylosing spondylitis 2%), neurological manifestations 3.8% (central manifestations 3.5%, mononeuritis multiplex 0.3%), gastrointestinal manifestations 7.4%, vascular involvement 8.3% (phlebitis 5.7%, superficial phlebitis 2.2%, large vein thrombosis 1.1%, arterial thrombosis 0.154%, aneurysm 0.5%), epididymitis 4.7%, cardiac involvement 0.6%, and pulmonary involvement 0.9%. Sedimentation rate was normal in 46.5% of patients. Abnormal urine sediment was detected in 12.2%. HLA-B5 was present in 53.3% and HLA-B51 in 47.9% of patients.

CONCLUSION: Behcet's disease is mainly seen in young people. The most frequent symptoms are mucocutaneous, ocular and joint manifestations. Comparison with large series did not show major differences.

PMID: 21199472 [PubMed - indexed for MEDLINE]

MeSH Terms

MeSH Terms

Adolescent

Adult

PubMed.gov
US National Library of Medicine
National Institutes of Health

PubMed | Kazakhstan and health system | Search

Advanced

Display Settings: Abstract

Send to:

Free Full Text European Observatory on Health Systems and Policies

Health Syst Transit. 2012 Apr;14(4):1-154.

Kazakhkstan health system review.

Katsaga A, Kulzhanov M, Karanikolos M, Rechel B.

Kazakhstan School of Public Health; European Observatory on Health Systems and Policies.

Abstract

Since becoming independent, Kazakhstan has undertaken major efforts in reforming its post-Soviet health system. Two comprehensive reform programmes were developed in the 2000s: the National Programme for Health Care Reform and Development 2005-2010 and the State Health Care Development Programme for 2011-2015 Salamatty Kazakhstan. Changes in health service provision included a reduction of the hospital sector and an increased emphasis on primary health care. However, inpatient facilities continue to consume the bulk of health financing. Partly resulting from changing perspectives on decentralization, levels of pooling kept changing. After a spell of devolving health financing to the rayon level in 2000-2003, beginning in 2004 a new health financing system was set up that included pooling of funds at the oblast level, establishing the oblast health

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Environmental Health

The science of controlling or modifying those conditions, influences, or forces surrounding man which relate to promoting, establishing, and maintaining health.

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Restrict to MeSH Major Topic.

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The Literature Selection Technical Review Committee' criteria

- ✓ Scope and coverage (original, biomed)
- ✓ Quality (evidence, originality, importance)
- ✓ Editorial work (credibility, external peer review, ethics, conflicts of interest)
- ✓ Illustrations, layout, acid-free paper
- ✓ Audience (veterinarian – allied professionals)
- ✓ Types of articles (original, reviews, essays on biomedical and methodological issues, case reports)
- ✓ Journals of reprints, reports on a society activities, digests, abstracts, news items, or book reviews are not indexed
- ✓ Geographic coverage
- ✓ Uniform Requirements for Manuscripts Submitted to Biomedical Journals
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-- JOURNAL REVIEW SUMMARY --

Review Date:

ISSN: (P)

Title:

Publisher:

Journal Started In: uuuu

Frequency:

Country of Publication:

Language(s): English

English Abstracts: Yes

Structured English Abstracts: Some

Issues Reviewed:

Year	Volume	Issue
2010	18	2
2010	18	3
2010	18	4
2011	19	1

Types of Contents:

Case Reports	Clinical Overviews	Didactic Papers
Editorials	Ethics Guidelines	General Papers
Research Reports	Reviews	Surveys

Prior Reviews: Yes

Review Date	Rating	Specialty	Recommendation
February 23, 2006	2.5		Yes
October 28, 2010	2.8		Yes

LSTRC Recommendation: Index

	Low					High
Range of Indexing Priorities:	0	1	2	3	4	5

Indexing Priority: **- 3.3 -**

Literature Selection Technical Review Committee
--- Journal Review Summary ---

Title:

Scope: ✓ Core biomedical subjects ✓ Related to biomedicine ___ More appropriate in another database

Coverage: ___ Predominantly U.S. ___ International ✓ Regional ___ Local

Statement of Ethical Issues/Policies: ___ Conflict of Interest ___ Human/Animal Rights ___ Informed Consent

1. Quality	Poor	Fair	Moderate	Good	Excellent	Outstanding	N/A
Scientific Merit (validity, currency of information & references, originality, contribution to field)							
Review Articles		✓					
Clinical Research			✓				
Basic Research							✓
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Authors/Institutions			✓				
Editorial Work (credibility of contents)							
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Production Quality				✓			
Overall Quality	0	1	2	(3)	4	5	N/A

2. Importance	None	Little	Moderate	High	Very High	Essential	N/A
Researchers			✓				
Clinicians in the Field				✓			
Clinicians not in the Field			✓				
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Administrators			✓				
Allied Health Professionals			✓				
Students			✓				
Policy Makers				✓			
Significant perspectives on local Conditions or indigenous diseases						✓	
2. Overall Importance	0	1	2	(3.3)	4	5	N/A

3. Other Factors

- [x] Evidence of external peer review (in issues_____ in letter_____)
- [ ] Significant new techniques
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	Lowest					Highest
OVERALL RATING	0	1	2	3.3	4	5

Abstract
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PubMed articles by:
Kamberi, L.
Gorani, D.
Çitaku, H.
Mustafai, A.

<ERROR [context=/article/front/]: The journal title abbreviation is missing.> . 2011 December; 19(3): 138–141.
PMCID: PMC169916
doi: 10.5455/aim.2011.19.138-141

Multiplane Transesophageal Echocardiography for Multiclinical Dilemmas

Lulzim S. Kamberi,[1] Daut R. Gorani,[1] Hajdin R. Çitaku,[1] Hamza H. Selmani,[1] Arton I. Beqiri,[2] and Ardian I. Mustafai[2]

[1]University Clinical Centre of Kosova, Prishtina, Kosova
[2]International Medicine Hospital for Cardiovascular Disease, Prishtina, Kosova
Corresponding author: Lulzim S. Kamberi, MD. Mother Theresa Street. No number, 10 000 Pristina, Kosova. Phone: +377 44 14 56 80; e-mail: lulzimkamberi@gmail.com

Received June 28, 2011; Accepted August 18, 2011.

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Abstract
1. INTRODUCTION
2. METHODS
3. RESULTS
4. DISCUSSION
REFERENCES

Abstract

Introduction

Transesophageal echocardiography was introduced 4 decades ago. Its use have had very limited clinical indication. Now it has become very useful clinical tool. Indications for its use are almost as indications for transthoracic echocardiography, especially to assess deeper cardiovascular structures. Transesophageal echocardiography is semi-invasive examination with small number of complications.

Aim of the study

To determine usefulness of transesophageal echocardiography in various cardiac conditions based in

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1. Molecular mechanisms of oligodendrocyte injury in multiple sclerosis and experimental autoimmune encephalomyelitis.
Patel J, Balabanov R.
Int J Mol Sci. 2012;13(8):10647-59. Epub 2012 Aug 23.
PMID: 22949885 [PubMed] Free PMC Article
Related citations

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Indexed In: PubMed v9, 2008-
Current Format Status: Electronic only
Current Indexing Status: Not currently indexed for MEDLINE.
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International Journal of Molecular Sciences — Indexing & Abstracting

International Journal of Molecular Sciences is covered by following indexing and abstracting databases:

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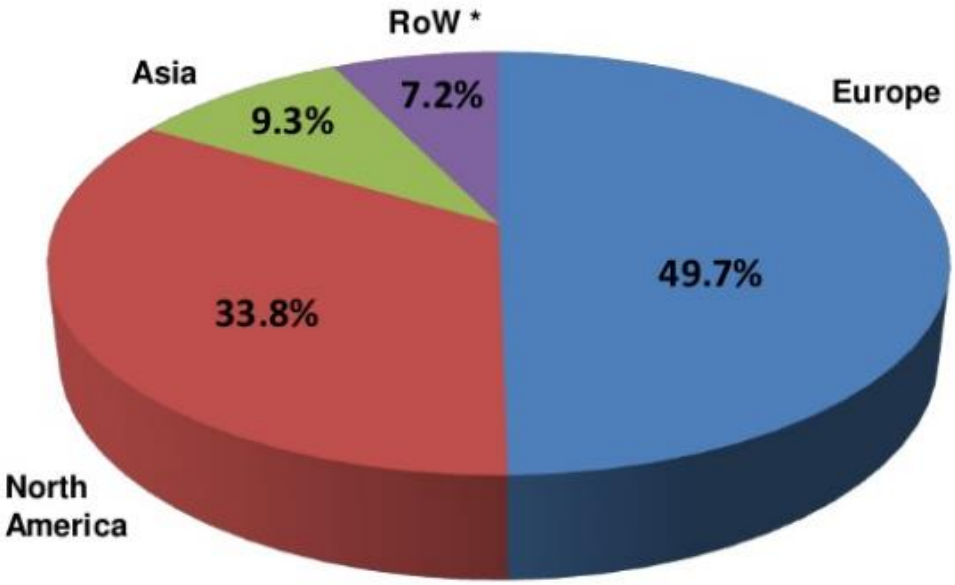

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Spanish	12,519	7,311
Portuguese	5,303	4,004
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Turkish	3,646	675
Chinese	23,757	11,523
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5. Scopus covers all journals indexed in MedLine	T

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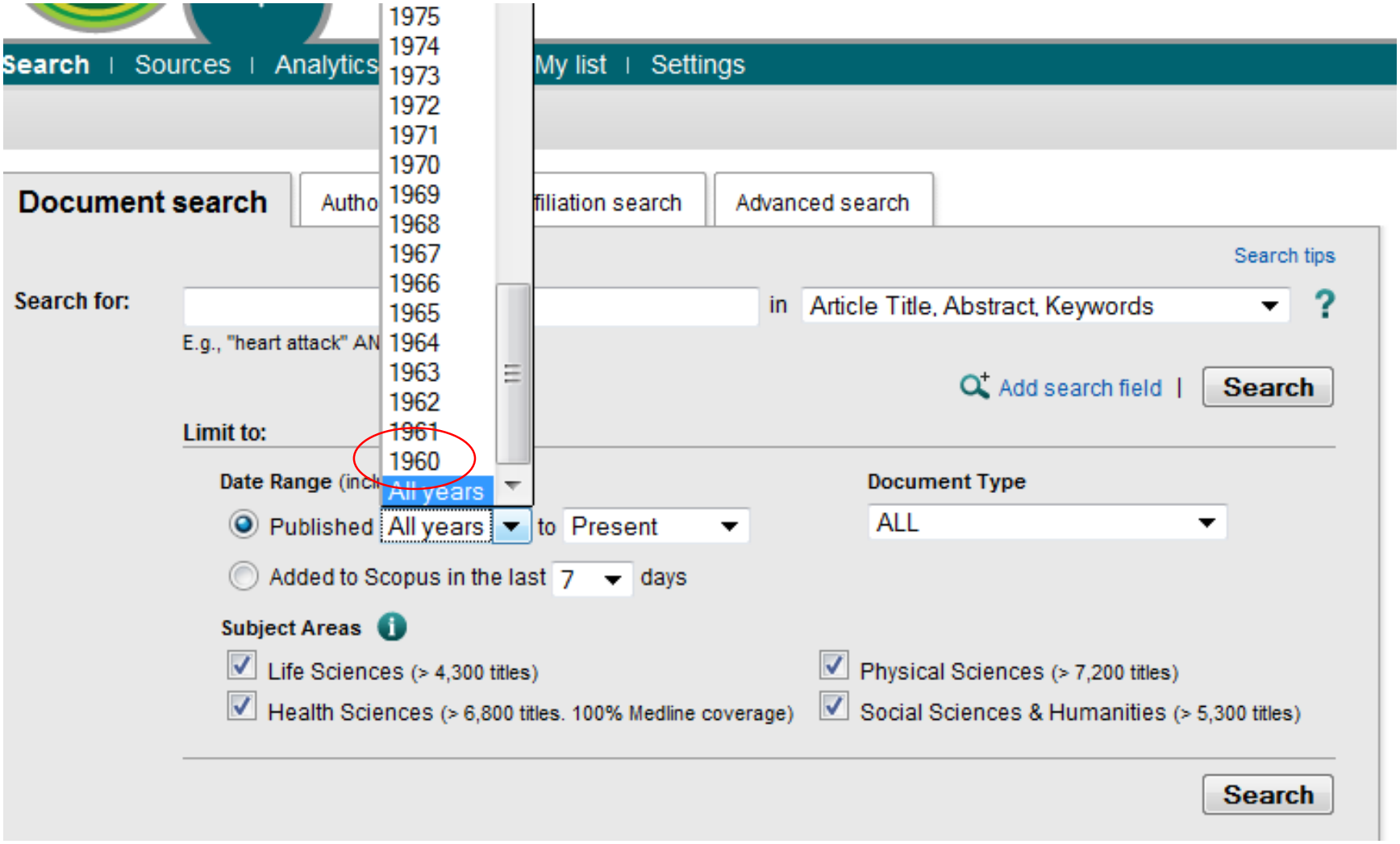

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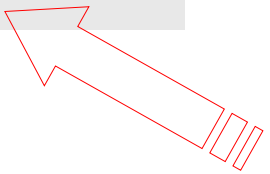

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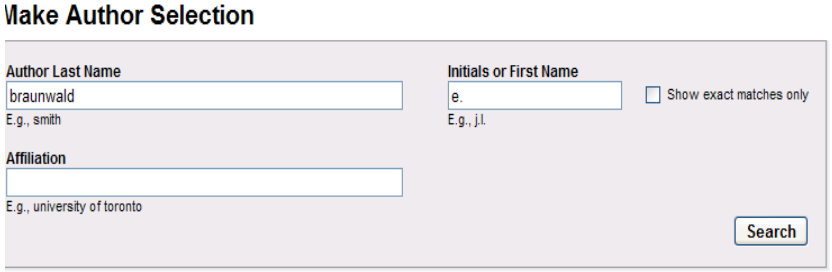

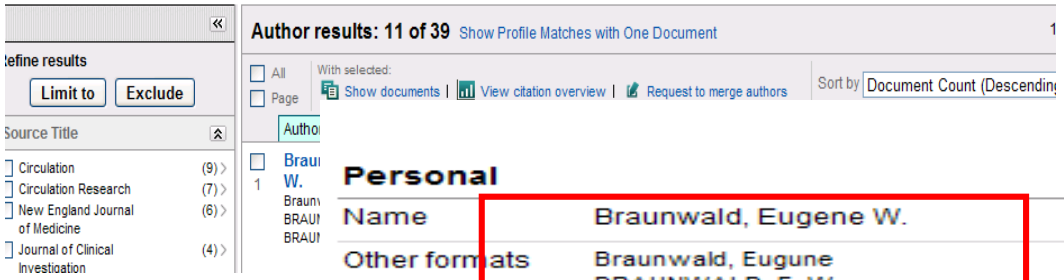

Personal

Name	Braunwald, Eugene W.	
Other formats	Braunwald, Eugune BRAUNWALD, E. W. BRAUNWALD, E.	Braunwald, E.
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E-mail	timi@bwh.harvard.edu	
Affiliation	Brigham and Women's Hospital and Harvard Medical School, Department of Medicine, Boston United States	

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Web search	4353	
Subject area	Medicine Biochemistry, Genetics and Molecular Biology Nursing More...	

Gurdon, John B.

Personal

Name	Gurdon, John B.
Other formats	Gurdon, John Gurdon, J. B. GURDON, J. B.
Author ID	7102977003
E-mail	j.gurdon@gurdon.cam.ac.uk
Affiliation	University of Cambridge, Department of Zo Cambridge United Kingdom

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Documents	253 View Author Evaluator | Ad
References	1874
Citations	7457 total citations by 4854 documents
h Index	34 View h-Graph

Yamanaka, Shinya

Personal

Name	Yamanaka, Shinya
Other formats	Yamanaka, S. Yamanaka, S. Y.
Author ID	7202123309
E-mail	yamanaka@frontier.kyoto-u.ac.
Affiliation	Kyoto University, Kyoto Japan

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References	3088
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h Index	46 View h-Graph
Co-authors	150 (maximum 150 co-authors can

Lemaire, P., Garrett, N., Gurdon, J.B.	1995	*Cell* 81 (1) , pp. 85-94	377
Gurdon, J.B., Bourillot, P.-Y.	2001	*Nature* 413 (6858) , pp. 797-803	316
	1994	*Nature* 371 (6497) , pp. 487-492	230
	1996	*Cell* 87 (6) , pp. 989-1000	176
	1989	*Cell* 59 (5) , pp. 893-903	166
Hopwood, N.D., Pluck, A., Gurdon, J.B.	1989	*EMBO Journal* 8 (11) , pp. 3409-3417	165
Takahashi, K., Yamanaka, S.	2006	*Cell* 126 (4) , pp. 663-676	4322
Takahashi, K., Tanabe, K., Ohnuki, M., Narita, M., Ichisaka, T., Tomoda, K., Yamanaka, S.	2007	*Cell* 131 (5) , pp. 861-872	3512
Okita, K., Ichisaka, T., Yamanaka, S.	2007	*Nature* 448 (7151) , pp. 313-317	1500
Mitsui, K., Tokuzawa, Y., Itoh, H., Segawa, K., Murakami, M., Takahashi, K., Maruyama, M., (...), Yamanaka, S.	2003	*Cell* 113 (5) , pp. 631-642	1295
Nakagawa, M., Koyanagi, M., Tanabe, K., Takahashi, K., Ichisaka, T., Aoi, T., Okita, K., (...), Yamanaka, S.	2008	*Nature Biotechnology* 26 (1) , pp. 101-106	921
Fukuhara, A., Matsuda, M., Nishizawa, M., Segawa, K., Tanaka, M., Kishimoto,	2005	*Science* 307 (5708) , pp. 426-430	789

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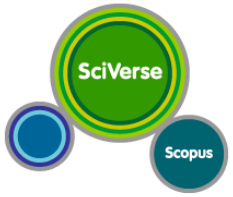

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Issue 9, 2010, Pages 23-34

ISSN: 08696047
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View references (127)

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Prospects for the assessment of cardiac rhythm variability in patients with rheumatoid arthritis and systemic lupus erythematosus

Novikova, D.S., Popkova, T.V., Lisitsyna, T.A., Nasonov, E.L.
Research Institute of Rheumatology, Moscow, Russian Federation

References (127) View in table layout

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1 Russian source

2 Peters, M.J.L., Symmons, D.P.M., McCarey, D., Dijkm
I.B., (...), Nurmohamed, M.T.
EULAR evidence-based recommendations fo
patients with rheumatoid arthritis and other
(2010) *Annals of the Rheumatic Diseases*, 69 (2), pp
http://ard.bmj.com/content/69/2/325.full.pdf
doi: 10.1136/ard.2009.113696

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3 Meune, C., Touzé, E., Trinquart, L., Allanore, Y.
Trends in cardiovascular mortality in patient
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4 Westerweel, P.E., Luyten, R.K.M.A.C., Koomans, H.A
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10 Cook, S., Togni, M., Schaub, M.C., Wenaweser, P., Hess, O.I
High heart rate: A cardiovascular risk factor?
(2006) *European Heart Journal*, 27 (20), pp. 2387-2393. Cite
doi: 10.1093/eurheartj/ehl259

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11 Kaufman, C.L., Kaiser, D.R., Steinberger, J., Dengel, D
Relationships between heart rate variability, vascul
(2007) *Clinical Autonomic Research*, 17 (3), pp. 165-171. Ci
doi: 10.1007/s10286-007-0411-6

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12 Russian source

13 Russian source

14 **Heart rate variability: Standards of measurement, p
clinical use**
(1996) *Circulation*, 93, p. 10431065. Cited 107 times.

15 Crawford, M.H., Bernstein, S.J., Deedwania, P.C., DiMarco, J
L.A., (...), Smith Jr., S.C.
ACC/AHA guidelines for ambulatory electrocardiogr

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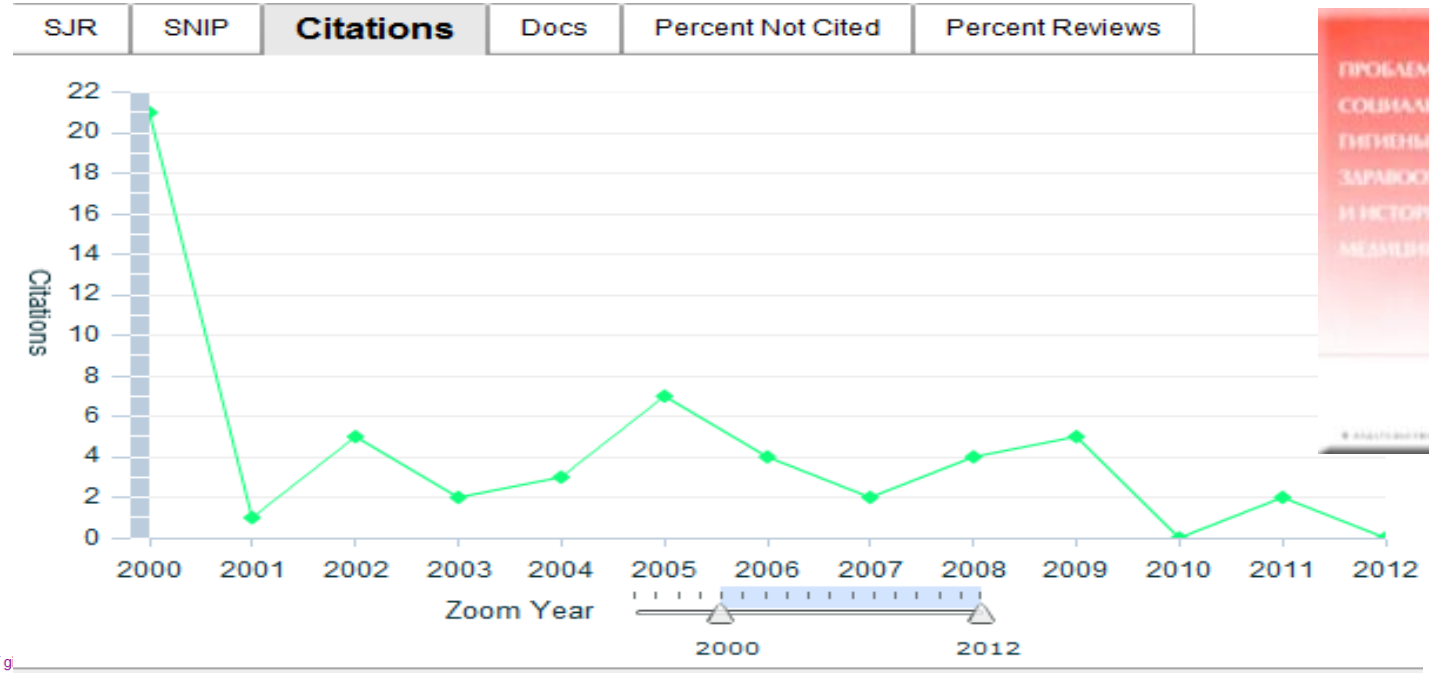
Issue 3, May 2011, Pages 38-40

[The medical social care to pregnant women in the municipal maternity welfare clinics].

[No author name available]

Abstract



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literatura'."

Issue 6, November 2010, Pages 34-37

[The experience of development of hi-tech medical care center].

Belostotskiĭ, A.V.

Abstract

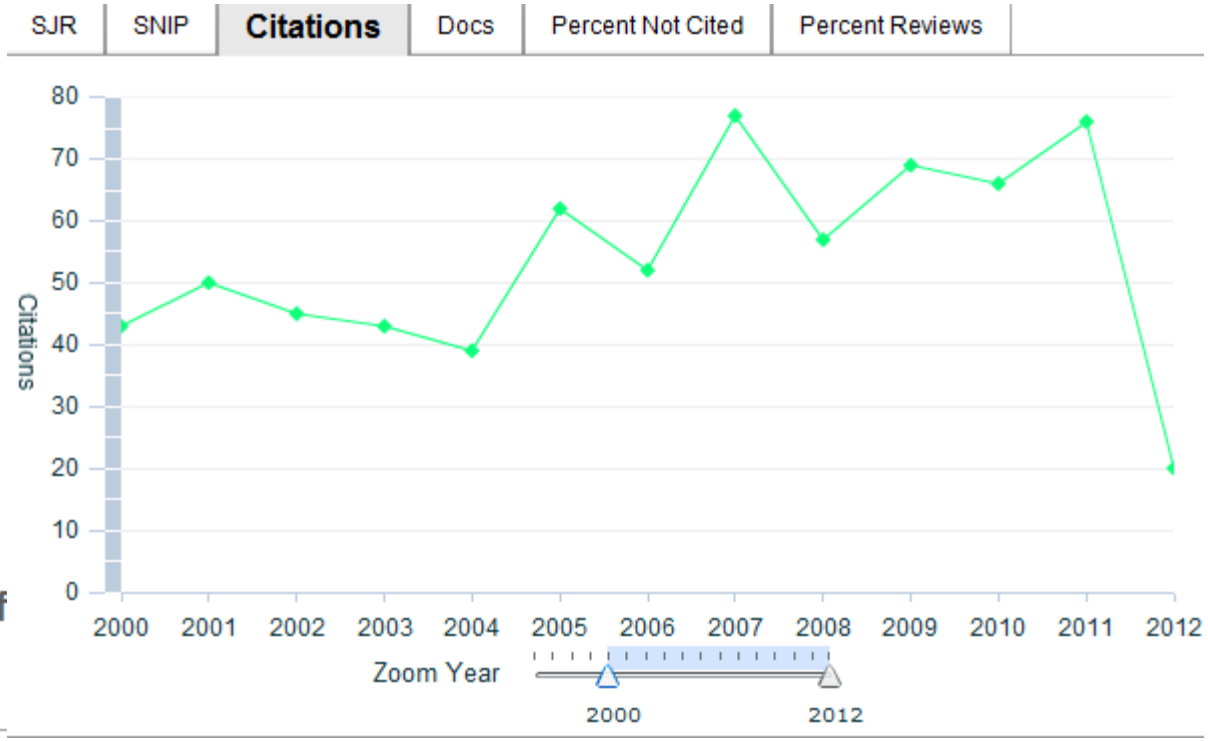
The article deals with the results of comparative analysis of main indicators of functioning of the Penza federal center of cardio-vascular surgery in 2008 and 2009. The focus in analysis is made on the significant increase of center capacity in 2009 after the finalization of management reorganization which provided the institution with high-tech medical equipment.

Indexed Keywords

EMTREE medical terms: article; health care delivery; hospital; human; medical technology; public health; Russian Federation; standard

MeSH: Delivery of Health Care; Hospitals; Humans; National Health Programs; Russia; Technology, Medical

Medline is the source for the MeSH terms of this document.



Voprosy pitaniia

Volume 81, Issue 2, 2012, Pages 46-50

[Hygienic assessment of f

Vasilovskiĭ, A.M., Kurkatov, S.V.

Abstract

This article presents data on the prevalence of different types of sanitary violations, caused by enterprises that produce bakery products, confectionery, dairy, meat and fish products, drinks in the number of sanitary offenses are committed at manufactures of milk, fish and meat products. Finishe the requirements of hygiene standards. The proportion of deposits of factors (such as type of food type of locality, where manufacture is) in the frequency of sanitary violations has been determined.

Indexed Keywords

EMTREE medical terms: article; food contamination; food industry; law; legal aspect; method Federation; sanitation; standard

MeSH: Consumer Product Safety; Food Contamination; Food Industry; Legislation, Food; Occupatic

Medline is the source for the MeSH terms of this document.

Scopus journal selection new criteria

- **Based on Peer Review by Scopus experts**

Journal policy	Convincing editorial concept/policy	Very convincing	Not very convincing
	Diversity in geogr. distribution of editors	International edit. board (Europe only)	All editors from one faculty
	Diversity in geogr.distribution of authors	International authors (>1 continent)	All authors from one country
	All cited references in Roman alphabet?	Yes	Most in Roman, but some in non-Roman
	English-language abstracts available	Yes, all in English	Yes, all in English
	Level of peer-review	Single-blind peer-review	Main editor peer-review
Score *(maximum = 35%)*		**30.9%**	**14.4%**
Content	Academic contribution to field	Good	Poor
	Clarity of abstracts	Excellent	Good
	Conformity with the journal's stated aims	Good	Fair
	Readibility of articles	Excellent	Fair
Score *(maximum = 20%)*		**17.5%**	**10.0%**
Citedness	Citedness of journal articles in Scopus	Well cited	Poorly cited
	Citedness of editors in Scopus	Fairly cited	Not cited
Score *(maximum = 25%)*		**15.6%**	**3.1%**
Regularity	No delay in publication schedule	Publishing on time	Publishing with 1 issue delay
Score *(maximum = 10%)*		**10.0%**	**6.7%**
Online availability	Content available online?	Yes	Yes
	English-language homepage available	Entirely in English	Entirely in English
	Quality of homepage	Good	Excellent
Score *(maximum = 10%)*		**8.8%**	**10.0%**
Total score *(maximum = 100%)*		**82.8%** (= 8.3 points out of 10)	**44.2%** (=44.2 points out of 10)

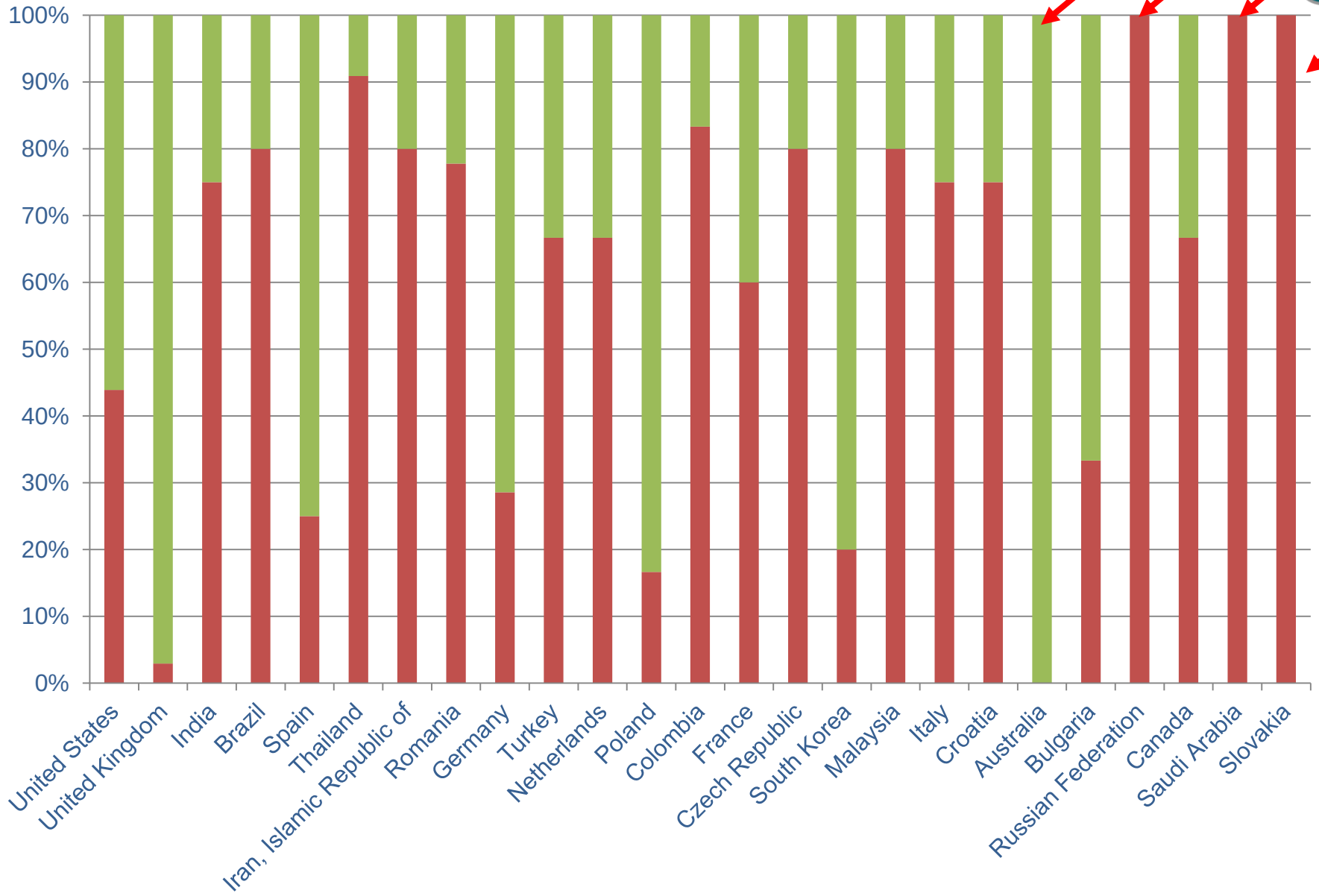
Figure 3. Scopus scorecard (introduced in 2009) applied to two sample journals.

Ove Kähler

Learned Publishing, 23:336–346
doi:10.1087/20100411

Journal policy	• English language abstracts available • All cited references in Roman alphabet • Convincing editorial concept/policy • Level of peer-review • Diversity in provenance of editors • Diversity in provenance of authors
Quality of content	• Academic contribution to the field • Clarity of abstracts • Conformity with journal's aims & scope • Readability of articles
Citedness	• Citedness of journal articles in Scopus • Citedness of editors in Scopus
Regularity	• No delay in publication schedule
Accessibility	• Content available online • English-language journal home page • Quality of home page

Top 25 countries reviewed titles (2011)



SJR SCImago Journal & Country Rank

SJR is developed by: SCIMAGO LAB

Powered by Scopus

	Title	SJR	H index	Total Docs. (2011)	Total Docs. (3years)	Total Refs.	Total Cites (3years)	Citable Docs. (3years)	Cites / Doc. (2years)	Ref. / Doc.	Country
1	Arthritis and Rheumatism	Q1 0,871	194	345	1.645	10.080	5.744	1.319	4,12	29,22	
2	Annals of the Rheumatic Diseases	Q1 0,877	113	477	1.271	10.858	5.158	989	5,36	22,76	
3	Rheumatology	Q1 0,353	97	201	1.367	5.404	2.444	971	2,20	26,89	

	Title	SJR	H index	Total Docs. (2011)	Total Docs. (3years)	Total Refs.	Total Cites (3years)	Citable Docs. (3years)	Cites / Doc. (2years)	Ref. / Doc.	Country
1	American Journal of Public Health	Q1 0,220	144	274	1.396	8.488	2.287	1.086	1,83	30,98	
2	Environmental Health Perspectives	Q1 0,373	144	294	1.334	9.655	3.734	887	4,03	32,84	
3	Journal of Clinical Epidemiology	Q1 0,279	112	208	627	4.273	1.102	525	1,89	20,54	

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	Country	Documents	Citable documents	Citations	Self-Citations	Citations per Document	H index
1	Japan	1.464.273	1.429.881	16.452.234	4.953.600	11,72	568
2	China	1.848.727	1.833.463	7.396.935	3.937.424	5,66	316
3	South Korea	430.438	422.745	3.344.131	769.396	9,82	287
17	Mongolia	1.491	1.468	12.620	1.424	12,78	49
18	Uzbekistan	6.021	5.972	21.656	4.290	3,76	47
19	Kazakhstan	4.153	4.107	15.539	2.343	4,10	44
30	Turkmenistan	123	121	888	46	6,62	13
31	Northern Mariana Islands	39	38	296	21	9,09	9
32	North Korea	51	50	137	2	6,01	6
33	Timor-Leste	29	25	125	6	6,77	6

Webometrics

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- **Indexing criteria**:

✓ Journals published by RAS (more than 200 titles, including 155 titles by “Nauka”

✓ Russian journals covered by WoS

✓ Journals from the list the High Qualification Committee (VAK) of Russia

✓ Journals covered by SCOPUS (180 titles)

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- Collection of 16,360 journals Tables of Contents (TOCs) from 817 publishers
- RSS format (Really Simple Syndication) for Web feeds (RSS documents, aggregates). RSS docs are XML encoded files
- Most followed: *Library Hi tech*, *Nature*, *The Electronic Library*, *J Inform Sci*, *D Lib Magazine*, *NEJM*

- A fee-based membership for publishers
- Provides links to primary research, assigns DOIs to articles, books, theses, conf. proceedings, and makes referencing more systematic
- Members benefit from converting their articles to XML files
- Members obliged to put DOIs in the list of references wherever possible

Rheumatol Int
DOI 10.1007/s00296-011-1944-5

ORIGINAL ARTICLE

Lancet 2011; 377: 1331–40

Published Online
April 14, 2011
DOI:10.1016/S0140-6736(10)62233-7

- Members can have access to CrossCheck to detect plagiarism (more than 54,000 members; the largest base)

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AMERICAN PSYCHOLOGICAL ASSOCIATION

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- www.apa.org/pubs/databases/psycinfo/index.aspx
- An abstract database for psychological literature from 1800s onwards
- Covers more than 2,450 journals
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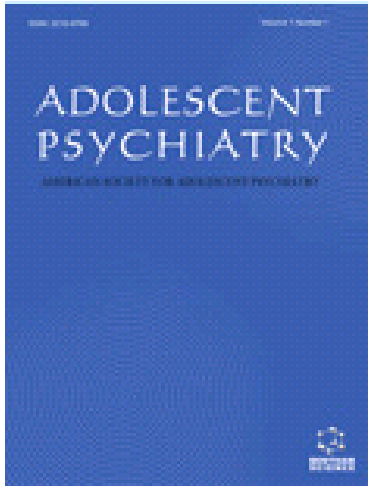
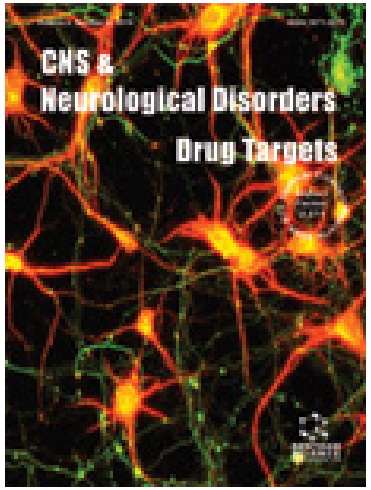


Indexed in:

PsycINFO, PubsHub, J-Gate.

- **Indexing criteria: relevance, peer-reviewed, regularly published; titles, abstracts, and keywords in English**



- **Thesaurus of Psychological Index Terms® is used as a controlled vocabulary** (www.apa.org/pubs/databases/training/thesaurus-term-updates.pdf)

Essential Resources for Editors

ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

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WAME world association of medical editors

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European Association of Science Editors EASE

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Council of Science Editors

www.councilscienceeditors.org

COPE COMMITTEE ON PUBLICATION ETHICS

www.publicationethics.org

CMJ

doi: 10.3325/cmj.2011.52.735

Familiarizing with science editors' associations

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CONSORT (Consolidated Standards Of Reporting Trials)

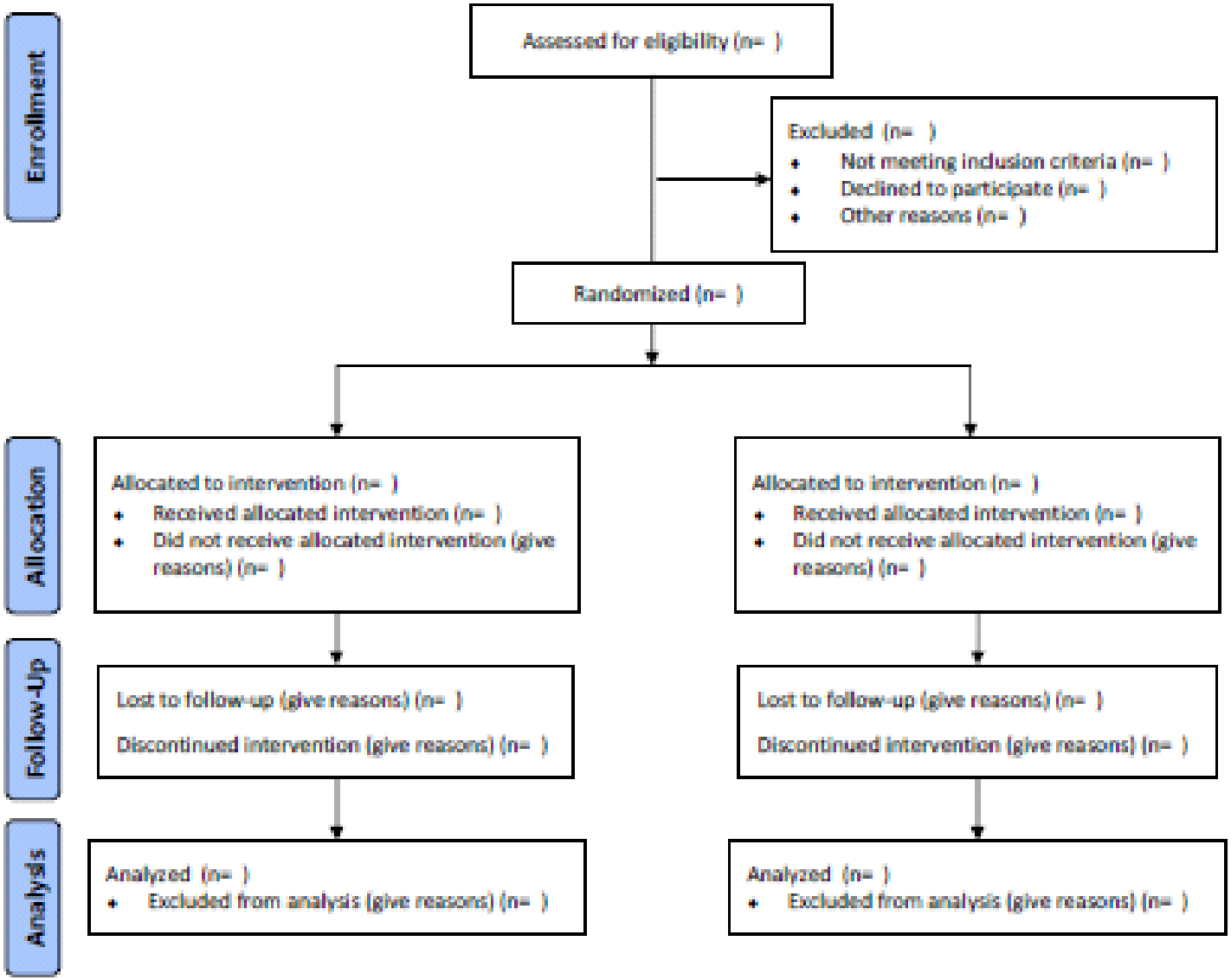
CONSORT 2010 checklist of information to include when reporting a randomised trial*

CONSORT
TRANSPARENT REPORTING of TRIALS

Section/Topic	Item No	Checklist item	Reported on page No
Title and abstract			
	1a	Identification as a randomised trial in the title	
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts)	
Introduction			
Background and objectives	2a	Scientific background and explanation of rationale	
	2b	Specific objectives or hypotheses	
Methods			
Trial design	3a	Description of trial design (suc	
	3b	Important changes to method	
Participants	4a	Eligibility criteria for participan	
	4b	Settings and locations where	
Interventions	5	The interventions for each gro actually administered	
Outcomes	6a	Completely defined pre-specif were assessed	
	6b	Any changes to trial outcome	
Sample size	7a	How sample size was determi	
	7b	When applicable, explanation	
Randomisation:			
Sequence generation	8a	Method used to generate the	
	8b	Type of randomisation; details	
Allocation concealment mechanism	9	Mechanism used to implemen describing any steps taken to	
Implementation	10	Who generated the random a interventions	
Blinding	11a	If done, who was blinded afte	
		assessing outcomes) and how	
	11b	If relevant, description of the similarity of interventions	
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	
Results			
Participant flow (a diagram is strongly recommended)	13a	For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome	
	13b	For each group, losses and exclusions after randomisation, together with reasons	
Recruitment	14a	Dates defining the periods of recruitment and follow-up	
	14b	Why the trial ended or was stopped	
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	
Numbers analysed	16	For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups	
Outcomes and estimation	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)	
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	
Discussion			
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	
Other Information			
Registration	23	Registration number and name of trial registry	
Protocol	24	Where the full trial protocol can be accessed, if available	
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	

*We strongly recommend reading this statement in conjunction with the CONSORT 2010 Explanation and Elaboration for important clarifications on all the items. If relevant, we also recommend reading CONSORT extensions for cluster randomised trials, non-inferiority and equivalence trials, non-pharmacological treatments, herbal interventions, and pragmatic trials. Additional extensions are forthcoming: for those and for up to date references relevant to this checklist, see www.consort-statement.org.

CONSORT Statement 2010 Flow Diagram



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Welcome to the EQUATOR Network website – the resource centre for good reporting of health research studies

Too often, good research evidence is undermined by poor quality reporting.

The EQUATOR Network is an international initiative that seeks to improve reliability and value of medical research literature by promoting transparent and accurate reporting of research studies.

Authors will submit the **Trial Protocols** along with their manuscript. The **CONSORT (Consolidated Standards of Reporting Trials) Checklist and Flowchart** is also required when submitting the results of randomized control trials (RCTs).

PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses)

PRISMA
TRANSPARENT REPORTING of SYSTEMATIC REVIEWS and META-ANALYSES

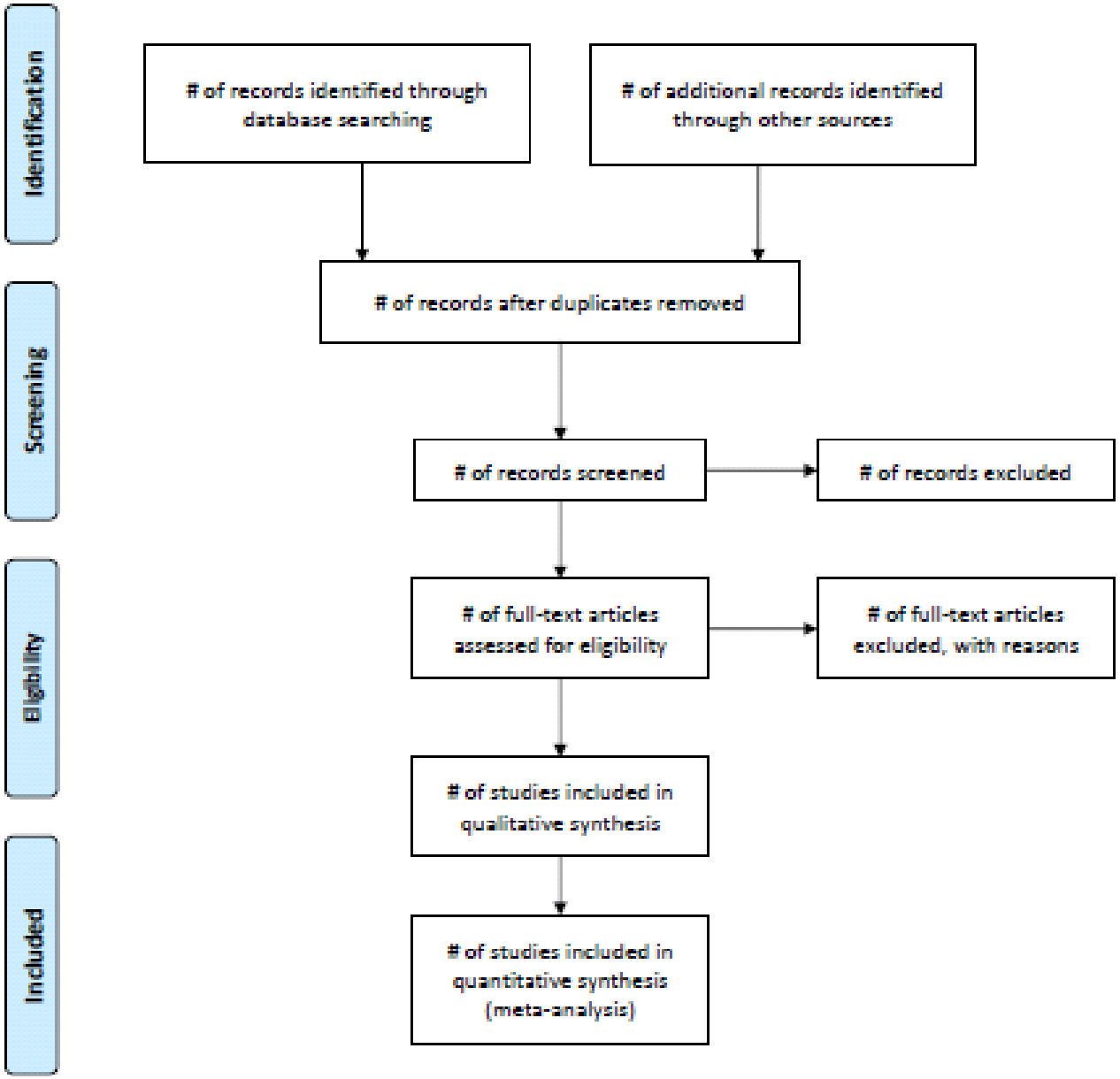
PRISMA 2009 Checklist

Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both	
ABSTRACT			
Structured summary			
INTRODUCTION			
Rationale			
Objectives			
METHODS			
Protocol and registrati			
Eligibility criteria			
Information sources			
Search			
Study selection			
Data collection proces			
Data items			
Risk of bias in individu studies			
Summary measures			
Synthesis of results			

PRISMA 2009 Checklist

Section/topic	#	Checklist item	Reported on page #
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	
RESULTS			
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	
DISCUSSION			
Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	
FUNDING			
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	

PRISMA 2009 Flow Diagram



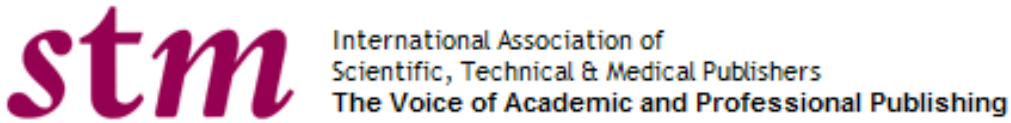
STROBE (STrengthening the Reporting of OBservational studies in Epidemiology)

STROBE Statement
Strengthening the reporting of observational studies in epidemiology

STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No	Recommendation
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported
Objectives	3	State specific objectives, in
Methods		
Study design	4	Present key elements of stu
Setting	5	Describe the setting, locati exposure, follow-up, and d
Participants	6	(*a*) *Cohort study*—Give the selection of participants. D *Case-control study*—Give case ascertainment and con and controls *Cross-sectional study*—Giv selection of participants
		(*b*) *Cohort study*—For mat exposed and unexposed *Case-control study*—For matched studies, give matching criteria and the numbe controls per case
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and e
Bias	9	Describe any efforts to address potential sources of bias
Study size	10	Explain how the study size was arrived at
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding
		(*b*) Describe any methods used to examine subgroups and interactions
		(*c*) Explain how missing data were addressed
		(*d*) *Cohort study*—If applicable, explain how loss to follow-up was addressed *Case-control study*—If applicable, explain how matching of cases and controls was addressed *Cross-secti* sampling st
		(*e*) Describ
Main results	16	(*a*) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included
		(*b*) Report category boundaries when continuous variables were categorized
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses
Discussion		
Key results	18	Summarise key results with reference to study objectives
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence
Generalisability	21	Discuss the generalisability (external validity) of the study results
Other information		
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based

Essential Resources for Editors



American Medical Writers Association (AMWA) www.amwa.org	*AMWA Journal* *AMWA Update* e-newsletter	Essays for biomedical communicators Self-study workshops on ethics, grammar, statistics, etc. Webinars
American Society of Healthcare Publication Editors (ASHPE) www.ashpe.org	*Outlook* newsletter	ASPHE Code of ethics and preferred editorial practices
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U.S. Department of Health & Human Services

ORI research integrity — Office of Research Integrity, US Department of Health and Human Services

Conclusions

Good journals' technical criteria (1)

- Novel titles of articles in English
- Structured abstracts in polished English
- Keywords selected from the MeSH of PubMed
- Full correspondence address
- References in English language
- Policy on peer review (single-, double-blind, open, internal, external) is clearly stated
- Submission and acceptance dates of each article
- Correct abbreviation of the journal title in English and how to cite articles
- Copyright transfer statement

The Role of Apoptosis in Cancer Development and Treatment: Focusing on the Development and Treatment of Hematologic Malignancies

J. Zivny[1,2,*], P. Klener jr.[1,2,3,*], R. Pytlik[3] and L. Andera[4]

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Abstract: Apoptosis is a normal aspect of human physiology ensuring tissue homeostasis. Evasion of endogenous cell death processes, including apoptosis, represents one of the characteristics of cancer. Defects in the physiological mechanisms of apoptosis contribute to the pathological cell expansion and to the development and progression of cancer. Resistance of malignant cells to cancer therapeutic agents may be, in some cases, caused by dysregulation of apoptotic pathways, e.g. BCL2 or IAP overexpression. The understanding of the physiological mechanisms that control apoptosis and the elucidation of apoptotic defects in cancer cells may lead to the development of targeted cancer therapies. Apoptotic pathways, molecules involved in the cross-talk between individual apoptosis pathways and promising new anti-cancer agents, which trigger directly or indirectly apoptosis of hematologic cancer cells, are reviewed in this article.

Keywords: Cancer, leukemia, lymphoma, apoptosis, hematology.

INTRODUCTION

Apoptosis and necrosis represent two major mutually different

important for survival and growth advantage of the malignant clone and contribute to the development of cancer cell resistance to antitumor therapies. The investigation and understanding of the

production of reactive oxygen species (ROS) and mitochondrial fission. Subsequently, mitochondrial outer membrane permeabilization leads to the release of a cavalry of proapoptotic factors from the intermembrane space into the cytoplasm. These factors encompass the apoptosome activator cytochrome c, direct antagonists of caspase inhibitors from the IAP (inhibitors of apoptosis protein) family SMAC/DIABLO (second mitochondria derived activator of caspase/direct IAP binding protein with low pI) and

apoptotic defects in cancer cells may lead to the development of new treatment approaches by both targeting functional and avoiding

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What Are the Next Steps in Designing an Orth

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Date of Acceptance: Nov 01, 2011

How to cite this article: Karimi MT. What are the next steps in designing an orthosis for paraplegic subjects? Int J Prev Med 2012;3:145-59.

ABSTRACT

Background: O
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been adequate, th
excessive energy d
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the available orth
compare the avail
stability analysis, a

Methods: An el
and ISI Web of K
2010. The availabl

Good journal's criteria (2)

- Each article should start on a new page, should have separate PDF, HTML, XML files
- Type of article is mentioned
- The journal and each article in it should have URL links
- Each issue of the journal should include articles on a specific theme (cardiology or rheumatology, etc.)
- Bank of international peer reviewers who should be acknowledged annually
- EB structure - English editor, statistical editor, editor for letters, scientific coordinator
- Conflict of interest - each editor, reviewer and author should declare links to pharm agencies, other conflicts
- Funding - each article should include a statement on funding

Original article

The influence of Iranian scientific journals in disseminating medical information

Farzaneh Aminpour[1,2]
[1]Medical Education Research Center, Isfahan University of Medical Sciences, Isfahan, [2]Department of Health Information Management, School of Health Management and Information Sciences, Tehran University of Medical Sciences, Tehran, Iran.

Background: Scientific journals are the most credible and updated information resources for valid information in the various fields of science and technology. The present study investigates the status of Iranian scientific journals in disseminating medical information to the world of science. **Materials and Methods:** Total 163 Iranian medical journals accredited by national medical journals commission of Iranian ministry of health and medical education were evaluated through a cross-sectional study. The results were represented in descriptive statistics in the form of table and chart. **Results:** The study showed that 89.6% of Iranian medical journals were covered by regional information databases. Web of Science database indexed 22 (13.5%) Iranian journals in the field of medical science. Only six (6.7%) journals were indexed by Medline. Fifty-eight (35.6%) journals were in English, 102 (62.6%) in Persian, and three (1.8%) were bilingual which published their articles both in Persian and English languages. The highest Impact factor belonged to Iranian Journal of Allergy Asthma and Immunology. **Conclusions:** Improving scientific credibility of Iranian scholarly journals and their influence in disseminating medical information calls for a precise scientific and executive administration in publishing standards and also in the quality of content.

Key words: Bibliographic databases, biomedical research, information dissemination, knowledge management, periodicals

INTRODUCTION

Accreditation and Improvement of Iranian Medical

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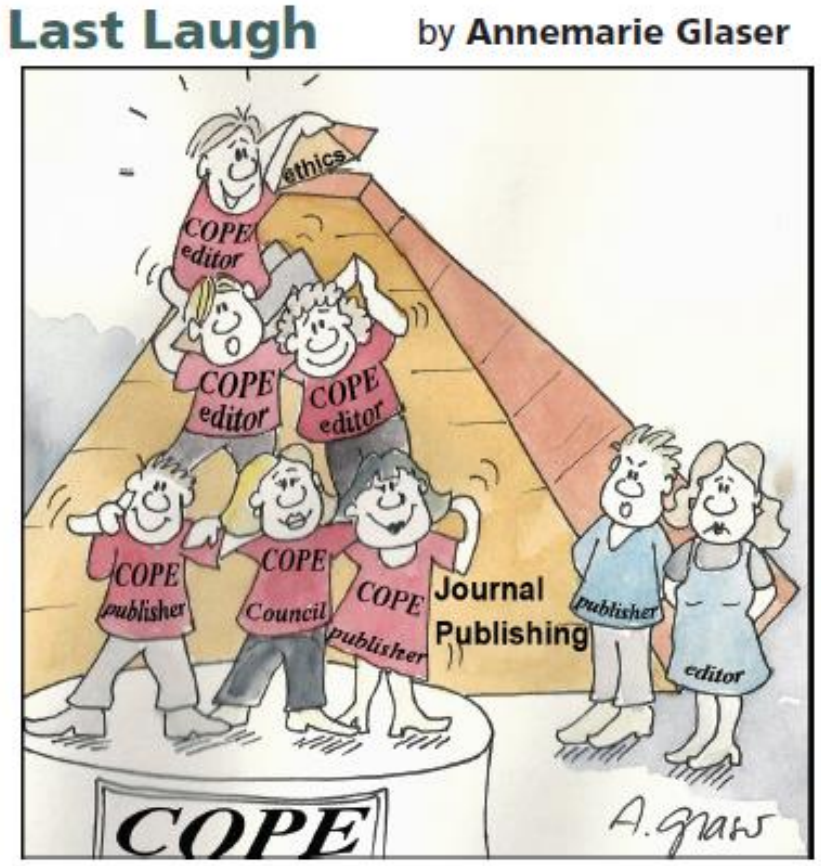

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