Where Authors Choose to Publish

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In the earliest days of Aesthetic Surgery Journal (ASJ), one of the Editor-in-Chief’s most important and time-consuming tasks was to actively solicit manuscripts—at meetings and conferences, over the telephone, over a cocktail, during a round of golf, more or less anytime-anyplace. It wasn’t easy, especially since a paper invited in this highly personal manner ended up in the same pile as every other submission; it still had to go through a peer-review process and might ultimately be rejected. But ASJ was a young journal and, prior to 2008, was not indexed in MEDLINE/PubMed; consequently, authors often preferred to publish elsewhere.

As discussed in the excellent article “How Well Do They Convert: Trending ASAPS Presentations to Publication From 1995–2010,” from 1995-2009 ASJ most often was not the journal of choice for presentations made at annual meetings of the American Society for Aesthetic Plastic Surgery (ASAPS). However, by the end of 2010, two years after it was indexed by the National Library of Medicine in MEDLINE/PubMed, ASJ had become the predominant journal for publication of ASAPS-presented papers.

There is no doubt about the importance of a journal being indexed. While academic authors most often seek to publish their work in order to contribute to the advancement of their field, publishing is also a means to promotion and tenure at their institutions, as well as a way to further enhance their personal reputation in the scientific community. Many academic-based authors, in fact, are strongly discouraged or even prohibited by their institutions from publishing in any journal not indexed in MEDLINE/PubMed. Though the appropriateness of such institutional directives has been debated, the rise of predatory journals and other publications of questionable integrity may suggest some valid protections inherent in these policies.

A journal’s impact factor, which is a measure of the frequency with which the “average article” in a journal has been cited in a particular year or period, often weighs heavily in the equation of where to publish. ASJ currently has an excellent impact factor of 2.502, a 36% increase over the past year alone. But impact factor, while important, is not necessarily the most critical thing for an author to consider. It is a useful but not perfect measure of a journal’s influence in the field. Critics point out, for example, that large and small journals are compared equally; large journals tend to have higher impact factors, but this is not a measure of quality. In some disciplines, research journals tend to be cited more often than clinical journals. Still, a high impact factor is something that every journal wishes to have, and ASJ has done extremely well in this regard.

Plastic surgery is a diverse field with many competing areas; it is no longer possible to be an expert in all of them. The reason that ASJ came into existence was so that aesthetic surgeons could more effectively present their research and techniques to the subgroup of physicians who most closely shares their specific interests and skills. ASJ was conceived to meet the need for an aesthetic journal for aesthetic surgeons. I believe that, due to the further diversification and complexity of our specialty over the last 20 years, the importance of ASJ is even greater than we might have initially imagined. In addition, today those with a primary interest in aesthetic surgery and cosmetic medicine have less opportunity than in the past to present formal papers at the major aesthetic meeting; publication in ASJ provides an additional or alternative vehicle for disseminating in-depth analysis of research and clinical innovations to an audience of their peers.

As noted by Williams et al, the number of papers presented annually at the ASAPS meeting diminished dramatically from 2001-2010. The authors suggest several possible reasons for the decline in ASAPS paper presentations,
and their speculations are quite cogent. Nevertheless, I was curious enough to contact the Society’s Central Office in California, hoping to find someone with enough institutional memory to perhaps explain more definitively the reasons for the “sea change” beginning in 2001. The change in format apparently came about as the result of new leadership in the ASAPS Education Commission. Based on evaluations submitted by attendees of previous years’ meetings, it was decided that ASAPS would revamp the entire “template” for its annual meetings. The old template included only 6 panels with the rest of the program, during a 4-day period, being comprised of papers; yet panel discussions involving recognized experts in a given area consistently received the highest ratings among all types of presentations. In 2000 the number of ASAPS-presented papers rose to a high of 61; the new template, introduced in 2001, reduced this number by approximately two-thirds. In subsequent years, there was some variability but numbers generally remained significantly lower than in the past. Today, ASAPS typically offers approximately 20 panels at each annual meeting and continues to limit the number of paper presentations to about 25-30 (and up to 40 poster presentations), even though paper submissions average in the range of 150 per year (Debi Toombs, ASAPS Director of Education, personal communication, June 29, 2016).

Researchers and clinicians alike often regard major meetings as high-visibility “launching pads” for their work. Conferences promote timely dissemination of new findings, and novel approaches are often well received in a setting where stimulation of debate is encouraged. Presenting a paper orally to a large audience offers an author the opportunity for extensive feedback which can prove helpful for fine-tuning data. This process benefits attendees as well; it has been reported that interactivity contributes positively to learning and information retention. In fact, these days the promise of interactive learning has become somewhat of a mainstay of conference marketing.

The fact of fewer formal paper presentations at ASAPS’ major aesthetic meetings, however, suggests that manuscript publication has a more important role to play than ever before. ASJ’s stunning growth since 2008 is tied to a dramatic increase in paper submissions (97% in the year following indexing and an average of 12% annually in subsequent years). In the past, some of these papers might have been presented first at the ASAPS meeting; now, they are often sent directly to the Journal for consideration.

One function of a journal is to filter submissions, not only to ensure that subject matter is of interest to its readers but also to evaluate the integrity and quality of the data and authors’ analysis. Attention to detail is important in order to instill trust in a journal; data errors or omissions detract from a publication’s credibility. Such painstaking efforts also benefit the author, whose submission may be substantially improved through the necessity of responding to reviewers who ask for certain data to be clarified or expanded. The expertise of peer reviewers is, therefore, a vital component of a journal’s overall quality. While peer reviewers remain anonymous to the author (authors are anonymous, as well, to peer reviewers), a prospective author should always look at who serves on a journal’s Editorial Board. It is, after all, these individuals who set the policies for the journal and who believe in the publication enough to stake their names and their reputations on the journal’s “brand.”

Obviously, all journals are not created equal. That is why authors considering where to publish must think about every aspect of a journal’s publishing, marketing, and distribution process. In addition to fair and efficient peer-review conducted by qualified individuals, a rapid submission-to-publication timeframe is important, especially in an evolving field such as aesthetic surgery. ASJ currently averages slightly over 5 months from submission of a manuscript to print publication, and approximately 4 months for online publication. Our promise is to deliver a first decision within 30 days; our average is just 16 days. Also vital to an author’s interests is the journal’s online presence which must include both a sophisticated, interactive web site and high visibility on social media; ASJ has both. But perhaps far and away the most critical reason why ASJ is the first choice of so many authors is because, quite simply, we know our readers. Again, we are an aesthetic journal for aesthetic surgeons. At the same time, we have broadened our focus to include research and clinical innovation in aesthetic medicine, an area that increasingly plays a major role in every aesthetic practice. We have also expanded our subscriber base worldwide, and ASJ is currently affiliated with 23 international societies of plastic surgery, reflected in the diversity of our Editorial Board. These developments have strengthened the Journal’s ability to serve all its readers and to ensure the widest possible exposure for published manuscripts.

In a rapidly changing publishing world, ASJ is among the most progressive scholarly journals yet remains true to the spirit of its founders, who believed in the value of aesthetic surgery and wanted to encourage its development as a scientific discipline. I would be remiss not to acknowledge them here, as well as the many authors who, in the early days before ASJ became indexed, showed their support by choosing to publish in this journal. Today, thanks to them and to the efforts of so many others throughout the years, the choice to publish in ASJ is available to authors around the globe. Rest assured that everyone involved with this journal is dedicated to making that choice the very best.

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REFERENCES