New Professionals: Career Advice Across The Globe – “The Art of Getting Published”

Monday, November 6, 2017
15:00 – 16:00 EDT

Presenters:
Lyn Beamesderfer
C. Daniel Mullins, PhD
Diego Rosselli, PhD, MD, MEd
Dan Greenberg, PhD
The ISPOR New Professionals Network is composed of recent graduates from Health Economics and Outcomes Research related programs. The Network is available to former student ISPOR members and any new members who join that possess 3 years or less of experience in the HEOR field. Members will be eligible to renew for two additional years after they join before becoming standard ISPOR members. Current ISPOR members, paying the $150 Standard membership, are not eligible to downgrade their membership to New Professional.

**Mission:**
To continue the development of future HEOR leaders by providing increased awareness, educational opportunities, and professional advancement in the field.

**Vision:**
To develop leaders of health economics and outcomes research and help build the workforce across the multiple disciplines of outcomes research.
Objectives & Overview

- This session will provide an opportunity for New Professional Members and soon to graduate students to hear good practices and experiences straight from HEOR experts about “The Art of Getting Published”

- Upon completion of the presentations there will be time for Q&A and Networking.
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>15:00 – 15:05</td>
<td>Overview of New Professional membership &amp; Objectives</td>
<td>Jason Cohen</td>
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<tr>
<td>15:05 – 15:10</td>
<td>Moderator: Lyn Beamesderfer</td>
<td>Lyn Beamesderfer</td>
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<td></td>
<td>Associate Director, Publications &amp; Communication, ISPOR</td>
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<td>15:10 – 15:25</td>
<td>Speaker: Daniel Mullins</td>
<td>Dr. Mullins</td>
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<td>ISPOR Co-Editor In Chief, Value in Health</td>
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<td>Professor, University of Maryland School of Pharmacy</td>
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<td>15:25 – 15:40</td>
<td>Speaker: Diego Rosselli</td>
<td>Dr. Rosselli</td>
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<td>Associate Professor, Universidad Javeriana</td>
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<td>15:40 – 15:55</td>
<td>Speaker: Dan Greenberg</td>
<td>Dr. Greenberg</td>
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<td>Associate Professor, Ben-Gurion University of the Negev</td>
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<tr>
<td>15:55 – 16:00</td>
<td>Q&amp;A/Final Comments/Adjourn</td>
<td>ALL</td>
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Career Advice Across the Globe: “The Art of Getting Published”

Moderator:
Lyn Beamesderfer
Associate Director, Publication & Communications
ISPOR
Lyn Beamesderfer
Associate Director, Publication & Communications ISPOR

- Joined ISPOR in 2015
- Work with EICs and CEs to establish and enforce journal policy, implement strategic direction for the publications, and improve editorial work flows / processing times
- 25+ years in managing peer-reviewed journals
  - The American Journal of Managed Care
  - Cancer and Cancer Cytology [American Cancer Society journals]
Value in Health provides a forum for researchers, health care decision makers, and policy makers to apply pharmacoconomics and outcomes research into health care decisions.

Value in Health Regional Issues is an online journal that publishes articles that focus on health-related topics that impact the health policies and populations in the following regions: 1) Asia; 2) Central and Eastern Europe, Western Asia, and Africa; and 3) Latin America.

Value & Outcomes Spotlight is to foster dialogue within the global health economics and outcomes research (HEOR) community by reviewing the impact of HEOR methodologies on health policy and health care delivery to ultimately improve decision making for health globally.
ISPOR Journals

- MEDLINE-indexed
- 4.325 impact factor
- 12 issues/year + 3 abstract issues
- 1000+ submissions/year
- 80% rejection rate

- MEDLINE-indexed
- 3 e-only issues/year
- ~200 submissions/year
  - 73 from Asia
  - 65 from Latin America
  - 62 from CEEWAA
- 54% rejection rate
Instructions for Authors

Where to start? Read the journal’s instructions

- editorial scope
- length restrictions (word counts, number of tables/figures)
- style and formatting

www.ispor.org/publications/value/submit.asp

www.ispor.org/publications/VIHRI/authors_guide.asp
Career Advice Across the Globe: “The Art of Getting Published”

Presenter:
C. Daniel Mullins, PhD
Professor and Chair, PHSR Dept
University of Maryland School of Pharmacy
Baltimore, MD, USA
C. Daniel Mullins, PhD
Professor, University of Maryland School of Pharmacy

Editor with *Value in Health*

- Co-Editor-in-Chief 2010 – present
- Co-Editor 2002-2010
Editorial Review

- **Novel contribution**
  - Differentiated from prior studies
  - First cost study in (country) not sufficient
- **Appropriate comparator**
- **Match the data to the research question**
- **Model treatment using “local” practice patterns**
- **Incorporate treatment approaches into cost estimation**
  - Site of care (VA, Kaiser Permanent versus BCBS non-closed system)
  - Geography (treatment patterns by country or jurisdiction)
- **Discussion vis-à-vis prior studies**
- **Free from marketing bias**
Editorial Review

- Aligned with journal scope & formatted correctly
- Initial “internal” decision based on merit
  - Reject without review
  - Require pre-review edits
  - Send for Peer Review

- Peer review
  - Significance
  - Methods
  - Transparency
  - Free from bias

- Recommendation
  - Peer review comments to authors
  - Peer review comments to editor
  - Editor’s assessment
Guidance
ISPOR Task Force

Consolidated Health Economic Evaluation Reporting Standards

– CHEERS:

ISPOR Task Forces

ISPOR Task Forces are created to advance the field of health care outcomes research and the use of this research in health care decisions. An ISPOR Task Force is approved by the ISPOR Board of Directors to achieve a defined goal, the development of a “good research practices” report or similar work products. An ISPOR Task Force is composed of a small, active Leadership Group that develops the work product and a larger Review Group that provides comments and feedback on the draft. The Leadership Group is selected by the Task Force Chair(s). The Reviewer Group is composed of any ISPOR member who is interested in the goal of the task force. When the goal of a task force is achieved, e.g., the task force report is submitted to Value in Health for publication, the task force is dissolved.
Reflections from an Editor
Common Problems

- **Lack of transparency**
  - Model Structure
  - Analysis
  - Data sources

- **Lack of novel contribution**
  - Why manuscript is unique and important
  - How the manuscript adds to prior publications

- **Study not randomized, not a trial**
  - Defend why study is needed
  - Place in context of trials and other evidence

- **Methods don’t match study question**
  - Ideally, develop SAP based on question
  - If “second best” SAP, change your Q
Common Problems

- **Need to address selection bias**
  - Instrument (search for the holy grail)
  - Propensity match or score
    - Provide details
    - Explain whether the process provides better evidence
    - Recall that this, too, is a biased sample

- **Cost drivers not transparent**
  - Disaggregate costs
  - Don’t mask drug costs

- **Wrong (or no) active comparator**
  - Ideally, include all relevant comparators
  - If unable, explain in Discussion
To Dos

- Do motivate the research question
- Do match the statistical analysis plan to the research question and study design
- Do provide fair balance in results and discussion
- Do explain the relevance and importance of your findings (but see last bullet!)
- Do list all limitations of the analysis and dataset
- Do draw conclusions that stem directly from the results
- Do place your results in the context of related literature
NOT To Dos

- Do not use the Introduction as a means of providing random facts and trivia
- Do not suggest that non-statistically significant results “trend toward significance”
- Do not place marketing messages in Abstract or Conclusion (or anywhere else!)
- Do not introduce new concepts in the Conclusion
Career Advice Across the Globe:
“The Art of Getting Published”

Presented By:
Diego Rosselli, MSc, MEd, MD
Associate Professor
Universidad Javeriana
Bogota, Colombia
Diego Rosselli, MSc, MEd, MD
Associate Professor, Universidad Javeriana

- Clinical Epidemiology & Biostatistics Department, Medical School, Universidad Javeriana, Bogota, Colombia
- Neurologist
- Master’s in Education (Harvard) and Health Policy (London School of Economics)

- Previous positions: Director for Science & Technology at the Ministry of Health, General Director Colombian Red Cross, Dean of Medical School

- Partner at:
Language barriers

- PubMed-indexed Journals from Spanish speaking Latin America Argentina, Chile, Colombia, Costa Rica, Cuba, Peru and Venezuela 2012-2016
  - English 3218
  - Spanish 10743

- 2007-2011
  - English 1802
  - Spanish 10650
Language barriers

- PubMed-indexed Journals from Portuguese speaking Latin America
  - 2012-2016
    - English 36708
    - Portuguese 13366
  - 2007-2011
    - English 20675
    - Portuguese 13469
Language barriers

- Journals from France

![Pie chart showing 11.6% of journals are in French and 88.4% are in English.]}
Language barriers

- Journals from Italy
  - 91.0% English
  - 9.0% Italian

- Journals from Germany
  - 88.4% English
  - 11.6% German
Language barriers

- Journals from Spain
  - 58.0% Spanish
  - 42.0% English

- Journals from Russia
  - 95.8% Russian
  - 4.2% English
Choose your references well

- References serve two purposes:
  - The obvious one
  - The political one

- Improving your references is perhaps the most cost-effective way of improving the quality of your paper.
Choose your references well

- Self-citations by country (source Scimago)
Selecting the appropriate journal

- Consider journals outside your own discipline.
- Don’t be (too) original
- Copying from one person is plagiarism, copying from many: that’s science.
- Think of that journal’s readership.
Selecting the appropriate journal

Editorial Board

N.S. Abend
Pediatric Neurologist, Philadelphia PA USA

Research Interests:
• Status Epilepticus Management
• EEG Monitoring in Critically Ill Patients
• Pharmacological Management of Seizures and Epilepsy

G. Bicker
Liverpool, UK

S. Bayenburg
Adult neurologist, Luxembourg, Luxembourg

Research Interests:
• Pharmacological treatment of epilepsy
• Comorbid conditions in epilepsy

M. Brodie
General physician and clinical pharmacologist, Glasgow, UK

Research Interests:
• Antiepileptic drug neuropharmacology
• Combining antiepileptic drugs
• Regulatory and other drug trials
• Natural history of treated epilepsy
• Pharmacogenomics of treatment outcomes
• Patterns of drug response
• Pharmacological management of epilepsy

J. Carrizosa Moog
Child Neurologist, Medellin, Colombia

Research Interests:
• Pediatric epilepsy
• Genetics in epilepsy syndromes
• Comorbidity
• Social issues and quality of life
• Education

K. Matsumoto
Kyoto, Japan

Research Interests:
• Functional and seizure networks using invasive neurophysiology and neuroimaging
• Epileptogenicity using clinical neurophysiological methods
• Language function and its reorganization in epilepsy
• Impact of autoimmunity on epilepsy

A. Mazarati
Los Angeles, California, USA

Research Interests:
• Neurobehavioral disorders associated with epilepsy (comorbidities); animal models, mechanisms, and therapies
• Developmental aspects of epilepsy and epileptogenesis
• Role of brain inflammation in epilepsy

D.R. Nordli
Long Grove, Illinois, USA

M. Oto
Glasgow, Scotland, UK

Ç. Özkar
Istanbul, Turkey

S.-P. Park, M.D., PhD.
Adult neurologist, Daegu, South Korea

Research Interests:
• Depression and anxiety in people with epilepsy (PWE)
• Behavioral and other psychiatric disorders in PWE
• Cognitive impairment in PWE
• Quality of life and psychosocial function in PWE
• Comorbidity of epilepsy
• Adverse effects of antiepileptic drugs
Follow checklists

- Checklists were designed for reviewers.
- They help you make sure you comply with their expectations.
Follow models

Lancet Case report

• Three paragraphs
• 2-5 references
• 3-5 authors
• 1 figure
Career Advice Across the Globe: “The Art of Getting Published”

Presenter:
Dan Greenberg, PhD
Professor and Chairman
Department of Health Systems Management
Ben-Gurion University of the Negev Beer-Sheva, Israel
Dan Greenberg, PhD
Professor and Chairman, Department of Health Systems Management, Ben-Gurion University of the Negev

- Value in Health
  - Co-Editor (Since 2011)

- Value in Health Regional Issues
  - Co-Editor in-Chief for Central and Eastern Europe, Western Asia and Africa (Since 2013)

- Consolidated Health Economic Evaluation Reporting Standards (CHEERS) Task Force
  - Member

- Applied Health Economics and Health Policy
  - Editorial Board (Since 2012)
Outline

- Preparing your manuscript for submission
- Finding a (good) home for your manuscript
- What to do if the manuscript is rejected
- What to do if you are asked to revise & resubmit
Guide for authors

- **Article’s length**
  - Try to be concise
  - Longer articles are not necessarily better

- **Cover letter to the editor**
  - Why is your work important?

- **Abstract**
  - Structured/unstructured

- **List of references**

- **External review**
  - Ask a colleague(s) to critically review your manuscript

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<table>
<thead>
<tr>
<th>Article Type</th>
<th>Description</th>
<th>Word Limit</th>
<th>Figures/Tables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original Research</td>
<td>These papers report the findings of original research and may contain the results of empirical analysis, instrument development, or policy analysis.</td>
<td>4000</td>
<td>6</td>
</tr>
<tr>
<td>Methodological Articles</td>
<td>As the name implies, these papers deal with methodological issues in any of the topic areas within the scope of the journal. They may include data if these are required to illustrate the importance of particular methodological points.</td>
<td>3500</td>
<td>6</td>
</tr>
<tr>
<td>Policy Perspectives</td>
<td>These papers discuss important health policy topics within the scope of the journal. They may reflect conceptual pieces or reviews of the literature.</td>
<td>3000</td>
<td>4</td>
</tr>
<tr>
<td>Systematic Literature Reviews</td>
<td>These are papers containing reviews of empirical studies consistent with the methods of systematic review proposed by the Cochrane Collaboration. However, they need not be confined to reviews of randomized, controlled trials and can include reviews of observational studies, economic evaluations, outcomes research studies, and preference-based assessments.</td>
<td>4000</td>
<td>6</td>
</tr>
<tr>
<td>Reviews</td>
<td>These are papers that provide a coherent view of the current state of research on a particular topic, which may include information about main researchers in the field, major discoveries, current debates, significant gaps in research, and trends in the field.</td>
<td>4000</td>
<td>6</td>
</tr>
<tr>
<td>Conceptual Papers</td>
<td>These papers are summaries of in-depth discussions on issues or topics that explore best practices or provide guidance for implementation.</td>
<td>4000</td>
<td>6</td>
</tr>
<tr>
<td>Brief Reports</td>
<td>These are empirical analyses with a more narrow focus than original research articles and generally a single aim.</td>
<td>2500</td>
<td>2</td>
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<tr>
<td>Commentaries</td>
<td>These are brief papers that present a particular perspective on a timely or controversial topic. They do not necessarily need to be based on original research or reviews of the literature and can be based on opinion, providing the points made are transparent and well-argued. While commentaries are typically invited contributions, the editors will consider unsolicited submissions.</td>
<td>2000</td>
<td>1</td>
</tr>
<tr>
<td>Editorials</td>
<td>Editorials are commissioned by the editorial team and often accompany a paper published in the same issue of the journal.</td>
<td>1200</td>
<td>1</td>
</tr>
<tr>
<td>Letters to the Editor</td>
<td>Customarily, letters refer to content published in the journal within the past 6 months. Authors of the article to which the letter refers will be given the opportunity to reply, and if a response is issued, both the letter and the reply will be published in the same issue of the journal.</td>
<td>1500</td>
<td>1</td>
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</table>
Finding a (good) home for your manuscript

- It is always good to aim high but try to be realistic
  - Impact factor

- Read carefully the mission of the journal and the type of published articles

- Review length: time from submission to first decision

- Time from acceptance to publication

- Open access journals
Welcome to Jane

Have you recently written a paper, but you’re not sure to which journal you should submit it? Or maybe you want to find relevant articles to cite in your paper? Or are you an editor, and do you need to find reviewers for a particular paper? Jane can help!

Just enter the title and/or abstract of the paper in the box, and click on 'Find Journals', 'Find authors' or 'Find Articles'. Jane will then compare your document to millions of documents in Medline to find the best matching journals, authors or articles.

Keyword search

Instead of using a title or abstract, you can also search using a keyword search, similar to popular web search engines. Click here to search using keywords.

A new home!

JANE has moved to a new home for improved stability. Many thanks to the Observational Health Data Science and Informatics for providing the hosting! Please update your bookmarks.
Methods: We collected resource utilization data among UC and CD patients treated at a tertiary hospital single-HMO facility during the years 2012 through 2015. This included out-patient consultations, hospitalizations (non-surgical), investigations (endoscopy, imaging and pathology), surgical procedures, and use of pharmaceuticals. Healthcare cost calculations were based on the Ministry of Health list price for health services and pharmaceuticals and presented in year 2015 values.

Results: There were 189 CD and 242 UC patients (mean ages 43.5±15.9 y and 53.2±17.9 y, respectively). The total healthcare cost over the four-year follow-up period was €19,121 for CD and €7,097 for UC (p<0.001). Medication costs accounted for 70.7% of total healthcare costs in CD patients, with 66.4% for biologics and 4.3% for all other medications; additional costs were for surgery (9.7%) and hospitalizations (6.0%). In UC patients, biologics amounted to 27.5% of total cost, other medications 25.8%, investigations (24.2%) and outpatient visits (18.9%).

Conclusions: CD patients engendered much higher healthcare costs than UC patients. Biologics are now the main cost driver in CD and UC in our facility, resulting in a considerable rise in overall expenditure without any substantial concomitant reduction in the other cost utilities.
These journals have articles most similar to your input:

"Background and Aims: The increasing use of biologic therapies in Crohn's disease (CD) and Ulcerative..."

<table>
<thead>
<tr>
<th>Confidence</th>
<th>Journal</th>
<th>Article</th>
<th>Influence</th>
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<tr>
<td>Inflammatory bowel diseases</td>
<td>Journal of medical economics</td>
<td></td>
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<td>Show articles</td>
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<tr>
<td>The American Journal of managed care</td>
<td>The European Journal of health economics : HEPAC : health economics in prevention and care</td>
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<tr>
<td>PLoS one Open access PubMed Central: after 0 months</td>
<td>Journal of gastroenterology and hepatology</td>
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<td>Digestive diseases and sciences</td>
<td>Journal of Crohn's &amp; colitis PubMed Central: immediately</td>
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<td>Gut</td>
<td>Journal of pediatric gastroenterology and nutrition</td>
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<td>COPD</td>
<td>Journal of postgraduate medicine PubMed Central: after 0 months</td>
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<td>American health &amp; drug benefits</td>
<td>World Journal of gastroenterology PubMed Central: after 0 months</td>
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<td>International journal of rheumatic diseases</td>
<td>Cardiovascular drugs and therapy</td>
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<td>Show articles</td>
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<td>Alimentary pharmacology &amp; therapeutics</td>
<td>Transplant international : official journal of the European Society for Organ Transplantation</td>
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<tr>
<td>Circulation</td>
<td>Scandinavian journal of gastroenterology</td>
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<td>Arthritis research &amp; therapy</td>
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<td>Hide articles</td>
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The confidence score for **Inflammatory bowel diseases** is based on these articles:

<table>
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<th>Similarity</th>
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Explore more in PubMed
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These articles are most similar to your input:

"Background and Aims: The increasing use of biologic therapies in Crohn's disease (CD) and Ulcerative..."

Showing results 1 - 20

<table>
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<tr>
<th>Similarity</th>
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<tr>
<td>[ ]</td>
<td>Mak LY, Ng SC, Wong IOL, Li MKK, Lo FH, Wong MTL, Leung CM, Tsang SCK, Chan KH, Sze SF, Shan EHS, Lam BCY, Hui AI, Hung IFN, Leung WK</td>
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<td>Direct Health Care Cost Utilization in Hong Kong Inflammatory Bowel Disease Patients in the Initial 2 Years Following Diagnosis.</td>
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<td>[ ]</td>
<td>Kamat N, Ganesh Pai C, Surulivel Raja M, Kamath A</td>
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<td>Cost of Illness in Inflammatory Bowel Disease.</td>
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<td>Evolution of Costs of Inflammatory Bowel Disease over Two Years of Follow-Up.</td>
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<td>Health Care Cost Analysis in a Population-based Inception Cohort of Inflammatory Bowel Disease Patients in the First Year of Diagnosis.</td>
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<td>Heaton PC, Tundia NL, Schmidt N, Wigle PR, Kelton CM</td>
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<td>National burden of pediatric hospitalizations for inflammatory bowel disease: results from the 2006 Kids' Inpatient Database.</td>
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<td>Healthcare costs of inflammatory bowel disease have shifted from hospitalisation and surgery towards anti-TNFa therapy: results from the COIN study.</td>
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<td>[ ]</td>
<td>Gut. 2014</td>
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<td>[ ]</td>
<td>Dewan NA, Rice KL, Caldwell M, Hilleman DE</td>
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<td>[ ]</td>
<td>Economic evaluation of a disease management program for chronic obstructive pulmonary disease.</td>
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<td>[ ]</td>
<td>COPD. 2011</td>
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<td>[ ]</td>
<td>Jose JV, Jose M, Devi P, Satish R</td>
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<td>[ ]</td>
<td>Pharmacoeconomic evaluation of diabetic nephropathic patients attending nephrology department in a tertiary care hospital.</td>
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Metric Trend: Value in Health

Metric Trend

Journal Impact Factor

<table>
<thead>
<tr>
<th>JCR Years</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
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<tr>
<td></td>
<td>2.191</td>
<td>2.891</td>
<td>3.279</td>
<td>3.824</td>
<td>4.235</td>
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</table>
Metric Trend: International Journal of Technology Assessment in Health Care

Metric Trend

Journal Impact Factor

<table>
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<tr>
<th>JCR Years</th>
<th>2012</th>
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<tbody>
<tr>
<td></td>
<td>1.551</td>
<td>1.556</td>
<td>1.308</td>
<td>1.03</td>
<td>0.912</td>
</tr>
</tbody>
</table>

View All Years
What upsets editors and reviewers?

- You have not followed the guidelines for submission
- Poor writing style and English language usage
- Every study has limitations so please acknowledge and address them in your discussion section
- You have not cited the reviewers’ work or/and your references are not up-to-date
What to do if your manuscript is rejected?

- Don’t worry, be happy…

- **Rejected without review**
  - Have a plan where to submit next and resubmit as fast as you can
  - The editor may suggest to transfer your manuscript to a different journal
  - Modify the manuscript according to the (new) journal’s instructions

- **Rejected after review**
  - Have a plan where to submit next
  - The editor may suggest to transfer your manuscript to a different journal
  - Are the comments made by the editor and reviewers helpful?
  - Modify the manuscript according to the (new) journal’s instructions
  - Prepare a point-by-point letter of response (for your own purposes)
What to do if you are asked to revise & resubmit?

- These are usually good news…
  - Not all suggestions made by the editor and reviewers will improve your manuscript
  - Prepare a **detailed** point by point letter of response
  - Modify the manuscript and resubmit
  - A second or third revision may be needed
And if your manuscript is accepted?
Thank you for attending

Q & A