EDITORIAL

Changing cycles: the necessary rupture to achieve excellence

Transformando ciclos: a ruptura necessária para atingir a excelência

The Editor in Chief of this publication, professor Wilma Terezinha Anselmo Lima, gave me a very exciting and challenging assignment: write an editorial for our beloved BJORL. By accepting this call, I’ve been invaded by an understandable, however ephemeral, sense of pride and satisfaction. Very quickly, however, my feelings were redirected when I realized the huge responsibility embedded in the proper fulfillment of this task: clearly convey to our remarkable set of readers the outlines of how I think science and, more specifically, in its process of construction, propagation, and application. Similarly, after much thought, I decided that I should not use this valuable space for self-indulgent and boastful considerations. No. It would be more than compelling, even urgent (for me), to share with readers and contributors many of my concerns about fundamental issues involved in the progress of this process.

We are living a special moment in Brazil, with marked fluctuations and changes setting new rhythms in all spheres of national life: politics, economy, health, and education. Some of these fluctuations do not always orbit in the direction desired or expected by us. While it is undeniable that we have advanced considerably in various sectors, it is also a fact that some of the most important structural reforms established their foundations on land with a consistency at least debatable. Unfortunately this seems to be the case in two of the most critical segments for all of us and certainly most important to us as a medical association: health and education.

Without generalizing, we could easily identify a series of actions triggered in recent years that, at best, would disguise frankly shameful and unfavorable numbers to the country. It seems that the Brazilian strategic planning was little ambitious in setting its goals in these areas while abdicating the standard of excellence we all wished, setting it at levels far below what we dream of and deserve. The general impression is that we must content ourselves with what is reasonable, not optimal, with what is possible, never ideal. Eternally condemned to have a median, average life or, let’s be clear, bordering on mediocrity! Well, as members of an intellectualized, politicized, and very informed professional class (after all we live directly with the ills generated by these guidelines) we can identify these distortions and are among the first to forcefully denounce it, pointing out probable causes and potential culprits.

In short, we are able to cast a critical eye over the country and easily trace the inventory of some of our round failures!

The curtain comes down: end of the first act. The curtain goes up again, I invite you to migrate from the stage: from the national macroenvironment to our particular niche of expertise: our sacred office, our valued specialty, and our thriving membership. And a very inconvenient question emerges: Have we used these same stringent criteria to judge our own everyday actions and “internal economy” matters? As an organized society, have we sought the assistance and academic excellence that a priori would depend, not exclusively, but on much of our own effort and commitment? In the healthcare plan, there is no doubt that this country otorlaryngology has grown and matured those dedicated to its practice as specialists. The monumental work of fellow Brazilians catapulted the specialty relevance in the national medical setting and, extrapolating the boundaries, turned our supra in global references! Academically, we also collect achievements. Just to name a few, we published for decades a respected and concurred scientific journal in two languages, edited the most ambitious and comprehensive compendium of the world, held a series of pioneering activities in continuing medical education, and were pioneers in the development of programs aired via internet (performing with great success three congresses integrally transmitted

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1808-8694/© 2014 Associação Brasileira de Otorrinolaringologia e Cirurgia Cérvico-Facial. Published by Elsevier Editora Ltda. All rights reserved.
by the global network). Our events are among the busiest and most prestigious in the world and we impeccably organized a world congress! Does that mean everything is okay? Absolutely NOT! I still think that we are far, very far from ideal... Indeed, this is not my opinion, but a fact based on numbers. Namely, our greatest scientific showcase, the BJORL, despite the Herculean efforts of its editors and collaborators over the years, still has problems. We entered the PubMed in 2005 (just for the record, PubMed is a database for searching medical articles, which gathers about 4000 scientific journals). Six years later (2011), we were indexed by the Institute for Scientific Information (ISI). It is important to mention that this step was extremely important for two temporal aspects: (1) retrospectively, this step was extremely important because it attests and takes into account the editorial quality of the journal (for a journal to integrate this database it must meet many requirements such as timeliness, publishing within international standards, peer review of papers to be published, among others); (2) prospectively, it enables its parameterization with other journals from the calculation of its (IF), once only journals indexed by ISI are considered for this calculation. The IF is a measure reflecting the average number of citations of scientific articles published in a given journal. It is used to evaluate the importance of a given journal in its field, and those with a higher IF are considered more relevant than those with a lower IF. Its value is obtained by dividing the total number of citations received by the articles accumulated over the past two years by the total number of articles published by the journal during that respective time. Two years later (2012), we had our first impact factor measured (0.545), and in 2013, it come to 0.623; i.e., we are growing, or rather, appearing (as we have more citations). Although we are the only Latin-American medical journal in our specialty that has an IF, we must evolve and much; after all, being the vanguard of the backwardness seems to me a needless consolation prize! Poorly comparing, the journals with the highest impact factors in 2011 were the Nature (36,280) and Science (31,201)! At the same investigation, only sixteen Brazilian journals have an IF equal to or over 1.0. It is important to note, however, that given the nature of the IF calculation, it should only be used for the comparison of journals with the same vocation, and it would at least be unfair to compare the IF of a general science journal (with a huge number of readers) with a journal of specialty! Still, although our journal carries the stamp celebrating its 80 years, it is still crawling scientifically and our maturity, or rather our longed-for adulthood is yet to come. The challenges to get there are of several orders and spheres. Perhaps our biggest obstacle is overcoming what I use to call a "wicked vicious cycle". But let's see the facts:

1. Our dear BJORL still has a low IF requiring continuous submission of articles of much greater value to prosper.
2. The main national sources of clinical and experimental trials (and, consequently, potential quality papers) are the postgraduate programs from our top universities that bring dozens of new dissertations and theses each year.
3. These programs, in turn, increasingly charged by higher university instances, are scored by our funding agencies after a thorough analysis of a series of questions. Among which, the number of papers published by the group (students and mentors) in journals of high prestige and obviously high impact factor stands out.
4. Pressed by circumstances, there is no alternative left to the researchers other than to direct their best publications to journals of more robust academic scale, generating a negative feedback loop where the stronger are becoming more toned and the weaker fading and languishing.

As we can easily see, we are in a critical situation which, incidentally, had already been addressed by our former Editor-in-Chief Professor Ricardo Ferreira Bento in an incisive editorial published in March 2013. There Professor Ricardo has reminded us: The university and government research institutions and postgraduate programs, such as CAPES and CNPq, are insensitive to the argument that the impact index within the area is the most important and it is necessary to publish as other ORL researchers in the world. These boards insist on wanting to associate us with other basic and clinical areas that publish in vehicles with greater impact, inherent to their specialties. As the saying goes, make ducks and drakes of everything.

Well, those are the rules of the game. Given this paradox, the following questions remain: Is it possible to break this vicious cycle? What is the best way to make this break? Discussing these issues with a group of professors of graduate studies in medicine at the Federal University of Rio Grande do Sul, we envision some possibilities: the first would be to promote and consolidate new groups of Brazilian researchers with solid and sustained international integration. These groups along with our traditional academic vectors could operate as the Brazilian otolaryngology new strikers in the global publishing market. Once obtaining the notoriety, the next move would be to redirect the focus of generous portions of their publications to the domestic market with the certainty of attracting waves of readers and researchers already loyal for its excellence.

A second approach would be to follow the example of medical schools as Ribeirão Preto and trigger a national process of stimulating and fostering basic research in the specialty. In this sense, I am an enthusiast of the interdisciplinary research. Our postgraduate programs should host anatomists, physiologists, geneticists, biochemists, and ultimately, professionals who analyze the same problem on different perspectives. Inserted in this context is the need to obtain the commitment of our best postgraduate programs of sharing with the BJORL large pieces of the cutting edge work generated there. These attitudes, however, would be of no use if we, as a scientific journal, do not do our homework and raise our level of demand increasingly to superlative heights. Stay united around the ideal we strive for; join efforts in fulfilling our goals. Contaminate our editorial staff with the virus for total quality. Anyway, we pursue, as a whole, obstinately our vision of excellence. However, we are aware that such processes are not produced in a day, in a single month or year. Rather, they require decades of work, effort, and dedication. Still, it seems that the shortest way to measure good results in the short term goes through our editorial board awareness and training (actions that, incidentally, has already been undertaken in recent years). A more rigorous and demanding selection of articles to be published will have a direct and immediate impact on both
the numerator and denominator of the IF equation calculation. More quality papers (simultaneously increasing the citation index) over a smaller overall publication base . . . and the rest is up to the math . . .

This leap in quality is only possible with the obstinate engagement of all! As a result of this effort, a more qualified and accurate product certainly will emerge, much closer to that which we dream. Colleagues, as I approach the closing of this editorial, I thank you for your attention and patience to read this far. All who know me well are aware of my deep enthusiasm for our field. If my comments today are a bit more acidic it is because I believe that our ABORL-CCF is mature enough and ready to face much greater challenges. Welcome criticisms are those that are accompanied by proposals for affirmative solution and action! The responsibility for these transformations, both in the assistance (less) and academic (more) sphere exclusively belongs to each of us . . .

No outsourcing, no finger pointing! We have to materialize, individually, all of these changes that will make us stronger and stronger or, otherwise, everyone will lose as a society. This dream, yes, it is tangible. Our view, yes, it is excellence! But the mission will only be complete when we finally have the rupture that will transform this pernicious vicious cycle into an eternal virtuous cycle.

**Conflicts of interest**

The author declares no conflicts of interest.

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