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Journal Interviews : 2009 : Clinical Gastroenterology and Hepatology - Interview

JOURNAL INTERVIEWS - 2009

January 2009



Clinical Gastroenterology and Hepatology

A Featured Journal from *Essential Science Indicators*SM

According to a recent analysis of Essential Science Indicators data from Thomson Reuters, the journal *Clinical Gastroenterology and Hepatology* (CGH) achieved the highest percent increase in total citations among journals in the field of Clinical Medicine. The journal's current citation record in this field includes 653 papers cited a total of 4,414 times between January 1, 1998 and August 31, 2008.

CGH is the official clinical practice journal of the American Gastroenterological Association (AGA) Institute, and is published in partnership with Elsevier.

In the interview below, ScienceWatch.com correspondent Gary Taubes talks with CGH's Editor-in-Chief, Dr. C. Mel Wilcox, about the journal's publication history and citation record.

SW: When was CGH founded and what was the motivation?

CGH has a sister journal called *Gastroenterology*, which is the premiere GI journal in the field of digestive disease and has been published since 1943. Although *Gastroenterology* contains both basic and clinical research, many of the members of the society that publishes the journal—the American Gastroenterological Association (AGA)—thought that the journal did not have enough clinical material for the practitioner. To that end, the AGA leadership decided to develop a new journal that's strictly clinically based. As a result, CGH was launched.

Now, over seven years later, AGA members receive both *Gastroenterology* and CGH and there is a general consensus that the needs of our diverse membership are now better met.

SW: Are you surprised by how well the journal has done, how quickly it has risen in citations and impact factor? And what factors do you think explain it?

I always knew that CGH was a high-quality publication that provided practical and applicable content for our physicians. What I didn't know was how often the content was being cited. So, in that sense, I guess I was somewhat surprised by our first impact factor. Now that we have an impact factor, I'm curious to know how our submissions will be affected. My sense is that the impact factor is especially important to our European colleagues. So I think that a lot of people from overseas didn't send papers in to us for the first several years because we didn't have an impact factor yet. Now we can see if having an impact factor makes a difference in the next few years. Our submission volume seems to have picked up a little already.

I also believe that since CGH is published by such a prestigious society that authors

are more likely to submit their manuscripts to the journal and that those manuscripts tend to be of a very high quality and citable.

SW: How do the editors make their decisions about whether a paper should be published in *Gastroenterology* or *CGH*?

In *CGH* we publish research that is immediately applicable to practicing physicians—content that can be used in the clinic or as teaching points. Research that is not quite ready for the clinic is more appropriate for *Gastroenterology*.

SW: Are there any particular advances in the field that might have driven the increase in citations?

What seems to drive citations, and I think this is the case for most journals, are timely and thoughtful reviews. We've published a number of reviews on inflammatory bowel disease and hepatitis that were very popular and highly cited. But I'd like to emphasize that we don't focus strictly on publishing articles we think will be highly cited. We try to give our readers articles that we think will be useful, irrespective of how often those articles may be cited. We have a section, for instance, that we call "Education Practice," in which authors present a case and teaching points. We also have "Images of the Month," which can also be used as teaching points. People learn from these articles, but they are never highly cited. Our objective is to not only rank highly among the journals in our field, but to also provide compelling content to our diverse readership.

"We try to give our readers articles that we think will be useful, irrespective of how often those articles may be cited."

SW: How has *CGH* evolved and changed in the seven years it's been around?

I don't think it's changed very much at all. We really haven't deviated much from the initial concept that was developed by Dr. Camilleri and his group. We have added a section called "Perspectives"—one author's viewpoint on a certain issue. We hope this section provides a venue for experts to write about something clinically based that readers will find interesting. We have encouraged more endoscopy submissions; that's something of interest to clinicians. We have added a section called "Endoscopy Corner," so clinicians who are interested in endoscopy can find related content easily.

"...we're only as good as the material submitted to us and the reviewers who review it."

We also redesigned the cover, making it more scientifically compelling and visually interesting. It now looks similar to *Gastroenterology*, so you can tell the journal is from the same association. That's more branding, though, rather than any major transformation in content or mission.

SW: What do you see as the future of the journal?

I expect that we'll continue to receive high quality submissions. As I like to tell people, we're only as good as the material submitted to us and the reviewers who review it. One trend we hope continues is to receive and publish more papers from abroad since we consider ourselves an international journal. There's a lot of good science going on outside of the United States, and more than half of our submissions come from overseas.

I also see *CGH* becoming the number one journal exclusively dedicated to publishing clinical information for healthcare professionals in the field of digestive disease, surpassing our current competitors. Physicians will turn to *CGH* for cutting-edge information that they can apply immediately to their practices.

SW: Are there significant controversies affecting your journal or field at this time?

One that comes immediately to mind is the emerging controversy over the best treatment for inflammatory bowel disease. Do you use biological agents first or some of the more standard agents? This is the whole top-down versus top-up approach. We've published some studies recently addressing this issue.

SW: What's your approach to maximizing the quality of the papers submitted to the journal?

We published only the highest quality content, so we hope that sends a message to the authors to submit only their best work. Also, all manuscripts submitted to *CGH* undergo rigorous peer review—authors know that their work must stand up under the critical appraisal of experts in the field. We have also established a process with the editors at *Gastroenterology* whereby manuscripts that are not a good fit for their journal are fast-tracked to our journal. Those manuscripts have already been reviewed and revised, thus maximizing the quality of the content ultimately submitted to *CGH*.

SW: What would you like to convey to the general public about your journal's work?

Patients should know that their digestive disease healthcare professionals are being educated by high-

quality research published in *CGH*. They can rest assure that thanks to the content in our journal, their doctors, nurses, physicians assistants, and other professionals will provide them with the best care possible. ■

Clinical Gastroenterology and Hepatology

C. Mel Wilcox, Editor-in-Chief

Published by the AGA Institute in partnership with Elsevier

Clinical Gastroenterology and Hepatology's current most-cited paper in Essential Science Indicators, with 104 cites:

Keeffe EG, *et al.*, "A treatment algorithm for the management of chronic hepatitis B virus infection in the United States: an update," *Clin. Gastroenterol. Hepatol.* 4(8): 936-62, August 2006. Source: *Essential Science Indicators* from Thomson Reuters.

Keywords: clinical practice, gastroenterology, hepatology, American Gastroenterological Association, sister journal, impact factor, endoscopy, international papers, clinical journal, inflammatory bowel disease, review process.



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