

## Changes to EJOI author guidelines for 2013

Starting next year we are going to implement a few changes in order to comply with the criticism I have received.

**Criticism 1:** A manuscript submitted to *EJOI* can be rejected after a very short period without going through a formal peer-review process.

Yes, it is true. Some manuscripts are rejected before going through a formal peer-review process. This is a normal procedure adopted by the majority of scientific journals and has two major advantages: 1) submitting authors of rejected manuscripts will receive a quick reply, so they will be able to submit their manuscripts to other journals without wasting time, 2) EJOI editors and referees are not overloaded with unnecessary work. One of the biggest problems for scientific journals is to find a sufficient number of competent referees willing to invest what little spare time they have in a time-consuming unpaid job. Their only satisfaction is the pleasure of reading a well-conducted study. We are not going to change this procedure since it is very efficient with time and allows a rapid publication speed, but this procedure will be better explained in the guidelines for authors.

**Criticism 2:** Manuscripts rejected immediately do not receive an explanation for their rejection.

Yes, it is true. So far only those authors who requested the reasons for the rejection received an explanation. In order to improve this aspect we have decided to change our rejection letter by adding boxes that will be ticked to provide an explanation. Multiple rejection reasons can be ticked. These boxes will be:

- Incorrect study design to answer the question of the study
- Biased/incorrect hypothesis
- Manuscript not relevant for the clinical practice
- Poor language (unable to fully understand the manuscript content)

- Case report used to describe a technique claiming efficacy
- Data already presented
- Too small sample size
- Too short follow-up
- Lack of relevant clinical outcome measures
- Biased or insufficient data presented
- In vitro or animal study judged not to have reliable clinical implications
- Author guidelines not followed.

**Criticism 3:** Manuscript selection may appear biased.

Please be assured that manuscript selection is exclusively based on the quality of the individual manuscripts, independent of the identity of the submitting authors, country of origin, brand of the materials used or results. Any well-conducted clinical research related to implant dentistry and related disciplines will be published in EJOI. Authors must have used the correct study design to answer their questions and data must have been reported honestly and in a transparent manner. EJOI editors were accurately selected for their proven specific scientific competence, intellectual honesty and objectivity in evaluating scientific data. It is possible that not everybody will agree with all decisions and anybody can make a mistake since there are no absolute rules when evaluating scientific information. However, we are doing our best and also helping those authors who have presented valuable material in a form that can be improved.

**Criticism 4:** There is a disproportion in published manuscripts with some authors over-represented in *EJOI* (this was especially referring to myself).

Yes, it is true, on the other hand this reflects our activities. While I devote all my time to clinical research, many other authors may not have sufficient time to write so many manuscripts. In addition, I would feel uneasy submitting manuscripts,

conceived in accordance with *EJOI* philosophy, to competitor journals. All manuscripts (including those written by me) are peer reviewed in the same way and I never had a manuscript accepted immediately but always after more or less substantial revisions. Please be assured that if Dr X sends me six excellent manuscripts, they will all be published in the first available issue. So there will never be a fixed quota for authors, countries or topics. The most reliable manuscripts will be published, regardless of where they come from.

I have some additional observations. Over the last several years, I found out that a relevant number of articles have been presented in prestigious journals as randomised controlled trials (RCTs), however when reading these publications or asking the authors, it was soon realised that these trials were not randomised. Since nowadays an RCT may have a better chance to be published (this is a good thing), a few authors started to 'transform' their controlled (sometimes even retrospective) studies into RCTs by using the magic word 'randomised'. This is undesirable since those trials remain biased because pati-

ents did not have the same chance to be treated according to the different treatment modalities under evaluation. I understand but do not agree with the motto 'publish or perish' that colleagues working at universities have to accept, since the number and quality of publications are important parameters for their career advancement.

In order to minimise the risk of publishing studies with 'dubious' information, starting next year, *EJOI* editors will have the option at their discretion to request the submitting authors' original data including radiographs, pictures, etc., in order to independently verify the manuscript content. Failure to provide the requested information will result in immediate rejection of the manuscript. In addition, authors or co-authors who have published data that has been proven to be falsified will be banned from publishing in *EJOI* indefinitely.

Happy New Year!

Marco Esposito Editor-in-Chief