

EDITORIAL

AVOIDABLE MORTALITY OF SCIENTIFIC MANUSCRIPTS

Colombia Médica publishes 64% of the original research articles submitted to editorial process, which highlights the rigor of the editorial review system; while at the same time, generating a reflection on the causes for rejecting material submitted for publication as an input for the Journal's collaborators.

The review of the file of articles rejected by the Journal leads us to arbitrarily discriminating the causes for rejecting scientific documents into two groups: A first group we will call «*lost causes*», which centers on the lack of ethical evaluation, research design flaws, and plagiarism. And the second group, «*manuscripts with avoidable rejection*», which includes deficiencies in following the editorial guidelines for authors, inadequate writing, and delays by authors in submitting answers to observations raised during an initial evaluation. Documents classifying in the latter group could have had an opportunity with a bit of joint effort between the authors and the editorial board; and in all cases, by correcting errors and seeking support from, among others, expert consultants, these could, potentially, be revived by submitting them to a journal with a lower impact than that in which they were rejected.

Among the reasons for the lost causes, we find that faults in the structure of institutional research take up considerable space. Institutions considering scientific production as one of their assets, must invest on the conformation and growth of an ethics committee on research that reasonably provides researchers with social, environmental, and ethical reflection elements to enrich research proposals. With bioethics foundations, Colombian and international norms do not consider other forms of ethical evaluation of the projects, and; consequently, neither does the Editorial Committee. Furthermore, anyone seeking to conduct clinical trials must register the entity in any of the international data bases that permit inputting the protocols for clinical tests and obtaining the registry required by scientific journals¹. This first support fosters an institutional research environment and allows researchers to promote their proposals and results among scientific circles.

Design flaws may be considered the most disturbing

causes of rejection, because there is no way of fixing an ill-conceived project and because these flaws express lack of knowledge of the state-of-the-art on the topic or on the research methodology. The poor definition or absence of a hypothesis and an objective, inadequate sample size, vulnerable variables of the measuring system, among others, seriously hinder the research product.

Plagiarism has no editorial solution and warrants discussion on another occasion.

Continuing with the second group, deficient adherence to guidelines leads to avoidable rejection of the manuscript being edited. The selection of the journal to which the manuscript is submitted means the author accepts the instructions defined by the editorial board and considers that the journal has the experience to suitably judge the work presented. Generally, author's guidelines are rigid and particular for each publication²; hence, it is ideal to decide on the journal in which publication is sought and draft the manuscript based on its instructions. Writing the text and then seeking the journal in which to publish creates conflict between some researchers and the journal; it also places burden on the editorial process, which leads to suspension due to a simple matter of form. Along with the aforementioned, some manuscripts may meet the Editor's standard of quality, but the Editor -bearing in mind the needs of the readers, the types of topics the journal is interested in publishing, and the scientific relevance with respect to other topics- may return the document when the topics are excessively specialized or very tangential with respect to the journal's habitual contents³.

Abandonment by the authors of their work during any of the editorial phases should not occur. Elaborating a manuscript to be submitted for publication requires time; nevertheless, accepting or discussing evaluating peer observations and sending a corrected version requires dedication, proportionally smaller, when compared to the initial effort. Editorial processes contain a high degree of critique and this should not offend the authors; there is also no limit number of versions when we are seeking for the best possible document. A useful

attitude for this editorial phase is to delegate, from the very beginning, a leader responsible in following the document's progress; the natural choice here is the author who wrote the manuscript to maintain the style and for said individual to coordinate the changes made with the other collaborators. The editorial board will always be available to address questions or discuss any aspect of the elaboration of the final draft of the document.

Deficiencies in composition are part of the natural course of learning how to write. Higher education is focused on the student understanding a written text, not on the student drafting such and formation processes in this aspect for researchers in the field of health are almost nonexistent. Writing requires a mentor and dedicated practice. For this reason, we will suggest consulting the work of Cassany⁴ an expert guide on writing construction.

Lastly, there are virtues that avoid editorial mortality. Recognizing oneself as an imperfect writer promotes the practice of reviewing our texts amongst peers, even

among those not involved in the issue; if they understand what we write, we are improving. We should remember that the worst manuscript is the one we never get to write and that only those who have never written scientific articles have never had a manuscript rejected.

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