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Editorial

Peer review and publication delay

Abstract:

Selecting peer reviewers is a crucial stage of the editorial process that ensures the quality of scholarly publications. An alternative to selecting peer reviewers from data bases created with expressions of interest of volunteers consists in systematically searching PubMed for similar articles and inviting their authors to act as peer reviewers. Although this process might identify more appropriate peers, it also can increase the time of the editorial process. In 2018, Pharmacy Practice had to invite 4.70 (SE=0.33) potential reviewers per one accepting. The time from the first reviewer invitation to the last reviewer report received was 61 days (SE=2.1). These figures confirm the existence of a peer review crisis which is significantly increasing the publication delay.

Keywords: Peer Review, Peer Review, Research; Open Access Publishing; Periodicals as Topic

Despite the efforts that some publishing platforms are devoting to convince researchers about the convenience of eliminating pre-publication reviews, these pre-publication peer review externally-done process continue to be the gold-standard in scholarly publication. However, we have to recognize that the peer review crisis does exist. Some optimistic editors in the early 2010s refused to accept the facts, reporting that the proportion of reviewers invited per accepting reviewer increased only from 1.38 (SE=0.02) in 2001 to 2.03 (SE=0.05) in 2010.¹ Conversely, other editors started recognizing the increasing difficulty recruiting peer reviewers, with an increase from 1.8 (SE=0.07) attempts to obtain an acceptance in 2008–2011 to 2.3 (SE=0.13) in 2014–2016, and 15% papers requiring more than 8 invitations.² Many alternatives to the traditional external peer review have been suggested, but their efficiency could not be demonstrated.³ But, more importantly, their influence in evidence-synthesis has not been evaluated at all. Should we include an article uploaded to a pre-print repository in a systematic review or a meta-analysis, before a sufficient number of post-publication reviews have been performed?

In 2018, Pharmacy Practice publicly recognized suffering from the peer review crisis. During 2018, Pharmacy Practice invited 879 potential peer reviewers, but only 198 (22.5%) accepted the task. This means that Pharmacy Practice invited 4.70 (SE=0.33) potential reviewers per one accepting. Additionally, 15 reviewers who accepted to review a paper did not deliver the review report. Peer reviewer selection process performance indicators in Pharmacy Practice seem to be quite below the two aforementioned journals. In fact, after the complete automation of the editorial process, selecting peer reviewers became the most time-consuming task in Pharmacy Practice's editorial process.

Pharmacy Practice editorial board started an in-depth analysis of the causes and potential solutions to solve this problem, while ensuring maintenance of high quality standards. Many journals created reviewer databases using the expression of interest received to act as a peer reviewer. Commonly, these databases use candidate-reported keywords as a means to identify areas of expertise to facilitate manuscript assignment. Criticisms regarding the poor quality of peer review reports received are frequent. Every researcher has personal anecdotes about their experience with peer reviewers' reports. One of my systematic reviews was rejected in a journal based on a reviewer's report that criticized our selection of bibliographic databases. The reviewer asked why we have not used Medline or Embase, when we had reported using PubMed and Scopus. In 2013, and to avoid the potential excessive self-esteem of spontaneously offered reviewers, Pharmacy Practice established a systematic peer reviewer selection process based on searching similar articles on PubMed and identifying the authors of those articles as the hypothetical best reviewers for the new manuscript. This selection process involves inviting researchers that have previously volunteered to serve as reviewers for the journal, which may partially explain the lower acceptance rate in Pharmacy Practice.

An immediate consequence of the number of failed review requests is the increased publication process time. During 2018, Pharmacy Practice original research articles obtained the first response after peer review comments in 92 days (SE=5.7). The time from the first reviewer invitation to the last reviewer report submission was 61 days (SE=2.1). As major aim for 2019, Editorial Board have established the reduction in the time to make decisions, which means reducing the about 30 days that currently takes to: a) decide sending the manuscript out for peer review or desk-reject it; and b) analyze peer reviewers' reports received to decide whether manuscript modifications could make the article acceptable. Reducing the remaining 61 days will depend on our ability to convince pharmacy practice researchers that acting as a peer reviewer is probably the most important part of a collaborative publishing scheme.

Pharmacy Practice 2018 peer reviewers.



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Following the tradition initiated last year, Pharmacy Practice is pleased to recognize the contribution to the journal of those who served as reviewers, and reward their efforts by publishing the first editorial of the year with a collective authorship including all the reviewers that contributed during 2018.

Pharmacy Practice 2018 peer reviewers

Two reviews:

Rana K. Abu Farha, Applied Science Private University, Jordan Mohamed E. Amin, Manchester University, United States Suleiman I. El-Sharif, University of Sharjah, United Arab Emirates Shazia Q. Jamshed, Universiti Sains Malaysia, Malaysia Emily Peron, Virginia Commonwealth University, United States Jarred Prudencio, University of Hawaii, United States Naser Y. Shraim, An-Najah National University, Palestine Henok G. Tegegn, University of Gondar, Ethiopia

One review:

Mera Ababneh, Jordan University of Science and Technology, Jordan

Fernanda S. Tonin, Federal University of Parana, Brazil

Monica Zolezzi, Qatar University, Qatar

Hani Abdelaziz, Barnabas Health, United States Samirah N. Abdu-Aguye, Ahmadu Bello University, Nigeria Molla Abebe, University of Gondar, Ethiopia Wuraola Akande-Sholabi, University of Ibadan, NIgeria Sarah Alameddine, Nova Southeastern University, United States

Saeed K. Alzghari, Gulfstream Genomics, United States
Xavier Armoiry, Lyon University Hospitals, France
Isabelle Arnet, University of Basel, Switzerland
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Minyon Avent, University of Queensland, Australia
Ahmed Awaisu, Qatar University, Qatar
D. Rhys Axon, University of Arizona, United States
Hafiz A. Aziz, University of Queensland, Australia
Marion Bennie, University of Strathclyde, United Kingdom
Harika Bheemavarapu, Talla Padmavati College of Pharmacy,
India

Susan J. Blalock, University of North Carolina, United States Helena H. Borba, Federal University of Parana, Brazil Alisha J. Bradley, Phoebe Putney Memorial Hospital, United States

Cecilia Brata, University of Western Australia, Australia Oscar Breukels, Meander Medisch Centrum, Netherlands Emily J. Cameron, Dalhousie University, Canada Jean T. Carter, University of Montana, United States Jamie J. Cavanaugh, University of North Carolina at Chapel Hill, United States

Leanne Chalmers, Curtin University, Australia
Farid Chekani, University of Houston, United States
Brooklyn T. Cobb, University of the Sciences, United States
Anwen L. Cope, Cardiff University, United Kingdom
Marco Cosentino, University of Insubria, Italy
Philip J. Crilly, Kingston University, United Kingdom
Fatemeh Dabaghzadeh, Kerman University of Medical
Sciences, Iran

Saibal Das, Christian Medical College & Hospital Vellore, India Michael J. Davies, Liverpool John Moores University, United Kingdom Hans De Loof, University of Antwerp, Belgium

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Marlise A. Dos Santos, Universidade Católica do Rio Grande
do Sul, Brazil

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