

What is the purpose of launching the *World Journal of Nephrology*?

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Abstract

The launch of the *World Journal of Nephrology (WJN)* has distinct purposes. Its main purpose is to incorporate the fields of diabetes, hypertension, urology, cardiology and neurology, which are related to kidney disease, and to make all of our readers, contributors and allied health professionals feel at home with the *WJN*. The *WJN* aims to rapidly report new theories, methods and techniques for prevention, diagnosis, treatment, rehabilitation and nursing skill in the field of nephrology. The *WJN* will cover diagnostic imaging, disorders of kidney development, renal obstruction, atrophy and regeneration, kidney tumors, renal pharmacology and therapy, renal replacement therapies including transplantation, and Chinese herbal medicine. The *WJN* issues will include an editorial, frontier, invited review of articles and commentaries in addition to original articles submitted. The *WJN* will solicit articles from investigators in areas of diabetes and hypertension, and high priority will be given to those articles with an emphasis on the prevention of dialysis. Final decision for publication will be based on the merit of the article, language and lucidity.

INTRODUCTION

I am Anil K Mandal, MB, BS, FACP, FCP, FASN, Professor from Medical Specialists of Northeast Florida, United States (Figure 1), together with Professor Josep M Campistol from the University of Barcelona, Spain, we will be the co-Editor-in-Chief of the *World Journal of Nephrology (World J Nephrol, WJN)*, online ISSN 2220-6124, DOI: 10.5527). I am very pleased to announce that the

first issue of the *WJN*, on which preparation was initiated on February 14, 2011, is officially published on February 6, 2012. The *WJN* Editorial Board has now been established and consists of 103 distinguished experts from 30 countries. I feel obliged to convey my heart-felt appreciation to Professor Lian-Sheng Ma, President and Editor-in-Chief of the World Series of journals, and the members of the editorial board of *WJN* for bestowing this honor on me.

By virtue of the duties ascribed to this position, I have the arduous task of composing the inaugural editorial. At the outset, I ask an important question, "Why do we need another nephrology journal when there are already 30 in the market?" In answer, we can look at the focus of those other 30. Only four of them have a clinical focus^[1] and only a few are produced independently. Most of the nephrology journals, like other journals, are produced by different societies. The aim of these journals is to offer its services as an efficient vehicle for the international dissemination of scientific information. In the narrowest sense, the term nephrology relates to the diagnosis and treatment of kidney diseases in man. Nevertheless, the art and science of nephrology are derived from a clinical mixture of information from several scientific disciplines, as well as experimental evidence whose immediate relevance in the practice of nephrology may have seemed less important at the time. According to Dr. RR Robinson, a nephrology journal should be multidisciplinary and sufficiently broad to be termed "kidney-oriented" at least. A commitment to accommodate a heterogeneous group of individuals with divergent interests, talents and research background poses a real challenge to the editor of any categorical journal; the clinical nephrologist, the clinical scientist and the basic scientist must be made to feel at home among its pages^[2].

Thus, the intention of a society's journal is good but its fulfillment is imperfect. Pitifully, the delivery of the intention by the editor and the editorial board is often influenced by factors outside of the scientific merit of the work submitted for publication. There are often various types of bias at work in the decision making process. As a result, many good articles are not published while many mediocre articles are printed.

Great articles on renal physiology, pathophysiology, pathobiology or epidemiology, and pathophysiology of diabetes were published in the 1960s, 1970s and 1980s. These types of articles are relevant to improve our knowledge and understanding, thereby helping us to develop improved strategy and deliver better care to renal patients with a goal of prevention. Briggs and Hostetter have stated that, despite the impressive strengths of renal epidemiology, the evidence base for many of the important clinical questions that nephrologists face remains inadequate^[3].

Over the years, the cost of publication has skyrocketed and thus many nephrology societies are taking the financial help of pharmaceutical companies to maintain their journal services. As a result, journal pages are crowded with clinical drug trials, almost completely

replacing articles on water and electrolytes metabolism or acid base disorders which are far more common in the everyday practice of nephrology. Often, one third to one half of a journal's content is concerned with drug therapy rather than scientific findings of cause and / or prevention.

The opening editorial of the *Clinical Journal of the American Society of Nephrology (CJASN)* clearly states that much important work on the treatment of kidney disease is sponsored by the pharmaceutical industry. There is much work to be done and clearly a role to be played by the *CJASN*, but one hope for our new journal is that, by contributing to improvements in renal clinical trial methods, we can help to increase pharmaceutical interest beyond expensive drug therapies^[3].

AIMS AND SCOPE

It is now my responsibility to reveal to our readers why this new journal has come to be. Our main purpose is not to compete head to head with other nephrology journals, but to incorporate the fields of diabetes, urology, cardiology and neurology, which are related to kidney disease, and to make all of our readers, contributors and allied health professionals feel at home with the *WJN*. While society members receive journals free of cost, the majority of allied health professionals must subscribe at a high price which limits the readership. The information readily available online also contributes to a rapidly vanishing need for books and journals. One important objective of the *WJN* will be to make our articles available online in an economical manner.

The *WJN* aims to rapidly report new theories, methods and techniques for prevention, diagnosis, treatment, rehabilitation and nursing in the field of nephrology. The *WJN* covers diagnostic imaging, disorders of kidney development, renal obstruction, atrophy and regeneration, kidney tumors, renal pharmacology, therapy of renal disease, hemodialysis, peritoneal dialysis, kidney transplantation, traditional medicine, integrated Chinese and Western medicine, evidence-based medicine, epidemiology and nursing. The journal also publishes original articles and reviews that report the results of applied and basic research in fields related to nephrology, such as immunology, physiopathology, cell biology, pharmacology, medical genetics and pharmacology of Chinese herbs.

CONTENTS OF PEER REVIEW

In order to guarantee the quality of articles published in the journal, *WJN* usually invites three experts to comment on the submitted papers. The contents of peer review include: (1) whether the contents of the manuscript are of great importance and novelty; (2) whether the experiment is complete and described clearly; (3) whether the discussion and conclusion are justified; (4) whether the citations of references are necessary and reasonable; and (5) whether the presentation and use of tables and figures are correct and complete.

COLUMNS

The columns in the issues of the *WJN* will include: (1) Editorial: to introduce and comment on major advances and developments in the field; (2) Frontier: to review representative achievements, comment on the state of current research and propose directions for future research; (3) Topic Highlight: this column consists of three formats, including (A) 10 invited review articles on a hot topic, (B) a commentary on common issues of this hot topic, and (C) a commentary on the 10 individual articles; (4) Observation: to update the development of old and new questions, highlight unsolved problems and provide strategies on how to solve the questions; (5) Guidelines for Basic Research: to provide guidelines for basic research; (6) Guidelines for Clinical Practice: to provide guidelines for clinical diagnosis and treatment; (7) Review: to review systematically progress and unresolved problems in the field, comment on the state of current research and make suggestions for future work; (8) Original Articles: to report innovative and original findings in nephrology; (9) Brief Articles: to briefly report novel and innovative findings in nephrology; (10) Case Report: to report a rare or typical case; (11) Letters to the Editor: to discuss and make reply to the contributions published in the *WJN*, or to introduce and comment on a controversial issue of general interest; (12) Book Reviews: to introduce and comment on quality monographs of nephrology; and (13) Guidelines: to introduce consensus and guidelines reached by inter-

national and national academic authorities worldwide on research nephrology.

CONCLUSION

A new horizon of the *WJN* is for articles on diabetes and hypertension control. Diabetes related nephropathy with acute or chronic renal failure constitutes a large part of nephrology practice throughout the world. The *WJN* will solicit articles from investigators in diabetes and hypertension management. High priority will be given to those articles dealing with prevention strategy of diabetic nephropathy with the aim of preventing patients from needing dialysis. All articles recommended for publication or rejection will be reviewed by the editor-in-chief for final decision. Prospective readers should know that, as editor-in-chief, I have no prejudice but a conviction for all or none and am resistant to a change of mind by outside influences. Final decision for publication will be based on the merit of the article, writing style, clarity of language, lucidity and succinctness.

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