

EDITORIAL



Journal of Perinatology 2001–2018

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This brief editorial celebrates and reminisces on the period during which I was the Editor in Chief of the *Journal of Perinatology*. In 2000, I was invited to become the second EIC and gradually assumed that role from Gil Martin. Gil and Jeff Pomerance co-founded the *Journal* and nourished it through its early development. In 2000, the stated goal for me was to increase *J Perinatology's* academic standing as assessed by national standards, including, article submissions and national and international citations. Succeeding Gil was no easy task, but the foundation of a fine journal, the strong and interactive Editorial Board and the administrative support from Nature Publishing was fabulous. I held that role until the end of 2018 at which time Patrick Gallagher assumed the leadership.

The *Journal* was founded 20 years before I became the editor. At that time the concept of Perinatal-Neonatal Medicine as an interdisciplinary sub-specialty interest was quite new. Even more so was the social construct of “perinatology” to include parents and family in concert with professionals caring for mothers and newborn infants. This evolved to a family-centered role of the many medical professionals involved with maternal, fetal and newborn infant care. Combining these interests into a journal that focused on this new entity as well as the clinical research in this multidisciplinary field was rather unique at the time. The first volumes of *J Perinatology* evolved within the California Perinatal Association and consisted of two annual issues. As the *Journal* expanded, its sponsorship was transferred to the Section on Neonatal-Perinatal Medicine (SoNPM) of the American Academy of Pediatrics (AAP) and the National Perinatal Association. Later, ownership of the *J Perinatology* was acquired by Nature Publishing Group, now known as Springer Nature America, Inc. By the end of its first two decades, *J Perinatology* was publishing 8 issues annually. As an aside, anyone currently searching for *J Perinatology* may find it listed in databases as “*Journal of Perinatology: Official Journal of the California Perinatal Society.*” To my knowledge that latter phrase has not been true for more than two decades!

At the beginning of this millennium, “Neonatal Medicine,” “Maternal-Fetal Medicine,” and related professional sub-specialties had all become mainstream sub-specialty domains. Nevertheless, *J Perinatology* was still receiving manuscripts, performing reviews, and corresponding with authors using manual and postal processes. In the first years of my EIC role, Nature Publishing sponsored an assistant who was responsible for coordinating all these efforts. Much of our initial efforts were spent on improving published manuscript quality. One method was to expedite decisions, improve reviews and editing and to reduce time to editorial decision. The goal was to increase author interest in submitting articles and thereby expand the number of manuscripts and issues published. Only so much expediting could be accomplished with the manual processes. After a few years, Nature Publishing developed their own electronic manuscript handling systems. Electronic manuscript tracking reduced the receipt, analysis, decision and editing process by months. The system also included electronic publication before print

publication. We even began to receive letters to the editor before the related article was print published! In a short period, these changes were associated with a doubling of manuscript submissions and an increase of published issues to 12 annually. Also created was an extensive database to acquire and assess reviews as well as to enumerate and measure author, reviewer, and editor performance. The tracking system also provided useful measures regarding *J Perinatology* manuscript and issue data.

During this early period, the *Journal's* Editorial Board was meeting in conjunction with the AAP's Annual Fall meeting. To expand trainee and professional awareness we also published the AAP SoNPM Fall meeting abstracts for several years. In another effort to increase academician participation, the *J Perinatology* Editorial Board meeting was changed to coincide with the Spring meeting of the Pediatric Academic Societies. This resulted in attendance of more research oriented Board members and improved the scientific and clinical research oriented submissions. Over time, I believe this effort showed progress as journal submissions continued to increase. Nevertheless, since many of the Editorial Board members belonged to both the AAP and the PAS, presence of *J Perinatology* Board members remained high at both perinatal clinical and research meetings. A weakness of this approach was that we never developed a strong presence within the major Maternal Fetal Medicine community. However, strong academic MFM editors compensated for this weakness.

In 2008, the *Journal's* Impact Factor was first reported. It had been calculated for articles published in 2006 and 2007. Since then Impact Factor and Eigenfactor (two common metrics to assess a journal's “quality”) have been annually reported and have been as high as the upper quartile of all pediatric journals worldwide.

Long time sections of *J Perinatology* remained essentially constant, though their increase in submissions and publications was impressive. These sections included: Original Reports, Editorials, State of Art Reviews, and Correspondence. The Correspondence section focused on reader comments regarding published articles, and were usually accompanied by a response from the original article's authors. At times interested academicians contributed short series of articles – for instance Dharmapuri Vidyasagar, an Editorial Board member, wrote several articles on Global Aspects of Perinatal Care. More recent content changes included deletion of the “Case Reports” and “Imaging Casebook” sections. A new “Quality Matters” section, headed by Stephen Pearlman, replaced these and was immediately quite popular. The Quality Matters section dealt with methods to provide formal evidence that newly introduced clinical strategies actually provide improved outcomes in comparison with established procedures. Emerging from the SoNPM was a new “Journal Club” section. This section included collaboration between the SoNPM and the International Society for Evidence-Based Medicine. Goals of this collaboration were to produce structured reviews of recent high-value clinical research reports, as well as to be an educational experience for trainees to collaborate with senior faculty versed in formal methods to evaluate published research

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articles. In general, mainstream journals, including *J Perinatology*, do not require authors to pay to have their articles reviewed and or published, however historically the publishing companies retained copyrights to an article for as long as four years after publication. Copyrights held by publishers restricted access to the published articles unless potential readers were subscribers or had institutional access (e.g. library subscriptions). Springer Nature introduced their journals to "Open Access." This concept was immediate free access (usually electronically) to published articles without copyright restrictions. Initially, our use of Open Access was designation of a few articles in each issue for immediate free electronic access upon electronic publication. Usually, this designation was based upon which articles were considered most notable by the reviewers or the editor. Also, for a fee, authors could designate voluntarily their own articles as Open Access. As the advantages of Open Access became apparent (wider readership, more frequent citation, etc) it gained acceptance among authors and granting institutions and its usage significantly increased. While *J Perinatology* editors may have been aware that author-supported Open Access would be chosen, this knowledge never entered the review process and was not formally offered until after acceptance for publication.

Prior to my association with *J Perinatology*, I was an Associate Editor of the *Journal of Pediatrics*. Joe Garfunkel, the EIC of that publication, served as a role model for me. Among other Editor roles, he modeled teaching the principles of scientific writing to trainees. In our *J Perinatology* editor roles, Jane McGowan and I developed an interactive writing seminar. Jointly, we gave this several times at the spring Academic Pediatric Societies meetings. Also, versions of this seminar were presented at AAP Annual meetings and at invited presentations throughout the US and Internationally. These were always very rewarding presentations as we could give practical advice for writing and submitting research manuscripts, as well as to "preach," a little, about the responsibilities of authorship, including who should, and who should not, accept authorship responsibility of an article. While Professor Vidyasagar ("Sagar" to his friends) was a valued senior Board member, appointed during from the Gil Martin era, he and I

had a much earlier contact that cemented my decision to become a neonatologist. In 1968, as a senior medical student, I took my last clinical clerkship rotation at Chicago's Cook County Hospital NICU. At the time Rosita Pildes directed the only actual NICU in Chicago. While it consisted of a ~75 bed infant unit, only about 10 beds were equipped with isolettes, LS-104 neonatal ventilators, as well as intravenous and intra-arterial capability. Professor Vidyasagar was the attending neonatologist for my rotation. His dedication and patient and inspiring personality made the basis for a long lasting friendship. That rotation and his inspiration were critical to my decision to be an academic neonatologist. Our re-acquaintance as *J Perinatology* Board members was a special treat for me.

In conclusion, I found the role of journal EIC to be challenging, engaging and an avenue for rewarding personal and professional development.

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COMPETING INTERESTS

Edward Lawson was a past Editor in Chief for the *Journal of Perinatology*. He has no current conflicts of interest pertaining to this article.

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