DOI: 10.1111/hae.13893

SUPPLEMENT ARTICLE

Haemophilia WILEY

Publishing in the Haemophilia Journal: Opportunities and challenges for developing countries

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Abstract

Better access to haemophilia treatment and care is currently changing the life of a great many patients with haemophilia or other inherited bleeding diseases in numerous developing countries. These changes are encouraging while stimulating local research initiatives and projects that deserve to be communicated through scientific publications. This paper addresses several opportunities and challenges, providing guidance to scientists, clinicians, researchers and health professionals from developing countries who are actively involved in multidisciplinary haemophilia care, while wishing to publish their reports in Haemophilia, the official, global, multidisciplinary journal of the World Federation of Haemophilia (WFH), the European Haemophilia and Allied Disorders (EAHAD) organization and the Hemostasis and Thrombosis Research Society (HTRS) of North America, focusing on inherited bleeding diseases. Several strategies and pathways designed to encourage, help and support successful publications from developing countries are herein discussed.

KEYWORDS

developing countries, haemophilia, medical journals, medical writing

1 | INTRODUCTION

Access to haemophilia treatment and care is improving globally,[1] as reflected by the increased awareness of the disease at all levels and the better healthcare infrastructures with the introduction and development of comprehensive care centres in many developing countries. The multiple ongoing educational initiatives, outreach programs and factor concentrate donations through humanitarian aid programs are all contributing to further developing haemophilia care with increasing standards in many parts of the world.

Among illustrations of these major changes figure the introduction of prophylaxis,[2] including immune tolerance induction,[3] the performance of increasingly complex invasive procedures, as well as the participation to international registries,[4] and clinical trials in numerous developing countries.[5] The active contribution made by these transformations is encouraging and motivating many physicians and other health professionals to collect local data from developing countries, analyse them and share their experiences and observations in scientific reports and publications.

Publishing such reports presents new challenges for authors from developing countries who are enthusiastic, if not passionate, to play an active role within the scientific community. It also presents challenges for scientific journals that should reconcile the need to provide echo and visibility to these new contributions while guaranteeing the originality and timelessness of their editorial content, along with appropriate and rigorous methodology.

This paper addresses several opportunities and challenges, while providing guidance to clinicians, scientists and researchers from developing countries who are actively involved in multidisciplinary haemophilia care and wish to publish their reports in the Haemophilia Journal, the official journal of the World Federation of Haemophilia (WFH), the European Haemophilia and Allied Disorders (EAHAD) organization and the Hemostasis and Thrombosis Research Society (HTRS) of North America.[6]

2 | THE GROWING CONTRIBUTION FROM DEVELOPING COUNTRIES TOWARDS RESEARCH

For many developing countries facing major challenges pertaining to access to care and treatment, conducting research on haemophilia is very difficult. As a result, there is an immense disparity in terms of scientific developments between developing and developed countries. Reflecting this gap, most indexed papers in the field of haemophilia and inherited bleeding diseases primarily originate from developed countries.

The research priorities of developing countries, wherein 80% of patients with inherited bleeding diseases reside, are fundamentally different yet complementary to the ones encountered in developed countries. One must appreciate that several recently published reports originating from less developed countries have proven to be of high quality providing relevant data on several critical aspects of haemophilia. These contributions have addressed important issues including the modalities and benefits of low-dose prophylaxis, haemophilia demographics across different parts of the world, associated comorbidities, cultural and social implications, haemophilia patients' quality of life and management of specific complications, such as pseudotumors. This is illustrated by some of the recently published papers in the Haemophilia Journal that have provided original data on the causes of mortality in Brazil,[7] the understanding and practice of physiotherapy in the comprehensive management of haemophilia in China[8] and haemophilia carriers' awareness in Côte d'Ivoire.[9] Likewise, one must take into account that many developing countries very actively contribute to therapeutic developments by enrolling numerous patients into clinical trials designed to validate new treatment options, including gene therapy.

3 | CRITERIA FOR PUBLICATION

Is it worth trying to publish? This is the first and most critical question that all potential authors should ask themselves. To be published in an international journal like Haemophilia, each new contribution must be original and address a relevant or prevalent problem. In other words, the paper should provide new information for the global community and add a 'new brick to the big wall of scientific knowledge'. Clinical studies should address relevant questions and be based upon a hypothesis, follow a valid methodology with a sufficient sample size and comply with ethical requirements. Reports can be published in the form of original studies, short reports or letters, depending on their originality and priority level. For case reports, only highly original, if not unique, observations that have not previously been reported should be considered for submission. Reviews, commentaries and editorials are also likely to emerge from developing countries, driven by new local insights and reflecting local expertise.

4 | GETTING THE MANUSCRIPT READY FOR PUBLICATION

Structuring and writing a scientific paper prove to be a difficult task that must follow a number of steps. Prior to embarking onto the writing process, authors must have a clear vision of the aims and scopes of their paper. They should overcome any barrier to effective writing, such as poor writing habits, lack of confidence in their writing ability, fear of failure, lack of experience and writing anxiety, called the writer's block. The most appropriate format, such as an original article, case report, letter to the editor or review, should be carefully selected. The choice of a suitable journal that is most likely to publish the submitted paper helps set the author's mindset towards the style and layout required.

The structure of an original article is well defined and broadly based on the 'IMRAD' structure: Introduction, Methods, Results and Discussion. An author should carefully follow this structure and work hard on all the different sections of the manuscript (ie choice of title, appropriate keywords, structured abstract, introduction, materials and methods, results, discussion, conclusions, figures, tables, acknowledgements and references). Recommendations for the conduct, reporting, editing and publication of scholarly work in medical journals (updated December 2018) have been generated by the International Committee of Medical Journal Editors. They are regularly updated (http://www.icmje.org/recommendations/) and provide good practical guidance for authors.

Concerning the peer review, the most essential criteria assessed by the reviewers include the following:

- The relevance, importance, timelessness and prevalence of the problem under study,
- The appropriate, comprehensive and rigorous study design,
- The presence of a sufficient sample size to avoid biases,
- Thoughtfulness of the literature review, and whether the literature review is up-to-date and focused,
- Along with the quality of the writing style; the writing must be clear, easy to follow, logical and straightforward.

The most common reasons for rejections are incomplete, inappropriate or insufficient statistics, absence of formulation of a valid hypothesis, lack of originality, over-interpretation of results, suboptimal, inappropriate or insufficient descriptions of the populations, biased samples, as well as poorly written or incoherent papers. If their manuscript requires revision, authors are invited to consider the 10 tips for responding to reviewer and editor comments.[10]

5 | PREDATORY JOURNALS AND PLAGIARISM

Two major issues in the publishing field are the growing number of predatory publishers and plagiarism. Companies publishing predatory journals are an emerging problem in the scientific literature,

as these journals mainly seek to drain money from the authors without providing any customer service neither for the authors nor their readership. These predatory journals cleverly attempt to attract new submissions through aggressive email advertising and high acceptance rates. Contrarily, these journals do not usually rely on proper peer reviews, and the scientific quality of the submitted articles is, thus, questionable. This is paramount given that more and more people, including patients, are reading such journals, with faith in the information provided. Consequently, predatory journals are a serious threat to the integrity of medical science; it is, thus, crucial for scientists, physicians and even patients to be aware of this problem.[11,12]

Plagiarism refers to an act or instance of using or closely imitating the language and thoughts of another author, without authorization, while representing that author's work as one's own and omitting to credit the original author. Plagiarism detection software (eg iThenticate) is now employed by most journals, including Haemophilia, allowing for all papers to be screened, with a similarity index generated.[13]

6 | STRATEGIES AND PATHWAYS TO SUPPORT PUBLICATIONS

Haemophilia is a multidisciplinary, global journal focused on inherited bleeding diseases. To help and support clinicians, scientists and other health professionals from developing or less developed countries publish their contributions, several strategies must be more widely promoted, such as better access to main journals, editing and linguistic support, external methodological and statistical aid and evaluation, as well as familiarity with the recommendations for scientific writing and publishing. Scientific societies and major organizations active in this field could significantly help by pinpointing major research priorities for developing countries and providing research grants.

These ambitious projects would certainly benefit from the increasing collaborations between developed and developing countries, primarily promoted by the WFH through twinning activities, international conferences and meetings with popular sessions specifically dedicated to scientific writing and publishing. Additionally, a great number of active experts in the developed world are most keen and enthusiastic to generously support colleagues from developing countries in the rigorous and rewarding process of scientific writing.

DISCLOSURES

Cedric Hermans is Editor-in-Chief of the Haemophilia Journal and current member of the board of the Word Federation of Hemophilia (WFH) and the European Haemophilia and Allied Disorders (EAHAD).

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How to cite this article: Hermans C. Publishing in the Haemophilia Journal: Opportunities and challenges for developing countries. *Haemophilia*. 2019;26:29–31. https://doi.org/10.1111/hae.13893