



# CARDIOVASCULAR PATHOLOGY

March 1, 2021

Members of the Editorial Board  
Cardiovascular Pathology (CVP)

Re: Annual Report, Editor-in-Chief

Dear Colleagues:

In spite of the monumental disruptions and restructuring of human activity produced by the ongoing COVID-19 pandemic, *Cardiovascular Pathology* has continued to prosper as the official journal of the Society for Cardiovascular Pathology (SCVP). Our Editorial Board meeting this year is taking place as a virtual meeting via Zoom on Monday, March 15, at 10 am Eastern Time, in conjunction with this year's virtual meetings of the Society for Cardiovascular Pathology and the United States and Canadian Academy of Pathology, March 14-18, 2021. Further discussion of COVID-19 and CVP is presented later in this report.

Our editorial team now consists of myself as Editor-in-Chief, Giulia Ottaviani as Senior Associate Editor, Melanie Bois as Associate Editor for Social Media, and Sarah Keith as Editorial Assistant, and we are joined by our Elsevier colleagues, Lindsay Allen as Publisher and Hinduja Gopu as Production Manager. We maintain an open channel with Rick Mitchell, SCVP Publications Committee Chair. We also have an Editorial Board made up of members who actively participate in the review process. We have now fully transitioned to the Editorial Manager system for submission and processing of manuscripts.

I think we have a team effort that is well organized and is functioning well. I am exceeding grateful to all concerned in our collaborative effort.

The accompanying document shows data maintained by my office for manuscript activity for 10 years: 2011 through 2020. Over the last few years, CVP has experienced an increased number of submitted manuscripts: 249 in 2017, 317 in 2018, 370 in 2019, and 448 in 2020. An increase in two hundred manuscripts submitted per year in 3 years is noteworthy. This phenomenon likely represents increased journal "shopping" activity by investigators facing an imperative to publish.

In response, Dr. Ottaviani and I are increasingly rigorous in applying "editorial reject" ("desk reject") of a substantial number of the submitted manuscripts as outside the scope or otherwise inappropriate for CVP. We offer transfer of some of these manuscripts to *Heliyon*, *Human Pathology*, *Human Pathology Case Reports*, etc. Our intent is to engage members of

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the Editorial Board and others as reviewers only for manuscripts within the scope of the journal. Broadly stated, the scope of CVP is original studies and reviews aimed at the pathobiological basis of cardiovascular disease.

A corollary of our editorial policies is increased selectivity of manuscripts accepted for publication. According to our analysis, which may differ slightly from the publisher's report, comparative data show the following acceptance rates: overall - 27.3% for 2017, 20.8% for 2018, 17.6% for 2019, and 13.4% for 2020; original research manuscripts - 25.2% for 2017, 16.2% for 2018, 10.4% for 2019 and 9.8% for 2020, and case reports - 31.9%, 26.7%, 24.7%, and 11%, respectively.

Our social media effort ably led by Dr. Melanie Bois continues to generate publicity for CVP on various social media outlets. Dr. Bois has produced three CVP podcasts based on interviews with Dr. Gayle Winters followed by Dr. James Stone and Dr. Barbara Sampson. The podcasts are available on the SCVP web homepage.

I want to highlight a special feature of the journal which is the Article Collections/Special Issues which are accessible in Science Direct and from the homepage of the journal. In chronological order they are: CVP Consensus Documents – Past, Present and Future; 25<sup>th</sup> Anniversary Commemorative CVP Review Articles; Billingham Award-Winning Manuscripts (best original and best review article of the year), and the latest, COVID-19 Publications in CVP.

Last year, Dr. Rick Mitchell and the publications committee established the Margaret Billingham Awards for the articles chosen as the best original article and the best review article of the previous year. These articles are republished in the Article Collections, with editorial perspectives by the lead authors, and recited in PubMed.

Now, I want to address CVP and COVID-19. As an investigative pathologist and journal editor, I certainly am aware of the current dominance of COVID-19 which has spawned intense investigative and publishing activity. I have been proactive in ensuring that our journal is represented in the COVID-19 sweepstakes. CVP has now published 9 COVID-19 articles, including 3 original research articles, 2 solicited reviews, 2 case reports, 1 editorial, and 1 short communication. These articles are all included in the COVID-19 Article Collection.

CVP continues to be an impactful subspecialty medical journal. Current metrics shown on the CVP web homepage are: Cite Score 3.7; Impact Factor (2 year) 1.756; Time to First Decision 1.5 weeks.

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As editor, I certainly am committed to the goal of SCVP leadership and membership for CVP to be an increasingly impactful publication of the best in cardiovascular science focused on pathology and pathogenesis of human disease. Our efforts include solicitation of review articles and development of the Article Collections series.

Last year, Dr. Jim Stone presented an interesting analysis which showed that a number of CVP articles show a lag in rate of citation such that they receive more citations following the third and fourth year compared to the first two years following publication. The result is that these relatively well cited articles contribute less than optimally to the calculation of the standard two-year impact factor.

My response was to develop the concept of the CVP Editor's Notes which was intended to be a program of periodic e-mail blasts to the SCVP membership to generate interest and hopefully timely citations for articles published in CVP. I did produce three of these Notes in the first half of the year, but none since. I welcome your ideas about this program and other approaches to enhance interest and impact of CVP.

I thank the executive leadership of the SCVP and members of the Editorial Board for their continued support of our efforts on behalf of CVP, the members of the Society and the broader cardiovascular community. Our collective effort will ensure the continued success of CVP going forward. I also look forward to resumption of in person meetings as the massive vaccination effort stems the spread of this SARS-CoV-2 scourge.

Sincerely,

L. Maximilian Buja, MD  
Editor-in-Chief  
Cardiovascular Pathology

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