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Important News for Canadian Dentistry

In early April, I received one of the most encouraging letters to come my way as editor-in-chief. The letter was from the manager of publisher relations with Thomson Scientific informing me that *JCDA* has been chosen for indexing in a number of Thomson Scientific databases, including *Journal Citation Reports*.

This letter is particularly good news because it indicates that Thomson Scientific has recognized our national flagship publication as being one of the most significant and important journals in the field of dentistry. While there is no perfect measure of the quality of scientific publications, I believe that indexing in *Journal Citation Reports* is the best existing measure of quality.

Each year *Journal Citation Reports* publishes an “impact factor” for each indexed publication. This is a measure of how often articles published in a particular publication are cited by authors in significant journals. Many potential authors ask if *JCDA* has an impact factor and tell me they will only submit to a publication that has one. Over time, as our impact factor rises, *JCDA* should be able to attract more and more top-quality papers.

The last time *JCDA* was indexed in *Journal Citation Reports* was in 1977. We have tried 3 times to get *JCDA* back into *Journal Citation Reports* and were informed on the first 2 occasions that our journal wasn't publishing enough original or important material to warrant inclusion in the database.

Of the 49 journals currently included in the dentistry/oral surgery/oral medicine category of the *Journal Citation Reports* database, the majority are specialty publications, or journals with a heavy emphasis on research. In the 2005 edition, there are only 4 publications sponsored by national dental associations: American, Australian, British and Swedish. To me, this indicates that

knowledge transfer publications, often primarily aimed at a generalist readership, have little chance of being included in this elite club of more “scientific” publications.

The opening for *JCDA*'s third attempt at consideration for inclusion presented itself when Thomson Scientific began indexing electronic publications. This coincided with the adoption of our current strategy of publishing complementary print and electronic versions of *JCDA*. The print version is designed to be a knowledge transfer publication aimed at Canadian dentists, while the electronic version is designed to be the more scholarly version. One part of this strategy is to publish the full text of a research paper only in the electronic version of *JCDA*, while its abridged version is published in the print version.

Notwithstanding getting indexed in *Journal Citation Reports*, we maintain an unwavering commitment to publish pertinent, accurate, concise and timely articles that appeal to the various professional needs of practising dentists. Our complementary print/electronic strategy allows us to exploit the best features of both media to reach readerships with different interests within Canada and around the globe.

One area of focus for our print journal is coverage of news items that are essential reading for Canadian dentists. I draw your attention to 3 news items in particular in this edition: those about the new American Heart Association guidelines on prophylactic antibiotics for the prevention of infective endocarditis; the American Association of Oral and Maxillofacial Surgeons position paper on bisphosphonate-related osteonecrosis; and the recent patient-to-patient transmission of hepatitis B in a dental office in the United States.

Obeying the old maxim that good journalism tells readers what is happening and explains what it means, *JCDA* asked 3 of our editorial consultants to provide commentaries explaining the significance of these new developments. I believe that Drs. Joel Epstein, Kevin Lung and George Sándor provide value to our readers with their insightful commentaries. The significant contributions of our editorial consultants and associate editors continue to improve *JCDA*, which is good news, indeed, for our profession.

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