

Next exciting step for JISAKOS: transition to OA and a new publisher

C Niek van Dijk



As your editor in chief of JISAKOS, and with the support of the Board of Trustees of JISAKOS, I write this editorial with great excitement, and indeed with great pride for what we are accomplishing with our journal, and will accomplish going forward.

When JISAKOS launched in 2016, our vision was to provide a relevant, high-quality journal to the ISAKOS membership and to the arthroscopy, knee surgery and orthopaedic sports medicine fields worldwide. As an international organisation with members in many countries, with specialisation in many different techniques, musculoskeletal tissues and aspects of surgical interest and sports injury interest, the Journal of ISAKOS needed to be broad based, yet focused and accessible. After 5 years we believe we have achieved that, as the number of submissions to JISAKOS has steadily increased over the years. Now, our recent acceptance to be indexed in MEDLINE (MEDLINE is a database with publications of >4500 medical journals) and PubMed (PubMed is the search engine that brings us the data from MEDLINE) as well as acceptance into the Clarivate Analytics Emerging Sources Citation Index (a precursor to the Journal Citation Reports and Impact Factor (IF) rankings) will be a great driver to ensure that JISAKOS is even more

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visible and accessible to specialists around the world.¹

In order to provide continued momentum and share the content of JISAKOS with an even larger audience, I am announcing two very exciting next steps for JISAKOS: a move to being an open access (OA) journal, and a move to a new publisher, Elsevier, beginning 1 January 2022. The choice for a new publisher was made after a rigorous and thorough process and the result of the significant hard work and expertise of JISAKOS Board of Trustees, ISAKOS Board of Directors and the ISAKOS staff.

OPEN ACCESS

You may recall that I wrote a scathing editorial about Plan S, the funding coalition that dictates that any research funded by any of its members must be published in fully OA journals.² So our move to OA may come as a surprise to some readers. To be clear, I am not opposed to OA as a publishing model. On the contrary, it makes sense for research, especially clinical medical research and information, to be freely available to everyone on publication. Preferably, one should have a choice of where and how to publish, and so I am still philosophically opposed to a coalition that *demand*s that a researcher publish their results with a specific type of journal. For JISAKOS, a move to OA fulfils the mission of ISAKOS as a not-for-profit medical education membership society.

The process of moving from a subscription-based closed access (CA) journal to OA is called 'flipping' of a journal. Momeni *et al* recently published their analysis of 117 journals in the field of Health Sciences which flipped between 2001 and 2013 from subscription-based CA to OA.³ They compared the flipped journals to a matched control group of similar journals which remained CA (journals which did *not* flip to OA). They were matched in terms of discipline, number of published articles and IF in the year of flipping. Among others they used the Directory of Open Access Journals (DOAJ) for their analysis.

They assessed the changes in the number of articles over time, as well as the influence on IF and the number of citations. Their results for the 117 journals (identified from the DOAJ) showed that the

growth rate for the journals that flipped to OA was higher than the values observed for the journals that did not flip to OA. The volume of published articles increased on average by 21% for the flipped journals at 4 years postflip compared with a 13% growth for the controls. The IF increased by 44% for the flipped journals compared with a 13% increase for the controls at 4 years postflip. The number of citations grew by 14% for the flipped journals compared with an average decrease of 7% for the journals that remained subscription based.

Overall, these results indicate that flipping a journal to OA is likely to bring positive changes to a journal in terms of more submissions, increase in IF and a higher number of citations.

So, what will this flip to OA mean for authors of JISAKOS? Authors who publish in JISAKOS will make their research and articles immediately and permanently freely accessible worldwide. JISAKOS authors will pay an article publishing charge (APC), have a choice of licence options and will retain copyright to their published works. The APC will be requested after the article has been peer reviewed and accepted, and this will begin with accepted articles submitted after 1 August 2021. We have worked with our publisher to make the fees as competitive as possible.

There will be a differentiation in full-length articles and shorter articles such as case reports, technical notes and surgical technique video submissions. As a member benefit, ISAKOS members will receive a discount on the fees and in case of need ISAKOS can provide 'fee-assistance'. Our new Elsevier author portal will also provide information on institutions who help the authors to offset APC fees, if they do not have a research grant with earmarked funds. Elsevier also participates in Research4Life, which is a programme that can help authors in developing countries get access to funding and discounts, as well as potential fee waivers. Waivers will also be provided in case of solicited articles.

PUBLISHING WITH ELSEVIER

I am also excited to work with our new publisher, Elsevier. JISAKOS has been published by the BMJ Group since 2016 and we deeply appreciate all that they have done to help JISAKOS as a start-up journal. As part of the journal's evolution and growth, we look forward to the journal being on the Science Direct platform, which is the largest and most widely

accessed market leading online journal platform in the world. The exposure we will receive in addition to the journal moving to an OA model will ensure that the outstanding surgical research, techniques and reviews will reach the broadest possible audience.

The move will also allow us to build online collections of articles by topic, technique or joint, and provide easier access and discoverability to the content we publish. As things move forward, we will be announcing more new features and perks for authors and reviewers, such as the author feedback programme, the reviewers' recognition programme and the 'your paper your way'. I hope you will share in my excitement for this move!

As the editor in chief of JISAKOS, I am enthusiastically committed to publishing the best papers that will make a positive impact on our field and for our patients,

and I look forward to receiving your future submissions.

C Niek van Dijk
Editor in chief, JISAKOS

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