

## Editorial

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# Medwave's editorial history, policies and guidelines: 3. Section policies

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## Abstract

This article is the third of a series of four editorials that report on Medwave's policies, including section policies, formal requisites according to article type, and guidelines for reviewers and authors, with special emphasis on publication and research ethics. The journal believes that it is important to publish its policies in the format of editorials in order to facilitate and ensure dissemination to our broader readership. This editorial describes the types of articles that the journal publishes, such as primary studies, review articles, case reports, letters, and commentaries, among others.

### Primary studies

*Medwave* includes under this denomination what are known as the "classical" epidemiological study designs, in effect:

- Randomized controlled studies and other interventional studies of good quality (for example, quasi randomized studies, quasi experimental studies with covariables adjustment, and controlled time series)
- Cohort studies
- Case control studies
- Diagnostic test studies with gold standard
- Design and validation of scales and questionnaires
- Correlation (association) studies
- Prevalence studies (cross-sectional studies)

Original research articles must follow the IMRAD format: introduction, methods, results and discussion) and must include a structured abstract.

All primary studies undergo peer review, which will be particularly strict and rigorous, and will include statistical review by a statistician. We strongly recommend authors to prepare their report in accordance to the most recent reporting guidelines, such as CONSORT, STROBE, SQUIRE, STARD, etc.

### Review articles and analysis articles

All submitted manuscripts that correspond to this category of articles will undergo peer review.

#### Definition of review article

A review article is an article whose primary purpose is to synthesize the state-of-the-art on a given topic, by analyzing the results of other previously published studies and covers what is most recent and relevant.

Review articles are different from systematic reviews in that they are narrative and do not specifically contain critical analysis or explicit grading of the quality of the evidence they are based on.

Review articles must include an overall update on most recent field or disciplinary developments (especially the last two years) and how these apply to clinical practice. They should facilitate readers to delve deeper if they are keen to through the sources of information that they contain. They should always, to the extent that this is possible, include Cochrane reviews. The review article should contain all that general practitioners should know about the topic.

We recommend that authors look at the following review articles as they are a good example on form and substance:

- Freitag C, Staal W, Klauk S, Duketis E, Waltes R. Genetics of autistic disorders: review and clinical implications. *Eur Child Adolesc Psychiatry* 2010 Mar;19(3):169-78. doi 10.1007/s00787-009-0076-x
- Lefio L, Silva H, Rivas K. Maltrato infantil en la primera infancia: una revisión panorámica sobre prevención, detección y tratamiento. *Medwave* 2013;13(7):e5748 doi: 10.5867/medwave.2013.07.5748

The following is an example of a clinical review article:

- Khanna S, Pardi DS. *Clostridium difficile* infection: new insights into management. *Mayo Clin Proc* 2012;87(11):1106-1117

### Definition of analysis article

An analysis article is a thoughtful reflection on a topic that is not derived from primary research. It is an essay that, without resulting from research, uses an analytical, interpretative or critical perspective brought about by the author or authors, on a specific topic or issue; and is based on original relevant sources and resources (we acknowledge Magdalena Agüero Caro, a *Medwave* peer reviewer, for this definition).

According to *TheBMJ*: "Analysis articles should be balanced, clearly argued narratives which promote debate on important medical, scientific, ethical and policy issues which matter to doctors" (see [here](#)).

We suggest you look at the following analysis articles:

- Solnica B. Analysis article on the performance analysis of the OneTouch UltraVue blood glucose monitoring system. *J Diabetes Sci Technol*. 2009 Sep 1;3(5):1166-7.
- Kottow M. Ética clínica e investigación biomédica: compatibilidad entre ser médico tratante y ser investigador clínico. *Medwave* 2012 Jun;12(5):e5424 doi: 10.5867/medwave.2012.05.5424

### On CATs

The journal does not publish CAT (*critically appraised topics*) articles anymore and any submission of a CAT article will be rejected.

The journal has made this decision because critical analysis at present should be done through evidence summaries and not by focusing on a single published journal article. We believe that CAT articles do not contribute to our evidence-based knowledge on a given topic. Instead, they are useful in readers' critical appraisal skill-building.

### Economic evaluation studies

The purpose of an economic evaluation is to ensure that the benefits of a health program or intervention are greater than its cost compared to another intervention or program. They look into the allocative efficiency and the technical efficiencies of alternative courses of action in health care. Allocative efficiency evaluates competing interventions and

decides whether they fulfil or not the purported objectives. Technical efficiency evaluates the best course of action to achieve a given objective.

All economic evaluations undergo peer review. We strongly advise authors to follow CHEERS reporting guidelines.

### Case reports

We advise authors who are interested in submitting a case report to look at the following case report as an example:

- Tsangaris I, Tsaknis G, Tsantes A, Kopterides P, Armaganidis, A. Life-threatening aortic thrombosis in a trauma patient homozygous for factor V Leiden mutation: Case report. *Thromb J*. 2011 May 9:8. doi:10.1186/1477-9560-9-8

All submitted case reports undergo peer review. We will not accept manuscripts that report case reports that do not follow the CARE guideline (see [here](#)).

### Letters and commentaries

#### Letters to the editor

*Medwave* publishes letters to the editor.

The letters should be related to current issues, public health contingencies, or to already articles published. *Medwave* does not publish "scientific letters", i.e., letters describing clinical cases or clinical considerations, or reporting preliminary results of ongoing studies. Authors interested in publishing this type of article should consider redoing their manuscript following the instructions for articles of analysis, review or case reports.

The journal does not peer-review letters to the editor and the decision to publish them is made by the editor-in-chief.

#### Commentaries

*Medwave* publishes commentaries and viewpoints of authors that are not necessarily part of the editorial boards. However, most of these articles are commissioned by the editor-in-chief. Authors who are interested in submitting commentaries should consider redoing their manuscript in accordance with the instructions provided for review articles and analysis articles.

*Medwave* publishes essays and articles that contain conceptual and theoretical formulations. It is important that they refer to current issues, contributing to more thoughtful decisions in clinical practice and health policy. Before submitting your essay, please go through the journal's sections and subsections to get an idea of what we tend to publish to see whether this is consistent with your work.

### Other types of articles

*Medwave* is pleased to handle submissions of systematic reviews, with or without meta-analysis. We also accept technical notes, historical reviews, essays (see above), etc. If you have any doubts about the pertinence of your work,

please feel free to write to the editor-in-chief, Dr. Vivienne C. Bachelet, at [vbachelet@medwave.cl](mailto:vbachelet@medwave.cl).

## Notes

The editor (VCB) declares that she has no competing interests with this editorial.

The editor acknowledges and expresses appreciation for the very important contribution of Dr. Miguel Araujo in setting up the first editorial policies in 2010 and 2011.

The editor appreciates the diligent and excellent work of the associate editors and editorial assistants who make this publication possible.

The journal's policies, guidelines and instructions are also published in About Medwave where they are updated.

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