## EFIM Day October 17th 2025



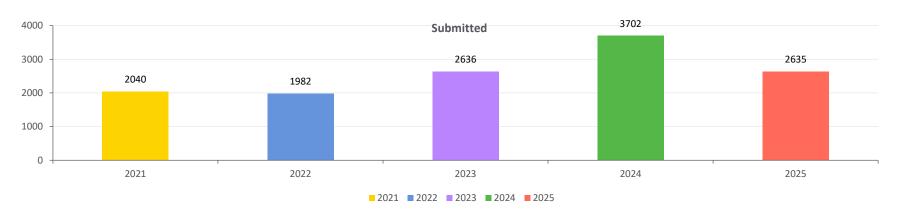
## **European Journal of Internal Medicine**

Giancarlo Agnelli Editor-in-Chief

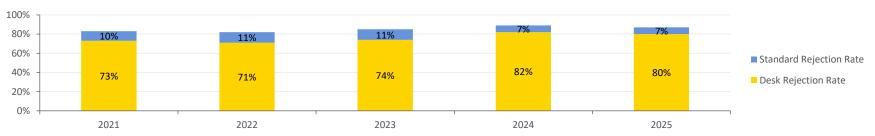
- Submissions to the journal and their outcomes
- Journal performance including citations
- Article collections
- Editorial strategies and hurdles for their implementation

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#### Submissions and Editorial Outcomes







As per October 16th last paper recived # 2867

## Submitted papers and their outcomes by the type of article (2024)

Article Type	Assessed	Accepted	Rejected	Rejection Rate
Original Articles	2.355	101	2.254	96%
Review articles	262	29	233	89%
Practice Guidelines	2	2	0	0%
Clinical Insights	37	15	22	59%
Beyond the Guidelines	3	3	0	0%
Ideas and Opinions	1	1	0	0%
Correspondence	357	159	198	55%
Flashcards	249	29	220	88%
Commentaries	54	45	9	17%
Grand Total	3,321	384	2,937	88%

## Consequences of the high number of submissions

- Overload for the Editorial Committee and Editorial office
- Potential delay in the review process
- Less time to interact with the authors to optimize their submission.
- Less time for the Editorial Board for scouting for high-quality papers and soliciting reviews or commentaries
- Less time to work on article collections

#### Hierarchy for paper selection (at the desk evaluation)

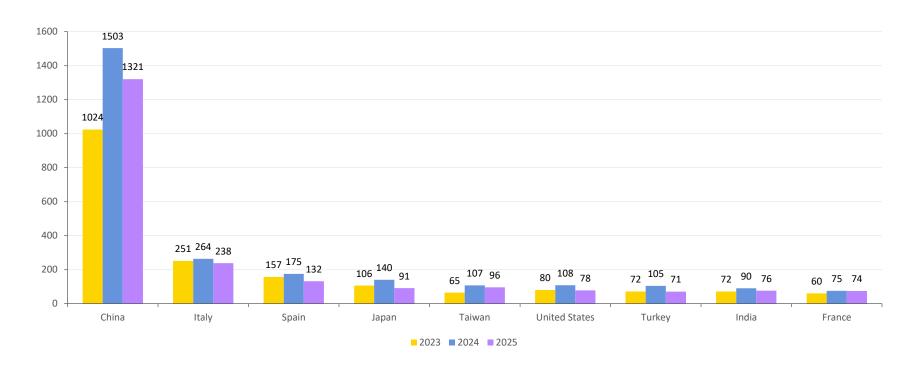
- Study question, that include both clinical impact and originality
- Study design and methodology with preference to RCT or at least prospective observational studies
- Interest for the whole European community of Internal Medicine
- Papers as low-priority papers

Retrospective study or post-hoc analysis of already published studies
Unplanned "fishing for p-values analyses" from general data base.
Studies with small sample size studies or very preliminary studies
Redundant meta-analyses on well covered clinical issues
Studies on survey of physicians' clinical practice or patients' preference
Delphi panel

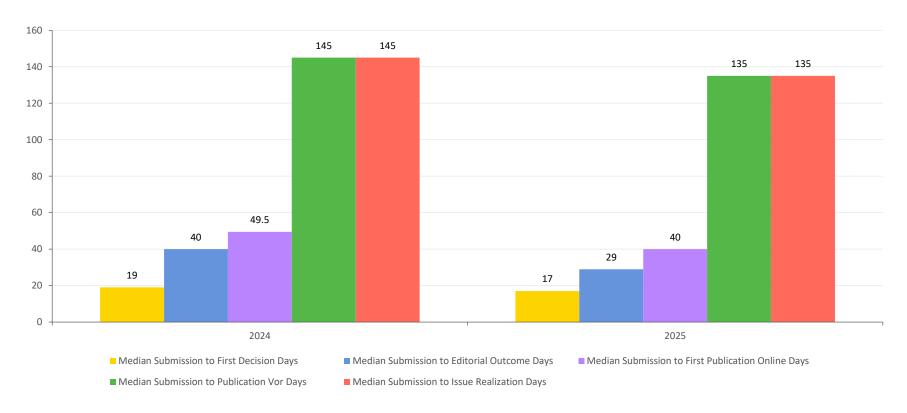
#### Uniform Editorial Board criteria

- No geographic (or any other type prejudice)
- Articles that are sound/interesting but do not reach sufficient priority for publication as a full paper may be resubmitted as a Letter
- Commentaries and Editorials about issues that have a potential to raise discussion, widen its reach and serve as a survey of clinical opinions are identified by any members of the Board.
- Statistical analysis should be properly described and be sound.

## Top 10 countries submissions



#### Median Editorial & Publication Speed for Published Articles

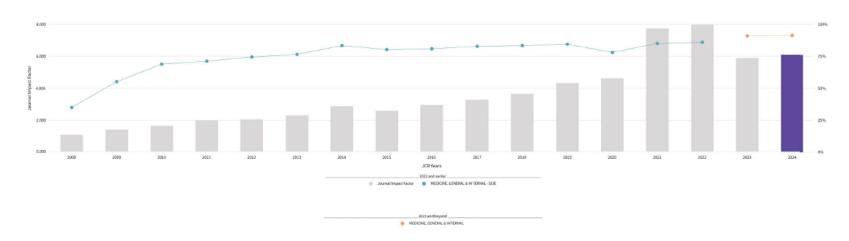


Our editorial times remain fast despite the outstanding increase in submission. In 2025, so far, the publication time has been reduced in 10 days.

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6.1

#### **Journal Impact Factor Trend 2024**



5.6

#### EJINME's 2024 Impact Factor, Clarivate

Journal Impact Factor is calculated using the following metrics

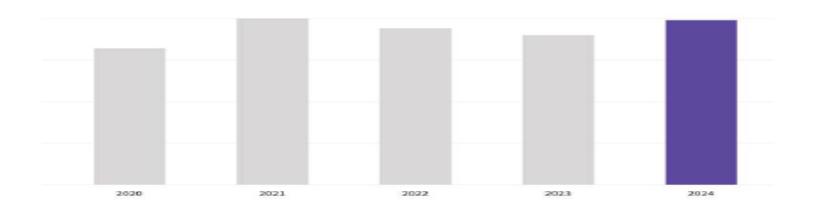
Citations in 2024 to items published in 2022 ( <b>995</b> ) - 2023 ( <b>796</b> )	_	1,791	_	6.1
Number of citable items in 2022 (159) + 2023 (137)		296		0.1

2025 Citations for papers published in 2023 **as per October 16th**: 1,742 2025 citations for papers published in 2025 as per October 16th: 312

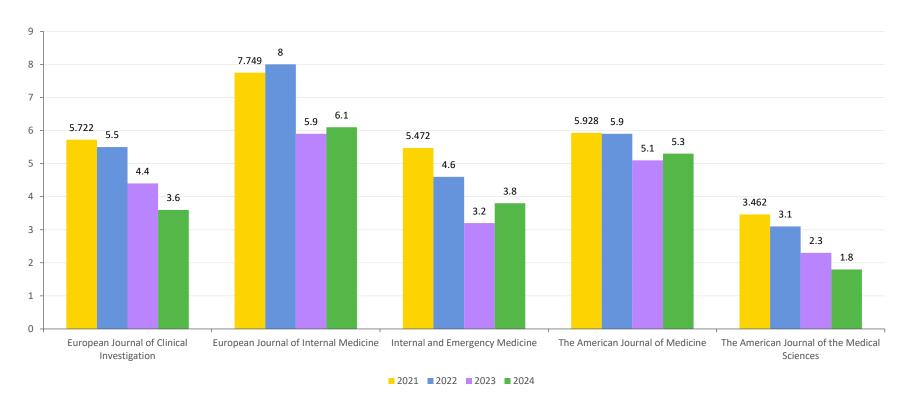
#### **Total Citations**

8,566

The total number of times that a journal has been cited by all journals included in the database in the JCR year. Citations to journals listed in JCR are compiled annually from the JCR years combined database, regardless of which JCR edition lists the journal.



## Journal Comparison Clarivate Impact Factor



#### Citations & year of article publication: 2023 (yellow) 2024 (green)

Kreutz (2024)	2024 ESH clinical practice guidelines for hypertension	103
Lekakis (2024)	Natural history of MASLD	93
Farsetti (2023)	How epigenetics impacts on human diseases	73
Zen (2023)	Mortality and causes of death in systemic LES	53
Mellemkjær (2024)	Cardiovascular risk in patients with MASLD	52
Burnier (2024)	The role of adherence in patients with chronic diseases	50
Suthahar (2023)	Fat mass and type-2 diabetes	47
Mirijello (2023)	Management of acute alcoholic intoxication	46
Zoncapé (2024)	Non-invasive testing and risk-stratification in MASLD	44
Portincasa (2024)	Gut microbes in metabolic disturbances	43
Pompili (2023)	Albumin administration in internal medicine	37
Vedovati (2023)	Recurrence and major bleeding in patients with CAT	35
Boriani (2023)	Heart failure and cardiac implantable electronic devices	33
Tanriover (2023)	Metabolically healthy obesity	33
Armandi (2024)	Dietary and pharmacological treatment in MASLD	29
Fan (2023)	SGLT-2 inhibitors on cardiac structure and function	29
Gomez-Delgado (2024)	Residual cardiovascular risk: when should we treat it?	28
Armillotta (2023)	Predictive value of Killip classification in MINOCA	28
Kaneda (2023)	Long-term recurrence in patients with VTE on DOACs	27
Mei (2024)	Scores for major bleeding in AF patients on DOACs	26
Boriani (2024)	Asymptomatic vs. symptomatic atrial fibrillation	26
Koutny (2023)	Education and non-alcoholic fatty liver disease	26
Boriani (2024)	Detection of subclinical atrial fibrillation by devices	25

#### Articles 2023-2024: citations by type of article (reviews in red)

2024 ESH clinical practice guidelines for hypertension	103
Natural history of MASLD	93
How epigenetics impacts on human diseases	73
Mortality and causes of death in systemic LES	53
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# Article collection on MASLD: Editors Van K. Erpecum and G. Dalekos (published in April 2024)

Lekakis	Natural history of MASLD	93
Mellemkjaer	Cardiovascular risk in patients with MASLD	52
Zoncapé	Non-invasive testing and risk-stratification in MASLD	44
Armandi	Dietary and pharmacological treatment in MASLD	29

As per October 15th, 2025. Data are from Scopus

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## **Editorial strategies**

Implement invited Reviews, Editorial, and Commentaries

Implement Article Collections (including presentations at the EFIM congresses)

Improve promotion by social media and registration for the e-TOC alert

Reduce the critical aspects of the external review

Update the Editorial Board with focus on underrepresented countries and areas by proposing of new candidates

## Hurdles for EJIM implementation

Predatory journals & sister journals	
Low number of submission from some European countries	
Still relatively low number of multi-country studies	
Limited availability of article reviewers	
Limited number of registration for e-TOC alert	
Limited presence in the Social Media	

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