## EDITORIAL

## The Netherlands Journal of Medicine's hitlist: which 2004 paper was best cited?

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As editors of the Netherlands Journal of Medicine, we are very interested in the type of articles that appeal most to the scientific community in general and to the readers of the Journal in particular. One way of obtaining this information is to go directly to our readership and ask them what they expect from the Journal and what they want from the Journal. Over the last few years we have twice sent out a questionnaire and the results were instrumental in bringing changes to the Journal. We have been resuscitating the 'letter to the editor' section and we challenge you as readers of the Journal to send us your comments. We strive for lively, readable articles that can help you to cope with the myriad of clinical questions you are faced with every day. Thus, we see it as our mission to make the Journal a source for up-to-date relevant clinical information. On the other hand, medical science is an ever-evolving profession and novel insights are gained each day. The question is how you really can tell which articles in the Journal will have an impact on helping to shape the research agenda. One parameter used is the number of times an article appears in the reference lists of other papers, in other words gets cited. We face the reality that in our scientific world most papers never get to be cited. Is that a problem? You could argue that articles that provide useful clinical information do not need to be cited, but in fact that is not true. Papers that receive the most attention have more effect because these papers stay in the limelight. We wanted to know how we are doing and in line with our efforts of last year, we have made a list of articles published in 2004 that were most cited thereafter. In 2004 we published 81 citable articles; 64 (79%) received at least one citation and only 17 papers were not cited at all. The articles that were cited received an average of 1.9 (standard deviation 1.3) cites since the moment they were published. We will focus on the papers that fall within the top-15. As can be expected, the

majority of papers are reviews, with the list containing ten of them. As has been noted before, reviews tend to be cited more than other papers. Much to our delight we also find three original articles, one case report and one editorial among the most-cited papers.

The article that was cited most (7 times) was authored by Dr Hazenberg from the University Medical Centre Groningen.<sup>2</sup> He and his colleagues wrote a fine primer on the diagnostic and therapeutic aspects of amyloidosis. It provides the reader with a systemic stepwise approach on how to classify patients with amyloidosis. As such, it is a well-written paper with an excellent educational value. The case report that attracted the most citations was written by Dr Rodenburg *et al.* and deals with a family with inherited hypercholesterolaemia.<sup>3</sup> This paper is a nice example of translational research as it provides molecular evidence of the diagnosis and describes the treatment of this intriguing disorder.

As outlined earlier, the Journal has adopted an openaccess model4 and we have implemented a software programme that allows us to follow the number of online hits that a published article receives. From January 2007 we will publish a monthly review of the number of online hits for the papers that have recently been published. Table 1 also contains data on the number of times these articles were downloaded. Contrary to earlier data we could not find a correlation between the number of online hits and citations. This is most probably due to the small sample and the small range in the number of citations. Furthermore, we only implemented the tracking software in November 2005 so downloads before that date were not counted. We would like to salute the authors who made it to the list and we encourage prospective authors to write enticing papers for the Journal that hopefully make it to this list.

*Table 1* lists the most cited articles published in 2004.

#	Hits	Cites	Author	Title	Type	Hospital
Ι	327	7	Hazenberg BP <sup>2</sup>	Diagnostic and therapeutic approach of systemic amyloidosis	Review	Academic Medical Centre, Groningen
2	263	5	Riksen NP <sup>5</sup>	Ischaemic preconditioning: from molecular characterisation to clinical applicationpart I.	Review	Radboud University Nijmegen Medical Centre, Nijmegen
3	390	4	Kemper HCG <sup>6</sup>	The prevention and treatment of overweight and obesity. Summary of the advisory report by the Health Council of the Netherlands	Review	VU University Medical Centre, Amsterdam
4	342	4	Melles DC <sup>7</sup>	Prevention of infections in hyposplenic and asplenic patients: an update	Review	Erasmus Medical Centre, Rotterdam
5	275	4	Lowe SH <sup>8</sup>	Antiretroviral therapy in previously untreated adults infected with the human immunodeficiency virus type I: established and potential determinants of virological outcome	Review	Academic Medical Centre, Amsterdam
6	228	4	Spoelstra MA <sup>9</sup>	No effect of folic acid on markers of endothelial dysfunction or inflammation in patients with type 2 diabetes mellitus and mild hyperhomocysteinaemia	Original	VU University Medica Centre, Amsterdam
7	436	3	Schnog JB <sup>10</sup>	Sickle cell disease: a general overview	Review	St Elisabeth Hospital, Curacao
8	431	3	Rodenburg J <sup>3</sup>	A boy with autosomal recessive hypercholesterolaemia	Case	Academic Medical Centre, Amsterdam
9	317	3	Timmers HJLM <sup>11</sup>	Baroreflex failure: a neglected type of secondary hypertension	Review	Radboud University Nijmegen Medical Centre, Nijmegen
10	343	3	Huussen J <sup>12</sup>	The (fixed) urinary sediment, a simple and useful diagnostic tool in patients with haematuria.	Review	Radboud University Nijmegen Medical Centre, Nijmegen
II	260	3	Janssen MJR <sup>13</sup>	The influence of pretreatment on cure rates of Helicobacter pylori eradication	Original	Radboud University Nijmegen Medical Centre, Nijmegen
12	253	3	Lipsky BA <sup>14</sup>	Pneumococcal polysaccharide vaccines do not protect the elderly from pneumococcal infections.	Editorial	Washington School of Medicine, Seattle
13	249	3	Assendelft WJJ <sup>15</sup>	Pneumococcal vaccination for the elderly in the Netherlands? Assessment of the quality and content of available comparative studies	Review	Academic Medical Centre, Amsterdam
14	249	3	Vanoostrom AJ <sup>16</sup>	Increased expression of activation markers on monocytes and neutrophils in type 2 diabetes	Original	Academic Medical Centre, Utrecht
15	246	3	Kamphuisen PW <sup>17</sup>	Thrombophilia screening: a matter of debate	Review	Radboud University Nijmegen Medical Centre, Nijmegen

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Drenth. Best cited paper of 2004.