Credit and visibility for peer reviewing: An overlooked aspect of scholarly publication

Sir,
Scholarly peer reviewers get limited recognition for performing, perhaps, the most important and time-tested quality control mechanism that we have today in the world of scientific publishing. An average peer reviewer may review several manuscripts a year depending on their repute and stand in the field. Hence, a considerable amount of time is spent in doing this critical activity with little tangible benefits to the peer reviewer apart from a sense of altruistic satisfaction for having contributed to scientific discourse.\[^1\] With increasing emphasis on publications for career advancement and placements, naturally the requests to peer review articles have also shown a concurrent rise. This, often results in scientists actually turning down more requests for peer reviews that they accept due to a paucity of resources.\[^2\] It is quite plausible that many of them may not be willing to review at all for new or low impact factor journals or do a very superficial job of reviewing for these journals but jump at the opportunity to review for reputed journals and carry out a more elaborate and rigorous intellectual review. This is an undesirable scenario and hampers the progress of journals apart from serving to maintain the wide disparity in standards of publishing.

In this scenario, appropriate credit and visibility are required to improve and motivate peer review activity. Recently, several networking sites such as Publons, PubPeer, and Faculty of 1000 have been launched with the aim of providing platforms to showcase one’s reviews as scientific output and enhance its visibility.\[^3,5\] Some of them such as Publons go one step further and issue digital object identifiers for reviews rendering them citable and also allows one to record and verify the peer review output based on which reviewer scores are assigned. This can subsequently be mentioned when applying for research grants, faculty, or editorial positions. These initiatives are much needed to increase transparency, accountability, and credit for the peer reviewing process. In a way, it would also reduce an important shortcoming of the peer review process – The abuse of peer review as pointed out by Smith,\[^6\] by making the review open to scrutiny. It is plausible that the ideas and insights provided by a reviewer of a scientific manuscript may serve to catalyze further and better-designed work in the area but all too often, the closed peer review process employed by major journals ensures that the reviewer comments never reach the larger academic community. Considering these potential benefits, the academia must take steps to acknowledge and reward the work of peer reviewers and provide better visibility to their contributions that will, doubtless, help in improving quality of reviews, researcher cross-talk, dissemination of ideas, and ultimately, faster advancement of science.

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Letters to the Editor

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Moyamoya disease (MMD) is a rare (prevalence of 3 cases/100,000 children), occlusive disorder of the cerebral vasculature. There is a progressive stenosis of terminal parts of bilateral internal carotid arteries and the main trunks of anterior and middle cerebral arteries, resulting in the formation of collateral vessels at the base of the brain. These small collateral vessels create “puff of smoke” appearance on angiogram. There are various clinical manifestations for MMD. There is bimodal age presentation with first peak occurring in the first decade of life, associated with cerebral infarction as progressive carotid occlusion develops. The adult patient most often present in the fourth decade with intracranial hemorrhage arising from rupture of the delicate network of collateral vessels which is mostly intraparenchymal and may be intraventricular or occasionally subarachnoid bleed. In children, the most common presentation is that of recurrent episodes of cerebral ischemia manifesting clinically as focal deficits, paresthesia, and seizures. Psychiatric manifestations associated with MMD in children are uncommon. These include schizophrenia, acute transient psychosis, and mania. Some patients of MMD also show cognitive impairment, learning disability, and attention deficits. We present a 14‑year‑old male child with features of focal seizures, hemicranial headache and certain behavioral problems in whom MMD was diagnosed through magnetic resonance imaging (MRI) and magnetic resonance angiography (MRA).

Master A, a 14‑year‑old male child with uneventful birth and developmental history without past and family history of neuro‑psychiatric illness presented with complaints sudden abnormal movement of the right side of the body from last 5 years. These abnormal movements are a tonic in nature, recurrent, each lasting for about 5 min, occurring at an interval of 1–2 months. There is no history of loss of consciousness. There is also a complaint of frequent left hemicranial headache from last 2 years. Along with this he has features of hyperactivity, easy distractibility, inattention, over‑talkativeness, poor academic performance, forgetfulness in daily activities, irritability, stubbornness, emotional lability, temper tantrums from the last 4 years.