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NMNI editorial report, 2016

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Introduction

New Microbes and New Infections (NMNI) remains a young journal having been launched during the ESCMID Congress in Berlin, April 2013, partly as a companion and referral journal to *Clinical Microbiology and Infection* (CMI), edited by Didier Raoult and from 2016 by Leonard Leibovici [1,2]. NMNI aims to provide a platform for international authors reporting facts in infectious and primarily tropical diseases and clinical microbiology that are new in one particular place and country. Accordingly, NMNI acknowledges contributions from emerging research teams offering the opportunity to publish in their own language, in addition to English; two such papers, dually accepted in French and English, have been published in 2015 [3] and 2016 [4]. In the meantime, NMNI has been included in PubMed Central, obviously increasing its visibility and the interest of authors and readers. We hope this is just a first step towards referencing in PubMed and inclusion in the impact factor rankings within the next few years.

Editorial structure

NMNI is an online-only journal, meaning that authors can submit their contributions any time and that accepted papers are released any time, by chronological order of acceptance. NMNI is reviewing papers in English, French, German, Spanish, Portuguese, Russian, Arabic and Chinese thanks to a panel of international Editors who are greatly thanked for their kind contributions to the editorial process. Accepted papers will be published in the original language version and in English after the

corresponding author has approved the English translation. Papers can be submitted in any of 12 categories with the understanding that papers must report reliable facts in infectious and tropical diseases and clinical microbiology that are new in one particular geographic region. A new category named “Taxonogenomics” has been launched in 2015, to accommodate reports of new bacterial, viral, fungal and parasite species, along with genomes of thereof.

Editorial activity

In 2015, NMNI received 110 submissions including 28 (26 %) submissions referred from CMI. Of the 110 submitted papers, 86 % were accepted for publication including two papers from Tunisian authors dually accepted in French and in English. Of accepted papers, 5 were sponsored by ESCMID where all fees were covered by ESCMID. Altogether, a total of 186 papers were accepted for publication since the launch of NMNI and 156 are now indexed in PubMed Central with a regular progression in the number of submitted papers. The graph presents the geographical origin of accepted papers, indicating that NMNI is on its way to achieving its main goal, the rapid promotion of discoveries in infectious and tropical diseases and clinical microbiology made by emerging research teams (Fig. 1).

NMNI reports

The current citation rate is 0.615 (2015 citations received divided by 2015 articles and reviews) and our next objective will be to submit an application to Thomson Reuters for indexing in the Web of Science. Accordingly the most cited article has 12 citations, the 2nd most cited has 9 citations and the 3rd most cited articles have 8 citations [5–7]. In addition, a total of 40,309 full-text article downloads were received across all Journal platforms by the end December, 2015.



FIG. 1. Geographical origin of papers accepted for publication in NMNI, 2015.

Perspectives

By strengthening its Editorial Board, NMNI will decrease the time to online publication which is still longer than the goal of 2 months obviously, the continuing efforts of the Editorial Board will also enhance the chances of early acceptance for PubMed indexing and of the inclusion in Thomson Reuters' impact factor listings.

References

- [1] Drancourt M. Birth of a New European Society for Clinical Microbiology and Infectious Diseases Journal. *New Microbes New Infect* 2013 Oct;1(1):1.
- [2] Leffad M, Cousens R, Raoult D. CMI editorial report, 2015. *Clinical Microbiol Infect* 2015 Mar;21(3):207–13.
- [3] Bellazreg F, Hattab Z, Meksi S, Mansouri S, Hachfi W, Kaabia N, et al. Outcome of mucormycosis after treatment: report of five cases. *New Microbes New Infect* 2015;6:49–52.
- [4] Prigent G, Perillaud C, Amara M, Coutard A, Blanc C, Pangon B. *Actinobaculum schaalii*: un pathogène réellement émergent ? *New Microbes New Infect* 2016;11(5):8–16.
- [5] Roca I, Akova M, Baquero F, Carlet J, Cavaleri M, Coenen S, et al. The global threat of antimicrobial resistance: science for intervention. *New Microbes New Infect* 2015;16(6):22–9.
- [6] Eckert C, Emirian A, Le Monnier A, Cathala L, De Montclos H, Goret J, et al. Prevalence and pathogenicity of binary toxin-positive *Clostridium difficile* strains that do not produce toxins A and B. *New Microbes New Infect* 2014;8(3):12–7.
- [7] Figueras MJ, Levican A, Pujol I, Ballester F, Rabada Quilez MJ, Gomez-Bertomeu F. A severe case of persistent diarrhoea associated with *arcobacter cryaerophilus* but attributed to *campylobacter* sp. and a review of the clinical incidence of *Arcobacter* spp. *New Microbes New Infect* 2014;2:31–7.