NMNI editorial report, 2016

O. Cusack¹ and M. Drancourt^{1,2}

1) NMNI Editorial Office and 2) URMITE, Aix-Marseille Université, UM63, CNRS 7278, IRD 198, INSERM 1095, IHU-Méditerranée Infection, Marseille, France

Keywords: European Society of Clinical Microbiology and Infectious Diseases, *New Microbes and New Infections* **Article published online:** 8 April 2017

Corresponding author: M Drancourt, URMITE, Aix Marseille Université UM63, CNRS 7278, IRD 198, INSERM 1095, IHU – Méditerranée Infection, Marseille, France.

E-mail: michel.drancourt@univ-amu.fr

Introduction

For its first Olympiad, New Microbes and New Infections (NMNI), launched during the European Society of Clinical Microbiology and Infectious Diseases (ESCMID) Congress in Berlin, April 2013, as a companion journal to Clinical Microbiology and Infection (CMI), has edited a total of 465 papers [1,2]. NMNI aims to provide access to an international forum for authors reporting facts in infectious and primarily tropical diseases and clinical microbiology that are new in one particular place and country. Accordingly, NMNI does acknowledge contributions from emerging research teams offering authors 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, thus increasing its visibility and enhancing the interest of authors and readers. We hope this is just a first step towards referencing in PubMed and inclusion in 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, in order of acceptance. NMNI is reviews papers in English, French, German, Spanish, Portuguese, Russian, Arabic and Chinese thanks to a panel of international editors, whom we thank for their kind contributions to the

editorial process. Accepted papers will be translated into English and published both in the original language and in English after the corresponding author has approved the English-language 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" was launched in 2015 to accommodate reports of new bacterial, viral, fungal and parasitic species, along with the genomes thereof.

Editorial Activity

In 2016 NMNI received 203 submissions, including seven submissions (3.5%) referred on from CMI after a proposal was made by one of the editors of CMI to resubmit to NMNI. Of the 203 submitted papers, 76% have been accepted for publication (with 36 papers being reviewed or under revision). Of accepted papers, five have been sponsored with fees entirely covered by ESCMID. Altogether, a total of 301 papers have been published since the launch of NMNI, and 138 are now indexed in PubMed Central, with a regular progression in the number of submitted papers. Fig. 1 illustrates the geographical origin of the authors of accepted papers, indicating that NMNI is on the way to achieving its main goal: the rapid promotion of discoveries in infectious and tropical diseases and clinical microbiology made by emerging research teams.

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 paper has 50 citations, the second most cited has 19 citations

NMNI Editorial 23

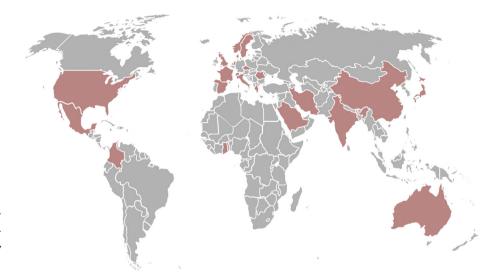


FIG. 1. Geographical origin of authors of papers accepted for publication in *New Microbes and New Infections*, 2016.

and the third most cited article has 15 citations [5-7]. In addition, a total of 3777 full-text downloads were registered by mid-December 2016.

Perspectives

By strengthening its editorial board, NMNI will decrease the time taken for online publication, which remains above its goal of a 2-month process for publication, measured from initial submission. 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.

Conflict of Interest

None declared.

References

- Drancourt M. Birth of a new European society for clinical microbiology and infectious diseases journal. New Microbes New Infect 2013;1:1.
- [2] Leffad M, Cousens R, Raoult D. CMI editorial report. Clinical Microbiol Infect 2015;2015(21):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 2014;6:49–52.
- [4] Prigent G, Perillaud C, Amara M, Coutard A, Blanc C, Pangon B. Actino-baculum schaalii: a truly emerging pathogen? Actinobaculum schaalii: un pathogène réellement émergent? New Microbes New Infect 2016;11:8–16.
- [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;6:22–9.
- [6] Foster NF, Collins DA, Ditchburn SL, Duncan CN, van Schalkwyk JW, Golledge CL, et al. Epidemiology of Clostridium difficile infection in two tertiary-care hospitals in Perth, Western Australia: a cross-sectional study. New Microbes New Infect 2014;2:64–71.
- [7] Figueras MJ, Levican A, Pujol I, Ballester F, Rabada Quilez MJ, Gomez-Bertomeu F. A severe case of persistent diarrhoea associated with Arco-bacter cryaerophilus but attributed to Campylobacter sp. and a review of the clinical incidence of Arcobacter spp. New Microbes New Infect 2014;2:31–7.