



The Authority of the Impact Factor

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The impact factor is the most commonly cited measure used to evaluate the quality of a journal and reflects the ratio of the number of citations of a journal to its number of published articles, based on the previous two years^{1,2}. The impact factor is proportionally higher in journals with a high number of readers and consequently underestimates the importance of articles published in journals that are more specific and directed to subspecialties. As it directly reflects the number of citations and consequently accesses, more generalist journals often have a higher impact factor. Compare the impact factor of the *New England Journal of Medicine* – NEJM (72.4) with *Plastic and Reconstructive Surgery* (3.78); certainly, a publication in NEJM will have a greater chance of being read by a general reader. On the other hand, it is more likely that a plastic surgeon will first read an article of interest published in the journal of their specialty. Thus, in the author's point of view, it is essential to define whether the goal is to disseminate a study in order to gain visibility in general or influence peers with the results obtained, even when publishing in journals of lesser circulation, but of high quality, such as specialized journals. The role of doctors and researchers is to disseminate their results for the well-being of their patients, implementing improvements in diagnosis, management, and therapy outcome. It is essential to understand the limitations of the impact factor to encourage submission to journals of lesser specialties that are also impactful^{1,3}.

There is clear pressure in the academic environment to publish in journals with high impact to ensure the best performance indices for the service of origin, in addition to requirements in graduate courses and higher chances of obtaining funding. The exclusive use of the impact factor as a tool to classify journals in our country should be reassessed. This does not relate exclusively to our specialty, but to all specialized areas of medicine that coexist with the dilemma between publishing for appearance and publishing to disseminate science. Of course, a publication in a high-impact, well-known journal does not merit debate, but there are many less-qualified journals with much higher impact rates than specialist journals. These situations should be evaluated. How can we explain that the world's leading plastic surgery journal does not merit the highest classification in Qualis-Capes? This is not unique to our specialty, as discussed earlier.

New methodologies should be implemented to classify journals, nationally and internationally. Publishers' associations have sought to provide justifications and stimuli for publishers in order to increase the evaluation metric to assess the readability of an article. Open access is one way, as it allows greater scope in terms of readers. This dissemination of medical knowledge to a broader audience not yet evaluated or accounted for by the impact factor should become the main path for change.

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