

Training, updating and publication: the tripod of affirmation

The month of October 2004 has become a historical landmark for the now-called Brazilian Society of Otorhinolaryngology and Head and Facial Surgery. At least three facts are responsible for the special highlight given to the month in which we held the 37th Brazilian Congress of Otorhinolaryngology - in which we reached the record number of enrolled participants - the Portuguese delegation along had over 100 members. There were 643 scientific papers presented as oral presentations (262) and scientific posters (381); we organized the first reevaluation of medical residence programs in Otorhinolaryngology, accredited by ABORL-CCF. Eighty residence centers were visited by over 50 especially trained auditors and, finally, after a two-year process with the National Library of Medicine, we reached the indexation of the English version of the Brazilian Journal of Otorhinolaryngology by Index Medicus, which includes our publication at Medline.

Each of these facts deserves some moments of attention, starting from the scientific activities of the congress, held in Fortaleza. We all know that the Brazilian Congress of the specialty has as its main scope to foster social and friendly integration of specialists from all parts of the country and continents. It goes hand in hand with the intention of updating knowledge, the possibility of starting scientific and intellectual debates, and the presentation of scientific free papers. However, the scientific committee was taken aback by the flow of papers in complete publication formats submitted this year. The total number of approved papers presented this year has been second only to that of the American Academy Meeting, held in New York, gathering over 6,000 Otorhinolaryngologists. There were 643 papers here and 651 papers there, maintaining the equivalence between oral presentation and scientific posters. In order to succeed in the selection process, which granted 13 awards (3 top experimental studies, 3 top cohort studies, 3 top clinical trial or case-control study, best scientific initial study in Otology, in Rhinology and in Laryngology, and best scientific poster), we gathered 92 Master and Ph.D. professionals who studied and discussed for 30 days prior to the congress and during the 4 days of the event which studies deserved the awards.

Considering the evaluation process of the medical residence programs in Otorhinolaryngology, we observed the level of maturity of the academic community of our specialty thanks to both the professional behavior shown

by the organizing committee and the evaluation teams, and the availability and hospitality offered by the visited centers. Practically all programs of medical residence and specialization in Otorhinolaryngology accredited by ABORL-CCF were carefully assessed, based on a detailed protocol specially designed to include all relevant aspects required for good training of skilled professionals. Before the visits started, a team of professionals got together for a period of 4 weeks to determine the final protocol and to standardize the subjective points of the evaluation. Each program was visited by two auditors that collected information from the heads of the centers and talked to the resident physicians participating in the programs.

This process has just begun, but its results are obvious and the mere possibility of thinking about what we should consider the optimal training for an Otorhinolaryngologist already makes it worth doing it.

The third big event in October seems to be a consequence of the two previous ones. It had been a dream to increase visibility of our journal through its indexation by international database centers. The largest one of them all is Medline, whose search engine, PubMed, is the main form of scientific search in the medical area in the world. For some time Index Medicus had restricted the access of new journal from Africa, the Caribbean, Asia and South America in its world platform by alleging that each one of these continents had a subsidiary with its respective indexation. In our case, it is Index Medicus Latino Americano. However, these databases are not part of Medline and to access them we have to make use of limited regional databases such as LILACS, which reduces our visibility abroad. As of 2003, the indexation policy at Medline changed and opened room for large journals and organizations from the above mentioned regions. In an attempt not only to have indexation but also to be read by the rest of the world, we started to publish the English version of RBORL and then required our inclusion in the database of the National Library of Medicine. It was a great pleasure to see that the English version of our journal has been approved and its currently being included by MEDLINE under the abbreviation Rev Bras Otolaringol. This abbreviation is extremely important because every time we correctly cite an article from RBORL it will be accounted for and our citation index and impact factor will be measured, increasing our score

in bibliometric rates, which is extremely important for researchers that need publications to raise financial sponsoring for their studies.

In summary, this is the end of our 70th volume and it has been quite a good year: over 150 published articles, online site with the journal, which receives 6,000 national accesses and 3,000 international accesses per month, out of which about 2,000 are from the United States. The submission of papers through the web facilitates the process for authors, reviewers and readers and, finally, our bank of

images, with pictures, photos and illustrations has high resolution for all articles published for the past 70 years of the journal, with search mechanism by author and key word, helping speakers and professors to produce their presentations and classes.

We welcome 2005 and hope it will be as good as 2004.

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