

CLINICAL AND BIOMEDICAL RESEARCH: POSITIVE PROSPECTS FOR THE JOURNAL

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[Clin Biomed Res. 2014;34\(2\):95-96](#)

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It is a great pleasure to present the second issue of *Clinical and Biomedical Research* and some of our work toward setting new standards for the journal. This issue contains two review articles, eight original articles, and four case reports, covering a wide range of topics important to the practice of medical sciences.

This issue contains a wide-ranging, in-depth review by Caierão et al. on the current state of antimicrobial resistance in *Streptococcus pneumoniae*, one of the main causes of community-acquired bacterial infections, including pneumonia, meningitis, otitis media, and sinusitis¹. Also on the topic of bacterial infections, this issue of *CBR* carries a review on foodborne illnesses caused by *Escherichia coli* O157:H7 and their clinical characteristics². Possibly a neglected pathogen in Brazil, this pathogen was recently involved in a major multinational European outbreak associated with severe complications in affected patients. The authors of both reviews are affiliated with eminent research groups and are leaders in their fields of study in the country. *CBR* also published in its second issue a special article with a thoughtful discussion on the theme of genetic diseases and the cost associated with management of these patients³.

Among the eight original articles published in this issue, I would like to highlight the first international manuscript published in *CBR*: a study carried out by Santos et al., from Portugal, which assesses the impact of minimal hepatic encephalopathy on quality of life by means of the Psychometric Hepatic Encephalopathy Score⁴. Other original contributions include a report of successful experiences in glycemic control⁵ and anticoagulation management⁶ in outpatient settings and in the improvement of tuberculosis detection, cure, and treatment drop-out rates at a primary care service after implementation of a tuberculosis control program⁷.

We also publish an analysis of contraceptive use — with particular emphasis on emergency contraception — among women treated at a hospital in the state of Pará, in the Brazilian Amazon region⁸, and a study of the prevalence of diabetes mellitus as detected by glycated hemoglobin testing in the population of a coastal municipality in Southern Brazil⁹. Finally, Bento et al. present an interesting assessment of the treatment-changing impact of fiberoptic bronchoscopy in hematologic patients with febrile neutropenia¹⁰, and Rozales et al. report the results of real-time PCR optimization for early detection of HCV infection¹¹.

Regarding the aim of internationalization of our journal, we have achieved some gains in the first semester of *CBR* under its new proposal. These advances include extensive involvement of peer reviewers from

several institutions worldwide in evaluating the manuscripts submitted to *CBR*. We are still a long way from our goal of receiving a substantial number of international submissions, but the participation of foreign contributors is an important step toward our internationalization process. *CBR* has also been indexed by the Directory of Research Journal Indexing, an international database of scientific journals; we believe this will help improve the visibility of our journal, especially in Asian countries.

This second issue introduces additional layout modifications and minimal changes in house style. Our purpose remains, as always, to improve the publication process, not only to make this journal an important channel for dissemination of scientific information but also to improve its editorial quality.

Once again, I conclude this editorial inviting investigators to publish their articles in *CBR*. One of our goals, which we have rigorously pursued, is for peer review to follow the established time frame, which includes a submission to first decision time of 6 weeks. Continuing our policy of fostering the involvement of Brazilian and international peer reviewers in the manuscript assessment process, alongside an expected increase in the number of domestic and international submissions, are important steps for advancing the reputation of *CBR* as a respectable venue for the dissemination of scientific information.

REFERENCES

1. Caierão J, da Cunha GR, Dias CAG. Antimicrobial resistance in *Streptococcus pneumoniae*. *Clin Biomed Res.* 2014;34:97-112.
2. De Paula CMD, Loico MR, Tondo EC. *Escherichia coli* 0157:H7: general characteristics and occurrence in Brazil. *Clin Biomed Res.* 2014;34:113-21.
3. Schwartz I, Souza M, Leivas P, Schuler-Faccini L. Clin genetics and public policies: how should rare diseases be managed? *Clin Biomed Res.* 2014;34:122-31.
4. Santos D, Barbosa I, Brito C, Fernandes J, Cerqueira R, Peixoto B. Assentment of the influence of liver cirrhosis and minimal hepatic encephalopathy on quality of life. *Clin Biomed Res.* 2014;34:157-63.
5. Becker AD, De Lima E, Ledur PS, Schaan BD. Glycemic control in patients with diabetes mellitus and cardiovascular disease monitored at a reference outpatient clinic. *Clin Biomed Res.* 2014;34:132-8.
6. Pivatto F Jr, Da Silva LF, Simionato BBM, Fuzinato F, Oliveira JD, Pires LM, et al. Management of anticoagulation with vitamin K antagonists in a tertiary hospital outpatient clinic. *Clin Biomed Res.* 2014;34:139-44.
7. De Souza CF, Ben AJ, Schneider SMB, Nascimento BP, Neumann CR, De Oliveira FJAQ. The importance of programmatic health actions in tuberculosis control: experience of a primary health care service in Porto Alegre, Rio Grande do Sul, Brazil. *Clin Biomed Res.* 2014;34:175-83.
8. Priante PSB, Cioba C, Corleta HE, Lubianca JN, Capp E. Evaluation of emergency contraception use among women receiving gynecological treatment in the Brazilian Amazon. *Clin Biomed Res.* 2014;34:145-51.
9. Xavier NL, Goi CJ Jr, Barbieri GX, Campos PM. Glycated hemoglobin in the early diagnosis of diabetes in a population sample from Xangri-Lá, Brazil. *Clin Biomed Res.* 2014;34:152-6.
10. Bento L, Paz A, Rigone L, Fischer G, Bittencourt R, Silla L, et al. Fiberoptic bronchoscopy in the diagnosis and therapeutic decision for respiratory infections in hematological febrile neutropenic patients. *Clin Biomed Res.* 2014;34:169-74.
11. Rozales FP, de-Paris F, Machado ABMP, Costi C, Barth AL. Optimization of one-step real-time PCR for the X-tail target of HCV as a diagnostic test. *Clin Biomed Res.* 2014;34:164-8.