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Scandinavian Journal of Primary Health Care Publisher's Report 2012

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Health Care**



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Informa Healthcare

Informa Healthcare publishes one of the largest portfolios of pharmaceutical and health sciences journals in the world. Our more than 160 peer-reviewed journals span the complete spectrum of drug discovery to clinical medicine.

Our editors, scientific advisors and editorial board members are among the world's most respected clinicians, pharmaceutical scientists and health sciences professionals. All published content is peer-reviewed by top scientists and doctors from specialized academic arenas. We conform to the highest standards of transparency and ethics in publishing.

Our journals have a true international reach and are all available online. With sales and marketing offices in Europe, North America and the Pacific Rim we ensure that every journal is marketed in the most efficient way.

At Informa Healthcare, we combine the expertise and influence of a major global publisher with the personal care of a niche publishing partner to deliver high-yield, high-quality information for our subscriber and reader communities. We are proud to hold successful partnerships with more than 150 academic associations and professional societies worldwide. The dedicated Informa Healthcare Society Publishing Unit in Sweden caters to approximately 80 of these international societies, publishing more than 40 society journals spanning a wide range of subjects.

Each journal benefits from our dedicated in-house team of publishing professionals, covering Editorial, Production, Marketing, Administration and Sales functions. Our ambition is to provide each journal and journal owner with the best service and publishing high quality articles in a timely and efficient manner.

**Informa Healthcare
publishes 160+ peer-reviewed journals**

Partnerships with more than 150 academic and professional associations

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what we do.

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Dear society board member, dear editor, dear editorial board member,

Informa Healthcare is very proud to be the publisher of Scandinavian Journal of Primary Health Care. Today we publish more than 160 high quality, peer reviewed journals and our portfolio of titles covers therapeutic areas from cardiology, dermatology, oncology through to our respected Expert Opinion series on drug discovery and development.

All our journals are, of course, rigorously peer reviewed, and the maintenance of the highest academic and ethical standards is paramount to us. We also make the greatest efforts to provide the very best services we can to our authors and our editors. We continuously seek to streamline our processes to offer the most efficient, high quality and speedy turnaround from submission to publication that we can.

While we are part of the large publicly quoted company Informa plc, we are run on a much divisional basis: we listen to our expert editors, society partners, authors and editorial boards, and welcome suggestions and ideas to improve our publication practices. While we have the significant backing and resources of our large parent company, we operate as a lean, fast moving and entrepreneurial small publisher, with the attention to detail and personal touches that that allows.

Our portfolio is a mixture of journals independently owned by us, and prestigious journals published on behalf of august bodies. We have the capacity to launch and acquire new products and to launch new journals in a prompt and efficient manner, and we welcome suggestions and ideas for new area within which we may be able to aid research and the dissemination of knowledge. We have recently purchased of Primal Pictures (www.primalpictures.com); a first class company with high quality anatomical images rendered with innovative and interactive technology. We believe this will offer demonstrable added benefits to our peer reviewed content in the years to come.

Like most publishers we are increasingly providing our content digitally. All our content is of course already available online. We are aware that we should not be making changes to our content delivery systems just because technology allows us to; we know just how frustrating change without real benefits can be for the users of journal content. But we do plan to make significant further investments in our platforms over the coming year to ensure that our authors' and partners' content reach the widest audience in the most convenient way.

Our international sales and marketing teams continue to work on the mature markets to fill any gaps in the current library and institutional holdings. These dedicated teams also work on the new and emerging markets in Asia, Middle East and LatinAmerica to increase our sales and improve academic and corporate access to the Informa Healthcare content.

As always, my colleagues and I welcome your thoughts, comments and criticisms. Please do not hesitate to contact me at Nick.delrio@informa.com

Nick del Rio
Managing Director

Some background and facts

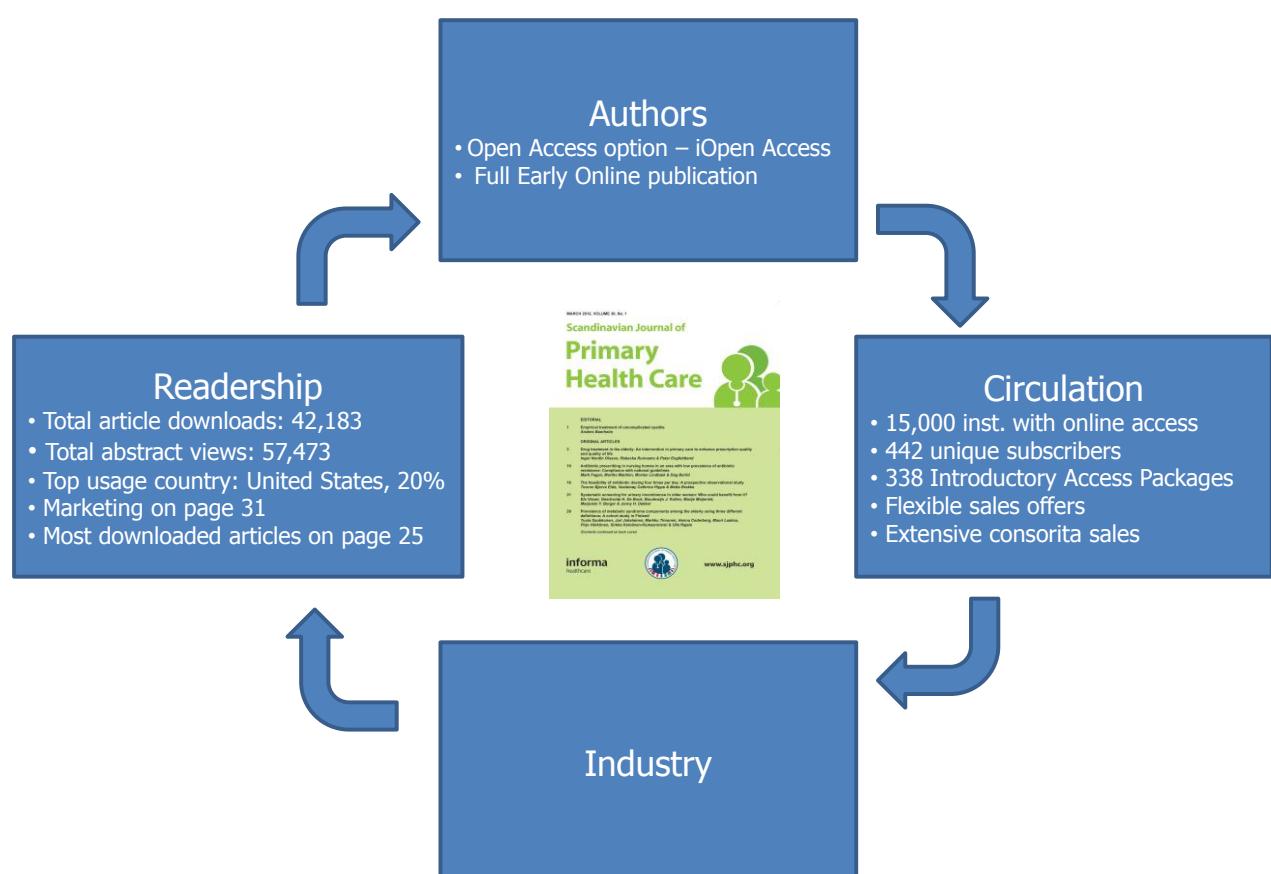
- In mid 2012 there were about 28,100 active scholarly peer reviewed journals published globally
- The number of articles published and the number of journals have both grown steadily for over two centuries, by about 3% and 3.5% per year respectively
- USA continues to dominate the global output of research papers with approx 21% with China now on a second place with approx 10% followed by UK (7%), Japan (6%), Germany (6%) and France (4%)
- The research community continues to see peer review as fundamental to scholarly communication and appears to be committed to it. The typical reviewer spends 5 hours per review and reviews some 8 articles per year
- More or less all STM (scientific, medical, technical) journals are now available online
- Informa's publishing units including, among others, Informa Healthcare (health sciences publishing), Taylor & Francis, Routledge, Psychology Press, Garland and CRC Press publish approx 1,900 journals

1. Acknowledgements

The publisher would like to thank the Editor-in-Chief, the Assistant Editors, the Editorial Secretary and the Editorial Board for a successful cooperation during the past year. We are looking forward to continue to develop the journal in 2013.

2. Summary

This report will present the development of Scandinavian Journal of Primary Health Care during 2012, with reference to citations, indexing, readership, usage, journal management as well as marketing and sales. This can all be seen as a virtuous circle, as presented below. The authors' box summarizes author services and the ability to attract high quality papers to the journal. Through the publication of good articles, the journal maintains and attracts circulation as well as industry interest in the journal. The circulation and industry interest together with our marketing activities increase the readership. The online usage and citations do in turn attract high quality articles, which completes the circle.



3. Impact Factor and Citations

3.1. Impact Factor Definition

The Impact Factor (IF) is a measure of the frequency with which the "average article" in a journal has been cited in a particular year or period. It is used as a means to show the relative impact of a journal within its field, with journals with higher Impact Factors considered to be more important than those with lower ones. The Impact Factor was devised by Eugene Garfield, the founder of the Institute for Scientific Information (ISI), which is now part of Thomson Reuters. Impact Factors are calculated yearly for journals that are indexed in Thomson Reuter's Science Citation Index/Social Science Citation Index.

IF=average number of citations per article in a journal, for a given time period.

The Impact Factor of a journal is the average number of citations received per article published in that journal during the two preceding years. For example, if a journal has an Impact Factor of 3.5 in year 3, then its papers published in year 2 and 1 received 3.5 citations each on average. The year 3 Impact Factor of a journal would be calculated as follows:

A = the number of times articles published in year 1 and 2 were cited by indexed journals during year 3.

(Number of cites include citations to all kinds of articles.)

B = the total number of 'citable items' published in the journal in year 1 and 2. ('Citable items' are articles of original research, review articles, or full proceedings papers; not editorials or letters-to-the-editor.)

$$\text{Impact Factor} = \frac{A}{B}$$

The Journal Citation Reports[©] (JCR) show rankings of journals by highest Impact Factor in different disciplines/categories. Please note that Impact Factors are released by Thomson Reuters with a delay of 6 months. For example, year 3 Impact Factors will be released in June year 4.

The IF is released in June each year.

The data underlying the metrics are drawn from the Citation Indexes that comprise Web of Science.

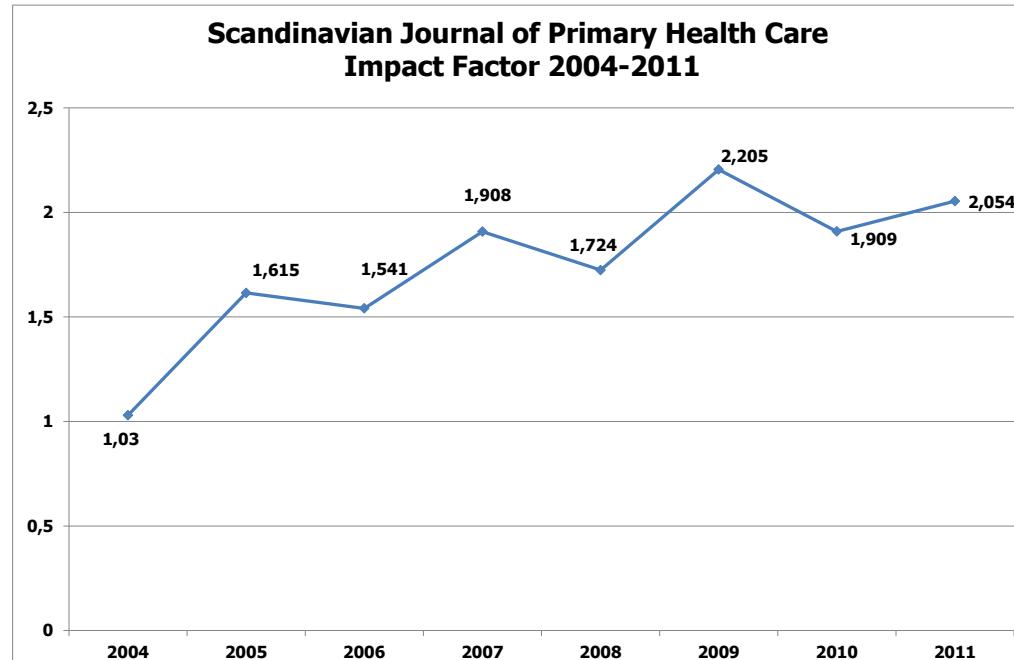
3.2. Impact Factor for Scandinavian Journal of Primary Health Care

In 2011, Scandinavian Journal of Primary Health Care had an Impact Factor of 2.054. It was ranked as number 2 of 16 in the category 'Primary Health Care' in the Science Citation Index (2010: 4/14), number 41 of 155 in the category 'Medicine, General & Internal' and number 32 of 76 in the category 'Health Care Sciences & Services'. Appendix 1 shows the ranking of all journals in these categories.

Scandinavian Journal of Primary Health Care has an IF of 2.054, which is an increase from last year.

No of citations 2011 to published items:	152
Calculation:	-----=2.054
No of published items 2009-2010:	74

3.2.1. Impact Factor Development



The 2012 Impact Factor will be reported on after its release in June 2013.

3.3. The 5-year Impact Factor 2011

Although Impact Factors are based on citations to articles published in the previous two years, average citation rates can be calculated using longer time periods. The 5-Year Impact Factor is the average number of times articles from the journal published in the last five years have been cited in the JCR year. This metric can be used to better gauge the impact of journals in fields where the influence of published research evolves over a longer period of time. The 5-year IF for Scandinavian Journal of Primary Health Care is calculated as follows:

5-year IF is most relevant when influence of published research evolves over many years.

No of cit. 2011 to published items 2006-2010: 382

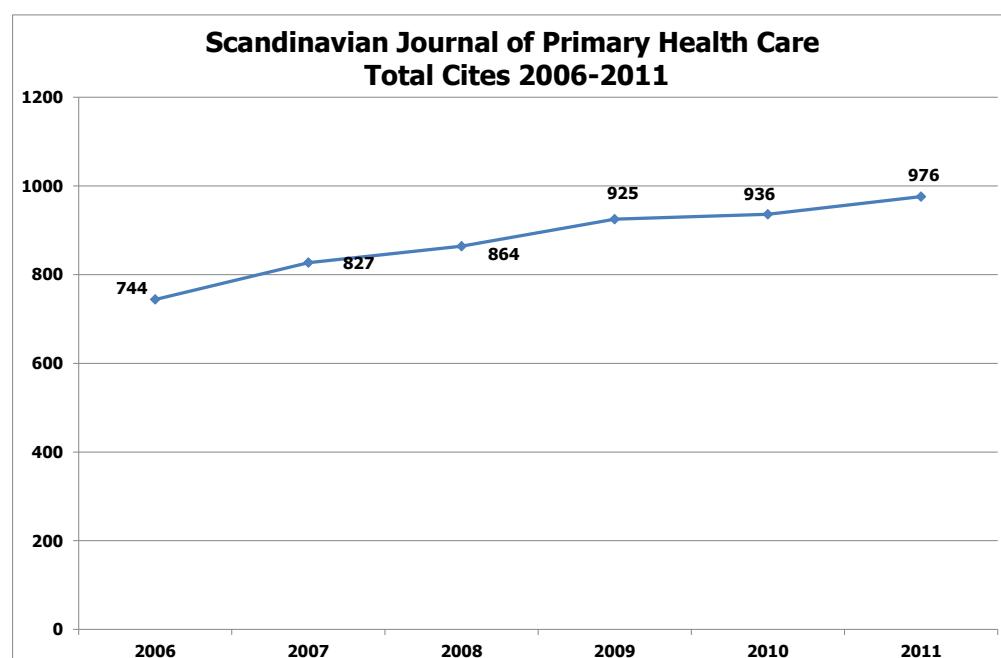
Calculation:
$$\frac{\text{No of cit. 2011 to published items 2006-2010}}{\text{No of published items 2006-2010}} = 2.021$$

No of published items 2006-2010: 189

3.4. Total Citations Development

In order to fully remove the time barriers one can also study the development of total citations made to the journal per year. It is however of course of great importance to keep in mind that this does not at all set the number of citations in relation to the number of items published. Hence this development is most interesting for journals that have not changed much in their number of published items per year.

Looking at the total citations per year will fully remove the time barriers.



3.5. Self Citations 2011

The table below shows the contribution of the journal's self citations to its Impact Factor in 2011.

Self Cites in 2011 to all volumes	121 (12% of 976)
Self Cites to Years Used in Impact Factor Calculation 2011	48 (31% of 152)
Impact Factor without Self Cites	1.405

Scandinavian Journal of Primary Health Care has a high number of self citations.

Self-citations often represent about 13% of the citations that a journal receives.

3.6. Highest Impact Factors within the Category

The table below shows the top ranked journals in the 'Primary Health Care' category, sorted by highest Impact Factor. The number of 'total citations' in this table includes citations to all volumes, all years. Please turn to Appendix 1 for the 2011 JCR for the entire category and the other 2 categories where the journal is listed.

Scandinavian Journal of Primary Health Care ranks as number 2, out of 16 journals in "Primary Health Care" category.

Rank	Title	Impact	Total Citations
		Factor 2011	2011
1	Annals of Family Medicine	5.355	2351
2	Scandinavian Journal of Primary Health Care	2.054	976
3	Journal of the American Board of Family Medicine	2.053	1797
4	British Journal of General Practice	1.831	3513
5	BMC Family Practice	1.799	977
6	American Family Physician	1.531	3662
7	Family Practice	1.503	2944
8	Canadian Family Physician	1.408	1697
9	Family Medicine	1.142	1519
10	European Journal of General Practice	1.130	235

Top cited articles 2011 were published 2007 or earlier, and hence are not included in the IF.

3.7. Top Five Most Cited Articles in Scandinavian Journal of Primary Health Care 2012 (publ. 1995-)

Below you will find a table with the top five most cited articles last year overall.

Title	Authors	Year	Vol	Issue	Citations
The Norwegian General Practice (NORGEP) criteria for assessing potentially inappropriate prescriptions to elderly patients	Rognstad, Sture; Brekke, Mette; Fetveit, Arne; et al.	2009	27	3	14
Frequency and nature of problems associated with sickness certification tasks: A cross-sectional questionnaire study of 5455 physicians	Lofgren, Anna; Hagberg, Jan; Arrelov, Britt; et al.	2007	25	3	11
Problems in sickness certification of patients: A qualitative study on views of 26 physicians in Sweden	Von Knorring, Mia; Sundberg, Linda; Lofgren, Anna; et al.	2008	26	1	11
Help-seeking and associated factors in female urinary incontinence - The Norwegian EPINCONT Study	Hannestad, YS; Rortveit, G; Hunskaar, S	2002	20	2	10
Use of complementary and alternative medicine in the Scandinavian countries	Hanssen, B; Grimsgaard, S; Launso, L; et al.	2005	23	1	10

Since 1995 there are in total 922 articles from Scandinavian Journal of Primary Health Care included in the Web of Science. Out of these 922 one can note that 167 articles do not have any citations at all, to date. However, if one excludes articles published in 2012 (which have not been published long enough in order to draw any conclusions from) there are 116 articles remaining uncited.

167 out of 922 articles in Scandinavian Journal of Primary Health Care have no citations at all.

3.8. Top Five Most Cited Articles in 2011 (publ. 2009-2010)

The following table lists the most cited articles 2011, published during 2009 and 2010. Please remember that this is the same underlying time period as for the latest Impact Factor Calculation, and hence these articles are the ones that have contributed most to the current Impact Factor for Scandinavian Journal of Primary Health Care.

Title	Authors	Year	Vol	Issue	Cit	2011
What do GPs feel about sickness certification? A systematic search and narrative review	Wynne-Jones, Gwenllian; Mallen, Christian D.; Main, Chris J.; et al..	2010	28	2	9	
Physical activity and quality of life in subjects with chronic disease: Chronic obstructive pulmonary disease compared with rheumatoid arthritis and diabetes mellitus	Arne, Mats; Janson, Christer; Janson, Staffan; et al.	2009	27	3	9	
The Norwegian General Practice (NORGEP) criteria for assessing potentially inappropriate prescriptions to elderly patients	Rognstad, Sture; Brekke, Mette; Fetveit, Arne; et al.	2009	27	3	8	
Falls risk among a very old home-dwelling population	Iinattiemi, Sari; Jokelainen, Jari; Luukinen, Heikki	2009	27	1	7	
GPs' antibiotic prescription patterns for respiratory tract infections - still room for improvement	Gjelstad, Svein; Dalen, Ingvild; Lindbaek, Morten	2009	27	4	6	

3.9. Top Five Most Cited Review/Original Articles 2008-2012 (publ. 2008-2012)

Review articles are generally cited more frequently than regular research articles because they often serve as surrogates for earlier literature, especially in journals that discourage extensive bibliographies. In the JCR system any article containing more than 100 references is coded as a review. Articles in "review" sections of research or clinical journals are also coded as reviews, as are articles whose titles contain the word "review" or "overview."

Even though review articles are generally more cited than original articles this is not always the case. Hence it is interesting to see the top cited review articles for Scandinavian Journal of Primary Health Care, and compare these to the top cited original articles.

**During the last 5 years
the 5 most cited
original articles were
cited more than the
top 5 review articles
(122 vs. 45).**

Review Article Title	Authors	Year	Vol	Issue	Citations 2008-2012
Problems in sickness certification of patients: A qualitative study on views of 26 physicians in Sweden	Von Knorring, Mia; Sundberg, Linda; Lofgren, Anna; et al.	2008	26	1	32
The Norwegian General Practice (NORGEP) criteria for assessing potentially inappropriate prescriptions to elderly patients	Rognstad, Sture; Brekke, Mette; Fetveit, Arne; et al.	2009	27	3	28
Pharmacologically inappropriate prescriptions for elderly patients in general practice: How common?	Brekke, Mette; Rognstad, Sture; Straand, Jorund; et al.	2008	26	2	23
Secular trends in cardiovascular risk factors with a 36-year perspective: Observations from 38- and 50-year-olds in the Population Study of Women in Gothenburg	Bjorkelund, Cecilia; Andersson-Hange, Dominique; Andersson, Kate; et al.	2008	26	3	20
Multi-dose drug dispensing and inappropriate drug use: A nationwide register-based study of over 700000 elderly	Johnell, Kristina; Fastbom, Johan	2008	26	2	19

Original Article Title	Authors	Year	Vol	Issue	Citations 2008-2012
What do GPs feel about sickness certification? A systematic search and narrative review	Wynne-Jones, Gwenllian; Mallen, Christian D.; Main, Chris J.; et al.	2010	28	2	19
What is the role of the general practitioner towards the family caregiver of a community-dwelling demented relative?	Schoenmakers, Birgitte; Buntinx, Frank; Delepeleire, Jan	2009	27	1	11
Interventions on frequent attenders in primary care	Smits, Frans Th. M.; Wittkampf, Karin A.; Schene, Aart H.; et al.	2008	26	2	10
The effects of gatekeeping: A systematic review of the literature	Garrido, Marcial Velasco; Zentner, Annette; Busse, Reinhard	2011	29	1	5
Phenomena associated with sick leave among primary care patients with Medically Unexplained Physical Symptoms: A systematic review	Aamland, Aase; Malterud, Kirsti; Werner, Erik L.	2012	30	3	0

4. Indexing and Abstracting

Various indexing and abstracting services index the content of the Scandinavian Journal of Primary Health Care and the other journals published by Informa Healthcare. These differ in their coverage, as well as in their accessibility. Some, like MEDLINE/PubMed and Google Scholar, are available to everyone for free, whereas Web of Science and Scopus are available by subscription. Many of the databases display a full-text link, making it easy for the reader to find their way from the abstracting database to the full-text archives on the journal website at informahealthcare.com. Among the most important and more general indexing and abstracting services are:

Web of Science – Eugene Garfield made possible the widespread use of citation analysis in academics through his creation of three citation indices: Science, Humanities and Social Science Citation Indices, which were combined and transformed into an electronic version called the Web of Science. This online academic citation index is provided by Thomson Reuters and is designed for providing access to multiple databases, cross-disciplinary research, and in-depth exploration of specialized subfields within an academic or scientific discipline. Web of Science has indexing coverage from the year 1900 to the present and the multidisciplinary coverage encompasses more than 11,000 journals. The journals covered are selected on the basis of impact evaluation, and since not all journals are included its coverage in some fields is less complete than in others.

Scopus – Elsevier has introduced Scopus, an indexing and abstracting service that contains its own citation-tracking tool. Scopus indexes a larger number of journals than Web of Science, and includes more international and open access journals. Citation coverage however only dates to 1996 (abstracts, but not citation coverage, are available back to 1966 for some journals.). In total Scopus covers 18,500 peer-reviewed journals (including all of the journals included in MEDLINE). Suggested titles will be reviewed by the independent and international board on a continuous basis.

MEDLINE – MEDLINE is a bibliographic database of life sciences and biomedical information. It includes bibliographic information for articles from academic journals in the fields of biomedicine and health, and is compiled by the United States National Library of Medicine (NLM). MEDLINE is freely available on the Internet and searchable via PubMed. The database contains almost 5,600 selected publications, covering from 1950 to the present, and the majority of the

Among the most important general indexing and abstracting services are Web of Science, Scopus, MEDLINE, PubMed and Google Scholar

Web of Science has a thorough selection process. The coverage that dates way back in time is available by subscription only.

Scopus has a less thorough selection process. The coverage only dates back to 1996 and it is available by subscription only.

MEDLINE has a thorough selection process. The coverage dates back to the 1950's and is available to the public

articles are published in the U.S. Journals are not included automatically, but instead selection is based on recommendations by a committee who evaluate the scientific scope and quality of a journal.

PubMed – PubMed is a free database accessing primarily the MEDLINE database of references and abstracts on life sciences and biomedical topics. The database is maintained by the United States National Library of Medicine (NLM) at the National Institute of Health. PubMed has over 22.1 million records going back to 1966, selectively to the year 1865, and very selectively to 1809. Almost 60 percent of these articles are listed with their abstracts, many have linkouts to the full text version of the articles. PubMed must not be confused with PubMed Central, which is a database of full-text scientific literature in the same field, aimed to be an online archive of biomedical journal articles.

PubMed mainly includes MEDLINE titles, and is available to the public. It usually lists the full abstracts and include linkouts to the full text.

Google Scholar – Google Scholar is a freely accessible web search engine that indexes scholarly literature across an array of publishing formats and disciplines. Through its "cited by" feature, Google Scholar provides access to abstracts of articles that have cited the article being viewed, and thereby it provides the citation indexing similar to Scopus and Web of Science. Google Scholar is very secretive about its coverage, and does not publish a list of scientific journals covered. Moreover, it does not say how frequent it is updated and the citation information found in Google Scholar has often been found to be partly inadequate, or poorly updated.

Google Scholar is a citation index that is freely accessible to all. It is however very secretive about its coverage, and is sometimes accused of being inadequate.

Google Scholar uses a matching algorithm to look for keyword search terms in the title, abstract or full-text of an article from multiple publishers and web sites (Google Scholar does not share the specifics of how this algorithm works). The number of times a journal article, book chapter, or web site is cited also plays an important part in Google Scholar's ranking algorithm. Search results are displayed so that the more cited and highly relevant articles rise to the top of the set, which makes these articles even more cited.

4.1. Indexing of Scandinavian Journal of Primary Health Care

Applied Social Science Index & Abstracts; Biological Abstracts; Cumulative Index to Nursing & Allied Health Literature (CINAHL); Current Contents/Clinical Medicine; EMBASE/Excerpta Medica; Index Medicus/MEDLINE; Inventory of Marriage and Family Literature (IMFL); Nutrition Research Newsletter; PEDro; Psychological Abstracts; PsycLIT/PsychINFO; Research Alert and SciSearch.

Scandinavian Journal of Primary Health Care is included in all indexing and abstracting services mentioned in this chapter, as well as in a number of smaller/more specialised services.

5. Subscriptions

5.1. Subscription sales at Informa Healthcare

The primary focus of our subscriptions sales activity is in building and maintaining core subscriptions (subscriptions at full list price) to our journals. Our sales teams sell subscriptions to either individual journals, or more commonly, collections of journals which are relevant to the customer's area of operation.

The primary focus of our subscriptions sales is to build and maintain core subscriptions.

Informa Healthcare has a global sales presence with teams in Europe, North America, Asia-Pacific and Australia. Teams of account managers specialize in sales to the corporate, institutional and library consortia markets. In addition to developing business with new customers, our key customer accounts are actively managed to grow their subscription holdings and revenue spend with Informa Healthcare. There is also an in-house customer retention team which ensures the highest possible subscription renewal rates.

Agent involvement in the subscriptions business is high, especially in the institutional market. Informa Healthcare works closely with a plethora of agents worldwide to ensure the highest levels of subscription retention and new subscription uptake. We collaborate with all major agents globally, including Ebsco, Swets, Otto Harrassowitz, Kinokuniya, Marusen, China National Publications, Beijing Zhongke, Technomics and Journalpia.

Informa Healthcare has a close co-operation with all major subscription agents.

5.1.1. Archives

Informa Healthcare has made full-text archives available for purchase. The total digital archive includes more than 5,500 volumes and 30,000 issues across approximately 3.5+ million pages of historical journal content on one platform. Unlike many of our competitors we have flexible options which allow the customer to purchase access to the journal archives in a variety of ways. Customers may purchase the *Contemporary archive package* (1997 to the previous volume year at the time of purchase) or the *Legacy archive package* (from Volume 1, Issue 1 to 1997); or both. They may also choose to purchase archives to individual titles on an 'a la carte' basis and packages can even be customized down the volume year level to 'fill in the gaps' in customers' perpetual holdings.

We have customized packages of the full text archives available for purchase.

5.1.2. Pay-Per-View

Informa Healthcare also offers a pay-per-view model, where individual customers, readers, and librarians are able to purchase immediate access to full-text PDF or HTML articles online. Access to article titles, authors, tables of contents, and abstracts are available at no cost, with the option of purchasing the full-text. This model offers readers the option of purchasing content that is not part of a regular paid subscription, thus maximizing the revenue potential and making content readily available to the end user.

Readers may purchase full text articles on a pay-per - view basis.

5.2. Circulation

The days when the print-run of the journal equalled the total journal readership are long gone. The total number of institutions with the possibility to access Scandinavian Journal of Primary Health Care online is approximately **15,000**.

Scandinavian Journal of Primary Health Care can be accessed by approximately 15,000 institutions worldwide.

Total Circulation	15,000
Institutional subscribers	69
Society subscribers	374
Introductory access package	338
Free subscribers	18
HINARI	5,000
Ebsco Host	9,200

5.3. Online and Print Subscriptions

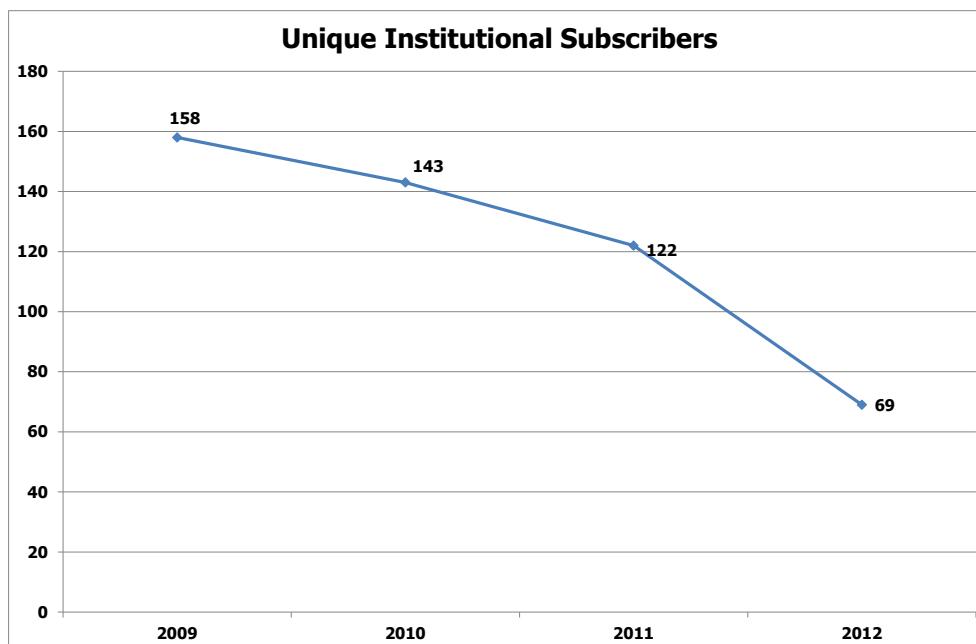
Unlike several other major publishers, Informa Healthcare does not charge subscribers any extra fee to obtain the print version of a journal, although online only is the default subscription model. The global trend is that the online version is considered the most valuable and most used format. All active Informa Healthcare subscriptions will come with online archive access dating back to 1997. However, if the subscription expires the customer will only retain permanent access to the content published during the period in which the subscription was active.

The standard subscription is online only, and includes access to articles dating back to 1997.

5.4. Unique Institutional Subscribers

Institutional subscriptions enable institution-wide access to the online content of the purchased journals. The total number of full price subscribers to Scandinavian Journal of Primary Health Care in 2012 was 69. This is a decrease from previous years, and the subscription trend over time is shown in the on the next page.

In 2012 Scandinavian Journal of Primary Health Care had 69 institutional subscribers.

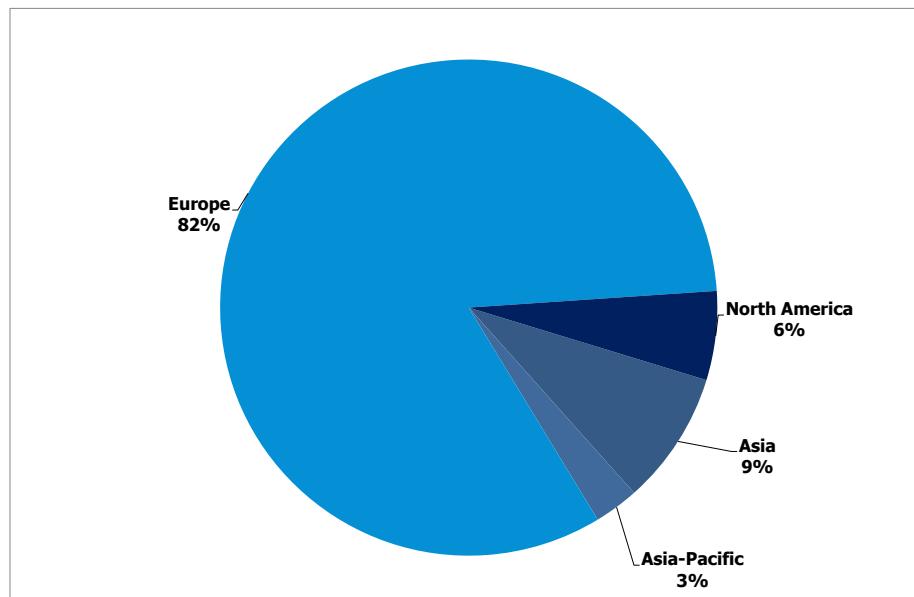


Out of the 69 unique institutional subscribers 1 were new for the year of 2012, whereas the rest renewed the subscription from previous year.

There were 1 new subscriber in 2012.

5.5. Subscriptions by Region

The chart below shows the geographic spread of the institutional subscribers in 2012.



5.6. Society Subscriptions

The nordic society members received 374 print copies of the journal.

5.7. Consortia Deals

Many academic libraries and institutions join together as consortia to be able to get high-quality content at better rates and/or improved service packages from the publishers. The consortium will then negotiate with us for lower subscription costs and increased access to the journals published by Informa Healthcare across their specific group. Subscriptions sold via consortia are included in the institutional subscription numbers above, and are simply a different way of negotiating journal subscriptions.

Consortia sales is one of our strengths at Informa Healthcare, and we have account managers around the globe working with this. Selling subscriptions through a consortium often improves the penetration of our journals within certain markets where, without the approval from the consortium, our ability to sell to its individual members would be greatly reduced. Not all consortia subscribe to all Informa Healthcare journals, but for the majority of our consortia deals the members of the consortium will have access to the entire portfolio, either through their core subscriptions or via Introductory Access Options (see below).

Consortia sales is one of the strengths at Informa Healthcare and it often improves our penetration within certain markets.

Below is a selection of the major consortia we are currently dealing with:

Consortia name	Country	Consortia type
BIBSAM	Sweden	National University License
CAUL	Australia	University library Consortium
CRKN	Canada	National University License
NERL	USA-North East	University Library Consortium
JANUL	Japan	University Library Consortium
KESLI	Korea	University Libraries (public and corporate libraries)
SCELC	USA-California	Academic and corporate libraries

In addition to academic institutions, managed accounts include government institutions such as the US Food and Drug Administration, Centre for Disease control, National Institute of Health and various national libraries.

5.7.1. Introductory Access Options

An innovative strategy employed by Informa Healthcare is the 'Introductory Access Options' (IAO), aiming to grow the number of subscriptions as well as the online usage of our journals. The IAOs are sold to existing clients and enable unlimited access to all titles in our collection at an introductory rate, on the condition that all existing full price subscriptions are renewed. We measure the usage per journal and in order to renew an IAO an organization must purchase core subscriptions (at list price) to any titles which have had usage above our set thresholds. Hence, through the IAO we are able to customize our content with librarians to better meet the requirements of end users.

Informa Healthcare sold 254 Introductory Access Options in 2012. These aim to increase online usage as well as the number of unique subscribers for coming years.

5.8. Free Subscriptions

The Editors and Editorial Board members enjoy free subscriptions to the journal, as do abstracting and indexing services and legal deposit agents (British Library, Library of Congress). The total number of free subscribers to Scandinavian Journal of Primary Health Care in 2012 was 18.

5.9. Third Parties

Informa Healthcare is a participant in WHO's HINARI project which provides institutions in developing countries with online access to major health sciences journals for free or at a very low cost. Currently over 5000 public institutions in more than 100 countries have access to most Informa Healthcare journals within the HINARI project, among them the Scandinavian Journal of Primary Health Care.

4,800 institutions in developing countries can access our journals for free or at a very low cost.

In order to further enhance the reach of Scandinavian Journal of Primary Health Care we cooperate with external databases and content providers such as Ebsco. Ebsco is the world's biggest subscription agent and, in addition, seller of various databases to about 9,200 libraries worldwide, covering specialist subject areas. Ebsco's database 'Ebsco Host' indexes all published articles of Scandinavian Journal of Primary Health Care and provides their clients with full-text-access. Under the Ebsco model, our content is however embargoed for 12 months, which from 2013 will be extended to 18 months, and with no archival rights. In addition, these online versions are 'flat-text' unlike the fully reference-linked versions available direct from informahealthcare.com. The strengths of Ebsco Host lie in selling large databases of content to smaller libraries whose research needs are met by content which is not the most up to date.

After a 12 months embargo period our journals can be accessed by about 9,200 institutions via Ebsco Host.

6. Usage

6.1. Online Usage

Informa Healthcare has united all its journal titles on one platform:

www.informahealthcare.com. The website for Scandinavian Journal of Primary Health Care can be viewed live at <http://informahealthcare.com/pri>.

The website provides a robust, secure, and quick platform for all our published content. As a leader in publishing platforms, we benefit from industry-wide enhancements, such as referral links into the site from PubMed and other abstracting and indexing partners, Google and other search engines, as well as from societies. The platform establishes seamless and robust depositing out to third parties (PubMed, Web of Science, Ebsco etc.) and customers (through e-alerting and RSS). Further, its statistics tool adds great value to our editorial, marketing and sales activities, as it allows usage information to be extracted down to article-specific level.

The journal website can be found at:
<http://informahealthcare.com/pri>.

6.1.1. Online Usage Statistics

The online usage of health sciences journals continues to increase with the development of the techniques for digital publishing, as well as the increasing amount of online-only subscriptions ordered. Google searches has become a common search engine to direct traffic to the journal site, and Informa Healthcare is constantly working on improving strategies to even further increase this source of usage. For some journals Google, and especially Google Scholar, has even surpassed PubMed as the main referrer to the journal website.

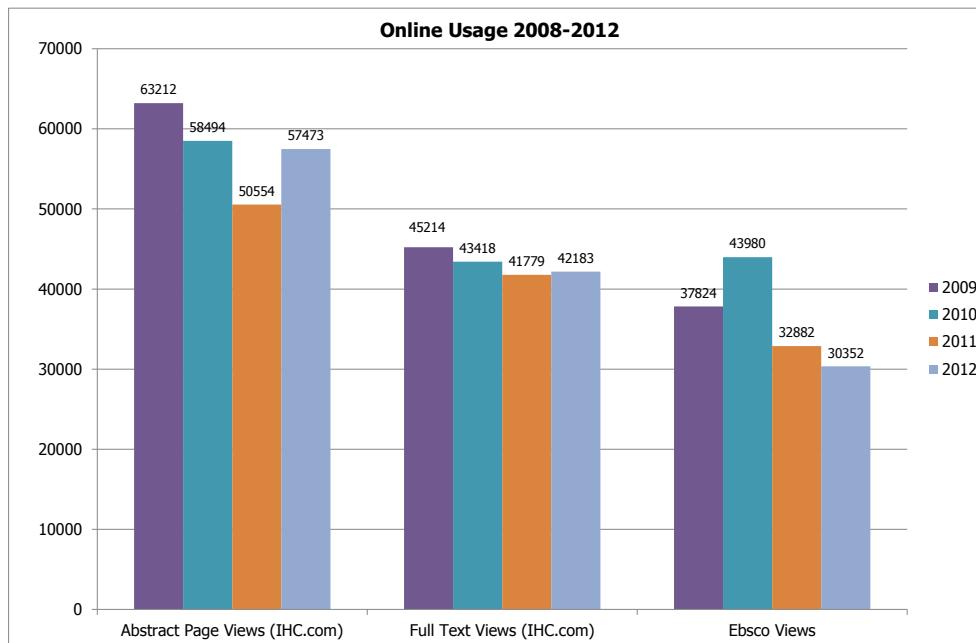
PubMed, Google and Google Scholar are generally the main referrers to the journal website.



The informahealthcare.com website and the journal content is available in a mobile optimized version for smart phones and tablets. We work continuously to be at the forefront when it comes to design, functionality and device optimizations on our mobile platform, and plan for further improvements to be launched next year. Out of the total online usage from mobile devices 45% comes from iPads, 31% from iPhones and 21% from Android.

Below is a summary of the online usage of the journal in 2012, in comparison with the years 2009-2011. As can be seen in this graph 73 per cent of all abstract views are converted to full text views, which is a very high percentage. The average conversion rate for Informa Healthcare titles is slightly below 30 per cent.

Around 73% of all abstract views are converted to full-text views.



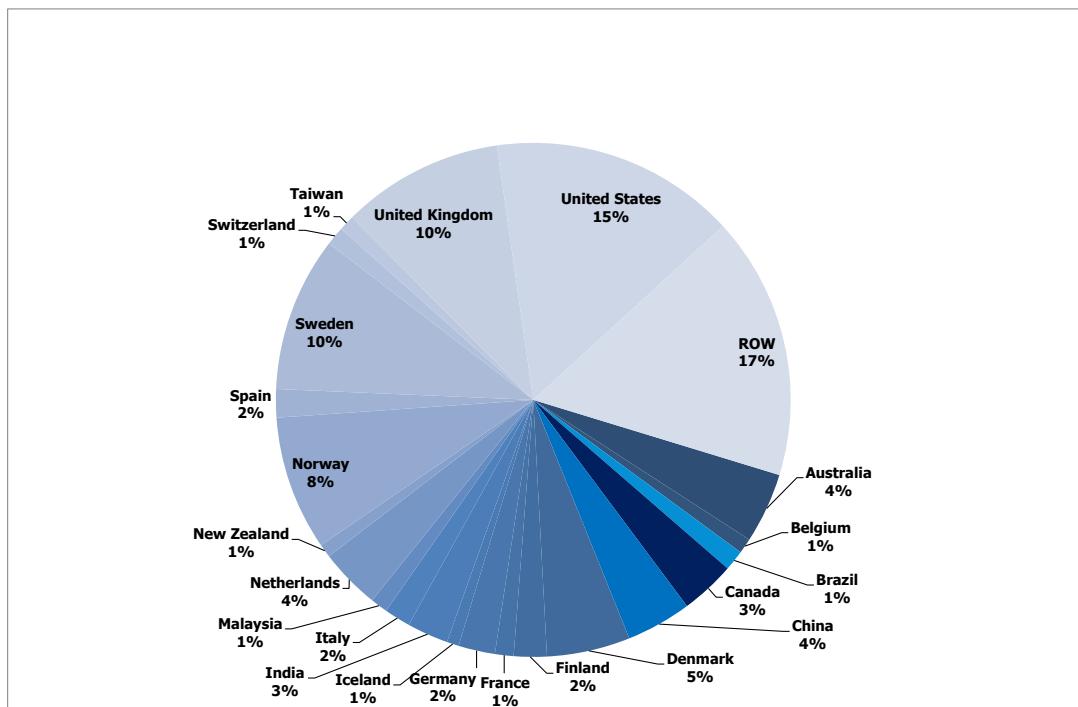
In 2012 we have seen a slight decrease in the number of full text downloads and also the number of abstract views has gone down. In 2012 a journal article was downloaded as often as 4.8 times per hour on average on www.informahealthcare.com/pri.

Scandinavian Journal of Primary Health Care articles are downloaded 4.8 times per hour on average.

6.1.2. Top Countries and Institutions

The countries where the most of the online usage of the journal is generated from are the United States, United Kingdom, Sweden, Norway, Denmark and Australia.

The country with most online usage of the journal for 2012 was the United States.



The institutions and consortia with most online usage of the journal in 2012 are listed below:

- Norwegian Knowledge Cntr Health Svcs (Norway)
- BIBSAM Consortia (Sweden)
- DNLA/DEFF Consortium (Denmark)
- Karolinska institutet (Sweden)
- DFG – The German National Library (Germany)

The single academic institution with most online usage of the journal 2012 was Karolinska Institutet.

6.1.3. Most Downloaded Articles

The table below shows the top ten most downloaded articles from the 2012 volume of Scandinavian Journal of Primary Health Care during last year. Given the fact that older articles have been online longer than more recently published articles one cannot draw too many conclusions from this, but it is nonetheless interesting to get a picture of which articles have been read the most during the year. Appendix 3 also lists the 50 most downloaded full-text articles in 2012, published all time.

[Appendix 3 lists the 50 most viewed full-text articles in 2012.](#)

Rank	Views	Article Title	Author	Issue
1	640	The dilemma of patient responsibility for lifestyle change: Perceptions among primary care physicians and nurses	Piia Jallinoja, Pilvikki Absetz, Risto Kuronen, Aulikki Nissinen, Martti Talja, Antti Uutela, Kristiina Patja	Vol. 25, No. 4, 2007
2	588	Effect of "motivational interviewing" on quality of care measures in screen detected type 2 diabetes patients: A one-year follow-up of an RCT, ADDITION Denmark	Sune Rubak, Annelli Sandbæk, Torsten Lauritzen, Knut Borch-Johnsen, Bo Christensen	Vol. 29, No. 2, 2011
3	485	Quality of life of patients with diabetes mellitus An overview of research in primary health care in the Nordic countries	Per E. Wändell	Vol. 23, No. 2, 2005
4	481	Who is not adhering to physical activity referrals, and why?	Matti E. Leijon, Johan Faskunger, Preben Bendtsen, Karin Festin, Per Nilsen	Vol. 29, No. 4, 2011
5	455	Lifestyle changes – a continuous, inner struggle for women with type 2 diabetes: A qualitative study	Kristina Ahlin, Annika Billhult	Vol. 30, No. 1, 2012
6	447	General practitioners trained in motivational interviewing can positively affect the attitude to behaviour change in people with type 2 diabetes One year follow-up of an RCT, ADDITION Denmark*	Sune Rubak, Annelli Sandbæk, Torsten Lauritzen, Knut Borch-Johnsen, Bo Christensen	Vol. 27, No. 3, 2009
7	418	Drug treatment in the elderly: An intervention in primary care to enhance prescription quality and quality of life	Inger Nordin Olsson, Rebecka Runnamo, Peter Engfeldt	Vol. 30, No. 1, 2012
8	389	Who is the key worker in palliative home care?	Trine Brogaard, Anders Bonde Jensen, Ineta Sokolowski, Frede Olesen, Mette Asbjørn Neergaard	Vol. 29, No. 3, 2011
9	380	Inappropriate prescribing for older people admitted to an intermediate-care nursing home unit and hospital wards	Marit Stordal Bakken, Anette Hylen Ranhoff, Anders Engeland, Sabine Ruths	Vol. 30, No. 3, 2012
10	372	Safety of telephone triage in out-of-hours care: A systematic review	Linda Huibers, Marleen Smits, Vera Renaud, Paul Giesen, Michel Wensing	Vol. 29, No. 4, 2011

7. Journal Management

7.1. Introduction

As part of the Informa Group, one of the largest publishers of scientific and academic journals in the world, Informa Healthcare benefits from many years of investment in technology and expertise specific to journals publishing.

Our editorial and production systems employ the highest level of technology and automation, and focus on electronic over paper document formats.

Our editorial and production staff is based in our offices in London, New York and Stockholm and all our staff has extensive experience in the broad health sciences journals arena. We are familiar with varying requirements of authors, funding bodies and learned societies, and we are well-versed in publication ethics, with strong internal emphasis on observing the ICMJE and COPE good practice guidelines.

**COPE = Committee on
Publication Ethics**

**ICMJE = International
Committee of Medical
Journal Editors**

7.1.1. Contact Details

For contact details to the Managing Editor, Editorial Office and Production Editor for Scandinavian Journal of Primary Health Care, please see the last page of this report.

7.2. Copyright and other policies

Authors of articles published by Informa Healthcare must assign copyright to the publisher for their published work. This allows us to disseminate the article to as wide an audience as possible. Authors retain the right to post their version of the submitted manuscript (the pre-peer review version) on the Internet as long as a link is provided to the final, published version.

7.2.1. NIH/Wellcome Trust-funded research policy

In accordance with the National Institutes of Health (NIH) and Wellcome Public and Open Access Policies, Informa Healthcare acknowledges that the broad and open dissemination of NIH/Wellcome-funded research results may benefit future scientific and medical research. Because we value the current and future contributions our journals make to the scientific body of knowledge, we have made certain that our policies accommodate NIH- and Wellcome-funded authors who are required to submit their work to PubMed Central.

**Informa Healthcare has
made certain that our
policies accommodate NIH-
and Wellcome-funded
authors who are required to
submit to PubMed Central.**

NIH/Wellcome-funded authors are invited to submit their funded work to PMC/UKPMC themselves providing they submit only the final peer-reviewed

manuscript which was accepted for publication, the pre-typeset version. Hence the manuscript must not be altered by the publisher's copyediting and typesetting services. Please note the Informa Healthcare embargo periods for public access posting (12 months for NIH and 6 months for Wellcome Trust after final publication in print or electronic form, whichever is the sooner). Following the deposit, authors will receive further communications from the NIH Manuscript Submission System/UK Manuscript Submission System with respect to the submission.

Please note the embargo periods of 12 months for NIH and 6 months for Wellcome Trust.

7.2.2. Disclosure of interest

In collaboration with our journal Editors, and in line with recommendations of COPE and ICMJE, we have developed a strong set of policies that govern editorial practice across our titles, ensuring the highest ethical standards. These include guidance on issues such as conflicts of interest, authorship requirements, plagiarism and redundant publication, patient privacy and confidentiality, and animal studies.

As a member of COPE, Informa Healthcare may provide Editors, if requested, with login details to access the COPE website – from where important information and advice on current and future ethical standards can be found.

COPE website:
publicationethics.org

Every article we publish must include a disclosure of potential conflicts of interest from all contributors. Authors who wish to acknowledge the help of others in their work may do so in an Acknowledgement section in the article.

7.3. Production

Scandinavian Journal of Primary Health Care has a Production Editor/Managing Editor responsible for managing the flow of accepted manuscripts and proofs through the production process. The Production Editor liaises with authors, the Editor, copyeditors, typesetters, online vendor and printers; making amendments to proofs, compiling issues, pushing online content live and sending issues to press.

Scandinavian Journal of Primary Health Care has a Production Editor responsible for the entire production process.

Informa Healthcare uses the Central Article Tracking System (CATS) to track the progress of articles, solicit and capture copyright transfer agreements and author corrections, and act as the repository for final and intermediate print and online files.

7.4.1. Copy-editing

Articles are copyedited by skilled and very efficient freelancers according to individual journal requirements and the general Informa Healthcare style.

All accepted articles are published online, ahead of print publication.

7.4.2. Early Online and print editions

As soon as the layout of the article is finalised, a notification via e-mail will be sent to the corresponding author asking for final approval of the article before publication. No major alterations can be made in the manuscript at this stage. Upon approval from the corresponding author, the Production Editor oversees that the final notes of changes are taken care of and corrected. The manuscript file is thereafter uploaded for publication online, 'Early Online'.

The 'Early Online' articles can be referenced via the unique DOI number assigned to each article. All 'Early Online' articles are indexed in PubMed as well as in Web of Science. Citations made to an 'Early Online' article will be included in the Impact Factor calculation when the article is inserted in a journal issue as long as:

1. The journal is clearly identified in the cited reference.
2. The year noted in the cited reference is within the relevant Impact Factor period. Please note that whatever year is given in the cited reference is used, Thomson Reuters do not verify the cited year.

To enable an efficient article-by-article production process, Editors are encouraged to advance manuscripts into production as soon as they are accepted, rather than hold them for collation in issue-by-issue batches. Our production schedules are based on an article-by-article flow approach with a timeline of approximately 4-5 weeks from the receipt of accepted manuscripts to publication online. Shorter lead times for copyediting and typesetting are available for late-running papers and for special pieces such as editorials and commentaries, which may be submitted shortly before publication.

Citations made to an 'Early Online' article will be included in the IF calculation

There are currently 4 Early Online articles published on the journal website.
(early April 2013)

The time from accept to online publication is currently approximately 4-5 weeks.

7.4.3. Printing and shipping

All of the Informa Healthcare journals are printed on acid-free materials and sourced from sustainably-managed forests. The printers contracted by Informa Healthcare use the very latest combination of digital and offset technology. All

Informa Healthcare journals are printed on acid-free materials and sourced from sustainably-managed forests.

printed copies are labelled and shipped from our mailing house in the UK within 48 hours upon receipt from the printers.

7.4.4. Actual Publication Dates 2012

Issue	No of pages	Published online	Published in print
30:1	60	Feb 23rd	Mar 5th
30:2	68	May 29th	Jun 12th
30:3	68	Aug 30th	Sep 11th
30:4	68	Nov 22nd	Dec 3rd

7.4.5. Publication Schedule 2013

Please note the manuscript deadlines for 2013 above. These deadlines must be followed if the issues are to be published as scheduled. (*Published issues in italics.*)

All issues in 2012 were published more or less on time.

Issue	Manuscript Deadline	Published Online	Published in Print
31:1	Dec 3th 2012	Feb 7th	Feb 15th
31:2	Mar 4th	May 9th	May 22th
31:3	Jun 4th	Aug 9th	Aug 20th
31:4	Sep 5th	Nov 12th	Nov 25th

7.4.6. Free PDF and offprints

Each corresponding author will receive an e-mail with instructions on how to download a free PDF file of the final version of their article. Please note: downloaded articles are not for sale or commercial distribution.

Please note that the deadlines must be followed if the issues are to be published as scheduled.

Authorized users can download, display, view, and print a single copy for internal use only. Internet posting of the published article is prohibited, although it is allowed to self-archive the pre-peer reviewed version of the article (please see the copyright agreement template for further details). Reprints of individual articles are available for order at the time authors review page proofs. A discounted rate on reprints is available to authors who order before publication in an issue.

7.4.7. PubMed

Published online articles are fed electronically to PubMed, where they are indexed and tagged by author name, subject, title, type of article etcetera by PubMed staff. An error found in a PubMed record can be corrected, but whether the correction can be made by Informa Healthcare or not depends on the publication status of the citation in question. Publishers can correct errors only if the citation has the publication status [PubMed - as supplied by publisher]. Citations with the publication status [PubMed - in process], [PubMed - Indexed for MEDLINE], [PubMed] and [PubMed - OLDMEDLINE] can only be corrected by PubMed staff. Please note that even if the status is [PubMed - as supplied by publisher] Informa Healthcare may only correct errors in the published version of the article if they do not require an erratum.

An error found in a PubMed record can be corrected either by Informa Healthcare or by PubMed staff.

8. Marketing

8.1. Overall Marketing Strategy

In 2012, the marketing of Scandinavian Journal of Primary Health Care has had three main objectives.

- Maintain as many existing subscribers as possible
- Proactively attract new subscribers
- Increase the (online) usage of the journal

The first objective was the direct consequence of a difficult economic climate and the subsequent prediction that the journal may lose subscriptions due to institutions being forced to cut costs. We therefore channelled our energy to create campaigns to get our current subscribers to re-subscribe. This was done via direct mailings, e-mail campaigns and telephone calls to key libraries and agents.

With new online media- and market trends, Informa Healthcare has implemented a number of new online marketing features and tools during the year. We have been able to streamline the marketing work and reach an even broader audience for potential new subscriptions, which has helped us with our second objective. This has been benefitted the Scandinavian Journal of Primary Health Care circulation growth in both the established and the new emerging markets.

In an effort to increase the visibility and encourage institutional and corporate usage of Scandinavian Journal of Primary Health Care, Informa Healthcare has employed a variety of marketing activities to drive traffic to the journal website. The most important tool to drive usage to a website is journal content promotion. A close collaboration between marketing, the Editors, the Editorial board members and the managing editor is key to achieving successful marketing.

Please refer to the 2012 Marketing Plan for more detailed information.

9. Sales

Informa Healthcare has a dedicated proactive sales team generating the maximum amount of revenue for the journal. Many of our competitor publishing companies generate simply reactive sales, whereas Informa Healthcare is constantly in contact with our commercial customers, matching our content with their marketing and promotional needs. We have departments with special focus on specials sales, reprints and supplements. Informa Healthcare is constantly seeking new ways of maximizing the commercial value of the journal and our sales and marketing teams work together to successfully do this.

9.1. Reprint Sales

The reprint sales team for Scandinavian Journal of Primary Health Care is run from our head office in London. The team is divided into 'key accounts' who form and maintain close relationships with pharmaceutical companies in the world covering all therapeutic areas. They concentrate on the actual content of the journals, and continuously scan the published material to find good articles to present to their industry contacts and encourage them to buy reprints on articles for further use on the market.

Once these reprints are distributed, they may also serve as awareness campaigns for outstanding articles published in the journal and can potentially in the end also bring revenue to the journal as subscriptions.

Reprint sales may serve as awareness campaigns for outstanding articles

Key features for reprint potential papers may be:

- Papers supported by the pharmaceutical industry.
- Key opinion pieces of interest to pharmaceutical companies.
- Clinically relevant data pre or post launch.

It is important to note that:

- Products must be licensed.
- The topic should be in the clinical arena.
- The article should be of interest to clinicians and key healthcare professionals.
- Products related or disease treatment related papers are clear candidates.
- Authors considered to be key opinion leaders are also sought after.

Suggestions from the Editorial Board for articles that might have reprint potential is very welcome.

Suggestions from the Editors and the Editorial Office for articles that may be suitable for individual marketing to target companies is very welcome and should be sent to the Managing Editor of the journal for further handling and follow-up. It is important that such recommendations are sent as early as possible, perhaps even before acceptance, in order to optimize the article's potential of getting purchased/cited.

9.2. Supplement Sales

Publishing a supplement to Scandinavian Journal of Primary Health Care is a very effective means of disseminating scientific findings and conference material to the relevant target audience. Publishing supplements is also valuable marketing for the journal, and is therefore usually very positive. All supplements will be indexed in all relevant databases, including PubMed and Google Scholar, to ensure that they are fully searchable and visible. Please note that supplements are also part of the Impact Factor calculation.

Publishing supplements is often valuable marketing for the journal, and might be a quality mark.

10. Glossary

Abstract View: An 'abstract view' is one display of the abstract of an article, to a visitor on the journal website.

Citable Item: A term used by Thomson Reuters/ISI to define content they believe to be 'citable' in an academic journal. Usually original articles, reviews, case reports or short reports, but not Letters or Editorials. Only citable items are included in the Impact Factor denominator.

Circulation: Number of distributed print or online copies of a journal; not the same as the journal print-run.

Cluster Marketing: When a journal is marketed as part of a group of journals (a cluster).

Consortia Sales: A consortium is a group of libraries who have joined forces to buy journal subscriptions at a lower price than they would have been able to negotiate individually. Subscription sales to consortia usually make up a large part of the total subscription sales for an academic publisher.

COPE: An acronym for the Committee on Publication Ethics. COPE provides advice to editors and publishers on aspects of publication ethics and how to handle cases of research and publication misconduct. Membership is open to editors of academic journals and others interested in publication ethics. www.publicationethics.org.

Corporate Subscription: A corporate subscription is one purchased on behalf of a corporation, for example a pharmaceutical company with interest in academic articles related to their field of business.

DOI number: Short for Digital Object Identifier; an individual identification number assigned to a it on the web. Example: DOI 10.1000/182. www.doi.org.

Early Online: An 'Early Online' article is an article that has been accepted, copy-edited, proof-read/approved by the author, and finally published on the journal website – but not yet inserted in a specific issue of the journal. Early online publication of articles shortens the time from accept to publication, makes it possible to cite the article prior to it being distributed in a printed issue, and allows the author to report the work as 'published'. Published journal article to be able to differentiate it from other articles, and to trace different versions of

E-TOC Alerts: Short for Electronic Table of Content Alerts. These are sent automatically via email when new content is published on a journal website.

Users have to actively sign up on the Informa Healthcare platform to receive E-TOC Alerts; this to guarantee that the alerts are not seen as spam when they reach the recipient's inbox.

Full Text View: A 'full text view' is one display of the full text of an article, to a visitor on the journal website. The number of full text views divided by the number of abstracts views (in a particular time-period) gives an indication of how many people thought it worth-while to access the full journal article after having looked at the abstract.

Gratis Subscription: A gratis subscription is a free print or online subscription to a journal, usually given to Editorial Board members, indexing and abstracting services, and legal deposit agencies.

ICMJE: An acronym for the International Committee of Medical Journal Editors. The ICMJE is a group of general medical journal editors from distinguished journals who have agreed on the 'Uniform Requirements for Manuscripts Submitted to Biomedical Journals'. Informa Healthcare adheres to their guidelines and encourages authors to do the same when submitting their manuscripts. www.icmje.org.

Institutional Subscription: An institutional subscription is one purchased by a university library, hospital, research centre or other academic institution. One single institutional subscription may allow hundreds of users to access the subscribed journal. This is usually done through IP recognition (i.e. all users who come to the journal website from a certain IP address will have access to full text articles).

Introductory Access Package: This package provides organizations with access to all Informa Healthcare journals at an introductory rate for a limited time period. After the trial period, the usage of the journals is evaluated and the organization will purchase subscriptions to the most read journals in the package.

IOpen Access: Informa Healthcares 'hybrid' open access option. IOpen Access enables authors to publish their articles as open access in otherwise non-open access journals for a one-off fee of \$3250. This option is offered as a service to authors only when their articles have been accepted and does not interfere with peer-review.

ISI: Formerly the Institute of Scientific Information; now part of Thomson Reuters. Calculates journal Impact Factors.

IP Recognition: A way of setting up online access to a journal. Users who come to the journal website from a certain, recognized IP address will have access to full text articles if the IP address is connected to a journal subscription.

JCR Report: Short for Journal Citation Report. Released annually by ISI/Thomson Reuters and shows journal rankings sorted by highest Impact Factor in different subject categories.

Mobile App: A web application built specifically for smart phones. The 'app' is downloaded to the mobile device, enabling the user to access Informa Healthcare journal content through the app.

Mobile Website: A website adapted for being viewed on a mobile device. Does not require downloading of any application; the user just surfs the 'normal' web using his/her mobile phone.

Pay-Per-View: Instant online access to a journal article for non-subscribers if the visitor uses a credit card to pay a one-off fee of approximately \$60.

Personal Subscription: A personal subscription is a subscription taken up by an individual, usually tied to her/his home address or home computer. These subscriptions were offered at a discounted price. Informa Healthcare suspended the use of personal subscriptions in 2009 after reported 'abuse' of the discount (corporations were taking up personal subscriptions).

Print-run: Number of printed copies of each issue of a journal. Not the same as the journal circulation.

Referrer Access: Online access for society members may be set up using a referrer link. This is a link to the journal website, placed on a password-protected page of the society website. When logged in, society members click the link and are transferred to the journal website, where they have automatic online access to the full text articles.

ScholarOne Manuscripts: An online submission and manuscript handling system created by Thomson Reuters and used by Informa Healthcare.

Science Citation Index Expanded: A citation index originally produced by the Institute for Scientific Information (ISI), now owned by Thomson Reuters. Includes more than 6,500 academic journals covering 150 disciplines. Journals are included after a rigorous selection process. The index is made available online through the Web of

Science portal. The index tracks citations made to

Social Science Citation Index: A citation index originally produced by the Institute for Scientific Information (ISI), now owned by Thomson Reuters. Includes some 2,500 journals of social sciences across more than 50 disciplines. Journals are included after a rigorous selection process. The index is made available online through the Web of Science portal. The index tracks citations made to all articles in the indexed journals – providing ISI with data to calculate Impact Factors.

Solus Marketing: When a journal is marketed on its own to audiences that may take an interest in the journal in particular.

Third Party: A third party website usually refers to a website where content in Informa Healthcare journals is hosted by another party; an agent, a document delivery provider, or a database of some kind. A typical example is the Ebsco Host database, to which all Informa Healthcare full text articles are fed as html, xml and pdf files. A subscriber to the Ebsco Host database will thus access the journal content on the Ebsco Host platform, not on the Informa Healthcare platform.

Web of Science: An online portal to enable search in six major databases; among them Science Citation Index Expanded and Social Science Citation Index. Owned by Thomson Reuters. Available through paid subscription only.

XML: Extensible Markup Language. XML-files are text files with data about the content of published journal articles. Put simply, the XML makes it easier for websites to interpret the content in a PDF file. All articles published by Informa Healthcare include XML data

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