

Cochrane Database of Systematic Reviews

2015 Impact Factor and Usage report

Trusted evidence.
Informed decisions.
Better health.

1. The Impact Factor of the Cochrane Database of Systematic Reviews (CDSR)

Each year in June, Thomson Reuters publish the Impact Factors of all journals indexed in the Journal Citation Report.

The 2015 Impact Factor for *CDSR* is **6.103**, which describes the ratio of the number of reviews published during 2013 and 2014 (1,888) to the number of citations these reviews received in 2015 (11,522).

A review published in the CDSR in 2013 or 2014 was cited, on average, 6.103 times in 2015.

When considering the citation data presented below, please be aware of the following:

- The data used to generate Impact Factors for individual Cochrane Review Groups (CRG) was extracted from Thomson Reuters Web of Science. This is slightly different from the data used to calculate the Impact Factor of the Cochrane Database of Systematic Reviews (CDSR). All journal Impact Factors (including the Impact Factor of the CDSR) are published in the Journal Citation Reports (JCR). The data used to calculate journal Impact Factors are not made publically available. Individual CRG Impact Factor data, therefore, should not be quoted as 'official', but can be used within the organisation.
- Cites for individual Cochrane Reviews and individual CRG Impact Factors are allocated by a process of hand-matching. Each year a proportion of cites cannot be matched to citable items because the cited work is not cited correctly. For example, a common error when citing Cochrane Reviews is to omit the version number or suffix from the DOI. The accuracy of the source data provided by Thomson also has an impact on the success rate of the citation matching. The table below shows the percentage of cites that were successfully hand-matched for the past five Impact Factor reports. This report has an 82% success rate which means the majority of Groups will receive a lower CRG Impact Factor than last year.

Impact Factor Year	Cites received*	Cites successfully matched	% of successfully matched cites
2015	11,522	9,397	82%
2014	11,932	11,720	98%
2013	9,859	8,515	86%
2012	8,087	6,411	79%
2011	7,721	6,685	87%

^{*}Source – Journal Citation Reports

- All New and Updated reviews that have a new citation record are included in the CDSR Impact Factor calculation.
- The CDSR was not included in the June 2016 release of the JCR. This was due to an error in the indexing of CDSR content. CDSR and full citation data related to the CDSR will be included in the JCR update in September 2016. At the time of publication, information on self-citation rate and the total number of cites for the CDSR was not available. An amended report with this information included will be published in October 2016.

The ten most cited reviews published in the CDSR (all CRGs), that contributed to the 2015 Impact Factor were:

Times Cited	Title	Authors	CD Number	Review Group
146	Decision aids for people facing health treatment or screening decisions	Stacey D, Légaré F, Col NF, Bennett CL, Barry MJ, Eden KB, Holmes-Rovner M, Llewellyn-Thomas H, Lyddiatt A, Thomson R, Trevena L, Wu JHC	CD001431.pub4	Consumers and Communication Group
108	Statins for the primary prevention of cardiovascular disease	Taylor F, Huffman MD, Macedo AF, Moore THM, Burke M, Davey Smith G, Ward K, Ebrahim S	CD004816.pub5	Heart Group
94	Cooling for newborns with hypoxic ischaemic encephalopathy	Jacobs SE, Berg M, Hunt R, Tarnow-Mordi WO, Inder TE, Davis PG	CD003311.pub3	Neonatal Group
78	Interventions to improve antibiotic prescribing practices for hospital inpatients	Davey P, Brown E, Charani E, Fenelon L, Gould IM, Holmes A, Ramsay CR, Wiffen PJ, Wilcox M	CD003543.pub3	Effective Practice and Organisation of Care Group
69	Surgery for women with anterior compartment prolapse	Maher C, Feiner B, Baessler K, Schmid C	CD004014.pub5	Gynaecology and Fertility Group
69	Pharmacological interventions for smoking cessation: an overview and network meta-analysis	Cahill K, Stevens S, Perera R, Lancaster T	CD009329.pub2	Tobacco Addiction Group
61	Neuraminidase inhibitors for preventing and treating influenza in adults and children	Jefferson T, Jones MA, Doshi P, Del Mar CB, Hama R, Thompson MJ, Spencer EA, Onakpoya I, Mahtani KR, Nunan D, Howick J, Heneghan CJ	CD008965.pub4	Acute Respiratory Infections Group
60	Vaccines for preventing pneumococcal infection in adults	Moberley S, Holden J, Tatham DP, Andrews RM	CD000422.pub3	Acute Respiratory Infections Group
60	Screening for breast cancer with mammography	Gøtzsche PC, Jørgensen KJ	CD001877.pub5	Breast Cancer Group
57	Interprofessional education: effects on professional practice and healthcare outcomes	Reeves S, Perrier L, Goldman J, Freeth D, Zwarenstein M	CD002213.pub3	Effective Practice and Organisation of Care Group

CDSR is ranked 12 of 151 journals in the 'Medicine, General and Internal' category, placing it in the top five percent of all titles listed in the Journal Citation Report:

2015 Rank	Journal name	Impact Factor	No. of citable items	No. of Reviews published	% Reviews uncited*	Self-citation rate	IF w/o self- citations
1	New England Journal of Medicine	59.558	701	84	0	1%	58.913
2	Lancet	44.002	547	50	0	3%	42.580
3	JAMA	37.684	449	65	0	2%	36.857
4	ВМЈ	19.697	519	134	2%	7%	18.249
5	Annals of Internal Medicine	16.440	325	84	0	3%	15.883
6	JAMA Internal Medicine	14.000	332	9	11%	3%	13.470
7	PLOS Medicine	13.585	246	45	0	2%	13.309
8	BMC Medicine	8.005	379	82	1%	2%	7.765
9	Journal of Cachexia Sarcopenia and Muscle	7.883	60	18	0	29%	5.567
10	Journal of Internal Medicine	7.803	198	73	0	1%	7.672
11	Canadian Medical Association Journal	6.724	170	47	13%	4%	6.441
12	Cochrane Database of Systematic Reviews	6.103	1,888	1,888	21%	-	-

^{*}Retrieved July 27th, 2015

Ranking: The 2015 *CDSR* Impact Factor of 6.103 is an improvement on the previous years Impact Factor of 6.035. *CDSR* has moved up one place in the ranking from 13th to 12th. In last year's ranking, JAMA Internal Medicine occupied two positions in the top ten as the name of the journal changed from Archives of Internal Medicine to JAMA Internal Medicine during the Impact Factor window. The Archives of Internal Medicine has now been removed from the JCR. The Impact Factor of the Mayo Clinic Proceedings fell from 6.262 to 5.920, the journal fell one place below the *CDSR* in the ranking. The Canadian Medical Association Journal Impact Factor increased by 0.765, moving it above the *CDSR* in the ranking to 11th place.

Citable Items: The table above shows that the *CDSR* published a much higher number of citable items in this Impact Factor year compared to the other high ranking journals in the category. On average, 357 citable items were published by the other journals ranked higher than the *CDSR*, compared with 1,888 citable items published within the *CDSR*.

Uncited items: 21% of Cochrane Reviews were not cited in this Impact Factor window compared with 24% in the previous window.

The 5-Year Impact Factor was 6.665. This is calculated by taking the number of cites in 2015 to items published between 2010 and 2014 (28,380) and dividing this by the number of items published between 2010 and 2014 (4,258).

In the 2015 Impact Factor window, only the top 3 ranked titles (NEJM, Lancet, JAMA) received more cites than the *CDSR*.

Year	Ranking	Impact Factor	In- Window Cites	Citable items	Total Cites	Self- citation rate	IF w/o self- citations	5-Year Impact Factor
2015	12	6.103	11,522	1,888	-	-	-	6.665
2014	13	6.035	11,932	1,977	43,592	5%	5.693	6.539
2013	10	5.939	9,859	1,660	39,856	8%	5.433	6.706
2012	12	5.785	8,087	1,398	34,230	8%	5.288	6.553
2011	10	5.912	7,721	1,306	29,593	5%	5.630	6.309
2010	10	6.186	6,978	1,128	27,366	7%	5.784	6.346
2009	11	5.653	6,574	1,163	23,102	6%	5.305	-

The number of reviews published in the *CDSR* in 2014 was 12% lower than in 2013 (885 v 1,003). The *CDSR* published the third highest number of citable items of the journals in the Medicine, General & Internal category in calendar year 2015. The top 5 journals in terms of number of citable items published in 2015 were:

Journal Title	No. of items published in 2015	Impact Factor 2015	Impact Factor rank in category	
Medicine	1,989	1.206	77	
BMJ Open	1,427	2.562	31	
Cochrane Database of Systematic Reviews	947	6.103	12	
Internal Medicine	522	0.832	102	
Chinese Medical Journal	507	0.957	91	

25% of reviews published in 2014 were not cited in the 2015 Impact Factor window compared with 32% published in 2013 that were not cited in the 2014 Impact Factor window.

2. The Impact Factors of individual Cochrane Review Groups (CRGs):

Figure 1 shows the 2015 CRG Impact Factors for each CRG. Figure 2 shows the number of publications and citations contributing to the 2015 Impact Factors for each CRG as a percentage of the *CDSR*. It is important to remember that these figures have been calculated using handmatched data from Web of Science and are not 'official' Impact Factors.

Figure 1: "Impact Factor" for each CRG (i.e. number of cites in 2015 to reviews published in 2013–2014, divided by the number of reviews published in 2013–2014)

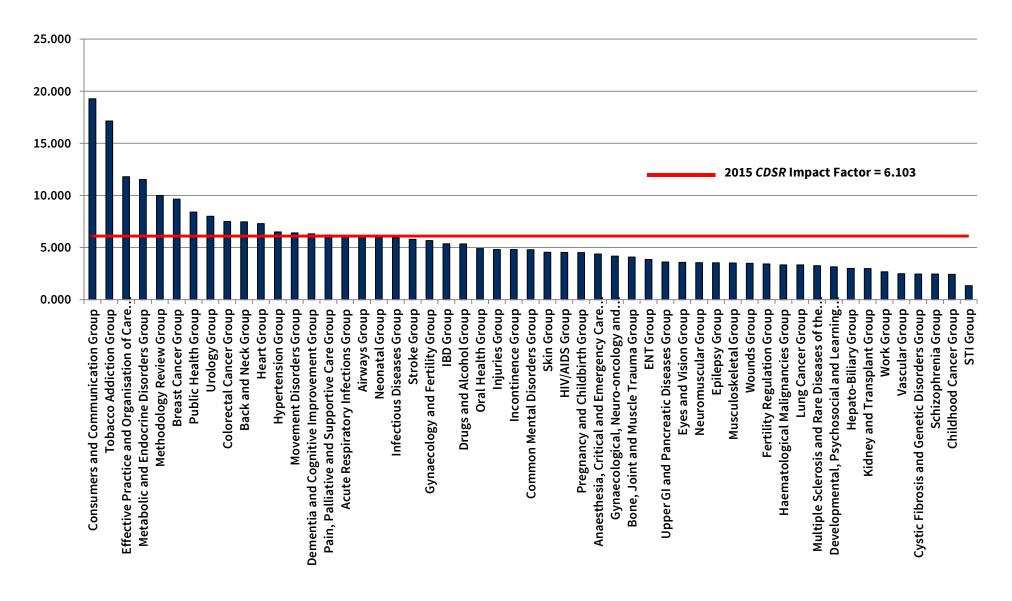
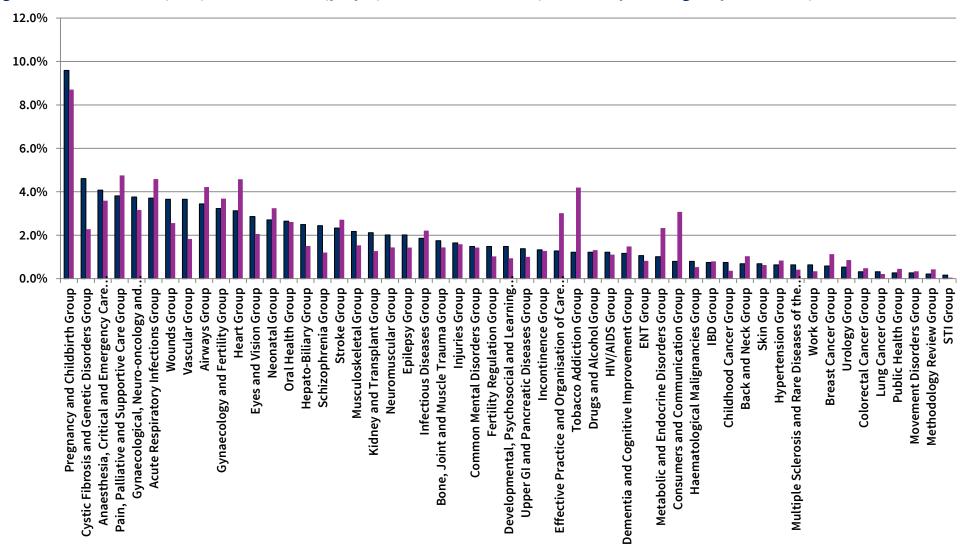


Figure 2: % Publications (blue) and % Citations (purple) of CDSR for each CRG (in order of percentage of publications)



3. How the citation data compare to Wiley Online Library usage data:

When considering the usage data presented below, please be aware of the following:

- A proportion of full text downloads cannot be associated with an individual Cochrane Review so the usage data included in this report is an underestimate of overall usage activity.
- Only usage activity related to Cochrane Systematic Reviews hosted on the Wiley Online Library platform is included in this report. The report does not include usage activity related to Cochrane Systematic Reviews hosted on Third Party platforms.

The ten most accessed Cochrane Systematic Reviews in 2015 were:

Review Title	Full text downloads	Abstract views	Most recent publication date	CRG
Exercise for depression	12,765	17,987	Sep 2013	Depression, Anxiety and Neurosis Group
Interventions for preventing falls in older people living in the community	10,540	28,352	Sep 2012	Bone, Joint and Muscle Trauma Group
Early skin-to-skin contact for mothers and their healthy newborn infants	9,466	12,860	May 2012	Pregnancy and Childbirth Group
Interventions for preventing obesity in children	8,986	19,436	Dec 2011	Public Health Group
Interventions to improve hand hygiene compliance in patient care	8,649	8,188	Sep 2010	Effective Practice and Organisation of Care Group
Midwife-led continuity models versus other models of care for childbearing women	8,079	10,752	Sep 2015	Pregnancy and Childbirth Group
Honey as a topical treatment for wounds	7,683	8,062	Mar 2015	Wounds Group

Screening for breast cancer with mammography	7,512	9,793	Jun 2013	Breast Cancer Group
Repositioning for pressure ulcer prevention in adults	7,502	9,426	Apr 2014	Wounds Group
Electronic cigarettes for smoking cessation and reduction	7,420	15,276	Dec 2014	Tobacco Addiction Group

4. Usage of individual Cochrane Review Groups (CRGs):

Figure 3 shows the average number of full text downloads per review as accessed via Wiley Online Library during 2015 (regardless of publication date). Figure 4 shows the number of publications and full text downloads for each CRG as a percentage of the *CDSR*.

Figure 3: Average number of full-text downloads received by Cochrane Review Groups in 2015

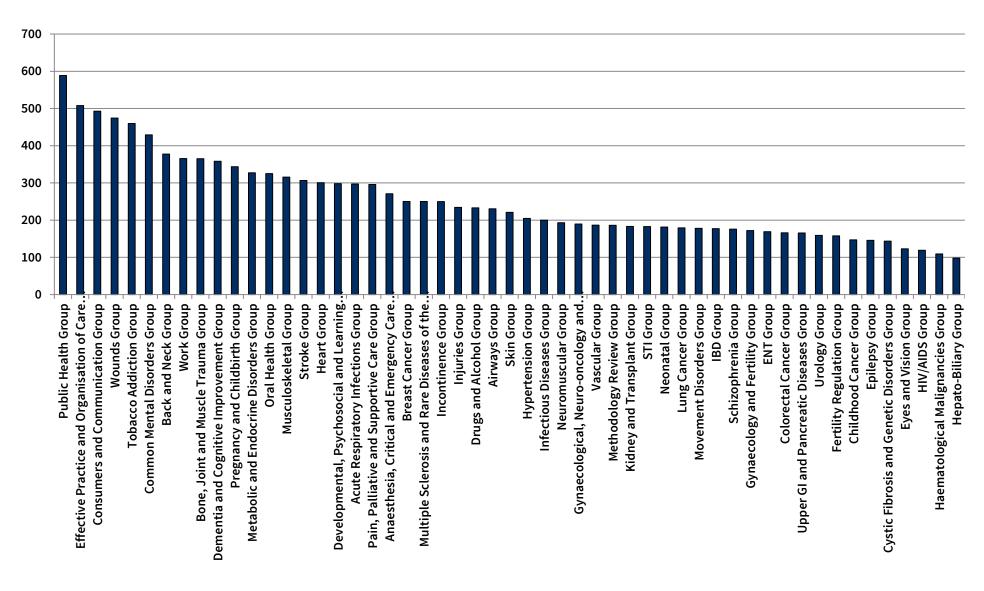
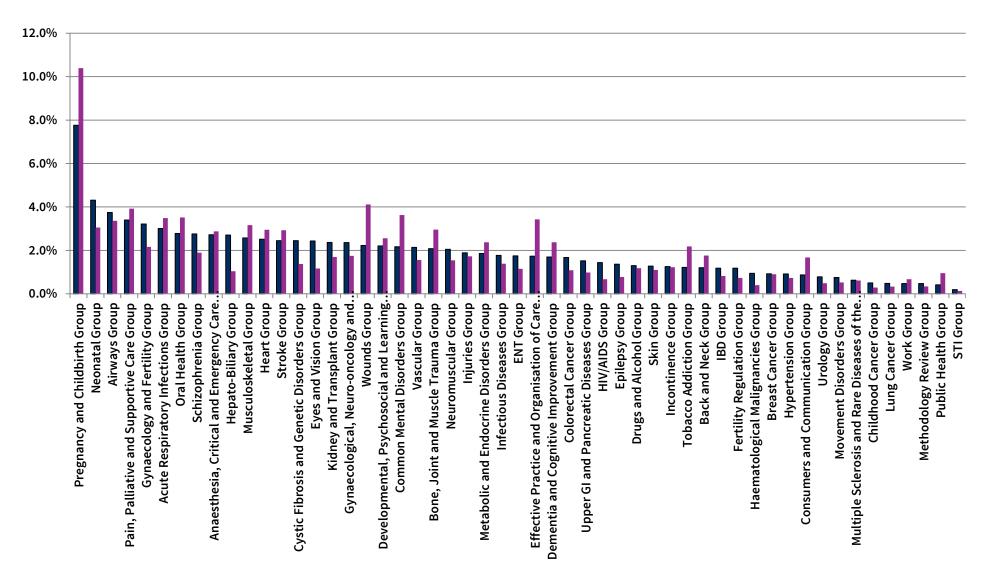


Figure 4: % Publications (blue) and % Full Text Downloads (purple) of CDSR for each CRG (in order of percentage of publications)



5. Alternative metrics

Using the Altmetric system (http://www.altmetric.com/), we are able to report on further measures of the impact of Cochrane Reviews beyond cites and usage. Altmetric have created a cluster of servers that watch social media sites, newspapers, government policy documents and other sources for mentions of scholarly articles.

The Altmetric Attention Score is a quantitative measure of the attention that a scholarly article has received. It is derived from three main Factors:

Volume - The score for an article rises as more people mention it.

Sources - Each category of mention contributes a different base amount to the final score (further information including a breakdown of sources can be found here).

Authors - How often the author of each mention talks about scholarly articles influences the contribution of the mention.

The unique Altmetric Attention Score is available on the abstract page of every Cochrane Review that has achieved a score of one or above.

Altmetric has tracked mentions of 8,012 articles from the CDSR up to August 2016.

The highest Altmetric Attention Scores from Cochrane Reviews published in 2015 (scores retrieved 27th July 2016) were:

Altmetric Score	Review Title	В	Т	G+	N	F	W	M
1099	Portion, package or tableware size for changing selection and consumption of food, alcohol and tobacco	13	569	6	74	10	2	95
408	Methylphenidate for children and adolescents with attention deficit hyperactivity disorder (ADHD)	9	251	5	20	24	3	52
352	Clinically-indicated replacement versus routine replacement of peripheral venous catheters	2	451	0	0	11	1	0
334	Treatments for breast abscesses in breastfeeding women	2	2	0	39	0	1	19
259	Reduction in saturated fat intake for cardiovascular disease	5	190	2	9	31	2	95
233	Whole-body cryotherapy (extreme cold air exposure) for preventing and treating muscle soreness after exercise in adults	6	112	0	12	3	2	66
215	Antihistamines for the common cold	0	288	2	1	6	1	22
171	Pilates for low back pain	2	180	3	2	30	1	64
161	Exercise for osteoarthritis of the knee	1	214	2	0	19	0	239
155	Xylitol-containing products for preventing dental caries in children and adults	6	61	0	10	8	0	60

B=Bloggers T=Tweeters G+=Google+ Authors N=News outlets F=Facebook walls W=Wikipedia pages M=Mendeley readers

Altmetric track 'mentions' from 16 different sources including references in policy documents, citations in Wikipedia pages and discussions on Peer Review sites. Only sources that contributed substantially to the scores of the Cochrane Reviews in the table above have been included.

The Cochrane Review ranked first in the table above; 'Portion, package or tableware size for changing selection and consumption of food, alcohol and tobacco' has the highest Altmetric Attention Score of all Cochrane Reviews. The article was #97 in 'The Altmetric top 100', a list published by Altmetric to show what academic research caught the public imagination in 2015.

How different sources contribute to the Altmetric Attention Score can be clearly seen from examples in the table above. The Cochrane Review 'Treatments for breast abscesses in breastfeeding women' did not receive Social Media attention in the form of Tweets or Facebook Wall posts but the article had the 4th highest Altmetric Attention Score in 2015 as it was covered in 39 news outlets. Conversely, the Cochrane Review ranked third in the table above; 'Clinically-indicated replacement versus routine replacement of peripheral venous catheters' received the second highest amount of attention on Twitter but was not covered by news outlets.

The Cochrane Review ranked ninth in the table above; 'Exercise for osteoarthritis of the knee', received 239 mentions on Mendeley. This number represents the number of Mendeley users that have added the article into their personal library.

6. Initiatives to enhance usage: Cochrane Clinical Answers

This year, for your information, we have also mapped the top 10 most accessed articles per CRG against the content on the *Cochrane Clinical Answers (CCA)* website http://cochraneclinicalanswers.com/ to allow each CRG to see which of their top 10 most accessed Reviews has a Cochrane Clinical Answer based on it. This is aimed at enhancing awareness of *CCA* across CRGs and establishing a dialogue between the *CCA* team and the CRGs about which Reviews from each CRG are best suited for inclusion as a Cochrane Clinical Answer.

Additional resources:

- A Frequently Asked Questions document (FAQ) is available from the Cochrane Library website. You can access this document here.
- For further details of Cochrane Reviews in the press, please contact Jo Anthony, Senior Media and Communications Officer, Cochrane (janthony@cochrane.org).
- If you have any queries regarding the data presented in this report, please contact Gavin Stewart, Cochrane Editor at Wiley (gstewart@wiley.com).