JNM 2020 Impact Factor Rises Sharply

The SNMMI and editors of The Journal of Nuclear Medicine announced on July 1 that the publication had achieved the highest impact factor in its history, now ranking third among all medical imaging journals, according to new data released in the 2020 Journal Citation Reports. “This is a tribute to the great contributions of diverse scientists from all areas of the field,” said JNM editor-in-chief Johannes Czernin, MD. “I am grateful for the support of SNMMI and its Publications Committee, the invaluable contributions of our staff, the critical input from our editorial board members, and the hard work and creativity of the team of national and international associate editors who made this success possible.”

JNM’s impact factor increased more than 27% from that in the previous year, from 7.887 (2019) to 10.057 (2020). With 32,949 total citations, the journal moved up to third in impact factor among all 134 journals in the medical imaging category. The journal’s total citations increased by 23%, its immediacy index increased by 68%, and its article influence score and 5-year impact factor increased by 26%. Among nuclear medicine journals, JNM continues to have the highest impact factor, total citations, 5-year impact factor, Eigenfactor score, and article influence score. “The high journal impact with the associated high visibility of JNM will continue to attract pre-clinical and clinical contributors from oncology, neurology, cardiology, endocrinology, infectious diseases, and other fields,” Czernin said.

The impact factor is a quantitative measure of the frequency with which an article in a journal is cited. It is used as a measure of the overall influence of a journal within scientific, professional, and academic communities. The immediacy index is an indicator of the speed with which citations to a specific journal appear in published literature. “Three of our top 10 articles contributing to the impact factor calculation describe advances in imaging instrumentation, with the remaining 7 introducing various important aspects of theranostics,” said Czernin. “It is thus evident that theranostics and the search for novel and relevant targets remain at the forefront of nuclear medicine research. Revolutionary advances in instrumentation will open new and exciting research opportunities. Similarly, artificial intelligence will find its way into the clinic based on solidly designed clinical studies.”

FDA Encourages Inclusion of Incurable Cancers in Trials

On June 24 the U.S. Food and Drug Administration (FDA) issued draft guidance encouraging inclusion of patients with incurable cancers in oncology clinical trials, regardless of prior therapies. “Historically, many clinical trials have required that participating patients previously received multiple therapies,” said Richard Pazdur, MD, director of the FDA Oncology Center of Excellence and acting director of the Office of Oncologic Diseases in the Center for Drug Evaluation and Research. “The FDA believes patients with incurable cancers, if provided adequate information to make an informed decision, should be eligible to participate in oncology clinical trials. If there is no scientific rationale for excluding these patients, then clinical trial eligibility criteria should be broadened to include these patients, with appropriate informed consent.”

The draft guidance, titled “Cancer clinical trial eligibility criteria: Available therapy in noncurative settings,” is part of the FDA’s broader initiative to encourage “rational expanded patient eligibility” for oncology clinical trials. When finalized, the guidance will provide recommendations to sponsors designing clinical trials of drug and biologic products for expanding eligibility to patients with incurable cancers as well as inclusion of patients who have not received available therapy/therapies (e.g., evaluating these patients in separate cohorts from patients who have received available therapies). The draft guidance is available at: https://www.federalregister.gov/documents/2021/06/25/2021-13585/cancer-clinical-trial-eligibility-criteria-approach-to-available-therapy-in-non-curative-settings.