

The 1-Year Impact of Coronavirus Disease-19 Pandemic on Clinical Research and Publications

We have left 1 year behind since the coronavirus disease-19 (COVID-19) pandemic. Following the declaration of COVID-19 as a Public Health Emergency of International Concern on January 30, 2020, by the World Health Organization, all the balances and stabilities in the world have started to change.^[1] We now have a pandemic in our lives and it was inconceivable that it would affect everything. Inevitably, the quality and quantity of clinical trials and scientific research have also got their share. While clinical research and publications on COVID-19 are rapidly increasing, those in other fields are falling far behind.

In NCBI database on PubMed, there are more than 100,000 COVID-19-related papers between February 1, 2020 and February 1, 2021.^[2] According to *Nature* Journal analysis reported by Holly Else, between 17% and 30% of published articles were preprints depending on the database searched and one database around 4% of the world's research was focused on the COVID-19 pandemic. Coronavirus papers were published much faster than normal and this at the expense of publishing research in other fields more slowly.^[3-5] There were also research publishing scandals which ended up in withdrawal or retraction of the papers. A case-control study done by searching PubMed database during the very early period of pandemic concluded that the quality of COVID-19 original articles in the three highest-ranked medical journals is below the average quality of these journals.^[2,5] The COVID-19 studies from the World Health Organization database are more than 3500.^[6] However, the answer to the question "what extent are the results of these studies provided for an accurate and effective treatment?" is also a matter of discussion.

The *International Journal of the Cardiovascular Academy* has published two papers related to COVID-19 pandemic within this period. Ekin and Ergene reported a 75% decrease in the number of primary percutaneous coronary intervention due to ST-elevation myocardial infarction (STEMI) and a 65% reduction of monthly average of STEMI cases^[7] and Gambaro *et al.*^[8] discussed the connections between COVID-19 and low mortality rate in women.

Our journal has also been affected by the pandemic and we are able to include only five articles in this issue. This may be due to hard conditions of the health-care providers, including physicians and clinical scientists as well as our young colleagues at the beginning of their careers have to face. We hope that the negative impact of the pandemic on our daily social life as well as on our scientific activities subsides rapidly so that our journal again reaches the high submission rates prior

to the pandemic and continues to contribute to cardiovascular knowledge with high-quality scientific work.

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