

EVIDENCE-BASED PSYCHIATRIC CARE: THE WHYS

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At first glance, the premises for a new psychiatric journal could appear weak.

Surfing the NET, each of us may indeed immediately figure out how large is the availability of dedicated journals in the area of psychiatry and allied disciplines. The results relative to some of the most popular databases are paradigmatic in this context: for example, on December 2014, PsychINFO® covered 2562 journals, InCites™ included 338 journals under the broad rubric “psychiatry and psychology”, and the application to PubMed® of the keyword “psychiatry” selected 559 journals. Furthermore, at the same date, the Journal Citation Reports identified 136 psychiatric journals with impact factor.

Despite the unfavorable premises descending from this crowded scenario, we are persuaded that Evidence-based Psychiatric Care may stand on its own within the psychiatric community. Three main independent considerations support our expectation.

The first consideration is that Evidence-based Psychiatric Care will permit to fill a relevant gap: the fact that the Italian Psychiatric Society has been for many years orphan of an official journal. This situation appears hardly acceptable considering the past and the present role of our Society. Having origins that trace back to 142 years ago, the Italian Psychiatric Society began at the same time as the unity of Italy and the foundation of the German Society of Psychiatry and followed only a few decades the starting of the corresponding American, British, and French associations. Furthermore, having 8.500 members, the Italian Psychiatric Society rightly enters in the list of the most representative national psychiatric association.

The second consideration comes from the coexistence of two opposing realities: on the one hand, the transfer of information from the experimental to the clinical setting that frequently results neither trivial nor automatic because of marked context differences and, on the other hand, the fact that generalizability of the results outside the original experimental setting represents a topic only minimally considered in current literature. Given the relevant potential of negative repercussions for clinical routine that descend from this gap, a journal as Evidence-based Psychiatric Care primarily aimed to promote a good clinical practice sustained by scientific evidence must be viewed as commendable. Consequently, controlled clinical trials, real-world naturalistic studies, guidelines, expert opinions, and societal position papers consistent with this mission will have a priority in the journal.

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The third consideration is that the privileged contents of Evidence-based Psychiatric Care could hopefully open the doors also to authors and readers outside the inner, largely academic circle of the habitu  of scientific journals. The decision to offer a completely free open-access to the journal and

to require low price publication fees embodies the editorial policy to retain new researchers and new readers in a period, as the present, dominated by paucity of economic resources.

However, the proof of the pudding is in the eating.