

EDITORIAL

Minerva Cardiology and Angiology: changing while remaining itself in its journey for cardiovascular evidence

Giuseppe BIONDI ZOCCAI^{1, 2 *}¹Department of Medical-Surgical Sciences and Biotechnologies, Sapienza University, Latina, Rome, Italy;
²Mediterranea Cardiocentro, Naples, Italy*Corresponding author: Giuseppe Biondi Zoccai, Department of Medical-Surgical Sciences and Biotechnologies, Sapienza University, Latina, Rome Italy. E-mail: giuseppe.biondizoccai@uniroma1.it.

*If we want things to stay as they are,
things will have to change*
Giuseppe Tomasi di Lampedusa, *Il Gattopardo*

I must be frank with my readers and colleagues: I would have never dreamt of being the Chief Editor of a biomedical journal when I was a medical student or a junior physician.¹ Now, looking backwards, I recognize that I overcame, almost seamlessly, all the appropriate steps, without hurry nor shortcuts. For instance, I never stopped being an avid reader of biomedical journals, from top tier generalists one such as the *New England Journal of Medicine*, to niche publications such as the *Journal of Invasive Cardiology*, and I also enjoyed myself submitting manuscripts to scholarly journals I held in high esteem.²⁻⁵ Indeed, in many ways, I changed altogether, but I managed to be the same throughout.

Changing while remaining the same: is it possible or just an oxymoron? Tomasi di Lampedusa's quote is clearly Machiavellan, but evidently the author's sympathy goes to Tancredi, who epitomizes the need to adjust without forgetting our own roots.⁶ Yet, this stance toward personal and professional endeavors poignantly applies to *Minerva Cardiology and Angiology*, formerly *Minerva Cardioangiologica*.

In fact, Minerva Medica was funded more than 100 years ago, choosing as inspiration Mi-

nerva, the "Roman goddess of wisdom and strategic warfare, justice, law, victory, and the sponsor of arts, trade, and strategy"⁷ (Figure 1).⁸ In



Figure 1.—Portrait of Minerva by Frans Floris, the Phoebeus Foundation. From Wikipedia.⁸

1953, the innovative and pioneering leadership of Tomaso Oliario brought to the creation of a new biomedical journal, entirely devoted to the discipline of cardiology and angiology, *Minerva Cardioangiologica*.⁹ Since then, this journal has continued to grow in scope and attention to contemporary clinical and research issues, reconciling a focus on Italian cardiovascular scientists and practitioners, but without dismissing contributions from other countries. Even in the unprecedented challenges due to Coronavirus disease 2019 (COVID-19), *Minerva Cardioangiologica* has served well its readers, for instance by providing timely and free articles dedicated to these theme, ranging from editorials to original articles and reviews.¹⁰⁻¹² I was lucky to be a witness and a shepherd of these last efforts, given my appointment as Chief Editor of *Minerva Cardioangiologica* in late 2019.¹

Now, 2021 brings us and the journal in particular a new, subtle, yet impactful change in the name of our ongoing globalization effort: the name of the journal has become *Minerva Cardiology and Angiology* (Figure 2). The goal is clearly to maintain the original scope and identity of this scholarly publication, capable of focusing on articles on cardiovascular disease, but also

angiology and phlebology. As previously stated, *Minerva Cardiology and Angiology*, which will be abbreviated for indexing purposes, e.g. in PubMed, as *Minerva Cardiol Angiol*, will seek high quality editorials, original articles, reviews, and letters of comments on these important topics. Our editorial board also moves forward in terms of inclusion and representativeness, by appointing four women as Deputy Editors: Chiara Bernelli, Michela Casella, Elena Cavarretta and Stéphane Manzo-Silberman (Figure 3). Similarly, the scope of the *Minerva Cardiology and Angiology* continues to expand while remaining true to its roots, for instance detailing studies on novel cardiovascular risk factors such as climate and pollution,¹³ breakthrough technologies such as online platforms for case sharing and patient follow-up,¹⁴ breakthrough cardiovascular technologies (ECMO),¹¹ study designs,^{15, 16} and consensus statements.¹⁷

In conclusion, I dearly recommend you, whether you are a medical student, a trainee, a physician or a surgeon, to attentively peruse our bimonthly table of contents for articles which may be relevant to your cardiovascular research or clinical practice. Furthermore, we eagerly accept volunteers wishing to participate in our

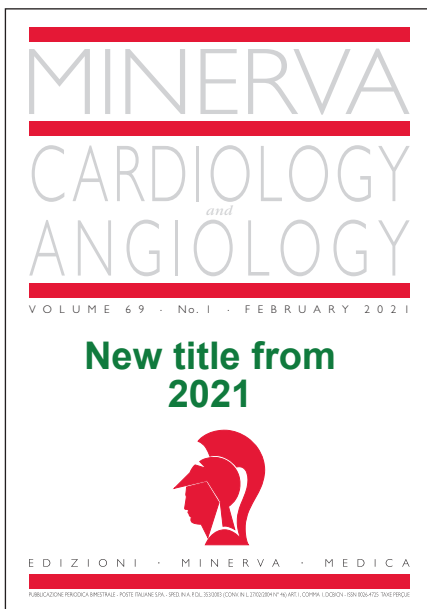


Figure 2.—New frontespiece of *Minerva Cardiology and Angiology*.



Figure 3.—New deputy editors of *Minerva Cardiology and Angiology*: A) Chiara Bernelli; B) Michela Casella; C) Elena Cavarretta; and D) Stéphane Manzo-Silberman.



A randomized trial testing the impact of sex bias on biomedical peer-review: The Gender Effect on Decision Effects and Reviews in Minerva Medica (GENDER-MM) Study

Background: Despite ongoing efforts, sex bias still commonly impacts on biomedical research processes, ranging from funding to promotion. In addition, there is growing evidence that peer-review may be biased against women, for instance by same-gender preference by editors (i.e. homophily). However, uncertainty persists on the actual extent of sex bias in peer-review and the best remedial actions given the total lack of experimental research on this topic.

Aim: We aim to conduct a randomized trial with the joint objective of quantifying precisely the potential presence of sex bias in peer-review, and also of identifying the potential beneficial effect of picking same vs different sex reviewers in comparison to first author gender.

Methods: Consecutive original article and review manuscripts with a cardiovascular focus submitted to our journal *Minerva Cardioangiologica* or *Panminerva Medica*, two established journals characterized by a peer-review process with open author identity and masked reviewer identity, will be screened editorially as per standard practice, and then characterized based on gender of the first author, last author, and corresponding author. If deemed eligible for external peer-review, the corresponding author will be informed of our aim to proceed with randomization to either female or male peer-reviewers, using an opt-out consent form approach. In case of favorable or no explicit negative response, the manuscript will undergo randomization to a full set of same native language and same gender reviewers only (same gender arm) or to a full set of same native language but different gender reviewers only (different gender arm). We will use stratified lists of randomization, one for manuscripts with a female first author, and one for manuscripts with a male first author, with blocks of 4. Notably, reviewers will not be aware of participating to the study, and their identity will remain confidential. Post hoc analysis will explore the interaction between gender of the corresponding author, gender of the senior author, and prevalence of female sex among authors. Reviewers will be searched in PubMed using the first title key-word and first author country as filters.

Outcomes: The primary endpoint will be individual peer-reviewer recommendations for acceptance, major revision, minor revision, or rejection. Additional endpoints will be priority score, time to acceptance, time to review completion, review word count (total and per section), review quality, appraised with the ARCADIA (Assessment of Review reports with a Checklist Available to eDitors and Authors) tool, and eventual decision of the manuscript. Notably, review quality will be appraised by four scorers, independently (two unblinded, a man and a woman, and two blinded to reviewer identity, also a man and a woman).

Sample size: Given the exploratory design of the study, no formal sample size computation was performed. However, we deemed necessary for reasonably precise effect estimates a minimum total sample of 100 manuscripts undergoing randomization (with at least 40 manuscripts with a female first author).

Contact: For any query, please refer to the Chief Editor, Prof. Giuseppe Biondi-Zoccai, Sapienza University of Rome, Latina, Italy, at giuseppe.biondizoccai@uniroma1.it

Figure 4.—Highlights of the Gender Effect on Decision Effects and Reviews in Minerva Medica (GENDER-MM) trial.

peer-review process, including ongoing trials such as the Gender Effect on Decision Effects and Reviews in Minerva Medica (GENDER-MM) trial (Figure 4), as well as authors interested in offering us the privilege of appraising their manuscripts for potential publication.

- Several strategies to improve research dissemination and impact are going to be implemented, including stakeholder involvement and research on peer-review (*i.e.* research on research).

Key messages

- Cardiovascular research requires ongoing efforts at scholarly dissemination of research endeavors and practice updates.
- *Minerva Cardiology and Angiology* aims to continue its role as a peer-reviewed biomedical journal focusing on cardiovascular disease.

References

1. Biondi Zoccai G, Abbate A, Frati G, Gaudino M, Romagnoli E, Sciarretta S. *Minerva Cardioangiologica*: glancing backward, rushing forward. *Minerva Cardioangiolog* 2020;68:1–4.
2. Biondi Zoccai GG, Agostoni P, Testa L, Abbate A, Parisi Q, Burzotta F, *et al.* Increased mortality after coronary stenting in patients treated with clopidogrel without loading dose. Evidence from a meta-analysis. *Minerva Cardioangiolog* 2004;52:195–208.

3. Biondi-Zoccai GG, Abbate A, Liuzzo G, Biasucci LM. Atherothrombosis, inflammation, and diabetes. *J Am Coll Cardiol* 2003;41:1071–7.
4. Gaudino M, Benedetto U, Frenes S, Biondi-Zoccai G, Sedrakyan A, Puskas JD, *et al.*; RADIAL Investigators. Radial-Artery or Saphenous-Vein Grafts in Coronary-Artery Bypass Surgery. *N Engl J Med* 2018;378:2069–77.
5. Gaudino M, Benedetto U, Frenes S, Ballman K, Biondi-Zoccai G, Sedrakyan A, *et al.*; RADIAL Investigators. Association of Radial Artery Graft vs Saphenous Vein Graft With Long-term Cardiovascular Outcomes Among Patients Undergoing Coronary Artery Bypass Grafting: A Systematic Review and Meta-analysis. *JAMA* 2020;324:179–87.
6. Tomasi di Lampedusa G. *The leopard: a novel*. New York, NY: Pantheon; 2007.
7. Wikipedia. Minerva. Wikipedia; [Internet]. Available from: <https://en.wikipedia.org/wiki/Minerva> [cited 2021, Feb 12].
8. File: Frans Floris Salomon Lilian Print 16529kopie.jpg. Wikipedia; [Internet]. Available from: https://en.wikipedia.org/wiki/File:Frans_Floris_Salomon_Lilian_Print_16529kopie.jpg [cited 2021, Feb 12].
9. Bastai P. [Evolutive rheumatic carditis and mitral surgery]. *Minerva Cardioangiol* 1953;1:2–3. Italian
10. Biondi Zoccai G, Landoni G, Carnevale R, Cavarretta E, Sciarretta S, Frati G. SARS-CoV-2 and COVID-19: facing the pandemic together as citizens and cardiovascular practitioners. *Minerva Cardioangiol* 2020;68:61–4.
11. Marullo AG, Cavarretta E, Biondi Zoccai G, Mancone M, Peruzzi M, Piscioneri F, *et al.* Extracorporeal membrane oxygenation for critically ill patients with coronavirus-associated disease 2019: an updated perspective of the European experience. *Minerva Cardioangiol* 2020;68:368–72.
12. Chatzis DG, Magounaki KT, Pantazopoulos IN, Johnson EO, Tsioufis KP. COVID-19 pandemic and cardiovascular disease: where do we stand? *Minerva Cardioangiol* 2020;68:347–58.
13. Calcagno S, Di Pietro R, Dei Giudici A, Del Prete A, Sciarretta S, Versaci F. Air pollution, climate changes and cardiovascular diseases: a nightmare threesome! *Minerva Cardioangiol* 2020;68:282–4.
14. Coles RA, Goh SJ, Livingstone D, Qasim A. MedShr: improving patient care through clinical case discussion. *Minerva Cardioangiol* 2020;68:175–87.
15. Cavarretta E, Pingitore A, Della Porta S, Capitani R, Bernardi M, Sciarra L, *et al.* Accuracy of the “International Criteria” for ECG screening in athletes in comparison with previous published criteria: rationale and design of a diagnostic meta-analysis. *Minerva Cardioangiol* 2020. [Epub ahead of print]
16. Biondi Zoccai G, Carnevale R, Vitali M, Tritapepe L, Martinelli O, Macrina F, *et al.* A randomized trial comparing the acute coronary, systemic, and environmental effects of electronic vaping cigarettes versus heat-not-burn cigarettes in smokers of combustible cigarettes undergoing invasive coronary assessment: rationale and design of the SUR-VAPES 3 trial. *Minerva Cardioangiol* 2020;68:548–55.
17. Rossini R, Quadri G, Rognoni A, Nardi F, Varbella F, Musumeci G. Use of DOACs in real-world challenging settings: a Delphi Consensus from Italian cardiologists. *Minerva Cardioangiol* 2019;67:361–73.

Conflicts of interest.—Giuseppe Biondi Zoccai consulted for Cardionovum, Bonn, Germany, InnovHeart, Milan, Italy, Meditrial, Rome, Italy, and Replycare, Rome, Italy.

Authors' contributions.—The author read and approved the final version of the manuscript.

History.—Manuscript accepted: February 10, 2021. - Manuscript received: February 10, 2021.

(Cite this article as: Biondi Zoccai G. *Minerva Cardiology and Angiology*: changing while remaining itself in its journey for cardiovascular evidence. *Minerva Cardiol* 2021;69:2-5. DOI: 10.23736/S2724-5683.21.05724-0)