



Accelerating Digital Health Trends and Transformation Through Scientific Communications

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Section: Editorial Focus

ccelerating healthcare modernization, efficiency, and interoperability does not come without sacrifice. In this post-COVID-19 era, we have experienced an aversion to change and the necessity to reach across cultural, geographic, and economic divides.

In early September, President Xi Jinping called for China to achieve 'common prosperity' – a vision that seeks to narrow the wealth gap in urban and rural communities (1). We can apply this concept to the telehealth global divide across communities and geographies.

'Common prosperity' is a concept that places China alongside nations where equity has become an international thematic and economic byproduct of COVID-19. I propose to include health equity in this pursuit to minimize inequality between urban and rural areas, while strengthening social stability and making quality healthcare safely accessible. Success in this regard will serve as evidence of 'solid progress' toward a global prosperity. This endeavor requires policy makers to drive policy changes for the benefit of citizens. Examples include tax regulation, tech sector ethics, healthcare fraud, counterfeit drugs, price transparency, minimum standards for connectivity, cybersecurity, low-cost drugs and services, and increased digital literacy and education reform to improve a public service social safety net.

It is clear, visionary leadership can design policies that create opportunities for equity, innovation, and scientific truth. These elements will bridge divides and provide the best care through common priorities that cross cultural and geographic barriers.

Sometimes answers can be found by sharing published, failed or negative results. Yet, in some cultures, this a not acceptable. The scientific community tends to reward success. This cycle can and must be broken, as the current reward system in academia hampers progress, clogs innovation pipelines, and stymies innovation by early-stage career researchers.

Many groups argue that focusing on journal 'brands' intensifies competition between researchers and journals in ways that distort behavior and undermine a healthy and productive scholarly enterprise (2). As we know, a journal impact factor is a poor predictor of the number of citations a paper receives. Our own BHTY journal is a perfect example of this. Blockchain in Healthcare Today has no journal impact factor rating (yet), but it does have an inordinate number of citations! Shifting the emphasis from journals to articles is highly desirable and precisely how we at BHTY approach the content (i.e. amplified on its own merit). I am certain our rigorous peer-review process has strengthened these highly cited articles, making them valuable contributions to the scientific community.

The Partners in Digital Health (PDH) portfolio is one that sets trends, is forward reaching, and followed by many. The role and impact of social media in scientific communications have been part of our strategy from the outset, knowing we would add a greater value to authors and their work while waiting on index application reviews that are often touted 'black holes', with wait times and resubmissions taking anywhere from 1 to 3 years.

We must minimize gaps in scientific dissemination. This includes the volume of published research that stymies the pace and quality of published research. As stated by Dr. Johnan Chu, Northwestern University Kellogg School of Management, and James Evans, Professor, University of Chicago, 'the size of scientific fields may impede the rise of new ideas. When the number of papers published per year in a scientific field grows large, citations flow disproportionately to already well-cited papers, and newly published papers become unlikely to disrupt existing work (3).' This suggests that progress of large scientific fields may be slowed.

As a result, we should expect policy measures that shift how scientific work is produced, disseminated, consumed and rewarded to push fields into new areas of study. This is exactly what we experienced when we launched BHTY. We created the niche, and provided the credibility and validation for it to grow and flourish as a new field in science and technology in health care.

We must come to terms with 'true innovation and creativity' versus publishing in 'top tier' journals for more profit and production iteration. Many novel innovations are going to '2nd tier' and specialized journals (4). We experience this effect with our journals and happily publish landmark research. Glenn Bagley stated, sloppy science costs the US\$28 billion a year in lost opportunity and non-reproducibility. We must give money to innovative scientists to keep the Unites States at the forefront of discovery and innovation – a hot topic of late – with all the spigots open and flowing for grant opportunities.

There is no room in our market, or nation, for complacency when new frameworks initiatives are advancing a revolution of borderless interoperable frontier tech led by consumers, activists, and pioneers who are ready to challenge market integrity and sensibilities. Like our portfolio motto, I encourage us to 'build trust through truth'.

To view the complete ConV2X 2021 Symposium Remarks, including predictions for what to expect from digital health, distributed ledger technology (DLT) and scientific communications markets, visit and follow Partners in Digital Health on YouTube here, or click the link https://www.youtube.com/channel/ UCtyRPy0nGhj8yQw56W4yWlQ

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