



Editorial

JDEP at Seven Years of Age

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Welcome to the fourth issue of 2024, which marks the end of JDEP's seventh year of age. The current issue has a review article, three original articles, and two case reports. In addition, we have the state of the association by the Gulf Association of Endocrinology and Diabetes (GAED) president and its office bearers.

Aljaberi et al reviewed the impact of fasting during Ramadan on thyroxine replacement therapy. The authors included all the old and recent literature on the subject, their conclusions, and practical management recommendations. Two original articles are included. Al Zubaidi et al described a single-center retrospective cohort of genotype–phenotype correlation of osteogenesis imperfecta in the United Arab Emirates. Abdelgadir et al systematically reviewed the efficacy and safety of sodium-glucose cotransporter 2 (SGLT2) inhibitors during Ramadan fasting. The third original article is on the trend, level, and predictors of glycemic control among a population with Type 2 diabetes: from a twelve-year retrospective cohort study from Iran by Amanuel Godana Arero and colleagues. Two case reports are included. In the first case, Abouglila and Gatnash describe improved glycemic control using oral semaglutide in a patient with type 2 diabetes with insulin allergy. Mnif et al describe the coexistence of 21 hydroxylase deficiency and autoimmune adrenalitis in the second case report.

In their “State of the Association” piece, the president and the office bearers of GAED consider the achievements, challenges, and future of GAED in 2024. This issue arose just a few weeks after we received the sad news of Prof. Ibrahim Salti's passing at the American University of Beirut. Dr. Hossein Saadi wrote a deserving tribute.

Returning to the journal, *Journal of Diabetes and Endocrine Practice* (JDEP) has just completed 7 years. As with all emerging journals, we had a difficult start. We included only a single issue per volume in the first 2 years. However, from 2021 onward, we have achieved the full four issues per year. On most occasions, each issue would have a blend of reviews, original articles, and any “shorties” of case reports

and clinical vignettes. Whenever appropriate, viewpoints and commentaries were dotted here and there as needed. We hope the content reflects the journal's vision: “an international journal with a regional spirit and flavor.” In addition to themes in contemporary clinical practice, such as hypopituitarism and thyroid disease, we also had articles on ethnically sensitive and culturally relevant matters, such as Ramadan fasting and surveys of the clinical management patterns of common endocrine conditions. We have regularly reserved space for free communications of regional endocrine events of our GAED annual congress and other events from Qatar and Libya. In addition, we welcome submitted highlights on similar events such as the Gulf Obesity and DaR conference. However, we still face a disappointing trend in which researchers are overly focused on publishing in indexed journals, even if they have to pay high publication fees. This brings us to the vicious cycle of lack of PubMed indexation and low submission rates. No PubMed indexation attracts fewer submissions, reducing the chances of a successful PubMed application. The situation is particularly challenging for journals from emerging regions competing with big multinational publishers and established Western societies. Publishers, in general, seem to fear undertaking indexation applications and our publisher. Regional authors should not fear submitting to emerging journals that are supported by their institutions. The current electronic environment, DOI identifications, and access to nonselective databases are linked to Google Scholar, which should provide adequate visibility for their articles while supporting regional journals.

We hope our current readers and authors continue to support us, and we hope that our publisher and indexation organization see value in our contribution to the clinical and academic world of diabetes and endocrinology.

Conflict of Interest

None declared.

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