

Building a diamond open access journal on Wikimedia platform

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Wikimedia movement

- a collection of values shared by individuals (freedom of speech, knowledge for everyone, community sharing, etc.);
- a collection of projects (Wikipedia, Wiktionary, Wikimedia Commons, Wikinews, Wikiquote, Wikidata, Wikivoyage, Wikisource, Wikispecies, Wikiversity, Wikibooks, Incubator, etc);
- a collection of activities (conferences, workshops, wikiacademies, etc.);
- a collection of organizations (Wikimedia Foundation, Wikimedia chapters, etc.), as well as some free electrons (individuals without chapters) and similar-minded organizations



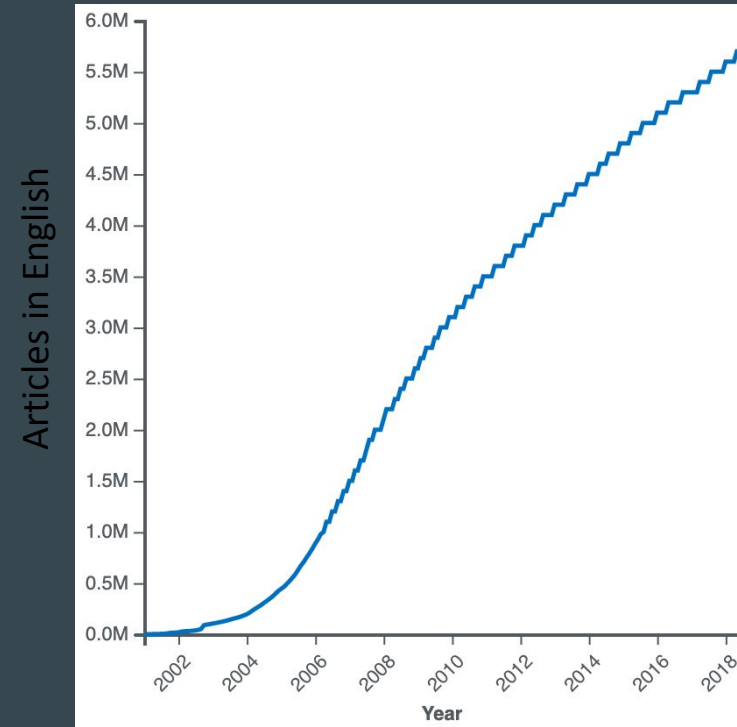
Wikimedia Projects

- Wikipedia, a web-based encyclopedia
- Wiktionary, a dictionary
- Wikibooks, educational textbooks
- Wikinews, news articles
- Wikiquote, a collection of quotations
- Wikisource, a library of source texts and documents
- Wikiversity, educational material
- Wikivoyage, a travel guide
- Wikispecies, a taxonomic catalogue of species
- Wikimedia Commons, a data repository of media like images, videos and sounds.
- Wikidata, a common source of data, also accessible by the other projects



Wikipedia

- The largest and most popular general reference work on the Internet
 - Over 55 million articles¹
 - Over 300 languages²
- 15 billion views per month³
- 1.7 billion unique visitors per month
- 11th most visited website⁴





Wikipedia matters

- The general public trust it.^{5, 6}
- Used by doctors (50% - 70%)⁷, students (>95%)⁸, educators (>85%)⁹ and lawmakers¹⁰.



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WikiProject COVID-19



WikiProject Hospitals



WikiProject Neuroscience



WikiProject Physiology



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[Wikipedia education program in medicine](#): partnership with medical schools and other health science education programs



[Wiki Project Med Foundation](#): a nonprofit corporation promoting development of medical content including other language Wikimedia projects



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Inconsistent quality and coverage¹¹



Changes are reviewed, but not systematically



**Clinicians/academics/
researchers often want
credit for their work**

More than a mention in the
“history” tab



A shortage of images

Can not simply use any image on
the internet due to copyright



**Cannot incorporate
original research**

Academic limitation

Wikipedia's limitations



**Maintenance costs,
subscription costs,
advertising**



**Most are paywalled
to readers**



**Non-paywalled
journals charge
authors (article
processing charge)**

... Some charge both
authors and readers!



Copyright of images



**Limited readership
(size and
demographics)**



**Rigid, unchanging
articles become
outdated**

Academic journals' limitations

Similarities and differences

	Academic Journal	Wikipedia
Readership size	Small and brief Median article - 800 total Top 5% article - 3000 total	Very large and extended Median article - 10,000 per year Top 5% article - 1,000,000 per year
Readership composition	Other academics, often within narrow field	General public as well as experts and professionals
Peer review	Pre-publication, private review by 2-4 subject specialists	Post-publication public review of a sort by subject generalists 'Good article' - 1 reviewer 'Featured Article' - 5-12 reviewers
Reputation	Varies by journal but generally extremely high	Public generally trust Academics have mixed opinions but improving
Authorship	Small number with relevant, accredited expertise. Organised group with lead and corresponding authors.	Large number with mixed expertise levels. Loose organisation. Many pseudonymous or anonymous.
Timeliness	Static Updated by new publications	Constantly updated Only one consensus version

Academic journals publishing model

Traditional model

- The reader, the reader's institution, or a library pays a subscription fees

Hybrid model

- Combination of both models

Open Access model

- The author or the author's institution pays an Article Processing Charge (APC) as a fees for submission and publication, and/or a membership fees.
- Journal costs are borne by professional societies or sponsoring institutions.

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DOAJ is independent. All support is via donations.

82%

FROM ACADEMIC

18%

FROM SPONSORS



Open Access models

Green Road (or Self-archiving)	Gold-Road
<ul style="list-style-type: none">▪ Principle : published article or final draft post-refereeing (called "author's post-print") is self-archived by the researcher in an online repository. Deposit is done in addition to the commercial publication and made freely available to the public.▪ Access to the article is often delayed (embargo period) and submitted to transfer copyrights imposed by publishers.▪ No fee is payable by the author.	<ul style="list-style-type: none">▪ Principle: Published article is immediately provided free of charge in an open access mode by the scientific publisher.▪ Immediate access.▪ The associated costs - Author Processing Charges (APCs) - are paid by the author or on their behalf (university or research institute to which the researcher is affiliated, or by the funding agency supporting the research). The <u>Swiss National Science Foundation (SNSF)</u> and the <u>European Commission (H2020)</u> offer funding to cover publications APCs.▪ Gold-Hybrid OA corresponds to OA made by subscription journals providing Gold OA for authors who have opted to pay APC.▪ From 50 to 6000 \$.
<ul style="list-style-type: none">- <u>Serval</u> is the official institutional repository for archiving publications at UNIL and CHUV.	<ul style="list-style-type: none">▪ Journals responding to official OA criteria are indexed in the <u>DOAJ</u> (Directory of Open Access Journals).

<https://www.bium.ch/en/publication-open-access/publication-and-open-access/>

THE COST OF PUBLISHING

JOURNAL PRICES VARY WITH INFLUENCE AND BUSINESS MODEL.

Price of prestige

Open-access prices correlate weakly with the average influence of a journal's articles.

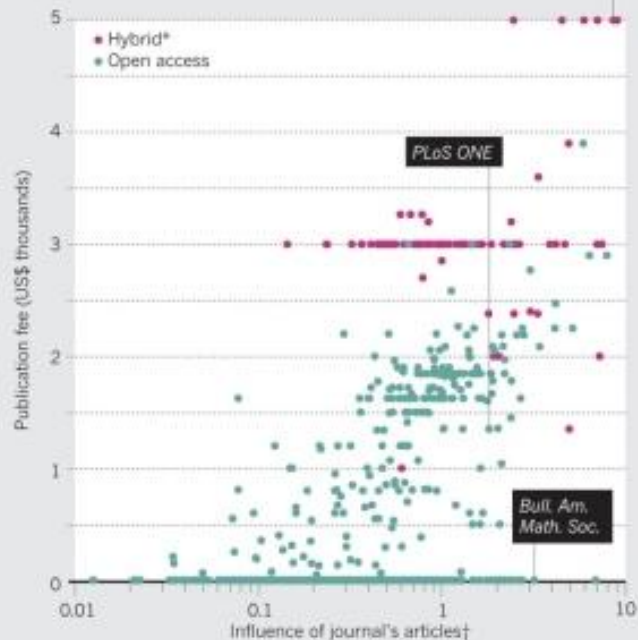


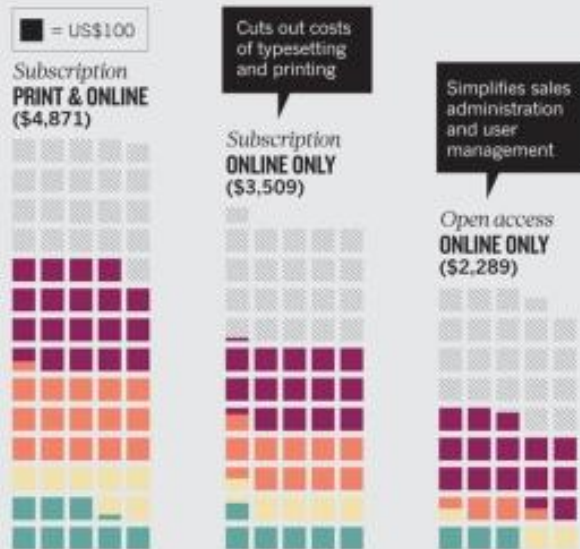
Chart omits open-access journals yet to receive an Article Influence® score.

*Subscription journals that give option of open-access publishing. †Relative score, in which 1 = global average.

The Article Influence score measures the relative importance of a journal, based on the average influence of an article in that journal over 5 years after publication, and normalized so that the global mean influence is 1. Use the impact factor. Article influence is based on citation counts, but gives heavier weight to citations from papers in

How costs break down

An economic model shows how switching from subscription to open access changes the costs of publishing.



■ Voluntary peer review (not counted in price)

Additional cost if reviewers were paid for their time.

■ Article processing

Administering peer review (assuming average rejection rate of 50%); editing; proofreading; typesetting; graphics; quality assurance.

■ Other costs

Covers, indexes and editorial; rights management; sales and payments; printing and delivery; online user management; marketing and communications; helpdesk; online hosting.

■ Management and investment

Includes cost to establish journal: assumed 20% subscription; 15% open access.

■ Margin

Assumed 20% subscription; 15% open access.

Data from J. Houghton et al. Economic implications of alternative academic publishing models. <https://doi.org/10.1038/nature13221>

Open Access models

Type	Subtype	Who pays?	Example
Gold	"Diamond"	Institution (subsidy)	
Gold	Gold, not for profit	Author (fee)	Int. J. of the Commons
Gold	Gold, for profit	Author (fee)	PLoS
Gold	Hybrid gold, for profit ✓	Author (fee) + Library (subscription)	in Nature
Green	Last author version in repository (embargo's) ✓	Library (subscription)	in Igitur
Green	Pre-prints	Library (subscription)	ArXiv / SSRN / PeerJ preprints
Green	Working papers	Working paper archive (institutional subsidy)	in RepEc
Green	"Black" (sharing against copyright)	Publisher	via Academia

Diamond Open Access

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The WikiJournal User Group publishes a set of open-access, peer-reviewed academic journals with no publishing costs to authors. Its goal is to provide free, quality-assured knowledge. Secondly, it aims to bridge the Academia-Wikipedia gap by enabling expert contributions in the traditional academic publishing format to improve Wikipedia content.

- [Further information about the user group.](#)

WikiJournal of Medicine



Medicine and biomedicine (Flagship)

WikiJournal of Science



Science, mathematics, engineering and technology

WikiJournal of Humanities



Humanities, arts and social sciences

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Psychology, Psychiatry and Behavioral Sciences

WikiJournal Preprints



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https://en.wikiversity.org/wiki/WikiJournal_User_Group

Key features



Open Access

All published articles are openly accessible under a free Creative Commons license



Free to publish

WJM is a fully non-profit journal run by volunteer editors so has no publication charges of any kind



Public peer-review

All article peer reviews are published and publicly accessible



Wikipedia-integrated

Appropriate material is integrated into Wikipedia for added reach and exposure

How do WikiJournals complement Wikipedia?

- Published in a standard academic journal format
 - Compliant with international journal guidelines (ICMJE, COPE, & BOAI)
 - Indexed, dissemination in academic world
 - *G-scholar, DOAJ, CrossRef (DOI codes), ISSN, informit, ScienceOpen*
 - Familiar format to researchers and health professionals
 - Permanent, citable “version of record”
- Externally peer reviewed (publicly accessible reviews)
- Authors are credited for their work
- Ethics, guidelines and processes externally audited (member of COPE and ICJME)
- Suitable material is incorporated into the encyclopaedia to be dynamic living version with maximum reach and impact

Publication formats

Research

Original research

Generally including
Method, Results,
Discussion.

Case studies

A patient case in the
medical journal, or a
significant event,
decision, project, or
policy.

Review

Focused

on a specific detail
of a topic.

Encyclopaedic

- Broad summaries
covering an entire
topic.
- Encyclopaedic
tone.

They can be
re-writes, expansions
or improvements of
existing important
Wikipedia articles.

Multimedia

These are short
reviews centred
around a key image
or other multimedia.



Insights into abdominal pregnancy

Gwinyai Masukume

Editor's note

This article provided a great deal of valuable evidence that was not mentioned in the Wikipedia article on abdominal pregnancy, and the Wikipedia article has subsequently been expanded with text from this publication. However, because of this purpose, it has never been the aim of this article in itself to be a complete review of the subject, and many aspects of abdominal pregnancy are not included herein.

This article also provides an example of how to contribute to Wikimedia projects such as Wikipedia by means of academic publishing.

Introduction

While rare, abdominal pregnancies have a higher chance of maternal mortality, perinatal mortality and morbidity compared to normal and ectopic pregnancies, but on occasion a healthy viable infant can be delivered.^[1]

Because tubal, ovarian and broad ligament pregnancies are as difficult to diagnose and treat as abdominal pregnancies, their exclusion from the most common definition of abdominal pregnancy has been debated.^[2]

Others - in the minority - are of the view that abdominal pregnancy should be defined by a placenta implanted into the peritoneum.^[1]

Symptoms and signs

Abdominal pregnancy does not have any specific symptoms and signs so much so that in about half of instances it is missed, only being discovered during surgery, because of the "vague" yet serious nature of the symptoms, signs and results of medical tests patients with abdominal pregnancy will generally have surgery at some point.^{[4][5][6]}

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Risk factors

Risk factors are similar to tubal pregnancy with sexually transmitted disease playing a major role.^[7] However, about half of those with ectopic pregnancy have no known risk factors - known risk factors include damage to the Fallopian tubes from previous surgery or from previous ectopic pregnancy and tobacco smoking.^[8]

Mechanism

Typically an abdominal pregnancy is a secondary implantation which means that it originated from a tubal (less common an ovarian) pregnancy and re-implanted.^[9] Other mechanisms for secondary abdominal pregnancy include uterine rupture, rupture of a uterine rudimentary horn and fimbrial abortion.^[1]

Diagnosis

Suspicion of an abdominal pregnancy is raised when the baby's parts can be easily felt, or the lie is abnormal, the cervix is displaced, or there is failed induction of labor.^[4] X-rays can be used to aid diagnosis.^[9]

To diagnose the rare primary abdominal pregnancy, Studdiford's 1942 criteria need to be fulfilled: tubes and ovaries should be normal, there is no abnormal connection (fistula) between the uterus and the abdominal cavity, and the pregnancy is related solely to the peritoneal surface without signs that there was a tubal pregnancy first.^[10] Studdiford's criteria were refined in 1968

Suspicion of an abdominal pregnancy is raised when the baby's parts can be easily felt, or the **lie** is abnormal. **Obstetrical ultrasonography** is extremely helpful in the diagnosis as it can demonstrate that the pregnancy is outside an empty uterus, there is no amniotic fluid between the placenta and the fetus, no uterine wall surrounding the fetus, fetal parts are close to the abdominal wall, and the fetus is in abnormal lie. **MRI** has also been used with success to diagnose abdominal pregnancy. Elevated **alpha-fetoprotein** levels are another clue of the presence of an abdominal pregnancy. **Ascites** has also been used with success to diagnose abdominal pregnancy associated with extremely elevated serum **alpha-fetoprotein**: case report **British Journal of Obstetrics and Gynaecology** [pmid=6200135 | year=1984 | volume=91 | issue=3 | pages=296-8 | doi=10.1111/j.1471-0528.1984.tb04773.x]

Suspicion of an abdominal pregnancy is raised when the baby's parts can be easily felt, or the **lie** is abnormal, the **cervix** is displaced, or there is failed **labor induction**. **Medical uses X-rays** can be used to aid diagnosis. **Sonography** can demonstrate that the pregnancy is outside an empty uterus, there is reduced to no amniotic fluid between the placenta and the fetus, no uterine wall surrounding the fetus, fetal parts are close to the abdominal wall, the fetus has an abnormal lie, the placenta looks abnormal and there is **ascites**. **MRI** has also been used with success to diagnose abdominal pregnancy and plan for surgery. **The value of magnetic resonance imaging in the diagnosis and management of extra-uterine abdominal pregnancy** **Clin Radiol** [pmid=16488208 | year=2006 | volume=61 | issue=3 | pages=264-9 | doi=] Elevated **alpha-fetoprotein** levels are another clue of the presence of an abdominal pregnancy. **Ascites** has also been used with success to diagnose abdominal pregnancy associated with extremely elevated serum **alpha-fetoprotein**: case report **British Journal of Obstetrics and Gynaecology** [pmid=6200135 | year=1984 | volume=91 | issue=3 | pages=296-8 | doi=10.1111/j.1471-0528.1984.tb04773.x]



Before

After

Text used to expand Wikipedia articles



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Aerococcus urinae

From Wikipedia, the free encyclopedia

Aerococcus urinae is a member of the bacterial genus *Aerococcus*. The bacterium is a Gram-positive, catalase-negative coccus growing in clusters. Isolates of this species were originally isolated from the urine of patients with urinary tract infections and were denoted *Aerococcus*-like organisms.^[1] In 1992, *A. urinae* was assigned as distinct species.^[2] Due to difficulties in the biochemical identification of *A. urinae* in clinical microbiological laboratories, the incidence of infections with this bacterium has likely been underestimated and secure identification relies on genetical or mass spectroscopic methods.^[3] *A. urinae* may also cause invasive infections including urosepsis and infective endocarditis, especially in elderly men with underlying urinary tract diseases.^{[4][5]} *A. urinae* is sensitive to many commonly used antibiotics such as penicillin, cephalosporins, and vancomycin. However, the bacterium is often resistant to many antibiotics used in urinary tract infections such as sulphamethoxazole, trimethoprim and ciprofloxacin.^[6] The bacterium can form biofilms on foreign materials and can aggregate human platelets, two features of potential importance for the disease causing capacity of this organism.^[7] *A. urinae* is the most common aerococcus isolated from invasive human infections whereas *Aerococcus sanguinicola* is isolated from human urine as often as *A. urinae*.^[8]

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- ↑ Rasmussen, M (June 2013). "Aerococci and aerococcal infections." *Journal of Infection* **66**

Images of *Aerococcus urinae*

Mikael Häggström^{1,2,3} and Jonatan Mattila^{4,5}

Abstract

This is a description of an infection in 73 year old man with multiple comorbidities, with images of *Aerococcus urinae* from resultant blood cultures, showing their alpha hemolytic and Gram-positive properties.

Plain language summary: *Aerococcus urinae* is a type of bacteria that can lead to infections in the urinary system. This work describes a 73 year old man who had an infection with *Aerococcus urinae*. Samples of blood and urine were taken from the patient, and when put on blood cells the bacteria weakly changed the color of the blood cells around them. This result is called *alpha hemolysis*, and can be seen in *Image 1*. Adding Gram stain to the bacteria turned them violet, and therefore the bacteria were *Gram-positive*. This can be seen in microscopy in *Image 2*. The patient was treated with antibiotics.

Aerococcus urinae

Aerococcus urinae is a relatively new species of bacteria in clinical and microbiological practice, first reported in 1989 and designated as a separate species in 1992.^[4] It can cause urinary tract infections, bacteremia / septicemia and/or endocarditis.^[4] As a urinary tract pathogen, it causes infections predominantly in elderly persons with local or general predisposing conditions.^[4] *Aerococcus urinae* has been estimated to cause approximately 0.31 - 0.44% of urinary tract infections.^[4]

mg/l (normally less than 5^[4] or 6^[4]) and a leukocyte count of 13.7*10⁹/l (normally less than 9.0^[4] or 10.0^[4]). The patient was admitted to the hospital for observation, and after one day on the ward he developed chills and was subfebrile with a tympanic body temperature of 37.6°C (normally up to 37.5°C).^[8] Blood and urine samples were taken for culture. Microscopy of the blood samples showed gram-positive cocci. The patient received intravenous cefotaxime. After three days all blood samples and urine samples showed growth of gram-positive catalase-negative cocci *Aerococcus urinae* (Figures 1 and 2).

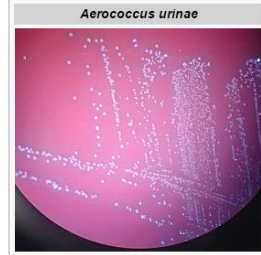
Patient case

A 73 year old man presented to the emergency department with two days of fatigue, fever and chills. He had a previous history of left arterial cerebral media infarction with expressive aphasia, right side hemiparesis and post-stroke seizures. He suffered from hypertension, atrial fibrillation and aortic stenosis with normal systolic left ventricular function as well as urinary incontinence and prostatic hyperplasia.

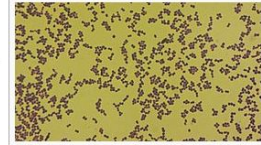
In the emergency department he was afebrile and the blood-samples showed a C-reactive protein level of 19



Figure 1 | Blood agar with alpha hemolytic colonies following culture from the patient's blood samples.



Aerococcus urinae on blood agar, showing alpha hemolytic colonies.



Microscopy of *Aerococcus urinae* with gram stain, showing gram positive cocci.

Scientific classification

Kingdom: Bacteria
Phylum: Firmicutes
Class: Bacilli
Order: Lactobacillales
Family: Aerococcaceae
Genus: *Aerococcus*

Images are stored in Wikimedia Commons, and can be used across sister projects.

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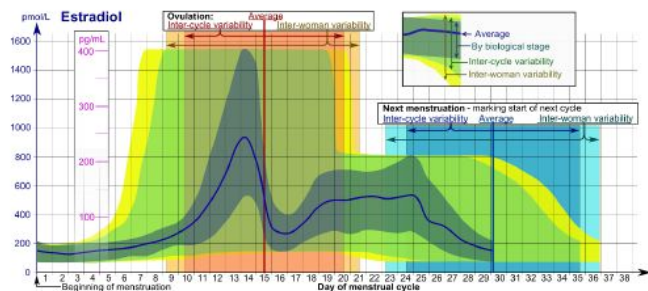


Figure 2 | Estradiol during menstrual cycle

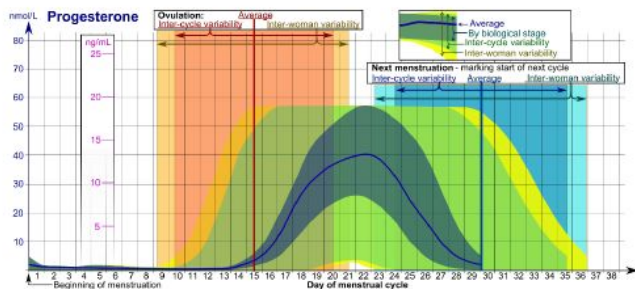


Figure 2 | Progesterone during the menstrual cycle

the up to 95% prediction intervals for any single woman, assuming an inter-cycle average duration that is equal to population average. These ranges are more appropriate to use in non-monitored cycles with only the beginning of menstruation known, but where the woman accurately knowing her average cycle lengths and time of ovulation, and that they are somewhat averagely regular, with the time scale being compressed or stretched to how much a woman's average cycle length is shorter or longer, respectively, than the average of the population.

- The ranges denoted Inter-woman variability are the up to 95% prediction intervals for hormone levels in

the overall population. These ranges are more appropriate in non-monitored cycles, where the average cycle lengths and time of ovulation are unknown, but only the beginning of menstruation is given.

Derivation

Average hormone values

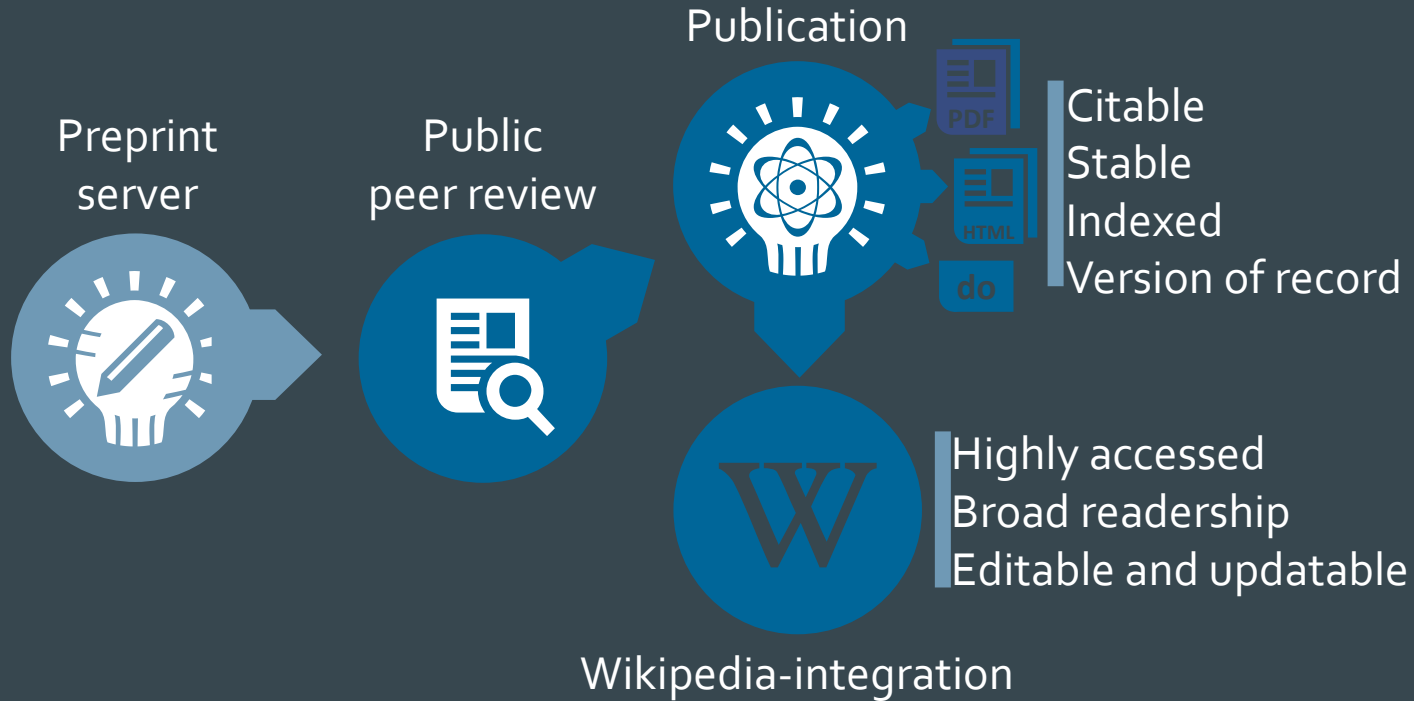
The average hormone levels are taken from Stricker 2006,^[4] with some regression to a smoother curve between values of a rather zigzag pattern. The confidence intervals for the average values are not given in this

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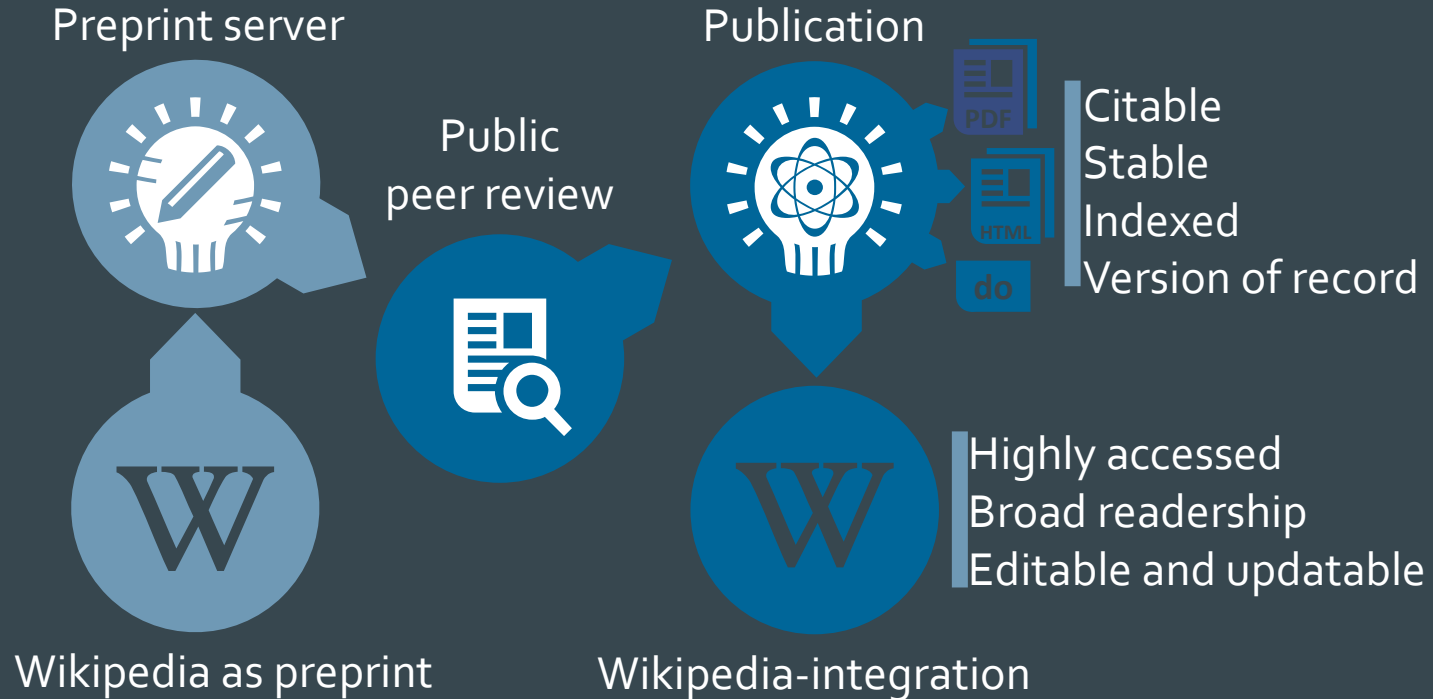
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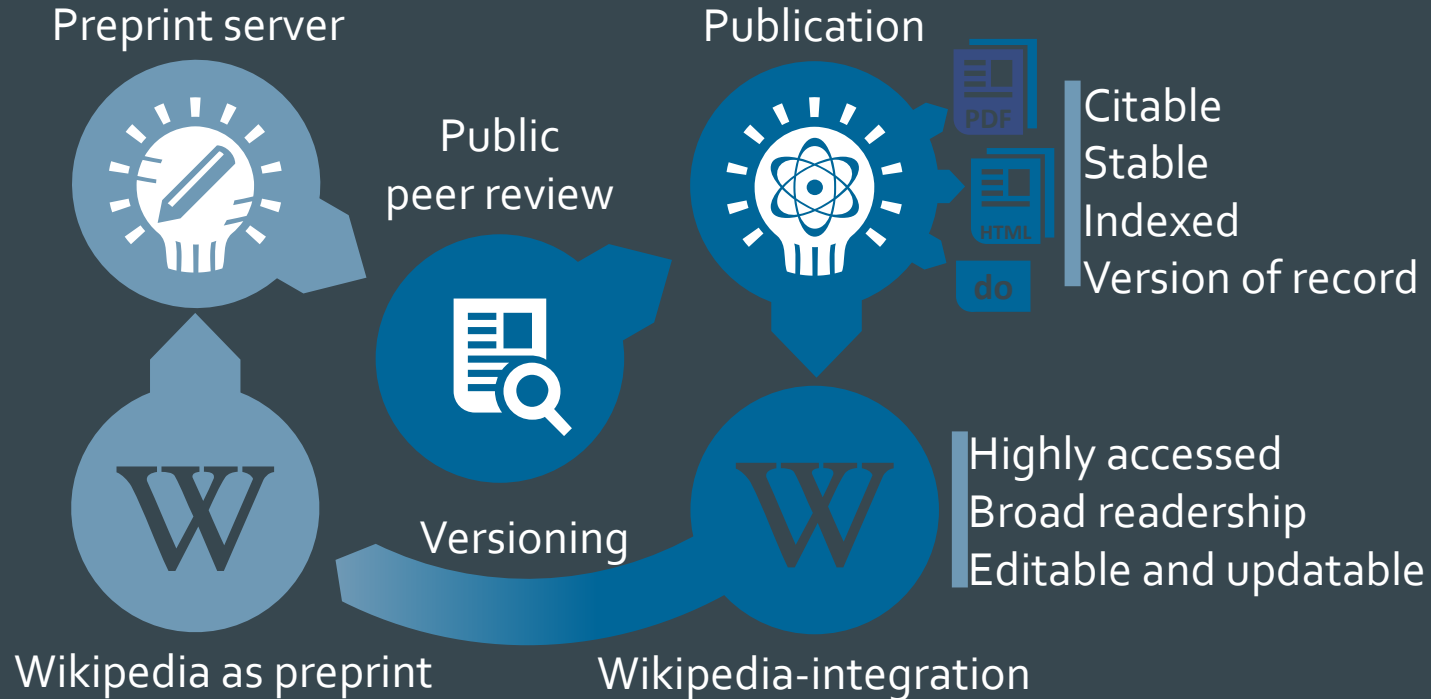
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Publishing flow (Versioning)



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 - Medical Gallery of Blausen Medical
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Who can submit articles?

Anyone can submit

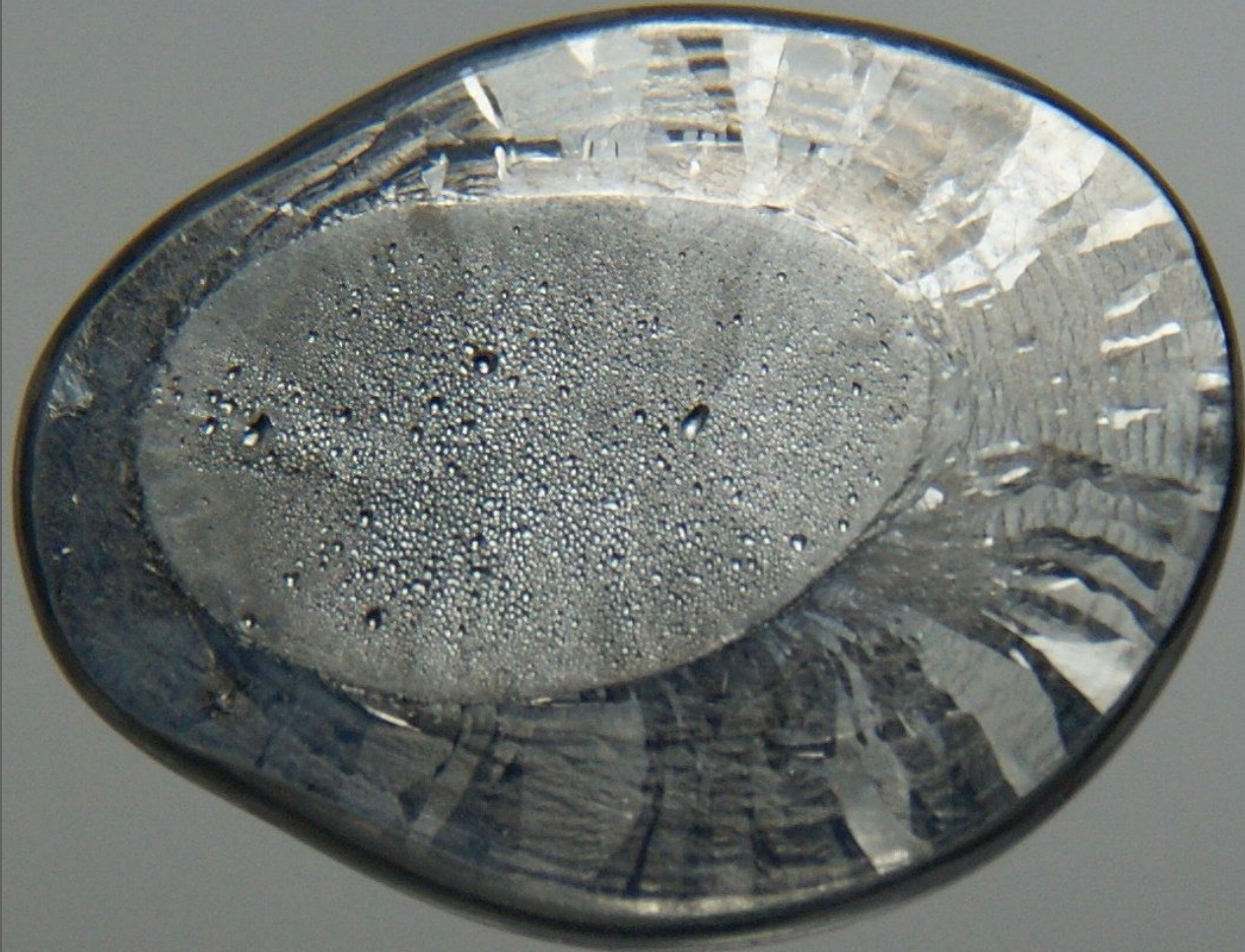
All authors treated equally
The *content* counts

Ideal for research and academics aiming to

Achieve maximum outreach, exposure, and impact

Be credit for expert input to open access projects

Contribute to the world's most read encyclopaedia



Who can peer review articles?

Anyone can give review

Pre- or post-publication

External experts invited to review (*at least 2* required)

Have expertise in the topic at hand, and be willing to provide relevant credentials if requested.

Be willing to disclose any potential conflicts of interests

Not be editorial board members of the journal

Anonymity optional



High impact

- 66,000 journal article views during 2018.¹²
- **4.2 million views** (2018) of all material integrated into Wikipedia.¹³
- 11 publications so far in 2019.

Wikimedia journal hosting platform

Features

Site identity and branding

journals.wikimedia.org / wikijournals.org / [journals.wiki](https://journals.wiki/j.wiki) / j.wiki

Specialised sidebar items and logos

CC BY default license (compatible with most scientific journals)

Automation of repetitive tasks

Copying accepted articles into latest volume & issue

Formatting PDFs

Specialised extensions

Automated email reminders to reviewers

Wikidata integration to track peer reviews (currently written in talkpages)

Individual WikiJournals

WikiJournal of Science

www.WikiJSci.org

 Contact@WikiJSci.org

 [WikiJSci](#)

 [WikiJSci](#)

WikiJournal of Medicine

www.WikiJMed.org

 Contact@WikiJMed.org

 [WikiJMed](#)

 [WikiJMed](#)

WikiJournal of Humanities

www.WikiJHum.org

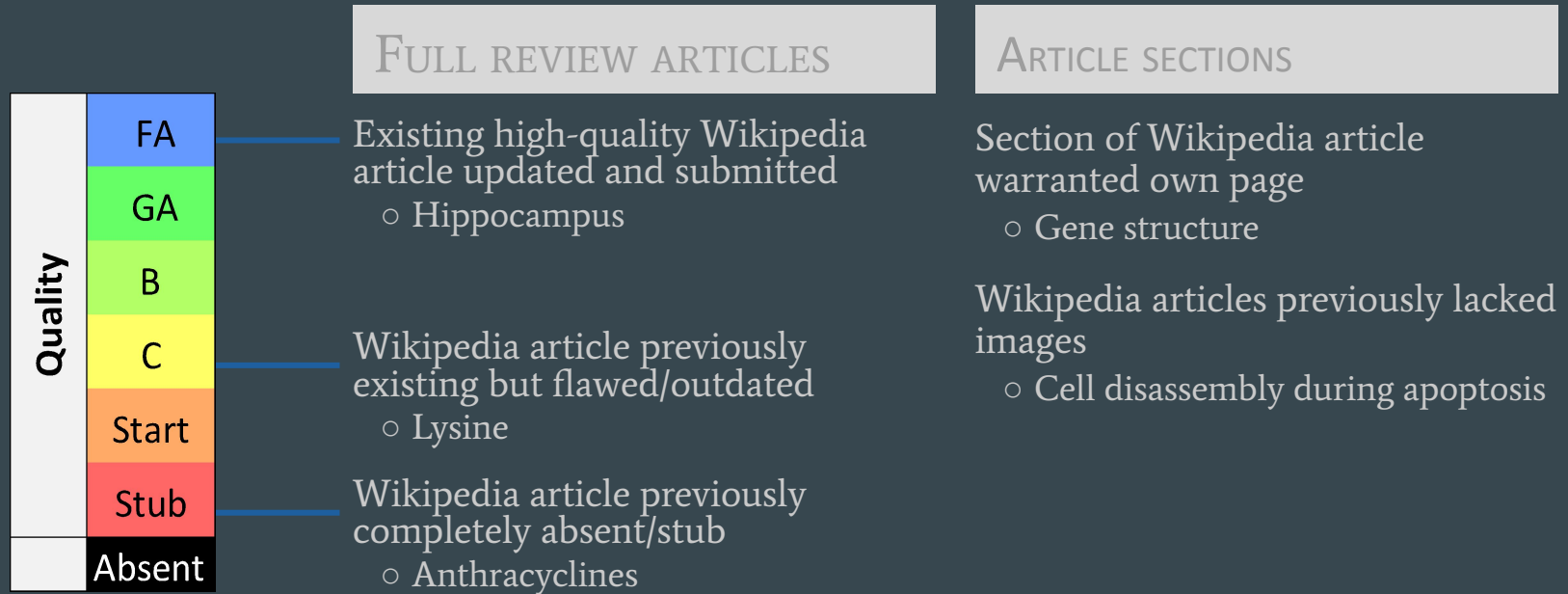
 Contact@WikiJHum.org

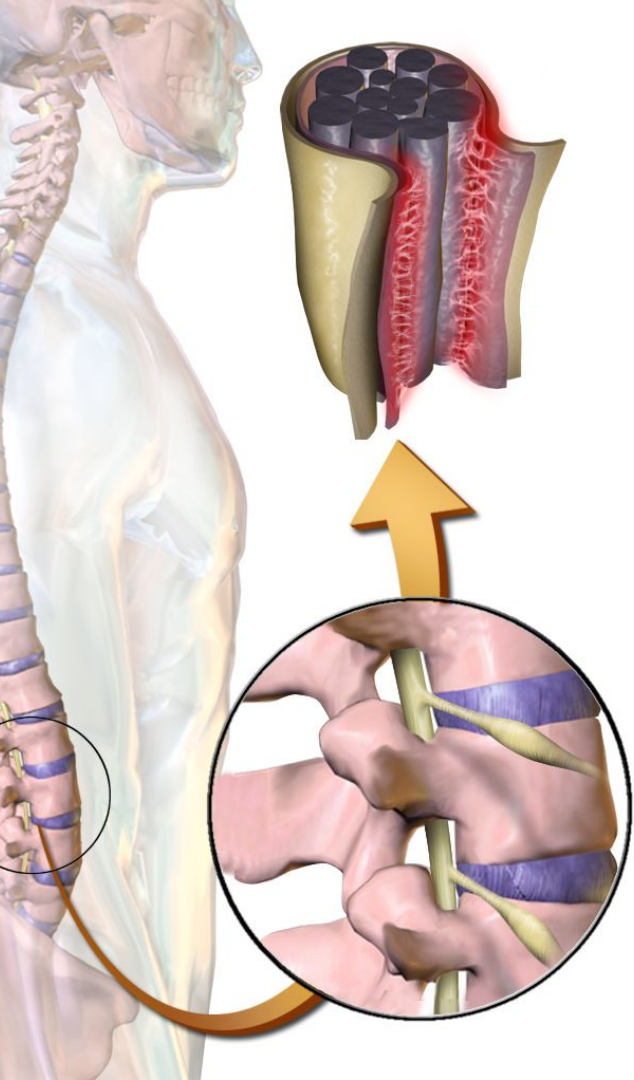
 [WikiJHum](#)

 [WikiJHum](#)

WikiJournal of PPB

Case studies – improving Wikipedia





Possible partnership systems

- Article co-published in both a specialist “conventional” journal and in a WikiJournal.
 - Specialist journal: Invite authors, identify peer reviewers
 - WikiJournal: Advise on Wikipedia policy compliance, readability, style and formatting
- Co-publishing in two journals is frequent. Example:

Staniszewska, S., et al. (2017). GRIPP2 reporting checklists: tools to improve reporting of patient and public involvement in research. *Research involvement and engagement*, 3(1), 13

Staniszewska, S., et al. (2017). GRIPP2 reporting checklists: tools to improve reporting of patient and public involvement in research. *British Medical Journal* 358(1), j3453
- Appropriate content then copied into Wikipedia per ‘journal-first’ model

How can this be relevant for me?

- Creating a WikiJournal in your niche, relevant to the WikiProjects under which you edit articles. Pulling together a team needed to operate the journal.
- Enhancing the model and the structure to make it scalable. Deep insights needed.
- Debiasing, wherever relevant.
- Attracting academic societies from across the globe to use the model.

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12. [Category:Articles that have passed peer review](#), Wikimedia Toolforge.
13. [WikiJMed](#), [WikiJSci](#), [WikiJHum](#) statistics at Wikimedia Toolforge for 2018.

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Thanks.. Questions?

- You can help...
- Get involved.

Reach me on: das.diptanshu@gmail.com

User: Diptanshu Das https://en.wikipedia.org/wiki/User:Diptanshu_Das

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