

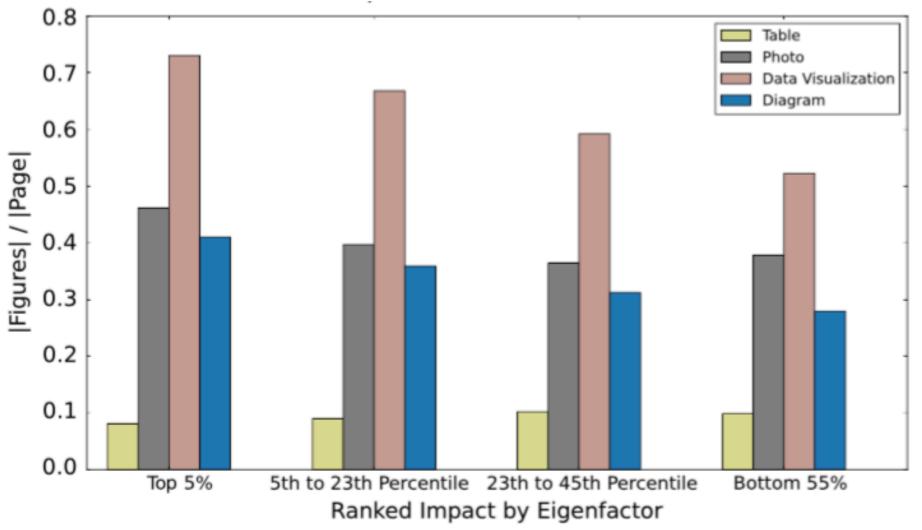
Figure-Centric Search Engine

wiziometrics.org

VizioMetrix About Search Crowdsourcing						
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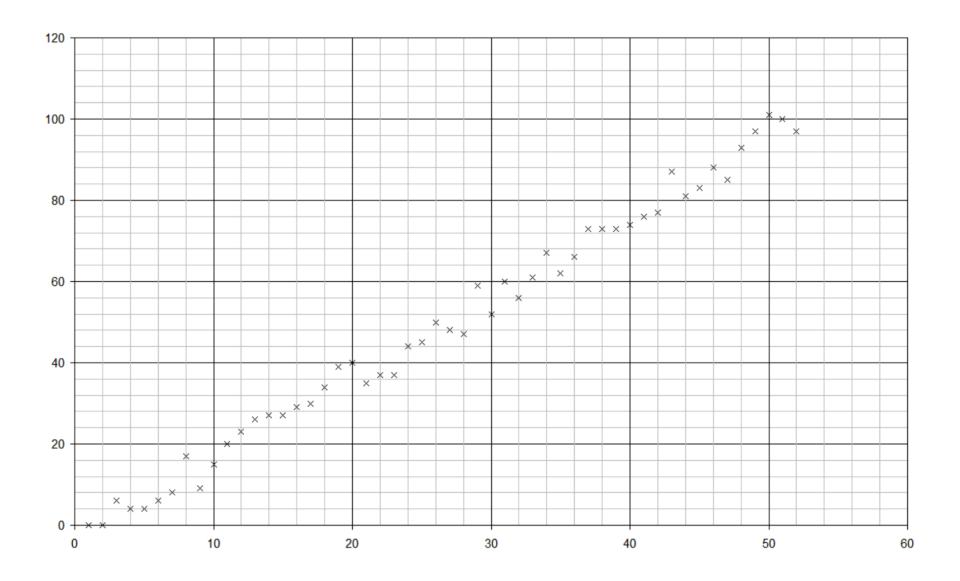
A project of the eScience Institue at the University of Washington

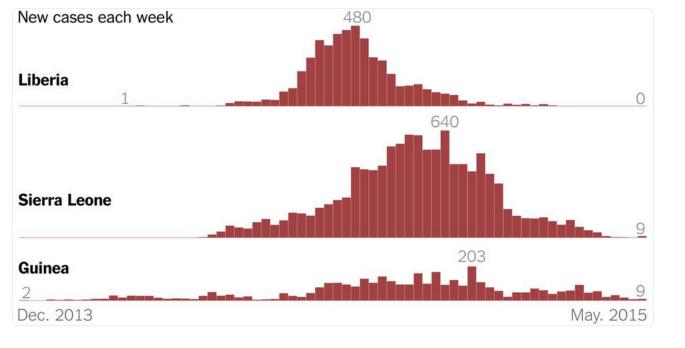
Impact versus Figure Density

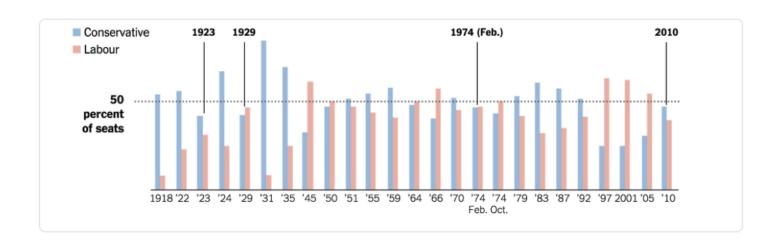


Lee et al. (2016) Viziometrics: Analyzing Visual Information in the Scientific Literature. https://www.arxiv.org/pdf/1605.04951.pdf

Gridlines

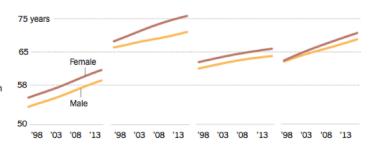


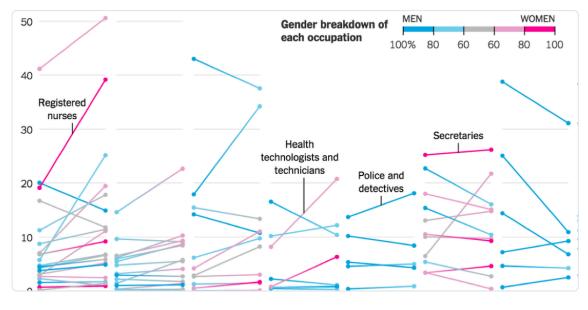


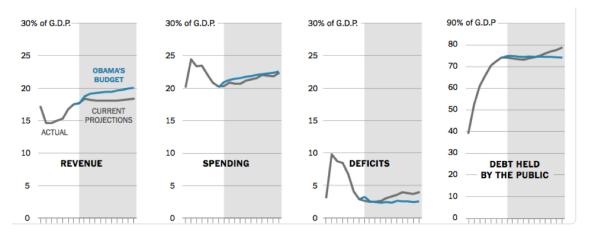


Life Expectancy

Worldwide, women are generally expected to live longer than men. This is true in Afghanistan as well. But life expectancy in Afghanistan is still well behind other countries in the region.





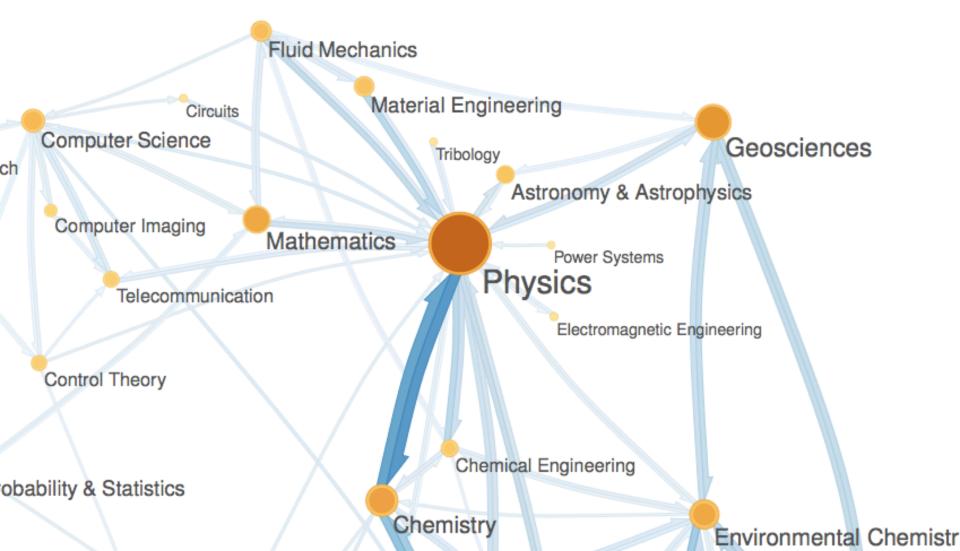


Gridline Rules

- 1) Gridlines should always be labelled.
- 2) Corollary: One should not use grid lines on any axis that lacks a scale.
- 3) If one does use grid lines, they should be ONLY be used to demarcate increments of the dependent variable.
- 4) Grid lines should be subtle elements of the background, and not draw the eye from the foreground elements.

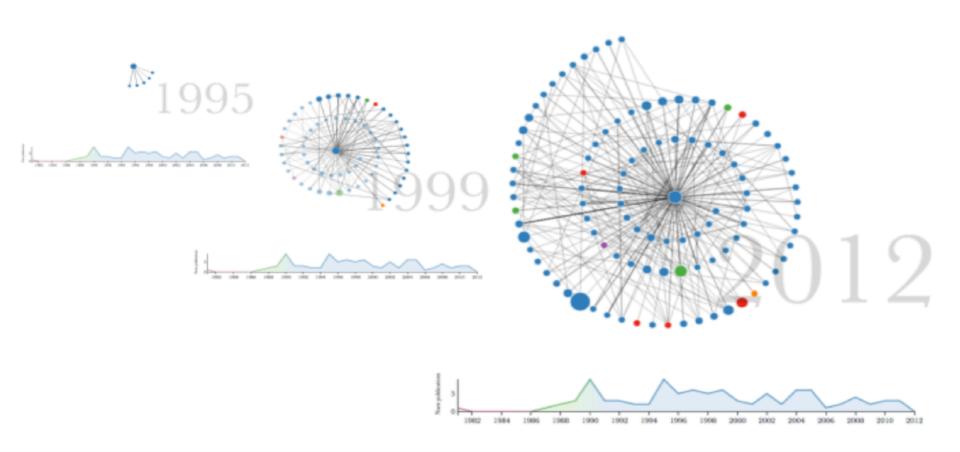
Mapping the AHA Community

Jevin West, Information School, University of Washington





Explore the data scholar.eigenfactor.org



^{*} Please use Chrome web browser for best results



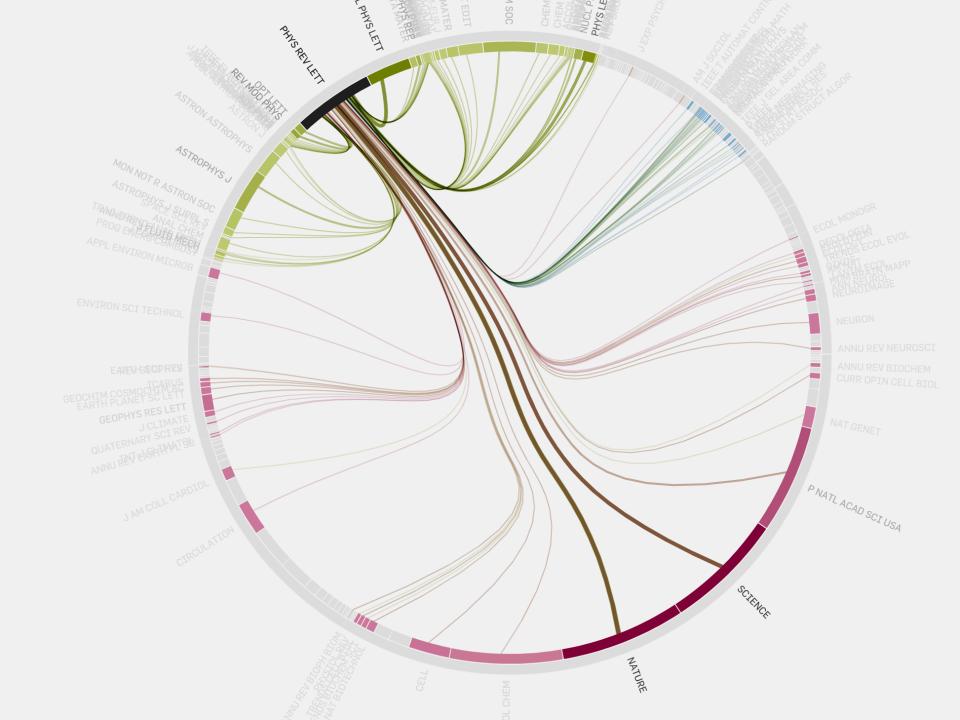
scholar.eigenfactor.org

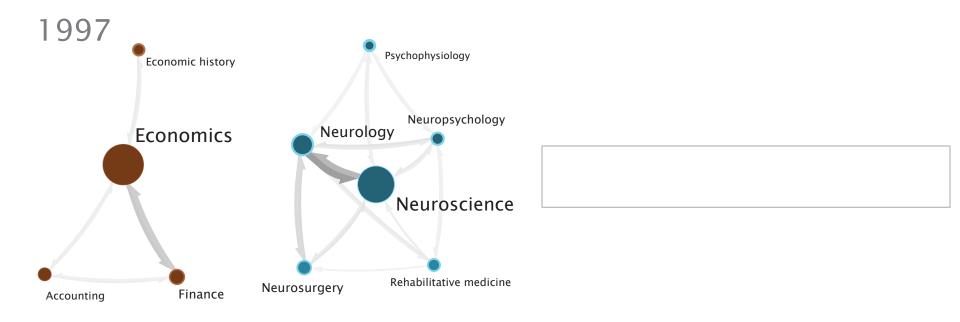
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password: 1N!kdG

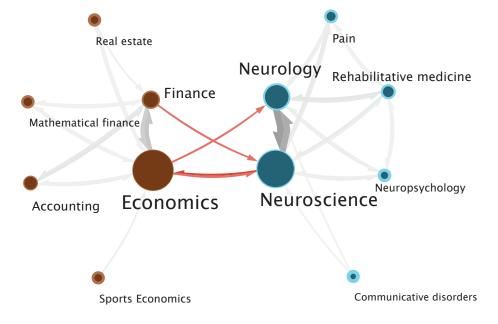
Jevin West, jevinw@uw.edu

Moving beyond single metric summaries to rich, interactive (hypothesis-generating) visualizations





2010



NEUROECONOMICS

How do we *map* the evolution of scientific disciplines?



What is my impact on science?

\$7,933,670,366







22,756 awards

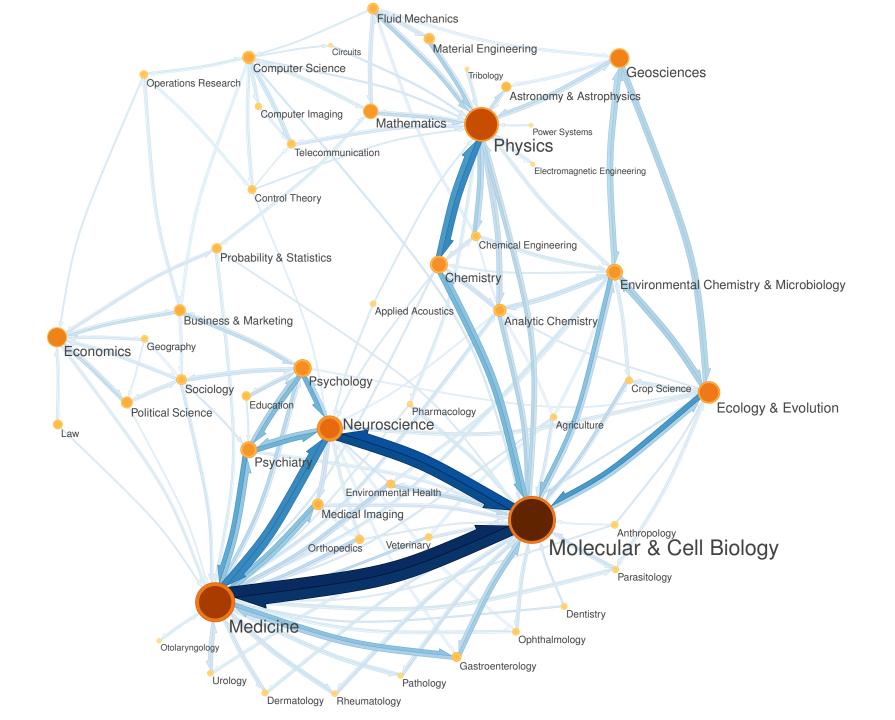
17,849 researchers

344,917 papers

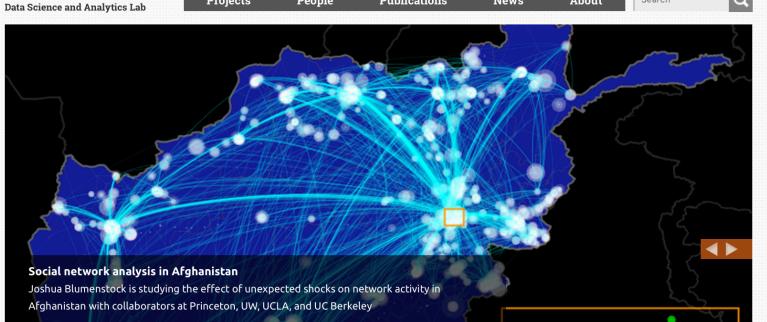
8,174,533 citations

23.7 citations/paper

2006 - 2015



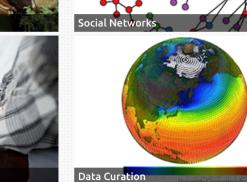
Projects People Publications News About



Research Focus Areas

Computational Social Science







Search



WHO WE ARE



What We Do



Overview

Over the course of the last decade many disciplines have evolved from recording observations in laboratory notebooks to the use of instruments capable of digitally recording many gigabytes of data in a day. This abundance of data provides unprecedented opportunities for discovery. Tapping its potential requires the application of sophisticated new computational techniques operating on large scale storage, computational and network resources. Since its creation in 2008, the eScience Institute has worked to create the intellectual and physical infrastructure needed to meet this challenge.

At the core of the eScience Institute are individuals who have proven track records in developing and applying advanced computational methods and tools to real world problems. Their task is to seek out and engage researchers across disciplines where eScience approaches are likely to have the greatest impact. To ensure that researchers have access to the necessary physical infrastructure, the Institute has undertaken coordinated planning and support for advanced local and remote computational platforms. This includes developing relationships with commercial and non-commercial service providers as well as the development of shared facilities on campus. This support extends to assistance in the preparation of select proposals where we are able to focus resources, improving their chances for success.

Search

Also in... What We Do

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Find and use the eScience Institute's virtual machines equipped with software useful for specific applications.

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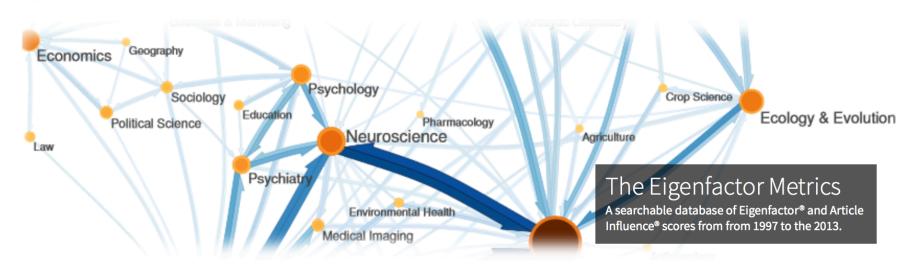
Latest eScience News

Data Science Incubation Program - Winter 2016

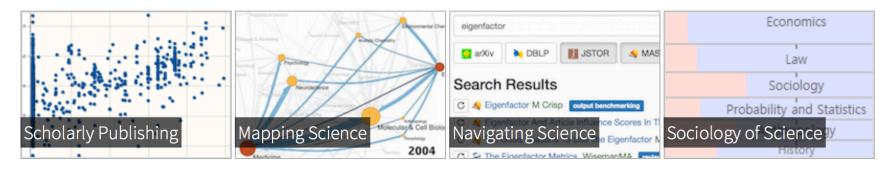
2 hours 4 min ago

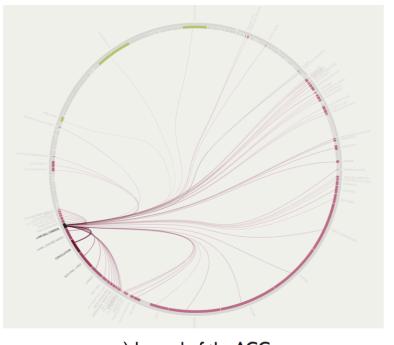
Ben Marwick On How Computers Broke Science

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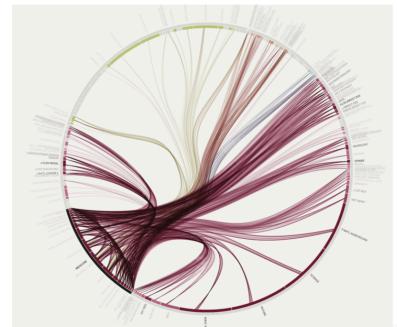


RESEARCH AREAS

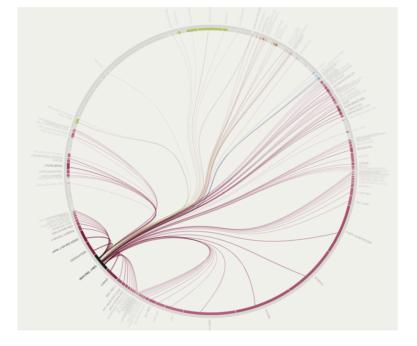




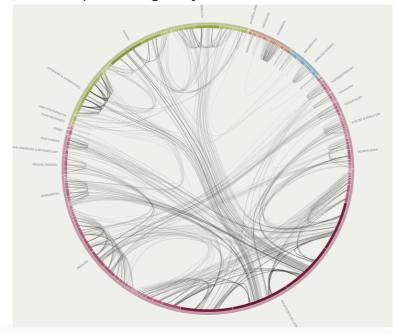
a) Journal of the ACC



c) All of Medicine



b) New England Journal of Medicine



d) All of Science

List 2: Medicine Differences in Relative Ranking (2006 Data)

List 3: Cardiac & Cardiovascular Systems and Peripheral Vascular Disease Differences in Relative Ranking (2006 Data)

		O \				,	
Impact Factor		Article Influence		Impact Factor		Article Influence	
CA-CANCER J CLIN		NEW ENGL J MED	16.82	CIRCULATION		- CIRCULATION	4.273
NEW ENGL MED		CA-CANCER J CLIN	13.94	CIRC RES		CIRC RES	3.919
LANCET		JAMA-J AM MED ASSOC	10.29	J AM COLL CARDIOL		JAM COLL CARDIOL	3.354
JAMA-J AM MED ASSOC		LANCET	8.635	EUR HEART I		ARTERIOSCL THROM VAS	2.631
I NATL CANCER I		CLIN MICROBIOL REV	5.884	ARTERIOSCL THROM VAS		EUR HEART I	2.522
ANN INTERN MED		PLOS MED	5.803	HYPERTENSION		STROKE	2.035
PLOS MED		ANN INTERN MED	5.772	ATHEROSCLEROSIS SUPP		CURR OPIN LIPIDOL	2.002
J CLIN ONCOL		I NATL CANCER I	5.473	CARDIOVASC RES		HYPERTENSION	1.792
ANNU REV MED		LANCET INFECT DIS	4.969	CURR OPIN LIPIDOL		CARDIOVASC RES	1.739
CLIN MICROBIOL REV		CIRCULATION	4.273	STROKE		J MOL CELL CARDIOL	1.661
LANCET INFECT DIS		ANNU REV MED	4.004	J THROMB HAEMOST		TRENDS CARDIOVAS MED	1.563
CIRCULATION		ANNU REV NUTR	4.002	MOL CELL CARDIOL		- J THROMB HAEMOST	1.544
ANNU REV NUTR		CIRC RES	3.919	TRENDS CARDIOVAS MED		J THORAC CARDIOV SUR	1.450
CIRC RES		HEALTH TECHNOL ASSES	3.665	CURR OPIN NEPHROL HY		HEART	1.388
I AM COLL CARDIOL		I CLIN ONCOL	3.475	I HYPERTENS		AM HEART I	1.339
BRIT MED I		J AM COLL CARDIOL	3.354	CURR VASC PHARMACOL		HEART RHYTHM	1.302
AM J RESP CRIT CARE		BRIT MED J	3.287	ATHEROSCLEROSIS		HEART FAIL REV	1.256
			3.287	BASIC RES CARDIOL		ATHEROSCLEROSIS	1.210
J ALLERGY CLIN IMMUN EPIDEMIOL REV	1	ARCH INTERN MED	2.895	HEART RHYTHM	1	- AM J PHYSIOL-HEART C	1.174
CLIN PHARMACOL THER		DIABETES AM RESP CRIT CARE	2.825	AM J PHYSIOL-HEART C			1.17
DIABETES		MILBANK O	2.673	HEART		J HYPERTENS CARDIOL CLIN	1.117
ARCH INTERN MED		ARTERIOSCL THROM VAS	2.673	THORAC CARDIOV SUR		AM J CARDIOL	1.110
	7 //						
DIABETES CARE		ARCH DIS CHILD-FETAL	2.626	AM HEART J	\\ X X/	J CARDIOVASC MAGN R	1.105
ANN SURG		AM J EPIDEMIOL	2.534	CURR PROB CARDIOLOGY		J VASC SURG	1.068
J AM SOC NEPHROL		EUR HEART J	2.478	SHOCK	V X	THROMB HAEMOSTASIS	1.043
EUR HEART J	XX	ANN SURG		J VASC SURG	\wedge	J CARD FAIL	
PHARMACOGENETICS	\bigvee	DIABETES CARE	2.475	J CARDIOVASC ELECTR	X / / A	ATHEROSCLEROSIS SUPP	0.9876
ARTERIOSCL THROM VAS	TAA	ANNU REV PUBL HEALTH	2.472	EUR J HEART FAIL	$A \times A \times$	PROG CARDIOVASC DIS	0.9315
CAN MED ASSOC J	JA TO	EPIDEMIOL REV	2.307	HYPERTENS RES	I XX XX I/	CURR OPIN NEPHROL HY	0.9142
ANNU REV PUBL HEALTH	\times	EMERG INFECT DIS	2.224	AM J HYPERTENS	XXX XX	MICROCIRCULATION	0.9114
AM J TRANSPLANT	$V \setminus V \setminus V \setminus V$	J AM SOC NEPHROL	2.211	AM J CARDIOL		J CARDIOVASC ELECTR	0.884 0.8725
MILBANK Q HUM REPROD UPDATE	1 / / / / X	AM J CLIN NUTR		J HUM HYPERTENS J HEART LUNG TRANSPL	$\times \times \times \times \times$	AM J HYPERTENS	0.8443
	X \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	AIDS	2.198	HEART FAIL REV	XXXXXX	- J HEART LUNG TRANSPL	0.8256
J BONE MINER RES CRIT CARE MED		J ALLERGY CLIN IMMUN I BONE MINER RES	2.134	THROMB HAEMOSTASIS	$\times \times $	BASIC RES CARDIOL EUR I HEART FAIL	0.8256
	LITAIX		2.117		$X \setminus /// \setminus X$		0.8135
AM J CLIN NUTR CLIN INFECT DIS	TXXX	CLIN INFECT DIS CAN MED ASSOC J	2.097	CURR OPIN CARDIOL J CARD FAIL	$\times \setminus \times / / \setminus$	CURR VASC PHARMACOL ANN THORAC SURG	0.8124
	T \ /\ \ / / / / /		2.077	SEMIN THROMB HEMOST		J VASC INTERV RADIOL	0.8106
THORAX HYPERTENSION	T / W // \	THORAX HUM REPROD UPDATE	2.077	NAT CLIN PRACT CARD	$\times \mathcal{M} \times \mathcal{M} $	SHOCK	0.7737
ATHEROSCLEROSIS SUPP	\\ X \\\/	INFECT DIS	2.03	I VASC RES	XXX		0.7577
CARDIOVASC RES	\ \X / \W /	STROKE	2.049	PROG CARDIOVASC DIS	\times	NAT CLIN PRACT CARD I ENDOVASC THER	0.7486
I CLIN ENDOCR METAB	N X X	MED CARE	2.033	MICROVASC DIS	1	EUR I CARDIO-THORAC	0.7486
CURR OPIN LIPIDOL		CURR OPIN LIPIDOL	2.002	J NUCL CARDIOL	X XXV	CEREBROVASC DIS	0.7366
AIDS	AXIA	INT J EPIDEMIOL	1.980	MICROCIRCULATION	\times \times \times \times \times	J VASC RES	0.715
CLIN CHEM		EPIDEMIOLOGY	1.976	J VASC INTERV RADIOL	X/VX	CURR OPIN CARDIOL	0.6874
STROKE		AM J BIOETHICS	1.906	ENDOTHELIUM-J ENDOTH	X X X X X X X X X X X X X X X X X X X	EUR J VASC ENDOVASC	0.6705
PHARMACOGENET GENOM	\times	DIABETOLOGIA	1.89	ANN THORAC SURG	X\ XXX	CARDIOVASC PATHOL	0.6496
I INFECT DIS	1/W/ / HAT	AM J PUBLIC HEALTH	1.881	INT J CARDIOL	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	MICROVASC RES	0.624
ALLERGY	// WATER WA	I CLIN ENDOCR METAB	1.872	REV ESP CARDIOL	X DV \	SEMIN THROMB HEMOST	0.6239
HEALTH TECHNOL ASSES	// AX \ \XX\	AM I MED	1.829	EUR J VASC ENDOVASC	-XXX	CURR HYPERTENS REP	0.6018
DIABETOLOGIA	T / N X X	B WORLD HEALTH ORGAN	1.816	I ENDOVASC THER	/ XX/ TX/	J CARDIOVASC PHARM T	0.5659
AM J EPIDEMIOL		PHARMACOGENETICS	1.805	CIRCI	/ XX XX	INT J CARDIOL	0.562
ONCOLOGIST	/ / XXXX/\	HYPERTENSION	1.792	EUR J CARDIO-THORAC		EUR J CARDIOV PREV R	0.5586
ANN ONCOL		CLIN CHEM	1.787	RESP MED		- RESP MED	0.5499
MEDICINE	-////////////////////////////////////	CLIN PHARMACOL THER	1.785	THROMB RES		THROMB RES	0.549
I THROMB HAEMOST		MEDICINE	1.780	CEREBROVASC DIS		I HUM HYPERTENS	0.5461
EMERG INFECT DIS	X // X// \	LUNG CANCER	1.758	CURR HYPERTENS REP		I HEART VALVE DIS	0.5361
EUR RESPIR J	. × / // //	CARDIOVASC RES	1.739	EUR J CARDIOV PREV R		JAM SOC ECHOCARDIOG	0.5171
B WORLD HEALTH ORGAN	$\times \wedge / \wedge \rightarrow$	PEDIATRICS	1.733	CARDIOVASC PATHOL		CATHETER CARDIO INTE	0.5131
PEDIATRICS	X // /	AM J TRANSPLANT	1.712	KIDNEY BLOOD PRESS R		CARDIOLOGY	0.4743
ANTIVIR THER	/\ X/ \	HEALTH AFFAIR	1.695	NUTR METAB CARDIOVAS		CURR PROB CARDIOLOGY	0.465
I MOL CELL CARDIOL		J MOL CELL CARDIOL	1.661	CARDIOLOGY	X	VASC MED	0.4613
CURR OPIN INFECT DIS	/ X/ \ \	AM J PREV MED	1.637	J CARDIOVASC MAGN R		ANN VASC SURG	0.4502
KIDNEY INT	/ //X \\	J GEN INTERN MED	1.598	CARDIOVASC DRUG REV	A	I CARDIOVASC PHARM	0.4498
ARCH DIS CHILD-FETAL	/ // \	JAIDS-J ACQ IMM DEF	1.589	I AM SOC ECHOCARDIOG		ENDOTHELIUM-J ENDOTH	0.4372
J INTERN MED		CANCER EPIDEM BIOMAR	1.572	J CARDIOVASC PHARM		I NUCL CARDIOL	0.4315
BREAST CANCER RES TR		HIV MED	1.563	CATHETER CARDIO INTE	7	HYPERTENS RES	0.4223
ANN MED		THROMB HAEMOST	1.544	CORONARY ARTERY DIS	4	EUROPACE	0.3904
CANCER	1	ANN BEHAV MED	1.51	EUR HEART SUPPL		CARDIOVASC DRUG THER	0.3865
AM J MED	// /	CANCER	1.505	EUROPACE	+	HYPERTENS PREGNANCY	0.384
INT J EPIDEMIOL	/ /	HEALTH SERV RES	1.488	CARDIOL CLIN		CURR CONTR TRIALS C	0.3809
DRUGS	/	EUR RESPIR J	1.483	BLOOD PRESS MONIT		CORONARY ARTERY DIS	0.3804
INTENS CARE MED	/	BONE	1.482	CARDIOVASC DRUG THER		CARDIOVASC INTER RAD	0.3689
CANCER TREAT REV	/	AM J PHYSIOL-ENDOC M	1.478	ANN NONINVAS ELECTRO		CAN J CARDIOL	0.3513
EPIDEMIOLOGY	/	CRIT CARE MED	1.455	CURR CONTR TRIALS C		NUTR METAB CARDIOVAS	0.3434



What is my impact on science?

\$7,933,670,366



The H-index impact on science...



Title 1-20

explanations

J Leskovec, J Kleinberg, C Faloutsos

The dynamics of viral marketing

J Leskovec, LA Adamic, BA Huberman ACM Transactions on the Web (TWEB) 1 (1), 5

J Leskovec, L Backstrom, J Kleinberg

J Leskovec, J Kleinberg, C Faloutsos

E Cho, SA Myers, J Leskovec

Cost-effective outbreak detection in networks

Meme-tracking and the dynamics of the news cycle

Graph evolution: Densification and shrinking diameters

ACM Transactions on Knowledge Discovery from Data (TKDD) 1 (1), 2

J Leskovec, A Krause, C Guestrin, C Faloutsos, J VanBriesen, N Glance Proceedings of the 13th ACM SIGKDD international conference on Knowledge ...

Proceedings of the 15th ACM SIGKDD international conference on Knowledge ...

Proceedings of the 17th ACM SIGKDD international conference on Knowledge ...

Friendship and mobility: user movement in location-based social networks

Community structure in large networks: Natural cluster sizes and the absence

Jure Leskovec

Graphs over time: densification laws, shrinking diameters and possible

Proceedings of the eleventh ACM SIGKDD international conference on Knowledge ...

Professor of Computer Science, Stanford University Data mining, Social Network Analysis, Information Networks Verified email at cs.stanford.edu - Homepage

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Year	
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2007	
2007	
2009	
2007	

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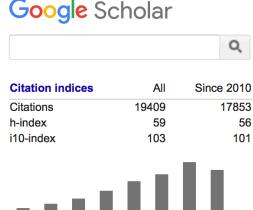
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885

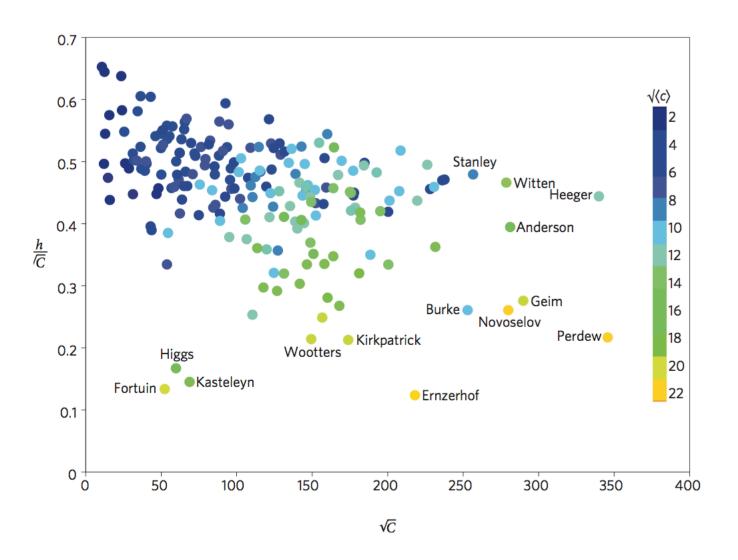
853

728

2011



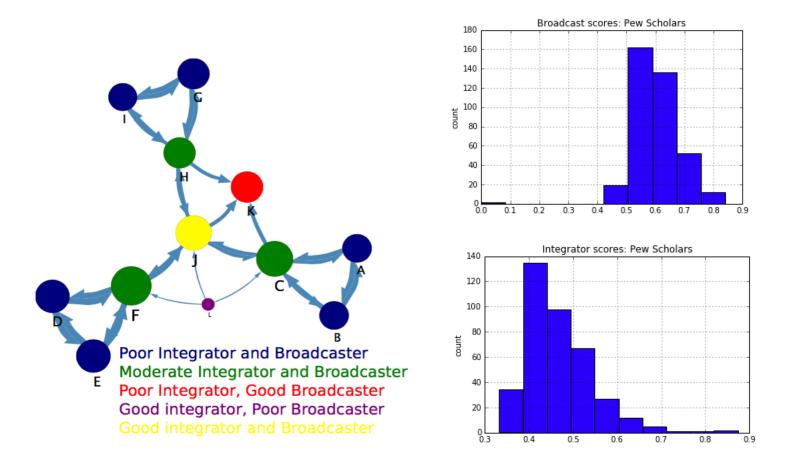
An evisceration of the H-index...



S. N. Dorogovtsev and J. F. F. Mendes (2015) Nature Physics



Measuring Interdisciplinarity



Bergstrom, CT, Foster, J, Portenoy, J, A. Misra, West, JD. (2016). Measuring interdisciplinarity without subject categories. (in prep)

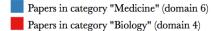


Visualizing Scholarly Influence Over Time

Influence of Pew Scholars

Roberta A. Gottlieb

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Papers in category "Chemistry" (domain 5)

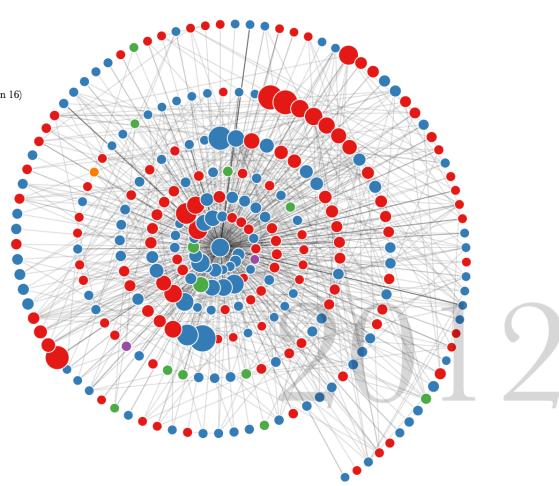
Papers in category "Unknown" (domain 0)

Papers in category "Agriculture Science" (domain 16)

Roberta A. Gottlieb



Pew Scholar 1997





scholar.eigenfactor.org

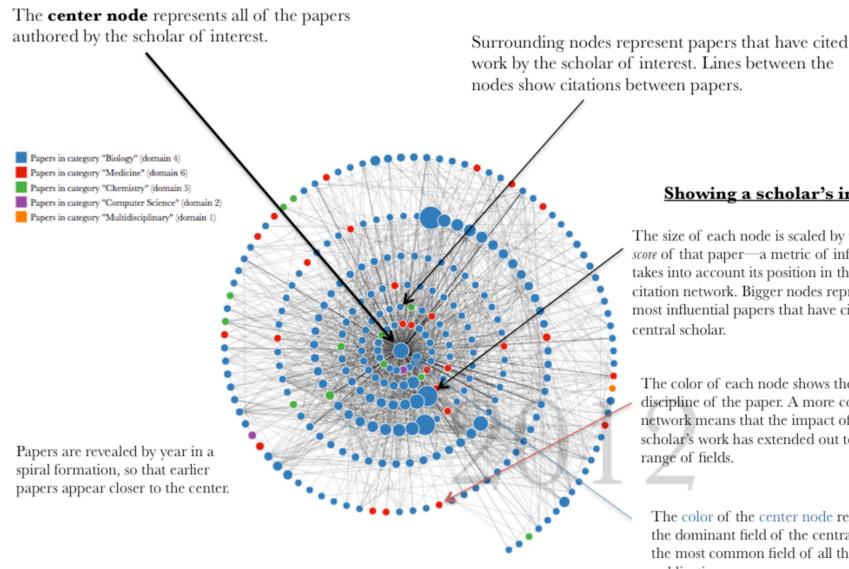
username: PewScholar

password: 1N!kdG

Jevin West, jevinw@uw.edu



Pew Influence



Showing a scholar's influence

The size of each node is scaled by the Eigenfactor score of that paper—a metric of influence that takes into account its position in the total citation network. Bigger nodes represent the most influential papers that have cited the central scholar.

The color of each node shows the academic discipline of the paper. A more colorful network means that the impact of the central scholar's work has extended out to a wider range of fields.

The color of the center node represents the dominant field of the central scholarthe most common field of all the scholar's publications.



Citation Data



49 million scholarly publications

260 million citations

354 Pew Scholars

22,000 publications

62 publications/scholar

Pew EF 3 times the average EF

field classification







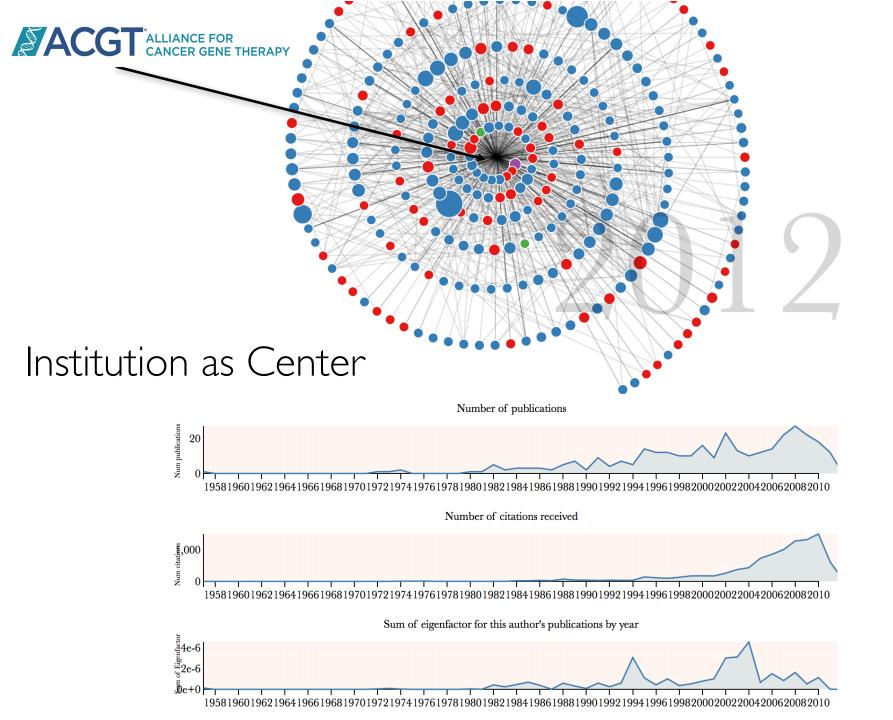
~ 37 citations/paper

median citations = 11

Science

~ 5 citations/paper

median citations = 0



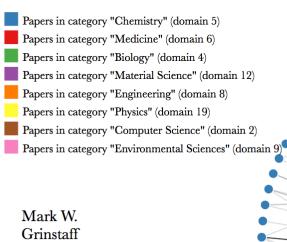


Visualizing Scholarly Influence Over Time

Influence of Pew Scholars

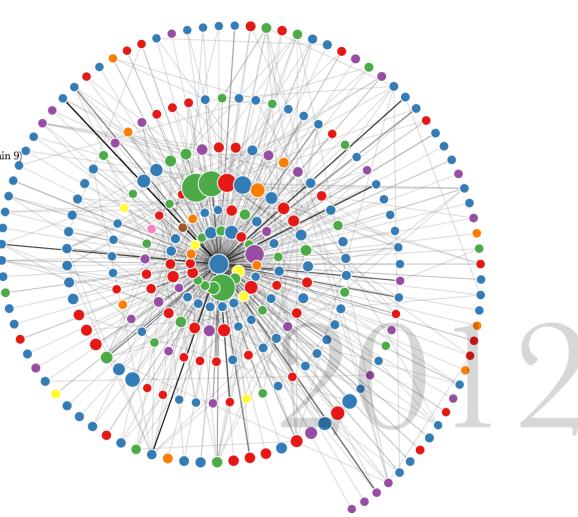
Mark W. Grinstaff

Learn More





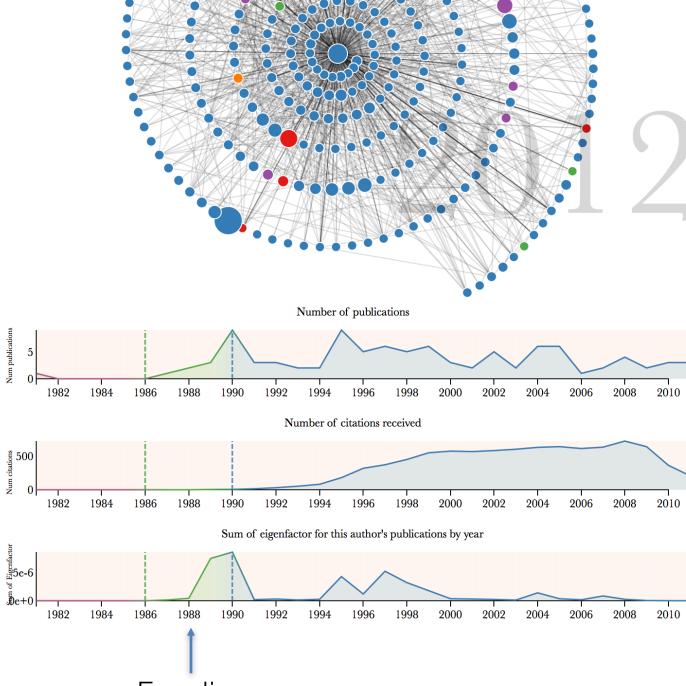
Pew Scholar 1999



Philip A. Hieter



Pew Scholar 1986



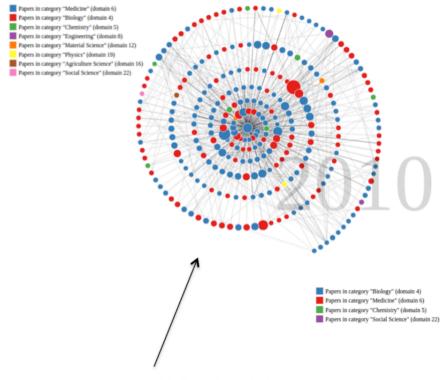
Funding



Visualizing Interdisciplinarity



Jason Portenoy



A more sparse network indicates fewer citations between papers shown in the network. This could be a result of the central scholar having impact across a wider set of academic communities.

A denser network means that the papers that cite the central author also tend to

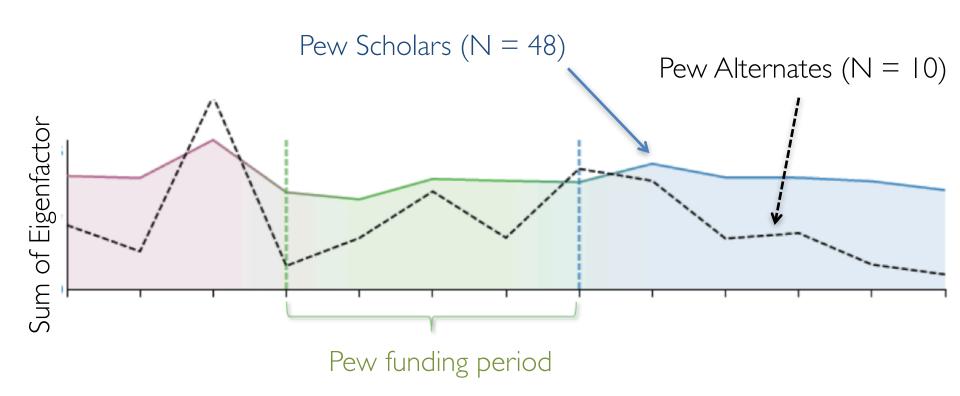
cite each other.

scholareigenfactor.org

The Pew Impact...

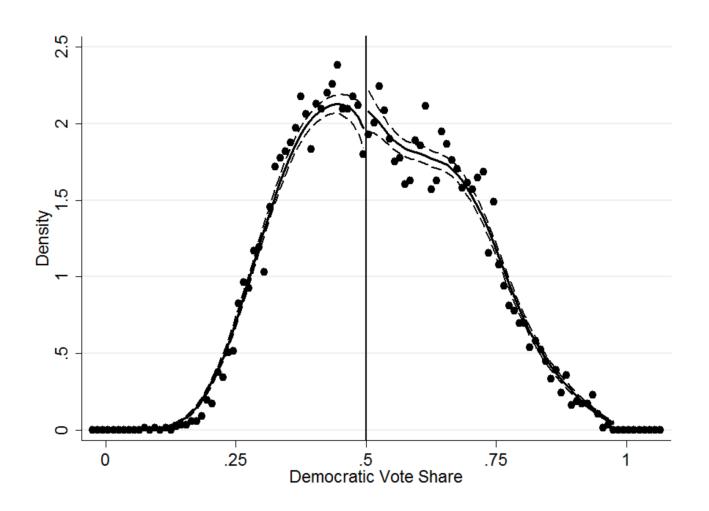


Comparing Alternates



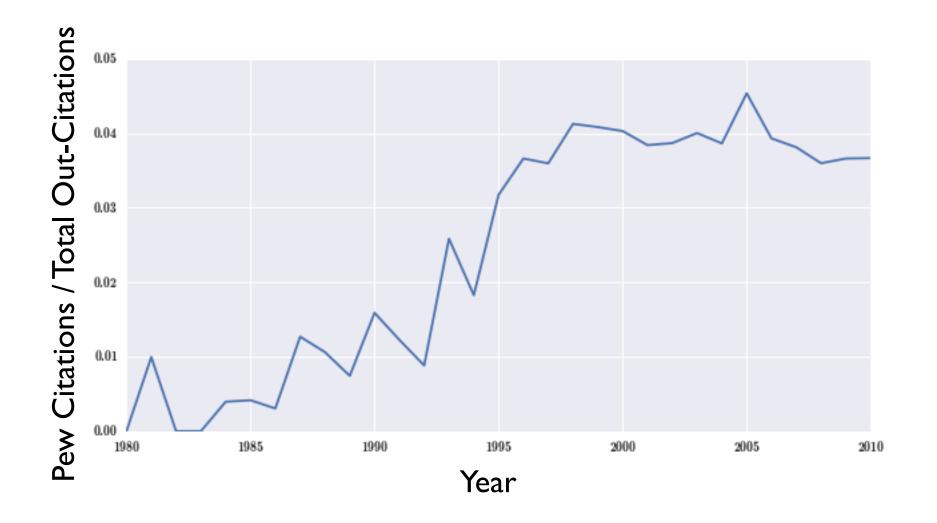
^{*} Includes scholars and alternates from cohort years: 1997, 1999, 2000, 2001, 2002

Regression discontinuity design





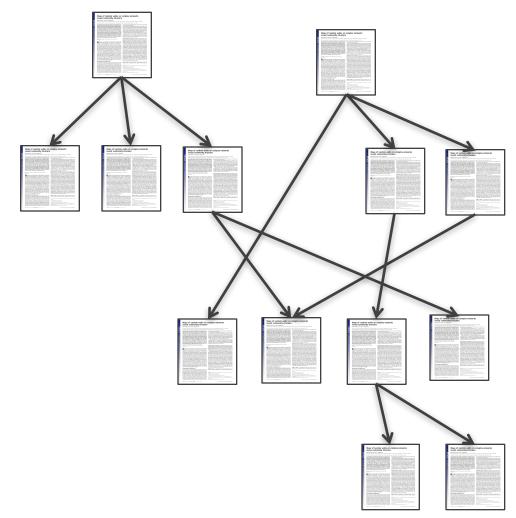
Community Effect



Moving beyond single metric summaries to rich, interactive (hypothesis-driven) visualizations



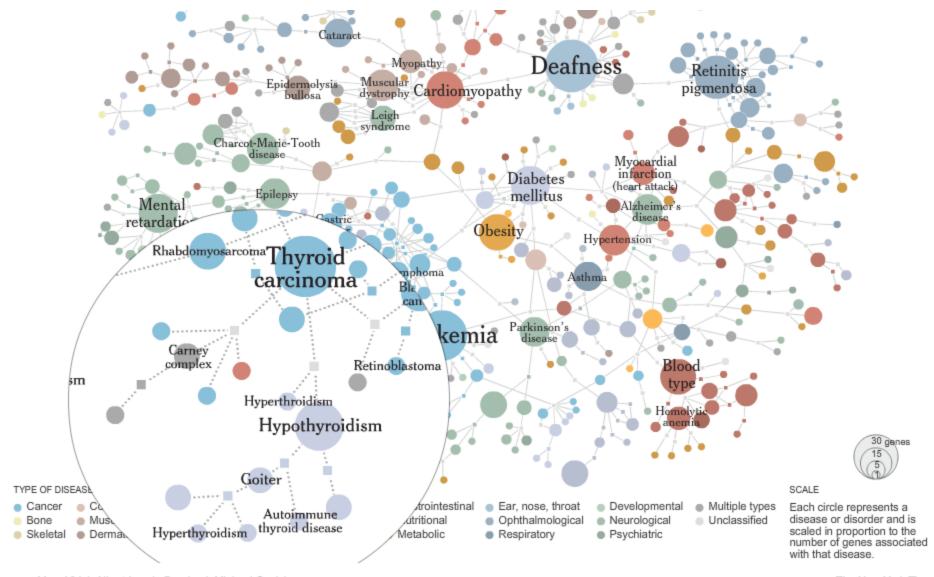
Citations form a vast network





de Solla Price, Science (1965)

Disease association network





The Scholarly Graph













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The Scholarly Graph

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Years: 1600 - 2016

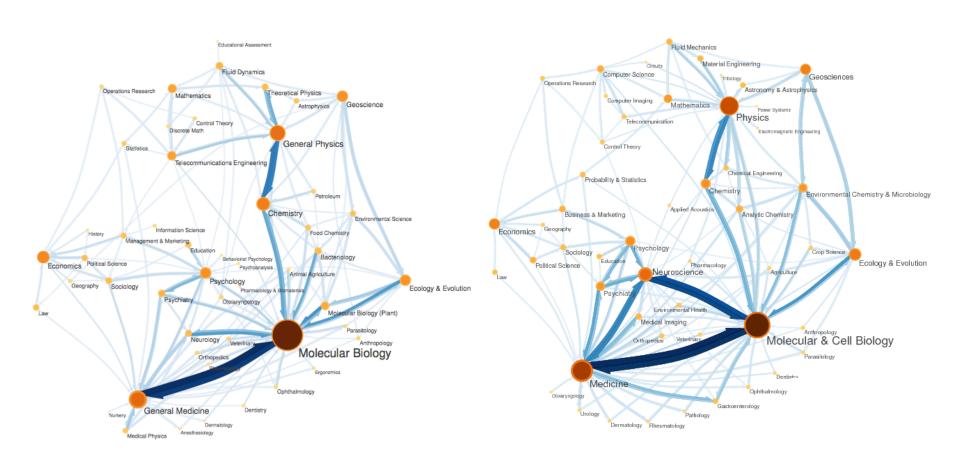




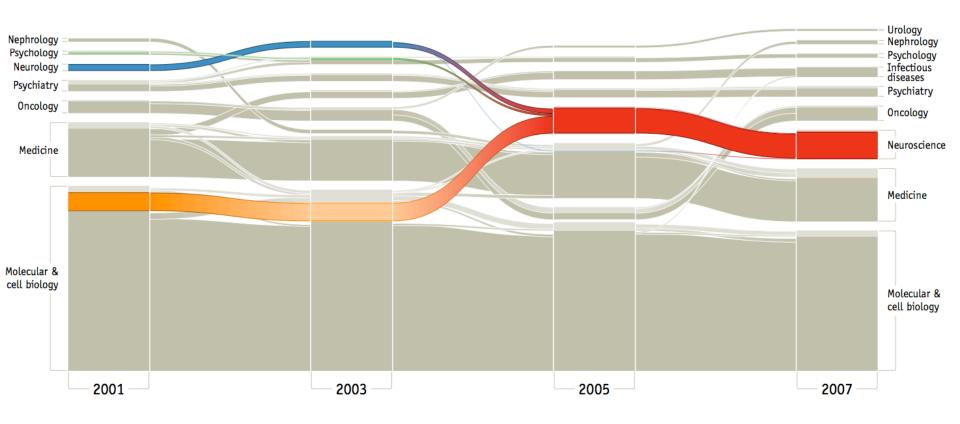
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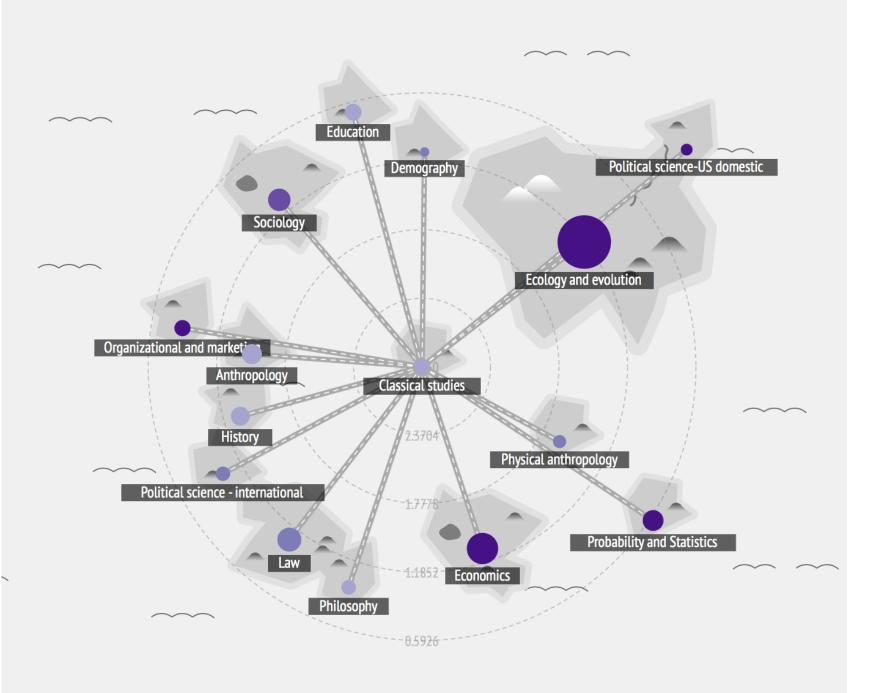
The map equation

$$L(\mathsf{M}) = q_{\curvearrowright} H(\mathcal{Q}) + \sum_{i=1}^{m} p_{\circlearrowleft}^{i} H(\mathcal{P}^{i})$$

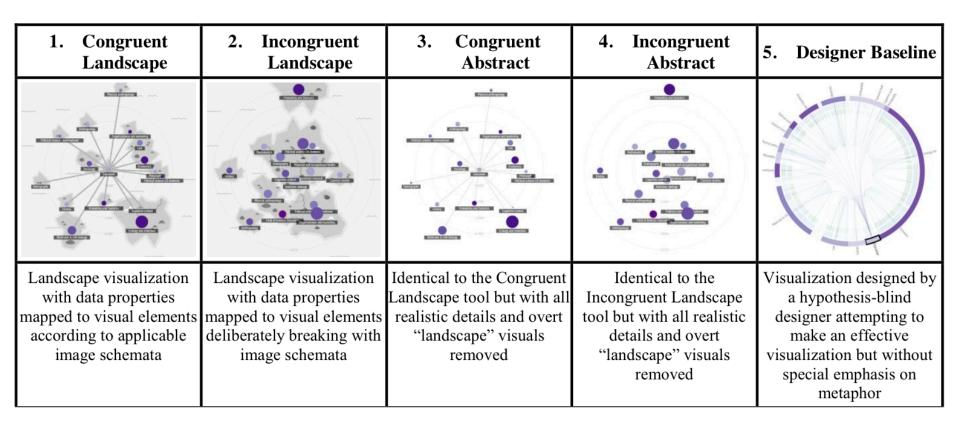


Citation networks over time





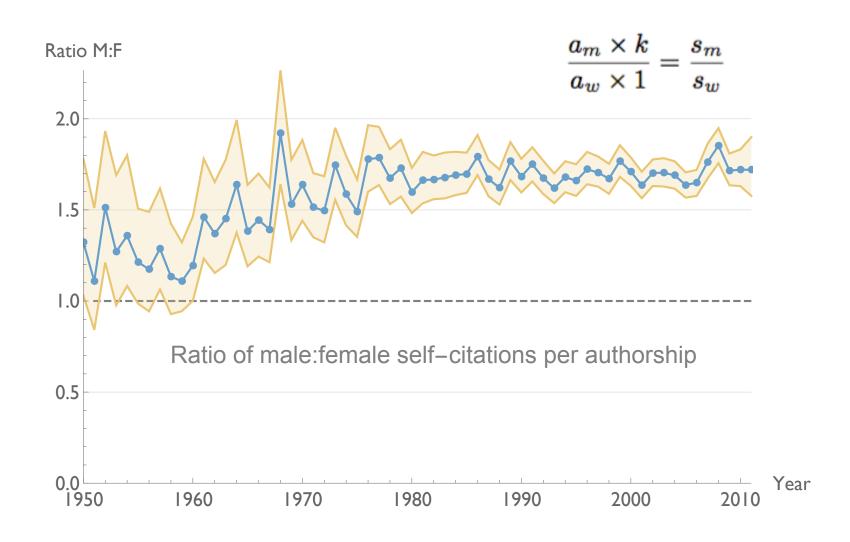
Navigating Hierarchical Knowledge Networks



Moving beyond single metric summaries to rich, interactive (hypothesis-driven) visualizations

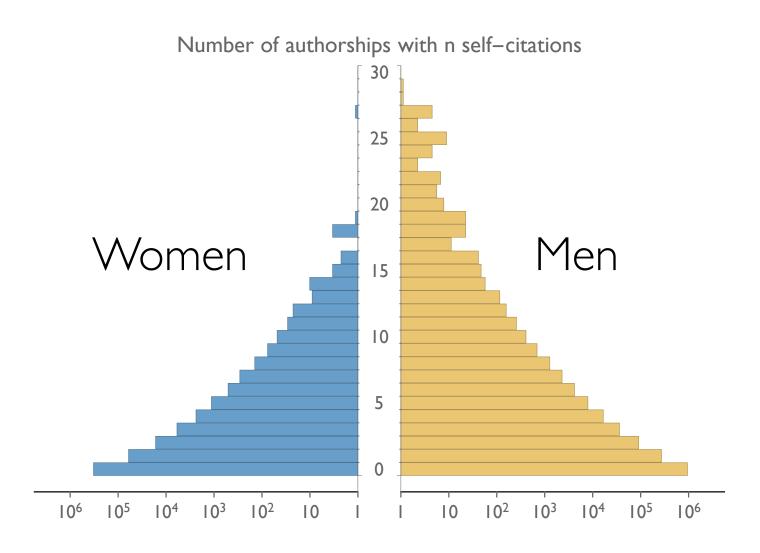


Self-citation over time

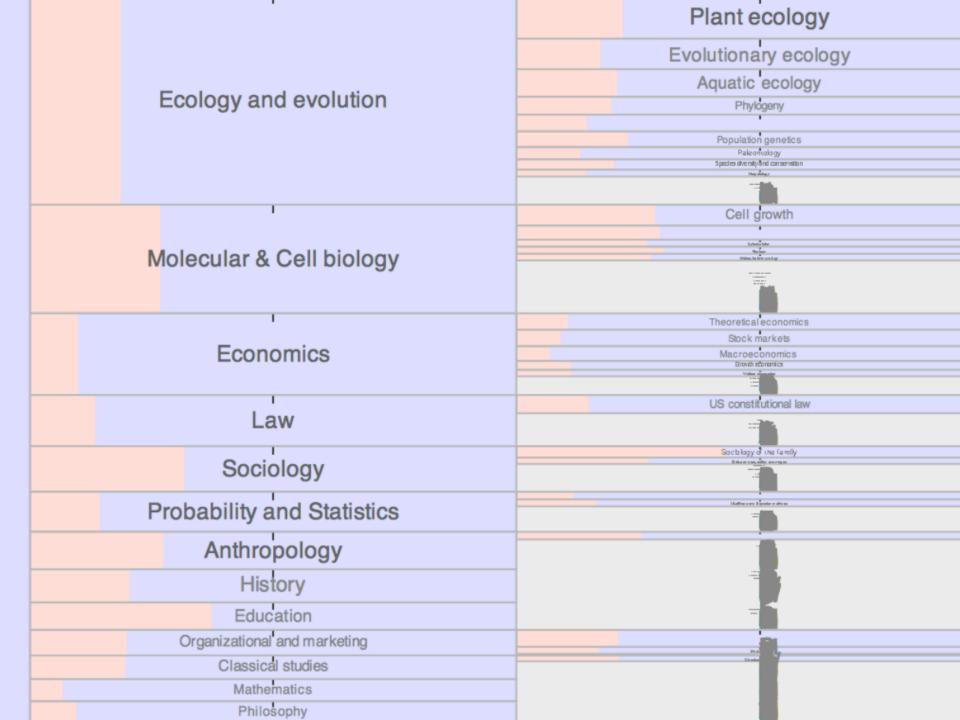




Gender and Self Citation



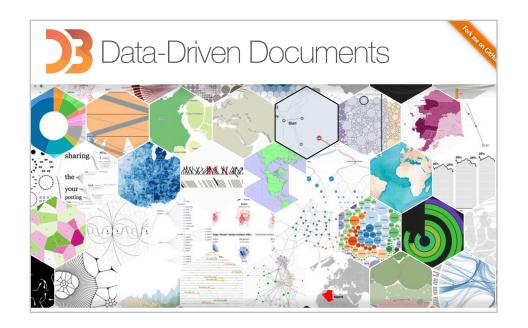
King, M et al. (2016) Men set their own cites high: Gender and self-citation across fields and over time. (in prep)

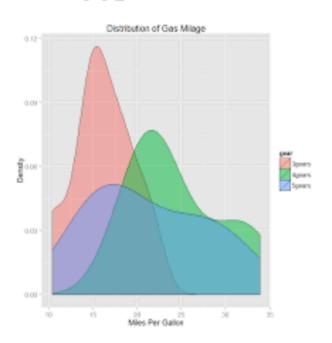






ggplot in R



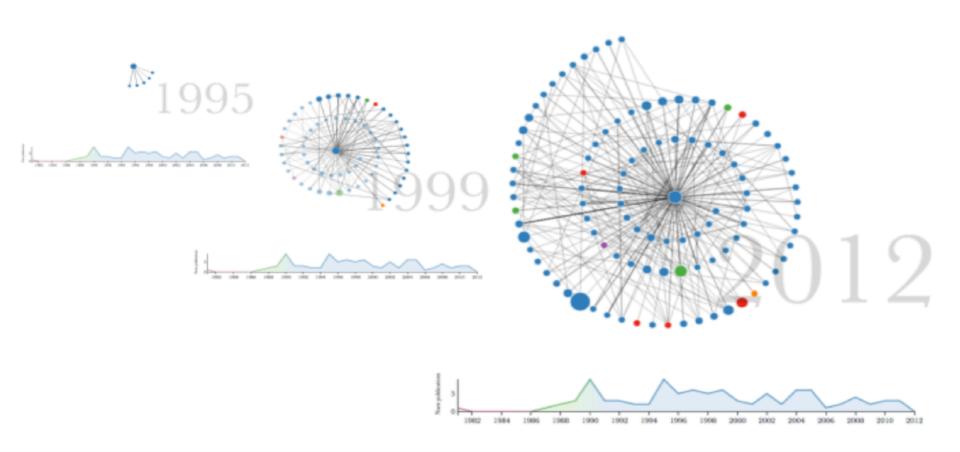


Summary

- Study the *Science of Science* and use visualizations for exploring questions
- Ask questions about the origin and evolution of ideas and fields, interdisciplinarity, impact assessment and sociology of science
- Single metrics to interactive visualization
- Building statistical and visualization tools that improve navigation, make relevant connections and facilitate knowledge discovery
- Tools: R, python, D3
- Challenges: scaling, mechanism
- Eigenfactor.org, Viziometrics.org, Scholar.eigenfactor.org



Explore the data scholar.eigenfactor.org



^{*} Please use Chrome web browser for best results



scholar.eigenfactor.org

username: PewScholar

password: 1N!kdG

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