

# Annual Report October 1994 to September 1995

This has been the busiest year in the history of the journal. The total number of papers submitted to *Thorax* has increased by 20% over the last year to a record number of 872 manuscripts. The journal has attempted to cope with this increase in work by printing more pages than in previous years. We now print up to 104 pages per issue and hopefully next year the number will increase yet again.

Table 1 shows the articles submitted by category over the last four years. It is particularly gratifying that the major increase has been in original papers and short papers rather than case reports. The short papers have proved to be a particularly popular means of communication for new or preliminary work and negative studies. We have managed to maintain three editorials per issue, including an increasing number of directed editorials, in an attempt to highlight interesting or potentially important manuscripts.

Table 2 shows the geographical distribution of submissions which confirms that the journal continues to attract manuscripts from all over the world.

The acceptance rate for original full papers has increased a little during the last 12 months to 50.3% and for short papers it is 49%, whilst for case reports it remains at 19%.

Table 3 summarises the decision times for papers submitted during the current year on which a decision to accept subject to revision or to finally accept have been made. The median time for both original papers and case reports is virtually identical to last year, but the median time to a final decision for original papers is twice as long as last year. This is due to the fact that the workload has

Table 1 Articles submitted by category

	1992	1993	1994	1995
Original papers	370	415	410	493
Case reports	204	219	242	252
Short papers	-	-	14	48
Editorials	27	44	34	38
Review series	16	24	6	15
Supplement articles	-	-	12	16
Case report commentaries	-	-	3	7
Scientific updates	4	-	-	-
Science matters	-	-	-	3
Total	621	702	721	872

Table 2 Geographical distribution of submissions

	1992 (n=621)	1993 (n=702)	1994 (n=721)	1995 (n=872)
UK	277	257	253	291
Western Europe	167	179	220	266
Spain	35	40	50	46
The Netherlands	30	27	35	51
Italy	9	21	28	38
France	17	18	19	27
Turkey	15	15	15	13
Israel	15	10	15	20
Eire	10	12	13	10
Switzerland	8	7	12	10
Germany	10	13	11	16
Belgium	7	9	9	17
Greece	3	3	9	7
Austria	7	4	3	7
Portugal	1	0	1	3
Malta	-	-	-	1
USA and Canada	48	81	100	101
Japan	37	44	47	65
Australasia	18	32	32	38
Scandinavia	25	38	27	36
Asia	32	35	22	34
Eastern Europe	6	9	6	7
South America	1	9	5	14
Africa	4	6	5	7
Middle East	6	12	4	13

Table 3 Decision time for submitted papers, 1994-5

	Original papers	Case reports
Number	363	215
Median time to first decision (days)	72	59
Papers resubmitted (n)	120	19
Median time to final decisions (days)	58	6

increased to such an extent that the Associate Editors are being asked to become much more involved in the editing of returned manuscripts. The size of the task has become too large for the Editor to handle himself.

The impact factors for the thoracic journals have hardly changed in 1994. *Thorax* has dropped slightly from 2.4 to 2.2 but remains just ahead of the *European Respiratory Journal* in third position behind the *American Journal of Respiratory and Critical Care Medicine* and the "Red" journal.

1995 has seen several innovations. The case reports are now usually accompanied by a commentary to try to improve their educational value. The first *Year In Review* supplement was published in September and it is very much hoped that this will be regarded as a valuable addition to the journal and will continue to be produced in the years to come. The BTS abstracts will also be published as a supplement for the first time in December and this will allow more pages to be published within the main body of *Thorax* itself.

## The future

Future changes to improve the journal include a new cover design, with the contents appearing inside the journal.

A new series entitled "Science Matters" will start early next year. These articles are by leading clinical scientists and explain advances that should be made familiar to the general respiratory reader. This series is now well under way and we have contributions commissioned for the next two years.

At the time of writing this report a new Editor is being sought. The experience of being the Editor of this prestigious journal has been most rewarding. Running the journal has been at times exciting, stimulating, frustrating and utterly relentless. However, the reward of seeing an issue produced at the beginning of each month has been the ultimate satisfaction. The journal has grown strongly over the last few years and looks secure both in terms of content and profit income. No one should underestimate the enormous amount of work that goes into making a journal successful, and I would like to express my thanks once again to all the Associate Editors for putting up with my continuing demands on their time. To Angela Betchley, the Editorial Assistant, I have to express a very large debt of gratitude for her quiet and efficient methods of running the journal, for dealing with all the technical matters so ably, and for shielding me from many of the day to day chores that running a journal entails. It would not have been possible to have enjoyed the Editorship so much without her help and encouragement. Finally I wish the next Editor(s) the very best of good fortune in taking this excellent journal onwards.

The reviewers who have made their own important contributions to the peer review system that is the lifeblood of the editorial process are gratefully acknowledged on page 1328.

STEPHEN SPIRO  
Editor