From the Editors and Publisher

S VIEWED FROM THE EDITORIAL CHAIR, IT IS certainly the case that the years move forward with increasing speed. This issue marks the start of yet another volume, our twelfth. With this introduction, we can report significant progress in the development of the Journal, progress which will continue apace through the coming year. We have to start, however, with more sombre news. It is with great sorrow that, in this issue, we report the sudden and unexpected death of one of the founding members of our Editorial Board - Gerd Hausdorf. Elsewhere in these pages you will find an obituary prepared by Shakeel Qureshi and Michael Tynan, who knew Gerd well. We take this opportunity to record our own distress at the sad event of Gerd's death. Some of our colleagues pass on after distinguished and long careers, and we are able to record our debt and gratitude to these pioneers in our obituaries. Most of the obituaries we publish record such achievements. Indeed, in our next issue we will carry two more such appreciations. This is because, in recent months, we have lost two significant figures from European Paediatric Cardiology. Hamish Watson was one of the founding fathers of the European Assocation, while Anna Devloo-Blanquart was unequivocally the founding mother of our specialty in Europe. The loss of Gerd Hausdorf, however, is much more immediate. Gerd was reaching the peak of his career. He was a true innovator of interventional cardiology, recognised as such not only in Europe but throughout the World. Only recently had he moved from Hannover to Gottingen, and was a lynchpin in the future development of German paediatric cardiology. He was also a constant and enthusiastic support of the Journal. He will be sorely missed. We offer our own condolences to his family, and to his close colleagues and pupils, who surely will miss him most.

On a less sad note, we can also report that the preceding year has been very good for the Journal. The World Congress in Toronto proved to be a real "shop window". We were able to show our wares at our booth, to offer the opportunity for many of you to meet our publishers, and also to attract many new subscriptions. We also took the opportunity to gather together the Editorial Board. They endorsed the future strategy for the Journal as set before them by the editorial team, and in addition offered several helpful suggestions for new initiatives. We are

now gratified that our paid subscription base is very close to 500, the numbers of subscribers nearly doubling since the Journal was acquired by Greenwich Medical Media. Although the growth is satisfactory, we do, of course, need many more subscribers if we are to fulfil our ambitions. But at least the trend is still upward! One-quarter of our subscribers are from the United States of America, and a further 15.7% from Japan. We are now specifically targeting those areas where we see an obvious shortfall, in particular the need to develop a subscription list in mainland China. Help from any of our readers in achieving our goal, and increasing our distribution, will be greatly appreciated. The number of manuscripts submitted continues to increase, as does the quality of the submitted material. Our impact factor, although still low, is growing apace. This factor is of great significance, not only to us as Editors, but also to you as readers and potential authors. As has been pointed out by the editorial team of Cardiovascular Research, the better the papers submitted to any Journal, the more rapid will be the rise in its impact factor. We agree. In terms of manuscripts submitted, the quality of the material permitted us, in 2001, to issue our largest volume to date, with 698 pages. Of the material published, 56% was made up of original articles, up from 50% in 2000. We also committed 19% of our pages to brief reports, this being an increase from 14% in the previous year. We will strive to continue this trend, whilst not ignoring the importance of our other features, notably review articles, continuing medical education, and the Hall of Fame. As ever, we welcome the submission of high quality manuscripts, and will continue to publish accepted articles rapidly. The quality of the Journal and its impact factor are ultimately in the hands of our authors. We are confident that they will continue to send us papers that will inform, stimulate and educate you.

Our biggest innovation for the coming year, nonetheless, will be the availability of the Journal online. This has been achieved by means of collaboration with Ingenta Catchword. Details of the arrangement are to be found towards the back of this issue.³ In addition to making the Journal available online, we will increase the use of electronic communications in the day-to-day organisation of our editorial affairs. Thus, we now encourage the submission of manuscripts electronically. Our "Instructions to

Authors" are now modified so as to give appropriate guidance. We are increasingly using electronic communications for speedy review of the manuscripts submitted, whilst our web page continues to offer the opportunity for interchange of opinions and ideas. It is in confident mood, therefore, that we head forward into 2002.

Robert H. Anderson Edward Baker Gavin Jamieson

References

- 1. Obituary G. Hausdorf. Cardiol Young 2002; 12(1): 88.
- Opthof T, Coronel R, Janse MJ. Impact factor of cardiovascular research in 2000: all time high! Cardiovascular Research 2001; 50: 1–2.
- 3. Cardiology in the Young Online Announcement. Cardiol Young 2002; 12(1): 91–92.