In its 28th year of publication, the *International Journal of Technology Assessment in Health Care* has once again enjoyed active input from authors, reviewers, and the Editorial Board. The meeting of the Editorial Board in Bilbao discussed journal processes and principles, agreeing that reviewers benefit from receiving feedback about the process and that the reference system can be changed. Reviewers can now view the decision letters and author responses through the review system.

From this volume, the *Journal* will apply the Uniform Requirements for Manuscripts Submitted to Biomedical Journals. This means references from now on are numbered consecutively in order of appearance in the text, cited in text by Arabic numerals in parentheses. Details are available at: http://www.nlm.nih.gov/bsd/uniform_requirements.html and in the Journal inside cover.

For volume 28, this *Journal* received 169 original manuscripts and 2 letters. From September 2011 to August 2012, these manuscripts were sent from thirty-five different countries; 47 percent of the first authors were from Europe and 19 percent from North America. This indicates a slight but continuing increase of submissions from other parts of the world. By September 2012, sixty-seven papers and two letters (36 percent of submissions) had been accepted for publication. The impact factor increased to 1.365.

The 287 authors of sixty-nine published papers represented all continents. First authors were most often from the United Kingdom (17 percent) or Canada (14 percent), and 62 percent of first authors were from Europe. The proportion of methodological papers (22 percent) and policy studies (15 percent) were similar to previous years. A methodological article was accompanied by three invited comments, and a mini-theme on Disinvestment presented three original papers. The theme section on “Early awareness and alert methods and systems” consisted of seven peer-reviewed papers, invited by the theme editors whom the *Journal* thanks warmly for their time and expertise.

A good peer reviewer is swift, thorough, and polite, formulating clear comments for authors on how to improve on the manuscript. This *Journal’s* additional requirement is a broad understanding of many aspects of HTA. For volume 28, we received 286 reviews from 194 reviewers. From among them, the 2012 Best Reviewer title goes to Irina Cleemput from Belgium. Her special expertise in economic evaluation and health policy has been much valued by IJTAHC authors and editors for many years, so congratulations are deserved. The Journal is grateful for the input of the following persons who have reviewed manuscripts in the past year:


The Editorial Office continues to welcome input from authors and readers at IJTAHC@thl.fi.

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