

Editorial

New STH (2020) Impact Factor, Most Highly Cited Papers, and Other Journal Metrics

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This Editorial marks a slight deviation from our standard editorial, typically announcing our newest Impact Factor and other journal metrics as part of our yearly welcome editorial. This change has been initiated in recognition of the move away from print publication toward an increased online presence. Accordingly, this Editorial is being published before our standard yearly Welcome Editorial, which always publishes with the first issue of the year. With this Editorial, I have also decided to share additional journal metrics with the readership.

2020 STH Impact Factor

The latest Impact Factor for STH, as for all journals with an Impact Factor, was announced in early July of 2021, which was for the year 2020. The 2020 Impact Factor for STH was 4.180, which marks a substantive increase over the 2019 Impact Factor, which was 2.892. The 2019 Impact Factor, in turn, represented a significant decrease from our 2018 Impact Factor of 3.401. For the interest of the readership, I have provided a figure outlining the STH Impact Factor from 2003 to 2020 (►Fig. 1). The 2020 Impact Factor of 4.180 is higher than that of most previous years. Although I would love to take full credit for this extraordinary result of behalf of the Editorial Team, I need to clarify some changes to how the IF was calculated for 2020. First, whereas data usually reflects dates of final (e.g., print) publication, a change was instigated for 2020 to include dates of online publication, which for most journals occur several months ahead of final print versions. These are called eFirst articles for STH and are available @ <https://www.thieme-connect.com/products/ejournals/issue/eFirst/10.1055/s-00000077>. Second, additional journals have been included in the database used for

generating 2020 Impact Factors, meaning additional citation potential for these journals. In short, one could have predicted an increase in Impact Factor for most journals in 2020. So, be wary of journals quoting an increased Impact Factor for 2020 without additional clarification.

I have included here another figure which compares the impact factor changes across several thrombosis and hemostasis focused journals (►Fig. 2). The change from 2019 to 2020 is shown in ►Fig. 2A, and the change from 2018 to 2019 is shown in ►Fig. 2B. In general, most thrombosis and hemostasis focused journals showed an increase in Impact Factor from 2019 to 2020 but showed a reduction in Impact Factor from 2018 to 2019. Thus, the 2020 Impact Factor appears in part to be applying a kind of Impact Factor adjustment. So, clearly, STH was not alone in showing an increase in Impact Factor in 2020. Nevertheless, the percent increase of 44.5% in 2020 compared with 2019 was higher than most of the comparison journals. Thus, the Editorial team should be congratulated for this outcome.

As a further indication of specific STH related “improvement,” STH was ranked 28/76 in the Hematology category of the Science Citation Index Expanded (SCIE) in 2020, compared with 36/76 in 2019. Similarly, STH was ranked 21/65 in the Peripheral Vascular Disease category of the SCIE in 2020, compared with 26/65 in 2019.

It is important to also note that the increase in Impact Factor for 2020 is not related to an increase in citations of COVID-19 (coronavirus disease 2019) material. Although STH has now published two separate issues on COVID-19 in thrombosis and hemostasis, this material was published in the years 2020 and 2021,^{1,2} and so would not count toward the 2020 Impact Factor. However, the material published in 2020 will count toward the 2021 Impact Factor, and thus will

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Issue Theme Editorial
Compilation X; Guest Editors:
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Seminars in Thrombosis & Hemostasis - Impact Factor 2003 to 2020

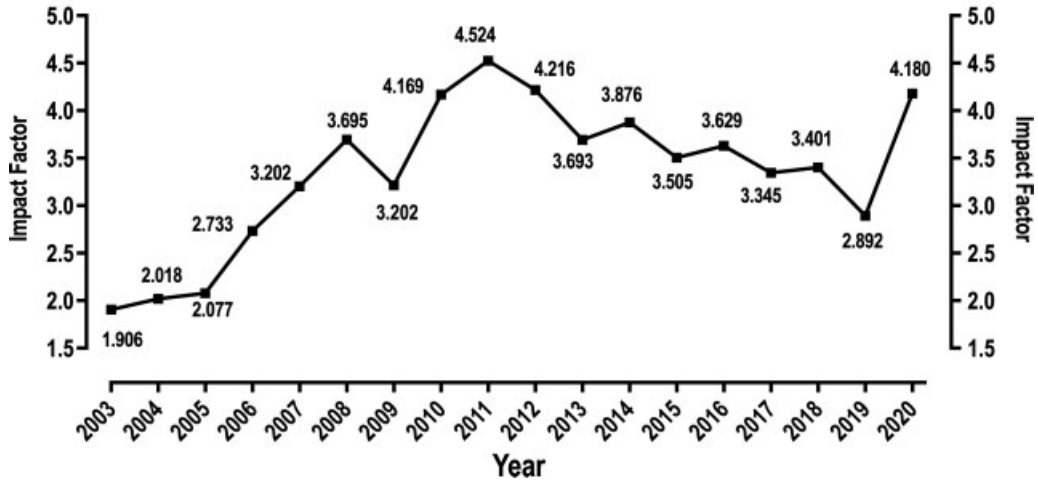


Fig. 1 The Impact Factor for *Seminars in Thrombosis and Hemostasis* from 2003 to 2020.

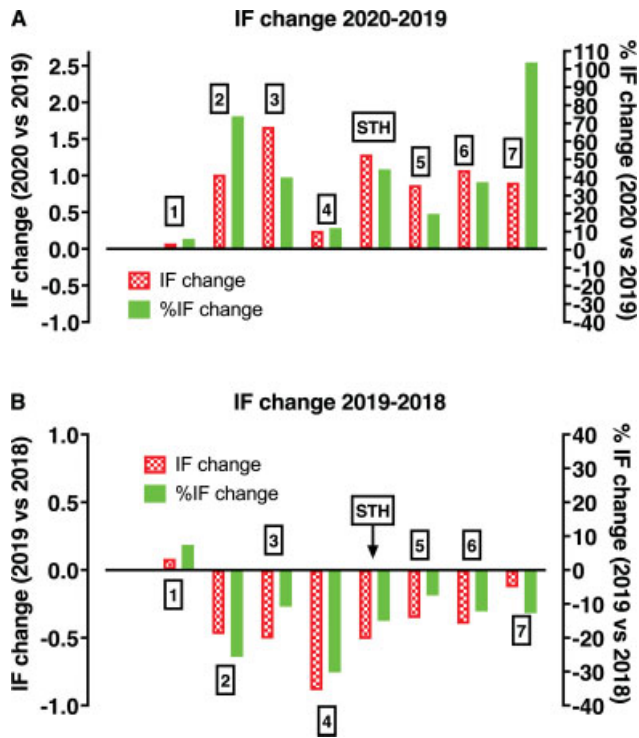


Fig. 2 The change in impact factor for *Seminars in Thrombosis and Hemostasis* and seven other journals focused on thrombosis and hemostasis between 2020 and 2019 (A) and between 2019 and 2018 (B). There were more “rises” than “falls” in 2020 impact factors, and more “falls” than “rises” in 2019 impact factors, amongst eight journals publishing in thrombosis and hemostasis.

expectedly lead to retention of a high Impact Factors for thrombosis and hemostasis journals, including STH, given COVID-19 publications are both popular and well cited.

As typical done for my annual Impact Factor editorial, I also assess the trends for self-citations, and this continues to reflect positively for recent data (►Fig. 3). In any case,

the Impact Factor is only one of the several markers of journal “quality” that we should consider, and the limitations of any individual marker (including the Impact Factor) as a “quality” indicator, have previously been discussed.^{3,4}

Most Highly Cited Papers Contributing to the 2020 STH Impact Factor

As I also do annually, the highest cited (2018/2019 published) contributions^{5–46} from this journal are also listed in ►Table 1 for the potential interest of the readership and contributing authors. This Table identifies STH publications that most contributed to the 2020 Impact Factor, and each were cited six or more times in the Impact Factor database literature in 2020. For those interested, the current listing can be compared with those of the most recently published top downloaded article listings from STH, the basis of the Eberhard F. Mammen “Most Popular” awards.^{47,48}

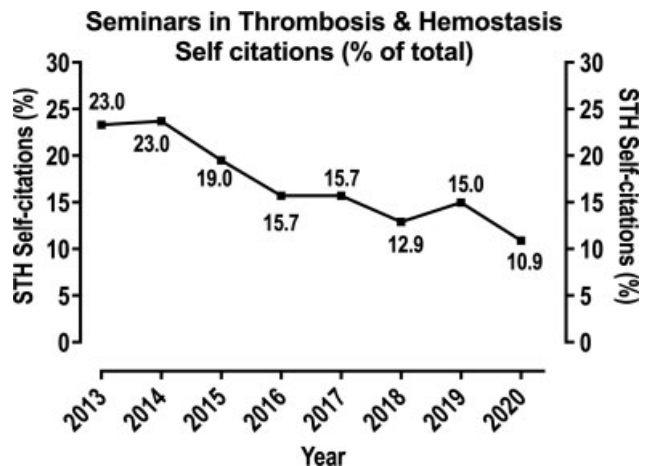


Fig. 3 Percentage of self-citations for *Seminars in Thrombosis & Hemostasis* in recent years—aiming for less.

Table 1 Top 2020-cited papers, as published in 2018/2019^a

| IF citation rank | Overall citation rank | Citation/Reference | Scopus citation rank |
|------------------|-----------------------|--|----------------------|
| 1 | 1 | Laridan E, Martinod K, De Meyer SF. Neutrophil extracellular traps in arterial and venous thrombosis. <i>Semin Thromb Hemost</i> 2019 Feb;45(1):86–93. doi: 10.1055/s-0038-1677040. | 1 |
| 2 | 2 | Thomas J, Kostousov V, Teruya J. Bleeding and thrombotic complications in the use of extracorporeal membrane oxygenation. <i>Semin Thromb Hemost</i> . 2018 Feb;44(1):20–29. doi: 10.1055/s-0037-1606179. | 2 |
| 3 | 3 | Kumar KR, Cowley MJ, Davis RL. Next-generation sequencing and emerging technologies. <i>Semin Thromb Hemost</i> . 2019 Oct;45(7):661–673. doi: 10.1055/s-0039-1688446. | 3 |
| 4 | 6 | Marongiu F, Marnelli A, Grandone E, Barcellona D. Pulmonary thrombosis: a clinical pathological entity distinct from pulmonary embolism? <i>Semin Thromb Hemost</i> . 2019 Nov;45(8):778–783. doi: 10.1055/s-0039-1696942. | 8 |
| 5 | 8 | Lippi G, Gosselin R, Favaloro EJ. Current and emerging direct oral anticoagulants: state-of-the-art. <i>Semin Thromb Hemost</i> . 2019 Jul;45(5):490–501. doi: 10.1055/s-0039-1692703. | 6 |
| 6 | 13 | Deloughery EP, Olson SR, Puy C, McCarty OJT, Shatzel JJ. The safety and efficacy of novel agents targeting factors XI and XII in early phase human trials. <i>Semin Thromb Hemost</i> . 2019 Jul;45(5):502–508. | 14 |
| 7 | 4 | Lippi G, Favaloro EJ. Venous and arterial thromboses: two sides of the same coin? <i>Semin Thromb Hemost</i> . 2018 Apr;44(3):239–248. doi: 10.1055/s-0037-1607202. | 4 |
| 7 | 6 | Kwaan HC, Lindholm PF. Fibrin and fibrinolysis in cancer. <i>Semin Thromb Hemost</i> . 2019 Jun;45(4):413–422. doi: 10.1055/s-0039-1688495. | 5 |
| 7 | 9 | Russo V, Rago A, Papa AA, Meo FD, Attenu E, Golino P, D'Onofrio A, Nigro G. Use of non-vitamin K antagonist oral anticoagulants in atrial fibrillation patients with malignancy: clinical practice experience in a single institution and literature review. <i>Semin Thromb Hemost</i> . 2018 Jun;44(4):370–376. doi: 10.1055/s-0037-1607436. | 10 |
| 7 | 11 | Arachchilage DRJ, Passariello M, Laffan M, Aw TC, Owen L, Banya W, Trimlett R, Morgan C, Patel BV, Pepper J, Ledot S. Intracranial hemorrhage and early mortality in patients receiving extracorporeal membrane oxygenation for severe respiratory failure. <i>Semin Thromb Hemost</i> . 2018 Apr;44(3):276–286. | 12 |
| 7 | 15 | Tillman B, Gallani D. Inhibition of factors XI and XII for prevention of thrombosis induced by artificial surfaces. <i>Semin Thromb Hemost</i> . 2018 Feb;44(1):60–69. doi: 10.1055/s-0037-1603937. | 15 |
| 7 | 16 | Konstantinidi A, Sokou R, Parastatidou S, Lampropoulou K, Katsaras G, Boutsikou T, Gounaris AK, Tsantes AE, Iacovidou N. Clinical application of thromboelastography/thromboelastometry (TEG/TEM) in the neonatal population: a narrative review. <i>Semin Thromb Hemost</i> . 2019 Jul;45(5):449–457. doi: 10.1055/s-0039-1692210. | 15 |
| 8 | 5 | Radin M, Cecchi I, Roccatello D, Meroni PL, Sciascia S. Prevalence and thrombotic risk assessment of anti-β2 glycoprotein I domain I antibodies: a systematic review. <i>Semin Thromb Hemost</i> . 2018 Jul;44(5):466–474. doi: 10.1055/s-0037-1603936. | 6 |
| 8 | 8 | Russo V, Attenu E, Mazzone C, Esposito F, Parisi V, Bancone C, Rago A, Nigro G, Sanguolo R, D' Onofrio A. Nonvitamin K antagonist oral anticoagulants use in patients with atrial fibrillation and bioprosthetic heart valves/prior surgical valve repair: a multicenter clinical practice experience. <i>Semin Thromb Hemost</i> . 2018 Jun;44(4):364–369. doi: 10.1055/s-0037-1615261. | 10 |
| 9 | 7 | Dahlbäck B. Vitamin K-dependent protein S: beyond the protein C pathway. <i>Semin Thromb Hemost</i> . 2018 Mar;44(2):176–184. doi: 10.1055/s-0037-1604092. | 9 |
| 9 | 12 | Hunt BJ. Hemostasis at extremes of body weight. <i>Semin Thromb Hemost</i> . 2018 Oct;44(7):632–639. doi: 10.1055/s-0038-1661385. | 11 |

(Continued)

Table 1 (Continued)

| IF citation rank | Overall citation rank | Citation/Reference | Scopus citation rank |
|------------------|-----------------------|---|----------------------|
| 9 | 13 | Sorrentino S, Giustino G, Moalem K, Indolfi C, Mehran R, Dangas GD. Antithrombotic treatment after transcatheter heart valves implant. <i>Semin Thromb Hemost.</i> 2018 Feb;44(1):38–45. doi: 10.1055/s-0037-1607457. | 17 |
| 9 | 14 | Russo V, Bottino R, Rago A, Micco PD, D' Onofrio A, Liccardo B, Golino P, Nigro G. Atrial fibrillation and malignancy: the clinical performance of non-vitamin K oral anticoagulants—a systematic review. <i>Semin Thromb Hemost.</i> 2019 Mar;45(2):205–214. doi: 10.1055/s-0038-1661386. | 14 |
| 9 | 14 | van Asten I, Schutgens REG, Urbanus RT. Toward flow cytometry based platelet function diagnostics. <i>Semin Thromb Hemost.</i> 2018 Apr;44(3):197–205. doi: 10.1055/s-0038-1636901. | 17 |
| 9 | 15 | Harenberg J, Schreiner R, Hetjens S, Weiss C. Detecting anti-IIa and anti-Xa direct oral anticoagulant (DOAC) agents in urine using a DOAC Dipstick. <i>Semin Thromb Hemost.</i> 2019 Apr;45(3):275–284. doi: 10.1055/s-0038-1668098. | 14 |
| 9 | 16 | Cosselin RC, Marlar RA. Preatalytical variables in coagulation testing: setting the stage for accurate results. <i>Semin Thromb Hemost.</i> 2019 Jul;45(5):433–448. doi: 10.1055/s-0039-1692700. | 15 |
| 9 | 17 | Rondon AMR, Kroone C, Kapteijn MY, Versteeg HH, Buijs JT. Role of tissue factor in tumor progression and cancer-associated thrombosis. <i>Semin Thromb Hemost.</i> 2019 Jun;45(4):396–412. doi: 10.1055/s-0039-1687895. | 17 |
| 9 | 20 | Mahajan A, Brunson A, White R, Wun T. The epidemiology of cancer-associated venous thromboembolism: an update. <i>Semin Thromb Hemost.</i> 2019 Jun;45(4):321–325. doi: 10.1055/s-0039-1688494. | 14 |
| 9 | 21 | Yamaguti-Hayakawa GG, Ozelo MC. Gene therapy: paving new roads in the treatment of hemophilia. <i>Semin Thromb Hemost.</i> 2019 Oct;45(7):743–750. doi: 10.1055/s-0039-1688445. | 20 |
| 10 | 7 | Kell DB, Pretorius E. To what extent are the terminal stages of sepsis, septic shock, systemic inflammatory response syndrome, and multiple organ dysfunction syndrome actually driven by a prion/amyloid form of fibrin? <i>Semin Thromb Hemost.</i> 2018 Apr;44(3):224–238. doi: 10.1055/s-0037-1604108. | 7 |
| 10 | 10 | Croles FN, Borjas-Howard J, Nasserinejad K, Leebeek FWG, Meijer K. Risk of venous thrombosis in antithrombin deficiency: a systematic review and Bayesian meta-analysis. <i>Semin Thromb Hemost.</i> 2018 Jun;44(4):315–326. doi: 10.1055/s-0038-1625983. | 11 |
| 10 | 12 | Arachchilage DRJ, Makris M. Inherited thrombophilia and pregnancy complications: should we test? <i>Semin Thromb Hemost.</i> 2019 Feb;45(1):50–60. doi: 10.1055/s-0038-1657782. | 13 |
| 10 | 16 | Favaloro EJ, Kershaw G, Mohammed S, Lippi G. How to optimize activated partial thromboplastin time (aPTT) testing: solutions to establishing and verifying normal reference intervals and assessing aPTT reagents for sensitivity to heparin, lupus anticoagulant, and clotting factors. <i>Semin Thromb Hemost.</i> 2019 Feb;45(1):22–35. doi: 10.1055/s-0038-1677018. | 12 |
| 10 | 19 | Arachchilage DR, Laffan M. Pathogenesis and management of thrombotic disease in myeloproliferative neoplasms. <i>Semin Thromb Hemost.</i> 2019 Sep;45(6):604–611. doi: 10.1055/s-0039-1693477. | 15 |
| 10 | 20 | Tufano A, Di Minno MND, Guida A, Lembo M, Di Minno G, Galderisi M. Cardiac manifestations of antiphospholipid syndrome: clinical presentation, role of cardiac imaging, and treatment strategies. <i>Semin Thromb Hemost.</i> 2019 Jul;45(5):468–477. doi: 10.1055/s-0039-1692702. | 18 |

Table 1 (Continued)

| IF citation rank | Overall citation rank | Citation/Reference | Scopus citation rank |
|------------------|-----------------------|--|----------------------|
| 10 | 21 | Sharma BK, Flick MJ, Palumbo JS. Cancer-associated thrombosis: a two-way street. <i>Semin Thromb Hemost.</i> 2019 Sep;45(6):559–568. doi: 10.1055/s-0039-1693472 | 17 |
| 10 | 21 | Thachil J. The elusive diagnosis of disseminated intravascular coagulation: does a diagnosis of DIC exist anymore? <i>Semin Thromb Hemost.</i> 2019 Feb;45(1):100–107. doi: 10.1055/s-0038-1677042. | 19 |
| 11 | 13 | Lippi G, Favaloro EJ, Sanchis-Gomar F. Sudden cardiac and noncardiac death in sports: epidemiology, causes, pathogenesis, and prevention. <i>Semin Thromb Hemost.</i> 2018 Nov;44(8):780–786. doi: 10.1055/s-0038-1661334. | 14 |
| 11 | 16 | Hisada Y, Mackman N. Tissue factor and cancer: regulation, tumor growth, and metastasis. <i>Semin Thromb Hemost.</i> 2019 Jun;45(4):385–395. doi: 10.1055/s-0039-1687894. | 16 |
| 11 | 16 | Maiocchi S, Alwis I, Wu MCL, Yuan Y, Jackson SP. Thromboinflammatory functions of platelets in ischemia-reperfusion injury and its dysregulation in diabetes. <i>Semin Thromb Hemost.</i> 2018 Mar;44(2):102–113. doi: 10.1055/s-0037-1613694. | 15 |
| 11 | 17 | Bastida JM, Benito R, Lozano ML, Marín-Quilez A, Janusz K, Martín-Izquierdo M, Hernández-Sánchez J, Palma-Barqueros V, Hernández-Rivas JM, Rivera J, González-Porras JR. Molecular diagnosis of inherited coagulation and bleeding disorders. <i>Semin Thromb Hemost.</i> 2019 Oct;45(7):695–707. doi: 10.1055/s-0039-1687889. | 16 |
| 11 | 18 | Santoro C, Quintavalle G, Castaman G, Baldacci E, Ferricci A, Riccardi F, Tagliaferri A. Inhibitors in hemophilia B. <i>Semin Thromb Hemost.</i> 2018 Sep;44(6):578–589. doi: 10.1055/s-0038-1660817. | 15 |
| 11 | 19 | Mege D, Aubert M, Lacroix R, Dignat-George F, Panicot-Dubois L, Dubois C. Involvement of platelets in cancers. <i>Semin Thromb Hemost.</i> 2019 Sep;45(6):569–575. doi: 10.1055/s-0039-1693475. | 17 |
| 11 | 19 | Hoffman M. The tissue factor pathway and wound healing. <i>Semin Thromb Hemost.</i> 2018 Mar;44(2):142–150. doi: 10.1055/s-0037-1606181 | 19 |
| 11 | 20 | Walsh M, Moore EE, Moore H, Thomas S, Lune SV, Zimmer D, Dynako J, Hake D, Crowell Z, McCauley R, Larson EE, Miller M, Pohlman T, Achneck HE, Martin P, Nielsen N, Shariff F, Ploplis VA, Castellino FJ. Use of viscoelastography in malignancy-associated coagulopathy and thrombosis: a review. <i>Semin Thromb Hemost.</i> 2019 Jun;45(4):354–372. doi: 10.1055/s-0039-1688497. | 21 |
| 11 | 20 | Koh CY, Modahl CM, Kulkarni N, Kini RM. Toxins are an excellent source of therapeutic agents against cardiovascular diseases. <i>Semin Thromb Hemost.</i> 2018 Oct;44(7):691–706. doi: 10.1055/s-0038-1661384. | 18 |
| 11 | 20 | Molhoek JE, de Groot PG, Urbanus RT. The lupus anticoagulant paradox. <i>Semin Thromb Hemost.</i> 2018 Jul;44(5):445–452. doi: 10.1055/s-0037-1606190. | 19 |

^aCited six or more times in 2020. Thus, contributing most to the STH 2020 Impact Factor (IF). IF citation rank is the rank according to contribution to 2020 Impact Factor. STH publications with equal contributions (i.e., the same number of citations) have been given the same rank. Overall citation rank is the rank according to total citations to date. STH publications with equal contributions (i.e., the same number of citations) have been given the same rank. Scopus citation rank indicates citation rank for STH 2018 and 2019 publications as based on data from Scopus (<https://www.scopus.com>).

Several papers that I will highlight in particular:

- (1) the most highly cited paper by the team of Laridan, Martinod, and De Meyer⁵ just missed being awarded one of the 2021 Most Popular awards.⁴⁸
- (2) the original study by Russo and colleagues¹⁸ was also in the most highly cited listing from last year⁴⁹ and was also awarded one of the 2020 Most Popular awards⁴⁷; Dr Russo and team also have two other papers identified in the current most popular listing^{13,22}; the first being what I call a hybrid paper, including some original data and also a review of the literature, and the other being a review.
- (3) several papers on the listing (► **Table 1**) were from my long-time collaborator and friend Prof Giuseppe Lippi^{9,11,37};
- (4) the highly cited paper by Kumar, Cowley, and Davis⁷ was also awarded one of the 2020 Most Popular awards⁴⁷;
- (5) the paper by Gosselin and Marlar²⁵ was also awarded one of the 2021 Most Popular awards.⁴⁸

Thus, it is pleasing that there is a kind of concordance between popularity (as assessed by article downloads)^{47,48} and a paper's "impact" (as judged by the number of citations; ► **Table 1**). It was also pleasing to see that there were several original studies or "hybrid" publications included in the listing.^{13,14,18} As noted in a separate Editorial,⁵⁰ although STH does publish original studies, this type of publication is limited to approximately 10 such papers per year, and these require additional oversight in the form of non-STH Board peer review, which occurs in addition to our standard STH-Board peer review.

Several issues of the journal are also worthy of highlighting as most contributing to the 2020 Impact Factor. The four most highly contributing issues,^{51–55} both in terms of total and average Impact Factor contributions, were:

1. Editorial Compilation VI. Guest Editors: Emmanuel J. Favaloro, Giuseppe Lippi.⁵¹ Included the most highly cited paper⁵ and three other papers in the top listing in ► **Table 1**.^{14,32,36}
2. Editorial Compilation VII. Guest Editors: Emmanuel J. Favaloro, Giuseppe Lippi.⁵² Included five papers in the top listing (► **Table 1**).^{9,10,16,25,34}
3. Emerging Paradigms of Thrombosis and Cancer (Part I): The yin yang Relationship between Thrombosis and Cancer.⁵³ Guest Editors: Hau C. Kwaan, Paul F. Lindholm. Also included five papers in the top listing (► **Table 1**).^{12,26,27,38,44}
4. Perturbation of Hemostatic Function by Nonbiologic Surfaces.⁵⁴ Guest Editors: Hau C. Kwaan, Jun Teruya. Three papers in the top listing (► **Table 1**).^{6,15,21}

The other issues of STH published in 2018 or 2019 with three or more papers listed in ► **Table 1** were:

1. Extrahemostatic Functions of Platelets and Coagulation Factors. Guest Editors: Roger J.S. Preston, Ton Lisman.⁵⁵
2. Editorial Compilation V. Guest Editors: Emmanuel J. Favaloro, Giuseppe Lippi.⁵⁶

3. Recent Advances in Thrombosis and Hemostasis—Part III. Guest Editor: Sam Schulman.⁵⁷
4. Emergent Paradigms of Thrombosis and Cancer (Part II): More on Thrombosis and Cancer. Guest Editors: Hau C. Kwaan, Paul F. Lindholm.⁵⁸
5. Molecular and Genetic Testing in Thrombosis and Hemostasis. Guest Editors: David J. Rabbolini, Maha Othman.⁵⁹

It is therefore also pleasing to continue to see that non-themed compilation issues,^{51,52,56,57} publishing primarily unsolicited papers accepted for publication after peer review, continue to do as well as themed issues,^{53–55,58,59} publishing primarily solicited papers accepted for publication after peer review.

As added detail, I have also included in ► **Table 1** a ranking for overall citations (i.e., including citations not used for 2020 Impact Factor calculations [i.e., including citations in years other than 2020]), and also comparison data using citation rankings from the Scopus database (<https://www.scopus.com>), which counts citations using a different publication database.

Metrics around Publication Acceptance Rates

I thought this editorial would also provide an opportunity to share some metrics around submission and acceptance rates for unsolicited manuscripts. As previously noted, STH now publishes a mixture of themed and non-themed "composite" issues.⁵⁰ All issues of STH contain around 10 full articles each, for a total of approximately 80 full articles per year (total 8 issues/year). The vast majority of full articles published in STH are reviews, in keeping with our past publication history. However, as we move somewhat away from a purely themed-issue concept, STH now also publishes unsolicited material, including original studies, although these are limited to a maximum of around 10 per year (or approximately 10–15% of full article content). Moreover, original studies are more likely to be published in the non-themed "composite" issues, and more likely to reflect unsolicited material. In contrast, most content in the themed issues would represent solicited material, and thus mostly reviews. Of course, some original papers may form a very small component of themed issues, and indeed could originate from unsolicited material. Irrespective, what this all means is that STH receives around equal numbers of unsolicited reviews and original studies, but original studies are more likely to be declined.

Some data from 2018 to 2020 is shown in ► **Figs. 4** to **6**. ► **Figure 4** identifies the trends for papers published in STH over the years 2015 to 2020 inclusive. As shown, STH publishes approximately 10 full papers per issue, for 8 issues a year, for a total approximately 80 papers/year. The range over the past 5 years is as expected, or around 80 to 100 full papers per year. Most are reviews, and very few are original studies or "hybrid" papers. Thus, STH has published from 6 to 16 original papers per year from 2015 to 2020 (average 10.7), with this representing an overall average of 13.5% of all full papers published over these years (range 7.6–17.4%). STH

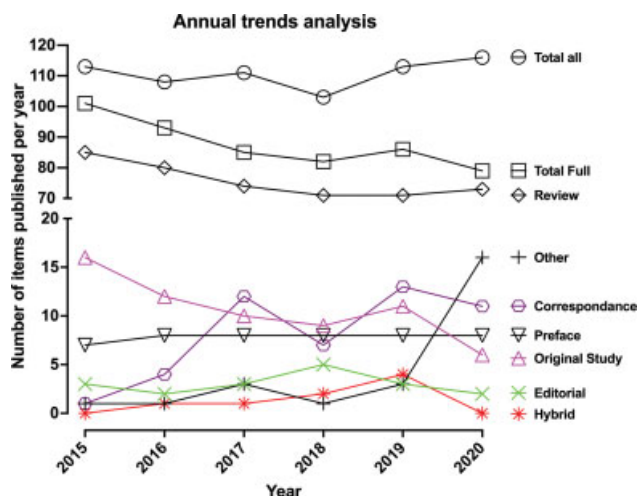


Fig. 4 Annual trends analysis 1: number of items published in *Seminars in Thrombosis & Hemostasis* by year from 2015 to 2020 for reviews, full original study articles, total full articles (reviews plus original studies), Letters to the Editor (“Correspondence”), Prefaces, Editorials, hybrid papers (review with some original material), “other” (mostly Commentaries), and total of all items.

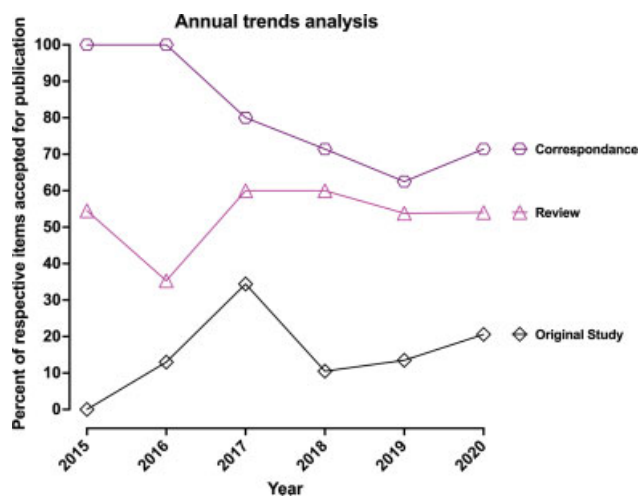


Fig. 6 Annual trends analysis 3: percentage of respective unsolicited items from **Fig. 5** published in *Seminars in Thrombosis & Hemostasis* by year from 2015 to 2020 for reviews, full original study articles, and Letters to the Editor (“Correspondence”).

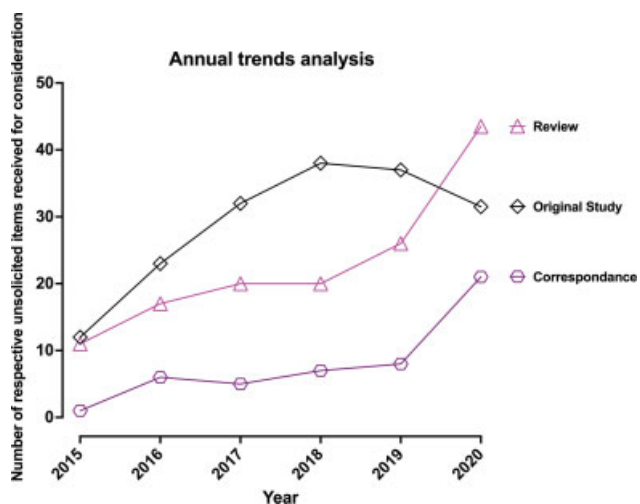


Fig. 5 Annual trends analysis 2: number of respective unsolicited items received for consideration for publication in *Seminars in Thrombosis & Hemostasis* by year from 2015 to 2020 for reviews, full original study articles, and Letters to the Editor (“Correspondence”).

also publishes a Preface with most issues, as well as a few Editorials per year. STH also publishes a few Letters to the Editor (“Correspondence”) per year (average 8.0), mostly within the non-themed composite issues that I guest edit with Prof. Lippi. 2020 was an unusual year in that STH also published several Commentaries in the COVID-19 issue (noted within the “Other” category in **Fig. 4**).

Figure 5 identifies the number of unsolicited items received for consideration for publication in STH per year for original studies, reviews, and correspondence. As clearly shown, STH is receiving an increasing number of unsolicited items per year, with similar numbers of reviews and original studies. The year 2020 saw a big jump also in Letters to the Editor (“Correspondence”) received.

Figure 6 identifies the percentage of the unsolicited items received from **Fig. 5** that are finally accepted for publication after peer review. This data needs to be contextualized also with the numbers shown in **Fig. 4**. For example, we published 100% of Correspondences received in 2015 and 2016, but only published a single Letter to the Editor in 2015 and only five such letters in 2016. As the numbers of Correspondences received per year have increased, the percentage of Correspondences accepted has fallen, and in 2020, STH only published approximately 70% of those received. Currently, STH declines around 50% of unsolicited reviews, and over 80% of unsolicited original studies (**Fig. 6**).

The final figure that I will share is **Fig. 7**, which shows both the number of issues of STH published per year, as well as the number of pages published per year. STH began in 1974 with the journal publishing two issues per year, under the direction of the Founding Editor in Chief, Eberhard F. Mammen, and published just 210 pages in that first year. The journal moved to publishing four issues per year from the following year, 1975, with around 300 to 400 pages per year. The growth of the journal continued with a move to six issues per year from 1996, with 500 to 700 pages per year. The final change was a move to eight issues per year in 2006, with over 800 pages published per year. 2020 identifies a landmark year in which the journal published over 1,000 pages.

This leads me to “anniversaries”. The year 2006, in addition to marking a move to eight issues per year, marked my first year of editorial association with the journal, then as a “Regional Editor” covering the Asia-Pacific region. This position was short lived, as Eberhard Mammen, the then Editor in Chief, passed away a few years later, in 2008,⁶⁰ and thus I was asked by the Publisher to take over the role of Editor in Chief from 2009. The year 2023 will mark the 50th year of STH publication. Just as we did for the 40th year anniversary in 2014,^{61,62} we will aim to again provide one to two historical issues to celebrate this landmark. These will be published in

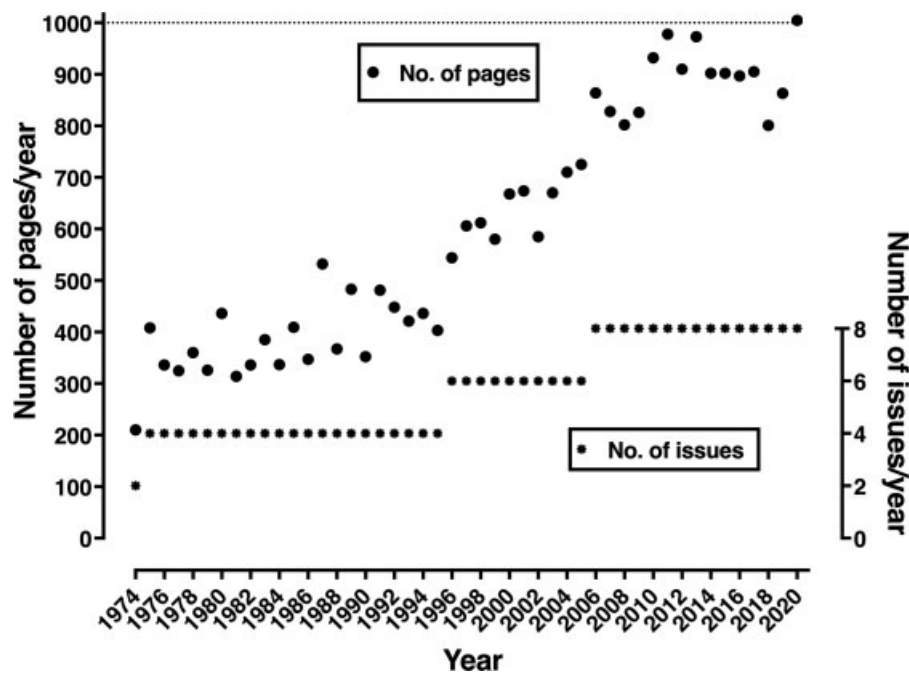


Fig. 7 Number of pages (left y-axis) and number of issues (right y-axis) published in *Seminars in Thrombosis & Hemostasis* per year by years 1974 to 2020.

either 2023 (50th year of publication) or 2024 (official 50th “birthday”). 2024 will also mark my decade and a half association with the journal as Editor in Chief, an event reflecting a kind of half-way point in comparison to Eberhard Mammen, who steered STH as Editor in Chief for some 34 years.

Conflict of Interest
None declared.

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