Dear Colleagues and Friends:

“Bad news are good news” – this cynical slogan from the media is certainly not true in science and also not applicable to publishers of scientific journals. As Editor-in-Chief, I am happy to report on several items of good news:

• First, the Chair of the GTH Council and Schattauer’s representatives accepted the Editor’s proposal to extend the roster of the Editorial Board.

• Second, Johanna Kremer Hovinga, President of the upcoming GTH Meeting in Basel, agreed to become Guest Editor of the Journal’s traditional congress issue (1/2017).

• Third, Hämostaseologie – Progress in Haemostasis has maintained its impact factor, which is now 1.547 (for 2015).

New members of the Editorial Board

Florian Langer, Hamburg, was appointed Section Editor and will assume responsibility for submitted contributions in the category clinical science. Ute Scholz, Leipzig, and Robert Klamroth, Berlin, have joined the Advisory Board and will assist in the review of manuscripts on clinical studies. Specifically, Ute Scholz will foster the Journal’s liaison with the Berufsverband der Deutschen Hämostaseologen (BDDH), support publishing activities of BDDH members, and, in collaboration with Michael Spannagl, coordinate guidelines, clinical recommendations, and position papers. Robert Klamroth will reinforce the “hemophilia team” amongst the Editorial Board members.

We are welcoming the new colleagues on the Editorial Board and are looking forward to a successful cooperation.

Upcoming issues 2017

Johanna Kremer Hovinga, President of the GTH Meeting 2017 in Basel, has designed a comprehensive concept for the traditional congress edition of Hämostaseologie – Progress in Haemostasis. Importantly, she has recruited an impressive number of distinguished physician-scientists, who agreed to contribute and submit their manuscripts on time. As also proposed by Johanna Kremer Hovinga, a novel format, designated highlight contributions, will be envisioned, as of 1/2017. These articles should be very brief personal statements on novel or controversial topics in our field.

Thus, we are looking forward to publishing a prestigious edition at the upcoming GTH Congress.

For other issues of Hämostaseologie – Progress in Haemostasis in 2017, several Guest Editors have accepted our invitation to prepare theme issues on relevant aspects of clinical hemostasis and thrombosis. Moreover, along with the educational task of the Journal, we will continue to publish CME articles in context of the GTH Course on Clinical Hemostasis under the leadership of Bettina Kemkes-Matthes.
Submissions, visibility and impact

Selection of topics, careful review of all submitted manuscripts, and open access of Hämostaseologie – Progress in Haemostasis remain key elements and crucial tools to achieve our goals to further improve the Journal and to increase its attractiveness within and outside the GTH. We are delighted that the number of submitted manuscripts has increased throughout 2015. However, in parallel with this rise, the proportion of rejections has also increased. Currently, the Journal’s accept ratio is at 59.3% (for the past 12 months).

The editorial office continues to monitor the effectiveness of published work in Hämostaseologie – Progress in Haemostasis through its citation value. Moreover, the number of hits in the open access system is recorded. We are proud that articles published in Hämostaseologie – Progress in Haemostasis are now occasionally quoted in top journals such as The New England Journal of Medicine, Lancet, Circulation, or Blood. Despite the increase in total citations and visibility during the past year, our impact factor, as released by mid June 2016, is currently at 1.547, reflecting the larger number of papers published in 2015. As a reminder: The impact factor of a journal is determined by the number of citations (in year 1 and 2) divided by the number of articles (in year 1 and 2).

As reported before (1, 2), the development of our Journal’s impact factor over the past years displays the characteristics of a saturation curve with minor fluctuations between 1.479 (in 2012) and 1.602 (in 2014). This, in fact, is good news and can be considered as quite a success of our efforts. Of course, it remains a challenge for the Editorial Board to maintain or even increase the impact factor.

I am grateful for valuable contributions and constructive suggestions and extend my sincere thanks to the Editorial Board members, the many referees, and, last but not least, to you – the readers.

References