

Editorial

New *Seminars in Thrombosis and Hemostasis* (STH) 2021 Impact Factor, Most Highly Cited Papers, and Other Journal Metrics

Emmanuel J. Favaloro, PhD, FFS^c (RCPA)¹

¹Department of Haematology, Centres for Thrombosis and Haemostasis, Institute of Clinical Pathology and Medical Research (ICPMR), Westmead Hospital, Westmead, NSW, Australia

Semin Thromb Hemost 2022;48:634–642.

This Editorial continues our deviation from our historical approach, which typically announced our newest Journal Impact Factor (IF) and other journal metrics as part of our yearly welcome editorial. This change reflects the recognition of the tendency to access online material well ahead of the print publication date. Accordingly, this Editorial update is being published before our standard yearly Welcome Editorial, which always publishes with the first issue of the year. As I did on the last occasion, then announcing the 2020 IF,¹ I am again sharing additional journal metrics with the readership.

2021 *Seminars in Thrombosis and Hemostasis* Impact Factor

The latest IF for *Seminars in Thrombosis and Hemostasis* (STH), as for all journals with an IF, was announced in late June of 2022, which was for the year 2021. The 2021 IF for STH was 6.398, which marks a substantive increase over the 2020 and 2019 IFs, which were respectively 4.180 and 2.892. For the interest of the readership, I have provided a figure outlining the STH IF from 2003 to 2021 (– Fig. 1). The 2021 IF of 6.398 is the highest IF that STH has ever achieved. The previous highest IF (4.524) was exactly 10 years ago in 2011. Although I would love to take full credit for this extraordinary result on behalf of the Editorial Team, I need to clarify a few items. First, there were some changes to how the IF was calculated for 2020 and 2021. Whereas data historically reflected dates of final (e.g., print) publication, a change was instigated for 2020 to include dates of online publication, which for most journals occurs 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>. The change in calculation progressed further in 2021 to utilize dates of online publication instead of final print. This change is detailed in ► Fig. 2. Second, additional journals continue to be included in the database used for generating IFs, meaning additional citation potential from the inclusion of these additional journals. Third, we have all been affected by the pandemic that is COVID-19 (coronavirus disease 2019). If there is any silver lining to this pandemic, it is the drive by scientific and medical teams to understand and combat the virus that is SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2), being the infectious agent that leads to COVID-19. At time of writing, COVID-19 had affected 548,741,448 people worldwide, and been responsible for 6,338,364 deaths.² One of the more amazing achievements has been the development, production, and deployment of a multitude of COVID-19/SARS-CoV-2 vaccines, which have now been administered to 11,751,696,786 people.² The pandemic has also created a research and writing frenzy, with 272,806 publications now listed in PubMed,³ with 72 of these attributable to STH. It needs to be remembered that although COVID-19 is an infectious disease, it is also a prothrombotic disease, and thus many COVID-19-related papers have appeared in thrombosis and hemostasis-related journals. Indeed, STH has now published three issues focused on COVID-19,^{4–6} with a 4th nearly completed. Moreover, all COVID-19-related material is currently being made available by the publisher as “free to download.” It is accordingly now very clear that these publications are both popular with the readership,⁷ and also well-cited in the literature.¹ Thus, to some extent, an increase in the IF for 2021 could have been predicted, and is in part driven by COVID-19-related publications. So, be wary of journals quoting an increased IF for 2021 without providing additional clarification.

Address for correspondence
Emmanuel J. Favaloro, PhD FFS^c
(RCPA), Department of
Haematology, Centres for
Thrombosis and Haemostasis,
Institute of Clinical Pathology and
Medical Research (ICPMR),
Westmead Hospital, Westmead,
NSW, 2145, Australia
(e-mail: emmanuel.
favaloro@health.nsw.gov.au).

Issue Theme Laboratory
Diagnostics for Thrombosis and
Hemostasis Testing—Part I; Guest
Editors: Robert C. Gosselin, CLS
and Kristi J. Smock, MD

© 2022. Thieme. All rights reserved.
Thieme Medical Publishers, Inc.,
333 Seventh Avenue, 18th Floor,
New York, NY 10001, USA

DOI <https://doi.org/10.1055/s-0042-1756172>.
ISSN 0094-6176.

Seminars in Thrombosis & Hemostasis - Impact Factor 2003 to 2021

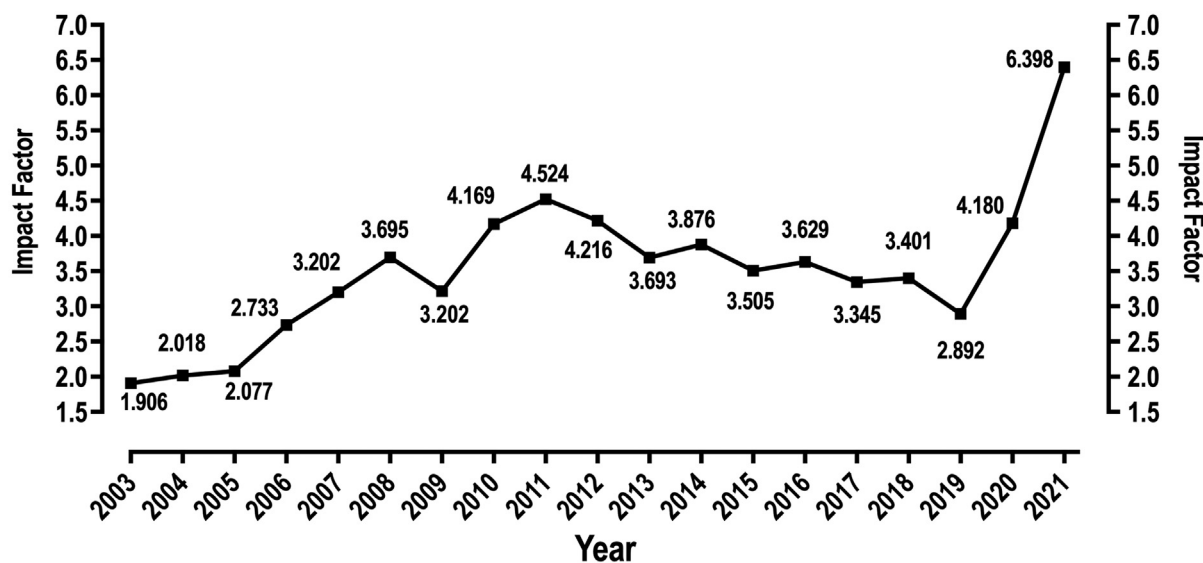


Fig. 1 The Impact Factor for *Seminars in Thrombosis and Hemostasis* from 2003 to 2021.

I have included here another figure which compares the IF changes across a number of thrombosis and hemostasis focused journals (►Fig. 3). The change from 2020 to 2021 is shown in ►Fig. 3A, the change from 2019 to 2020 in ►Fig. 3B, and the change from 2018 to 2019 (pre-pandemic) in ►Fig. 3C. In general, most thrombosis and hemostasis focused journals showed an increase in IF in both 2019 to 2020 and 2020 to 2021, but instead showed a reduction in IF from 2018 to 2019. So, clearly, STH was not alone in showing an increase in IFs in 2020¹ and 2021, nor a fall in 2019 (compared to 2018). Some journals achieved a huge increment in IF in 2021 on the back of a few very highly cited COVID-19 publications (some in excess of 2,000

citations!). It will be interesting to see what the next few years hold in terms of IFs, and whether such large rises can be sustained.

It is, however, also important to note that the increase in IF for STH in 2021 is not solely related to an increase in citations of COVID-19 material. Also, the IF is just only one of a number of markers of journal “quality” that we could consider, and the limitations of any individual marker (including the IF) as a “quality” indicator, have previously been discussed.^{8,9}

In any case, perhaps a better indicator of specific STH-related “improvement” is the journal’s ranking among peer journals. STH was ranked 21/78 in the Hematology category of the Science Citation Index Expanded (SCIE) in 2021, compared

Impact Factor 2019 =	$\frac{\text{Citations in 2019 to papers published in issues 2017 + 2018}}{\text{Citable items published in issues 2017 + 2018}}$
Impact Factor 2020 =	$\frac{\text{Citations in 2020 online publications* to papers published in issues 2018 + 2019}}{\text{Citable items published in issues 2018 + 2019}}$
Impact Factor 2021 =	$\frac{\text{Citations in 2021 online publications* to papers published online* 2019 + 2020}}{\text{Citable items published online* 2019 + 2020}}$

*if there is no online publication date, Clarivate will use the issue-publication date.

Fig. 2 The changes in Impact Factor calculations, 2019 to 2021.

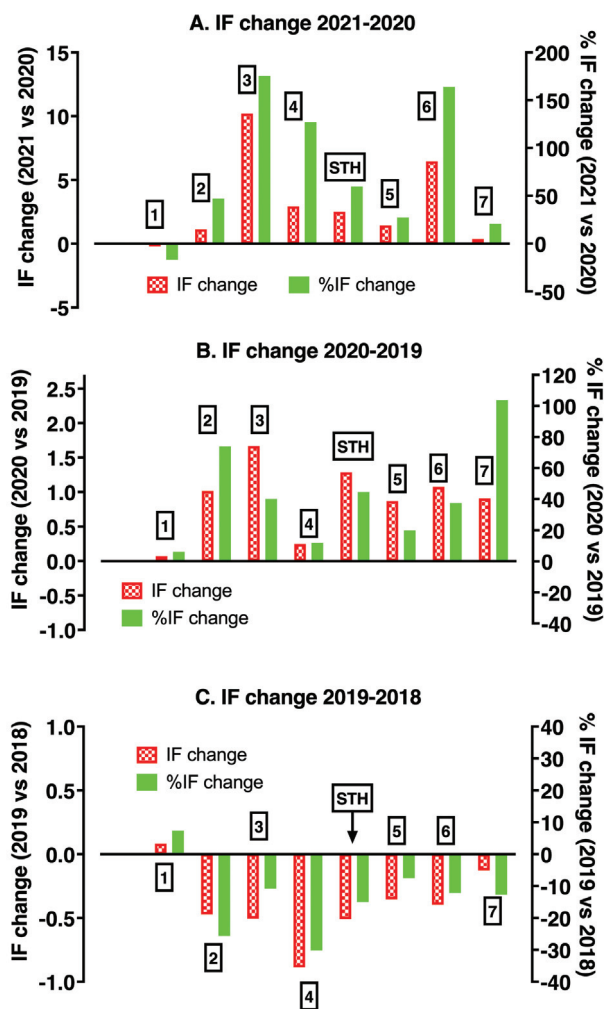


Fig. 3 The change in Impact Factor for *Seminars in Thrombosis and Hemostasis* and seven other journals focused on thrombosis and hemostasis between 2021 and 2020 (A), 2020 and 2019 (B), and between 2019 and 2018 (C). There were more “rises” than “falls” in 2020 and 2021 Impact Factors, and more “falls” than “rises” in 2019 Impact Factors, among 8 journals publishing in thrombosis and hemostasis.

to 28/76 in 2020 and 36/76 in 2019. Similarly, STH was ranked 14/67 in the Peripheral Vascular Disease category of the SCIE in 2021, compared to 21/65 in 2020 and 26/65 in 2019.

Most Highly Cited Papers Contributing to the 2021 *Seminars in Thrombosis and Hemostasis* Impact Factor

As I also do annually,¹ the highest 2021 cited (2019/2020-published) contributions^{10–45} from this journal are listed in **Table 1** for the potential interest of the readership and contributing authors. This table identifies STH publications that most contributed to the 2021 IF, and each publication was cited 7 or more times in the IF database literature in 2021. 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.^{7,46,47}

It may also be of interest to the readership to learn that STH published a series of Commentaries around COVID-19 that were also very popular and highly cited (**Table 2**).^{47–60} However, as these are identified as “editorial” material within the IF process, these publications are not included in the IF calculations.

Several papers from **Tables 1** and **2** that I will highlight in particular:

- (1) The most highly cited paper by Di Minno et al¹⁰ was COVID-19-related and also the most popular paper listed in the 2022 most popular listings,⁴⁷ and so achieved a double triumph.
- (2) The second most highly cited paper by Kumar et al¹¹ was also a most popular paper, as listed in the 2020 most popular listings,⁴⁶ and so this represents a second double triumph.
- (3) The third most highly cited paper by Laridan et al¹² just missed out in being a most popular paper listed in the 2021 most popular listings,⁷ and also represents a contribution from a 2017 Young Investigator winner.⁶¹
- (4) Several papers on the listing (**Table 1**) were from members of the STH Editorial Board.^{13,14,17–19,24,28,30,32,37}
- (5) And of course, the majority of Commentaries listed in **Table 2** were also from STH Editorial Board members.

In summary, it continues to be pleasing that there is a kind of concordance between popularity (as assessed by article downloads)^{7,46,47} and a paper’s “impact” (as judged by the number of citations; **Table 1**). It was also pleasing to continue to see Young Investigator winners in these lists.

Several past issues of the journal are also worthy of highlighting as most contributing to the 2021 IF. Seven issues managed to achieve an average citation of 5 or more per published full-length item^{4,62–67}:

1. Emerging Paradigms of Thrombosis and Cancer (Part I): The yin yang Relationship between Thrombosis and Cancer.⁶² Guest Editors: Kwaan HC, Lindholm PF. Included 10 full-length papers with seven in the top listing in **Table 1**. So, a good “all-rounder” performer.
2. Maintaining Hemostasis and Preventing Thrombosis in Coronavirus Disease 2019 (COVID-19)-Part I.⁴ Guest Editors: Emmanuel J. Falavero, Giuseppe Lippi. Published late in 2020, and included only four full-length papers with two in the top listing, including the most highly cited paper (**Table 1**); the majority of publications in this issue were commentaries, most of which are listed in **Table 2**.
3. Editorial Compilation VI.⁶³ Guest Editors: Emmanuel J. Falavero, Giuseppe Lippi. Included two papers in the top listing (**Table 1**).
4. Editorial Compilation VII.⁶⁴ Guest Editors: Emmanuel J. Falavero, Giuseppe Lippi. Five papers in the top listing (**Table 1**).
5. Emergent Paradigms of Thrombosis and Cancer (Part II): More on Thrombosis and Cancer.⁶⁵ Guest Editors: Kwaan HC, Lindholm PF. Six papers in the top listing (**Table 1**).

Table 1 Top 2021-cited papers, as published in 2019/2020^a

Citation rank	Citation/Reference
1	Di Minno A, Ambrosino P, Calcaterra I, Di Minno MND. COVID-19 and Venous Thromboembolism: A Meta-analysis of Literature Studies. <i>Semin Thromb Hemost</i> 2020;46(7):763-771
2	Kumar KR, Cowley MJ, Davis RL. Next-Generation Sequencing and Emerging Technologies. <i>Semin Thromb Hemost</i> 2019;45(7):661-673
3	Laridan E, Martinod K, De Meyer SF. Neutrophil Extracellular Traps in Arterial and Venous Thrombosis. <i>Semin Thromb Hemost</i> 2019;45(1):86-93
6	Iba T, Levi M, Levy JH. Sepsis-Induced Coagulopathy and Disseminated Intravascular Coagulation. <i>Semin Thromb Hemost</i> 2020;46(1):89-95
7	Kwaan HC, Lindholm PF. Fibrin and Fibrinolysis in Cancer. <i>Semin Thromb Hemost</i> 2019;45(4):413-422
8	Hisada Y, Mackman N. Tissue Factor and Cancer: Regulation, Tumor Growth, and Metastasis. <i>Semin Thromb Hemost</i> 2019;45(4):385-395
8	Arachchillage DR, Laffan M. Pathogenesis and Management of Thrombotic Disease in Myeloproliferative Neoplasms. <i>Semin Thromb Hemost</i> 2019;45(6):604-611
11	Danese E, Montagnana M, Favaloro EJ, Lippi G. Drug-Induced Thrombocytopenia: Mechanisms and Laboratory Diagnostics. <i>Semin Thromb Hemost</i> 2020;46(3):264-274
12	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;45(1):22-35
12	Levi M. Disseminated Intravascular Coagulation in Cancer: An Update. <i>Semin Thromb Hemost</i> 2019;45(4):342-347
12	Al-Samkari H, Kuter DJ. Immune Thrombocytopenia in Adults: Modern Approaches to Diagnosis and Treatment. <i>Semin Thromb Hemost</i> 2020;46(3):275-288
12	Page MJ, Pretorius E. A Champion of Host Defense: A Generic Large-Scale Cause for Platelet Dysfunction and Depletion in Infection. <i>Semin Thromb Hemost</i> 2020;46(3):302-319
14	Mahajan A, Brunson A, White R, Wun T. The Epidemiology of Cancer-Associated Venous Thromboembolism: An Update. <i>Semin Thromb Hemost</i> 2019;45(4):321-325
14	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;45(5):502-508
14	Gosselin RC, Marlar RA. Preanalytical Variables in Coagulation Testing: Setting the Stage for Accurate Results. <i>Semin Thromb Hemost</i> 2019;45(5):433-448
14	Dvorak HF. Tumors: Wounds That Do Not Heal-A Historical Perspective with a Focus on the Fundamental Roles of Increased Vascular Permeability and Clotting. <i>Semin Thromb Hemost</i> 2019;45(6):576-592
14	Marongiu F, Mameli A, Grandone E, Barcellona D. Pulmonary Thrombosis: A Clinical Pathological Entity Distinct from Pulmonary Embolism? <i>Semin Thromb Hemost</i> 2019;45(8):778-783
15	Konstantinidi A, Sokou R, Parastatidou S, et al. Clinical Application of Thromboelastography/Thromboelastometry (TEG/TEM) in the Neonatal Population: A Narrative Review. <i>Semin Thromb Hemost</i> 2019;45(5):449-457
15	Lippi G, Gosselin R, Favaloro EJ. Current and Emerging Direct Oral Anticoagulants: State-of-the-Art. <i>Semin Thromb Hemost</i> 2019;45(5):490-501
15	Lebreton A, Sinagre T, Lecompte T, Talon L, Abergel A, Lisman T. Thrombin Generation and Cirrhosis: State of the Art and Perspectives. <i>Semin Thromb Hemost</i> 2020;46(6):693-703
15	Christensen B, Favaloro EJ, Lippi G, Van Cott EM. Hematology Laboratory Abnormalities in Patients with Coronavirus Disease 2019 (COVID-19). <i>Semin Thromb Hemost</i> 2020;46(7):845-849
16	Riedl J, Ay C. Venous Thromboembolism in Brain Tumors: Risk Factors, Molecular Mechanisms, and Clinical Challenges. <i>Semin Thromb Hemost</i> 2019;45(4):334-341
16	Tabibian S, Shiravand Y, Shams M, et al. A Comprehensive Overview of Coagulation Factor V and Congenital Factor V Deficiency. <i>Semin Thromb Hemost</i> 2019;45(5):523-543
16	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;45(6):569-575
16	Bastida JM, Benito R, Lozano ML, Marín-Quilez A, et al. Molecular Diagnosis of Inherited Coagulation and Bleeding Disorders. <i>Semin Thromb Hemost</i> 2019;45(7):695-707

(Continued)

Table 1 (Continued)

Citation rank	Citation/Reference
16	Thiele T, Greinacher A. Platelet Transfusion in Perioperative Medicine. <i>Semin Thromb Hemost</i> 2020;46(1):50-61
16	Moore HB, Moore EE. Temporal Changes in Fibrinolysis following Injury. <i>Semin Thromb Hemost</i> 2020;46(2):189-198
17	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;45(3):275-284
17	Tawil N, Bassawon R, Rak J. Oncogenes and Clotting Factors: The Emerging Role of Tumor Cell Genome and Epigenome in Cancer-Associated Thrombosis. <i>Semin Thromb Hemost</i> 2019;45(4):373-384
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;45(4):396-412
17	Sharma BK, Flick MJ, Palumbo JS. Cancer-Associated Thrombosis: A Two-Way Street. <i>Semin Thromb Hemost</i> 2019;45(6):559-568
17	Lacroix R, Vallier L, Bonifay A, et al. Microvesicles and Cancer Associated Thrombosis. <i>Semin Thromb Hemost</i> 2019;45(6):593-603
17	Black JA, Pierce VS, Kerby JD, Holcomb JB. The Evolution of Blood Transfusion in the Trauma Patient: Whole Blood Has Come Full Circle. <i>Semin Thromb Hemost</i> 2020;46(2):215-220
17	Hartmann J, Walsh M, Grisoli A, et al. Diagnosis and Treatment of Trauma-Induced Coagulopathy by Viscoelastography. <i>Semin Thromb Hemost</i> 2020;46(2):134-146
17	Roberts LN, Bernal W. Incidence of Bleeding and Thrombosis in Patients with Liver Disease. <i>Semin Thromb Hemost</i> 2020;46(6):656-664
17	Khemichian S, Terrault NA. Thrombopoietin Receptor Agonists in Patients with Chronic Liver Disease. <i>Semin Thromb Hemost</i> 2020;46(6):682-692

^aCited 7 or more times in 2021; thus, contributing most to the *Seminars in Thrombosis and Hemostasis* (STH) 2021 Impact Factor (IF). Citation rank is ranked according to number of citations; publications with the same number of citations have been given the same rank. Citation rank is shared with Commentaries identified in ► **Table 2**.

- Acquired Platelet Dysfunction-Laboratory and Clinical Implications. Guest Editors: Hvas AM, Larsen JB, Pasalic L. Four papers in the top listing (► **Table 1**).
- Molecular and Genetic Testing in Thrombosis and Hemostasis. Guest Editors: Rabbolini DJ, Othman M. Two papers in the top listing (► **Table 1**).

It is therefore also pleasing to continue to see that nonspecifically themed compilation issues, publishing primarily unsolicited papers accepted for publication after peer review, continue to do as well as specifically themed issues, publishing primarily solicited papers accepted for publication after peer review.

Metrics around Publication Acceptance Rates

I thought this editorial would also continue to provide an update on 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.^{1,68} All issues of STH contain around 10 full articles each, for a total of approximately 80 full articles per year (in 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 specifically themed-issue concept, STH now

also publishes unsolicited material, including the occasional original study, although these are limited to a maximum of around 10 per year (or ~10–15% of full article content). Moreover, original studies are more likely to be published in the nonspecifically themed “composite” issues, and more likely to reflect unsolicited material. In contrast, most content in the specifically themed issues would represent solicited material, and thus mostly reviews. Of course, some original papers may form a very small component of specifically 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 for consideration for publication, but original studies are more likely to be declined.

Some data from 2018 to 2021 is shown in ► **Figs. 4,5,6**. ► **Fig. 4** identifies the trends for papers published in STH over the years 2015 to 2021 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 6 years is as expected, or around 80 to 100 full papers per year. Most are reviews, and very few are original studies or what I call “hybrid” papers. Thus, STH has published from 6 to 16 original papers per year from 2015 to 2021 (average 10.3), with this representing an overall average of 11.9% of all full papers published over these years (range 7.6–15.8%). STH also publishes a Preface with all

Table 2 Commentaries published in 2020—also popular^a

Citation rank	Citation/Reference
4	Thachil J, Srivastava A. SARS-2 Coronavirus-Associated Hemostatic Lung Abnormality in COVID-19: Is It Pulmonary Thrombosis or Pulmonary Embolism? <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):777-780. doi: 10.1055/s-0040-1712155
5	Levi M, Thachil J. Coronavirus Disease 2019 Coagulopathy: Disseminated Intravascular Coagulation and Thrombotic Microangiopathy—Either, Neither, or Both. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):781-784. doi: 10.1055/s-0040-1712156
8	Larsen JB, Pasalic L, Hvas AM. Platelets in Coronavirus Disease 2019. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):823-825. doi: 10.1055/s-0040-1710006
8	de Maat S, de Mast Q, Danser AHJ, van de Veerdonk FL, Maas C. Impaired Breakdown of Bradykinin and Its Metabolites as a Possible Cause for Pulmonary Edema in COVID-19 Infection. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):835-837. doi: 10.1055/s-0040-1712960
9	Schulman S. Coronavirus Disease 2019, Prothrombotic Factors, and Venous Thromboembolism. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):772-776. doi: 10.1055/s-0040-1710337
10	Kwaan HC. Coronavirus Disease 2019: The Role of the Fibrinolytic System from Transmission to Organ Injury and Sequelae. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):841-844. doi: 10.1055/s-0040-1709996
12	Favaloro EJ, Lippi G. Recommendations for Minimal Laboratory Testing Panels in Patients with COVID-19: Potential for Prognostic Monitoring. <i>Semin Thromb Hemost.</i> 2020 Apr;46(3):379-382. doi: 10.1055/s-0040-1709498
13	Parra-Izquierdo I, Aslan JE. Perspectives on Platelet Heterogeneity and Host Immune Response in Coronavirus Disease 2019 (COVID-19). <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):826-830. doi: 10.1055/s-0040-1715093
16	Dorgalaleh A. Bleeding and Bleeding Risk in COVID-19. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):815-818. doi: 10.1055/s-0040-1713434
17	Thachil J, Lisman T. Pulmonary Megakaryocytes in Coronavirus Disease 2019 (COVID-19): Roles in Thrombi and Fibrosis. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):831-834. doi: 10.1055/s-0040-1714274
18	Vadasz Z, Brenner B, Toubi E. Immune-Mediated Coagulopathy in COVID-19 Infection. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):838-840. doi: 10.1055/s-0040-1714272
18	Horowitz NA, Brenner B. Thrombosis and Hemostasis Issues in Cancer Patients with COVID-19. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):785-788. doi: 10.1055/s-0040-1714275
19	Coppola A, Tagliaferri A, Rivolta GF, Quintavalle G, Franchini M. Confronting COVID-19: Issues in Hemophilia and Congenital Bleeding Disorders. <i>Semin Thromb Hemost.</i> 2020 Oct;46(7):819-822

^aLike papers listed in ► **Table 1**, these commentaries were also cited 7 or more times in 2021; however, being identified as “Editorial” material, these did not contribute to the *Seminars in Thrombosis and Hemostasis* (STH) 2021 Impact Factor (IF). Citation rank is rank according to number of citations (i.e., commentaries with the same number of citations have been given the same rank). Citation rank is shared with publications identified in ► **Table 1**.

issues, as well as a few Editorials per year. STH also publishes a few Letters to The Editor (“Correspondence”) per year (average 9.4), mostly within the nonspecifically themed composite issues that I guest edit with Prof. Lippi. Note that 2020 was an unusual year in that STH also published a number of Commentaries in the COVID-19 issue (noted within the “Other” category in ► **Fig. 4**; most listed in ► **Table 2**).

► **Fig. 5** identifies the number of unsolicited items received for consideration for publication in STH per year for original studies, reviews, and correspondence. As shown, STH is receiving an increasing number of unsolicited items per year, currently close to 100 items, with similar numbers of reviews and original studies. Interestingly, the number of original studies received for consideration seems to be falling, but this might reflect an increasing knowledge of our fairly restrictive policy regarding limited acceptance of original articles. The years 2020 and 2021 have also seen a jump in Letters to The Editor (“Correspondence”) received, perhaps in part since we advise some authors of original articles, which we decline to publish as original articles, that

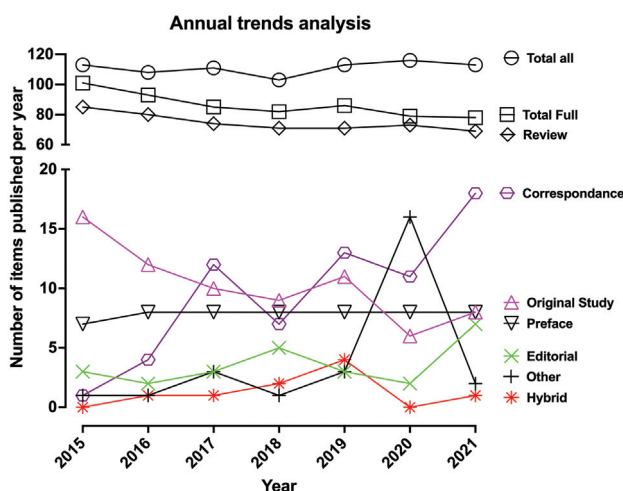


Fig. 4 Annual trends analysis 1: Number of items published in *Seminars in Thrombosis and Hemostasis* by year from 2015 to 2021 for reviews, full-length original study articles, total full-length articles (reviews plus original studies), Letters to the Editor (“Correspondence”), Prefaces, Editorials, hybrid papers (review with some original material), “other” (mostly Commentaries), and total of all items.

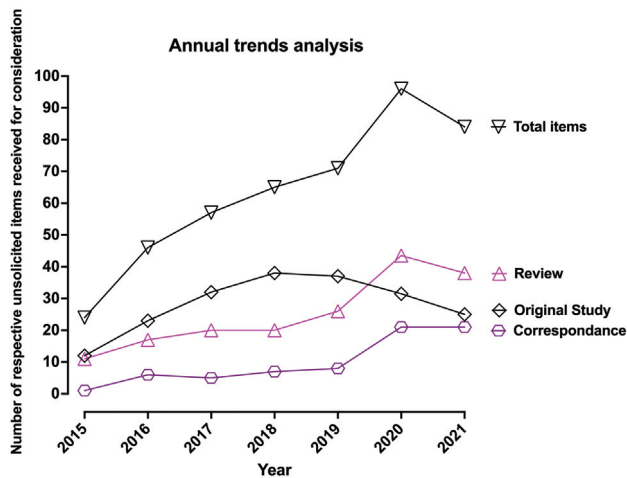


Fig. 5 Annual trends analysis 2: Number of respective unsolicited items received for consideration for publication in *Seminars in Thrombosis and Hemostasis* by year from 2015 to 2021 for reviews, full-length original study articles, and Letters to the Editor (“Correspondence”).

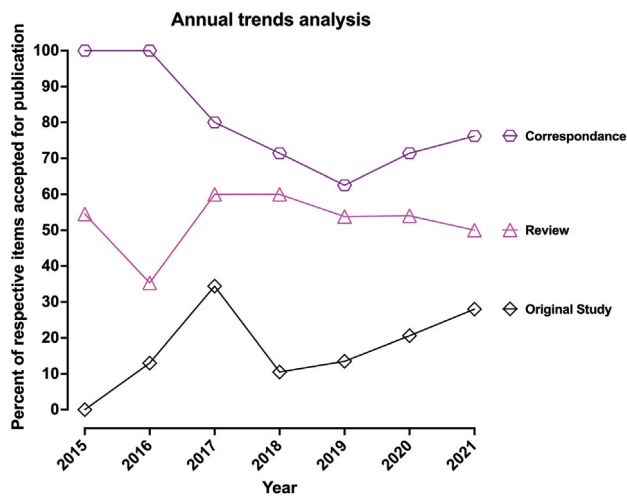


Fig. 6 Annual trends analysis 3: Percentage of respective unsolicited items from Fig. 5 published in *Seminars in Thrombosis and Hemostasis* by year from 2015 to 2021 for reviews, full-length original study articles, and Letters to the Editor (“Correspondence”).

STH might instead consider to publish a portion of their study as Correspondence.

► **Fig. 6** identifies the percentage of the unsolicited items received from ► **Fig. 5** that are finally accepted for publication. 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 generally fallen, and in 2017–2021, STH has only published approximately 70 to 80% of those received, with some of these including submissions converted from full original article submissions. Currently, STH

declines around 50% of unsolicited reviews, a percentage that has remained fairly stable over the years 2017–2021. STH continues to decline 70 to 90% of unsolicited original studies (► **Fig. 6**). Again, the apparent increasing trend of acceptance rates for original studies between 2018 and 2021 needs to be considered against the background of decline in unsolicited original study submissions (► **Fig. 5**) and the more or less stable publication of approximately 10 original studies per year (► **Fig. 4**).

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 content doubled the second year, publishing four issues with over 400 pages. 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. Note that 2020 identifies a landmark year in which the journal published just over 1,000 pages, with 2021 being just shy of 1,000 pages.

This leads me to talk about “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 2008,⁶⁹ 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, and the first issue of 2024 will mark the “official” 50th “birthday.” Just as we did for the 40th year anniversary in 2014,^{70,71} we will aim to again provide a few historical issues to celebrate this landmark. The first of these will appear as the last issue (November) of 2022, with the remainder published in either 2023 (50th year of

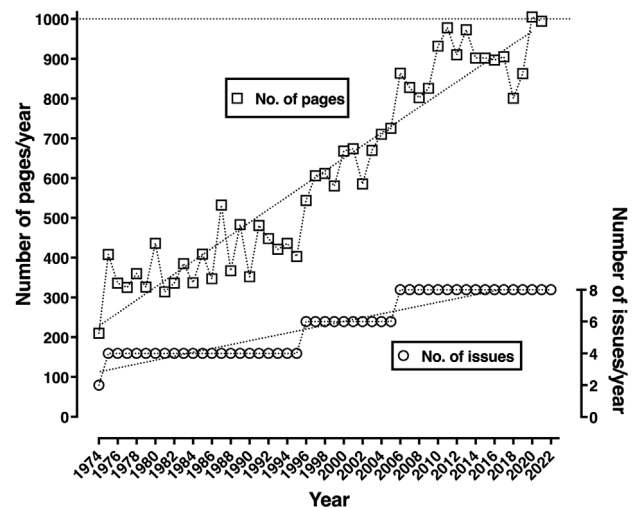


Fig. 7 Number of pages (left y-axis) and number of issues (right y-axis) published in *Seminars in Thrombosis and Hemostasis* per year by year 1974 to 2021.

publication) or 2024 (official 50th “birthday” year). Also, 2024 will also mark my 15-year 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.

References

- Favaloro EJ. New STH (2020) Impact Factor, Most Highly Cited Papers, and Other Journal Metrics. *Semin Thromb Hemost* 2021; 47(07):745–753
- COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU). Accessed July 3, 2022 at: <https://www.arcgis.com/apps/dashboards/bda7594740fd40299423467b48e9ecf6>
- National Library of Medicine/National Center for Biotechnology Information/PubMed.com Accessed July 3, 2022 at: <https://pubmed.ncbi.nlm.nih.gov/?term=covid-19>
- Favaloro EJ, Lippi G. Maintaining hemostasis and preventing thrombosis in coronavirus disease 2019 (COVID-19)-part I. *Semin Thromb Hemost* 2020;46(07):757–762
- Favaloro EJ, Lippi G. Maintaining hemostasis and preventing thrombosis in coronavirus disease 2019 (COVID-19): part II. *Semin Thromb Hemost* 2021;47(04):333–337
- Favaloro EJ, Lippi G. Maintaining hemostasis and preventing thrombosis in coronavirus disease 2019 (COVID-19)-part III. *Semin Thromb Hemost* 2022;48(01):3–7
- Favaloro EJ. 2021 Eberhard F. Mammen Award Announcements: part I-most popular articles. *Semin Thromb Hemost* 2021;47(05):467–476
- Favaloro EJ. The Journal Impact Factor: don't expect its demise any time soon. *Clin Chem Lab Med* 2009;47(11):1319–1324
- Favaloro EJ. Measuring the quality of journals and journal articles: the impact factor tells but a portion of the story. *Semin Thromb Hemost* 2008;34(01):7–25
- Di Minno A, Ambrosino P, Calcaterra I, Di Minno MND. COVID-19 and venous thromboembolism: a meta-analysis of literature studies. *Semin Thromb Hemost* 2020;46(07):763–771
- Kumar KR, Cowley MJ, Davis RL. Next-generation sequencing and emerging technologies. *Semin Thromb Hemost* 2019;45(07):661–673
- Laridan E, Martinod K, De Meyer SF. Neutrophil extracellular traps in arterial and venous thrombosis. *Semin Thromb Hemost* 2019; 45(01):86–93
- Iba T, Levi M, Levy JH. Sepsis-induced coagulopathy and disseminated intravascular coagulation. *Semin Thromb Hemost* 2020;46(01):89–95
- Kwaan HC, Lindholm PF. Fibrin and fibrinolysis in cancer. *Semin Thromb Hemost* 2019;45(04):413–422
- Hisada Y, Mackman N. Tissue factor and cancer: regulation, tumor growth, and metastasis. *Semin Thromb Hemost* 2019;45(04):385–395
- Arachchilage DR, Laffan M. Pathogenesis and management of thrombotic disease in myeloproliferative neoplasms. *Semin Thromb Hemost* 2019;45(06):604–611
- Danese E, Montagnana M, Favaloro EJ, Lippi G. Drug-induced thrombocytopenia: mechanisms and laboratory diagnostics. *Semin Thromb Hemost* 2020;46(03):264–274
- 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. *Semin Thromb Hemost* 2019;45(01):22–35
- Levi M. Disseminated intravascular coagulation in cancer: an update. *Semin Thromb Hemost* 2019;45(04):342–347
- Al-Samkari H, Kuter DJ. Immune thrombocytopenia in adults: modern approaches to diagnosis and treatment. *Semin Thromb Hemost* 2020;46(03):275–288
- Page MJ, Pretorius E. A champion of host defense: a generic large-scale cause for platelet dysfunction and depletion in infection. *Semin Thromb Hemost* 2020;46(03):302–319
- Mahajan A, Brunson A, White R, Wun T. The epidemiology of cancer-associated venous thromboembolism: an update. *Semin Thromb Hemost* 2019;45(04):321–325
- 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. *Semin Thromb Hemost* 2019;45(05):502–508
- Gosselin RC, Marlar RA. Preanalytical variables in coagulation testing: setting the stage for accurate results. *Semin Thromb Hemost* 2019;45(05):433–448
- Dvorak HF. Tumors: wounds that do not heal—a historical perspective with a focus on the fundamental roles of increased vascular permeability and clotting. *Semin Thromb Hemost* 2019;45(06):576–592
- Marongiu F, Mameli A, Grandone E, Barcellona D. Pulmonary thrombosis: a clinical pathological entity distinct from pulmonary embolism? *Semin Thromb Hemost* 2019;45(08):778–783
- Konstantinidi A, Sokou R, Parastatidou S, et al. Clinical application of thromboelastography/thromboelastometry (TEG/TEM) in the neonatal population: a narrative review. *Semin Thromb Hemost* 2019;45(05):449–457
- Lippi G, Gosselin R, Favaloro EJ. Current and emerging direct oral anticoagulants: state-of-the-art. *Semin Thromb Hemost* 2019;45(05):490–501
- Lebreton A, Sinegre T, Lecompte T, Talon L, Abergel A, Lisman T. Thrombin generation and cirrhosis: state of the art and perspectives. *Semin Thromb Hemost* 2020;46(06):693–703
- Christensen B, Favaloro EJ, Lippi G, Van Cott EM. Hematology laboratory abnormalities in patients with coronavirus disease 2019 (COVID-19). *Semin Thromb Hemost* 2020;46(07):845–849
- Riedl J, Ay C. Venous thromboembolism in brain tumors: risk factors, molecular mechanisms, and clinical challenges. *Semin Thromb Hemost* 2019;45(04):334–341
- Tabibian S, Shiravand Y, Shams M, et al. A comprehensive overview of coagulation factor V and congenital factor V deficiency. *Semin Thromb Hemost* 2019;45(05):523–543
- Mege D, Aubert M, Lacroix R, Dignat-George F, Panicot-Dubois L, Dubois C. Involvement of platelets in cancers. *Semin Thromb Hemost* 2019;45(06):569–575
- Bastida JM, Benito R, Lozano ML, et al. Molecular diagnosis of inherited coagulation and bleeding disorders. *Semin Thromb Hemost* 2019;45(07):695–707
- Thiele T, Greinacher A. Platelet transfusion in perioperative medicine. *Semin Thromb Hemost* 2020;46(01):50–61
- Moore HB, Moore EE. Temporal changes in fibrinolysis following injury. *Semin Thromb Hemost* 2020;46(02):189–198
- 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. *Semin Thromb Hemost* 2019;45(03):275–284
- Tawil N, Bassawon R, Rak J. Oncogenes and clotting factors: the emerging role of tumor cell genome and epigenome in cancer-associated thrombosis. *Semin Thromb Hemost* 2019;45(04):373–384
- Rondon AMR, Kroone C, Kapteijn MY, Versteeg HH, Buijs JT. Role of tissue factor in tumor progression and cancer-associated thrombosis. *Semin Thromb Hemost* 2019;45(04):396–412
- Sharma BK, Flick MJ, Palumbo JS. Cancer-associated thrombosis: a two-way street. *Semin Thromb Hemost* 2019;45(06):559–568
- Lacroix R, Vallier L, Bonifay A, et al. Microvesicles and cancer associated thrombosis. *Semin Thromb Hemost* 2019;45(06):593–603

- 42 Black JA, Pierce VS, Kerby JD, Holcomb JB. The evolution of blood transfusion in the trauma patient: whole blood has come full circle. *Semin Thromb Hemost* 2020;46(02):215–220
- 43 Hartmann J, Walsh M, Grisoli A, et al. Diagnosis and treatment of trauma-induced coagulopathy by viscoelastography. *Semin Thromb Hemost* 2020;46(02):134–146
- 44 Roberts LN, Bernal W. Incidence of bleeding and thrombosis in patients with liver disease. *Semin Thromb Hemost* 2020;46(06):656–664
- 45 Khemichian S, Terrault NA. Thrombopoietin receptor agonists in patients with chronic liver disease. *Semin Thromb Hemost* 2020;46(06):682–692
- 46 Favalaro EJ. 2020 Eberhard F. Mammen Award Announcements: part I—most popular articles. *Semin Thromb Hemost* 2020;46(04):383–392
- 47 Favalaro EJ. 2022 Eberhard F. Mammen Award Announcements: part I—most popular articles. *Semin Thromb Hemost* 2022;48(05):502–513
- 48 Thachil J, Srivastava A. SARS-2 coronavirus-associated hemostatic lung abnormality in COVID-19: is it pulmonary thrombosis or pulmonary embolism? *Semin Thromb Hemost* 2020;46(07):777–780
- 49 Levi M, Thachil J. Coronavirus disease 2019 coagulopathy: disseminated intravascular coagulation and thrombotic microangiopathy—either, neither, or both. *Semin Thromb Hemost* 2020;46(07):781–784
- 50 Larsen JB, Pasalic L, Hvas AM. Platelets in coronavirus disease 2019. *Semin Thromb Hemost* 2020;46(07):823–825
- 51 de Maat S, de Mast Q, Danser AHJ, van de Veerdonk FL, Maas C. Impaired breakdown of bradykinin and its metabolites as a possible cause for pulmonary edema in COVID-19 infection. *Semin Thromb Hemost* 2020;46(07):835–837
- 52 Schulman S. Coronavirus disease 2019, prothrombotic factors, and venous thromboembolism. *Semin Thromb Hemost* 2020;46(07):772–776
- 53 Kwaan HC. Coronavirus disease 2019: the role of the fibrinolytic system from transmission to organ injury and sequelae. *Semin Thromb Hemost* 2020;46(07):841–844
- 54 Favalaro EJ, Lippi G. Recommendations for minimal laboratory testing panels in patients with COVID-19: potential for prognostic monitoring. *Semin Thromb Hemost* 2020;46(03):379–382
- 55 Parra-Izquierdo I, Aslan JE. Perspectives on platelet heterogeneity and host immune response in coronavirus disease 2019 (COVID-19). *Semin Thromb Hemost* 2020;46(07):826–830
- 56 Dorgalaleh A. Bleeding and bleeding risk in COVID-19. *Semin Thromb Hemost* 2020;46(07):815–818
- 57 Thachil J, Lisman T. Pulmonary megakaryocytes in coronavirus disease 2019 (COVID-19): roles in thrombi and fibrosis. *Semin Thromb Hemost* 2020;46(07):831–834
- 58 Vadasz Z, Brenner B, Toubi E. Immune-mediated coagulopathy in COVID-19 infection. *Semin Thromb Hemost* 2020;46(07):838–840
- 59 Horowitz NA, Brenner B. Thrombosis and hemostasis issues in cancer patients with COVID-19. *Semin Thromb Hemost* 2020;46(07):785–788
- 60 Coppola A, Tagliaferri A, Rivolta GF, Quintavalle G, Franchini M. Confronting COVID-19: issues in hemophilia and congenital bleeding disorders. *Semin Thromb Hemost* 2020;46(07):819–822
- 61 Favalaro EJ. 2017 Eberhard F. Mammen award announcements: part II—young investigator awards. *Semin Thromb Hemost* 2018;44(02):81–88
- 62 Kwaan HC, Lindholm PF. Emerging paradigms of thrombosis and cancer (part I): the yin yang relationship between thrombosis and cancer. *Semin Thromb Hemost* 2019;45(04):319–320
- 63 Favalaro EJ, Lippi G. Editorial compilation VI. *Semin Thromb Hemost* 2019;45(01):5–9
- 64 Favalaro EJ, Lippi G. Editorial compilation VII. *Semin Thromb Hemost* 2019;45(05):429–432
- 65 Kwaan HC, Lindholm PF. Emergent paradigms of thrombosis and cancer (part II): more on thrombosis and cancer. *Semin Thromb Hemost* 2019;45(06):557–558
- 66 Hvas AM, Larsen JB, Pasalic L. Acquired platelet dysfunction—laboratory and clinical implications. *Semin Thromb Hemost* 2020;46(03):235–237
- 67 Rabbolini DJ, Othman M. Molecular and genetic testing in thrombosis and hemostasis. *Semin Thromb Hemost* 2019;45(07):657–660
- 68 Favalaro EJA. 2018 update on the editorial and publication policy of seminars in thrombosis and hemostasis. *Semin Thromb Hemost* 2018;44(04):307–311
- 69 Favalaro EJ. A tribute to Eberhard F. Mammen, M.D. (1930–2008). *Semin Thromb Hemost* 2008;34(08):703–707
- 70 Favalaro EJ. A short history of thrombosis and hemostasis: part I (40th year celebratory issue). *Semin Thromb Hemost* 2014;40(05):521–525
- 71 Favalaro EJ. A short history of thrombosis and hemostasis: part II (40th year celebratory issue). *Semin Thromb Hemost* 2014;40(08):826–830