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## Advancing towards a *crescendo* in 2007

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Another year has gone by and *The Journal of Headache and Pain (JHP)* today begins its 8th waltz in our libraries and on our desks. The journal's recent history fills me with amazement. When reading the 2006 statistics reported on the Manuscript Central submission site, I find myself overwhelmed with emotion at the course it has taken.

The acceptance ratio has settled at around 36%, and the number of submitted papers has increased three times and consequently enormously boosted the activity of our referees, to whom my gratitude goes for their precise, meticulous and always measured evaluations. *JHP* would not exist without their work.

### Submission workflow

A further point showing the referees' brisk activity and therefore deserving to be cited is the promptness of the analysis of manuscripts. During 2006, the average time from first submission to acceptance was only 27 days.

The readership of *JHP* is constituted both by researchers and clinicians who refer to our journal for professional updates. Education in headache is, at present, as well as in the future, one of our priorities. This is justified by the great success of

Tutorials, almost equal to that of Reviews, revealed in the huge number of article downloads from PubMed Linkouts (as the number of times in which users are directly linked to Springer article abstract pages). Compared to 2005, downloads of full articles grew in 2006, according to monthly ratios, between 3 and 5 times. The strong demand for constant updates is unquestionable. The possibility of Open Choice represents an accomplished attempt, making reviews of special scientific interest available as free downloads. This successful pilot launch will be expanded at each 2007 issue, with at least one review and/or editorial free-of-charge for all readers. This initiative aims to increase *JHP*'s number of citations.

Finally, the limits of *JHP*'s area of interests have been codified. Since its foundation, pain as a topic has been, and always will be, related to the neck-cranio-facial region.

### Potential conflict of interest

A delicate matter of contention always producing criticism, more or less evident, is represented by authors' conflict of interest. Recently several points of view have appeared, debating the ethics of both direct and

indirect relations with sponsors. The limits interpretation of this concept, always variable, should find a shared base of identical rules for authors, reviewers and Board members. It would be a sign of arrogance to recommend here the correct approach for professional ethics in private or institutional associations, with drug companies or any financial institution for research.

As *JHP* must provide as much information as possible about published research, we have chosen to include in the submission procedure an obligatory statement concerning the presence or absence of conflict of interests. *Ça va sans dire*, the aim of this statement is not to demonise anyone or nourish unproductive controversies, a problem we will come back to, if necessary. This statement will be available for all readers who want to consult it.

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### Education in headache medicine

Education has always constituted one of *JHP*'s strategic priorities. Again last year, most of the Tutorials were the result of lectures held by the Authors at the Master in Headache Medicine at La Sapienza University of Rome. This educational partnership between the academy and the scientific journal will continue, in order to strengthen the idea, in force in Europe, that attribution of specialist titles can only be certified by universities and not by scientific societies, no matter how ancient or prestigious.

It is time to think over education in headache medicine, as Schools of Medicine around the world dedicate a low number of hours to headache, for obvious reasons of educational offers and curricular plans, with occasional exceptions for universities where

recognised field experts wield their influence on study plans. By now, it has become clear that pedagogic procedures of headache medicine should be replaced with andragogic ones. In fact, clinicians approaching headache are quite often not young graduates and will therefore be trained according to andragogic-based models. Together with these ideas, the concept of lifelong learning in headache medicine also finds fertile ground in *JHP* for its diffusion.

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### Acknowledgements

In conclusion, grateful thanks go to both the European Headache Federation, the scientific platform that acted as a flywheel for *JHP*'s natural growth, and the Italian Society for the Study of Headache, which kept believing in the project regarding the third editorial choice in Headache.

Thank you also to Springer, whose positive feedback to new ideas remain excellent.

A renewed and grateful thank you goes to all the Referees who put their expertise at the disposition of the *Journal*, helping me with decisions that were not always easily taken. Thank you as well to the Editorial Board on the whole for its burdensome but punctual work, and thanks to my Editorial Office, which makes it possible to dispatch back-office work with incredible swiftness.

I am certain that having subtracted the tare of enthusiasm, both our readers and contributors will be able to favourably evaluate and support *JHP*'s *crescendo* towards its *finale* of ISI inclusion.

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Editor-in-Chief