



# LUNG Year in Review: 2022

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The year 2022 marked a period of further growth and progress at *LUNG*. Positive results achieved by a new editorial team in its first two years of stewardship of the journal [1] continued in 2022, as evidenced by numbers of article downloads and an impressive increase of 46% in journal impact factor. High-quality submissions continued to stream in from authors worldwide, resulting in a declining article acceptance rate to under 15%.

Studies of obstructive airway disease comprised a significant portion of articles published in 2022. Clinical studies of COPD examined diagnosis [2], risk factors [3], predictors of outcomes [4–9], and therapeutic interventions [10, 11], whereas preclinical investigations evaluated chronic cigarette smoke-induced inflammation and airway remodeling [12, 13]. Contributions in the field of asthma included physiological studies [14–18], effects of therapeutic interventions [19], social determinants of clinical outcomes [20], asthma-associated cough [21, 22] and preclinical investigations [23].

The journal was delighted to feature a number of investigations in the rapidly growing field of Interventional Pulmonology. Published studies evaluated transbronchial lung cryobiopsy [24, 25], endobronchial ultrasound (EBUS)-guided procedures [26–28] as well as novel robotic-assisted bronchoscopy and cryobiopsy [29, 30].

Lung cancer remains a major focus of investigation within the fields of pulmonary medicine and oncology. Relevant articles published in *LUNG* in 2022 reported on diagnostic markers [31], risk factors and prognosis [32–38], as well as medical [39] and surgical intervention [40].

Appropriate to their significance in pulmonary medicine, interstitial lung diseases (ILD) and idiopathic pulmonary fibrosis (IPF) were well represented in the journal. Studies of IPF investigated potential mechanisms [41], animal models of induced fibrosis [42], potential biomarkers [43] and

clinical outcomes [44]. Contributions on the subject of ILD included evaluation of potential biomarkers [45], diagnostic cryobiopsy [24], pediatric ILD [46], ILD outcomes [47], as well as investigations of hypersensitivity pneumonitis [48] and bronchiectasis [49, 50].

In recent years, the study of cough has been among the most active areas of inquiry within pulmonary medicine. Indeed, 2022 witnessed the approval of the first-ever drug indicated for the treatment of refractory chronic cough [51, 52]. *LUNG* continued its emphasis on high-quality cough-related research by featuring numerous articles, including those examining asthma-associated cough [21, 22]; cough associated with IPF [53] and COVID19 [54]; methodology of objective cough counting [55, 56]; cough-related health-care utilization [57, 58]; physiology [59]; and, studies of potential antitussive drugs [60–62].

Among the goals of the journal in 2022 was to enhance content in preclinical and translational research. To that end, *LUNG* assigned a Deputy Editor for Basic Science Research to spearhead this effort going forward. Publications during the year included studies relevant to cigarette smoke-induced airway injury and COPD [12, 13]; asthma [23]; pulmonary fibrosis [42]; pulmonary hypertension [63]; sarcoidosis [64]; allergic airway inflammation [65]; immunity [66]; and, acute lung injury [67].

We remain eager to increase publication of high-quality manuscripts in the fields of Critical Care and Pediatric Pulmonology, and invite prospective authors to submit their work for consideration. Studies examining issues in critical illness included intravascular volume management in acute pulmonary embolism [68]; liver transplantation [69]; non-invasive ventilation [70, 71]; pulmonary effects of anesthesia [72]; and, a preclinical examination of acute lung injury [67]. Investigations of pediatric populations included topics such as management of bronchopulmonary dysplasia [73], interstitial lung disease [46] and asthma [17].

Pulmonary arterial hypertension continues to be an active focus of investigation within respiratory medicine. Studies published in 2022 included a State-of-the-Art review on chronic thromboembolic pulmonary hypertension [74];

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diagnosis and associated conditions [75, 76]; and, preclinical mechanistic investigations [63]. Contributions in the field of thoracic imaging evaluated diagnostic capabilities of new technological advances in computed tomography [30, 77–80] as well as prone imaging in chest radiography [81].

The journal remained very selective in accepting COVID-19 related submissions, publishing only two particularly significant articles comparing virulence among SARS-CoV-2 variants [82] and evaluating pandemic-associated cough [54]. Other notable publications in the area of infectious disease included a State-of-the-Art review of *Strongyloides stercoralis* [83], an outcome analysis of Blastomycosis infections [84], and an investigation of cytomegalovirus (CMV) infection in lung transplant recipients [85].

Additional clinically relevant topics covered in our pages in 2022 included cytokines in lung transplantation [86]; pulmonary function in various populations [87, 88]; effects of tobacco and nicotine use [89, 90]; idiopathic pulmonary hemosiderosis [91]; pulmonary capillary hemangiomatosis [92]; and evaluation of pleural effusions [93].

The editorial team at *LUNG* steadfastly maintains its goal of continued improvement of the quality and impact of our journal, and to further expand our readership. To that end, we will remain dependent on our colleagues worldwide, working at the bedside and in the laboratory, to contribute their quality work to *LUNG*.

## Declarations

**Conflict of interest** Peter Dicipinigitis, MD, is the Editor-in-Chief of *LUNG*.

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