

Is *Hernia* in fact a world journal?

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The first issue of *Hernia* was published in May of 1997 by Springer-Verlag as the official publication of the European Research Group on the Abdominal Wall (GREPA) and the American Hernia Society (AHS). The Editor-in-Chief was J. P. Chevrel of Paris, France who initiated this action [1]. It was dedicated to the study of herniation affecting the abdomen, the most common indication for operations performed by general surgeons at that time. These procedures were often delegated to junior staff so that their seniors could concentrate their efforts on what was then considered to be more challenging, surgery of the digestive tract or cardiovascular system. Chevrel, with a small group of French surgeons, had founded GREPA in 1979, 17 years before the AHS was formed under the leadership of Arthur Gilbert of Miami supported by a dozen other herniologists in the United States. From the inception of *Hernia*, the statement “The World Journal of Hernia and Abdominal Wall Surgery” has been placed on the front cover of each issue.

At an editorial meeting regarding *Hernia* held on June 20, 2003, performance and achievements were documented. Considerably more manuscripts related to the topic of hernia were being published in *Hernia* compared with the *Annals of Surgery*, *Archives of Surgery*, the *American Journal of Surgery*, and the *British Journal of Surgery*. Participating countries had increased from 9 in 1997 to 18 in 2002. Articles and reviews dominated, and case reports had climbed from 2 in 1997 to 12 in 2002. Continents involved were Europe, America, Asia, Australia, and Africa. The number of manuscripts published had doubled between 2001 and 2003.

In his June 2007 editorial at the tenth anniversary of *Hernia*, Schumpelick [2] quoted Nyhus [3] whose 1997 editorial was the first contribution to be published in the initial issue of *Hernia*. “We are indebted to Professor J. P. Chevrel and his colleagues in the Group for Study and Research of the Abdominal Wall (GREPA) of France for taking the initiative to produce a surgical journal dedicated to the study of hernia. The need for continuing study of this scourge of mankind is apparent when we remind ourselves that over 800,000 operations for the ‘cure’ of hernia are performed in the world each year.” Schumpelick then quoted Chevrel [1] who stressed that “Numerous problems are still without solutions today: the choice of an international classification acceptable to all, research into better prostheses, better refinement of the indications for traditional surgery from Bassini to Schouldice and of laparoscopic surgery.” Schumpelick [2] enumerated a total of 677 original contributions from 25 countries having been published in the journal *Hernia* since its inception.

In the next issue of *Hernia* (August 2007), Alexandre reported on the death of Jean-Paul Chevrel (1933–2006). The obituary [4] recounted his surgical education and the many skills he developed. He had formed a number of societies and belonged to others. He had published over 400 papers in French or international journals. He remained Editor-in-Chief of *Hernia* until 2001. His extensive travels around the world were made to present at conferences or meet with his counterparts abroad demonstrating intellectual precision. All of this was accomplished despite suffering from a painful implacable disease for 6 years.

Table 1 presents information regarding 1,221 original contributions (OCs) with first authors from 41 countries, which were published in 69 consecutive issues of *Hernia* from May 1997 until June 2011. The number of OCs increased from 42 in 1997 and 1998 to 134 in 2010 and 65

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Table 1 Published original contributions May 1997–June 2011

Years	Geographical region of origin						Total number of original contributions
	Europe ^a	North America ^b	Asia and Australia ^c	Central and South America ^d	Middle East ^e	Africa ^f	
1997	29	13	0	0	0	0	42
1998	23	18	0	1	0	0	42
1999	32	12	3	1	0	0	48
2000	49	13	1	3	2	0	68
2001	31	12	1	5	0	1	50
2002	26	15	2	2	3	0	48
2003	39	14	2	3	3	0	61
2004	69	34	4	5	3	1	116
2005	64	24	5	1	2	1	97
2006	54	31	9	4	3	0	101
2007	72	19	10	2	3	3	109
2008	76	36	13	4	2	2	133
2009	54	25	17	1	2	8	107
2010	82	25	16	4	3	4	134
2011	31	23	8	1	1	1	65
Total	731	314	91	37	27	21	1,221

^a Europe: United Kingdom 128, Italy 93, France 90, Germany 84, Turkey 84, Spain 57, the Netherlands 52, Greece 35, Sweden 33, Denmark 27, Belgium 18, Austria 13, Poland 10, Switzerland 7, Finland 6, Croatia 5, Bulgaria 3, Serbia 2, Ireland 2, Lithuania 2, Portugal 1, Hungary 1, Czech Republic 1, Estonia 1

^b North America: United States 304, Canada 10

^c Asia and Australia: India 52, China 12, Australia 11, Japan 5, South Korea 3, Taiwan 2, Singapore 2, Thailand 2, Brunei 1, Pakistan 1

^d Central and South America: Mexico 15, Brazil 14, Chile 5, Argentina 3

^e Middle East: Israel 14, Iran 7, Saudi Arabia 3, United Arab Emirates 2, Iraq 1

^f Africa: Egypt 11, Nigeria 3, Morocco 2, Ghana 2, Cameroon 1, South Africa 1, Tunisia 1

in the first half of 2011. Overall, most OCs came from Europe (731, 59.9%), with 90 from France and the remainder from 23 other countries. The next largest number of OCs came from the northern American continent (314, 25.7%), with 304 from the United States and 10 from Canada. In 1997, OCs originated only from Europe or North America. However, eventually a total of 91 (7.4%) OCs originated from Asia or Australia from 1997 to 2011 (10 countries), with 37 (3.0%) OCs originating in Central or South America during this time period (four countries), 27 (2.2%) from the Middle East (five countries), and 21 (1.7%) from Africa (seven countries) (Table 1).

Thus, Chevrel's remarkable vision of the future for herniology has been proven to be correct. He has inspired a new generation of surgeons to concentrate on a subspecialty

rather than remain in general surgery. The vision of *Hernia* as being a world journal is now a fact.

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