Editor's corner

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This issue opens with tributes to two giants in the field of surgery, both of whom died recently. Jean-Henri Alexandre and Robert Bendavid were not only surgeons of world renown, but also leading exponents of, respectively, the European Hernia Society and the American Hernia Society, which, together with the Asia Pacific Hernia Society, are affiliated with our prestigious journal.

Both will be remembered not only as friends, but also as leading researchers whose contribution to our community will be sorely missed.

This final issue of the year focuses on a series of topics, including post-operative pain. A forum will be devoted to this topic in 2020, in the wake of the two published this year on primary inguinal hernia and ventral primary hernia. This new forum will provide an update on the state of the art as “recounted” by leading experts through invited papers and by you, our readers, through your accounts of your personal experiences.

As you will have seen, one of the main new developments this year has been the creation of “topical issues”. Each of these, accessible via the homepage of our website, collects all the articles published on a specific topic.

As mentioned, the introduction, in 2019, of our special forum project, which this year turned the spotlight on primary inguinal hernia and primary ventral hernia, prompted the submission of a large number of articles dealing with these topics. These contributions certainly complemented the invited papers and enriched the topical issues. As you know, the topic of our next forum, which will likely appear in the first issue of 2020, is “complexity in hernia surgery”.

The lively debate and interest aroused by our articles in 2019 is reflected not only in a series of pleasing figures (Fig. 1), but also in the valuable exchanges of comments and rebuttals prompted by numerous articles.

In setting out to ensure that HERNIA continues to be, more and more, a truly global scientific journal in which everyone, without exception, can express their scientific thinking and surgical experience in compliance with editorial rules designed to guarantee high quality contributions, such stimulation of lively exchanges was, indeed, one of our key objectives.

With regard to the quality of the contributions, we wish to acknowledge the great scientific acumen and dedication of all the Associate Editors and Section Editors who, with the hugely valuable and crucial support of our Reviewers and of our International Advisory Board members have ensured that our rejection rate has remained very high and therefore that only high quality papers have made it into our journal.

The data, mentioned earlier, that convey the level of our achievements are the following: total number of yearly submissions was 568 (from 1/11/2018 to 1/11/2019), with manuscripts coming from 54 countries and all continents.

A total of 1863 reviewers have been invited and over 62% have completed a review.

The current 43 Associate and Section Editors have handled and reached a decision about 132 articles, with an average of 4 manuscripts being handled by each Editor per year. In 2019 the rejection rate has been 65% for all types of articles.

Time to first decision averaged 3 to 4 weeks depending on the type of article; while the average time from acceptance to online publication was 20 days.

As many as 160 articles have been published in 2019 organized in 6 issues, 2 of which were Forum on topical issues.

HERNIA articles have been downloaded 272,668 times in the latest 12 months.

The Journal welcomes original and review articles, letters to the Editor, “How-I-do-It” articles and comments on contributions published in Hernia. Due to limited space and priority, case reports may be considered only if they report important complications and technical aspects that have relevant impact in the daily management of Hernia surgery.

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Fig. 1 Submission and acceptance by country and continent from 1 November 2018 to 1 November 2019

An increasing numbers of comments to articles published in *Hernia* and subsequent Author's replies have appeared in the latest issues, creating lively discussions among the hernia community experts.

We hope that the great sense of satisfaction felt by us and by the International Advisory Board, Section Editors and reviewers, is shared by the broader international community of hernia surgeons, who consider our prestigious journal not just a beacon indicating the best route to follow, but also a veritable 'manual' able to support daily decision making in operating theatres around the world.

We wish you all a peaceful holiday season and a very happy new year.

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