Trasversus abdomini release, botulinum, pneumoperitoneum: are they sufficient support in the treatment of complex incisional hernia?

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There is no doubt that complex abdominal wall repair procedures constitute major surgery. Real loss of substance, deep infections, and multiple relapses, especially in patients with comorbidities, can result in highly complex situations in different surgical stages: presurgical optimisation, the surgery itself, and peri- and post-surgical management.

In addition to proving highly challenging even for the most expert surgeons, the management of these situations can be extremely costly for departments and hospitals alike. For all these reasons, it now seems inevitable that these cases will increasingly be concentrated in specialist centres that, in addition to being equipped with indisputable specific anatomical knowledge, specific surgical experience and in-depth understanding of these problems, are used to dealing with complex situations, and are also well resourced and efficiently run.

It is now clear that not all hospital surgery departments can or should take these patients.

In line with what we have seen in the fields of pancreatic and hepatobiliary surgery, specialist centres of reference are now emerging also for patients requiring surgery for reconstruction of complex abdominal wall defects.

An important initiative in this regard, launched by the European Commission and, in particular the UEMS, is the introduction of a European Board of Surgical

Qualification (EBSQ) examination in abdominal wall surgery.

The first exam session was held during the recent HERNIA 2021 meeting in Copenhagen, and may be seen as the first step towards European certification in this specialty field, which in turn is the natural prelude to the establishment of dedicated centres of excellence.

Many of the articles in this issue of *Hernia* come from outstanding and internationally renowned centres and focus on precisely the difficult situations mentioned above.

Giampiero Campanelli (Editor-in-Chief)

Note from the Editors

As the current year draws to a close, we are delighted to be able to share with you the results set out in the tables below, which show how our prestigious journal has gone from strength to strength over the past 3 years.

We extend our grateful thanks to all the members of the International Advisory Board, our section editors, reviewers, authors and readers.

Giampiero Campanelli, Editor-in-Chief, and the Associate Editors Jie Chen, Diego Cuccurullo, Namir Katkhouda, Davide Lomanto, Rachid Sani

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Tables 1 and 2.

Table 1 Journal's performance in the latest 3 years

Submissions (12 months from Nov to Nov)	2019	2020	2021
Total submitted	565	708	613
Total decided	510	662	547
Accept	179	209	155
Reject	326	448	377
Withdrawn	5	16	15
Acceptance rate	35%	32%	29%
Rejection rate	65%	68%	71%
Average turnaround times	2019	2020	2021
Average days to first decision	37.3	22.4	23.9

Table 2 Geographical origin of the manuscripts

<i>n</i>	Country	Submitted
1	United States	91
2	China	76
3	India	38
4	United Kingdom	38
5	Turkey	32
6	Italy	30
7	Spain	26
8	Japan	25
9	Brazil	22
10	Germany	17
11	The Netherlands	16
12	Greece	15
13	France	14
14	Australia	15
15	Canada	12
16	Denmark	12
17	Singapore	10
18	Taiwan	9
19	Sweden	8
20	Switzerland	8

Table 2 (continued)

<i>n</i>	Country	Submitted
21	Iran, Islamic Republic of	7
22	Israel	7
23	Korea, Republic of	7
24	Egypt	6
25	Belgium	5
26	Colombia	5
27	Finland	5
28	Austria	5
29	Romania	4
30	Czech Republic	3
31	Ireland	3
32	Lithuania	3
33	Mexico	3
34	Poland	3
35	Latvia	2
36	Nigeria	2
37	Russian Federation	2
38	Serbia	2
39	Thailand	2
40	Chile	1

Table 2 (continued)

<i>n</i>	Country	Submitted
41	Cyprus	1
42	Ethiopia	1
43	Gabon	1
44	Ghana	1
45	Hong Kong	1
46	Indonesia	1
47	Malaysia	1
48	New Zealand	1
49	Portugal	1

Conflict of interest Not applicable.

Ethical approval Not applicable.

Human and animal rights Not applicable.

Table 2 (continued)

<i>n</i>	Country	Submitted
50	Saudi Arabia	1
51	Tunisia	1
52	United Arab Emirates	1
53	Viet Nam	1
54	Argentina	7
55	Algeria	2

54 countries of all continents

Informed consent Not applicable.

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