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Letter from the Editor-in-Chief

As we approach the end of the seventh year of publication for the Journal of Cardiovascular Magnetic Resonance, I would like to discuss its history and its future. The Journal is a centerpiece for the Society of Cardiovascular Magnetic Resonance. It was organized, as was the Society, by a few specialists in cardiovascular diseases who had a special enthusiasm and interest in the phenomenal technology based on nuclear magnetic resonance that allowed for the generation of high resolution images of the heart and blood vessels. The ability to image using magnetic resonance was made possible by the innovations of several scientists, two of whom deserved and received the Nobel Prize in Medicine in 2003 and were Honorary Editors of our Journal since its inception: Professor Paul Lauterbur (USA) and Sir Peter Mansfield (UK). Magnetic resonance imaging, while complex, is amazing in its ability to provide information about the heart and blood vessels that is frequently unique and capable of providing more information about the cardiovascular system than any other imaging modality. While multislice CT is capable of generating better images of the coronary arteries, it does not provide the plethora of information that can be generated by CMR: perfusion, viability, function, metabolism, peripheral angiography, and more. CMR will ultimately be able to clinically apply targeted labeled nanoparticles to allow imaging of specific diseases, e.g. vulnerable atherosclerotic plaque.

The Journal has published new research insights and reviewed many topics in the cardiovascular applications of CMR. I remember standing in the lobby of the Hilton Hotel in downtown Atlanta discussing the new Society and the start up of this Journal with Dr. Dudley Pennell of the Royal Brompton Hospital in London, UK. Another cardiologist with an infectious enthusiasm for magnetic resonance, we thought it was time for a new Journal that would provide a means of telling the world about the exciting new developments in this new imaging modality. Then we met with a representative from the publisher, Marcell Dekker and spelled out the specifics of the new Journal. The group felt that it was appropriate for me to be the first editor and Dudley to be the second editor in view of our roles in the formation of the new Society. The Journal became a reality and the first issue appeared in January of 1998. The editorial board consisted of a group of enthusiasts who have contributed substantially to the field. Many of the original Board members were from the University of Alabama at Birmingham and the Royal Brompton Hospital, University of London. Many other notables were also members of the original Board and the Board

continues to maintain its international representation and its excellence.

After one year the Journal was listed by the ICI in the citation index, the mark of a quality peer review Journal. The citation index indicated that the JCMR was among the best of the Journals focused on cardiovascular imaging. The number of subscribers increased from 534 in 1997 to 1844 in 2005. In 2005 28% of the institutional subscribers were in North America, 40% were in Europe, 20% were in Asia.

Now we are ready for the Editor-in-Chief position to move "across the pond" to England and to Dudley Pennell. The Journal is completely filled through the last issue, Issue 6 of 2006. The formal transition will occur with the first issue of 2007. The number of manuscripts submitted since its inception has increased linearly. The acceptance rate has decreased and the rejection rate has increased during this time. We anticipate that the rejection rate will be over 35% by that time. There will be a total of 60 research manuscripts published each year. There will also be at least one review article and a case of the issue published in each issue. Dr. Pennell announced at our last (summer) Board Meeting that Warren Manning will become the next Editor-in-Chief when Dudley Pennell's tenure is complete.

As those of you that read the Journal regularly know, the web-based publication has been slow in coming. After considerable deliberation, Taylor and Francis is ready to provide a Journal fully on-line. Also, web-based reviewing is gradually becoming available using the software of "Scholar One" which is used by many of the widely known Journals in Cardiovascular Medicine. Finally, at this time, the Journal will examine its options with respect to Publisher. Our contract with Taylor and Francis will expire after the ninth year of publication and we could choose to stay with them or may choose to find another publisher.

Finally, thanks to a very successful society, an excellent group of Trustees and officers, the several Presidents (Pohost, Pennell, Reichek, Balaban, Manning, and Neubauer). Stefan Neubauer, our present President, is doing a magnificent job and has an enormous challenge. In this era where several societies exist whose technology frequently competes head on with CMR, like nuclear cardiology and cardiac CT, CMR may have no ionizing radiation or nephrotoxic contrast agents, but cardiologists are more familiar with nuclear cardiology and CCT is presently better at imaging the coronary arteries. As the Journal and the Society continue to improve, CMR will continue to grow. The

members of our society know that CMR is the most versatile imaging approach and once other cardiologists understand that, CMR will gain momentum. It is acknowledged that it is more complicated, yet many radiologists and cardiologists approach CMR without fear, and with the full knowledge that they can make diagnoses better and improve the delivery of health care.

It has been my privilege to be a part of the development of our society and I look forward to many years of future activity in the SCMR and its Journal.

Gerald M. Pohost, MD Editor-in-Chief, JCMR