

Advancing Global Respiratory Health, Sleep, and Critical Care: Editorial from the New American Journal of Respiratory and Critical Care Medicine Team

This first issue of 2022 marks a period of transition for the *American Journal of Respiratory and Critical Care Medicine (AJRCCM)*, with a new Editorial team appointed to steer the journal over the next 5 years. It is with excitement and a sense of enormous responsibility that we take over this important challenge to lead the journal at a tumultuous time for the global healthcare system in the face of a prolonged pandemic. We would like to thank the outgoing Editor, Jadwiga A. Wedzicha, M.D., and her team for leading the journal so successfully over the past 7 years.

The American Thoracic Society (ATS) is one of the world's leading medical societies, focused on accelerating the advancement of global respiratory health through multidisciplinary collaboration, education, and advocacy. This mission has four key pillars, including leading in the broad fundamentals of respiratory science. A second is to transform patient care by serving as the go-to source for clinical tools, practice guidelines, and best practices based on the latest research and innovation. A third focuses on driving positive and proactive change to improve respiratory health and prevention on a global scale. Finally, ATS retains a key goal of advancing professional development by providing education and mentoring. It is evident that to meet the totality of these goals, the ATS family of four peer-reviewed journals is key.

The *AJRCCM*, first established in 1917, maintains its position as one of the most prestigious respiratory and critical care journals. Its mission remains to be the best journal for innovative and cutting-edge original work in respiratory, critical care, and sleep medicine. This will foster advances in clinical practice and the international standing of the journal. With the uncertainties introduced by the coronavirus disease (COVID-19) pandemic and the evolving approaches to calculate the impact of medical journals, the *AJRCCM* continues to focus on the needs and expectations of researchers from all corners of the world, as we encourage the submission of their very best clinical and translational research articles.

A particular challenge for the *AJRCCM* remains the wide range of topics within respiratory and critical care medicine. To ensure expertise in their evaluation, we have gone to great lengths to ensure an outstanding editorial team. All four Deputy Editors (Laurent Brochard, M.D.; Andrew Bush, M.D., Gavin Donaldson, Ph.D., and MeiLan K. Han, M.D.) have tremendous publication expertise spanning the entire life course. Furthermore, we have engaged an outstanding group of Associate Editors and a robust Editorial Board, who bring international reputation and expertise, spanning numerous topics in respiratory, critical care, and sleep medicine in

children and adults. We are very grateful to them for agreeing so willingly to give their time to serve the journal.

We will continue to focus on achieving an optimal balance across numerous fronts. The *AJRCCM* must remain relevant to all respiratory and critical care specialists. This includes ensuring an appropriate spectrum across a range of basic, clinical, translational, and epidemiological investigation spanning our global investigative community. As we work within the ATS family of journals, we anticipate that basic work will have strong translational implications. Similarly, we remain enthused about the publication of high-quality clinical trials and associated subanalyses. Similarly, the *AJRCCM*, in addressing all aspects of respiratory and critical care research, continues to welcome original articles on clinical and health services research.

Research methodologies and resulting research data have become increasingly challenging, including the need for understanding the complexity of biostatistical review. As such, we will continue a seamless system of ensuring that, after initial peer review, all articles will be evaluated for the need for additional, formal statistical review. The approaches introduced over the past several years as well as the rapid time from submission to review and first decision in *AJRCCM* facilitate addressing each manuscript as efficiently and as quickly as possible. Our choice of Associate Editors reflects expertise in all these areas.

As a global society, the ATS fully appreciates the vital need to ensure a diverse representation among its leadership, authors, and readers. The Editors of the *AJRCCM* also embrace the opportunity and need to ensure gender, ethnic, global, and scientific diversity within the editorial group. This is reflected by the range of individuals comprising the Deputy Editors, Associate Editors, and the Editorial Board who have agreed to provide their time and expertise. We remain proud of the tremendous diversity among the published authors; it is truly evident that the *AJRCCM* represents the global face of respiratory and critical care.

The publishing process, from writing an article to its publication, has become increasingly complex. As such, the *AJRCCM* has fully embraced its role in providing junior investigators in the respiratory and critical care community with the skills necessary to develop expertise in the peer-review process. We continue to actively engage a new generation of investigators to become increasingly involved in the journal, join our peer review team, and eventually transition into future Editors. The highly innovative "Early Career *AJRCCM* Group" for young career researchers has been widely successful and will

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absorb expanded roles going forward. They will continue to oversee the sections on “What Fellows Are Reading in Other Journals” as well as the “Images” section. Direct mentoring by more senior Deputy and/or Associate Editors will provide a clear “career path” for advancement in the process of editorial decision-making. In this way, they can develop a key understanding of important concepts, including (but not limited to) publication ethics, data sharing, open access, and preprint publication. These topics will continue to be addressed by the broader editorial team in workshops on publication ethics during the annual ATS Conference.

We are fully aware that publication of an article in a high-impact journal is prestigious for researchers and advantageous for careers, and thus it is our responsibility to ensure that correct decisions are rendered. A frequent concern from authors is disappointment with a negative final decision despite seemingly favorable reviews. The role of peer review is to advise on the quality and originality of the science and data; the Editors must balance the priority of the work among multiple competing priorities. We will continue to use a system in which potentially acceptable articles will be reviewed collectively on a weekly telephone conference that includes the Editor-in-Chief, Deputy Editors, and selected Associate Editors. Sometimes further peer review of an article will be required, but constructive criticism through peer review will always improve the quality of the final article. We aim for peer review to be a positive and constructive process, even for those manuscripts that are ultimately not accepted. Whatever the outcome, peer review should be seen as an educational opportunity. We admit that neither we nor peer review is perfect, but we believe this is still the best process for assessing articles. The work and impact of the *AJRCCM* reflects the selfless work of the dedicated peer reviewers. We very much encourage you all to continue reviewing for the journal so that we can maintain the high quality of articles. To ensure the optimal review process, and to balance the needs of the journal and its constituency, we will continue to fully employ the expertise of the Editorial Board.

To keep abreast of the rapid pace of progress in science and medicine, we will ensure updated educational content that is relevant to physicians and scientists all over the world. As such, we will continue to publish the widely popular “Perspectives” and “State-of-the-Art” reviews on major topics in respiratory, sleep, and critical care medicine. We remain committed to scientific discourse by encouraging letters to the editor focused on published work or research letters presenting pilot studies or other preliminary work. We will continue to employ innovative techniques to enhance relevance and global reach, including regular podcasts engaging

editorial members and authors as well as an active Twitter account @ATSBBlueEditor.

We are delighted to be able to serve ATS and the global respiratory and critical care community, and with your support, we can lead the journal to even higher levels. We would like to thank ATS for their vision, emphasizing the truly international mission and commitment of the Society and the *AJRCCM*. We thank Diane Gern and her wonderful team in the ATS Publications Office for all the advice and hard work in ensuring a seamless transition. We hope that researchers from the international respiratory, sleep, and critical care community will continue to submit their very best work, and that the *AJRCCM* continues to be the first journal they consider for clinical and translational research. The success of any journal ultimately depends on the effect that the journal has on its readership, and we promise that each issue will have articles that interest and excite both scientists and clinicians. Please continue to actively support not-for-profit society journals like the *AJRCCM*. We realize that nothing in life is perfect, including us, so we will always welcome your feedback and constructive criticism. ■

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