

Acta Orthopaedica

Editor's Report on Volume 88, 2017

Production

The 6 issues of volume 88 2017 (2016, 2015, 2014, 2013, 2013) contained 704 (655, 763, 690, 601, 675) printed pages with 112 (102, 110, 105, 100, 105) articles. Of these, 24 were register studies, 12 randomized clinical trials, 6 reviews/meta-analyses, 2 Guidelines (clubfoot, abprophylax;dental proc; prosthesis), and 5 case reports/ technical notes. Furthermore, we published 5 Editorials, 3 Guest Editorials, and 2 Letters to the editor.

An increasing amount of article data, mainly large tables, are included as Supplementary data, available in the online version of the article.

Submission and publication of manuscripts (Table 1)

864 manuscripts were submitted 2017 (885 in 2016, 940 in 2015, 972 in 2014, 989 in 2013, 786 in 2012).

67 % were clinical, 14 % case reports, 9% experimental, and 7 % reviews, the same distribution since several years.

One forth (249/864) of manuscripts were submitted from NOF members.

Of the 112 published articles Sweden contributed 29, Denmark 16, Norway 15, the Netherlands 10, Finland 9, Switzerland 7, UK 5, Germany 4, Australia 4, USA 3.

Country distribution of submitted and published manuscripts is similar since several years.

Please note that direct comparisons of the number of submitted manuscripts and published articles per country and year is not meaningful. There is an overlap between years; many of the ms submitted a specific year are published first the next year.

Handling times and acceptance rate

Handling times have been about the same since 6 years: two thirds of ms (except those immediately rejected by in-house evaluation, < 1 wk) have a first decision letter within 3 weeks, four fifths within 6 weeks.

The mean time from submittance to acceptance was < 3 months for one third of ms, and <6 months for half of the ms. Acceptance times partly depend on the number of revisions necessary and the time taken by authors to do these revisions. All ms undergo 1 or more revisions before acceptance.

The mean time from acceptance to paper publication was 6 months in 2017. This half year from acceptance to paper print is of less interest; in 2009 we started online preprint publication of proofs which are free on PubMed (Epub ahead of print) 2-3 weeks after the authors have accepted them.

The acceptance rate in 2017 was 13 %, about the same since 3 years.

Almost all case reports were rejected, most often without external review. Of the other ms half were rejected in-house (that is without external review) whereas the other half were sent for review, most often by 2 external experts. Two thirds of these were rejected after the external review, the remaining one third (111) were accepted.

The acceptance rate varies between countries (highest for the Nordic countries) but note that all manuscripts are evaluated by co-editors and reviewers outside the submitting country.

Subscriptions (Table 2)

On Dec 2017 (2016, 2015, 2014, 2013, 2012, 2011, 2010) we had 4 858 subscribers (4692, 4804, 4581, 4664, 4626, 4768).

4 744 were collective subscribers and 84 institutional (mainly libraries).

Institutional subscriptions have, as expected, decreased: from 1237 in 2004 to 84 in 2017 mainly caused by our Open Access (start 2005). This means a considerable loss of income.

The subscription cost for collective subscribers (orthopedic surgeons in the Nordic Orthopaedic Federation) has been unchanged since many years and is as low as 42 Euro since 1996, for others it is 913 Euro, low compared to most other journals.

Finances, electronic Acta, APC

To balance our economy, Acta/NOF decided to stop the print edition (except for the subscribing libraries) with start 2018. No print and no porto will save a substantial sum of money. Collective subscribers will receive an online flip book ever second month comprising the printed issues. Honoraria to editors will be reduced.

In addition, an article publishing cost (APC), 1 760 Euro, will start 2018. The APC applies only to articles from non NOF countries. A decrease of manuscripts from non NOF countries can be foreseen. This rearrangement will be evaluated and if necessary modified after a 2-year trial.

Open Access

All full text Acta-articles published since start 1930 are free for everyone, easily accessible via a link at our or the publishers web-site (www.actaorthop.org or www.tandfonline.com/toc/iort20/0/0)

Acta articles from 2005 are also easily accessed via PubMed where abstracts are marked with an icon "**Free PMC Article**"

Our Open Access has led to a dramatic increase of the number of article downloads: in 2017 the total number of full- text downloads from our Taylor and Francis and PubMed Central was 1.1 million; an increase of 26 % compared to 2016. Most downloads were by US, UK, and China. In comparison with other journals published by Taylor and Francis these are high numbers.

Non-anonymous reviewers thanked

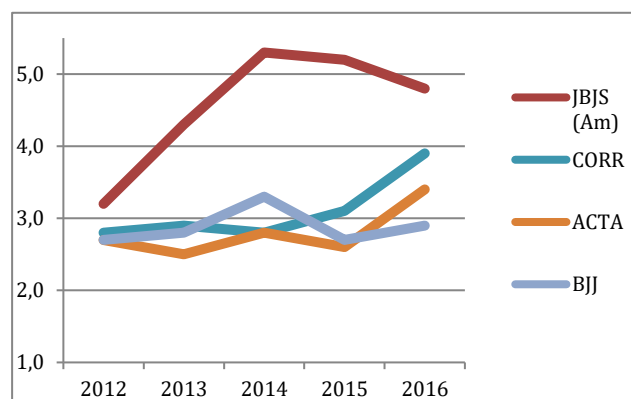
Acta prefers transparency. Since many years reviewers have the option to be non-anonymous and most of them prefer to be so. These reviewers are named and thanked at the end of published articles. Likewise, manuscript authors are not blinded to reviewers.

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Impact factor

Acta's impact factor was 10 years ago 0.6, for 2016 (latest published data) it was 3.4, close to that of the 3 other large, general orthopedic journals. Among the 76 journals classified as "Orthopedics" Acta ranked 7 in 2016. JBJS was number 2 (IF 4.8), CORR nr 6 (IF 3.9, BJJ nr 11 (IF 2.9) The next IF (for year 2017), will be published in June/July 2018: the prognosis for Acta is around 3.0



(The nr 1 journal was American Journal of Sports Medicine, IF 5.7)

Of articles published 2014-15 (base for IF year 2017) 18% were not cited, 25% cited 1 time, 35% 2 – 4 times, and 22% were cited 5-17 times during 2015 (Table 3)

The top 5 journals with most cites to Acta were: *Acta Orthopaedica (self-cites)*, *Journal of Arthroplasty*, *CORR*, *Bone and Joint Journal*, and *BMC Musculoskeletal Disorders (note absence of Journal of Bone and Joint Surgery with few cites to Acta!)*.

Apps closed

The Acta apps will be closed; all information available on these apps is also easily obtained from Taylor and Francis website.

Editor meetings

The Editors have had 2 meetings in 2018, March and October, both in Skanör, Sweden. Some of the issues:

At both meetings our publisher presented Acta statistics; production, subscribers, downloads etc.

Information from ManuscriptManager: Our online submission system in new version will include optional ORCID and Publons registration for authors/reviewers.

Discussions on Acta's future: APC, electronic only for NOF members.

Jonas Ranstam lectured on statistics at both meetings.

Executive committee (ExCom) meetings

Anders Rydholm and Peter Frandsen have had several meetings with our publisher Håkan Pårup (Taylor&Francis) and with NOF representatives, specifically on Acta's future.

Anders Rydholm 2018-05-30

Table 1. Submission and publication of manuscripts

	Manuscripts submitted									Manuscripts published								
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2009	2010	2011	2012	2013	2014	2015	2016	2017
Sweden	41	51	41	32	40	53	46	53	55	24	23	29	31	17	21	21	21	29
Denmark	34	33	31	34	42	57	44	54	51	9	10	16	9	16	22	18	17	16
Norway	17	33	21	28	18	23	20	30	22	12	15	19	15	7	9	11	10	15
Finland	23	13	13	14	20	25	34	21	32	7	9	7	4	9	11	11	17	9
Iceland						1		1			1			1				1
Estonia				3	2	1	1											
The Netherlands	62	52	48	49	75	56	59	77	89	15	15	14	11	10	9	14	9	10
Subtotal	177	182	154	160	197	216	204	236	249	67	72	86	70	59	73	75	74	80
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2009	2010	2011	2012	2013	2014	2015	2016	2017
Australia	8	10	16	15	20	12	11	14	10		7	3	2	2	1	4	1	4
Austria	13	6	11	11	19	26	20	12		2	1	3	1	1		2	2	
Belgium	5	4	7	3	4	5	4	3	5		3							1
Brazil							8	8	6									1
Canada	6	6	7	9	13	10	8	6	7		4		4		2	2		
Chile									3									1
China	26	42	40	58	68	80	94	127	77	3	3	1	1	2	1	1	1	
Egypt		14	11	6	10	13	22	16	8									
France	7	2		5	10	14	7	12	12	2	1		1		2	3		
Germany	53	61	36	52	63	78	53	54	48	9	5	10	3	8	7	4	4	4
Greece	13	8	2	8	19	12	6	3	8	2	1				3			
India	20	27	18	22	41	24	46	32	33									1
Iran	14	4	13	5	7	4	18	17	8									1
Ireland	11	13	7	11	2	3	8	3	3	1	2	2		1				
Israel	9		6	10	13	7	9	3	5	2							1	

Italy	23	17	20	23	26	24	30	28	20	4	2	1	1	2					
Japan	30	26	41	39	52	50	37	41	39	6	4	4	6	2	1	1			
Malaysia				7	7	8	2	4	5										
Mexico									3										
Pakistan									3										
Poland	8	8	6	12	13	11	15	12	6	1								1	
Portugal				6	2	1	4	4	6										
Russia									3										
Singapore					14	10	9	7	8									1	
Slovenia								2	3										
South Korea	46	29	62	45	53	45	33	33	48	1		2	5	3			1	1	1
Spain	7	8	20	12	28	25	40	24	26				1				1		
Switzerland	12	9	11	15	14	15	16	17	17	1	2	3	3	1				5	7
Taiwan	28	24	30	17	21	19	10	16	15		2	1				1			1
Tunisia									4										
Turkey	14	20	23	25	27	29	44	19	17								1	1	
UK	72	80	80	84	105	85	61	50	93	12	5	6	2	9	10	11	3	5	
USA	25	18	32	38	48	58	64	42	48	8	2	2	4	9	4	5	3	3	
Others	41	66	88	88	93	88	65	41	18	3	4	1	1	1		2	6	1	
Total	677	685	741	786	989	972	940	885	864	126	120	125	105	100	105	110	102	112	

Table 2. Collective subscriptions

	2009	2010	2011	2012	2013	2014	2015	2016	2017
Sweden	1,210	1,250	1,272	1,292	1,326	1,334	1,272	1,320	1,340
Denmark	817	864	885	895	903	910	910	930	923
The Netherlands	561	660	660	660	750	800	800	750	800
Norway	665	725	746	743	802	810	973	999	999
Finland	543	553	448	552	590	600	577	605	594
Iceland	32	31	31	31	31	31	23	38	38
Estonia				3	50	50	50	50	50
Total	3,868	4,133	4,092	4,176	4,452	4,535	4,605	4,692	4,744

Table 3. 10 top-cited articles 2014-2015 (for 2016 IF)

Vol (Iss)	Authors	Title	No. citations
85 (3)	Diercks, R. et al.	Guideline for diagnosis and treatment of subacromial pain syndrome A multidisciplinary review by the Dutch Orthopaedic Association,	17
86 (1)	Schilcher, J. et al.	Risk of atypical femoral fracture during and after bisphosphonate use Full report of a nationwide study	17
85 (3)	Thorlund, J. et al.	Large increase in arthroscopic meniscus surgery in the middle-aged and older population in Denmark from 2000 to 2011	16
85 (5)	Gromov, K. et al.	What is the optimal alignment of the tibial and femoral components in knee arthroplasty? An overview of the literature	14
85 (2)	Sariali, E. et al.	The effect of femoral offset modification on gait after total hip arthroplasty	14
85 (2)	Makela, K. et al.	Countrywise results of total hip replacement An analysis of 438,733 hips based on the Nordic Arthroplasty Register Association database	13
86 (1)	Winther, S. et al.	1-year follow-up of 920 hip and knee arthroplasty patients after implementing fast-track	12
85 (1)	Khan, S. et al.	Reduced short-term complications and mortality following Enhanced Recovery primary hip and knee arthroplasty: results from 6,000 consecutive procedures	12
86 (2)	Gbejuade, H. et al.	The role of microbial biofilms in prosthetic joint infections	12
85 (4)	Lechler, P. et al.	The influence of hip rotation on femoral offset in plain radiographs	11