

## EDITOR'S PAGE



## Reflections on Our Inaugural Year of *JACC: CardioOncology*, With Gratitude and Tireless Devotion



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One year ago, we launched the first issue of *JACC: CardioOncology*, wherein I outlined my vision for this journal: to become the essential resource for the field of cardio-oncology; to play a vital and transformative role in advancing the field and care of our patients by innovating science and positively impacting clinical care; to be driven by the highest standards of excellence; and to educate, engage, and strengthen the international community (1).

*Excellence, rigor, and community.* These are the principles to which we at *JACC: CardioOncology* strive for and use to guide us in our decision-making. Each journal issue has been built on a strong foundation of original basic, translational, and clinical science; seminal reviews and primers; educational case challenges; impactful patient perspectives; and global viewpoints from key leaders in cardiology and oncology. We have held international sessions at the China International Heart Failure Congress and the Global Cardio-Oncology Society Meeting in Brazil (2), and have hosted live, interactive Journal clubs (3); virtual case presentations (4); and podcast interviews highlighting the patient's perspective (5).

As I reflect on the past year and the wonderful advances we have made together as a community, I feel a tremendous sense of gratitude. I am thankful to the communities of cardiology and oncology, and to our enthusiastic and engaged readers who turn to *JACC: CardioOncology* to learn the most current knowledge in our field. We are committed to providing highly accessible content, and we launched original research podcast summaries in March 2020, recorded by our Associate Editors to provide their unique context to the papers. Our podcasts have had >1,500 downloads since April 2020.

I am grateful to the authors who have entrusted us with their work. Manuscript submissions have continued to grow, and we have a strong, healthy submission volume. The depth and breadth of topics published in *JACC: CardioOncology* within our first year have been remarkable, with some of our most downloaded pieces covering topics including coronavirus disease-2019 (COVID-19) (6,7); amyloidosis (8); cardioprotective strategies in both primary and secondary prevention (9-12); cancer therapies, including osimertinib, CAR T cell, androgen deprivation therapy, tyrosine kinase inhibitors, and their cardiotoxic risk (13-16); and the intersection between cardiovascular disease and cancer in our patients (17-19). In the second quarter of 2020 alone, we had nearly 130,000 article usage sessions, and each quarter, this number has grown. The work of our authors is being read for utilization in clinical practice and research, which is always the most important metric for a *JACC* journal.

As a physician scientist, I recognize that the choice of "which journal" is not an easy one and requires careful consideration. We remain committed to serving our authors and working tirelessly to ensure that the peer review process is respectful, fair, constructive, and as seamless as possible. Our average time to first decision in second quarter 2020 was 15 days, and we will strive to maintain this standard. We seek to partner and work collaboratively with our authors to ensure the highest quality contribution to our community. I am grateful to the reviewers, who provide timely, incisive insight and lend their valued expertise to help ensure the quality of our journal. We have had nearly 300 peer reviewers contribute their evaluations over the past year. We know this takes

dedicated time and effort, amid busy professional and personal lives and amid the painful challenges of COVID-19 and racial injustice that continue to afflict our world today.

Of course, I am grateful to my many mentors, including Dr. Fuster and the *JACC* family Editors-in-Chief: Drs. Doug Mann, Dave Moliterno, Julia Grapsa, Chris O'Connor, Chandra Shekhar, and Shiv Kumar; the leadership team at the American College of Cardiology; and the entire American College of Cardiology publishing team, led by Justine Varieur Turco, Divisional Senior Director. Eileen Cavanagh, Nandhini Kuntipuram, Colleen Whipple-Erno, Tamika Edaire at the ACC, and the entire team at Elsevier have been wonderful collaborative partners in ensuring our success. I have to especially acknowledge the remarkable efforts of Michelle McMullen, our Managing Editor. Launching *JACC: CardioOncology* has been a community effort, and I am thankful to our excellent multidisciplinary Editorial Board, including our International and Senior Advisors, Social Media Editors, Editorial Consultants, Assistant Editors, and Guest Editor, Dr. Anju Nohria; our highly committed Associate Editor team, comprised of our Deputy Editors Drs. Saro Armenian and Dan Lenihan; and our Associate Editors Drs. Greg Armstrong, Ana Barac, Anne Blaes, Paul Burrige, Katie Ruddy, and Ron Witteles. Each has worked tirelessly and selflessly as we together cohesively advance our mission.

As I look forward to the year ahead, I am hopeful. I am proud to announce we are now indexed on Scopus, and much of our U.S. National Institutes of Health-funded science and COVID-19 papers are already indexed on PubMed. Our goal is that we continue to stimulate, innovate, and inspire rigorous peer-reviewed science and advance clinical care. Over the next year, we will improve access to *JACC: CardioOncology* through additional platform changes to improve searchability and integration across the *JACC* Journals.

Clinical, translational, and basic science original research manuscripts will continue to serve as our foundation. As we evaluate each manuscript, we

will continue to ask ourselves the following key questions: Are the findings valid? Is the methodology rigorous? Is the topic of clinical importance? Are the findings incremental to our current understanding of the topic and do they fulfill an evidence gap? What is the potential clinical impact and the potential for advancing the field? We will continue to publish State-of-the-Art Reviews and Primers, and similarly ask ourselves: is this an authoritative, critical appraisal of the literature? Is it comprehensive, yet focused? Is this data-driven and accurately reflective of the current evidence? We will look to Clinical Case Challenges to provide evidence-based descriptions of unique cases that thoughtfully illustrate the diagnostic and therapeutic dilemmas that we as clinicians face as we care for our patients (20). Our Viewpoints will continue to express opinion pieces on important and timely topics, and present thought-provoking, community-building, evidence-based perspectives. We will continue to grow our international engagement events, podcasts, live Journal clubs, and dynamic case presentations, each occurring at least once per quarter. We also will launch a new "How To" series that will offer practical, evidence-based education on common clinical questions that are relevant to the everyday cardiovascular care of our cancer patients.

I am grateful. I serve a wonderful community, one made of patients, physicians, scientists, and care providers who inspire and motivate me daily. I look forward to continuing to work with a tireless devotion to "never feeling satisfied"—in our mission to educate our global community and positively impact the care of our patients.

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