The rise and rise of *Pulmonary Circulation*

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Just over 4 years ago we launched *Pulmonary Circulation*. Since then we have grown steadily as a journal, occupying an important niche and serving the clinical and research communities in our field. Our aim has been and continues to be to publish timely and novel research and provide in-depth reviews to the community of clinicians and researchers involved in the work of finding cures for deadly diseases such as pulmonary arterial hypertension.

There exists a great need in the medical research community around the globe for up-to-date, relevant information on the latest research in the field of pulmonary vascular disease. Pulmonary vascular diseases, along with right heart failure, affect 3 million people per year worldwide. Idiopathic pulmonary arterial hypertension, although rare, remains an often fatal disease that predominantly affects women. So far there is no cure.

Lung vascular diseases occur worldwide, with no respect for international borders; therefore, it is especially important for us to reach our colleagues in the developing world with this vital information. Already, clinicians around the world have grown to rely on *Pulmonary Circulation* as their source for critical research and scientific advancements that help them stay abreast of new discoveries in this field.

Pulmonary Circulation is the only journal devoted exclusively to publishing cutting-edge research on the pulmonary circulation and pulmonary vascular diseases. Our mission is to encourage basic, translational, clinical, and population health research by investigators, physician-scientists, and clinicians in the hopes of increasing survival rates for pulmonary hypertension and other pulmonary vascular diseases worldwide and developing new therapeutic approaches for the diseases. The journal is a main communication medium that (1) connects clinicians and researchers interested in the pulmonary circulation, pulmonary vascular disease, and lung injury and (2) connects physicians/researchers in developing countries to their colleagues in developed countries.

As *Pulmonary Circulation* matures, we are confident that the journal's reach and impact on the medical and scientific communities will continue to grow. As the world be-

comes ever more interconnected through the internet, we are also changing with the times. Our goal for 2015 is to make our resources immediately available to you, our readers and contributors, whenever you need them—wherever you may be.

A major step in our growth has been the switch to online publication. In today's world, demand for digital content continues to rise, with an increasing number of doctors preferring to read medical journals online or on their mobile devices, such as tablets, e-readers, and smartphones. In order to continue to meet the demands of our readers, our plans in 2015 include increasing the functionality of our website, www.pulmonarycirculation.org, to offer not only access to the articles published in the journal but also an online newsletter and a blog. We have also moved into social media, as yet another way to connect with you. You can now find us on Facebook (www.facebook.com/PulmonaryCirculation) and Twitter (@PulmCirc).

Over the past year, we have seen our readership increase dramatically. As 2014 drew to a close, our 312 published articles had been downloaded as PDFs more than 64,000 times, and our 35 most accessed articles published in the years 2013–2014 had been accessed through the University of Chicago Press website more than 23,300 times. Our PDF downloads alone more than doubled in the second half of 2014.

Going forward, we want to continue to provide our readers across the globe with instant, free access to the information they need when they need it. In order to continue to do so, we have, with the advice of our publisher, made the decision to begin in 2015 to ask our authors to pay a publication fee. For Original Research and Guidelines articles, the publication fee is now \$1,000. For a traditional Case Report (up to 1,000 words), the fee is \$500, and for an Extended Case Report (up to 2,500 words), the fee is \$750. These fees were instituted beginning January 1, 2015, for all new submissions received on or after that date.

We will continue to expand our readership and be your much-needed connection in this time of rapidly advancing discoveries and ever-expanding global commu-

nity of researchers and clinicians. We will continue to strive to bring you articles from well-respected names and scientists at the forefront of research. We will work hard to make these articles available more quickly after acceptance, so that you will have earlier access to the latest information in the field.

We are still eagerly anticipating our impact factor. Thompson Reuters has received and is reviewing our application and in the meantime has been collecting citations for articles published in *Pulmonary Circulation*. To calculate the impact factor requires at least 3 years of data or a consistent and steady number of publications, both of which we have, so we are confident that our impact factor will be issued in the near future. Meanwhile, the editorial office is constantly making strides to increase the quality and diversity of the articles published in *Pulmonary Circulation*. We invite you to contribute to the journal's reputation and quality by submitting your best work to the journal, by reading the articles published in *Pulmonary Circulation* and introducing them to your colleagues and students, and by citing the articles in *Pulmonary Circulation* that are relevant or related to your work.

We encourage you to keep submitting your most novel and significant original-research articles in basic, translational, clinical, and population health research; your highly novel (and rare) case reports; and your rapid communications/research reports on novel findings. We also maintain our interest in considering your high-quality conference abstracts. We will continue to identify experts to contribute review articles for *Pulmonary Circulation*; if you are willing to write a comprehensive review, please send an outline or proposal to us.

We would like to extend our thanks to those who have sustained the journal and seen us through our infancy—members of the Pulmonary Vascular Research Institute, members of our editorial board, reviewers, authors, and readers alike. We are excited to have you along for the next phase of our growth, and we respectfully ask that you continue the journey with us.

Jason X.-J. Yuan, *Editor-in-Chief*

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