

Greetings from the editor 2020

Josef S Smolen

A new decade of the 21st century is starting. We have experienced multiple shake-ups in the course of the last decade, the ‘teens-decade’—political ones and social ones, such as the climate crisis which affects us globally and might even influence the epidemiology of rheumatic diseases in the not too distant future. Hopefully the new decade will find solutions for some of the burning problems of the planet and its societies.

In rheumatology, the first decade of this millennium brought novel therapies especially for rheumatoid arthritis (RA),^{1,2} changing the lives of millions of patients with RA around the world and making rheumatology one of the most successful medical specialties, attracting many young people to specialise in the field. The second decade brought several major therapeutic advances beyond tumour necrosis factor inhibitors especially for patients with psoriatic arthritis and axial spondyloarthritis^{3,4}; the advent of biosimilars that made effective therapies more easily accessible due to cost reductions⁵; the integration of treatment strategies into daily practice^{6–9}; and the introduction of novel oral therapies that have comparable efficacy as biological disease-modifying antirheumatic drugs.¹⁰ Moreover, efficacy and failure of novel treatment principles in various diseases allowed us to gain fresh pathogenetic insights. This third decade will hopefully provide answers for some of the unmet needs,¹¹ especially for patients with systemic lupus erythematosus, systemic sclerosis and osteoarthritis for whom—with very few exceptions—no effective therapies have been approved for a long time.

The beginning of the new decade is also noteworthy for the *Annals of the Rheumatic Diseases* (ARD). ARD, the world’s first ever rheumatology journal, founded in 1939, became the European League Against Rheumatism (EULAR) Journal 20 years ago! During these two decades the distribution of ARD has increased widely (in line with the attendance at the Annual EULAR Congress),

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and so have various other indicators such as the number of submitted papers (up to about 2000 in recent years) or the impact factor (figure 1). The Associate Editors, the Editorial Board, the many reviewers, the BMJ and EULAR, as well as my two predecessors, deserve a big ‘Thank you!’ for their wonderful work and support which have contributed so importantly to the evolution of the journal during these two decades. Our gratitude obviously also goes to the numerous authors who submit their papers to ARD, allowing us to provide the readership with their most innovative research advances.

Innovative research is primarily driven by original research papers. Beyond serving as a forum for scientific progresses in the various areas of rheumatology, a journal like ARD should also attempt to integrate such recent developments into advances in the practice of our profession and thus the continuous improvement of patient care—this is what clinical and basic researchers ultimately strive for. To this end, ARD is dedicated to not only publish innovative basic, epidemiological and clinical research work, but also transfer these innovations into clinical practice and clinical research. This is done by presenting review articles as well as recommendations, points to consider or classification criteria.

In this first issue of the new decade we provide the readers with a series of EULAR management recommendations,

such as for Sjögren’s syndrome, large vessel vasculitis or vaccination^{12–14}; EULAR recommendations for the diagnosis of gout, the role of the nurse and competences of health professionals in rheumatology^{15–17}; EULAR points to consider for the use of big data¹⁸; and joint American College of Rheumatology-EULAR classification criteria for IgG4-related disease,¹⁹ which will appear in parallel with *Arthritis & Rheumatology*. In addition, you will find an updated viewpoint on unmet needs in rheumatology.¹¹ All these publications are based on the most recent advances in the field and meant to impart a synthesis of up-to-date knowledge to various stakeholders. These articles are complemented by several original research papers across a large part of the rheumatology spectrum. Enjoy reading all these papers in the present and subsequent issues of ARD. And please provide us with your feedback and suggestions.

But now let me wish you a happy, healthy and prosperous New Year and thank you again for your continuous support of the EULAR Journal.

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Figure 1 Impact factor, 2000–2018.

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