It is now nearly 3 yr since the submissions process for the *British Journal of Anaesthesia* moved to electronic only and this is now the standard process for the majority of international journals. I thought it would be of use and interest to review the effect of this change and to highlight some of the other electronic innovations we have introduced subsequently and are in the process of developing at the *British Journal of Anaesthesia* along with our publisher Oxford University Press. These innovations bring with them considerable benefits for the authors and readers.

The most obvious effects of the electronic submission system are the increased accessibility and speed of manuscript handling it has allowed. Eliminating the need for costly and slow postal charges and the increasing worldwide availability of internet access has allowed authors a greater choice of journals at which to target their work, where previously they may have been constrained to local or regional ones. It is pleasing, therefore, from an editor’s point of view, that in 2005 the *British Journal of Anaesthesia* received well over 800 new manuscripts from a total of 53 countries. Both of these figures are a significant increase compared with those in 2004, and the trend appears to be continuing for 2006, reflecting the truly international nature of the journal.

The second, and perhaps the most tangible benefit for both editors and authors, is the speed of manuscript handling. Each manuscript, on submission, is allocated to one of the editorial team in the UK, Switzerland or Belgium. The editor seeks expert opinion on the manuscript from two or three of our panel of more than a thousand international assessors and from their comments is able to make an initial decision on the manuscript. It is to the great credit of the editorial team, and to the panel of assessors, that for 2005 the average over the whole year for the time from submission to first decision was less than 25 days. A few years ago this process would take a minimum of 10 weeks. These enhancements have also consequently speeded up both the submission to acceptance time and the acceptance to publication time. This is illustrated by the articles in this October issue, which have all been submitted for the first time in 2006, have gone through a revision and reassessment, been accepted during July and have appeared in pre-print on-line on our website in September. This rapid turn-round is appreciated by authors and benefits the readers by ensuring that the articles are of current interest. It is worth noting that even 5 yr ago the time between first submission and hardcopy publication could easily be more than 1 yr. The technology associated with the publication is such that in the whole process (submission, allocation to an editor, allocation to assessors, assessment, first decision, revision, reassessment, acceptance, editing, submission to publishers, sub-editing, typesetting and sending to the printers) the first time that an article needs to be on paper is the version that is sent out bound in the monthly issue.

In parallel with these enhancements in the publication process, the *British Journal of Anaesthesia* has a number of key developments on our website at http://bja.oxfordjournals.org. These include the e-letters facility, which has two components. First, a system allowing comment on recently published articles in the *British Journal of Anaesthesia*. By clicking on the electronic version of the article, any reader can submit electronically a commentary on or questions relating to the article. After being checked by an editor, this is then posted on the e-letter site and the author of the original article is notified and invited to respond. The accessibility and ease of use of this system has helped to develop a healthy and rapid dialogue on articles of interest by eliminating the lengthy postal delays associated with conventional ‘Letters to the Editor’. After some teething problems the system is working well. It is the intention of the Editorial Board that from January 2007 the e-letter system will be the sole route for Letters to the Editor commenting on recently published articles. e-Letters and responses of particular interest are selected each month for inclusion in the printed journal. The second element of e-letters is the ‘out-of-the-blue’ letters facility, which allows any reader to submit a topic for further discussion. This can, for example, be a short case report, a commentary on equipment or a training issue. It is now possible to include a table or figure with this submission.

The aim of this section is to promote discussion of important clinical and research topics. Similarly, some letters from this section will be included in the printed issues.
A further facility which we have developed which is of great use to authors and reviewers is based on the on-line access to articles on the British Journal of Anaesthesia website. As well as providing the text of articles, this route can essentially function as a search engine for topics related to the article. The electronic display of the text will include buttons at the side which provide a link to other articles published by the authors and to similar articles published in the British Journal of Anaesthesia. By scrolling down to the reference section of the text, you can click on any reference of interest and be linked, via Highwire, to the full text of the reference on its own journal website and thus gain access to similar links within that site. Thus, a comprehensive set of linkages can be followed out from a single article starting point. This full linkage is available for all the articles that we have published since 2000.

I am very pleased to draw you attention to the fact that, courtesy our publisher Oxford University Press, the entire set of issues of the British Journal of Anaesthesia, from 1923 till date, is accessible on-line on our website as pdf files in our digital archive. Thus it is possible to read the first article in the British Journal of Anaesthesia, ‘Early anaesthesia’ by Sir D’Arcy Power, on-line. This facility will not only be a delight to those interested in the history of anaesthesia but, in providing 83 yr of publication on-line, is a superb resource for researchers and authors.

We have a number of further developments to introduce in the next year, which will be of interest and use to authors and readers. Recent authors will have noted that we have moved to the newest version of Manuscript Central for our manuscript handling. This has further simplified the process for authors and assessors and should produce a further decrease in turn-round time. In 2007, we will introduce an electronic Continuing Medical Education (CME) facility based on articles in the British Journal of Anaesthesia, which will carry CME credits. A similar facility will also be introduced to our CME Journal, BJA: Continuing Education in Anaesthesia, Critical Care and Pain.

In my first editorial after taking on the role of Editor-in-Chief, I discussed the introduction of sections to the journal contents. This has been well received and has provided interesting information on the range of research articles submitted and published. Cardiovascular, Clinical Practice and Neurosciences and Neuroanaesthesia, with an equal distribution among the three, accounted for just less than half the articles. Pain, Regional Anaesthesia and Respiration and the Airway, again equally distributed, for about a third of the total, and Critical Care, Paediatrics and Obstetrics for the remainder. This latter group may reflect the presence of specialist journals in these areas but it is pleasing to note an increasing number of submissions and publications in these sections during 2006.

We have published, as original articles, clinical investigations, laboratory investigations and case reports. There has been debate over the years in anaesthetic and other journals on the value of publishing case reports and the arguments for spreading clinical knowledge against the limited capacity for future citation have been well described. The British Journal of Anaesthesia has continued to publish a limited number of case reports, on average three per issue, on the basis that this is a suitable forum in which to document novel clinical problems and solutions. However, it is the opinion of the editors that to be of value a case report should be a significant addition to our knowledge of a subject. That is, it should either document the management of a rarely encountered, and previously undescribed, problem (for example, a paediatric syndrome) or provide a new solution to a previously described problem. To give an example, a patient with, say, a difficult airway and valvular heart disease will present a challenge to the anaesthetist. However, if this patient is successfully managed using a fairly standard ‘difficult airway’ protocol and the accepted pattern of management for the valvular lesion, what learning point is there to present? Essentially, just because a case is challenging, but satisfying, to manage it does not necessarily make it a good subject for a case report. It is worth noting that the rate for acceptance for case reports is about half of that for clinical and laboratory investigations.

So what does the future hold for journal publication. The electronic advances have made the process of submission, review and publication much simpler and quicker. However, with the increasing ease and availability of internet access, do we still need to produce a hardcopy? The answer to that in our case is quite clearly yes! Our experience a few years ago of moving to an electronic option was that the vast majority of subscribers wished to continue with hardcopy. One of the major reasons cited was the ability to read a journal anywhere but the electronic version required internet access, which was not always available in the operating theatre or on public transport. In contrast, it is my view that library services will increasingly move, as they already have, away from being stores of bound journals to being electronic access points for a vast on-line repository of journal and texts. For the present, we will continue to produce a high quality hardcopy journal for an international audience and also continue with further developments of our excellent electronic facilities.

C. S. Reilly
Editor-in-Chief, British Journal of Anaesthesia,
Sheffield, UK
E-mail: c.s.reilly@sheffield.ac.uk

References
4 Hunter JH. The latest changes . . . no more shorts. Br J Anaesth 2004; 92: 7
5 Smith G. BJA Concise—a step too far. Br J Anaesth 2001; 87: 185