

both acute or chronic ITP suggesting that carriers of this genetic constellation are more prone to develop ITP.¹⁷ The second study presented in this issue provides exciting evidence that the Q63R polymorphism in the cannabinoid receptor CNR2 might be involved in the progression toward chronic ITP. Rossi *et al.* found that ITP patients homo- or heterozygous for the R allele of CNR2 have a markedly increased chance of becoming chronic.¹⁸ The cannabinoid receptors are known to modulate the adaptive immune response, including the balance between T_{H1} and T_{H2} cells. Chronic ITP is known to have a balance towards the T_{H1} cell subset.¹⁹ T cells from CNR2 63R homozygous individuals show a 2-fold reduction in inhibition of T-cell proliferation compared to Q-homozygous individuals. This polymorphism is more often found in patients with auto-immune diseases.²⁰ Therefore, it is feasible that the patients carrying at least one 63R allele might be prone to a chronic course of ITP. Further prospective studies will be required to address the prognostic value of this polymorphism.

Harald Schulze has studied biochemistry in Hannover and wrote his thesis on congenital and acquired thrombocytopenia. He received his postdoctoral training at the Dana-Farber Cancer Institute at Harvard Medical School, Boston. Since 2005, he has been heading an independent research group on megakaryocyte and platelet function and biology at the Charité Hospital. Gerhard Gaedicke became interested in hematology during his medical studies at the University of Hamburg. Later he joined Professor Kleihauer's group at the University of Ulm and was trained in pediatric hematology and oncology, including blood stem cell transplantation. Soon after Germany's reunification he became Full Professor of Pediatrics and Chairman of the Dept. of Pediatrics at the Charité University Medical Center, Berlin. His main interest besides hematology is the reform of the medical curriculum.

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New blood in Haematologica

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On December 31, 2011, I will end my term as Editor-in-Chief of this journal. Dr. Jan Cools will take over in this position as of January 1, 2012. He has been serving the journal as an Associate Editor, and I give him my best wishes. The ten years I spent editing the journal have

been exciting, and I will briefly summarize the main steps.

Haematologica is owned by a non-profit organization, the Ferrata Storti Foundation. Two scientific societies have flanked the Foundation in the past years, adopting the journal as their official organ and allowing it to develop: the

Italian Society of Hematology and the Spanish Society of Hematology and Hemotherapy. Also on behalf of the Foundation, I wish to thank all members of these societies, many of whom are also close friends of mine.

In 2005, thanks to the hard work and personal commitment of Emili Montserrat and Robin Foà, *Haematologica* became the official organ of the European Hematology Association (EHA). This step was of fundamental importance for the journal's development. The EHA and the Ferrata Storti Foundation are currently finalizing an important agreement which will mean that the EHA will become a member of the Foundation and take responsibility for the journal. This represents a basis for future growth of *Haematologica*.

The past years have been characterized by revolutionary changes in scientific publishing. One of these is Open Access (see http://en.wikipedia.org/wiki/Open_access_publishing). Open Access publishing is rapidly expanding and will likely become global in the near future, although there are "a few more miles to go".¹ *Haematologica* has adopted Open Access publishing since its early beginnings, i.e., when the journal was published for the first time online.

Publishing a scientific journal does not just mean peer-reviewing the papers submitted, selecting the best ones, and printing them. Editing the accepted manuscripts and making them comprehensible to readers outside the specific field, preparing related editorials and perspective articles, and collecting comments and criticisms from the readership are all of fundamental importance in scientific publishing. The journal that does this really well is the *New England Journal of Medicine*, the journal that makes the clinical medical history and that I have always considered a reference model.

Online publishing has developed tremendously over the last years and e-tools are a source of enormous potential. Again, the *New England Journal of Medicine* provides an excellent example of how this potential can be realized. I am sure that Jan Cools and his collaborators (the 'new blood') will further improve the *Haematologica* website and make it more interactive and useful to our readers worldwide.

Impact factor may become a nightmare for editors of biomedical journals, and this may lead to many playing 'the impact factor game'.² We did not participate in the game, and are fully satisfied about the 'unboosted', positive trend of both impact factor and number of citations over time (Figure 1). This improvement is based entirely on a progressively better quality of the manuscripts submitted to and published by the journal in the past years. Hence, the credit for this goes to the authors who trusted the journal and let us peer-review their best papers.

In conclusion, I wish to thank the Associate Editors with whom I have had the pleasure to serve the journal in the

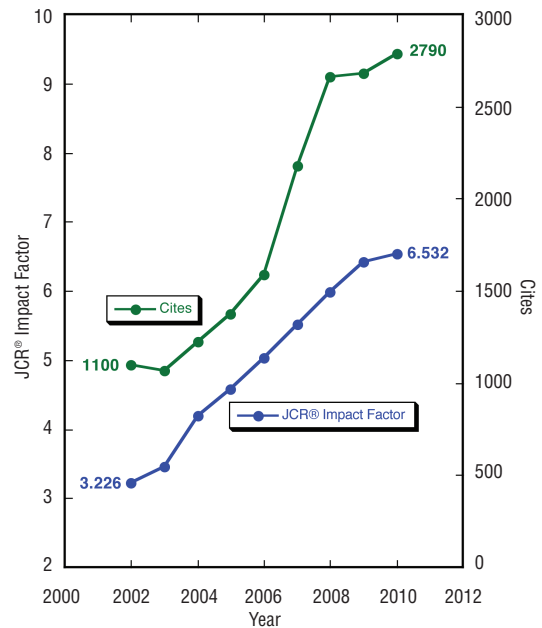


Figure 1. Time course of *Haematologica*'s impact factor and number of citations received (source: Journal Citation Reports®).

past years (Clara Camaschella, Elias Campo, Elihu Estey, Randy Gascoyne, Michael Laffan, Luca Malcovati, Pieter H. Reitsma, Jesus San Miguel, Brigitte Schlegelberger, Freda K. Stevenson, Matthias Theobald, and Ivo P. Touw), the members of our Editorial Board and our excellent reviewers. Last but not least, I thank Prof. Edoardo Ascari as President of the Ferrata Storti Foundation, Michele Moscato and Lorella Ripari, and more generally the staff at our headquarters (Paola Cariati, Igor Ebuli Poletti, Marta Fossati, Anne Freckleton, Rachel Stenner) for their commitment and professionalism. *Haematologica* is in good hands!

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