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Highlights of this edition

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This is my first edition as Editor in Chief of the Journal of the Royal Army Medical Corps without the steady hand of Lieutenant Colonel Jeff Garner to assist me. As many of you will know I have been running the journal jointly with him for the last 18 months in his role as consulting editor and I hope none of the readership will have noticed the transition. Having been the deputy editor since October 2010, I have watched the journal grow in strength under his editorship. I am pleased to report that Jeff has kindly accepted the role as Emeritus Editor so that we can call on his huge repository of knowledge when required. There can be little doubt that our partnership with the BMJ has transformed the journal and I am grateful to the team there, particularly Peter Ashman, Janet O'Flaherty and Claire Langford for their support. I would also like to thank the support of the charity committee of the Royal Army Medical Corps who oversee and primarily fund the journal, led by Brigadier Peter Fabricius and Major Marie Ellis.

I will likely serve as Editor in Chief for a further 5 years as I believe change is essential for the evolution of any journal. Lieutenant Colonel Garner's tenure has resulted in a journal that has an impact factor of 0.79, making it the second highest military medical journal worldwide after

our traditional rivals Military Medicine. I am however highly sceptical of impact factors and their relevance to highly specialised medical journals such as ours. I believe our authors submit to the journal because of who reads it and not because of an impact factor. The high quality of our submissions enables us to have a rejection rate of 39%, higher than comparable journals. I am however very wary of driving this rejection rate any higher as it goes against the ethos of our journal, namely to support and encourage less experienced authors in sharing their healthcare research with their peers. Most importantly we had submissions by authors from twelve different countries in the last year alone, making our journal the most internationally representative and fulfilling our important role in Defence Engagement.

My objective over the next 5 years is to attempt to produce a journal that is truly representative of international and national military medicine as well as every health sub-discipline. That is in keeping with the manner in which both the military and general society has evolved and for us to maintain relevance in the modern world then so must the journal. Our editorial board has representatives from most medical specialties, medical support officers, nursing and physiotherapy, as well as reservists integrated with regulars. We have editorial board representation from the Navy and Royal Air Force as well as the United States military and I would also like assistant editors from the dental and veterinary cadres. However, to produce

a truly representative journal that our modern healthcare system deserves may require further change still. We are no longer an in-house publication for just Army doctors. We are an internationally respected 115 year old journal that represents military health in its broadest form.

Finally, although the journal represents military healthcare of the United Kingdom, we must also remain a vehicle for the freedom of expression of opinion for our readership within certain understandable limits. We are owned by a charity and the editorial board are all serving military officers but since 2016, the security clearance for all UK submitting authors is now undertaken centrally and outside of the journal. As Editor in Chief I ask all those who have influence on the content of this journal to respect its editorial autonomy as far as is reasonably possible and allow its evolution towards that which the readership desires. Equally I would ask all submitting UK military authors to ensure that they attach a correctly completed CC1 security clearance form in line with Defence policy at the time of submission.

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