2000: promises and plans

Over the past few years the *European Journal of Human Genetics (EJHG)* has undergone substantial changes. We have changed publisher, we have changed frequency, we have changed format and we have changed the layout. The year 2000 brings another set of changes. We promised that *EJHG* would ultimately aim for monthly publication. However, we never anticipated that this would occur so soon – one year only – after increasing in frequency from bimonthly to eight times per year. Nonetheless this is so and it means the timely realisation of a long-standing wish of the European Society of Human Genetics, indeed one of the main targets the Society set itself at the launch of *EJHG*. For the growth of the journal we need to thank the authors who, in ever-increasing numbers, submit their work to the journal.

The increase in interest in publishing in the *European Journal of Human Genetics* is such that we cannot accommodate it by an increase in frequency alone. The plan for 1999 was to publish 720 pages. Due, however, to the explosive growth of submissions, the ESHG decided to sponsor the publication of over 200 additional pages to allow publication of more high-quality original articles. This year we plan to publish more than 1000 pages, in order to continue to bring readers the best of the research submitted to the journal. We have also implemented a slightly thriftier page layout. The aim of all these measures is to maintain our acceptance rate at around 40–45% and to achieve good publication times, even as submissions continue to rise.

The scope of the European Journal of Human Genetics continues to be any interesting findings and applications in human genetics, whether clinical, cytogenetical, basic, epidemiological or community-oriented. The content is aimed at a wide readership and has a mild preference for material with a transnational European or global relevance. The plan for this year includes the start of a series of state-of-the-art surveys of different diseases, in which topical experts will review the current state of clinical delineation, diagnostic options and near-future expectations. The strong growth of submissions in human genetics undoubtedly has much to do with its increasing impact on modern health care and on broader society. This is spearheaded by the relentless advances of the human genome project, which has recently spawned its first-born: human chromosome 22. From a second marriage, so to speak, as the DNA-marker genetics of only a decade ago, have heralded and precipitated much of what came later. It is truly amazing to realise that the first healthy baby born following DNA marker-based prenatal diagnosis, cannot be older than 14 years!

> Gert-Jan B van Ommen Editor-in-Chief