The future influences the present just as much as the past, according to a quote attributed to Friedrich Nietzsche. This is also applicable to The European Journal of Endocrinology. Under the inspiring guidance of Paolo Beck-Peccoz, the journal evolved from Acta Endocrinologica (Copenhagen) steered by Albert Burger and Christian Binder. The journal is now moving further along the path of history by the transfer of the position of Editor-in-Chief from Christian Strasburger to Hans Romijn.

The essence of endocrinology was defined by Starling (1): ‘These chemical messengers, however, or ‘hormones’, as we might call them, have to be carried from the organ where they are produced to the organ which they affect through the bloodstream [...]’. Through exploration of this general concept, endocrinology has always yielded major discoveries with crucial clinical implications. In many areas of clinical endocrinology, however, major questions remain. This holds true for the underlying pathophysiology of diseases and also for diagnostic tests and treatment approaches. Therefore, it is not easy to make balanced decisions in clinical endocrinology.

Each clinical decision depends on the combination of factors including the available evidence, the preferences of the doctor and of the patient, and individual patient factors, including age, and prognosis. The available evidence ultimately consists of the combination of original studies, reviews, guidelines, and protocols on a certain subject ((2) Fig. 1). The available evidence varies considerably between conditions from mere case reports of extremely rare diseases to solid randomized, placebo-controlled clinical trials. It should be realized that in general, and also in many endocrine conditions, the evidence is incomplete. For instance, the current treatment of patients with non-functioning pituitary macroadenomas is based merely on observational studies, all of which have methodological limitations. Nonetheless, those studies form the current evidence based on which our treatment decisions are made.

Figure 1 Outline of the interaction between the complex process of collecting and weighing the evidence and ultimate factors involved in clinical decision making (Reprinted with permission from Haynes B & Haines A. Getting research findings into practice: barriers and bridges to evidence based clinical practice. BMJ 1998 317 273–276).
The journal is part of the large and complex, virtual framework of evidence-based medicine. The journal publishes original clinical and translational research papers and reviews in pediatric and adult endocrinology. In addition, exceptional, insightful case reports are accepted for publication. During the past years, the journal holds a strong international position with a stable impact score, in 2010, of 3.482, the five-year impact score being 3.927. On an average, the authors receive the first decision on their manuscript within 4–5 weeks. On an average, it takes 4–5 weeks for authors to resubmit a manuscript. Currently, the acceptance rate is ~20% of all submissions.

The journal aims to contribute to the process of evidence-based medicine by a thorough review of each contribution, directed by the members of an experienced and dedicated editorial board, the professional staff of Bioscientifica, and by the many experts who devote their valuable time and effort. This is not an easy task because the path of evidence-based medicine is paved with many pitfalls, including in clinical endocrinology. We thank each and every one of them and all authors for their continuing and invaluable contributions in making the European Journal of Endocrinology the successful flagship journal of the European Society of Endocrinology.

References

Received 17 August 2011
Accepted 17 August 2011