

## A 30th anniversary and a glimpse of the future

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## A 30th anniversary and a glimpse of the future

### **BLOOD PRESSURE: a 30-year success story**

In 1992, Lennart Hansson, Sverker Jern and Thomas Hedner, three enthusiastic and enterprising clinicians interested in hypertension research decided to create a new journal, which they entitled BLOOD PRESSURE (Figure 1). Their main objective was to *'facilitate the communication of research findings as effectively as possible in order to stimulate exchange of new ideas and thereby initiate further progress'* [1]. As mentioned in their first editorial, the ambition was also to emphasise on clinical rather than on basic research. Initially, BLOOD PRESSURE was printed by Scandinavian University Press, a publishing company resulting from the merge of a Norwegian and a Swedish publisher, but today, after a consolidation within the scientific publishing sector, Taylor and Francis Ltd. is the official publisher of the journal. While celebrating its 30-year anniversary in 2022, founders of BLOOD PRESSURE could be proud of the development of their journal. Indeed, over the years, BLOOD PRESSURE has witnessed an increasing popularity as a publisher of high-impact clinical research, which is reflected by a steadily rising impact factor, this latter having increased more than two-fold between 2010 and 2020 to reach 2.83.

Several factors have contributed to the successful development of the journal. The first was undoubtedly the great contribution of Scandinavian investigators who covered a wide range of important hypertension topics from basic physiology, with world experts like Prof. Björn Folkow [2], to drug development and large clinical outcome studies with trial experts like Profs. Lennart Hansson, Björn Dahlöf, Hans Ibsen, Lars Lindholm, Per Lund-Johansen and Sverre E. Kjeldsen. Indeed, the development and the participation in large clinical morbidity and mortality trials in hypertension has become a 'specialty' of Nordic countries, which were perfectly organised and experienced to run such large trials. Thus, over the years, numerous outcome studies in hypertension were conducted in Scandinavia. These included for example STOP, STOP-2, CAPPP, NORDIL, HOT, LIFE, VALUE, ASCOT and ACCOMPLISH though with time large fractions of patients were also included in UK, USA and in other countries. Although results of these trials were always published in the Lancet or the New England Journal of Medicine, BLOOD PRESSURE benefitted a lot from these studies. In this respect, one reference article, published in BLOOD PRESSURE in 1992, is the first description of the PROBE (Prospective

Randomised Open Blinded Endpoint) design for large clinical outcome trials, a method that became rapidly adopted for use in several large clinical morbidity and mortality outcome studies [3]. Papers describing protocols, including background, randomised populations and progress reports were frequently published in BLOOD PRESSURE.

The second major factor is certainly the tight link between the journal and the European Society of Hypertension (ESH). From its introduction, the journal enjoyed the full support and endorsement of the ESH and with time all ESH council members served on the BLOOD PRESSURE editorial board. In addition, several ESH presidents (L. Hansson, S. Kjeldsen, K. Narkiewicz) contributed to the journal as editors in chief or editors. In 2002, the BLOOD PRESSURE 10th anniversary Research Prize was attributed to Prof. Andrzej Januszewicz, current secretary of the ESH council. Thereby, the journal became more European and nowadays international with the support of more than 150 hypertension experts from all over the world. This fruitful collaboration has resulted in the publication of several ESH Newsletters and ESH guidelines [4] or practice guidelines [5] in BLOOD PRESSURE.

At last, one should not forget that the successful development of the journal is due in large part to the enthusiasm, the high level of competences and the perseverance of the successive editors and associate editors who succeeded in maintaining the reputation of the journal.

### **BLOOD PRESSURE: a glimpse of the future**

2022 will not only be the year of its 30th anniversary, it will also be a year of transition that should project the journal into the future. Indeed, several significant changes will take place as of 1 January 2022.

The first relates to the scientific environment. After having served many years as editor and 6 years as editor in chief, Prof. Sverre Kjeldsen has decided to step down from this position and to keep his activities in the journal as editor. Under his direction, BLOOD PRESSURE has gained notoriety and respect. His critical appraisal of controversial issues in hypertension expressed in editorials has always been highly appreciated. Therefore, one can be glad that he will remain in the editorial team. This latter has now been further reinforced with the arrival of two highly renowned hypertension specialists i.e. Prof. Brent Egan, from the University of South Carolina

*Thomas Hedner**Lennart Hansson**Sverker Jern***Figure 1.** The founders of BLOOD PRESSURE (From ref. [1]).

School of Medicine, Greenville, SC, and Vice-President, Cardiovascular Health at American Medical Association, and Prof. Reinhold Kreutz, from the Charité University Medicine in Berlin and actual president of the ESH. We take the opportunity to thank Prof. Suzanne Oparil, who has served for many years as editor of BLOOD PRESSURE. The editorial team gained a lot from her long experience in hypertension and her wise and pertinent recommendations. She will now continue her activities as honorary editor of the journal together with another famous hypertension specialist, Professor Giuseppe Mancia.

With the change in editor in chief, BLOOD PRESSURE will depart Scandinavia for the first time in its history and move to Switzerland. However, the participation of hypertension experts from Nordic countries will remain important. With a new editorial team taking office, the editorial board has been rejuvenated with a greater participation of young, talented, and motivated researchers associated with a solid group of experienced European hypertension experts. There is also a clear intention to reinforce the link with ESH and its national and international affiliates including in Asia and South-America. In this context, we would like to welcome and thank all new members of the editorial board who have agreed to support actively BLOOD PRESSURE in the future.

The aim and scopes of BLOOD PRESSURE will remain focussed primarily on clinical sciences. As announced previously, main features will be the physiology and pathophysiology of blood pressure regulation, new methods to measure blood pressure, the detection and diagnosis of primary and secondary forms of

hypertension and complications of hypertension. The publication of new trends in the non-pharmacological and pharmacological management of hypertension based on clinical pharmacology studies and large outcome trials will remain the core feature of the journal and will be extended to hypertension follow-up, including adherence issues, patients' perspectives, and preventive strategies. We also intend to increase the possibilities to write personal views, in which distinguished scientists present thoughts, views, debates and high-quality reviews that address important topics of great current interest.

Starting in January 2022, BLOOD PRESSURE will be an online-only and entirely open access journal. Today, science is increasingly conveyed by the Internet and the use of paper version is declining for economic and ecological reasons. So far, BLOOD PRESSURE was published 6 times a year and limited to 400 pages in total, but accepted manuscripts were accessible more rapidly in their online versions than on paper. Being online-only offers the advantage of a faster publication of the final version and abolishes any limit in the number of pages published every year, thereby providing greater opportunities to publish in the journal. A reduction of the time to publication may also help young scientist in reaching milestones for their career advancement. Nonetheless, this does not mean that all manuscripts submitted to BLOOD PRESSURE will be accepted as the standards of quality and pertinence will remain as high as they are today.

Nowadays, publishing in open access is a policy recommended by most national science funding authorities and open access publications are considered when assessing grant applications. The general concept is that

new science must reach healthcare providers and the population more rapidly and should gain visibility as stated in the Berlin Declaration (<http://openaccess.mpg.de/Berlin-Declaration>). In this respect, it is interesting to note that, on average, open-access articles are consulted 4 times more often and cited 1.6 more times than papers published in a pay-per-view system. One commonly reported issue is the ability of young researchers to pay for the publication of their work (APC, author payment charges). Hopefully, many national science authorities have implemented financial supports for open-access publications. In addition, publishers like Taylor & Francis have signed open access agreements with universities and funding agencies in many countries that may help researchers publish their work open access with minimal or no APC. Therefore, open-access publication should not be a limiting factor for the publication of high-quality science and the editors of the journal will engage themselves for fair publishing conditions.

BLOOD PRESSURE is experiencing significant changes, which will shape its future and should contribute further to its development as a highly relevant journal in the field of clinical hypertension. We do hope that our colleagues will follow us in this new adventure and support the journal by submitting some of their best research data.

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