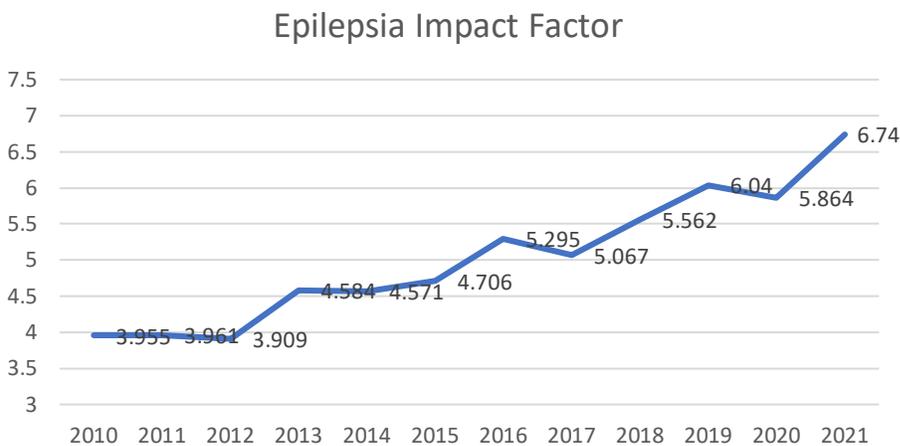


## *Epilepsia* 2022 Annual Report

*Epilepsia* had another successful year in 2022. Its impact factor remains in our target range and was 6.740 in 2021, ranking 27<sup>th</sup> of 212 journals within the Clinical Neurology category. Given the lack of any ILAE reports, definitions, or guidelines, we were especially pleased that it remained close to the prior year’s score, supporting the increase in quality of the journal publications. *Epilepsia*’s impact factor is significantly higher than the impact factor of any of the other epilepsy sub-specialty journals that publish original research. Our objective has been to improve journal quality and maintain an impact factor of 5.0 or greater. The journal now attracts high quality publications in basic and clinical science. Submissions in 2021 returned to pre-pandemic levels after the increase noted in 2020. Our objective remains to continue improving journal quality by maintaining a focus on publishing novel, high quality scientific findings and state of the art reviews. We began a new initiative in 2020, bringing on an associate editor for reviews. We anticipate that this will lead to increase in impact factor with a further increase in quality of submissions to the journal. We continue to publish manuscripts in a wide variety of areas in epilepsy, including basic science, clinical neurology, neuropsychology, clinical neurophysiology, neuroimaging, genetics, and others, and encompass both adult and pediatric epileptology. We strive to publish papers that reflect the diversity of interests of the membership of the League, maintaining the focus on quality. As can be seen in the table below, the most downloaded and most cited articles are mainly important original research contributions, and we anticipate that reviews will feature more prominently in these lists.

### Evolution of the Impact Factor



**Volume 63** (calendar year 2022) comprised 3347 printed editorial pages among which 1483 were open access plus 157 e-only pages, which included twelve regular monthly issues. The open access articles comprise ILAE Position papers, Reports from ILAE Organizational Entities, Clinical Practice Guidelines papers.

The following supplements were also published:

S1: Special Issue: Seizure Clusters: Practical Aspects and Clinical Strategies to Care for Patients in the Community. Guest Editors: Patricia E. Penovich and Tracy Glauser. This supplement was supported by a grant from Neurelis, Inc. Guest Editors: Patricia E. Penovich and Tracy Glauser, 68 pages.

S2: Special Issue: 14th European Epilepsy Congress Geneva, Switzerland & Online 9–13 July 2022, 278 pages

**Manuscript Statistics for *Epilepsia***

In 2022, there was a decrease in the number of submissions across all categories to a rate like prior years, as can be seen in the table below; this compares the number of submissions in 2019, 2020, 2021 and 2022. The number of submissions went back to its usual level of the pre-Covid period.

**Comparison between the number of Submissions 2019-2022**

Article Type	2019	2020	2021	2022
Research Article	844	1117	854	792
Brief communications	174	260	140	142
Critical reviews	53	64	57	64
All manuscripts	1128	1530	1113	1079

The submissions remained predominantly clinical, with only a 10-17% basic over the years.

**Submissions per specialty (clinical vs basic/translational)**

Year	Clinical	%	Basic	%	Total
2022	925	85.7%	154	14.3%	1079
2021	969	87.1%	144	12.9%	1113
2020	1371	89.6%	159	10.4%	1530
2019	945	83.3%	189	16.7%	1134
2018	952	84.8%	171	15.2%	1123

**Accept - Rejection rates – 2020-2022 Submissions.**

\*Papers submitted in 2022 with a final decision.

**Accept-Rejection** rates are listed in terms of number of manuscripts submitted and accepted/rejected for the different categories of papers published in the journal. Submission years 2019, 2020 2021 and 2022 are listed below. All 2019-2022 papers were included as all papers submitted have received a final decision. For submission year 2022\*, presently 12.14% of submitted papers remain without a final decision as of the writing of this report (most will likely be accepted), with reviews pending or revisions requested. The accept/rejection rates in all categories peaked in 2020 but during year 2021 they all went down to the level reached prior the pre-Covid submission period.

### All Manuscripts

Decision	2019		2020		2021		2022*	
Accept	276	24.47%	368	24.05%	296	26.59%	230	21.32%
Reject (No review and reviewed)	849	75.26%	1,159	75.75%	812	72.96%	711	65.89%
No Final Decision						0.00%	131	12.14%
Other	3	0.27%	3	0.20%	5	0.45%	7	0.65%
Total	1,128	100.00%	1,530	100.00%	1,113	100.00%	1,079	100.00%

### Research Articles

Decision	2019		2020		2021		2022*	
Accept	186	22.04%	240	21.49%	210	24.59%	137	17.30%
Reject (No review and reviewed)	655	77.60%	876	78.42%	641	75.06%	562	70.96%
No Final Decision						0.00%	87	10.98%
Other	3	0.36%	1	0.09%	3	0.35%	6	0.76%
Total	844	100.0%	<b>1,117</b>	100.00%	<b>854</b>	100.00%	<b>792</b>	100.00%

### Brief Communications

Decision	2019		2020		2021		2022*	
Accept	22	12.57%	41	15.77%	21	15.00%	22	15.49%
Reject (No review and reviewed)	153	87.43%	218	83.85%	117	83.57%	105	73.94%
No Final Decision						0.00%	15	10.56%
Other			1	0.38%	2	1.43%		0.00%
Total	175	100.00%	260	100.0%	140	100.00%	142	100.00%

### Critical Reviews

Decision	2019		2020		2021		2022*	
Accept	21	39.62%	31	48.44%	22	38.60%	24	37.50%
Reject (No review and reviewed)	32	60.38%	33	51.56%	35	61.40%	26	40.63%
No Final Decision							12	18.75%
Other							2	3.13%
Total	53	100.00%	64	100.0%	57	100.00%	64	100.00%

### *Epilepsia* Rejection Statistics – 2019-2022 Submissions

\*Papers submitted in 2022 with a final decision.

### All Manuscripts

	2019		2020		2021		2022*	
Reject – No Review	289	34.04%	482	41.59%	353	43.47%	375	52.74%
Reject – No Review - Transfer offer EO	154	18.14%	191	16.48%	108	13.30%	68	9.56%
Reject – No Review - Transfer offer EPD	49	5.77%	59	5.09%	50	6.16%	48	6.75%
Direct reject/resubmit	33	3.89%	15	1.29%	281	34.61%	202	28.41%
Reject after review	223	26.27%	335	28.90%				
Reject -Reviewed - Transfer offer EO	42	4.95%	28	2.42%	18	2.22%	14	1.97%
Reject -Reviewed - Transfer offer EPD	5	0.59%	3	0.26%	2	0.25%	4	0.56%
Reject/resubmit (Reviewed)	54	6.36%	46	3.97%				
Total	849	100.00%	1,159	100.00%	812	100.00%	711	100.00%

### Research Articles

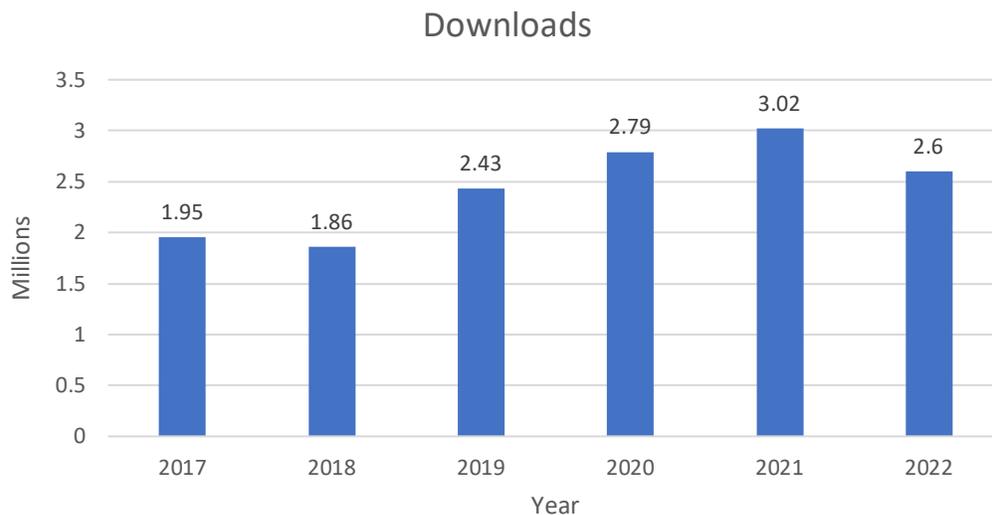
	2019		2020		2021		2022*	
Reject – No Review	217	33.13%	347	39.61%	264	41.12%	294	52.31%
Reject – No Review - Transfer offer EO	117	17.86%	140	15.98%	90	14.02%	51	9.07%
Reject – No Review - Transfer offer EPD	39	5.95%	47	5.37%	35	5.45%	38	6.76%
Direct reject/resubmit	21	3.21%	12	1.37%			163	29.00%
Reject after review	181	27.63%	266	30.37%	236	36.76%		
Reject -Reviewed - Transfer offer EO	31	4.73%	18	2.05%	15	2.34%	12	2.14%
Reject -Reviewed - Transfer offer EPD	3	0.46%	3	0.34%	2	0.31%	4	0.71%
Reject/resubmit (Reviewed)	46	7.02%	43	4.91%				
<b>Total</b>	<b>655</b>	<b>100.00%</b>	<b>876</b>	<b>100.00%</b>	<b>642</b>	<b>100.00%</b>	<b>562</b>	<b>100.00%</b>

### Brief Communications

	2019		2020		2021		2022*	
Reject – No Review	55	36.18%	104	47.93%	60	51.28%	46	43.81%
Reject – No Review - Transfer offer EO	36	23.68%	48	22.12%	16	13.68%	17	16.19%
Reject – No Review - Transfer offer EPD	10	6.58%	12	5.53%	12	10.26%	9	8.57%
Direct reject/resubmit	9	5.92%	2	0.92%				
Reject after review	26	17.11%	41	18.89%	26	22.22%	31	29.52%
Reject -Reviewed - Transfer offer EO	9	5.92%	9	4.15%	3	2.56%	2	1.90%
Reject -Reviewed - Transfer offer EPD	1	0.66%						
Reject/resubmit (Reviewed)	6	3.95%	1	0.46%				
<b>Total</b>	<b>152</b>	<b>100.00%</b>	<b>217</b>	<b>100.00%</b>	<b>117</b>	<b>100.00%</b>	<b>105</b>	<b>100.00%</b>

The editors consider quality and novelty as the most important criteria when choosing papers for publication. The journal has a diverse audience, and the editors view the need to appeal to a wide range of readers as critical. Financially, the Journal remains highly successful, bringing in net income to ILAE of over US\$1 million.

### Downloaded Articles



There were 2.41M full-text downloads of *Epilepsia* content in 2022.

**Top 20: 2022 Downloads**

Rank	Article title	Author	DOI	Publication Year	Volume	Issue	Full text Downloads
1	ILAE classification and definition of epilepsy syndromes with onset in neonates and infants: Position statement by the ILAE Task Force on Nosology and Definitions	R. Nabbout	<a href="http://dx.doi.org/10.1111/epi.17239">http://dx.doi.org/10.1111/epi.17239</a>	2022	63	6	30,716
2	International League Against Epilepsy classification and definition of epilepsy syndromes with onset in childhood: Position paper by the ILAE Task Force on Nosology and Definitions	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17241">http://dx.doi.org/10.1111/epi.17241</a>	2022	63	6	30,248
3	International League Against Epilepsy classification and definition of epilepsy syndromes with onset at a variable age: position statement by the ILAE Task Force on Nosology and Definitions	K. Riney	<a href="http://dx.doi.org/10.1111/epi.17240">http://dx.doi.org/10.1111/epi.17240</a>	2022	63	6	20,456
4	ILAE definition of the Idiopathic Generalized Epilepsy Syndromes: Position statement by the ILAE Task Force on Nosology and Definitions	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17236">http://dx.doi.org/10.1111/epi.17236</a>	2022	63	6	19,332
5	Introduction to the epilepsy syndrome papers	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17262">http://dx.doi.org/10.1111/epi.17262</a>	2022	63	6	16,228
6	Methodology for classification and definition of epilepsy syndromes with list of syndromes: Report of the ILAE Task Force on Nosology and Definitions	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17237">http://dx.doi.org/10.1111/epi.17237</a>	2022	63	6	15,723
7	International consensus recommendations for management of new onset refractory status epilepticus (NORSE) including febrile infection-related epilepsy syndrome (FIRES): Summary and clinical tools	R. Wickstrom	<a href="http://dx.doi.org/10.1111/epi.17391">http://dx.doi.org/10.1111/epi.17391</a>	2022	63	11	11,991
8	International consensus on diagnosis and management of Dravet syndrome	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17274">http://dx.doi.org/10.1111/epi.17274</a>	2022	63	7	6,759
9	The ILAE consensus classification of focal cortical dysplasia: An update proposed by an ad hoc task force of the ILAE diagnostic methods commission	I. Najm	<a href="http://dx.doi.org/10.1111/epi.17301">http://dx.doi.org/10.1111/epi.17301</a>	2022	63	8	6,627
10	Visually sensitive seizures: An updated review by the Epilepsy Foundation	R. Fisher	<a href="http://dx.doi.org/10.1111/epi.17175">http://dx.doi.org/10.1111/epi.17175</a>	2022	63	4	3,662

11	Structure and function of language networks in temporal lobe epilepsy	L. Binding	<a href="http://dx.doi.org/10.1111/epi.17204">http://dx.doi.org/10.1111/epi.17204</a>	2022	63	5	3,226
12	Proposal for an updated seizure classification framework in clinical trials	C. Steriade	<a href="http://dx.doi.org/10.1111/epi.17120">http://dx.doi.org/10.1111/epi.17120</a>	2022	63	3	2,842
13	Deep brain stimulation targets in epilepsy: Systematic review and meta-analysis of anterior and centromedian thalamic nuclei and hippocampus	A. Lozano	<a href="http://dx.doi.org/10.1111/epi.17157">http://dx.doi.org/10.1111/epi.17157</a>	2022	63	3	2,787
14	Noninvasive mobile EEG as a tool for seizure monitoring and management: A systematic review	A. Biondi	<a href="http://dx.doi.org/10.1111/epi.17220">http://dx.doi.org/10.1111/epi.17220</a>	2022	63	5	2,612
15	International consensus recommendations for management of new onset refractory status epilepticus including febrile infection-related epilepsy syndrome: Statements and supporting evidence	R. Wickstrom	<a href="http://dx.doi.org/10.1111/epi.17397">http://dx.doi.org/10.1111/epi.17397</a>	2022	63	11	2,547
16	Association of ultra-rare coding variants with genetic generalized epilepsy: A case-control whole exome sequencing study	M. Koko	<a href="http://dx.doi.org/10.1111/epi.17166">http://dx.doi.org/10.1111/epi.17166</a>	2022	63	3	2,540
17	Epilepsy and brain network hubs	B. Bernhardt	<a href="http://dx.doi.org/10.1111/epi.17171">http://dx.doi.org/10.1111/epi.17171</a>	2022	63	3	2,513
18	The novel persistent sodium current inhibitor PRAX-562 has potent anticonvulsant activity with improved protective index relative to standard of care sodium channel blockers	K. Kahlig	<a href="http://dx.doi.org/10.1111/epi.17149">http://dx.doi.org/10.1111/epi.17149</a>	2022	63	3	2,370
19	Neurostimulation in people with drug-resistant epilepsy: Systematic review and meta-analysis from the ILAE Surgical Therapies Commission	M. Keezer	<a href="http://dx.doi.org/10.1111/epi.17243">http://dx.doi.org/10.1111/epi.17243</a>	2022	63	6	2,126
20	Neurovascular unit dysfunction as a mechanism of seizures and epilepsy during aging	E. Van Vliet	<a href="http://dx.doi.org/10.1111/epi.17210">http://dx.doi.org/10.1111/epi.17210</a>	2022	63	6	2,098

## Top 20: Most cited articles

Articles published 2021-2022 (Citations as of the writing of this report)

Rank	Title	Author	DOI	Publication Year	Volume	Issue	Citations
1	The ILAE classification of seizures and the epilepsies: Modification for seizures in the neonate. Position paper by the ILAE Task Force on Neonatal Seizures	R. Pressler	<a href="http://dx.doi.org/10.1111/epi.16815">http://dx.doi.org/10.1111/epi.16815</a>	2021	62	3	61
2	The SAnTe study at 10 years of follow-up: Effectiveness, safety, and sudden unexpected death in epilepsy	V. Salanova	<a href="http://dx.doi.org/10.1111/epi.16895">http://dx.doi.org/10.1111/epi.16895</a>	2021	62	3	48
3	ILAE classification and definition of epilepsy syndromes with onset in neonates and infants: Position statement by the ILAE Task Force on Nosology and Definitions	R. Nabbout	<a href="http://dx.doi.org/10.1111/epi.17239">http://dx.doi.org/10.1111/epi.17239</a>	2022	63	6	34
3	Automated seizure detection using wearable devices: A clinical practice guideline of the International League Against Epilepsy and the International Federation of Clinical Neurophysiology	S. Beniczky	<a href="http://dx.doi.org/10.1111/epi.16818">http://dx.doi.org/10.1111/epi.16818</a>	2021	62	3	30
5	First evidence of altered microbiota and intestinal damage and their link to absence epilepsy in a genetic animal model, the WAG/Rij rat	E. Russo	<a href="http://dx.doi.org/10.1111/epi.16813">http://dx.doi.org/10.1111/epi.16813</a>	2021	62	2	25
6	Toward a better definition of focal cortical dysplasia: An iterative histopathological and genetic agreement trial	I. Bluemcke	<a href="http://dx.doi.org/10.1111/epi.16899">http://dx.doi.org/10.1111/epi.16899</a>	2021	62	6	23
7	International League Against Epilepsy classification and definition of epilepsy syndromes with onset in childhood: Position paper by the ILAE Task Force on Nosology and Definitions	E. Wirrell	<a href="http://dx.doi.org/10.1111/epi.17241">http://dx.doi.org/10.1111/epi.17241</a>	2022	63	6	23
8	Comparison of minimally invasive and traditional surgical approaches for refractory mesial temporal lobe epilepsy: A systematic review and meta-analysis of outcomes	K. Kohlhase	<a href="http://dx.doi.org/10.1111/epi.16846">http://dx.doi.org/10.1111/epi.16846</a>	2021	62	4	20

9	Final results from a Phase 3, long-term, open-label, repeat-dose safety study of diazepam nasal spray for seizure clusters in patients with epilepsy	J. Wheless	<a href="http://dx.doi.org/10.1111/epi.17041">http://dx.doi.org/10.1111/epi.17041</a>	2021	62	10	19
10	Epilepsy care during the COVID-19 pandemic	J. Cross	<a href="http://dx.doi.org/10.1111/epi.17045">http://dx.doi.org/10.1111/epi.17045</a>	2021	62	10	19
11	Anterior nucleus of the thalamus seizure detection in ambulatory humans	N. Gregg	<a href="http://dx.doi.org/10.1111/epi.17047">http://dx.doi.org/10.1111/epi.17047</a>	2021	62	10	18
12	The ups and downs of alkyl-carbamates in epilepsy therapy: How does cenobamate differ?	W. Loescher	<a href="http://dx.doi.org/10.1111/epi.16832">http://dx.doi.org/10.1111/epi.16832</a>	2021	62	3	18
	Defining Dravet syndrome: An essential pre-requisite for precision medicine trials	I. Scheffer	<a href="http://dx.doi.org/10.1111/epi.17015">http://dx.doi.org/10.1111/epi.17015</a>	2021	62	9	17
13	The severe epilepsy syndromes of infancy: A population-based study	K. Howell	<a href="http://dx.doi.org/10.1111/epi.16810">http://dx.doi.org/10.1111/epi.16810</a>	2021	62	2	17
14							
15	First-line antiepileptic drug treatment in glioma patients with epilepsy: Levetiracetam vs valproic acid	P. Van Der Meer	<a href="http://dx.doi.org/10.1111/epi.16880">http://dx.doi.org/10.1111/epi.16880</a>	2021	62	5	16
16	Interictal electroencephalographic functional network topology in drug-resistant and well-controlled idiopathic generalized epilepsy	E. Pegg	<a href="http://dx.doi.org/10.1111/epi.16811">http://dx.doi.org/10.1111/epi.16811</a>	2021	62	2	16
17	Dietary medium chain triglycerides for management of epilepsy: New data from human, dog, and rodent studies	K. Borges	<a href="http://dx.doi.org/10.1111/epi.16972">http://dx.doi.org/10.1111/epi.16972</a>	2021	62	8	15
18	Accurate detection of typical absence seizures in adults and children using a two-channel electroencephalographic wearable behind the ears	L. Swinnen	<a href="http://dx.doi.org/10.1111/epi.17061">http://dx.doi.org/10.1111/epi.17061</a>	2021	62	11	15
19	Seizure detection using wearable sensors and machine learning: Setting a benchmark	J. Tang	<a href="https://dx.doi.org/10.1111/epi.16967">https://dx.doi.org/10.1111/epi.16967</a>	2021	62	8	15
20	Epileptic heart: A clinical syndromic approach	R. Verrier	<a href="http://dx.doi.org/10.1111/epi.16966">http://dx.doi.org/10.1111/epi.16966</a>	2021	62	8	15

### Top Altmetric Scores: Published in 2022

Rank	Article title	Author	DOI	Publication Year	Volume	Issue	Altmetric Score
1	Fenfluramine provides clinically meaningful reduction in frequency of drop seizures in patients with Lennox–Gastaut syndrome: Interim analysis of an open-label extension study	K. Knupp	<a href="https://doi.org/10.1111/epi.17431">https://doi.org/10.1111/epi.17431</a>	2022	64	1	363
2	Lack of clinically relevant differences in safety and pharmacokinetics after second-dose administration of intranasal diazepam within 4 h for acute treatment of seizure clusters: A population analysis	G. Cascino	<a href="https://doi.org/10.1111/epi.17249">https://doi.org/10.1111/epi.17249</a>	2022	63	7	272
3	International consensus recommendations for management of new onset refractory status epilepticus (NORSE) including febrile infection-related epilepsy syndrome (FIRES): Summary and clinical tools	R. Wickstrom	<a href="https://doi.org/10.1111/epi.17391">https://doi.org/10.1111/epi.17391</a>	2022	63	11	166
4	Significant improvements in Seizure interval (time between seizure clusters) across time in patients treated with diazepam nasal spray as intermittent rescue therapy for seizure clusters	S. Misra	<a href="https://doi.org/10.1111/epi.17385">https://doi.org/10.1111/epi.17385</a>	2022	63	10	139
5	Timing of referral to evaluate for epilepsy surgery: Expert Consensus Recommendations from the Surgical Therapies Commission of the International League Against Epilepsy	L. Jehi	<a href="https://doi.org/10.1111/epi.17350">https://doi.org/10.1111/epi.17350</a>	2022	63	10	119
6	SCN1A gain-of-function mutation causing an early onset epileptic encephalopathy	J. Clatot	<a href="https://doi.org/10.1111/epi.17444">https://doi.org/10.1111/epi.17444</a>	2022			115
7	Hospital costs associated with vague nerve stimulation and medical treatment in pediatric patients with refractory epilepsy	L. Zhang	<a href="https://doi.org/10.1111/epi.17208">https://doi.org/10.1111/epi.17208</a>	2022	63	5	79
8	Management of epilepsy in older adults: A critical review by the ILAE Task Force on Epilepsy in the elderly	L. Piccenna	<a href="https://doi.org/10.1111/epi.17426">https://doi.org/10.1111/epi.17426</a>	2022			73
9	Pharmacological inhibition of Striatal-Enriched protein tyrosine Phosphatase by TC-2153 reduces hippocampal excitability and seizure propensity	J. Walters	<a href="https://doi.org/10.1111/epi.17192">https://doi.org/10.1111/epi.17192</a>	2022	63	5	66
10	ILAE classification and definition of epilepsy syndromes with onset in neonates and infants: Position statement by the ILAE Task Force on Nosology and Definitions	S. Zuberi	<a href="https://doi.org/10.1111/epi.17239">https://doi.org/10.1111/epi.17239</a>	2022	63	6	65
11	Neurobehavioral deficits and a progressive ictogenesis in the tetrodotoxin model of epileptic spasms	J. Le	<a href="https://doi.org/10.1111/epi.17428">https://doi.org/10.1111/epi.17428</a>	2022	63	12	60
12	Provoked seizures and status epilepticus in a pediatric population with COVID-19 disease	A. Thongsing	<a href="https://doi.org/10.1111/epi.17293">https://doi.org/10.1111/epi.17293</a>	2022	63	8	58
13	International consensus on diagnosis and management of Dravet syndrome	E. Wirrell	<a href="https://doi.org/10.1111/epi.17274">https://doi.org/10.1111/epi.17274</a>	2022	63	7	52
14	Short- and long-interval intracortical inhibition in EPM1 is related to genotype	K. Silvennoinen	<a href="https://doi.org/10.1111/epi.17466">https://doi.org/10.1111/epi.17466</a>	2022			42

15	A randomized, open-label, two-treatment crossover study to evaluate the effect of food on the pharmacokinetics of diazepam nasal spray in healthy adults	M. Rogawski	<a href="https://doi.org/10.1111/epi.17459">https://doi.org/10.1111/epi.17459</a>	2022			42
16	COVID-19 vaccine in patients with Dravet syndrome: Observations and real-world experiences	V. Hood	<a href="https://doi.org/10.1111/epi.17250">https://doi.org/10.1111/epi.17250</a>	2022	63	7	42
17	International League Against Epilepsy classification and definition of epilepsy syndromes with onset at a variable age: position statement by the ILAE Task Force on Nosology and Definitions	K. Riney	<a href="https://doi.org/10.1111/epi.17240">https://doi.org/10.1111/epi.17240</a>	2022	63	6	41
18	The ILAE consensus classification of focal cortical dysplasia: An update proposed by an ad hoc task force of the ILAE diagnostic methods commission	I. Najm	<a href="https://doi.org/10.1111/epi.17301">https://doi.org/10.1111/epi.17301</a>	2022	63	6	41
19	Precision medicine for genetic epilepsy on the horizon: Recent advances, present challenges, and suggestions for continued progress	J. Knowles	<a href="https://doi.org/10.1111/epi.17332">https://doi.org/10.1111/epi.17332</a>	2022	63	10	38
20	A phase 2, randomized, double-blind, placebo-controlled study to evaluate the efficacy and safety of soticlestat as adjunctive therapy in pediatric patients with Dravet syndrome or Lennox–Gastaut syndrome ( ELEKTRA )	C. Hahn	<a href="https://doi.org/10.1111/epi.17367">https://doi.org/10.1111/epi.17367</a>	2022	63	10	38

Altmetric is a system that tracks the attention that research outputs such as scholarly articles and data sets receive online. It pulls data from social media such as Twitter and Facebook, Traditional media - both mainstream (The Guardian, New York Times) and field specific (New Scientist, Bird Watching). Many non-English language titles are covered. It is important to note that Altmetric measures attention, not quality; Altmetric only tracks public attention and direct attention.

The Altmetric Attention Score is influenced by two factors:

1. The quantity of posts mentioning an output
2. The quality of the post's source

**Important things to remember:**

- Altmetric measures **attention**, not quality. People pay attention to papers for all sorts of reasons, not all of them positive.
- Altmetric only tracks **public** attention. Papers are discussed in private forums, offline in journal clubs and by email but we cannot track this.
- Altmetric tracks **direct** attention, attention focused on a specific research paper or dataset. More specifically for a newspaper article or blog post etc. to be counted by Altmetric it must either contain a link to the publication (journal article, DOI, PMID, or institutional repository) or reach our text mining criteria.
- Altmetric provides you with a single metric per output so that you can quickly **compare relative levels of attention**, but it only makes sense to use this when comparing apples with apples (e.g., within a single discipline). The norms for attention are very different for different scientific disciplines, just as the norms for citations are.

## Geographic distribution of manuscripts submitted to *Epilepsia*.

*Epilepsia* received submissions from 61 countries in 2022.

### 2022 Submission: Top 20 countries

Country	%	Country	%
United States	24.9 %	India	2.1 %
China	14.7 %	Turkey	1.9 %
Australia	6.1 %	Brazil	1.9 %
United Kingdom of Great Britain and Northern Ireland	5.6 %	Israel	1.5 %
Germany	5.0 %	Netherlands	1.5 %
Italy	4.0 %	Spain	1.4 %
Canada	3.9 %	Denmark	1.3 %
Japan	3.3 %	Taiwan	1.1 %
France	2.8 %	Belgium	0.9 %
Korea (the Republic of)	2.4 %	Sweden	0.9 %

### 2022 Submission/Acceptance by geographical region

Geographical region	Submissions %	Acceptance %***
Europe	31.5%	26.2%
North America	29.2%	31.9%
Asia	8.5%	8.7%
Oceania (Australia and NZ)	6.2%	24.4%
Middle East / North Africa**	4.4%	12.5%
Central and South America	2.2%	4.0%
Africa	0.83%	11.1%
China*	14.4%	3.1%
India*	2.1%	0.0%

\*India and China are listed separately and not included in Asia

\*\*Israel included in the Middle East/North Africa Region

\*\*\*Manuscripts submitted in 2022 with a final decision. Acceptance percent calculated based on the numbers of papers submitted from each region

### Circulation and Readership

Sales Model	2020	2021
Institutions with access via a Wiley license	7,674	7,505
All Journals license	2,954	2,347
Transformational agreements	961	1,399
Other licenses	3,759	3,759
Institutions with access via traditional subscriptions	37	31
Online	18	18
Print and online	2	2
Print	17	11
Total	7,711	7,536

*Report submitted by Michael R. Sperling, Editor-in-Chief, Epilepsia*