Epilepsia

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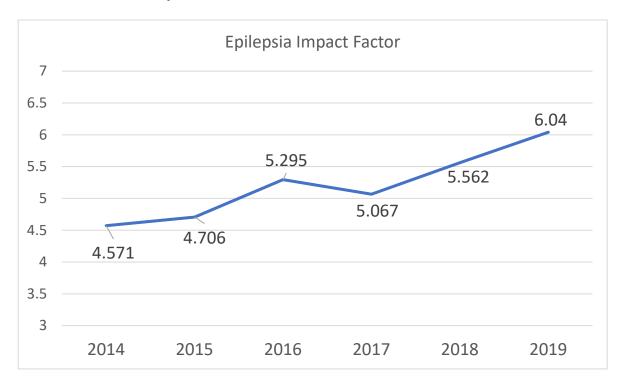
Astrid Nehlig

Mike Sperling

Commission Aims/Goals

Epilepsia had another successful year in 2020. Its impact factor increased to 6.040 in 2020, ranking 20th of 204 journals within the Clinical Neurology category. 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 in recent years 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. The past year has seen a substantial increase not only in number of submissions but in quality as well. Submissions increased by 36% over the prior year, after having been stable for several years before 2020. The increase in submissions started in January, so was not solely an effect of the Covid-19 pandemic. Our objective is to focus on improving journal quality. We began a new initiative in 2020, bringing on an associate editor for reviews. We hope that this will lead to a further increase in quality of submissions to the journal.

Evolution of the impact factor



<u>Volume 61</u> (calendar year 2020) comprised 2975 printed editorial pages plus 202 e-only pages, which included twelve regular monthly issues.

The following supplement was also published:

S1: <u>Special issue: 2nd International Congress on Mobile Devices and Seizure Detection in Epilepsy.</u> Guest Editors: Sándor Beniczky and Philippe Ryvlin, 66 pages

Manuscript Statistics for Epilepsia

The year 2020 was characterized by a very significant increase in the number of submissions by a mean value of about 36% which was occurred in all categories but was particularly marked in the Brief communications category, as can be seen in more details in the table below comparing the number of submissions in 2019 and 2020.

Comparison between the number of submissions in 2019 and 2020

	2019	2020	2020/2019
Decision	# Manuscripts	# Manuscripts	Percent increase
Full length original research	844	1,117	+ 32.35%
Brief communications	174	260	+ 49.43%
Critical reviews – Invited commentaries	53	64	+ 20.75%
All manuscripts	1,128	1,530	+ 35.64%

Submissions per specialty (clinical vs basic/translational)

	Clinical	%	Basic	%	Total
2020	1371	89.6%	159	10.4%	1530
2019	945	83.3%	189	16.7%	1134
2018	952	84.8%	171	15.2%	1123
2017	927	81.7%	208	18.3%	1135
2016	929	82.4%	198	17.6%	1127

Year 2020 was characterized by a big rise in clinical submissions that represent the largest part of the increase in submissions that occurred in 2020.

Accept - Rejection rates - 2019-2020 Submissions

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 and 2020 are listed below. All 2019 papers were included as all papers submitted have received a final decision. For submission year 2020, 5.7% of submitted papers remain without a final decision as of the writing of this report, with reviews pending or revisions requested.

^{*}Papers submitted in 2020 with a final decision.

All Manuscripts

	2019		2020*	
Decision	# Manuscripts	%	# Manuscripts	%
Accept	276	24.47%	295	19.28%
Reject (Direct and after review)	849	75.27%	1,147	74.97%
Other	3	0.27%	1	0.07%
No Final Decision			87	5.69%
Total	1,128	100.00%	1,530	100.00%

Full length Original Research

	2019		2020*	
Decision	# Manuscripts	%	# Manuscripts	%
Accept	186	22.04%	181	16.20%
Reject (Direct and after review)	655	77.61%	870	77.89%
Other	3	0.36%	1	0.09%
No Final Decision			65	5.82%
Total	844	100.00%	1,117	100.00%

Brief Communications

	2019		2020*	
Decision	# Manuscripts	%	# Manuscripts	%
Accept	22	12.64%	33	12.69%
Reject (Direct and after review)	152	87.36%	217	83.46%
No Final Decision			10	3.85%
Total	174	100.00%	260	100.00%

Critical Reviews – Invited Commentaries

	2019		2020*	
Decision	# Manuscripts	%	# Manuscripts	%
Accept	21	39.62%	24	37.50%
Reject (Direct and after review)	32	60.38%	33	51.56%
No Final Decision			7	10.94%
Total	53	100.00%	64	100.00%

Epilepsia Rejection Statistics – 2019-2020 Submissions

All Manuscripts Submitted

	2019		2020	
Decision	# Manuscripts	%	# Manuscripts	%
Direct Reject	289	34.04%	481	41.94%
Direct reject with transfer offer EO	154	18.14%	191	16.65%

^{*}Papers submitted in 2020 with a final decision.

Direct reject with transfer offer EPD	49	5.77%	59	5.14%
Direct reject/resubmit	33	3.89%	15	1.31%
Reject after review	223	26.27%	325	28.33%
Reject after review with a transfer offer EO	42	4.95%	27	2.35%
Reject after review with a transfer offer EPD	5	0.59%	3	0.26%
Reject/resubmit (Reviewed)	54	6.36%	46	4.01%
Total	849	100.00%	1,147	100.00%

Full Length Original Research

	2019		2020	
Decision	# Manuscripts	%	# Manuscripts	%
Direct Reject	217	33.13%	347	39.89%
Direct reject with transfer offer EO	117	17.86%	140	16.09%
Direct reject with transfer offer EPD	39	5.95%	47	5.40%
Direct reject/resubmit	21	3.21%	12	1.38%
Reject after review	181	27.63%	259	29.77%
Reject after review with a transfer offer EO	31	4.73%	18	2.07%
Reject after review with a transfer offer EPD	3	0.46%	3	0.34%
Reject/resubmit (Reviewed)	46	7.02%	44	5.06%
Total	655	100.00%	870	100.00%

Brief Communications

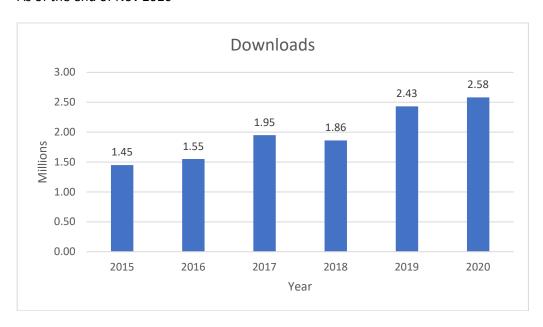
	2019		2020	
Decision	# Manuscripts	%	# Manuscripts	%
Direct Reject	55	36.18%	104	47.93%
Direct reject with transfer offer EO	36	23.68%	48	22.12%
Direct reject with transfer offer EPD	10	6.58%	12	5.53%
Direct reject/resubmit	9	5.92%	2	0.92%
Reject after review	26	17.11%	41	18.89%

Reject after review with a transfer offer EO	9	5.92%	9	4.15%
Reject after review with a transfer offer EPD	1	0.66%	0	0.00%
Reject/resubmit (Reviewed)	6	3.95%	1	0.46%
Total	152	100.00%	217	100.00%

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

As of the end of Nov 2020



Top articles: 2020 Downloads

Rank	Article title	Author	Volume	Issue	# of
1	New onset acute symptomatic seizure and risk factors in coronavirus disease 2019: A retrospective multicenter study	Luo, J	61	6	5,566
2	COVID-19 and seizures: Is there a link?	Vohora, D	61	9	5,522
3	The postictal state — What do we know?	Pottkamper, J	61	6	5,132
4	Acute symptomatic seizures secondary to autoimmune encephalitis and autoimmune-associated epilepsy: Conceptual definitions	Steriade, C	61	7	4,562
5	Dravet syndrome: Treatment options and management of prolonged seizures	Cross, J	60	S3	4,002
6	Cenobamate (YKP3089) as adjunctive treatment for uncontrolled focal seizures in a large, phase 3, multicenter, open-label safety study	Sperling, M	61	6	3,500
7	How technology is driving the landscape of epilepsy surgery	Dorfer, C	61	5	3,203
8	SCN1A-related phenotypes: Epilepsy and beyond	Nabbout, R	60	S3	3,183

9	A new era in electroencephalographic monitoring? Subscalp devices for ultra–long-term recordings	Duun- Henriksen, J	61	9	3,129
10	Continuous EEG findings in patients with COVID-19 infection admitted to a New York academic hospital system	Friedman, D	61	10	3,027
11	Phenotypic spectrum and genetics of SCN2A-related disorders, treatment options, and outcomes in epilepsy and beyond	Wolff, M	60	S3	2,993
12	Seizure detection at home: Do devices on the market match the needs of people living with epilepsy and their caregivers?	Richardson, M	60	S1	2,915
13	Phenotypic and genetic spectrum of epilepsy with myoclonic atonic seizures	Tang, S	5	61	2,755
14	Bioavailability and safety of diazepam intranasal solution compared to oral and rectal diazepam in healthy volunteers	Hogan, R	3	61	2,653
15	Severe psychological distress among patients with epilepsy during the COVID-19 outbreak in southwest China	Yan, B	6	61	2,574
16	Genetic epilepsies and COVID-19 pandemic: Lessons from the caregiver perspective	Aledo-Serrano, A	6	61	2,565
17	Phenotypic and genetic spectrum of SCN8A-related disorders, treatment options, and outcomes	Gardella, E	S3	60	2,502
18	Mesial temporal resection following long-term ambulatory intracranial EEG monitoring with a direct brain-responsive neurostimulation system	Hirsch, L	3	61	2,338
19	Dravet syndrome as part of the clinical and genetic spectrum of sodium channel epilepsies and encephalopathies	Guerrini, R	S3	60	2,292
20	Post–COVID-19 inflammatory syndrome manifesting as refractory status epilepticus	Carroll, E	10	61	2,241

Most cited articles

Articles published 2017-2019

Rank	Title	Author	Publication Year	Citations
1	ILAE classification of the epilepsies: Position paper of the ILAE Commission for Classification and Terminology	Scheffer, I	2017	701
2	Operational classification of seizure types by the International League Against Epilepsy: Position Paper of the ILAE Commission for Classification and Terminology	Fisher, R	2017	448
3	Instruction manual for the ILAE 2017 operational classification of seizure types	Fisher, R	2017	142
4	Interactions between cannabidiol and commonly used antiepileptic drugs	Gaston, T	2017	94
5	Defining epileptogenic networks: Contribution of SEEG and signal analysis	Bartolomei, F	2017	69
6	Proposed consensus definitions for new-onset refractory status epilepticus (NORSE), febrile infection-related epilepsy syndrome (FIRES), and related conditions	Hirsch, L	2018	63
7	New onset acute symptomatic seizure and risk factors in coronavirus disease 2019: A retrospective multicenter study	Luo, J	2020	63
8	High-frequency oscillations: The state of clinical research	Frauscher, B	2017	56
9	Commonalities in epileptogenic processes from different acute brain insults: Do they translate?	Loescher, W	2018	54
10	Brain-responsive neurostimulation in patients with medically intractable mesial temporal lobe epilepsy	Skarpaas, T	2017	54
11	Progress report on new antiepileptic drugs: A summary of the Thirteenth Eilat Conference on New Antiepileptic Drugs and Devices (EILAT XIII)	Bialer, M	2017	54
12	The burden of premature mortality of epilepsy in high-income countries: A systematic review from the Mortality Task Force of the International League Against Epilepsy	Thurman, D	2017	53

13	Diagnostic outcomes for genetic testing of 70 genes in 8565 patients with epilepsy and neurodevelopmental disorders	Mcknight, D	2018	52
14	Anxiety and depressive disorders in people with epilepsy: A meta- analysis	Sharpe, L	2017	52
15	Long-term safety and treatment effects of cannabidiol in children and adults with treatment-resistant epilepsies: Expanded access program results	Szaflarski, J	2018	47
16	Long-term cannabidiol treatment in patients with Dravet syndrome: An open-label extension trial	Devinsky, O	2019	47
17	New-onset refractory status epilepticus (NORSE) and febrile infection—related epilepsy syndrome (FIRES): State of the art and perspectives	Gaspard, N	2018	46
18	Costs, length of stay, and mortality of super-refractory status epilepticus: A population-based study from Germany	Strzelczyk, A	2017	42
19	The epidemiology of drug-resistant epilepsy: A systematic review and meta-analysis	Kalilani, L	2018	41
20	Brain-responsive neurostimulation in patients with medically intractable seizures arising from eloquent and other neocortical areas	Skarpaas, T	2017	41

Top Altmetric Scores: Published in 2020

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.

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

It is important to note that Altmetric measures attention, not quality; Altmetric only tracks public attention and direct attention.

Rank	Article title	Author	Volume	Issue	# of accesses
1	Focal nonmotor versus motor seizures: The impact on diagnostic delay in focal epilepsy	Pellinen, J	61	12	231
2	Prevalence and psychopathologic significance of hallucinations in individuals with a history of seizures	Yates, K	61	7	210
3	A new era in electroencephalographic monitoring? Subscalp devices for ultra–long-term recordings	Duun- Henriksen, J	61	9	107
4	Utility of genetic testing for therapeutic decision-making in adults with epilepsy	Johannesen, K	61	6	98
5	New onset acute symptomatic seizure and risk factors in coronavirus disease 2019: A retrospective multicenter study	Lu, L	61	6	98
6	Genetic epilepsies and COVID? 19 pandemic: Lessons from the caregiver perspective	Aledo-Serrano, A	61	6	93
7	A pragmatic algorithm to select appropriate antiseizure medications in patients with epilepsy	Asadi-Pooya, A	61	8	81
8	The development of an epilepsy electronic patient portal: Facilitating both patient empowerment and remote clinician? patient interaction in a post? COVID-19 world	Power, K	61	9	77
9	Cenobamate (YKP3089) as adjunctive treatment for uncontrolled focal seizures in a large, phase 3, multicenter, open-label safety study	Sperling, M	61	6	66

10	Deciphering the surgical treatment gap for drug-resistant epilepsy (DRE): A literature review	Solli, E	61	7	54
11	Optimal choice of antiseizure medication: Agreement among experts and validation of a web-based decision support application	Beniczky	62	1	44
12	Treatment of psychogenic nonepileptic seizures (PNES) using video telehealth	LaFrance, W	61	11	44
13	Acute symptomatic seizures secondary to autoimmune encephalitis and autoimmune associated epilepsy: Conceptual definitions	Steriade, C	61	7	43
14	Clinical sequencing yield in epilepsy, autism spectrum disorder, and intellectual disability: A systematic review and meta-analysis	Stefanski, A	62	1	43
15	Orbitofrontal involvement in a neuroCOVID?19 patient	Le Guennec, L	61		40
16	Value of 7T MRI and post-processing in patients with nonlesional 3T MRI undergoing epilepsy presurgical evaluation	Wang, I	61	11	39
17	Misperceptions on the chance of seizure freedom with antiseizure medications after two failed trials	Blond, B	61	8	37
18	Mortality in infantile spasms: A hospital-based study	Harini, C	61	4	36
19	Biological concepts in human sodium channel epilepsies and their relevance in clinical practice	Brunklaus, A	61	3	36
20	Long-term outcomes of reoperations in epilepsy surgery	Yardi, R	61	3	34

Geographic distribution of manuscripts submitted to Epilepsia

Epilepsia received submissions from 64 countries in 2020.

2020 Submission: Top 20 countries

Country	%	Country	%
United States	30.8 %	Korea (the Republic of)	2.5 %
China	9.0 %	Japan	2.5 %
United Kingdom of Great	6.5 %	Brazil	2.3 %
Britain and Northern Ireland			
Italy	5.4 %	Denmark	2.0 %
Germany	5.1 %	Israel	1.3 %
Canada	5.1 %	Netherlands	1.0 %
Australia	4.2 %	Turkey	0.9 %
France	4.1 %	Austria	0.8 %
India	3.7 %	Belgium	0.7 %
Spain	2.7 %	Ireland	0.7 %

2020 Submission/Acceptance by geographical region

Geographical region	% Submissions	% Acceptance***
North America	32.2%	26.4%
Europe	31.7%	26.2%
Asia	24.4%	4.2%*
Middle East /North Africa**	4.2%	12.5%
Oceania (Australia and NZ)	3.5%	33.9%

Central and South America	3.4%	13.4%
Africa	0.6%	10.0%
China*	9.0	4.9%
India*	3.7	8.5%

^{*}India and China are listed separately and not included in Asia

Through the end of November 2020, there were 2.6M full-text downloads of *Epilepsia* content, a 14.8% increase (YTD). In terms of circulation and readership, we do not yet have the full 2020 circulation numbers to report. In 2019, 7,751 institutions offered access to *Epilepsia* either through a license or a traditional (title-by-title) subscription. Licensed subscriptions grew by 12% from 6,762 to 7,727. The increase in licensed access typically means a decrease in title-by-title subscriptions. In 2019, traditional subscriptions dropped by 60% from 63 to 24. In addition, Hinari philanthropic initiatives extended low-cost or free access to current content in 2019 to 6,193 developing world institutions.

Submitted by Astrid Nehlig and Michael Sperling Editors-in-Chief, *Epilepsia*

^{**}Israel included in the Middle East/North Africa Region

^{***}Manuscripts submitted in 2020 with a final decision. Acceptance percent calculated based on the numbers of papers submitted from each region