## **EDITORIAL**



## Acta Dermato-Venereologica on the Move: on Drug Reactions, Impact Factors and Our New Section Editor

One thing which strikes me when looking back on 4 years as Editor of Acta D-V is the trend to more and more publications in three areas: atopic dermatitis, psoriasis and drug reactions. In fact, these areas of research together cover over 30% of the printed pages in Acta D-V. As an example, all the papers on adverse drug reactions appearing in volume 83 and this issue of Acta D-V are listed in table I. Many of the titles illustrate the truly multidisciplinary character of dermatology and venereology when viewed from a pharmacologic perspective. Virtually all drugs will sooner or later emerge as potential inducers of skin reactions and, vice versa, drugs that we use in dermatology and venereology often carry a risk for both local and systemic side effects. In this context, the dermatologist's trained eye and mind is a sine qua non to recognise uncommon types of drug eruptions and to identify the culprit(s). With more drugs becoming available every year and with a rapidly increasing population of old people suffering from many concurrent diseases, multipharmacy will become more common as with the risk of drug eruptions. Vigilance and more research are needed to advance the knowledge in this field, because a full understanding of the underlying immunologic and non-immunologic mechanisms is still lacking as is the availability of in vitro tests for drug hypersensitivity.

From the perspective of an editor, the only drawback of papers about drugs eruptions is that they lend themselves better to be published as Letters than as full reports, meaning that however frequently cited, the paper will not assist in keeping the journals impact factor high! Nevertheless, Acta D-V's impact factor for 2002 scored an alltime high of 1.580 and thus keeps its position among the top 10 journals in its class.

When striving for excellence of a scientific journal, the importance of good Section Editors cannot be underestimated. Alas, one of Acta D-V's sections editors, Professor Inger Rosdahl, has decided to step down because of other imminent duties at her university. I thank her for all the good work she has done for Acta D-V over the past 4 years. At the same time I am happy to welcome to the board Dr Flemming Brandrup, Odense University, Denmark, as our new section editor for clinical case reports acting from no. 4 of this volume and onwards. Dr Brandrup is one of Denmark's leading clinical scientists and has very long experience in fields like genodermatoses, metabolic diseases and drug reactions.

Today Acta D-V publishes papers from virtually all parts of the world, predominantly from Germany, Italy, Japan and Scandinavia (in that order). We hope to continue to attract high quality papers from all around the world and to keep our position as a highly cited and reader-friendly journal!

Anders Vahlquist Chief Editor

## Table I: Recent publications in Acta on Drug Reactions

Severe Cutaneous Reactions Associated with the Use of Human Immunodeficiency Virus Medications. *Rotunda et al.* 2003;83:1

Extensive Striae Distensae as a Result of Topical Corticosteroid Therapy in Psoriasis Vulgaris. *Rogalski et al. 2003;83:54* Rifampicin-induced Burning: an Unusual Presentation. *Dogra et al. 2003;83:56* 

Systemic Contact Dermatitis from Ethylenediamine in an Aminophylline Preparation Presenting as the Baboon Syndrome. *Isaksson et al.* 2003;83:69

Acute Generalized Exanthematous Pustulosis Resembling Toxic Epidermal Necrolysis Caused by Famotidine. *Scheinfeld et al.* 2003;83:76

Human Herpes Virus 6 in an Allopurinol-induced Hypersensitivity Syndrome. *Masaki et al.* 2003;83:128

Severe Mucocutaneous Necrotizing Vasculitis Associated with the Combination of Chloroquine and Proguanil. *Luong et al.* 2003;83:141

Aetiology in Sixteen Cases of Toxic Epidermal Necrolysis and Stevens-Johnson Syndrome Admitted within Eight Months in a Teaching Hospital. *Yeung et al.* 2003;83:179

Intolerance Reactions due to the Selective Cyclooxygenase Type-II Inhibitors Rofecoxib and Celecoxib. *Kruse et al.* 2003;83:183

Reinstatement of Dapsone Following Hypersensitivity. Labandeira et al. 2003;83:314

Topical Tacrolimus Ointment may Induce Skin Tags in Treated Patients. Sand Petersen et al. 2003;83:317

Papular Neutrophilic Dermatosis and Erythema Elevatum Diutinum Following Erythropoietin Therapy in a Patient with Myelodysplastic Syndrome. *Gubinelli et al.* 2003;83:358

Chemotherapy-induced Recall Dermatitis on a Previous Scalded Wound in a Patient with Acute Myeloid Leukemia. *Chu et al. 2003;83:382* 

Disseminated Erythematous and Pityriasiform Plaques Caused by Imatinib Mesylate. *Pasmatzi et al. 2003;83:391* 

Scalp Psoriasis: Synergy Between the Malassezia Yeasts and Skin Irritation due to Calcipotriol. *Faergemann et al. 2003;* 83:438

Vesicant-type Reaction Due to Docetaxel Extravasation. *Ho* et al. 2003;83:467

Cutaneous Side-effects in Non-small Lung Cancer Patients Treated with Iressa (ZD 1839), an Inhibitor of Epidermal Growth Factor. *Lee et al. 2004;84: 23* 

Drug-Induced Eosinophilia and Multisystemic Failure with Positive Patch Test Reaction to Spirolactone: DRESS Syndrome. *Ghislain et al. 2004;84:65* 

Early Treatment of Blistering Induced By Concomitant Usage of Lamotrigine and Sodium Valproate with Cyclosporine. *Hashim et al. 2004;84:91* 

Systemic Contact Dermatitis due to Captopril without Crosssensitivity to Fosinopril, Quinapril and Benazepril. *Pfützner et al.* 2004;84:92

Drug Rash with Eosinophilia and Systemic Symptoms to Streptomycin. *Passeron et al. 2004;84:93*