EDITORIAL

Strategies in Trauma and Limb Reconstruction was the one of the first English language journals devoted to limb reconstruction techniques based around the principles of the Ilizarov method. At its inception it focused on the treatment of complex trauma, deformity, bone infection and of acquired and congenital limb defects. Since 2006, it now covers all manner of reconstruction including prosthetic and reconstructive amputations.

From the very beginning the journal was set to be available through the Open Access system, giving the readership free unlimited access to its content. Further to this was the desire to provide authors the ability to submit their papers without processing charge, either for the reviewing process or for publication in the event the paper was accepted. The intention was to provide a platform that served not only to provide knowledge through original research but also a teaching and learning resource through technical and review material.

The journal is now become the official publication of the British Limb Reconstruction Society. It is funded solely by that society and supported fully by the Executive Committee. Whilst the Editorial Board of the journal is independent, the Editors in Chief are invited to be involved in some meetings with the Executive Committee when matters pertaining to the journal are raised.

All articles published in the journal are listed in PubMed Central. In its 13 years as an online resource, the journal had, to its disadvantage, a slow turnover of submissions as the core Editorial team was small and almost all members were full-time clinicians with concurrent responsibilities. A significant change in this short-coming has been through the creation of a new Editorial Board together with a move to new publishers. The collaboration with the new publishers has been most encouraging. A new Editor-in-Chief joins the Board and I welcome Paul Harwood to the team. Together with Konrad Mader and the new Editorial Board, I foresee significant changes and improvements to the journal. I also see an increase in readership and submissions for consideration to an extent that the journal may, over time, change from its current triannual issues to perhaps extra issues covering sub-specialty themes. I wish Strategies in Trauma and Limb Reconstruction every success.

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