**JAMA Internal Medicine—The Year in Review, 2020**

Rita F. Redberg, MD, MSc

**We welcome** the promise of 2021—to start to get control of the global pandemic via vaccinations against SARS-CoV-2 and effective public health measures and hopefully let the country get back to the hard work of promoting high-value health care that is affordable and available to all Americans. As a new US administration with significant health care expertise begins work, we are hopeful to see progress on complex issues, such as value-based payment, drug pricing, and transparency issues, to name a few. We are interested to learn what the impact of sharply reduced elective health care visits and reduced cancer screenings will be as we track rates of breast cancer, lung cancer, heart disease, and many others in the coming decade. We are now in the 10th year of the *JAMA Internal Medicine* Less is More series and are pleased to see international attention to the harms of overdiagnosis and overtreatment and on programs to increase high-value care. Of course, our work is far from done, as health care costs continue to rise much faster than the gross domestic product and approach one-fifth of the US economy.

2020 was a year for the record books in many ways, and *JAMA Internal Medicine* saw submissions per month triple in the summer months and finished the year at nearly twice the number of submissions ever (Table). It is always a joy to be able to read authors’ submitted manuscripts, and we tried to balance the increased submissions and the pressures of trying to help inform and thus stem a worldwide pandemic with timely publications of COVID-19–related articles while continuing to publish important articles not related to the pandemic. Thanks to a lot of hard work from an incredible editorial team, we managed to reduce our turn-around times both for days from receipt to first decision without peer review as well as with peer review and even shorter times from manuscript acceptance to publication and receipt to publication (Table). We love talking with authors (even virtually) at conferences and hearing stories about how publishing articles in *JAMA Internal Medicine* boosted careers, helped get grants or important committee assignments, and helped in clinical practice. Articles published in *JAMA Internal Medicine* have wide readership, as there were 14.7 million views and downloads of journal articles last year. We strive to publish articles that will help guide and inform the practice of medicine, including for the care of patients with SARS-CoV-2 infection—either teaching something new to improve outcomes or identifying a practice to avoid for lack of benefit. We will continue to publish articles on the daily challenges in health care and medicine.

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**Table. JAMA Internal Medicine Statistics for 2020**

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<tr>
<th>Characteristica</th>
<th>Result</th>
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<tbody>
<tr>
<td>Manuscript data</td>
<td></td>
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<tr>
<td>All manuscripts received</td>
<td>6636</td>
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<tr>
<td>Research manuscripts received</td>
<td>4523</td>
</tr>
<tr>
<td>COVID-19-related manuscripts received, April 29-December 31</td>
<td>2285</td>
</tr>
<tr>
<td>Acceptance rate, %</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>8</td>
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<tr>
<td>Research</td>
<td>5</td>
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<tr>
<td>Receipt to first decision without peer review, median, d</td>
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<tr>
<td>Receipt to first decision with peer review, median, d</td>
<td>33</td>
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<tr>
<td>Peer reviewer turnaround, median, d</td>
<td>8</td>
</tr>
<tr>
<td>Acceptance to publication, median, d</td>
<td>68</td>
</tr>
<tr>
<td>Receipt to publication, median, d</td>
<td>106</td>
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</tbody>
</table>

**2019 Journal impact factor**

18.7

**Information dissemination data**

1. Recipients of electronic table of contents per week: 272 560
2. Views/downloads per year: 14.7 million
3. Media impressions: >27 000
4. Twitter and Facebook followers: >172 000

**Top 3 articles by views/downloads**

2. Faust and Del Rio,3 Assessment of Deaths From COVID-19 and From Seasonal Influenza
3. Wu et al,4 Risk Factors Associated With Acute Respiratory Distress Syndrome and Death in Patients With Coronavirus Disease 2019 Pneumonia in Wuhan, China

**Top 3 articles by Altmetric score**

1. Lee et al,5 Clinical Course and Molecular Viral Shedding Among Asymptomatic and Symptomatic Patients With SARS-CoV-2 Infection in a Community Treatment Center in the Republic of Korea
2. Shen et al,6 Community Outbreak Investigation of SARS-CoV-2 Transmission Among Bus Riders in Eastern China
3. Cunningham et al,7 Clinical Outcomes in Young US Adults Hospitalized With COVID-19

**Top 3 articles by Web of Science citations**

1. Wu et al,4 Risk Factors Associated With Acute Respiratory Distress Syndrome and Death in Patients With Coronavirus Disease 2019 Pneumonia in Wuhan, China
2. Galea et al,8 The Mental Health Consequences of COVID-19
3. Liang et al,9 Development and Validation of a Clinical Risk Score to Predict the Occurrence of Critical Illness in Hospitalized Patients With COVID-19

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* Data based on all manuscripts submitted, including research, review and education, opinion, and letters.

b Includes Original Investigations and Research Letters.
and focus on ways to improve the experience for clinicians and patients as well as approaches to improve health care systems and public health.

Our team of Editorial Fellows and an international team of Teachable Moments Editorial Fellows led by Deborah Grady, MD, MPH, continue to curate a fascinating and educational collection of patient issues we can all learn from. We enjoy hearing how readers are using the Teachable Moments series and other articles in caring for patients. We encourage authors to include a figure or table in Teachable Moment submissions as many of these articles are the basis of journal club discussions. We will be accepting applications for the 2022-2023 Teachable Moments Editorial Fellow position, which is open to internal medicine chief residents across North America in April 2021. Do also check out our Patient Pages, a great new section for practical patient advice, led by Michael Incze, MD, MSEd, with topics such as how to handle advance care planning,10 medical cannabis,11 and low testosterone,12 and to name just a few.

In fall 2020, we also started creating Visual Abstracts for clinical trials.13 We hope these help in understanding and sharing the key points via social media, an increasingly important platform for dissemination of medical information. And we hope you enjoy our author podcasts; please send us suggestions for topics you would like to hear covered and any feedback, and please subscribe to JAMA Internal Medicine podcasts here.

We could not do this without our wonderful peer reviewers.14 We rely on their expertise and input to help guide our decisions to help select high-quality science that makes a difference. I thank these reviewers, authors, and the readers of JAMA Internal Medicine.

**ARTICLE INFORMATION**

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**REFERENCES**


