Epilepsia had another successful year in 2023. Its impact factor remains in our target range and was 5.6 in 2023, ranking in the JCR's top 10% within the Clinical Neurology category. Given the lack of any ILAE reports, definitions, or guidelines in the relevant years, we were pleased that it remained high, supporting the increase in quality of the journal's scientific 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 2023 increased by 20% over the preceding year and nearly all other years except for 2020, when all journals had a spike related to the pandemic. 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 expect that the increase in review articles, a result of an initiative of having an associate editor who focuses on reviews will further enhance the journal's strength. 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 ILAE, 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.

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.

Impact Factor
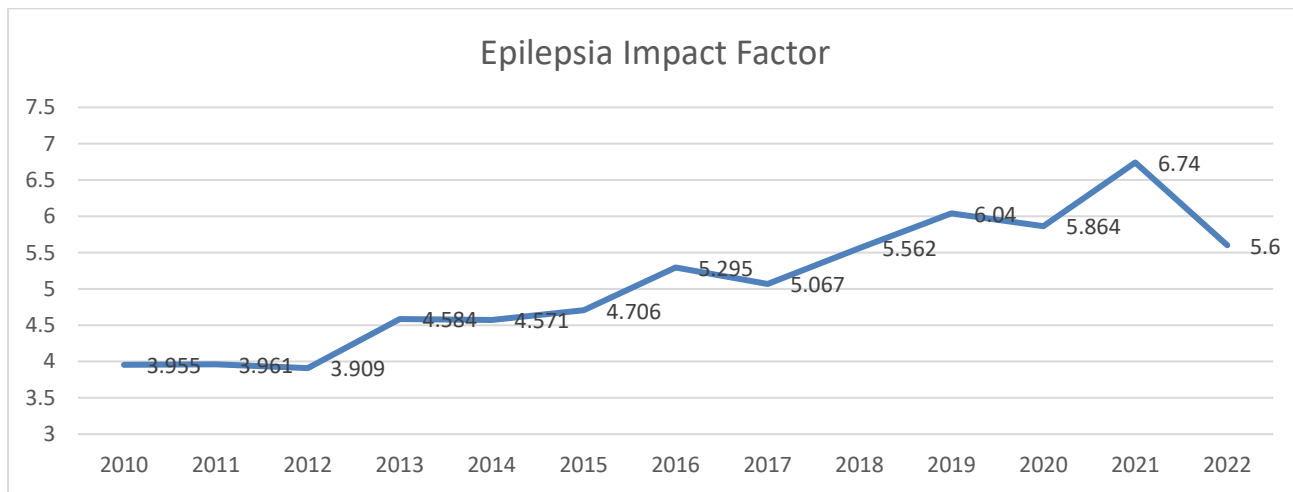
Volume 64 (2023)
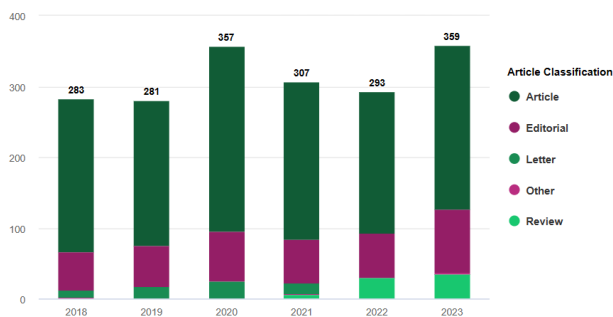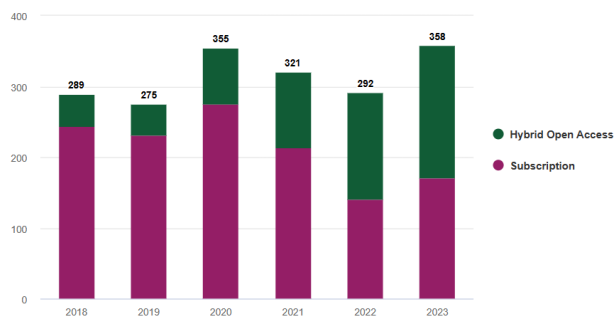
Special Issues

S1: Special Issue: Familial Adult Myoclonus Epilepsy, a new expansion repeats disorder.
Guest Editors: Antonietta Coppola and Pasquale Striano

S2: Special Issue: International Epilepsy Congress Abstract Issue (Dublin 2023)

S3: Special Issue: ICTALS 2022.
Guest Editors: Maxime O. Baud, Christian Rummel

S4: Special Issue: 3rd International Congress on Mobile Devices and Seizure Detection in Epilepsy.
Guest editors: Sándor Beniczky, Phillipe Ryvlin

Submissions

In 2023, Epilepsia saw a 20.8% increase overall in the number of submissions.

Submissions

Article Type	2018	2019	2020	2021	2022	2023
Research Article	836	844	1117	854	792	948
Brief communications	207	174	260	140	142	180
Critical reviews	33	53	64	57	64	97
All manuscripts	1123	1128	1530	1113	1079	1303

Clinical vs Basic/Translational

Year	Clinical	%	Basic	%	Total
2023	1160	89.0%	143	11.0%	1303
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 Percentages
*Papers submitted in 2023 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. 2019-2022 all papers submitted have received a final decision. For submission year 2023*, presently 9.67% of submitted papers remain without a final decision as of the writing of this report, with reviews pending or revisions requested.
*Data as of 17 January 2024

All Manuscripts

Decision	2019		2020		2021		2022		2023*	
Accept	276	24.5%	368	24.1%	276	24.5%	296	26.6%	261	20.0%
Reject	849	75.3%	1,159	75.8%	849	75.3%	812	73.0%	912	70.0%
Other	3	0.3%	3	0.2%	3	0.3%	5	0.4%	4	9.7%
No Final Decision									126	0.3%
Total	**1,128**		**1,530**		**1,128**		**1,113**		**1,303**	

*Decision data as of 17 January 2024

Research Articles

Decision	2019		2020		2021		2022		2023*	
Accept	186	22.0%	240	21.5%	210	24.6%	204	25.8%	156	16.5%
Reject	655	77.6%	876	78.4%	641	75.1%	582	73.5%	693	73.1%
Other	3	0.4%	1	0.1%	3	0.4%	6	0.8%	3	0.3%
No Final Decision									96	10.1%
Total	**844**		**1,117**		**854**		**792**		**948**	

*Decision data as of 17 January 2024

Brief Communications

Decision	2019		2020		2021		2022		2023*	
Accept	22	12.6%	41	15.8%	21	15.0%	36	15.5%	24	13.3%
Reject	153	87.4%	218	83.8%	117	83.6%	106	73.9%	144	80.0%
Other			1	0.4%	2	1.4%				
No Final Decision									12	6.7%
Total	**175**		**260**		**140**		**142**		**180**	

*Decision data as of 17 January 2024

Critical Reviews

Decision	2019		2020		2021		2022		2023*	
Accept	21	39.6%	31	48.4%	22	38.6%	36	56.3%	26	26.8%
Reject	32	60.4%	33	51.6%	35	61.4%	27	42.2%	58	59.8%
Other							1	1.6%	1	1.03%
No Final Decision									12	12.4%
Total	**53**		**64**		**57**		**64**		**97**	

*Decision data as of J17 January 2024

Epilepsia Rejection Percentages

*Papers submitted in 2023 with a final decision as of 17 January 2024.

All Manuscripts

	2019		2020		2021		2022		2023*	
Reject – No Review	289	34.0%	482	41.6%	353	43.5%	377	51.4%	571	62.6%
Reject – No Review - Transfer offer	203	23.9%	250	21.6%	158	19.5%	116	15.8%	73	8.0%
Direct reject/resubmit	33	3.9%	15	1.3%	281	34.6%				
Reject after review	223	26.3%	335	28.9%			223	30.4%	257	28.1%
Reject -Reviewed - Transfer offer	47	5.5%	31	2.7%	20	2.5%	18	2.5%	11	1.2%
Reject/resubmit (Reviewed)	54	6.4%	46	4.0%						
Total	**849**		**1159**		**812**		**734**		**912**	

Research Articles

	2019		2020		2021		2022		2023*	
Reject – No Review	217	33.1%	347	39.6%	264	41.1%	294	50.52%	430	62.0%
Reject – No Review - Transfer offer	156	23.8%	187	21.3%	125	19.5%	89	15.29%	58	8.4%
Direct reject/resubmit	21	3.2%	12	1.4%						0.0%
Reject after review	181	27.6%	266	30.4%	236	36.8%	180	30.93%	199	28.7%
Reject -Reviewed - Transfer offer	34	5.2%	21	2.4%	17	2.6%	19	3.26%	6	0.9%
Reject/resubmit (Reviewed)	46	7.0%	43	4.9%						0.0%
Total	**655**		**876**		**642**		**582**		**693**	

Brief Communications

	2019		2020		2021		2022		2023*	
Reject – No Review	55	36.2%	104	47.9%	60	50.4%	55	51.9%	100	69.4%
Reject – No Review - Transfer offer	46	30.3%	60	27.6%	30	25.2%	26	24.5%	12	8.3%
Direct reject/resubmit	9	5.9%	2	0.9%						
Reject after review	26	17.1%	41	18.9%	26	21.8%	23	21.7%	28	19.4%
Reject -Reviewed - Transfer offer	10	6.6%	9	4.1%	3	2.5%	2	1.9%	4	2.8%
Reject/resubmit (Reviewed)	6	3.9%	1	0.5%						
Total	152		217		119		106		144	

Full Text Views
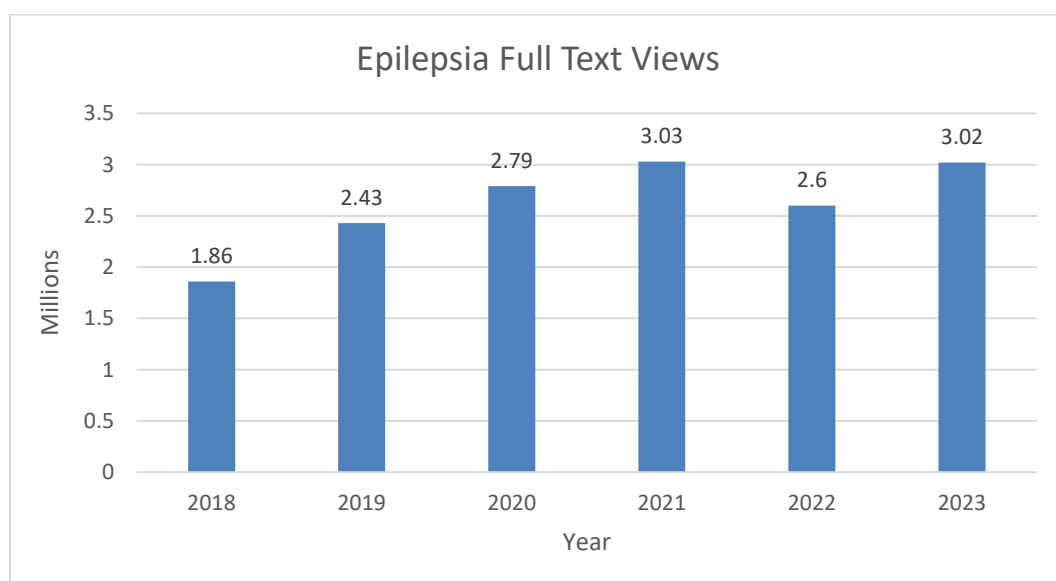
The annual article full text views include both HTML and PDF format of the full text.

Top 2023 Downloads

Rank	Article title	Author	DOI	Publication Year	Full text Downloads
1	Treatment of seizures in the neonate: Guidelines and consensus-based recommendations: Special report from the ILAE Task Force on Neonatal Seizures	PRESSLER, R	10.1111/epi.17745	2023	12056
2	Ketamine as advanced second line treatment in benzodiazepine refractory convulsive status epilepticus in children	BURATTI, S	10.1111/epi.17550	2023	6046
3	Diagnosing nonconvulsive status epilepticus: Defining electroencephalographic and clinical response to diagnostic intravenous antiseizure medication trials	LEITINGER, M	10.1111/epi.17694	2023	5369
4	Perampanel as precision therapy in rare genetic epilepsies	NISSENKORN, A	10.1111/epi.17530	2023	4526
5	Should substitution monotherapy or combination therapy be used after failure of the first antiseizure medication? Observations from a 30year cohort study	BRODIE, M	10.1111/epi.17573	2023	3397
6	Adjunctive cenobamate in highly active and ultra refractory focal epilepsy: A real world retrospective study	DELANTY, N	10.1111/epi.17549	2023	3311
7	Are AI language models such as ChatGPT ready to improve the care of individuals with epilepsy?	LAL, D	10.1111/epi.17570	2023	3140
8	Genes4Epilepsy: An epilepsy gene resource	BAHLO, M	10.1111/epi.17547	2023	2815
9	Management of epilepsy with eyelid myoclonia: Results of an international expert consensus panel	SMITH, K	10.1111/epi.17682	2023	2799
10	Excitatory/inhibitory balance in epilepsies and neurodevelopmental disorders: Depolarizing aminobutyric acid as a common mechanism	KASRI, N	10.1111/epi.17651	2023	2556
11	Cost effectiveness of cenobamate for focal seizures in people with drug resistant epilepsy	LASKIER, V	10.1111/epi.17506	2023	2537
12	Artificial intelligence for the detection of focal cortical dysplasia: Challenges in translating algorithms into clinical practice	WALGER, L	10.1111/epi.17522	2023	2506
13	Is the antiparasitic drug ivermectin a suitable candidate for the treatment of epilepsy?	LOESCHER, W	10.1111/epi.17511	2023	2486
14	Fenfluramine in the treatment of Dravet syndrome: Results of a third randomized, placebo controlled clinical trial	SCHEFFER, I	10.1111/epi.17737	2023	2394
15	Are brief febrile seizures benign? A systematic review and narrative synthesis	GOULD, L	10.1111/epi.17720	2023	2367
16	Phenobarbital in super refractory status epilepticus (PIRATE): A retrospective, multicenter analysis	DIMITRIADIS, K	10.1111/epi.17608	2023	2255
17	What is autoimmune encephalitisassociated epilepsy? Proposal of a practical definition	RADA, A	10.1111/epi.17699	2023	2148
18	Efficacy of cannabidiol in convulsive and nonconvulsive seizure types associated with treatment resistant epilepsies in the Expanded Access Program	FLAMINI, R	10.1111/epi.17665	2023	2090
19	Perampanel for the treatment of people with idiopathic generalized epilepsy in clinical practice	TRINKA, E	10.1111/epi.17631	2023	2046
20	Neurostimulation in generalized epilepsy: A systematic review and meta-analysis	HANEEF, Z	10.1111/epi.17524	2023	1999

2023 Most Cited Articles

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

Rank	Title	Author	DOI	Publ. Year	Citations
1	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	WIRRELL, E	10.1111/epi.17241	2022	147
2	ILAE classification and definition of epilepsy syndromes with onset in neonates and infants: Position statement by the ILAE Task Force on Nosology and Definitions	NABBOUT, R	10.1111/epi.17239	2022	138
3	ILAE definition of the Idiopathic Generalized Epilepsy Syndromes: Position statement by the ILAE Task Force on Nosology and Definitions	WIRRELL, E	10.1111/epi.17236	2022	83
4	The ILAE consensus classification of focal cortical dysplasia: An update proposed by an ad hoc task force of the ILAE diagnostic methods commission	NAJM, I	10.1111/epi.17301	2022	54
5	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	RINEY, K	10.1111/epi.17240	2022	46
6	Deep brain stimulation targets in epilepsy: Systematic review and meta-analysis of anterior and centromedian thalamic nuclei and hippocampus	LOZANO, A	10.1111/epi.17157	2022	42
7	Epilepsy and brain network hubs	BERNHARDT, B	10.1111/epi.17171	2022	36
8	Methodology for classification and definition of epilepsy syndromes with list of syndromes: Report of the ILAE Task Force on Nosology and Definitions	WIRRELL, E	10.1111/epi.17237	2022	35
9	International consensus on diagnosis and management of Dravet syndrome	WIRRELL, E	10.1111/epi.17274	2022	35
10	International consensus recommendations for management of new onset refractory status epilepticus including febrile infection-related epilepsy syndrome: Statements and supporting evidence	WICKSTROM, R	10.1111/epi.17397	2022	27
11	Timing of referral to evaluate for epilepsy surgery: Expert Consensus Recommendations from the Surgical Therapies Commission of the International League Against Epilepsy	JEHI, L	10.1111/epi.17350	2022	27
12	Systematic review of frequency of felt and enacted stigma in epilepsy and determining factors and attitudes toward persons living with epilepsy-Report from the International League Against Epilepsy Task Force on Stigma in Epilepsy	JETTE, N	10.1111/epi.17135	2022	24
13	International consensus recommendations for management of new onset refractory status epilepticus (NORSE) including febrile infection-related epilepsy syndrome (FIRES): Summary and clinical tools	WICKSTROM, R	10.1111/epi.17391	2022	22
14	The worldwide epilepsy treatment gap: A systematic review and recommendations for revised definitions - A report from the ILAE Epidemiology Commission	THURMAN, D	10.1111/epi.17112	2022	22
15	Multicenter, cross-sectional study of the costs of illness and cost-driving factors in adult patients with epilepsy	STRZELCZYK, A	10.1111/epi.17174	2022	21
16	Precision medicine for genetic epilepsy on the horizon: Recent advances, present challenges, and suggestions for continued progress	KNOWLES, J	10.1111/epi.17332	2022	20
17	Neurostimulation in people with drug-resistant epilepsy: Systematic review and meta-analysis from the ILAE Surgical Therapies Commission	KEEZER, M	10.1111/epi.17243	2022	20
18	Detection of brain somatic variation in epilepsy-associated developmental lesions	BEDROSIAN, T	10.1111/epi.17323	2022	19
19	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)	ASGHARNEJAD, M	10.1111/epi.17367	2022	18
20	Neurovascular unit dysfunction as a mechanism of seizures and epilepsy during aging	VAN VLIET, E	10.1111/epi.17210	2022	17
21	Automated seizure detection with noninvasive wearable devices: A systematic review and meta-analysis	KWAN, P	10.1111/epi.17297	2022	17
22	Seizure activity triggers tau hyperphosphorylation and amyloidogenic pathways	GIVALOIS, L	10.1111/epi.17186	2022	17
23	The global cost of epilepsy: A systematic review and extrapolation	BEGLEY, C	10.1111/epi.17165	2022	17
24	Visually sensitive seizures: An updated review by the Epilepsy Foundation	FISHER, R	10.1111/epi.17175	2022	17

Top Altmetric Scores: Published in 2023

Rank	Article title	Author	DOI	Publ. Year	Altmetric Score
1	Perampanel as precision therapy in rare genetic epilepsies	NISSENKORN, A	10.1111/epi.17530	2023	330
2	Treatment of seizures in the neonate: Guidelines and consensus-based recommendations—Special report from the ILAE Task Force on Neonatal Seizures	PRESSLER, R	10.1111/epi.17745	2023	111
3	Altered spreading of neuronal avalanches in temporal lobe epilepsy relates to cognitive performance: A resting state hdEEG study	DUMA, G	10.1111/epi.17551	2023	84
4	Diagnosing nonconvulsive status epilepticus: Defining electroencephalographic and clinical response to diagnostic intravenous antiseizure medication trials	LEITINGER, M	10.1111/epi.17694	2023	64
5	Routine and sleep EEG: Minimum recording standards of the International Federation of Clinical Neurophysiology and the International League Against Epilepsy	PELTOLA, M	10.1111/epi.17448	2023	58
6	Prediction of long-term unprovoked seizures after status epilepticus	RODRIGO-GISBERT, M	10.1111/epi.17697	2023	46
7	Revisiting the concept of drug-resistant epilepsy: A TASK1 report of the ILAE/AES Joint Translational Task Force	AUVIN, S	10.1111/epi.17751	2023	43
8	Duration of epileptic seizure types: A data-driven approach	MERITAM LARSEN, P	10.1111/epi.17492	2023	40
9	Epilepsy severity mediates association between mutation type and ADHD symptoms in tuberous sclerosis complex	TYE, C	10.1111/epi.17507	2023	36
10	Multimodal nocturnal seizure detection in children with epilepsy: A prospective, multicenter, long-term, in-home trial	VAN WESTRHENEN, A	10.1111/epi.17654	2023	35
11	Long-term efficacy and safety of cannabidiol in patients with treatment-resistant epilepsies: Four-year results from the expanded access program	SZAFLARSKI, J	10.1111/epi.17496	2023	34
12	Solving the unsolved genetic epilepsies: Current and future perspectives	JOHANNESEN, K	10.1111/epi.17780	2023	33
13	Seizure characteristics and outcomes in patients with neurological conditions related to high-risk paraneoplastic antibodies	SMITH, K	10.1111/epi.17695	2023	33
14	Management of epilepsy with eyelid myoclonia: Results of an international expert consensus panel	SMITH, K	10.1111/epi.17682	2023	33
15	Epilepsy in cerebral amyloid angiopathy: an observational retrospective study of a large population	DAMAVANDI, P	10.1111/epi.17489	2023	29
16	What is autoimmune encephalitis-associated epilepsy? Proposal of a practical definition	RADA, A	10.1111/epi.17699	2023	27
17	Phenobarbital in super-refractory status epilepticus (PIRATE): A retrospective, multicenter analysis	KUNST, S	10.1111/epi.17608	2023	27
18	Unjustified allegation on cancer risks in children of mothers with epilepsy taking high-dose folic acid during pregnancy—No proof of a causal relationship	VON WREDE, R	10.1111/epi.17680	2023	26
19	Are AI language models such as ChatGPT ready to improve the care of individuals with epilepsy?	BOßELMANN, C	10.1111/epi.17570	2023	26
20	Mortality after a first-ever unprovoked seizure	PANG, E	10.1111/epi.17567	2023	25
21	Which is more deleterious to cognitive performance? Interictal epileptiform discharges vs anti-seizure medication	WARSI, N	10.1111/epi.17556		25
22	Added value of advanced workup after the first seizure: A 7-year cohort study	DE STEFANO, P	10.1111/epi.17771		25

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:

- The quantity of posts mentioning an output
- 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 68 countries in 2023.

2023 Submission: Top 20 countries

Country	%	Country	%
United States	23.4 %	Korea (the Republic of)	2.6 %
China	16.7 %	Spain	2.2 %
United Kingdom of Great Britain and Northern Ireland	5.0 %	Turkey	2.1 %
Italy	4.8 %	Switzerland	1.8 %
Germany	3.9 %	Brazil	1.7 %
India	3.8 %	Denmark	1.5 %
Canada	3.5 %	Iran	1.4 %
France	3.1 %	Israel	1.4 %
Australia	3.0 %	Netherlands	1.3 %
Japan	2.8 %	Belgium	1.2 %

2023 Submission/Acceptance by Geographical Region

Geographical region	Submissions %	Acceptance %***
Europe	32.9%	36.2%
North America	26.6%	41.2%
Asia	14.7%	7.4%
Oceania (Australia and NZ)	4.4%	42.1%
Middle East / North Africa**	5.1%	16.9%
Central and South America	2.5%	12.5%
Africa	0.86%	18.2%
China*	16.5%	4.2%
India*	3.7%	0.0%

*India and China are listed separately and not included in Asia
**Israel included in the Middle East/North Africa Region
***Manuscripts with a final decision in 2023. Acceptance percent calculated based on the numbers of papers submitted from each region

Circulation and Readership

Sales Model	2021	2022
Institutions with access via a Wiley license	7,505	8,017
All Journals license	2,347	1,340
Transformational agreements	1,399	2,825
Other licenses	3,759	3,852
Institutions with access via traditional subscriptions	31	32
Online	18	20
Print and online	2	2
Print	11	10
Total	7,536	8,049

Michael R. Sperling
Editor-in-Chief, *Epilepsia*