The Archives of Dermatology has been continuously published since 1882. This is 130 years of publication under the banner of the following 5 names: Journal of Cutaneous and Venereal Disease (1882-1886), Journal of Cutaneous and Genito-Urinary Diseases (1887-1902), The Journal of Cutaneous Diseases Including Syphilis (1903-1919), Archives of Dermatology and Syphilology (1920-1954), and Archives of Dermatology (1954-2012). The name change in 1954 removed syphilology from the journal's name to emphasize that dermatology encompasses a variety of diseases, with none being so preeminent as to deserve recognition in the name of the journal. Since 1920, the Archives of Dermatology has been part of the family of journals affiliated with JAMA (Journal of the American Medical Association).

Our readers, including physicians in practice, those in academic medical centers, our nondermatologic colleagues, residents, fellows, and medical students, have transitioned from having to wait for the print version to arrive in the mail, or going to a medical library to read the journal, to now being able to access content ahead of print on smartphones, tablets, personal computers (PCs), and Macs. Content is accessible in the clinic, the home, and while away from one's offices.

Patient management decisions are informed by instant access to information by any means that the physician is comfortable with at the moment access is needed. Access may be from a smartphone app (Figure), a tablet PC, the PC at the office or home, or any other networked device. It is time to symbolize our evolution as a medical information network of 10 journals by changing our name to JAMA Dermatology.

The JAMA Network provides physicians and the public with rigorous clinical studies that change the standards of care. Press releases are prepared for high-impact articles. Podcasts of interviews with authors of selected articles are made available online. Abstracts of articles from JAMA Dermatology relevant to a general medicine audience of learners are published in JAMA. Semantic tagging of content of the website uses concepts rather than full text to enhance accuracy and highlight keyword-based relationships across articles and multimedia. In 2011, the dermatology website had 946 485 unique visitors. We expect to increase the number of visitors as semantic tagging will make it easier to find related articles.

To support the public’s right to know therapeutically relevant information as soon as possible, we reduced the time for authors to revise their manuscripts to 30 days. Our goal for 2013 is to reduce our current 91 days from acceptance to publication of a manuscript to 60 days. Rapid review of manuscripts depends on a dedicated editorial board with the assistance of many colleagues. To support the quickened pace of review, we have recently changed the leadership of our editorial board. We wish to welcome the following new members of the editorial board: April W. Armstrong, MD, MPH, Jeremy S. Bordeaux, MD, MPH, Ashfaq A. Marghoob, MD, Cindy England Owen, MD, and Julie V. Schaffer, MD. We rely on the members of the editorial board to assist in editorial decisions when their expertise is particularly relevant. While JAMA Dermatology evolves by using technology to meet the needs of dermatologists and our patients with skin diseases, we will endeavor to remain your “go-to source” of information concerning the skin, its diseases, and their treatment, which has been the first sentence of our mission statement for 16 years. Although the name changes, our mission remains steadfastly the same.

Mission Statement: JAMA Dermatology publishes information concerning the skin, its diseases, and their...
treatment. Its mission is to explicate the structure and function of the skin and its diseases and the art of using this information to deliver optimal medical and surgical care to the patient. We attempt to enhance the understanding of cutaneous pathophysiology and improve the clinician’s ability to diagnose and treat skin diseases. This journal has a particular interest in publishing clinical and laboratory studies that reveal new information pertinent to the interests and needs of medical dermatologists, dermatologic surgeons, and those concerned with state-of-the-art cutaneous disease. We believe that knowledge derived from well-designed clinical trials and studies of cost-effectiveness are especially important for improving the practice of dermatology. Studies that increase the understanding of the outcome of treatment or the means by which the burden of dermatologic disease can be measured and reduced to promote the health of patients with skin disease will receive special priority. JAMA Dermatology regularly publishes reports of clinical investigations, editorials, and reviews. It also features reports and discussions on clinicopathologic correlations; clinical disorders of unique didactic value; pharmacologic, medical, and surgical therapeutics; and ethical, moral, socioeconomic, and political issues.

June K. Robinson, MD
Jeffrey P. Callen, MD

Published Online: July 2, 2012. doi:10.1001/archdermatol.2012.2141

Author Affiliations: Department of Dermatology, Northwestern University Feinberg School of Medicine, Chicago, Illinois (Dr Robinson); and Department of Dermatology, University of Louisville, Louisville, Kentucky (Dr Callen).

Correspondence: Dr Robinson, Department of Dermatology, Northwestern University Feinberg School of Medicine, 132 E Delaware Pl, Ste 5806, Chicago, IL 60611 (june-robinson@northwestern.edu).

Financial Disclosure: None reported.