**Methods of Information in Medicine**

*Is Changing — Enhancing Services to Our Authors and Readers*

There are two significant changes, which I am delighted to bring to the attention of readers in this editorial.

The first change is that from now on *Methods of Information in Medicine* will use Manuscript Central as its online submission and peer-review system. Both the editors and the publisher expect this change to improve service to our authors and readers and to speed-up reviewing times. Please submit new manuscripts from now on through Manuscript Central by accessing http://mc.manuscriptcentral.com/methods or via the journal’s Web site www.Methods-Online.com.

The second change will be in the online availability of accepted manuscripts. After a manuscript has been accepted for publication in *Methods*, it will, from 2009 on, go directly online first. We want to support fast communication of high-quality and peer-reviewed publications by making accepted manuscripts immediately available, even before final layout.

The Instructions to Authors will be modified and updated because of these changes. The new instructions will be printed in issue 1/2009 of *Methods*. They will as usual also be available on the journal’s Web site www.Methods-Online.com.

With these changes we intend to continue in a timely way what *Methods of Information in Medicine* has done since it started in 1962: publishing original papers, reviews, reports, opinion papers, and editorials, stressing the basic methodology and scientific fundamentals of medical informatics/health informatics and related disciplines.

As an official journal of the International Medical Informatics Association (IMIA) and of the European Federation of Medical Informatics (EFMI) *Methods of Information in Medicine* will continue to publish papers in the whole range of processing data, information and knowledge in medicine and health care, including research in traditional as well as in new areas of our expanding field. This includes topics such as health information systems and patient records; diagnosis and therapy in health care; biomedical data, signal, and image interpretation; clinical bioinformatics; clinical data analysis and statistical studies; expert systems and knowledge representation; and simulation and modeling.

Good medicine and good healthcare demand good information!

Reinhold Haux
Editor-in-Chief