



대한간학회

Korean Association for the Study of the Liver

국제화 사례 Clinical and Molecular Hepatology

대한간학회 간행이사

김 승 업

CMH history

- 1995 – Korean Journal of Hepatology (Korean)
- 2002 – Indexed in MEDLINE
- 2010 – Korean Journal of Hepatology (English)
- 2010 – Indexed in SCOPUS
- **2012 – Journal Title: Clinical and Molecular Hepatology (CMH)**
- 2017 – Indexed in Directory of Open Access Journals (DOAJ)
- 2017 – Indexed in Emerging Source Citation Index (ESCI)
- **2019.12 – Indexed in SCI**

Ranked in 31 among 88 journals (35 percentile), 2019

- Liver Int: 5.175
- Clin Mol Hepatol: 3.987
- AJP-Gastrointestinal and Liver Physiology: 3.725
- World J Gastroenterol: 3.665
- J Viral Hepat: 3.561
- J Gastroenterol Hepatol: 3.437

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- Liver Int: 5.175
- Clin Mol Hepatol: 3.987 – 6.0 (2021) – 7.5? (2022)
- AJP-Gastrointestinal and Liver Physiology: 3.725
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Passion & Devotion

2016년 프로그램

2016년 대한간학회 간행위원회 워크숍

일시: 2016.01.02(토) 15:00~21:00

장소: JW메리어트호텔 동대문 3층 컨퍼런스룸

15:00 ~ 15:10	0:10	Opening Comment	김윤준(간행이사)
			좌장: 김윤준
15:10 ~ 15:30	0:20	CMH 현황과 SWOT 분석	이현웅 (중앙의대)
15:30 ~ 15:50	0:20	SCI 등재요건과 그 과정 및 전략	임애리 (툼슨 로이터)
15:50 ~ 16:10	0:20	CMH 학술지의 SCI(E) 등재 가능성과 등재 후 나아갈 길	허선 (한림의대)
16:10 ~ 16:30	0:20	대한내과학회지 SCI(E) 등재까지의 전략과 고충	양철우 (가톨릭의대)
16:30 ~ 16:50	0:20	Coffee break	
16:50 ~ 17:10	0:20	CMH의 국제화: 전략 및 실제	서연석 (고려의대)
17:10 ~ 17:30	0:20	Impact Factor: 실제와 상승 전략	박수영 (경북의대)
17:30 ~ 17:50	0:20	투고, 인용, 논문평가의 질적 양적 성장을 어떻게 도모할 것인가?	김범경 (연세의대)
17:50 ~ 18:00	0:10	Coffee break	
18:00 ~ 18:55	0:55	분임 토의 및 발표 1.분과: 리뷰 아티클: 어떤 주제와 어떤 저자를 모실 것인가? 2.분과: 국제적 Editorial Board 선정: 누구를? 어떻게?	
18:55 ~ 19:00	0:05	Closing Comment	김윤준(간행이사)
19:00 ~ 21:00	2:00	만찬 및 Open discussion	

2016년 프로그램

2016년 대한간학회 2차 간행위원회 워크숍

일시: 2016.06.16(목) 15:00~21:00

장소: 인천 그랜드 하얏트 호텔

16:30 ~ 16:35	0:05	Opening Comment	김윤준 (간행이사)
			좌장: 김윤준
16:35 ~ 16:50	0:15	CMH 논문 중 인용도가 높았던 논문의 특징 분석	정우진 (계명대)
16:50 ~ 17:05	0:15	CMH의 국내외 연구자 투고 증진 (지역별 차이 극복)을 위한 실제적 방안 (1차 간행워크숍내용 중심으로)	조은영 (원광대)
17:05 ~ 17:20	0:15	타기관 간행위원회 워크숍의 주제 분석 및 효율적인 간행위원의 업무분담	정우경(성균관대)
17:20 ~ 17:40	0:20	편집인의 역할과 자세	하종규 (서울대 명예교수)
17:40 ~ 18:00	0:20	Coffee break	
18:00 ~ 18:20	0:20	Journal of Neurogastroenterology and Motility 학회지 SCIE 등재까지의 과정과 이후 발전방안	김나영 (서울대)
18:20 ~ 19:00	0:40	CMH 학술지의 브랜드를 어떻게 국제적으로 키울 것인가?	조은정 (삼성전자)
19:00 ~ 19:05	0:05	Closing Comment	김윤준 (간행이사)
19:05 ~ 20:00	1:00	만찬 및 Open discussion	

2017년 프로그램

2017년 2월11일(토) 여의도 CONRAD SEOUL 호텔

Time	Title	Speaker
15:00 ~ 15:10	Opening remarks	좌장: 김윤준 (간행이사)
Part I. Evaluation of current status of CMH		
15:10 ~ 15:25	CMH 2016년 현황 분석	신동현 (성균관대의대)
15:25 ~ 15:40	Peer review - 현황 및 개선안	이현용 (중앙대의대)
15:40 ~ 15:55	Review article - 현황 및 개선안	서연석 (고려대의대)
15:55 ~ 16:10	Original/Case/Commentary - 현황 및 개선안	정우진 (계명대의대)
16:10 ~ 16:30	CMH 출판된 논문의 의학통계 현황 및 Reviewer가 알아야 할 내용	이지성 (울산대의대)
Coffee break (16:30 - 16:50)		
Part II. How to make CMH more attractive journal?		
16:50 ~ 17:05	외국 저널 분석 및 제안	김자경 (연세의대)
17:05 ~ 17:20	국내 저널 분석 및 제안	조은영 (원광대의대)
17:20 ~ 17:40	매력적인 학술지의 조건	허 선 (한림대의대)
17:40 ~ 18:00	학술지 출판환경의 변화와 생존전략	오세정 (의편협 기획평가위원장)
Part III. Refining and setting goals for CMH 2017		
18:00 ~ 18:10	CMH 홈페이지 점검 및 개선안	윤기태 (부산대의대)
18:10 ~ 18:20	CMH paper 저널 점검 및 개선안	김범경 (연세의대)
18:20 ~ 18:30	저자투고규정/Copyright transfer 점검 및 개선안	조은주 (서울대의대)
18:30 ~ 18:45	2017 Review article plan	총괄: 김상균 (순천향대의대) 박수영 (경북대의대), 이경분 (서울대의대), 정우경 (성균관대의대), 조재영 (서울대의대)
18:45 ~ 18:55	Closing comment	좌장: 김윤준 (간행이사)
Part IV. Open discussion with dinner (19:00 - 21:00)		

2017년 프로그램

2017년도 2차 간행위원회 Workshop

일시: 2017년 6월22일(목) 17:00

장소: Grand Hyatt 인천 호텔 West Tower Room D

1부: 17:00 ~ 16:30 "2017 간행 워크샵 과제 FU 모임" (발표: 5분, 토의 3분)

17:00-17:05	Opening remarks	김윤준 (간행이사)
17:05-17:13	ESCI 진행상황	신동현 (성균관의대)
17:13-17:21	DOAJ, ICMJE, Author taxonomy 진행상황	김범경 (연세의대)
17:21-17:29	CMH Aims/Scope revision 진행상황	조은영 (원광의대)
17:29-17:37	CMH 저자점검표 및 copyright transfer 진행상황	조은주 (서울의대)
17:37-17:45	ORCID ID, reviewer remind system 진행상황	김자경 (연세의대)
17:45-17:53	Reviewer 관심분야 등록 진행상황	이현웅 (중앙의대)
17:53-18:01	올해 Review article 진행상황	김상균 (순천향의대)
18:01-18:09	올해 병리 Review article 진행상황	이경분 (서울의대)
18:09-18:18	올해 영상 Review article 진행상황	정우경 (성균관의대)
18:18-18:30	자유토의	모든 간행위원

2부: 18:30-19:00 "인문교양 강의"

1830-19:00	오감으로 보는 현대미술	이지은 (명지대)
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2017년 프로그램

의학의 미래와 의학 저널의 나아갈 길

일시: 2017년 8월 26일(토) 15:00

장소: THE SHILLA SEOUL 호텔

3층 마로니에홀

Time	Duration (m)	Title	Speaker
15:00 ~ 15:10	10	Opening remarks	좌장: 김윤준 (간행이사)
1부 의학저널이 나아갈 길			
15:10 ~ 15:40	30	의학저널의 최신 동향, 의학저널의 미래 그리고, CMH가 나아갈 길	홍성태 (JKMS 편집장)
15:40 ~ 16:10	30	편집인과 심사자가 알아야 할 의학연구윤리	김육주 (서울의대 인문의학교실)
16:10 ~ 16:40	30	학술지 발전경험 공유 및 제언	박광성 (ICUROLOGY 편집장)
<i>Coffee break (16:40 ~ 17:00)</i>			
2부 미래의학			
17:00 ~ 17:30	30	미래의 한국 의료 제도의 변화	이용민 (의사협회 의료정책연구소)
17:30 ~ 18:20	50	사물인터넷, 제 4차 산업혁명, 딥러닝, 인공지능, 그리고 의학의 미래	장동경 (삼성서울병원 정보전략실장)
<i>Dinner (18:20 ~)</i>			

2018년 프로그램

일시: 2018년 1월 13일 (토) 15:00

장소: 삼성역 그랜드 인터컨티넨탈 파르나스 5층 카네이션 룸

15:00-15:10 (10)	Opening Comment	김윤준 (서울의대)
15:10-15:30 (20)	지난 회기 동안 CMH의 변화	신동현 (성균관의대)
15:30-15:50 (20)	CMH 투고현황 및 인용현황	김범경 (연세의대)
15:50-16:10 (20)	CMH SCI(E) 등재 가능성을 중심으로 살펴본 현황 분석	허선 (한림의대)
16:10-16:30 (20)	CMH SCI(E) 등재 가능성을 중심으로 살펴본 현황 분석	이현웅 (증양의대)
16:30-16:50 (20)	간행위원의 주요 업무 소개	신동현 (성균관의대)
16:50-17:10 (20)	Coffee break	
	자유 토의 및 발표	
17:10-18:30 (80)	CMH의 질적, 양적 성장 방안 간행위원회의 효율적인 운영을 위한 조직 및 업무 방안	모든 간행위원
18:30	저녁 및 Open discussion	

2018년 프로그램

일시: 2018년 6월 14일 (목) 17:30

장소: 인천 그랜드 하얏트 West Tower 지하 1층 Room D

17:30-17:35 (5)	Opening Remarks	김윤준 (간행이사) Yoon Jun Kim (CMH, Editor in Chief)
17:35-18:05 (30)	Understanding meta-analysis	한서경 (서울의대) Seokyoung Hahn (Seoul univ.)
18:05-18:35 (30)	Trump-시진핑 시대의 세계 경제 전망- 의사가 알아야 할 것	이종은 (세종대학교 경제학과) Jong-Eun Lee (Economy, Sejong univ.)
18:35-18:50 (15)	CMH: Recent advances and future goals	신동현 (간행간사) Dong Hyun Shin (CMH, Associate Editor)
18:50-19:00 (10)	Appreciation ceremony International Deputy Editor: Ju-Seog Lee (The University of Texas MD Anderson Cancer Center, USA) Best review article of the year: Grace Wong (The Chinese University of Hong Kong, Hong Kong)	
19:00-	Dinner	

2018년 프로그램

시간	분	주제	발표자
15:00-15:10	10	Opening remarks	김윤준(간행이사)
		1부 CMH 현황점검 및 개선안 모색	
15:10-15:25	15	CMH 투고부터 출판까지의 process 현황 및 개선안	심재준(경희의대)
15:25-15:40	15	CMH 투고 사이트 및 시스템 현황 및 개선안, 홍보 현황 및 개선안	이민종(강원의대)
15:40-15:55	15	CMH 투고 현황, 피인용 현황 및 개선안	조영운(증양의대)
15:55-16:10	15	인용조사사업 현황 및 개선안	활상연(원자력의학원)
16:10-16:25	15	2019 SCI 진입을 위한 자체 점검	유정주(순천향의대))
16:25-16:35	10	토의	
16:35-16:55	20	Coffee Break	
		2부 CMH 질적 양적 성장을 어떻게 도모할 것인가?	
16:55-17:15	20	Self citation and citation Stacking: Liver cancer 사태 후 우리의 대응방안	윤아일틴(인제의대)
17:15-17:35	20	종설/원저 현황, 계획 및 향후 발전방안	심주현(울산의대)
17:35-17:55	20	비뇨기과학회지의 SCIE 진입 준비 및 경험	비뇨기과학회지 EIC
17:55-18:25	30	토의	
18:25-18:30	5	Closing remark	김윤준(간행이사)

Support

해외 학술대회 지원대상자 선정기준 강화

변경 전	변경 후
<p>6. 지원대상자 선정기준</p> <p>6) 연자 선발의 기준은 다음과 같다.(총점 100점)</p> <p>가. 대한간학회지(Clin Mol Hepatol) 게재 점수 (30점)</p> <p>최근 3년간 주저자로 대한간학회지에 논문을 게재한 회원(10점/편)</p> <p>최근 3년간 공동저자로 대한간학회지에 논문을 게재한 회원(2점/편)</p> <p>(중략 - 나, 다 항)</p> <p>라. 해외학술지 게재 점수 (10점)</p> <p>최근 3년간 주저자로 SCI(E)급 저널에 논문을 게재한 회원(4점/편)</p> <p>최근 3년간 공동저자로 SCI(E)급 저널에 논문을 게재한 회원(1점/편)</p> <p>* 각 항목의 점수는 부여된 상한 점수를 초과할 수 없으며, 주저자는 제1저자 혹은 교신저자를 의미함.</p>	<p>6. 지원대상자 선정기준</p> <p>6) 연자 선발의 기준은 다음과 같다.(총점 100점)</p> <p>가. 대한간학회지(Clin Mol Hepatol) 게재 점수 (40점)</p> <p>최근 3년간 주저자로 대한간학회지에 논문을 게재한 회원(30점/편)</p> <p>최근 3년간 공동저자로 대한간학회지에 논문을 게재한 회원(2점/편)</p> <p>(중략 - 나, 다 항)</p> <p>(삭제)라. 해외학술지 게재 점수 (10점)</p> <p>최근 3년간 주저자로 SCI(E)급 저널에 논문을 게재한 회원(4점/편)</p> <p>최근 3년간 공동저자로 SCI(E)급 저널에 논문을 게재한 회원(1점/편)</p> <p>* 연자선발기준의 가 항목은 상한점수가 없으나, 그 외 각 항목의 점수는 부여된 상한 점수를 초과할 수 없으며, 주저자는 제1저자 혹은 교신저자를 의미함.</p>
<p>6. 지원대상자 선정기준</p> <p>없음</p>	<p>6. 지원대상자 선정기준</p> <p>7항 신설</p> <p>7) 신청대상자가 50세 이하 대학병원 조교수급 또는 그 이상인 경우, 최근 3년간 주저자로 대한간학회지(Clin Mol Hepatol)에 원저, 증설, 증례, editorial 또는 letter to editor를 투고한 경우, 또는 SCI(E)급 저널에 최근 3년간의 대한간학회지 논문을 인용한 경우에만 지원자격을 부여한다. 단 본 항목은 개정 후 1년간 유예기간을 둔 후에 적용한다.</p>
<p>7. 학술대회 참가지원 신청서 제출</p> <p>신청서류는 아래와 같다.</p> <p>① 해외학회 참가지원 신청서(양식)</p> <p>② 초록채택 확인서(ex: 메일, 우편, 초청장)</p>	<p>7. 학술대회 참가지원 신청서 제출</p> <p>신청서류는 아래와 같다.</p> <p>① 해외학회 참가지원 신청서(양식)</p> <p>② 초록채택 확인서(ex: 메일, 우편, 초청장)</p> <p>③ 초록</p> <p>④ 대한간학회지 주저자 게재 또는 인용 서식(양식)</p>

학술연구 지원사업 선정기준 강화

변경 전	변경 후
<p>지원 대상자의 자격</p> <p>본 사업에서 연구비를 지원받고자 하는 연구과제의 책임연구자는 대한간학회 정회원이어야 하며 책임 및 공동연구자는 동일한 연구과제로 다른 연구비를 지원받거나 학술상을 수상한 경력이 없어야 한다. 기 수혜자는 수혜 시점으로부터 5년이 지난 후 재신청할 수 있다. 책임연구자가 기존 대한간학회 학술연구비를 지원받아 수행하고 있는 연구과제의 최종 결과물을 논문으로 제출하지 않은 경우에는 지원을 제한한다.</p>	<p>지원 대상자의 자격</p> <p>본 사업에서 연구비를 지원받고자 하는 연구과제의 책임연구자는 대한간학회 정회원이어야 하며 책임 및 공동연구자는 동일한 연구과제로 다른 연구비를 지원받거나 학술상을 수상한 경력이 없어야 한다. 기 수혜자는 수혜 시점으로부터 5년이 지난 후 재신청할 수 있다. 책임연구자가 기존 대한간학회 학술연구비를 지원받아 수행하고 있는 연구과제의 최종 결과물을 논문으로 제출하지 않은 경우에는 지원을 제한한다.</p> <p>책임연구자가 최근 2년 이내 대한간학회의 영문학회지인 Clinical and Molecular Hepatology에 주저자로 논문을 투고 하였거나, 최근 2년 이내 SCI 및 SCIE 잡지에 주저자로 출판한 논문에 대한간학회의 영문학회지인 Clinical and Molecular Hepatology의 논문을 피인용한 적이 없는 경우에는 지원을 제한한다.</p>

사업비 예산

내역	(원)
간행위원회 운영비	70,000,000
CMH 발간비	140,000,000
CMH 기타 사업비	60,000,000
Total	270,000,000

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First of all, we hope you stay safe always amid the coronavirus pandemic and get through the tough times well.

2021 was a year to remember for *Clinical and Molecular Hepatology (CMH)*. This year, our journal has seen its impact factor rise, and this outstanding achievement is due to the sterling efforts made by each and every one of the editorial board members. I hope we can take one step closer to achieving our goal, to create an excellent and solid platform for publication and communication of scientific research.

Also, we are excited to announce the statistics of *2021 CMH* just for you.

In total

308 original articles were submitted, and 25 were published with an acceptance rate of 8.1%.

Average time from submission to the editor's decision was 7.74 days.

Your contribution for the past 2 years as an editor of CMH (2020-2021)

Editor Name	Handling of submitted manuscripts	Accepted		Rejected		Under review	Average time from submission your decision (days)
		articles	%	articles	%		
Lee, Sung Won	5	2	100.00%	0	0.00%	3	12.97

Again, we are very thankful for your contributions and support through serving on the journal, and wish you continued attainment.

Sincerely yours,

Seung Up Kim, MD, PhD

Editor-in-chief

Clinical and Molecular Hepatology

New Years Greetings from Clinical and Molecular Hepatology ▶ 받은편지함 x

Clinical and Molecular Hepatology <kasi@kams.or.kr>

나에게 ▾

영어 ▾ > 한국어 ▾ 메일 번역



Dear Authors, Reviewers and Editors of the *Clinical and Molecular Hepatology*

I am writing to convey my very best wishes and sincere thanks to each one of you for your excellent contributions last year. Last year has been another delighted to announce that Clinical and Molecular Hepatology (CMH) is expected to see its IF spring once more to approximately 7 points this year

The outstanding performance is owing obviously to the unflagging enthusiasm of the authors who submitted high quality papers, and to reviewers and reflect on the past year, I believe that we have a few reasons to take a great deal of pride in our accomplishments and also look forward with passion t

Again, we express our profound gratitude for your support and contributions to CMH. The editorial board will persistently try to improve CMH into directly applied to actual patient care.

In these challenging times amid the persistent COVID-19 pandemic, I hope you always stay healthy and safe, and my best wishes to you and your f

Thank you,

Seung Up Kim, M.D.,Ph.D.
Editor-in-chief
Clinical and Molecular Hepatology

CMH Editorial Board Meeting

Agenda	
Opening speech	5 minutes
Updates in CMH	15 minutes
<i>2022 and beyond</i> for further development	20 minutes
Highlights for editorial board duties	10 minutes
Open discussion on the cutting-edge research topics in liver diseases	20 minutes

Exterior

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Inkyung Jung

Yonsei University, Korea

Graphic Editor

Dong Su Jang

studio MID (Medical Illustration & Design)

Language Editor

Debbie Won

Yonsei University, Office of Research Affairs

Graphical abstract 지원 제 안서 Medical Illustration & Design

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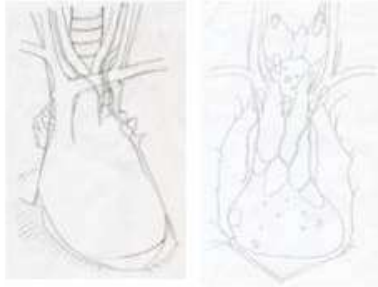
저널 · 출판 · 교육 · 학회 · 법률 · 광고 등 해부학적 지식이 필요한 각 분야의 의학 Illustration을 전문적으로 제작하고 있으며,

‘ Medical Illustration, Medical Graph&Chart , 기타 의학이미지(Medical Design)’ 로 구분하여 해당 서비스를 제공합니다.



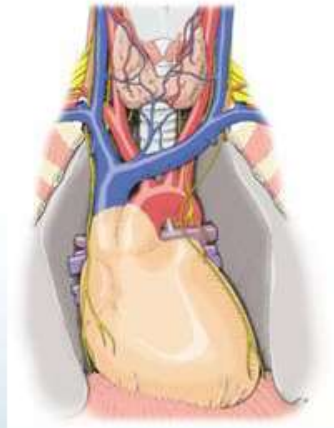
일러스트작업절차

신청서 작성용 2차확인서(신청용)	
1. 신청자 정보	성명: [] 직책: []
2. 신청 목적	[]
3. 신청 일자	[]
4. 신청 부서	[]
5. 신청 사유	[]
6. 신청 방법	[]
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신청서 작성, 첨부파일 및 문의

1차 밑그림

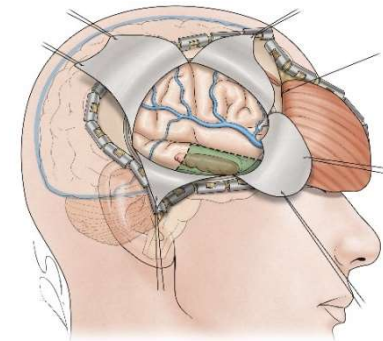
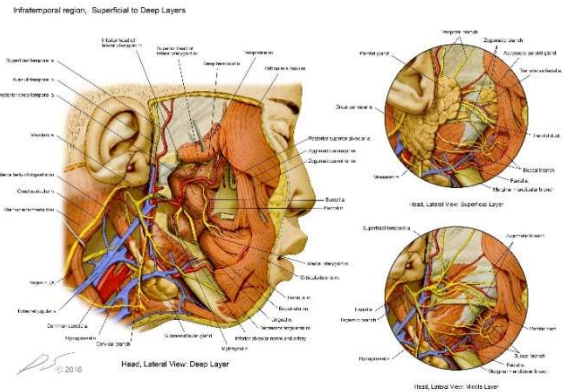
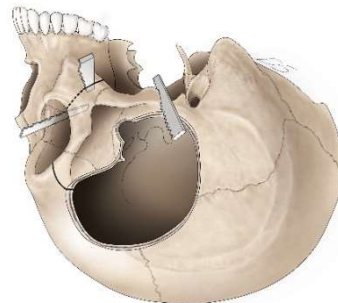
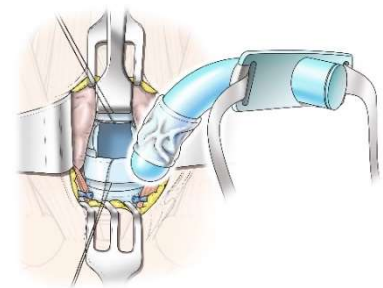
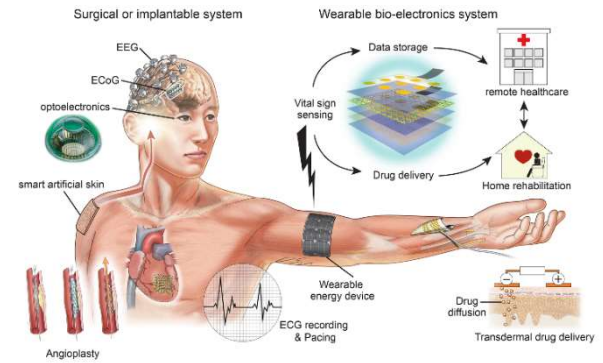
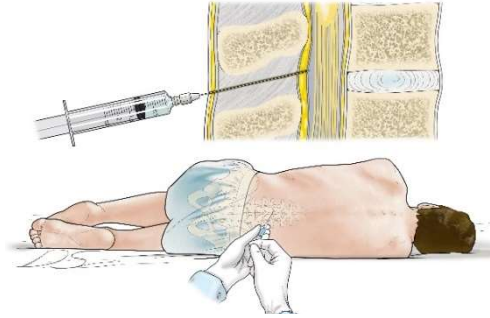
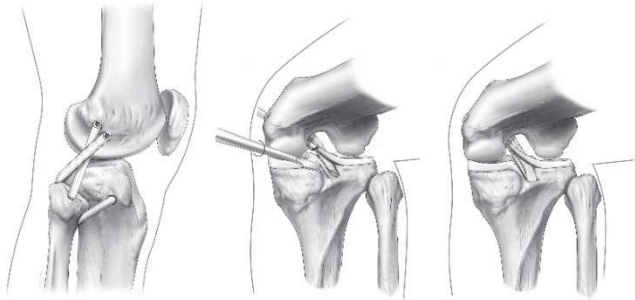
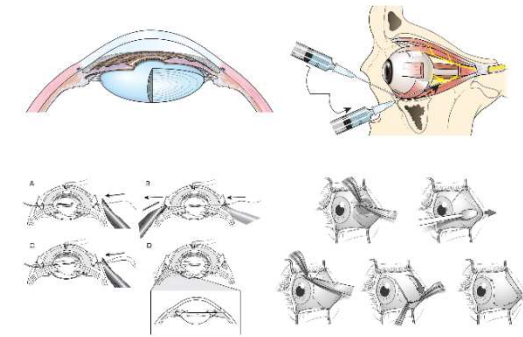
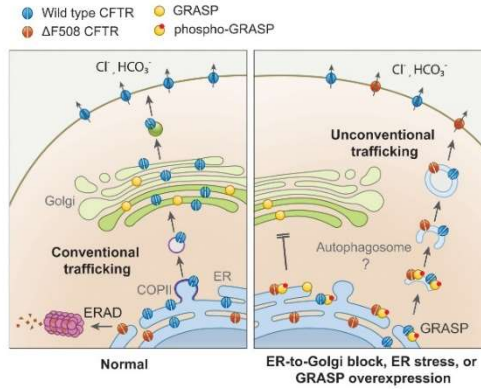
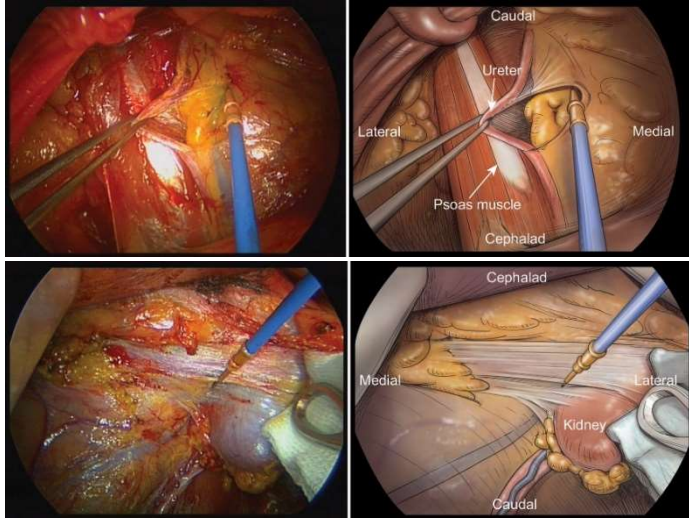


2차 Confirm, 완료

수정작업

전달 내용이 부족하시면 스마트폰으로 영상촬영 1~2분 정도 요약 하셔서 영상 메시지를 보내주시면 작업에 도움이 되겠습니다.

WORK PORTFOLIO



CMH

Clinical and Molecular
Hepatology

93 KASL clinical practice guidelines for management of chronic hepatitis B / 160 Advances in ultrasound diagnosis in chronic liver diseases / 168 Direct-acting antivirals response in hepatocellular carcinoma: Does the presence of hepatocellular carcinoma matter? / 172 Unmet need in chronic hepatitis B management / 181 Role of endoscopic treatment or balloon-occluded retrograde transvenous obliteration in patients with Child-Pugh class C end-stage liver cirrhosis and esophageal/gastric varices / 183 Endoscopic treatment or balloon-occluded retrograde transvenous obliteration is safe for patients with esophageal/gastric varices in Child-Pugh class C end-stage liver cirrhosis / 190 Evaluation of bioenergetic and mitochondrial function in liver transplantation / 199 Effects of zolpidem on sleep parameters in patients with cirrhosis and sleep disturbances: A randomized, placebo-controlled trial / 210 Portal pressure gradient and serum albumin: A simple combined parameter associated with the appearance of ascites in decompensated cirrhosis treated with transjugular intrahepatic portosystemic shunt / 218 VIEKIRA PAK associated drug-induced interstitial lung disease: Case series with systematic review of literature

Clinical and Molecular Hepatology

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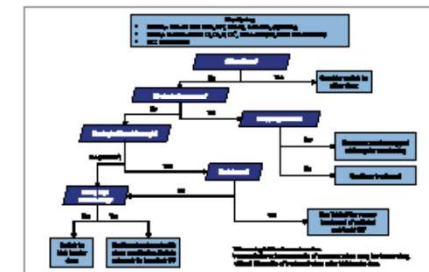
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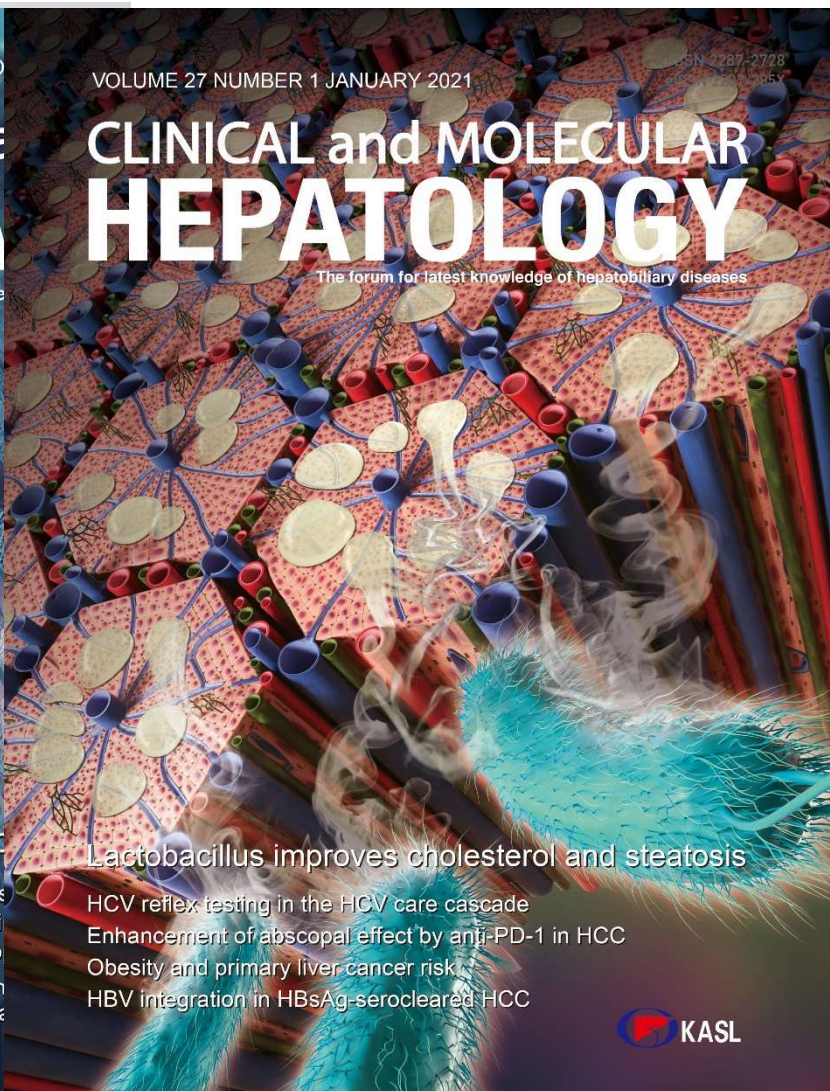
Volume 25 Number 2 June 2019

CMH



Updated KASL clinical practice guidelines for management of chronic hepatitis B. On treatment management algorithm.

 Korean Association for the Study of the Liver





pISSN 2287-2728
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Original Article

https://doi.org/10.3350/cmh.2018.0073
2019 Jun 27. [Epub ahead of print]

Serum *Wisteria floribunda* agglutinin-positive human Mac-2 binding protein level predicts recurrence of hepatitis B virus-related hepatocellular carcinoma after curative resection

Hye Soo Kim^{1*}, Seung Up Kim^{1,2*}, Beom Kyung Kim^{1,2}, Jun Yong Park^{1,2}, Do Young Kim^{1,2}, Sang Hoon Ahn^{1,2}, Kwang-Hyub Han^{1,2}, Young Nyun Park³, Dai Hoon Han⁴, Kyung Sik Kim⁴, Jin Sub Choi⁴, Gi Hong Choi⁴, and Hyon-Suk Kim⁵

¹Department of Internal Medicine, ²Institute of Gastroenterology, ³Department of Pathology, ⁴Department of Surgery, ⁵Department of Laboratory Medicine, Yonsei University College of Medicine, Seoul, Korea

Background/Aims: To investigate whether serum *Wisteria floribunda* agglutinin-positive human Mac-2-binding protein (WFA⁺-M2BP) can predict the recurrence of hepatitis B virus (HBV)-related hepatocellular carcinoma (HCC) after curative resection.

Methods: Patients with chronic hepatitis B (CHB) who underwent curative resection for HCC between 2004 and 2015 were eligible for the study. Recurrence was sub-classified as early (<2 years) or late (≥2 years).

Results: A total of 170 patients with CHB were selected. During the follow-up period (median 22.6 months), 64 (37.6%) patients developed recurrence. In multivariate analyses, WFA⁺-M2BP level was an independent predictor of overall (hazard ratio [HR]=1.490), early (HR=1.667), and late recurrence (HR=1.416), together with male sex, des-gamma carboxyprothrombin level, maximal tumor size, portal vein invasion, and satellite nodules (all $P<0.05$). However, WFA⁺-M2BP level was not predictive of grade B-C posthepatectomy liver failure. The cutoff value that maximized the sum of sensitivity (30.2%) and specificity (90.6%) was 2.14 (area under receiver operating characteristic curve=0.632, $P=0.010$). Patients with a WFA⁺-M2BP level >2.14 experienced recurrence more frequently than those with a WFA⁺-M2BP level ≤2.14 ($P=0.011$ by log-rank test), and had poorer postoperative outcomes than those with a WFA⁺-M2BP level ≤2.14 in terms of overall recurrence (56.0 vs. 34.5%, $P=0.047$) and early recurrence (52.0 vs. 20.7%, $P=0.001$).

Conclusions: WFA⁺-M2BP level is an independent predictive factor of HBV-related HCC recurrence after curative resection. Further studies should investigate incorporation of WFA⁺-M2BP level into tailored postoperative surveillance strategies for patients with CHB. *Clin Mol Hepatol* 2019 Jun 27. [Epub ahead of print]

Keywords: Hepatitis B; Liver fibrosis; Biomarkers; Hepatocellular carcinoma; Prognosis

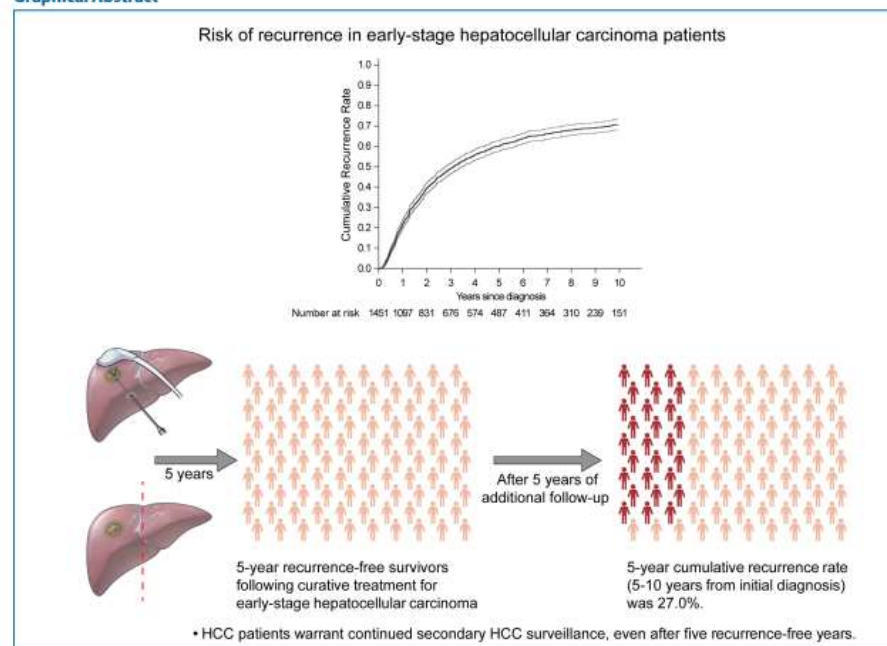
Original Article

Substantial risk of recurrence even after 5 recurrence-free years in early-stage hepatocellular carcinoma patients

Jihye Kim, Wonseok Kang, Dong Hyun Sinn, Geum-Youn Gwak, Yong-Han Paik, Moon Seok Choi, Joon Hyeok Lee, Kwang Cheol Koh, and Seung Woon Paik

Department of Medicine, Samsung Medical Center, Sungkyunkwan University School of Medicine, Seoul, Korea

Graphical Abstract



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Clinical and Molecular Hepatology 2021;27:603-615

Original Article

Cost-effectiveness and long-term outcomes of liver transplantation using hepatitis B core antibody-positive grafts with hepatitis B immunoglobulin prophylaxis in Korea

Kyeong Deok Kim*, Ji Eun Lee*, Jong Man Kim¹, Okjoo Lee¹, Na Young Hwang², Jinsoo Rhu³, Gyu-Seong Choi⁴, Kyunga Kim¹, and Jae-Won Joh⁵

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Graphical Abstract

Abbreviations: Anti-HBc, Hepatitis B core antibody; anti-HBc, hepatitis B surface antibody; BM, body mass index; CHAI, de novo hepatitis B virus infection; HBIG, hepatitis B immunoglobulin; HBsAg, hepatitis B surface antigen; HBV, hepatitis B virus; HCC, hepatocellular carcinoma; HCV, hepatitis C virus; ICI, intensive care unit; LT, liver transplantation; MC, Milan criteria; MELD, model for end-stage liver disease; NAL, nucleoside analogue.

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*Kyeong Deok Kim and Ji Eun Lee contributed equally to this study as co-first authors.

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Research Article
NAFLD and Alcohol-Related Liver Diseases

JOURNAL OF HEPATOLOGY

Burden of non-alcoholic fatty liver disease in Asia, the Middle East and North Africa: Data from Global Burden of Disease 2009-2019

Graphical abstract

Authors
Negah Golabi, James M. Paik, Saleh AlQahani, Youssef Younossi, Gabriela Tuncer, Zobair M. Younossi

Correspondence
Zobair Younossi@nova.org (Z.M. Younossi).

Lay summary
Non-alcoholic fatty liver disease (NAFLD) has emerged as one of the most common causes of chronic liver disease worldwide. We used Global Burden of Disease data to assess the incidence, mortality, and disability-adjusted life years attributable to NAFLD-related liver complications in Asia, the Middle East and North Africa. NAFLD is poised to contribute to a substantial liver disease burden in these regions. Regional and global policies are needed to address the increasing burden of complications of NAFLD.

Highlights

- NAFLD has become a major cause of chronic liver disease worldwide.
- Given its increasing incidence, death and DALY rates, NAFLD is posing a substantial burden in Asia and MENA regions.
- Global and regional strategies are needed to deal with the increasing burden of NAFLD and its complications.

Background and aims: VARSITY (An Efficacy and Safety Study of Vedolizumab Intravenous [IV] Compared to Adalimumab Subcutaneous [SC] in Participants With Ulcerative Colitis) showed superior clinical remission and endoscopic improvement in ulcerative colitis with vedolizumab vs. adalimumab. This analysis compared histologic outcomes. **Methods:** Patients in VARSITY were randomized 1:1 to maintenance with vedolizumab IV 300 mg every 8 weeks or adalimumab SC 40 mg every 2 weeks (both following standard induction). Geboes Index and Roberts Histopathology Index (RHI) scores were used to assess prespecified histologic exploratory end points of histologic remission (Geboes <2 or RHI <2) and minimal histologic disease activity (Geboes <3.1 or RHI <4) at weeks 14 and 52. **Results:** In total, 769 patients received vedolizumab (n = 383) or adalimumab (n = 386). Mean baseline histologic disease activity was similar between vedolizumab and adalimumab groups. Vedolizumab induced greater histologic remission than adalimumab at week 14 (Geboes: 16.7% vs.

Gastroenterology 2021;161:1156-1167

Histologic Outcomes With Vedolizumab Versus Adalimumab in Ulcerative Colitis: Results From An Efficacy and Safety Study of Vedolizumab Intravenous Compared to Adalimumab Subcutaneous in Participants With Ulcerative Colitis (VARSITY)

Laurent Peyrin-Biroulet,¹ Edward V. Loftus Jr.,² Jean-Frédéric Colombel,³ Silvio Danese,⁴ Raquel Rogers,⁵ Jeffrey D. Bornstein,⁶ Jingjing Chen,⁶ Stefan Schreiber,⁶ Bruce E. Sands,⁶ and Richard A. Lirio⁷

¹Department of Gastroenterology, Nancy University Hospital, and INSERM U1256 Nutrition-Genetics and Environmental Risk Exposure, Lorraine University, Vandœuvre-lès-Nancy, France; ²Division of Gastroenterology and Hepatology, Mayo Clinic College of Medicine, Rochester, Minnesota; ³Division of Gastroenterology, Icahn School of Medicine at Mount Sinai, New York, New York; ⁴Department of Biomedical Sciences, Humanitas Clinical and Research Center—Istituto di Ricovero e Cura a Carattere Scientifico, Humanitas University, Milan, Italy; ⁵Takeda Development Center Americas Inc, Cambridge, Massachusetts; and ⁷Department of Medicine I, University Hospital Schleswig-Holstein, Kiel, Germany

Abstract

Study Design

Vedolizumab-treated patients had higher rates of histologic remission at Week 52. Vedolizumab-treated patients had higher rates of minimal histologic disease activity at Week 52. Vedolizumab-treated patients had higher rates of histologic remission plus endoscopic improvement at Week 52.

BACKGROUND AND AIMS: VARSITY (An Efficacy and Safety Study of Vedolizumab Intravenous [IV] Compared to Adalimumab Subcutaneous [SC] in Participants With Ulcerative Colitis) showed superior clinical remission and endoscopic improvement in ulcerative colitis with vedolizumab vs. adalimumab. This analysis compared histologic outcomes. **METHODS:** Patients in VARSITY were randomized 1:1 to maintenance with vedolizumab IV 300 mg every 8 weeks or adalimumab SC 40 mg every 2 weeks (both following standard induction). Geboes Index and Roberts Histopathology Index (RHI) scores were used to assess prespecified histologic exploratory end points of histologic remission (Geboes <2 or RHI <2) and minimal histologic disease activity (Geboes <3.1 or RHI <4) at weeks 14 and 52. **RESULTS:** In total, 769 patients received vedolizumab (n = 383) or adalimumab (n = 386). Mean baseline histologic disease activity was similar between vedolizumab and adalimumab groups. Vedolizumab induced greater histologic remission than adalimumab at week 14 (Geboes: 16.7% vs.

1. Title 페이지 색감 단순화 고려
2. CMH 로고가 다소 큰 느낌. 제목을 좀더 강조하는 방안
3. Graphical abstract 를 더 컴팩트하게 배치 고려
4. Abbreviation 를 뒷장으로 보내고, 첫번째 장에 Study highlight 위치시키는 방안

Language editor



Debbie Won (원지현) – 연합뉴스 (영어뉴스 앵커)



Statistical editor

- 정인경 (연세의대, 의생명시스템정보학교실)
 - Review of CMH-2020-0333
 - 1. The manuscript say that “Patients were followed until diagnosis of HCC, death, liver transplantation, starting antiviral treatment, last follow-up date (December 31, 2018), or up to 5 years of follow-up, whichever came first.” Does this mean that all patients without an event were censored at 5 years? Then, the maximum duration of f/u should be 5 years. But, the authors mentioned that the mean f/u is 68 months. Please clarify.
 - 2. The main event of interest is HCC. But patients might have other events such as death or liver transplantation, which could be competing events. I’m wondering how those events were handled in the analysis.
 - 3. In Fig. 1 & Table 1, the number of patients in the training cohort was 15,187. However, the number of subjects evaluated by the Liang score seems to be 13,032 (Table 4). In Fig. 2A, the number at risk at “0” is also 13,032. Some explanation is needed for this discrepancy. (The numbers in validation cohort also do not match.)
 - 4. In Table 5, How were the cutoffs for other HCC prediction scores determined? Are they conventionally used cutoffs? Suppl. Fig.1 shows that the AUROC of CU-HCC score or GAG-HCC score is higher than that of Liang score (although not significantly different), but the authors emphasized the sensitivity and NPV of Liang score were higher than those of the other score at a certain cutoff. There is almost no difference in NPV among different scores. Also, they did not mention about specificity or PPV. I’m also wondering if the difference in sensitivity is statistically significant.

Further planned invitation

- Statistical editor 보강 → 통계 검증 강화

(후보)

- 김경아: 삼성서울병원 의학통계연구센터
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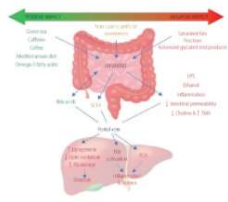
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antibodies (AMAs), intense infiltration...

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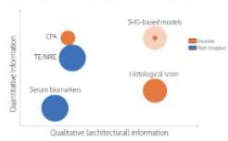
The role of the gut microbiome and diet in the pathogenesis of non-alcoholic fatty liver disease
Erica Jennison, Christopher D. Byrne
Clin Mol Hepatol. 2021;27(1):22-43. Published online December 10, 2020



Non-alcoholic fatty liver disease (NAFLD) is the leading cause of chronic liver disease, with a prevalence that is increasing in parallel with the global rise in obesity and type 2 diabetes mellitus. The pathogenesis of NAFLD is complex and multifactorial, involving environmental, genetic and metabolic factors. The role of the diet and the gut microbiome is gaining interest as a...

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Updates in the quantitative assessment of liver fibrosis for nonalcoholic fatty liver disease: Histological perspective
Gwyneth Soon, Aileen Wee
Clin Mol Hepatol. 2021;27(1):44-57. Published online November 19, 2020



Nonalcoholic fatty liver disease/nonalcoholic steatohepatitis (NAFLD/NASH) is a major cause of liver fibrosis and cirrhosis. Accurate assessment of liver fibrosis is important for predicting disease outcomes and assessing therapeutic response in clinical practice and clinical trials. Although noninvasive tests such as transient elastography and magnetic resonance elastography are preferred where possible, histological assessment of liver fibrosis via semiquantitative scoring systems...

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Recent updates on the management of autoimmune hepatitis
Atsumasa Komori
Clin Mol Hepatol. 2021;27(1):58-69. Published online December 10, 2020

Autoimmune hepatitis (AIH) is an immunoinflammatory chronic liver disease with diverse and subtle...

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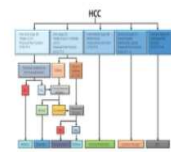
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Review



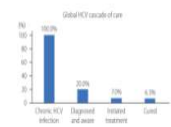
Evaluation and management of extrahepatic manifestations of nonalcoholic fatty liver disease

Karn Wijampreecha, Elizabeth S. Aby, Aljaz Ahmed, Donghee Kim
Clin Mol Hepatol. 2021;27(2):221-235. Published online December 3, 2020
DOI: <https://doi.org/10.3350/cmh.2020.0239>
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Optimizing the management of intermediate-stage hepatocellular carcinoma: Current trends and prospects

Takujji Torimura, Hideki Iwamoto
Clin Mol Hepatol. 2021;27(2):236-245. Published online December 3, 2020
DOI: <https://doi.org/10.3350/cmh.2020.0204>
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Current and future strategies for the treatment of chronic hepatitis C

Omar Alshuwaykh, Paul Y. Kwo
Clin Mol Hepatol. 2021;27(2):246-256. Published online December 3, 2020
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KASL clinical practice guidelines for management of chronic hepatitis B

Comparison of clinical practice guidelines for the management of chronic hepatitis B: When to start, when to change, and when to stop

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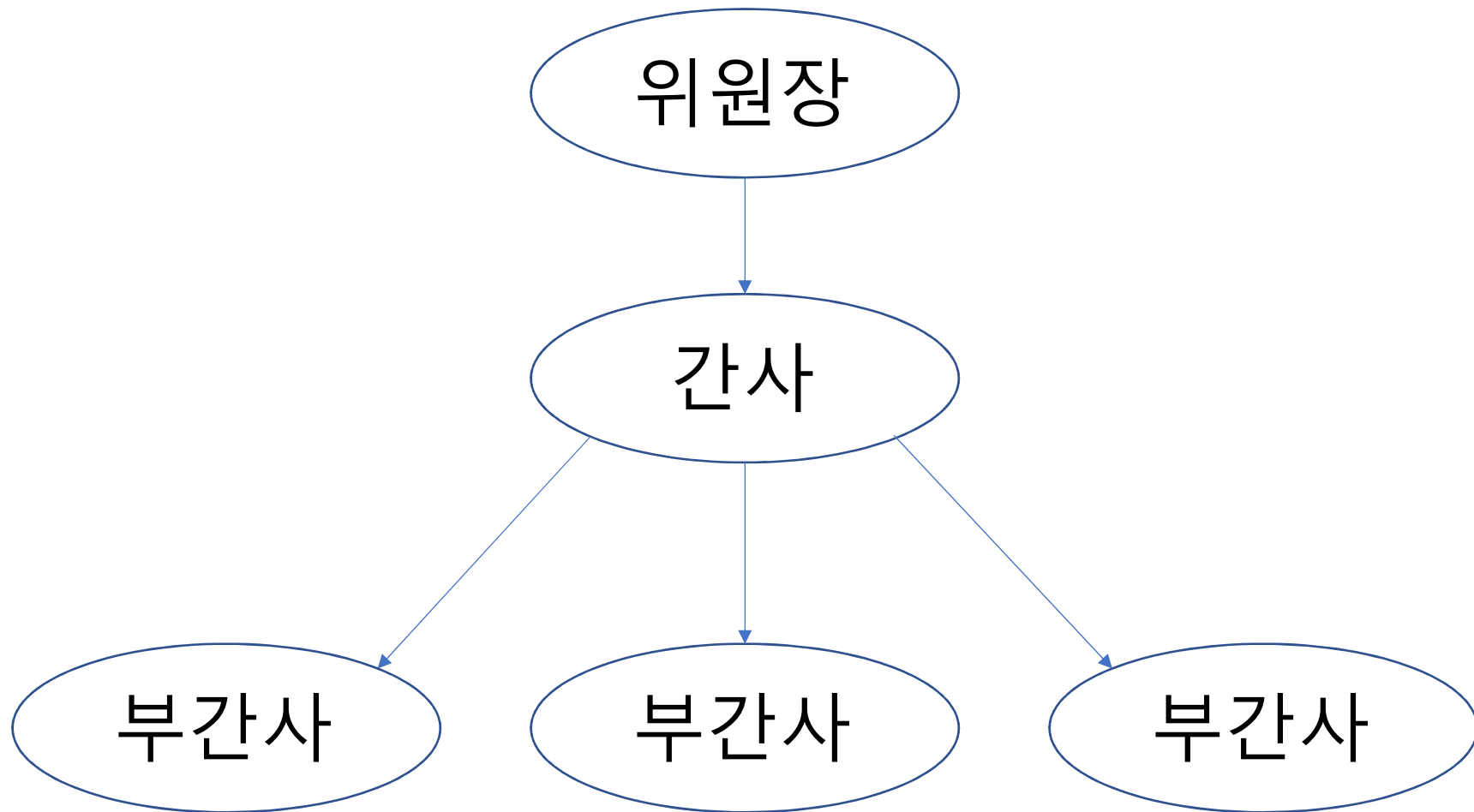
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- 투고된 논문 심사 지연시 remind 시스템 개선

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Process Time Span

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- 여러 리뷰어 선정시 마지막 늦게 오는 리뷰 수락일 기준

	2020. 1. 1 ~ 2020. 3. 31.	2020. 4. 1 ~ 2020. 6. 30.	2020. 7. 1 ~ 2020. 11. 21.	2020. 11. 22 ~ 2021. 2. 15.
Admin Checklist 확인부터 EIC 로 넘겨지는 데까지	1.39일	1.21일	0.99일	1.23일
EIC 에서 AE 가 결정되는 데까지 (EIC 가 AE 지정시 바로 AE가 결정됨)	0.34일	0.17일	0.09일	0.15일
AE 가 리뷰어를 고르는 데까지 (AE picks REVIEWER)	1.25일	1.69일	0.46일	1.67일
AE 가 선정한 리뷰어에 대해서 리뷰어 초청 메일을 보낼 지, 보내지 말 지 결정하는 데까지 (AE invites REVIEWER)	0.11일	0.03일	0.06일	0.04일
리뷰 요청을 받은 리뷰어가 리뷰를 수락할 지 결정하는 데까지 (AE assigns REVIEWER)	5.35일	6.35일	6.18일	4.37일
리뷰어의 평균 리뷰 기간	7.58일	7.97일	7.53일	8.18일
리뷰어의 리뷰 완료 후 AE recommend 결정까지	1.48일	2.79일	1.22일	0.76일
AE recommend 결정에서 EIC 최종 결정까지	0.35일	0.26일	0.23일	0.09일
총 소요시간	20.19일	20.28일	16.7일	11.5일
Immediate decision 시 소요시간	1.35일	2.98일	0.77일	0.56일

Process Time Span

2021년 논문심사 process 소요시간 - CMH 분기별 TIME SPAN 정리

- 여러 리뷰어 선정시 마지막 늦게 오는 리뷰 수락일 기준

	2021. 2. 16 ~ 2021. 5. 16 ~	2021. 5. 16 ~ 2021. 8. 16 ~	2021. 8. 16 ~ 2021. 11. 15.	2021. 11. 16 ~ 2022. 1. 10
Admin Checklist 확인부터 EIC 로 넘겨지는 데까지	1.15일	1.61일	1.34일	1.15일
EIC 에서 AE 가 결정되는 데까지 (EIC 가 AE 지정시 바로 AE가 결정됨)	0.16일	0.16일	0.12일	0.15일
AE 가 리뷰어를 고르는 데까지 (AE picks REVIEWER)	2.37일	2.60일	1.75일	1.57일
AE 가 선정한 리뷰어에 대해서 리뷰어 초청 메일을 보낼 지, 보내지 말 지 결정하는 데까지 (AE invites REVIEWER)	0.49일	0.004일	0.23일	0.002일
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리뷰어의 평균 리뷰 기간	7.91일	8.41일	8.72일	8.33일
리뷰어의 리뷰 완료 후 AE recommend 결정까지	1.56일	1.76일	1.82일	0.97일
AE recommend 결정에서 EIC 최종 결정까지	0.79일	0.25일	0.40일	0.14일
총 소요시간	15.9일	15.0일	17.8일	15.8일
Immediate decision 시 소요시간	0.18일	0.78일	0.12일	0.21일

International vs. Domestic

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14	The number of authors' countries over the most recent years' issues is at least 10, and the proportion of articles of which the authors are from single county is less than 0.50.	No

국가별 게재비율

2021년도 (27권 1~4호) 14개국		
국가	편 수	%
Korea	30.5	46.9
Japan	8.0	12.3
Taiwan	7.0	10.8
China	4.0	6.2
USA	3.5	5.4
India	2.0	3.1
Italy	2.0	3.1
Singapore	2.0	3.1
Canada	1.0	1.5
Germany	1.0	1.5
Hong Kong	1.0	1.5
Malaysia	1.0	1.5
Mongolia	1.0	1.5
UK	1.0	1.5
총계	65편	100%

2020년도 (26권 1~4호) 20개국		
국가	편 수	%
Korea	42.4	49.9
USA	12.5	14.7
Japan	7.0	8.2
China	4.0	4.7
India	3.0	3.5
Argentina	2.0	2.4
Greece	2.0	2.4
Hong Kong	2.0	2.4
Indonesia	1.5	1.8
Mexico	1.5	1.8
Singapore	1.5	1.8
Taiwan	1.0	1.2
Brazil	1.0	1.2
Egypt	1.0	1.2
Italy	0.5	0.6
Myanmar	0.5	0.6
New Zealand	0.5	0.6
Philippines	0.5	0.6
Saudi Arabia	0.3	0.4
Switzerland	0.3	0.4
총계	85편	100%

2019년도 (25권 1~4호) 17개국		
국가	편 수	%
Korea	15.0	32.6
USA	6.0	13.0
Japan	5.0	10.9
China	3.0	6.5
Thailand	3.0	6.5
India	2.0	4.3
Italy	2.0	4.3
Singapore	2.0	4.3
Saudi Arabia	1.5	3.3
Brazil	1.0	2.2
Egypt	1.0	2.2
Germany	1.0	2.2
Iran	1.0	2.2
Portugal	1.0	2.2
Canada	0.5	1.1
Greece	0.5	1.1
Taiwan	0.5	1.1
총계	46편	100%

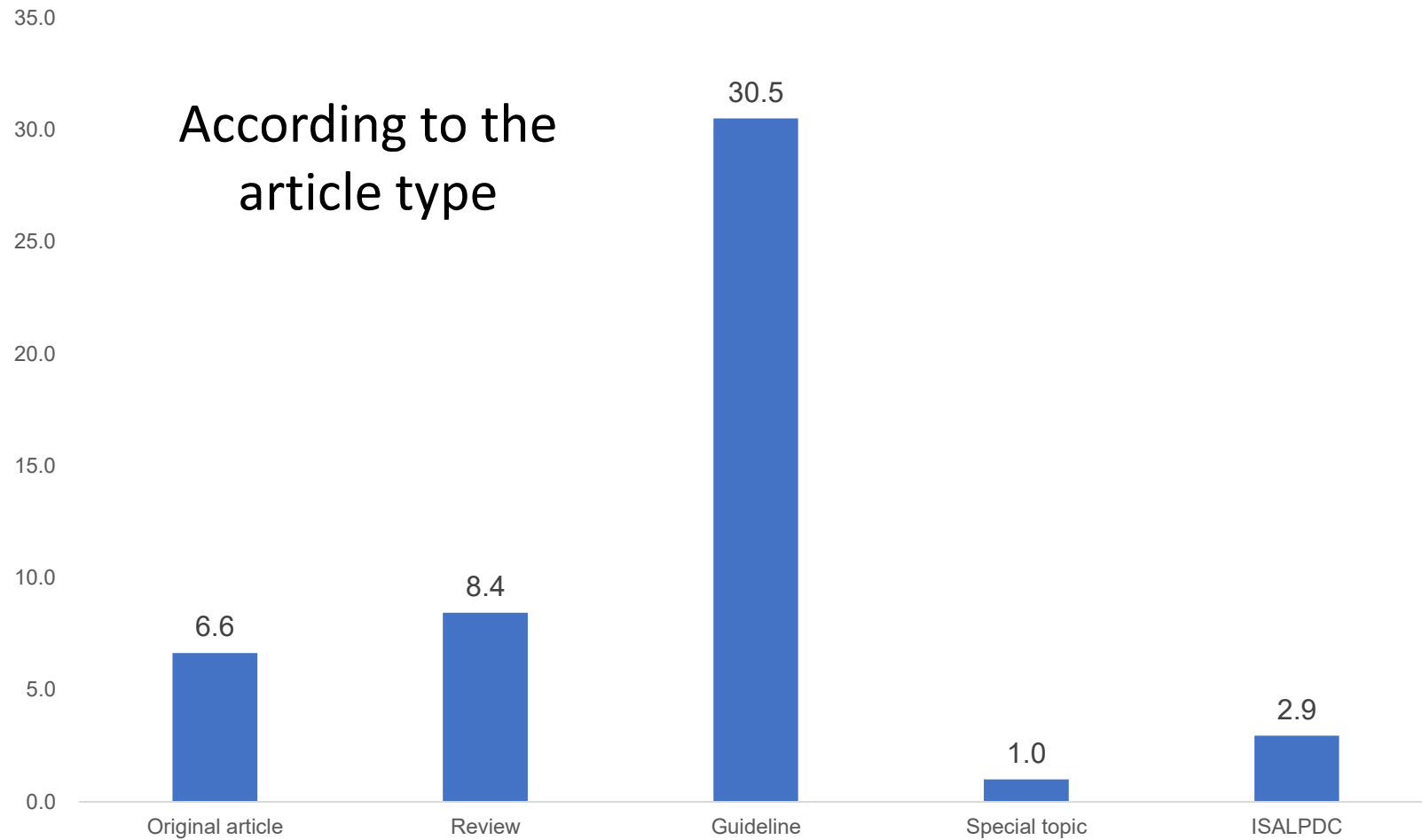
2018년도 (23권 1~4호) 12개국		
국가	편 수	%
Korea	33.5	76.1
France	2.0	4.5
USA	1.5	3.4
Hong Kong	1.0	2.3
India	1.0	2.3
Iran	1.0	2.3
Italy	1.0	2.3
Spain	1.0	2.3
Egypt	0.5	1.1
Ethiopia	0.5	1.1
Germany	0.5	1.1
Jordan	0.5	1.1
총계	44편	100%

Articles published in 2019-2020

	2019년			2020년		
	Citable items	Total citation	Mean citation	Citable items	Total citation	Mean citation
총설	16	197	12.31	17	136	8.00
국내	7	119	17.00	3	30	10.00
해외	9	78	8.67	14	106	7.57
원저	16	74	4.63	21	156	7.43
국내	4	33	8.25	14	128	9.14
해외	12	41	3.42	7	28	4.00
Special topic				1	1	1.00
ISALPDC				18	52	2.89
Guideline	1	51	51.00	1	12	12.00
Total	33	322	9.76	58	357	6.16

2019년 게재물과 비교시 2020년에 게재된 원저와 총설의 mean citation 이 유사하여 졌으며 **국내 저자들의 총설 및 원저가 가장 많이 인용되고 있음.**

Mean Citation in 2021



Highly cited papers (2021)

Type	Title	Author	Citation
Guideline	KASL Clinical Practice Guidelines for Management of Chronic Hepatitis B	임형준	51
Review	Comparison of International Guidelines for Noninvasive Diagnosis of Hepatocellular Carcinoma: 2018 Update	이정민	44
Review	Recent research trends and updates on nonalcoholic fatty liver disease	조용균, 박상훈	24
Original article	Trends in the prevalence of chronic liver disease in the Korean adult population, 1998–2017	김동준	23
Review	Hepatocellular Carcinoma Surveillance in the 21st Century: Saving Lives or Causing Harm?	Amit G. Singal	19
Review	Unmet needs in the era of direct-acting antiviral therapy in chronic hepatitis C	Yu, Ming-Lung	18
Review	Novel Biomarkers in Management of Chronic Hepatitis B	Yasuhito Tanaka	18
Review	Comparison of clinical practice guidelines for the management of chronic hepatitis B	임형준	16
Review	Unmet need in chronic hepatitis B management	Grace Lai-Hung Wong	15
Review	Gadoxetic acid-enhanced MRI: Hepatocellular carcinoma and mimickers	박미숙	15
Original article	Inhibition of PI3K/Akt signaling suppresses EMT in hepatocellular carcinoma through the Snail/GSK-3/beta-catenin pathway	김윤준	14

Publication judgment committee

대한간학회 게재판정위원회 규정

제정 2020. 01. 06.

개정 2022. 02. 08.

제 1조(명칭) 본 위원회는 대한간학회 간행위원회 산하 “게재판정 위원회”(이하 위원회)라 칭한다.

제 2조(목적) 본 규정은 Clinical Molecular and Hepatology(대한간학회지)에 접수된 일부 논문의 게재 적합성 평가를 목적으로 한다.

제 3조(구성) 본 위원회는 위원장 1명과 7명 내외의 위원으로 구성한다.

제 1항: 위원장은 전임 간행이사가 수행하며 위원회를 대표한다.

제 2항: 부위원장은 현 간행이사가 수행하며, 위원회를 소집, 진행, 총괄한다.

제 3항: 부위원장은 위원회의 결과를 바탕으로 간행이사로써 최종 게재여부를 결정한다.

제 4항: 위원은 전·현 간행 위원으로 7명 내외로 구성한다.

제 5항: 필요에 따라 위원장, 부위원장의 요청으로 특별위원을 선임 할 수 있다.

제 9조(게재 판정)

제 1항: 게재판정에는 위원장 또는 부위원장을 포함한 2/3이상의 위원이 게재판정에 참여해야 한다.

제 2항: 게재 판정은 심사자의 2/3 이상의 합의를 원칙으로 한다.

제 3항: 2/3 이상 의견이 합치되는 않을 때에는 위원장과 부위원장의 판정에 따른다.

제 4항: 게재판정 위원회의 판정을 거친 논문은 다시 게재여부를 판정하지 않는다.

제 5항: 게재판정 위원회의 회의 결과는 문서로 남긴다.

국내 상황을 대표하는 다기관 논문?

Promotion

E-mail을 통한 저널 홍보

- Table of content
- New article alerts
- ESCI 등재, 최근 Impact factor 등 주요 사항을 주기적으로 홍보

The screenshot shows the homepage of the journal *Clinical and Molecular Hepatology* (CMH). At the top left is the CMH logo. To the right, it displays 'OPEN ACCESS' with a logo, pISSN: 2287-2728, eISSN: 2287-285X, and a QR code. Below this, it states 'Volume 24(3); September 2018' and provides the website URL 'http://www.e-cmh.org'. A list of links is provided: 'Current Issue', 'About the Journal', 'Editorial Board', 'Instructions for Authors', and 'e-Submission'. A 'Dear' section follows, stating that the September 2018 issue has been published. Below this is a 'Table of Contents' section with two entries under 'Reviews':
169 2017 KASL clinical practice guidelines management of hepatitis C: Treatment of chronic hepatitis C. DOI: <https://doi.org/10.3350/cmh.2018.1004>. Buttons for Full text, PubReader, eBook(ePub), and PDF are shown.
230 KASL clinical practice guidelines for liver cirrhosis: Ascites and related complications. DOI: <https://doi.org/10.3350/cmh.2018.1005>. Buttons for Full text, PubReader, eBook(ePub), and PDF are shown.

Dear

We are pleased to inform you that this newly accepted article is now available on epub ahead-of-print.

Accepted Articles

Ahead-of Print: <https://www.e-cmh.org/articles/print.php>

Original Article

Interferon-free treatment for hepatitis C virus infection induces normalization of extrahepatic type I interferon signaling

Pil Soo Sung, Eun Byul Lee, Dong Jun Park, Angelo Lozada, Jeong Won Jang, Si Hyun Bae, Jong Young Choi, Seung Kew Yoon

Received December 1, 2017 Accepted January 19, 2018 Published online March 12, 2018

<https://doi.org/10.3350/cmh.2017.0074>

[Epub ahead of print]

[Full text](#) [PubReader](#) [eBook\(ePub\)](#) [CrossRef - TDM](#) [PDF](#)

Evolution of glomerular filtration rates and neutrophil gelatinase-associated lipocalin during treatment with direct acting antivirals

Alessio Strazzulla, Giuseppe Coppolino, Giorgio Settimo Barreca, Innocenza Gentile, Laura Rivoli, Maria Concetta Postorino, Maria Mazzitelli, Giuseppe Greco, Chiara Costa, Vincenzo Pisani, Nadia Marascio, Mariadelina Simeoni, Alfredo Focà, Giorgio Fuiano, Daniela Foti, Elio Gulletta, Carlo Torti

Received October 17, 2017 Accepted January 9, 2018 Published online April 24, 2018

<https://doi.org/10.3350/cmh.2017.0059>

[Epub ahead of print]

[PDF](#)

Liver week 에서 저널 홍보

- Liver week 2018 부터 시작

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Year	Impact Factor
2014	0.82
2015	1.11
2016	1.55
2017	2.75

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Year	Impact Factor
2014	0.82
2015	1.11
2016	1.55
2017	2.75
2018	4.36

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