

Celebrating a decade of the *Journal for ImmunoTherapy of Cancer*

Pedro J Romero,¹ James L Gulley ,² Patrick Hwu,³ Mary Dean,⁴ Samuel Million-Weaver⁴

To cite: Romero PJ, Gulley JL, Hwu P, et al. Celebrating a decade of the *Journal for ImmunoTherapy of Cancer*. *Journal for ImmunoTherapy of Cancer* 2022;**10**:e005207. doi:10.1136/jitc-2022-005207

Accepted 05 May 2022

The year 2022 marks an important milestone for the *Journal for ImmunoTherapy of Cancer (JITC)* as the journal's 10th anniversary. Similar to the immunotherapy field as a whole, *JITC* has experienced tremendous evolution and growth over the past decade. This editorial looks back over the journal's history as we look forward to many more years of offering high-quality research reports and supporting the advancement of the immunotherapy field.

Today, *JITC* is recognized throughout the world as one of the premier venues for fully open-access publication of immuno-oncology research as the official journal of the Society for Immunotherapy of Cancer (SITC). With 10 sections and nearly 100 volunteer editors, *JITC* covers a wide breadth of scope while maintaining high quality of publications. We are proud to publish across the entire translational research pipeline, from deep mechanistic basic tumor immunology to clinical practice guidelines.

Before *JITC*'s first issue in 2013, there were no broadly accessible publication platforms dedicated to advancing the science of tumor immunology and cancer immunotherapy. Ensuring that immunotherapy knowledge is freely accessible has always been a core value for SITC and *JITC*, which was one reason that the journal was launched as a joint venture with the open-access publisher BioMed Central.

Our first issue in May 2013 was comprised of just five articles across four sections: Basic Tumor Immunology, Clinical/Translational Cancer Immunotherapy, Immunotherapy Biomarkers, and Reviews/Editorials. The manuscripts included three original research articles, an introductory editorial that set the stage for the article you are reading right now, and a summary of SITC's 27th annual meeting, which highlighted successes in tumor-infiltrating lymphocyte-based adoptive cell therapy as well as preliminary results with anti-CD19 chimeric antigen receptor (CAR) T cells.

That first issue was the culmination of several years of discussion and research among SITC leadership and the society member base. *JITC* came into the world during a major paradigm shift in the history of immunotherapy. As our long-time readers recall, 2013 saw immunotherapy being named the 'Breakthrough of the Year' by *Science*,¹ followed shortly by the first Food and Drug Administration (FDA) approvals for anti-PD-1 checkpoint inhibitors in 2014 that ushered in a new era for our field.

In the 3 years after our first issue, *JITC* published an additional 212 papers. Some of those early articles remain among the top-cited papers in the journal, including the landmark 2014 original research article establishing a requirement for in situ CD8⁺ T cells for tumor rejection with dual checkpoint blockade.²

During those initial years, the checkpoint renaissance spurred an explosion of interest in the clinical aspects of immunotherapy. Although *JITC* continued to publish the essential basic and translational research on tumor–host interactions, the tumor micro-environment, animal models, and predictive and prognostic immune biomarkers that enable all human studies, the journal recognized the need for dedicated repositories for clinical science. The Case Reports and Clinical Trials Monitor sections were added in 2014 and 2015, respectively. As immunotherapy entered mainstream and routine clinical practice, the Guidelines and Consensus Statements Section was launched in 2016. Since then, 33 guidelines and position papers have appeared in *JITC*, supporting SITC's ongoing strategic priority to help establish standards in the field.

Throughout 2017 and throughout 2018, the journal and the immunotherapy field as a whole surpassed several important milestones. A total of 25 additional indications for anti-PD-(L)1s gained FDA approval in 2017, including the first tissue-agnostic approval for pembrolizumab for the treatment of tumors



© Author(s) (or their employer(s)) 2022. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ.

¹Ludwig Institute for Cancer Research, Epalinges, Switzerland

²NCI, National Institutes of Health, Bethesda, Maryland, USA

³Administration, Moffitt Cancer Center, Tampa, Florida, USA

⁴Society for Immunotherapy of Cancer, Milwaukee, Wisconsin, USA

Correspondence to

Dr Pedro J Romero;
pedro.romero@hospvd.ch

that are microsatellite instability high or mismatch repair deficient. That year also saw the approval of the first two CAR T cell therapies for the treatment of B cell malignancies. In 2018, the journal not only crossed the threshold of publishing more than 100 papers in a single year, but also was indexed for the first time in the Science Citation Index Expanded and received its first Impact Factor. During this time, *JITC* also published two timely series to synthesize trends and set the stage for future research. The series were focused on Microbial-Based Cancer Immunotherapy³ and Emerging Immunotherapeutic Agents.⁴

The checkpoint inhibitor renaissance also emphasized some of our field's enduring challenges. As more and more patients were treated with immunotherapy in the standard of care setting, the heterogeneity and unpredictability of immune-related adverse events (irAEs) became apparent. Perhaps unsurprisingly, the 2017 consensus recommendations on management of irAEs from the SITC Toxicity Management Working Group⁵ went on to become the journal's most highly cited article of all time. Subsequent guidelines and manuscripts have further deepened our understanding of the pathophysiology and optimal management of irAEs, but this remains an active and important area of research with new advances being made every year.

Since 2019, *JITC* has experienced a period of exponential growth, publishing more papers in the past 3 years than in the previous 6 years combined, with 539 articles appearing in the journal in 2021 alone. *JITC* changed publishers in 2019,⁶ beginning a new partnership with the British Medical Journal that allowed for enhanced logistical and publishing experiences for authors, reviewers, and readers alike as well as innovative new opportunities to communicate results such as graphical and video abstracts. At the time of the publisher transition, the journal also added two new sections for original research in order to support research into the areas of Immune Cell Therapies and Immune Cell Engineering as well as Oncolytic and Local Immunotherapy.

During this period of dramatic growth for the journal, the immunotherapy field continued to see transformative evolution. Five new CAR T cell products became available to offer patients with hematologic malignancies unprecedented durable remissions. For solid tumors, checkpoint blockade gained indications in neoadjuvant and adjuvant settings and novel agents gained FDA approval including tebentafusp-tebn, the first bispecific T cell-redirecting protein designed to target gp100 consisting of an affinity-enhanced T cell receptor fused to an anti-CD3 T cell-engaging domain, as well as the anti-LAG-3 checkpoint inhibitor relatlimab. Much of the preclinical and early clinical data necessary for the clinical development of immune checkpoints beyond PD-1, including LAG-3, were authoritatively cataloged in *JITC*'s review series on the topic⁷ that ran throughout 2019 and 2020.

Any retelling of the journal's history would be incomplete without an acknowledgment of the event that

defined the 2020s, if not the century: the pandemic caused by the novel 2019 coronavirus (COVID-19). Always committed to open-access and rapid information sharing, *JITC* sprang into action early in the pandemic to ensure that high-quality information became available without delay by offering a fast-track online posting option for peer-reviewed COVID-19-related papers. The journal's COVID-19 and Cancer Immunotherapy Review series⁸ also offered a valuable resource, not only as a source for hypothesis generation for future basic and translational studies, but as initial guidance in clinical decision-making from leading voices in the immuno-oncology, infectious disease, and virology fields.

Looking back over the past 10 years, the journal owes a tremendous debt of gratitude to the community of readers, authors, editors, and volunteers who have contributed to making *JITC* what it is today. We are especially thankful for the efforts of the 2500+ unique individuals who have volunteered their time and insights as peer reviewers throughout the journal's lifetime.

Moving forward, *JITC* is committed to evolving with and cultivating the next generations of scientists and clinicians working in the immunotherapy field. All evidence indicates that the future is bright—the 2021 Best Paper Awards included substantially more early career and international authors than in previous years. The journal will continue to support early career scientists, including via a soon-to-launch peer review mentorship program. We are also excited to continue to engage with our readers and spread the word about the latest science. Our social media team has made @jitcancer an essential follow on Twitter and we are currently exploring outreach in China through WeChat. Finally, we are thrilled to continue supporting the advancement of our field. In the coming year, we are highlighting two exciting emerging trends with forthcoming review series focused on ctDNA and liquid biopsies as well as imaging and immunotherapy.

The future of cancer immunotherapy is rooted in research and *JITC* is dedicated to enriching communication and advancing scientific understanding for many years to come.

Twitter James L Gulley @gulleyj1, Patrick Hwu @PatrickHwuMD and Samuel Million-Weaver @millionweaver

Acknowledgements The authors wish to thank SITC staff including Andrea Kunz for research and editorial assistance as well as for service to *JITC* as the Journal Managing Editor. Additionally, the authors thank SITC for supporting the manuscript development.

Contributors All authors contributed to the conception and design of the work, writing, and critical review and editing during the manuscript development.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests PJR—consulting fees: MaxiVax, Enterome, Novigenix; contracted research: Roche pRED, Zurich. PH—consulting fees: Immatics, Dragonfly; ownership interest (less than 5%): Immatics, Dragonfly. JLG—nothing to disclose. MD—nothing to disclose. SMW—shares owned (less than 5%): Editas Medicine, Pacific Biosciences of California.

Patient consent for publication Not required.

Ethics approval Not applicable.

Provenance and peer review Commissioned; internally peer reviewed.

Open access This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See <http://creativecommons.org/licenses/by-nc/4.0/>.

ORCID iD

James L Gulley <http://orcid.org/0000-0002-6569-2912>

REFERENCES

- 1 Couzin-Frankel J. Breakthrough of the year 2013. cancer immunotherapy. *Science* 2013;342:1432–3.
- 2 Spranger S, Koblish HK, Horton B, *et al*. Mechanism of tumor rejection with doublets of CTLA-4, PD-1/PD-L1, or IDO blockade involves restored IL-2 production and proliferation of CD8(+) T cells directly within the tumor microenvironment. *J Immunother Cancer* 2014;2:3.
- 3 Microbial-Based cancer immunotherapy, 2018. Available: https://jitc.bmj.com/pages/collections/microbial_based_cancer_immunotherapy/
- 4 Emerging immunotherapeutic agents, 2018. Available: https://jitc.bmj.com/pages/collections/emerging_immunotherapeutic_agents/
- 5 Puzanov I, Diab A, Abdallah K, *et al*. Managing toxicities associated with immune checkpoint inhibitors: consensus recommendations from the Society for immunotherapy of cancer (SITC) toxicity management Working group. *J Immunother Cancer* 2017;5:95.
- 6 Romero P. Moving cancer immunotherapy forward through the *Journal for ImmunoTherapy of Cancer (JITC)*. *J Immunother Cancer* 2020;8:e000001.
- 7 Immune checkpoints beyond PD-1 series, 2020. Available: https://jitc.bmj.com/pages/collections/immune_checkpoint_series/
- 8 Goldman JD, Ascierto PA. Perspectives on COVID-19 and cancer immunotherapy: a review series. *J Immunother Cancer* 2021;9:e002489.