The relevance of orthodontic articles

In recent years, orthodontic treatment has become extremely common among and accessible to a wide patient base. In 1997, the World Federation of Orthodontists commissioned a study of its affiliated organizations for the purpose of gathering information about the global orthodontic community. The countries surveyed covered 54% of the world’s population, accounting for nearly 3.3 billion people. The number of orthodontists was 31,000. The highest ratios of orthodontists in relation to population (per 100,000 inhabitants) were found in North America, Central and South America, and Europe (1.4 to 2.6).¹

Today, with more than 70 accredited orthodontic postgraduate programs in the United States and Canada, 12 in the United Kingdom, and many more in Asia (in India, for example, about 300 new specialists in orthodontics graduate every year), there is a growing number of faculty members (lecturers and professors) at universities. The academic component for tenure and promotion compels these orthodontists to write articles to be published in Medline-indexed journals, preferably those with high impact factors. As a result, thousands of articles are submitted to orthodontic journals each year. Orthodontics receives about five new submissions each week, or approximately 260 articles per year (meaning that only one of every six submitted manuscripts will eventually be published).

Most of the articles are rejected, but many of those that are eventually published have very little clinical significance. In vitro research with poor statistics, clinical studies with minimal sample sizes, and conclusions that are not evidence-based are part of every journal. At the same time, journal subscription constantly decreases. In addition, the variety of free scientific and clinical information online threatens the profitability of printed journals that are not affiliated with professional societies or study clubs.

Our mission is to find a common denominator that will attract clinicians, researchers, and postgraduate students. We have a commitment to stay relevant, despite today’s tendency for instant messages and 140-character “tweets.” Evidence-based information is the essence of scientific and clinical articles. Even in countries where dental awareness is low, there is rising interest in evidence-based dentistry (EBD).² For EBD to become part of decision making in practice, the most current and comprehensive research findings must be translated into practice.³ We should focus on the take-home message rather than satisfying the deans of faculties who quantify the number of articles published as the essential requirement for academic promotion. Barriers for implementation of research into practice primarily include lack of interest, lack of involvement, lack of time, and lack of remuneration.⁴ As stated by David Turpin, the former editor of the American Journal of Orthodontics and Dentofacial Orthopedics, as journal editors, we have the tools and the responsibility to help readers identify the EBD approach in each article.⁵
Along with my associate editor, Marc Bernard Ackerman, we have divided the journal into 10 different sections, including the most innovative scientific research, daily clinical pearls, updated technology, patient management tips, interdisciplinary case presentations, and treatment planning challenges, where each orthodontist will find tips for more efficient and esthetic treatment results.

Our editorial board members, “The 10,” were carefully selected from all around the world. They have a variety of clinical and scientific backgrounds and are from private and university practices to ensure the relevance of Orthodontics to 21st century demands.

I do hope you will enjoy the new concept and encourage your feedback and submission of relevant articles. Together, we can make this journal an essential clinical tool for the contemporary, evidence-based orthodontist.

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REFERENCES