

Clinical research and observations – they do matter

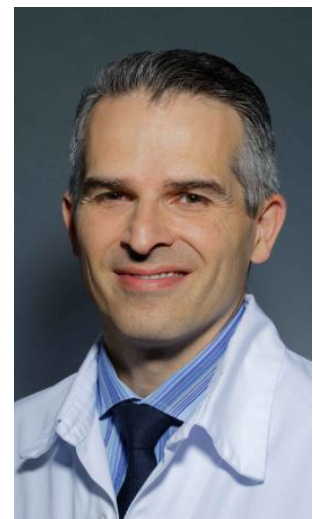
The new issue of Rhinology is full of articles focusing on clinical aspects and analysis of surgical and medical treatments we provide to our patients. It reflects an often neglected but crucial part of every physician's work, namely to inquire if what we do is good, helpful and sustainable ⁽¹⁾.

Open, unbiased reporting of clinical outcomes or particular observations has always been a cornerstone of academic exchange. It helps each of us, if we can look up what other colleagues have experienced when confronted to a tricky medical situation ⁽²⁾. However, in light of a rising fight for always increasing journal impact factors, case reports, series or retrospective analysis have had, and still have, difficulties getting published in a way they are seen by peers. Paradoxically, the journals impact factor does not seem to have any influence on the quality of the review ⁽³⁾, which is only partly surprising to me. When it comes to such a restricted field like rhinology, similar to many others in clinical medicine, the number of persons able to judge suitably the work of peers is limited, and their specialized clinical knowledge, or let's call it experience, matters ⁽⁴⁾. These experts are often amongst reviewers, readers and editors of very circumscribed fields, such as, rhinology is one ⁽⁵⁾. It is not a plea against evidence based, machine learning or artificial intelligence generated data, nor an attempt to reduce the impact of basic, mostly animal of molecular science. It is much more call to give clinical research and reporting the same attention. In the end, treatments need to be beneficial for our patients and that is only measurable in "real life" settings such as daily clinical trials as recently recalled by our editor in chief ⁽⁶⁾. It also underlines the professional and moral responsibility every expert has towards his field, the patients and the healthcare authorities to serve as guarantor to promote and support reasonable, beneficial and sustainable results ⁽⁷⁾.

The current issue comprises many clinically valuable articles

on olfactory impairment, a sensory disorder that is still not adequately addressed and requires further understanding ⁽⁸⁾. It ranges from surgical preservation of olfaction ⁽⁹⁾, long term outcomes in covid-19 patients and early detection of olfactory dysfunction. Interesting work is presented on chronic rhinosinusitis with new biotherapy data and healthcare cost examinations. Further, critical analysis of surgical outcomes is presented for lacrymal obstruction, chronic rhinosinusitis, orbital apex, neuroblastoma resection and operated cystic fibrosis patients. All these contributions are of remarkable quality and further strengthen our insight of how to care best for these patients. In a further attempt to give clinical, educational and practical medicine a platform, Rhinology has changed the scope of Rhinology Online (see rhinologyonline.org) to a journal accepting well documented and educationally valuable short contributions, we would warmly invite you to contribute to.

I wish you an enjoyable reading of this new issue.



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