

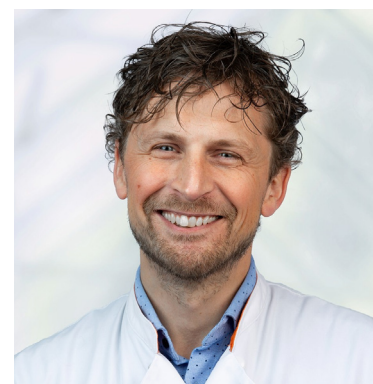
Letters in Rhinology

Recently, it struck me how our societies are increasingly occupied with (automated) written texts. It means words still matter, and so do their building blocks: letters. For this issue of *Rhinology*, I think the letter 'o' could be put as central denominator. You might wonder: "Y?". Well, first of all because the 'o' stands for 'olfaction'. In this issue we present some wonderful studies regarding olfaction, the loss of it (Engelhardt et al.), how to determine it (Hirose et al.), its impact (Lein et al.), and its recovery (Boscolo-Rizzo et al., Chao et al.) or its replacement (Weise et al.). Next, the 'o' is for 'obstruction' and how it might impact sleep quality (Verse et al.).

In a broader sense, 'o' is also for 'outcomes'. For example, predictors of outcomes of endoscopic sinus surgery for chronic rhinosinusitis with nasal polyps (CRSwNP), which was investigated by a large systematic review as a supplement to *Rhinology* (De Corso et al.). An important outcome in this disease is 'control' and we are happy to publish the validation of the CRS control test by EUFOREA (Conti et al.). It will be very interesting to see how it will further guide the field for this disease outcome, and how its data compare to other findings previously published in our journal ⁽¹⁻⁶⁾.

The letter 'o' also refers to 'others' and 'opinion'. In areas where evidence from studies is lacking (and maybe hard to obtain), we are trusting on expert opinion. A better way in these cases is to have a large group of key opinion leaders sharpen their own opinion and that of others to reach consensus. The current issue has two of these consensus statements: one on the position of surgery and/or biologics in patients with CRSwNP (De Corso et al.), and the other on the management of nasal septal perforations (Alobid et al.). Finally, the 'o' stands for oncology, as we also have two papers in this field (Liu et al. and Xu et al.).

Letters in *Rhinology* also means 'Letters to the Editor' in *Rhinology Journal*. It is an interesting option the journal provides. Recently, our editorial board had a discussion whether we should expand this section by the implementation of categories like 'Short communications', 'Research notes', 'Practical solutions' etc. We decided to keep our current format as it is flexible and can cover all of these. In fact, it is exactly what we see in every edition of our journal. For this issue, I would like to draw your attention to the Letter by Margulis et al. In this editorial I am playing around with words, letters, and meanings. Large language models have the same ability (to some extent) but only show poor performance when asked about common rhinologic conditions. It seems we still need doctors!



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