



EDITORIAL

The Need for an Original Think Tank to Discuss and Advance the Collaboration between Orthopaedic and Plastic Surgeons: Announcing the "International Journal of Orthoplastic Surgery"

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The standard of high quality health care has progressively become more important in recent years. This is due to a rise in patients' autonomy and to an increased awareness of their rights. Easy access to a wider range of information through the internet have contributed to a change in patients' expectations, decision making and knowledge. In response to the raising demand of high quality care, health professionals' leaders and managers are more focused on expanding services to meet the needs of patients, to improve efficiency and to minimise errors. Furthermore, scientific societies, medical associations and health communities routinely revise guidelines and protocols to provide evidence-based practise, to ultimately improve health care delivery and to continually develop our profession. The importance of effective team working, within the surgical team and wider multidisciplinary teams, has recently been highlighted in order to maintain patient safety, good surgical practice, team performances and high quality surgical services [1].

Therefore, in the last years several specialties have begun to collaborate to maximize efficiency and to enable multidisciplinary working for a comprehensive surgical treatment. Positive experience and good practise outcomes were reported by head and neck oncology teams composed of ENT surgeons, plastic surgeons, maxillofacial surgeons, radiotherapists, radiologists, and oncologists. Their multi-disciplinary approach allows for early, continual communication and meticulous operative planning [2, 3].

Another positive example of multidisciplinary collaboration is represented by breast reconstruction teams, where breast surgeons, plastic surgeons and

oncologists often work closely to treat breast cancer, restore form and contour with excellent results [4].

It has also been proposed that orthopaedic and plastic surgeons work collaboratively [1, 5]. Several departments are now organizing multidisciplinary meetings for both trauma and oncology, and developing joint operating lists and teams [5]. To define the new partnership and describe this innovative surgical approach between both disciplines, orthopaedic and plastic surgery, the term "orthoplastic surgery" was introduced [6].

The etymology of this original subject, is not only the combination of the names between two surgical disciplines but intrinsically contains itself the aims, scope, and range of action of our new specialty. The term Orthopædia was coined by the Frenchman Nicholas Andry, derived from the Greek words ὀρθός orthos ("correct", "straight") and παιδίον paidion ("child"), with the meaning to "teach several ways of preventing and correcting deformities in children". The field of orthopaedics then expanded to include the surgical and non-surgical treatment of both children and adults [7]. The meaning of "plastic surgery," derived from the Greek πλαστική (τέχνη), plastikē (tekhnē), "the art of modelling" of pliable surface. Hence, the term orthoplastic surgery means "correct deformities and remodel tissue". The intention of this innovative collaboration is to correct functional impairments caused by traumatic injuries, cancers, congenital anomalies, developmental abnormalities, infection and disease.

Through a combined approach the orthopaedic surgeon is responsible for the bony fixation and the soft tissue management around osseous structures, while the plastic surgeon is involved to recreate tissue integrity, to provide adequate tissue coverage, to preserve or restore functions and to have a reasonable aesthetic outcome [5, 6, 8, 9]. The complexity of orthoplastic surgical operations undertaken in hospitals requires a bigger and more sophisticated clinical workforce. The effective management and the successful collaboration between the two specialties through this innovative surgical approach, can save

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unnecessary or extra operations, reduce the risk of complications, optimize time, services and resources, bringing numerous benefits in term of cost-efficiency, quality of care and patient safety [10].

To develop this new large field, to collect ideas and projects from this vast scientific community, to spread the knowledge and to offer high quality solutions for our patients, we found it necessary to build a pioneering editorial project. We aim to be an original scientific think tank, where to merge innovative proposals, to discuss advanced techniques and technology, new ways of working and to encourage contributions by all members.

We will focus not only on the traditional surgical procedures of orthoplastic surgery, such as microsurgery or traumatology, but we will also explore evolving branches such as allotransplantation, robotic and regenerative surgery, applied to the orthoplastic field. We will publish original, peer-reviewed articles related to the diagnosis, treatment, and pathophysiology of diseases and conditions of the upper and lower extremities or chest and spine, including both clinical and basic science studies. We will also describe case reports because we are aware that orthoplastic treatments often represent a unique solution and require a different management to solve a complex case. Special features include clinical perspective articles, comprehensive review manuscripts, and surgical technique articles with a special section "How I do it" that provide an overview about technical aspects of orthoplastic surgery, active research fronts and current controversial topics.

We aim to not only be the link between different scientific communities, but also to involve and interact with a wide range of health workers, including specialist nurses, rehabilitation technicians and even patients. In fact, patients represent our main resource and the core objective of our daily work, so they have the right to be treated in the best manner by updated staff pushing high standards. As part of the information process, we have the priority to keep health professionals informed and updated in the most truthful way. Therefore, we encourage reflection and learning activities. Finally, all our papers will be published open access, so everyone globally can benefit from this knowledge and scholarly exchange. We hope you will join us in making the journal a success.

Competing Interests

The authors have no competing interests to declare.

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