

EDITORIAL

Orthoplastic Surgery – the Need for a Specialist Journal

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As surgery moves into the new millennium strides both big and small are being taken in all disciplines with gradual but positive impact on clinical outcomes. The foundations of all surgical specialties are securely imbedded in the both basic science as well as in clinical studies. Due to the broad nature of Plastic surgery and of Orthopaedic surgery surgical equipoise plays a major role in surgical technique. There are few level 1–2 studies that address controversial surgical topics in Plastic and Orthopaedic surgery. It will come as no surprise that for Ortho-Plastic surgery the evidence remains at level 3 and below. That said this makes for a very fertile area of surgical research.

It has been a personal mission of mine to promote Ortho-Plastic surgery in all the areas of clinical practice where it is appropriate both within the UK and abroad. Plastic and Orthopaedic surgeons remain at the forefront of those conditions where both form and function are compromised and *ipso facto* need surgical re-dress. This care is best delivered in a combined setting where the lines of communication are open and direct. To the un-initiated this may seem to be in acute trauma. However, Ortho-Plastic surgery is more than just that. Diabetic foot disease; prosthetic joint infection, deformity correction and bone infection are also part of the remit of such surgery. Within the United Kingdom (UK) we have only recently been organized enough to have major trauma centers (MTC's) and trauma networks. We have remained keen to have co-location of the two specialties enabling combined care of those vulnerable patients needing Ortho-Plastic surgery. This paradigm of care remains difficult to achieve in many nations but the blueprint is within the Ortho-Plastic centers within the UK. This model of care is easy to replicate even in austere settings as it depends upon the unwavering and selfless care delivered by skilled and dedicated individuals. Somewhat surprisingly this paradigm of care appears to be difficult to achieve in developed nations. This latter needs to be addressed and as a group of Ortho-Plastic surgeons the adoption of such high standards must be the new frontier in our discipline.

Even though Ortho-Plastic surgery has been recognized as a specialization within Plastic and Orthopaedic

surgery for over 25 years as detailed by Professor Levin in his editorial in this journal the propagation of ideas and research have only now found a common place. The topics relevant to Ortho-Plastic surgery are relevant across borders, age and gender. Having a journal like this one, the International Journal of Orthoplastic Surgery (IJOPS) is the advance that our sub-specialty needs. Whether one or two similarly scoped journals are necessary will be determined with time, however, I feel there are enough clinical questions waiting to be answered that high quality original research coupled with select editorials and review articles will make for an excellent contribution to our understanding of Orthoplastic conditions and thus advance the subspecialty. This journal even in its infancy has been a bold statement by those of us (and there are many) who have committed to its success. The editorial board is composed of those individuals who have a proven track record in advancing both technique and understanding of Ortho-Plastic conditions. In professor Levin's editorial he expresses concern about the existence of two journals on Ortho-Plastics. This editor welcomes both journals as I feel this would allow a widened debate on many topics and strengthens the sub-specialization of Ortho-Plastic surgery. This will mean that like-minded individuals are attracted to our exciting specialty. There remains a string of affiliations between surgeons and all those who contribute to the propagation and improvement of microsurgery training. Almost all nations have learned societies with either separate or specialist groups which represents this surgical discipline. IJOPS has a strong link with the American Microsurgical Orthoplastic Society (AMOS). This link will remain strong and help with dissemination of new articles and any new knowledge. The ethos of both AMOS and IJOPS are aligned and although made up of differing groups of clinicians and practitioners both remain committed to excellence in clinical care and education.

I would like to finish this editorial by urging all who have exposure to clinical cases or have a research interest in Ortho-Plastic surgery to submit to IJOPS since this is the only way to allow growth in the interest of our specialty.

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Author Contribution

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Guarantor

Umraz Khan is the guarantor.

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