

The Desideratum for Research

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Editorial

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Editorial

“Research is to see what everybody else has seen and think what nobody has thought”

-Albert Szent-Györgyi

Research as per dictionary is the “systemic investigation into and study of materials and sources in order to establish facts and reach new conclusions”. Earlier books and journals were the sole sources available for information but now in the present age of information technology, obtaining and processing the information hasn’t been easier. The pertinent question is if this prodigious amount of information is relevant, accurate, authentic and up to date. Fortunately, in dental sciences we still depend on scientific journals and textbooks.

However, the recent system of rewarding academics for publishing has led to a “publish or perish” phenomenon and coupled with mushrooming of many open access academic ‘predatory’ journals publishing research papers with lax or non-existent peer review have added a plethora of inferior quality research papers. This free open exponential low quality scientific publications threaten the credibility of science and evidence-based approach.

It needs to be realized that all this available information in print and online cannot be relied upon as

at times there is limited supporting evidence and questionable applicability to dental practice. Every dental practitioner should weigh the available research evidence and follow the well-established PICO process. This is critical as dental practitioners are always on lookout for new interventions and research for deliverance of improved dental care. The patients also utilize this available information to comprehend their dental issues and the treatment modalities available for them.

The obligation for publishing authentic research rests on a fortiori editorial team and the reviewers, despite that it is also imperative that the reader understands the limitations of research and comprehends it based on levels of evidence i.e. Randomized controlled trial (RCT) and its Meta analysis being top level 1 evidence, followed by cohort studies, case control studies, case series and finally case report, expert opinion and personal opinions forming the lowest level 5 evidence.

With recent changes being made by the journal in the editorial team and the peer reviewing process, I am sure in the coming years this OAJDS journal will perform a substantial role in providing authentic quality original publications. This will in turn lead to increase of credible scientific knowledge culminating in enhanced and better patient care.

