

The long road to evidence-based traumatology

EDITORIAL

Probably all of us feel overwhelmed by the volume of literature but review articles can help us to get an overview of a field. High-quality systematic reviews can define the boundaries of what is known and what is not known and can help us to keep updated on what has been proven. Despite a rapid expansion in systematic reviews in medicine and dentistry in the past decade, the coverage of trauma topics by systematic reviews is still limited. *Dental Traumatology* welcomes systematic reviews and articles on evidence-based traumatology and we have recently published a couple of such articles and in this issue we present more such important articles. Researchers have very much use of the systematic reviews by summarizing existing data and help define future fields of research. Clinicians should also take advantage of what systematic reviews can offer. Although systematic reviews can never fully replace sound clinical reasoning they can sometimes aid the clinician in applying the current best treatment. What is obvious from systematic reviews in dental traumatology is that there are very few clinical studies in the literature to base the systematic reviews on and many of these

studies have few observations. So we still have a long way to go to evidence-based traumatology and there is a need for more comprehensive clinical studies. All of us must carefully document what we do in order to be able to collect high quality data for future materials to be reported and pooled through systematic reviews. And the real big step forward in evidence-based traumatology will be the day when we will have a centralized database where trauma data can be delivered and from which clinicians interactively can have access to guidance of the current best evidence-based treatment given the specific factors for the individual case. But actually that day may not be so far away, since there is already a group of researchers in Copenhagen, supported by IADT, who have developed such a database with pooled trauma data from different centres. We hope to come back with more information on this in a coming issue.

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