

EDITORIAL

In this issue of *Oral Diseases* we start a new feature: commentaries and reviews on contemporary issues, broadly relevant to the understanding, diagnosis and/or management of oral diseases, written by senior academic physicians. This new endeavor is begun out of our personal commitment, and that of the publishers, to enhance interactions, communications and cooperation between academic dentists and academic physicians. *Oral Diseases* has its roots from within dentistry, begun by individuals in a relatively small specialty of oral medicine. However, the journal has a focus on disorders of the head and the neck, which cross a clear professional boundary (that of dentistry and medicine), as well as lesser boundaries between specialties within these two professions.

Our goal, since we assumed the positions of co-Editors of *Oral Diseases*, has been to drive the journal, oral medicine specialists, and relevant medical specialties, toward more substantive interactions. Having taken this proactive editorial stance, we are trying to foster increased attention to the care for and the management of patients with oral diseases, who often shuttle between various clinicians in dentistry and medicine. *Oral Diseases* is trying to provide a high-quality forum for addressing biologic and clinical issues linked by an anatomic locale, and in doing so, facilitate improved care for these patients.

In beginning this new feature, we have invited 10 internationally acclaimed academic physicians representing different disciplines that we view as generally important to managing various oral diseases and conditions, e.g., endocrinology, gastroenterology, neurology,

ophthalmology, otolaryngology, rheumatology and surgery. We made a request to each one of them to write on a specific issue in the subject in which they are expert, and which would be of significant interest and considerable importance to oral medicine. We, and *Oral Diseases*, were quite fortunate that so many of these prominent and busy senior academic physicians agreed to our request. The topics are wide ranging but we view them as a beginning; it is our intent that these commentaries and reviews will become a permanent feature of *Oral Diseases*. Specifically, we believe that this feature will provide a small, but a substantive step, toward achieving our goal and lead to more integrated approaches to managing of oral conditions in reference to systemic implications, as well as the reciprocal. Indeed, we expect that the senior academic physicians and their colleagues who author these articles will recognize significant and relevant oral concerns for their specialties.

We certainly hope our readers will find this new feature of *Oral Diseases* to be extremely valuable. We welcome their comments on it, and we urge upon them to consider helping it by suggesting appropriate future topics and internationally recognized individuals who could be authors. From the standpoint of a patient with an oral disease, professional and specialty boundaries are, of course, irrelevant; he or she is simply looking for help. While these boundaries are not artificial, there is no need for them to be impenetrable. Maybe, these reviews and commentaries will create some kind of practical and intellectual permeability.

Bruce Baum
Crispian Scully

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