



Case reports

Over 2 years ago, in one of my first editorials (QI 3 2009), I addressed the role of case reports, case series, and clinical research in the development of dentistry and oral health. In this editorial, I would like to address the issue of case reports once again, since we encounter a large number of such cases submitted every month.

First of all, it is crucial to note that case reports are both welcomed and appreciated at *Quintessence International*, and we gladly publish interesting ones. Their acceptance rate, however, is still rather limited, frustrating many authors and making them wonder what made one case acceptable and another not. There is no doubt that a well-written report that describes and documents a treatment outcome or a unique condition can be a wonderful source of information. Generating a formula that will predict the decisions of the reviewers and editors is impossible, though I will attempt to put the issue into perspective.

Many cases submitted to *QI* demonstrate an excellent standard of care with outstanding outcomes; however, some cases do not provide new knowledge to the existing literature. We will not usually publish a case unless it is in some way innovative or sends an important message to the dental community. On the other hand, very rare cases might not be that interesting to most of our readers and therefore inappropriate for *QI*.

For a case to be published, it must have something extra—an unprecedented, enticing component. This component can be a new method; a new use for an existing, well-proven method; or a new perspective of looking at pathologies, treatment plans, or outcomes.

Still, not every case that can serve as excellent didactic material is publishable. Prior to submission, or even prior to writing the case, authors can conduct an intensive search of the literature to see if similar cases have already been published. This is the method we most commonly employ, which is the reason that reports that provide facts similar to those of previous works are usually not accepted for publication.

A case report can clarify a topic, a novel technique, or pathology, but it cannot provide a conclusion. It may spawn the first steps toward a conclusion, but may never be the final phase of the processes. Such a report can definitely encourage conducting controlled studies and possibly lead to real innovative conclusions. The process may be spurred by a case, but cannot be concluded by one.

Though we believe that case reports are important for the dental profession, we will try to publish only appropriate cases that benefit our readers.

Nonetheless, we are aware of the fact that our review system is not perfect and that we may sometimes overlook an important case; therefore, we are always open to reevaluation of rejected cases.

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