In an ideal world, research in general, and dental research in particular, would answer all of the questions a clinician would formulate in order to better treat the final beneficiary of the research itself, the patient. Our journal has been designed from the very beginning to consider foremost the patient. In order to achieve this, several groups of researchers were invited to form part of the journal board, each group being represented by a clinician, whom I would call the “clinical soul” of the group.

However, clinical protocols alone can be interpreted in many different ways, even incorrectly, if not approached with the requisite background knowledge. In order to be able to yield a scientifically meaningful answer, clinical protocols must be validated under the supervision of highly trained researchers. For this reason, all of the groups that joined the journal constitute also an “analytic soul,” in order to establish the methodology, lead the clinical study and interpret the results.

The two components of research, which I would call the two “souls of research,” are linked to one another. Underestimating the importance of one of these two components, one of these two souls, or leaving one of them out would lead to an impoverishment of the value and benefit of any research results and therefore to the established goal remaining unfulfilled.

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