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# **IJID Regions**

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# Editorial The roots of infectious disease science





The **IJID Regions** is inaugurated as a sister journal of the International Journal of Infectious Diseases (IJID), a quarter-century after the latter's first publication [1]. Currently, a plethora of periodicals is in existence for disseminating new knowledge on infectious diseases, many of which carry an international perspective. So, why another journal?

The global burden of infections has remained high. The current COVID-19 pandemic is a perfect example of the diverse spectrum of the required research work. COVID-19 aside, six infectious diseases were among the top ten causes of DALYs in children younger than 10 years in 2019 [2]. Neglected tropical diseases are often overlooked, which called for innovative strategy and international partnership to contribute to effective control [3]. The global distribution of infectious diseases is hardly homogeneous. In a review in the WHO Africa region, fourty-one countries had at least one epidemic between 2016 and 2018 [4]. Emergence of infectious diseases occurs in a neighbourhood, a village/city or a country where local responses follow immediately. Research at a regional level provides early information and generates new knowledge, which is of useful reference to another locality within our global village. IJID Regions provides this platform for enhancing visibility of regional research with a focus on those infectious diseases that are common in under-resourced countries and settings, as well as novel national and regional studies in conditions that have not yet gone worldwide. Our regionally-focussed journal will serve as a valuable learning hub for infectious diseases and would inform public health professionals.

As stated on our website, **IJID Regions** "....aims to publish highquality, evidence-based infectious disease science of regional interest and relevance." **IJID Regions** brings readers to where infectious diseases emerge, how scientific explorations begin, what factors impact an infectious disease at the clinical and population level. Publications of **IJID Regions** will be highlighting the perspective of a local region where an infection is investigated, in a clinical and/or public health context.

Following a soft-launching in July 2021, **IJID Regions** now presents its first issue comprising 26 articles – 3 reviews, 3 short communications and 20 full manuscripts. This initial set of research outputs covers a wide range of infectious disease conditions. As the COVID-19 pandemic is far from over, it is not surprising that SARS-CoV-2 related research accounts for some 40% of all initial published work. Other subjects include TB, fungal infections, antimicrobial resistance, dengue, respiratory viruses, HPV, meningococcal meningitis.... the epidemic growth of each of which is continuing. The authors of these studies come from Asia, the Middle East and Africa. **IJID Regions** welcomes the submission of articles from any region of the world.

Like IJID, the scope of **IJID Regions** is clinical infectious diseases. **IJID Regions** focuses on the publication of original clinical, laboratory-

## based and epidemiologic research, clinical trials as well as systematic reviews on any infectious disease from any region. Scientific rigour and compliance with ethical standards are the basic requirement in the assessment of the eligibility of a submitted work for publication.

What manuscripts are most appropriate for publication in **IJID Regions**? They should be regional studies that, in retrospect, would be well-cited and referenced by future researchers for improving clinical practice, contributing to public health infectious disease control, and designing related or expanded research for advancing science. In other words, they are the roots that would contribute to building the foundation of infectious disease science.

## **Declaration of Competing Interest**

The authors declare that they have no conflict of interest.

## Contribitions

SSL and EP conceptualised the write-up. LB, LK, SA contributed ideas on the theme and framework. SSL wrote the first draft. CO, TP, RY, AA reviewed the manuscripts. All approved the final version.

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