

Editorial

South Africa has always been a popular destination for Flemish trainees for both their pre- and post graduate medical training. It is particularly attractive for O&G trainees for a number of reasons: a long tradition of high standards of teaching, an enormous amount of pathology, and not least a world of opportunities to develop ones skills and ideas. Many of us who were fortunate to taste the South African way-of-doing-things cherish the memories of their great teachers. Professor Robert “Bob” Pattinson is one of those role models. His motto was “to lead by example” and indeed many Flemish gynaecologists who worked with him appreciate his leadership, loyalty and perseverance.

As a former founding member I am pleased to see that the Medical Research Council Unit in Maternal and Infant Health Care Strategies Unit of which Professor Pattinson is director, is introduced to the readership of Facts, Views & Vision in ObGyn. This is the first in a series where research units, special interest and advocacy groups, in short organizations with a vision and mission statement towards the improvement of women’s health, are offered a stage in this Journal to present themselves to the international scientific world of Obstetrics and Gynaecology. We feel that this initiative could facilitate networking and partnerships to step up the efficiency and relevance of future research in this domain. The two original reports accompanying the presentation of the MRC unit hallmark the kind of health system research that is performed. This is recommended literature for those who want to find out more about audit, near misses, avoidable factors and implementation of effective care. On the same note and again in search of effective care we draw attention to a very interesting structured review by Jan Bosteels and co-workers in this issue of FV&V. While audit systems are able to identify avoidable factors as a way to improve care, systematic reviews, such as the one presented here on reproductive surgery in the treatment of female infertility, are in search of the evidence – or even more important – the lack of evidence of efficacy. The lack of results from research of adequate quality to support what we consider common clinical practice should remind us of one of the pillars of medical ethics: “first, do no harm” (*primum non nocere*).

Further in this issue we find another feature of FV&V with a PhD thesis summary by Van Calsteren *et al.* on the effects of chemotherapy given during pregnancy. This international multicenter study which is still ongoing caused a paradigm shift in the perception of chemotherapy as an “a priori” teratogenous substance to be avoided at all cost during pregnancy into a drug that can be given safely during pregnancy in the interest of mother and unborn infant.

Lots of interesting stuff to read during the coming festive season I would say. On behalf of the editors, the editorial board and the publisher of FV&V, we would like to thank all the authors and referees who have been contributing to the journal in its first two years and wish them and their families a prosperous New Year. Cheers.

Eric de Jonge
Member Editorial Board