Credibility? You Had Better Believe It!

Not Condensed Books; not Reader’s Digest; and not a Kodak Moment—Since these are depictions of what your Journal is not—then what constitutes the goals and their actualization within this quarterly international publication?

The global nature of both implant dentistry and Implant Dentistry mandates that articles not only be disseminated worldwide, but that they also be accumulated worldwide. The very nature of the readership of Implant Dentistry comprises its vast international constituency, (Editorial by Roland Meffert, 1999;8:23–24). And just as noteworthy and just as important is the array of manuscripts that are submitted for possible publication. Naturally, the articles are accepted according to their quality of content. They are representative of what is happening in implant dentistry in various countries. Readers are exposed to ideas, concepts and techniques that warrant the response, “. . . so that is what is taking place in South America, or in the Far East, or in Europe, or in North America, or . . . ” There are diligent researchers and clinicians whose language barriers are broken-down by the commonality of interest in implant dentistry. In accordance with this realization, the editors of your Journal are pleased to modify, rectify, or otherwise engage the difficulty encountered by the contributors in the usage of the English language. The idea is to share the common interests within our profession. Accommodation and multilanguage abstract translations contribute to the distinctive character of Implant Dentistry.

Then there is the subject of manuscript length. Aside from constraints of “too much,” articles are not condensed and or abridged to fit into a strait-jacket. Otherwise there would be more articles in any issue; but each would then suffer the deficiencies of not having given the author(s) sufficient space to discuss, amplify, or display his/her wares.

After all, the contributor deserves to be heard, and the reader deserves to be informed.

Now, talking about wares, Implant Dentistry is not a show-and-tell vehicle. Photos and slides are not retouched. If saliva is present, so be it. If some extraneous perioral tissues are displaced, so be it. If there is a redness of soft tissues rather than stippled pink, so be it. If there is blood that clouds some of the site, so be it. These are all clinical realities. Why mask them? Why should we display only the perfect moment of having taken a clinical photo? No, we do not color enhance nor airbrush. The photos displayed may vary in quality; but so do clinicians and their photographic skills.

Also, there is the subject of product-related articles. Herein lies the most difficult selective/exposure arena. We need to be exposed to products and product evaluations. All such exposures should not be confined to manufacturers’ brochures and marketing hype. Your Journal contains reports of products when presented in thoughtfully conceived manuscripts. Although some authors may have a financial or promotional interest in the products being discussed, at least the reader is being notified of “what is out there.” Publishing an article of product-related content does not constitute endorsement by the Journal or its parent organization. But rather inclusion affirms that the materials are worth knowing about.

Indeed, Implant Dentistry is inclusive rather than exclusive. Articles, although edited, are not gutted. The diligent works of basic science and clinical researchers are placed front and center. The reader need not wonder about the authenticity of colors and contrasts of figures within articles. There is no hidden agenda, merely a search for information sharing.

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