

Special Edition  
"Advancements and Management  
of Reproductive Disorders"

## Editorial

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# Special Edition on Advancements and Management of Reproductive Disorders

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"Every great advance in science has issued from a new audacity of imagination" – John Dewey, *the Quest for Certainty*, 1929.

There are times when limited health care facilities and lack of excellent equipment result in slower recovery and delayed treatment of a disease thus leaving patients suffer for longer duration. We often innovate to acquire the best outcomes from the resources we possess. Innovative practices become valuable tools for clinicians, surgeons, and scientists. Discovery of novel approaches and better management practices enable us to adopt better line of treatment and consequently to make patients feel better. This can be exemplified by the historic remarkable work of Edward Jenner whose strategy of inoculating, with the matter from small-pox lesions, and curing the boy was an innovative contribution to immunization which led to eradication of small pox. His great idea became basis of immunization and thus a foundation of immunology.<sup>1</sup>

The process of investigation of complex and multifactorial diseases is closely associated with on-bench research and its applied version in clinics. For instance, endometriosis is an enigmatic gynecologic disease of reproductive aged-women. In addition to chronic pelvic pain and dysmenorrhoea, patients often present to their physicians with other associated symptoms, including dyspareunia, dyschezia, dysuria and infertility. Due to these symptoms endometriosis is a highly debilitating disease. Treatment options for endometriosis patients are limited to surgery, hormone therapy and analgesics.<sup>2,3</sup> Since the disease is associated with infertility, surgeons and endocrinologists track the disease-progress in patients based on prescribed case-specific combination of hormones such as estrogen and progesterone etc. Patients, who undergo *in vitro* fertilization (IVF) to become pregnant, are monitored to evaluate the success rate of pregnancy establishment. Therefore, strategies may vary from case to case depending upon the nature of severity of the endometriotic lesions and factors such as age, heredity, number of parities, etc. These case-based approaches become criteria of clinical endometriosis-research conducted in laboratories to explore and determine molecular mechanisms of pathogenesis and develop and set a proof of principle. Hence, clinical handling of the disease and on bench scientific research, are interrelated and equally contribute to develop strategies for better management of a disease.

"The good physician treats the disease; the great physician treats the patient who has the disease" – William Osler.

Our long-term goal is to comfort a patient. Similar to other clinical science-fields, in gynecology and obstetrics, we observe patients presenting with challenging incidences that require prompt attention of clinicians. Sometimes, crucial etiologic issues exist remotely and do not coexist with primary lesions. Adept surgeons strive to manage, control, and treat such cases by excavating and treating remote causes. Reports of cases detailing procedures of this type help clinicians to take into consideration, the pathophysiology of distant organs and its association with the disease in question. Therefore, case stories of this nature in a special edition inspire patients to dictate a complete history to clinical personnel which facilitates diagnosis

and subsequent therapy and recovery.

Sharing of surgical outcomes with scientific world *via* case reports, case series, challenges etc. leads to a better understanding of the clinical methods adopted to cure a disease and development of newer strategies for novel therapies. In addition to successes, these reports also reveal any misdiagnoses, presumptive and differential diagnoses which led surgeons to develop a confirmatory diagnosis and treatment thereof. These reports are, thus, an immense learning tool to other clinicians, surgeons, researchers and patients. Albeit from different areas of science, they focus on one message to the scientific community which is an innovative technique or procedure that made a difference in the betterment of patient's health.

It is a great pleasure to unveil collection of challenging cases and reports, and share the significance of clinical work performed by our brilliant surgeons, clinicians and scientists through this special edition. Addition of their work to this edition will expound novelties in handling a disease and advance the field to pursue a better management of obstetrical and gynecological problems. While working as research fellow on the reproductive immunologic projects at Brigham and Women's Hospital and Boston Center for Endometriosis, Harvard Medical School, Boston, I acquired profound exposure to research climate. This is honor to serve as an editor for this special edition. I believe that my experiences will enable me to successfully accomplish this responsibility as a reviewer and as a team we contribute to advancement of science.

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