Symposium: The Hip From Childhood to Adolescence

Editorial Comment: The Hip From Childhood to Adolescence

Pablo Castañeda MD

While scientists and researchers often feel pressure to produce transformative research, we must appreciate that quality research is hard to come by. Knowledge and understanding of any condition, technique, or procedure is improved through the accumulation of many observations. Instead of swinging for the fences, we should try and build on previous researchers' findings, resulting in higher-quality research and more-sophisticated knowledge on any given subject.

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P. Castañeda MD (✉)
American British Cowdray Medical
Center, Av. Carlos Graef 154 Office 405,
Santa Fe, 05300 Mexico City, Mexico
e-mail: pablocastaneda@me.com

Sir Isaac Newton once wrote, “If I have seen further than others, it is by standing upon the shoulders of giants.” Newton recognized that he was able to discover more about the universe than his predecessors because he was working in the light of discoveries made by fellow scientists. It is a fine sentiment, and knowing that it came from Newton—a scientific giant, if ever there was one—makes it all the more meaningful. The quote provides a model of humility that scientists today would do well to emulate. Few papers are truly groundbreaking, but the great benefit of a Symposium like the current one, which focuses on improving the lives of children and adolescents with hip dysplasia, is that readers can see how a number of more-modest discoveries fit together into a coherent whole that—in aggregate—advances our knowledge in meaningful ways.

Hip dysplasia is a perfect example of a subject that has garnered enormous interest from physicians through the years. Despite its frequency and importance, there have been few paradigm-shifting studies on this topic. However, this symposium was designed with great intention, bringing international perspectives to bear on specific, important clinical questions. Each paper is oriented around several

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key practice dilemmas: (1) “What factors are related to worse outcomes?” (2) “How do certain procedures influence the rate of osteonecrosis or residual dysplasia?” (3) “Does age as an independent variable have any influence on results with orthotic treatment?”

The aphorism, “Perfect is the enemy of good,” can be traced back to Voltaire and was later built upon by Shakespeare, whose character, the Duke of Albany in the tragedy *King Lear* warned of “striving to better, oft we mar what’s well.” This quote is often heard in surgical settings, but as

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researchers investigating in an imperfect science, we must strive for perfection for it is the only way to improve on our understanding. The

task, however, will never be completely “done” and we will continue to question ourselves (and others) in our cult of the imperfect.

It is said of great research that any question should lead to at least two other questions being asked; I believe that is the case with this symposium.