EDITORIAL

Editorial

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The fifth monographic issue of Musculoskeletal Surgery edited by the Italian Society of Shoulder and Elbow Surgery exhibits a further progress in contents and in quality.

This fact witnesses the growing engagement in study, in research, and in the diffusion of scientific information in the field of shoulder and elbow pathology that marks the activity of our Society.

The articles written by our Members are the vast majority, but we have also received some papers from abroad, and this indicates that the appeal of increasing quality is becoming more and more appreciated even outside our country. This aspect runs parallel with an increase in the impact factor. These observations should encourage all of us to progress in our path of refinement of our ability to write and publish studies demonstrating the good job that is being done in our Italian Community of Shoulder and Elbow Surgeons.

The activity of our Society is growing in other directions too, always aiming primarily at stimulating the scientific spirit of our conduct, as well as the active interaction of all the Members who are interested in this path.

The Research Committee of SICSeG, headed in these 2 years by Dr. Paolo Paladini, has tried for the first time since its creation to conduct an observational study that could involve all the Members of the Society who are willing to share their experiences. With this goal, three protocols concerning different topics of shoulder pathology have undergone a statistical and feasibility evaluation. The first topic is the conservative treatment of rotator cuff lesions, the second one deals with the long-term follow-up

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Shoulder and Elbow Surgery Unit, Istituto Clinico Humanitas, Rozzano, Milan, Italy e-mail: alex.castagna@tin.it of patients having their first shoulder instability episode, and the third one with the results of arthroscopical treatment of the rotator cuff followed by different rehabilitation treatments. The latter of these projects has immediately proved to be the one with higher risks, due to the strong variability of lesion type, of doctors providing care and of type of treatments. The conservative treatment of rotator cuff lesions is definitely easier, but it should also take into consideration the variable chances that a patient has in the various parts of Italy to meet expert shoulder surgeons able to offer him an adequate surgical repair of his tendons. The third project about conservative treatment of the first episode of shoulder instability appears to be an easier task, both on the view point of enrollment of the patients-each subject should be enrolled during the first visit for an instability accident-and for treatment. The patient in fact will be followed in time independently on type and length of immobilization, and the only question we will ask the patient at the due follow-up will be whether there have been new episodes of recurrent instability. In our Congress Venue, the procedure of enrollment and the data collection form will be showed. All data shall be received by the Members of the Research Committee who will interview the patients at the final follow-up. The goal is to finally ascertain which effects shoulder immobilization has on instability and to allow all the SICSeG members to participate in a study which, with the aforementioned remarks, may become object of publication on high level international journals.

In the field of CME crediting system, the Online Education Committees are active in respecting the commitments of our Society toward the SIOT (Italian Society of Orthopaedics and Traumatology). This takes form in making online education provided by our Society available on the SIOT platform. Online education programs have been made available during the National Congress as well, related to some Symposia and Congress Sections that the participants will use to get their CME credits. All these efforts go in the direction of readily interpreting the new guidelines of the Health Ministry.

An acknowledgment is due to the important job by some Regional Delegates who organized the SICSeG Regional Courses thus providing an appreciated tool for scientific spread and knowledge exchange with specialist and nonspecialist colleagues and with the extremely important professional caregivers involved in rehabilitation and functional recovery.

The vitality of our Society is evident also from other efforts that can easily be monitored through our website http://www.sicseg.it, representing our tiny agora in which all the Members are invited to participate and give their contributions.