EDITORIAL

Challenges for a new year

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With the advent of 2014, we have arrived in the middle of the second decade of the 21st century. Everything is digital these days and so is *Dentomaxillofacial Radiology* (DMFR). DMFR has undergone many changes in 2013, and we are looking back on 1 year of continuous publication, in addition to many other new features now available on our website. These include the option to almost instantly publish accepted papers as uncorrected proofs, reduced acceptance to final publication times of just 4 weeks, an open access option, BIR|Open, listings of the most read and most cited papers etc. 2014 will see the launch of a new-look, modern DMFR website for enhanced and more user-friendly content delivery. The new website will allow readers to easily navigate content, making it easier than ever to find the articles you want to read.

Once more, our journal received a very high number of submissions in 2013. This certainly reflects the fact that oral and maxillofacial radiology attracts more and more attention from all dental (sub)specialities as well as from neighbouring medical disciplines. The major reason for this is the boom of cone beam CT (CBCT) in nearly every dental subject. It is no real surprise that the vast majority of submissions we receive deal with this three-dimensional technique. Nevertheless, we are still keen to receive more submissions, looking for higher efficacy levels as defined in the famous Fryback article,^{1,2} particularly submissions dealing with CBCT.

Apart from the scientific aspects of CBCT, these days its clinical routine application is also of general interest. Dose matters when carrying out a CBCT scan, and correct interpretation and reporting on the data is a challenging task. This is particularly true when those

individuals reading and interpreting the scans are not sufficiently trained for this purpose. As this shortcoming has been a matter of debate over the last few years in the oral and maxillofacial radiology community, a working group of the European Academy of Dentomaxillofacial Radiology has been formed to prepare a position paper on basic training requirements for those operating CBCT machines and/or interpreting CBCT scans. The position paper is explicitly addressed to all dentists who do not have a post-graduate specialization in dentomaxillofacial radiology, *i.e.* the vast majority of dentists. This important paper is published in this issue.³

The editors and the publisher express their sincere gratitude to all our voluntary reviewers without whom this journal would be simply impossible. The second issue of 2014 will include a list of those reviewers who reviewed for our journal in 2013. Thank you so much for your continuous service to DMFR!

I would also like to take this opportunity to thank my associate editors (in alphabetical order: Min-Suk Heo, Gang Li and Mel Mupparapu) for their continuous support and the huge workload they take off my shoulders. The journal is heavily dependent on your input, thank you so much for your extremely valuable help!

Now let us look forward to a new year, which hopefully will be a successful one for all of you. I wish all of you a good start to 2014.

All the best,

Ralf Schulze
Editor

REFERENCES

1. Schulze R. Editorial. *Dentomaxillofac Radiol* 2012; 41: 443. doi: 10.1259/dmfr/26931032
2. Fryback DG, Thornbury JR. The efficacy of diagnostic imaging. *Med Decis Making* 1991; 11: 88–94.
3. Brown J, Jacobs R, Levring Jaghagen E, Lindh C, Baksi G, Schulze D, et al. Basic training requirements for the use of dental CBCT by dentists: a position paper prepared by the European Academy of DentoMaxilloFacial Radiology. *Dentomaxillofac Radiol* 2014; 43: 20130291. doi: 10.1259/dmfr.20130291