Editor's Note

Dear Readers,

I am glad to present this issue of the Jefferson Journal of Psychiatry, and hope you all will enjoy it. The Journal provides unique learning opportunities for psychiatry residents and fellows, who are, the primary contributors, as well as the reviewers. The essential purpose of this activity is educational, and hence, it can be seen as one of the several tools that help us to develop critical skills of reading, writing and analysis of scientific literature in our field.

This kind of learning is crucial for our development as practitioners of evidence-based neurosciences and clinical psychiatry, and hence serves both the profession and our clients. I welcome you all to continue to participate by sending manuscripts. Those interested in reviewing manuscripts are also welcome. If you have any comments, thoughts, or feedback about the articles in this issue, we will be glad to consider publishing them as letters to the editor in our subsequent issue.

I also see another reason as to why developing good reviewing skills is so important. As clinicians and/or researchers, we are facing unprecedented and aggressive marketing of new drugs. These are often pitted, one against the other, and promoted as having 'cutting edge properties'. To make sound evidence based decisions in treatment amongst a menu of such choices available now, we need to be careful interpreters of data. This depends on an ability to assess the design, methodology, benefits, limitations and pitfalls of research studies. Hopefully, the journal aids such a goal.

This is an exciting time to be in this field. Many different treatment approaches are emerging on the horizon, and the existing ones can be studied better. There is a growing armamentarium of sophisticated digital technologies, communication tools and a host of software-based research methods now available to the modern researcher. There is an increasing interest in studying other alternative and complementary therapies. We are also beginning to look at a more integrated system's based approach in mental health. We are beginning to learn more from ancient wisdom in health matters. For example, health benefits of yoga and meditation, herbal and dietary treatments, lifestyle choices and habits have long been described in Ayurveda (an ancient health system in India) as well as in ancient Chinese systems of medicine, but these are being actively researched in Western systems of medicine now. I hope to see more submissions to the journal on these interesting areas and their interface with mental health. I also hope to see more pouring on cultural issues of relevance to psychiatry.

With these closing remarks, I wish you all very well. I wish to thank Scot R. MacLean MD, who encouraged my participation in this journal. I would like to thank Dr Edward K. Silberman MD, who has been a most valuable mentor for many

generations of this journal now and Dr Michael Vergare MD, current chair of our department. I also want to thank Lillian Campbell for her valuable coordination support, all the reviewers and contributors to this issue, and Eli Lilly, which is the financial backbone behind this activity.

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