

Case Reports: The Basis of the Scientific Research

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Medical knowledge is the result of individual and collective experience produced over time. It has been that way since the medicine was recognized as a science and since this is provided in a collegial way [1].

Since the knowledge of the human anatomy, physiology of its different systems, the behavior of different diseases to the application of new diagnostic technologies and innovative therapeutic techniques based on molecular medicine, this has been the result of the gathering of individual experiences based on observation and experimentation [1,2].

That is why the culture of scientific research should be inculcated early in medical training. Most medical schools in the world include in their medical education programs, the course of biostatistics as essential to achieve the degree. This gesture, at least guarantees that future graduates have basic knowledge about biomedical research but does not ensure that the culture of sharing knowledge become part of the standard practice of future physicians [3,4].

There is a gap, then, between the application of knowledge and the exercise of the culture of scientific sharing while medicine is practiced daily. Overall, it is known that less than half of medical graduates have published an article in his life. While it is true that includes a large population of physicians trained before the 80s, denotes a limited interest in scientific research as a daily activity. Probably in later generations of doctors, this proportion is much lower [5-10].

Direct patient care and administrative tasks consume time that could otherwise be invested in scientific activity. However, those are not the only impediments that limit research activity among health professionals. The complexity of the research process is an obstacle to its development among doctors, especially doctors with little or no training in conducting scientific publications [5,6,11,12]. That is why it is recommended that as much as their training progresses, the physician should make progress in their ability to publish new scientific knowledge.

Another dilemma that physicians have when facing the possibility of spending time in scientific research is to recognize the existence of an opportunity to make their work visible. The widespread idea that "everything is naked" is as popular as false. Scientific research is rarely merely innovative and is rarely completely new. The scientific activity is valid whether generated knowledge can be useful immediately as if it generates knowledge that can be used to generate future knowledge. This definition justifies multiple research initiatives. For example: A young researcher might think that there is no justification to replicate the research methodology of an epidemiological study of certain disease in their geographic region because existing data seem acceptable and superimposed on its environment. While this argument seems valid, it is not completely true: Epidemiological studies are the basis of medical knowledge, are based on the collection of individual cases and allow comparison of populations. Thanks to them, is that medicine has understood, along years, the behavior of many diseases in different environments. (Geographic, ethnic, dietary, etc).

Probably the starting point of all great scientific discoveries is the observation of an individual case or a small number of unusual phenomena. Two circumstances can make a case, a useful source of information to the scientific community: A rare or unusual event itself or the unusual presentation of a frequent and regular occurrence. Probably even the relevance of the latter is greater than the first. But in any case, either observation allows other doctors to apply the experience of an observer in their own patients. The academic process of observation, organization, documentation and report of a case is what constitutes the genesis of a case report. This is, to our knowledge, the most elementary of scientific practices in medicine but no less relevant. Consecutive observation of events that subsequently generates knowledge based hypothesis. Those hypotheses, in turn, will generate theses and those theses will finally nourish our future medical texts.

The importance of devoting the spirit of a journal to the transmission of observation of cases is very high and more when performed in open access format that allows immediate distribution. This could be interpreted as a declaration of intention to invite the novel segment of medicine to participate as authors. Although it is true, the practice of research in the form of case reports is elementary, not heritage younger generations but the duty and right of all health professionals. We

have the duty to share our experiences with the scientific community for generating knowledge bases of medicine of the future.

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