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THE EDITOR'S CORNER

A New Year's Resolution for Study Clubs

Having just finished the last of the leftover turkey and dressing, I notice that my neighbors have started putting up their holiday decorations. These are both sure signs that another year is nearing its end. As I peruse the past 12 issues of JCO, I am struck by the diversity of topics that we have covered in such a short time span. Mini-implants, miniscrews, or—to use the currently accepted name—TADs (temporary anchorage devices) have certainly played a large part in the orthodontic literature this year, both in JCO and in other major journals. I confess to having underestimated just how popular these devices would become.

A good many other new ideas surfaced in 2005, however, in areas that I figured had been pretty well exhausted in years past. Who would have thought there was anything left to learn about space closure after closing loops and power chains? Yet in the August issue, McLaughlin, Kalha, and Schuetz introduced us to the Hycon Device, a new appliance that has essentially solved the quandary of how to close stubborn residual extraction spaces. Another subject I have always found fascinating is orthodontic treatment of patients with complicating medical or psychological conditions. This year, we have had reports of patients with hereditary spherocytosis, autism, nasopharyngeal obstruction, and diabetes mellitus. Other old topics with new findings have included bonding, functional appliances, retention, molar uprighting, and adult orthodontics.

Even though all these areas have been addressed repeatedly in the literature over the years, relevant new material appears every day. I pride myself on keeping abreast of what's new in the field, but I all too frequently find myself being surprised by a development—an appliance or technique—that others seem to have known about for months, if not years. Likewise, I frequently amaze colleagues with ideas that are not all that new to me, but that they have never heard before. Despite the best efforts of the orthodontic journal editors, it is difficult to cover all bases.

In fact, every specialty relies on a myriad of sources of information. Professional meetings are the traditional means of staying current, but they can be expensive, and it's often difficult to take in everything that is offered. A good alternative evolved early in the history of orthodontics: the study club. Initially, this was simply a bunch of friends and colleagues getting together to discuss the ins and outs of the profession. Today, study clubs range from organizations that are extremely structured, with established curricula, to gatherings that are almost entirely impromptu. Some are thematic, concentrating on investments, diagnostic imaging, or specific clinical techniques such as Bioprogressive, Zero-Base, and Invisalign. Members of these groups, who may be geographically scattered, stay in touch through occasional meetings, conference calls, or video conferencing.

Whatever form they take, study clubs are invaluable resources for the transmission and communication of knowledge and new ideas. Journals are long-established media for the introduction of new material, but they allow little interaction with readers. Professional meetings may provide question-and-answer sessions, but the size of the audiences and the limitations of time tend to minimize discussion. At a study club meeting, on the other hand, the informal chitchat that usually follows a topical presentation is a rich environment for developing new concepts

and fostering the advancement of clinical science. The subjects can be wide-ranging and broadly applicable. In addition, many study clubs require regular submission of case reports for examination and critique by the other members, and while these cases may not often fall into the unusual categories mentioned above, they frequently involve details of mechanics or techniques that are worth sharing with the profession.

It recently occurred to our senior editorial board in our weekly conference call (a kind of study club in its own right) that orthodontic study clubs around the world represent a largely untapped goldmine of information. I would like to issue an open invitation to such groups to submit material that has surfaced in their meetings to be considered for publication in JCO. Scarcely a week goes by without someone calling or e-mailing me to ask, "Why don't you publish something on this or that? I've tried it, and it's fantastic." My invariable response is, "Hey, that sound great. Write it up and send it in." Maybe one in 20 such conversations results in a submission. Many great ideas are lost to the profession simply because they are never published, and a number of these ideas surface in study club meetings. Why not appoint members of your club to write about them? It would give me great satisfaction if next year at this time, I could look back at 2006 and find several outstanding articles that have come out of orthodontic study clubs. RGK