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“PRIMUM NON NOCERE”, THE ROLE OF RESEARCH IN MEETING THIS PRIMARY OBJECTIVE IN NEUROSURGICAL PRAXIS.

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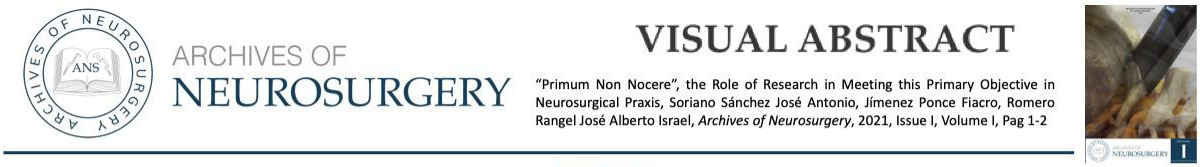
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Abstract

The present editorial object is to make us aware of the role that scientific production has in patient safety. Our goal shall be to provide the best neurosurgical praxis parameters supported by the best scientific evidence, developed in strict alignment to current research and publishing ethics, to warrant patient safety in every process of neurosurgical care. Once this has been said, be the worldwide neurosurgical scientific community welcome to publish in Archives of Neurosurgery, a new journal that will make publishing possible for every neurosurgeon around the world, to become the scientific home of Neurosurgery.

Visual Abstract



Keywords

RESEARCH, NEUROSURGERY

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Cover Page Footnote

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Authors

José Antonio Soriano Sánchez, Fiacro Jiménez Ponce, and José Alberto Israel Romero Rangel

"Primum Non Nocere", the Role of Research in Meeting this Primary Objective in Neurosurgical Praxis

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Abstract

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Keywords: Research, Neurosurgery

Today more than ever, the Hippocratic precept "Primum non-nocere" remains true and shall be permanent in the mind of every physician in the world. Its role in healthcare translates into a culture for Patient Safety during praxis, that in fact, shall define the concept of Neurosurgery itself. On the 72nd World Health Assembly sustained on May 25th, 2019, the World Health Organization established the "Global action on patient Safety" with the single objective "No one should be harmed in health care" [1].

It should be an objective of any government intending public health to promote sufficient access to high-quality healthcare services. Institutions and Healthcare systems are obligated to have standardized processes that warrant the proper infrastructure (workforce, facilities, equipment)and information to provide individuals with healthcare services that meet their high expectations at a reasonable cost, fulfilling the user's satisfaction and accomplishing health goals with the best medical practices. In other words, safety is a right of patients, but even further, it is a responsibility of the State, Healthcare organizations, and every individual involved in healthcare, including the patient. Nevertheless, it is vital to understand that between the physician's effort to provide and the well-intended high expectative of the patient to receive high-quality healthcare, there exist unexpected situations called: complications, errors, near-mistakes, adverse events, or sentinel events. Then, patient safety is the absence of preventable harm to a patient during the process of healthcare and the reduction of risk of unnecessary harm associated with healthcare to an acceptable minimum [2]. An acceptable minimum refers to the collective notions of given current knowledge, resources available, and the context in which care was delivered weighted against the risk of non-treatment or other treatment [2]. To warranty patient safety during surgery, avoiding any possible event, we must consider four elements: 1) the patient's characteristics, 2) the coexisting morbidity burden, 3) the

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severity of disease been treated, and 4) the surgical treatment [3]. These elements include the following factors: the healthcare system (including the healthcare-related personnel and the healthcare devices), the physician or surgeons, the patient, and the illness. The certification process of each factor serves as a qualifier to discern between their controllable or uncontrollable nature. Healthcare systems are certified by International Organisms such as the World Health Organization; Institutions are certified by the Joint Commission and local governmental institutions, and devices certified by local dependences such as the FDA in the United States or the COFEPRIS in Mexico. Physicians and Surgeons are certified by peers in local Specialty Councils to warranty the specific competencies required by its specialty. Oxford University recently defined that a surgical team's performance depends on Technical but also non-Technical skills, something similar to aviation safety procedures, a concept that must be included in the certification process to warranty patient safety at all costs.

The present editorial object is to make us aware of the role that scientific production has in patient safety. Our goal shall be to provide the best neurosurgical praxis parameters supported by the best scientific evidence, developed in strict alignment to current research and publishing ethics, to warrant patient safety in every process of neurosurgical care. Once this has been said, be the worldwide neurosurgical scientific community welcome to publish in Archives of Neurosurgery, a new journal that will make publishing possible for every neurosurgeon around the world, to become the scientific home of Neurosurgery.

Acknowledgments

As the first editorial of Archives of Neurosurgery, we would like to remember every reader worldwide that this is the most challenging time in humankind history since the Spanish flu in 1918, which killed up to 50 million people and infected an estimated 500 million individuals, representing a third of the worldwide population [4]. Up to date, The COVID-19 Pandemic has reached 73,270,728 confirmed cases and, unfortunately, has taken 1,630,610 lives globally [5]. We respectfully present our condolences to everyone who has lost a beloved person due to the pandemic; we will remember them in our minds and keep them alive in our hearts. We encourage humanity to keep on the fight by preserving the social distancing and personal protection measures to relent the pandemic speed in the wait for wide coverture of vaccines. For all the scientific community involved in developing these vaccines and all our colleagues providing care during this time, our most generous gratitude and recognizant for such an altruist and dangerous work, no best example of their vocation and commitment to the Hippocratic Oath has ever been more real than providing this quick and effective response that has helped saving patient's lives at an equally tremendous cost, the physicians' and healthcare-related personnel's own life. Up to 7000 health professionals have lost their lives in fighting this human threaten [6], their sacrifice will be remembered and honored eternally intact by time.

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