

# A letter from the Editor-in-Chief

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**Received:** March 15, 2018 | **Published:** April 06, 2018

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Dear Colleagues and Readers:

It is my great pleasure to welcome you to this issue of *Biostatistics and Epidemiology International Journal*. I am particularly excited to be writing this introduction on 15 March 2018 – the 205<sup>th</sup> birthday of the founder of our noble discipline, Dr John Snow. No more fitting tribute to our profession could be made than to celebrate the launching of this exciting new journal during the same month of Dr Snow's birthday, as we remember his countless contributions to our profession stemming from the 1854 Broad Street pump investigation.

Herald forward in time 164 years from the birth of modern epidemiology, and you see a profession that is growing rapidly as it adapts to the changing demands of the world around us, as well as advances in scientific knowledge. No other field of basic science enquiry is as adaptable as that of epidemiology and biostatistics; our methodologies allow us to undertake research in all areas of medicine, public health, the social sciences, genetics, psychology, and more. We have the necessary tools, and continue to grow and refine our methods in such a way as to make epidemiological enquiry applicable to all disciplines, and all questions faced by humanity. Taken in total, all of this makes it an incredibly exciting time to be an epidemiologist, biostatistician, or associated researcher.

We are very much a thriving, exciting, and cutting-edge field, as is evidenced by our expansion into areas such as genetic epidemiology, which holds the promise of understanding, predicting, and preventing disease based upon personalised genetic profiles of individuals as we fight diseases such as type 2 diabetes, alcoholism, and more. Or the use of big data applications in association with computer science professionals to better harness the power of existing databases to understand risk and disease on a global level.

Of course, as we embrace new technologies and frontiers of enquiry, there is ample opportunity to remain true to our roots of traditional epidemiological methods as we continue to address pressing issues in both developed and developing setting globally. It is here at the grassroots level where we continue to form the scientific backbone of decision making by physicians, whether practicing as a solo practitioner on an isolated island in the Pacific, or in a university medical centre in London; public health practitioners, who rely on our data to develop targeted and efficacious intervention for health issues such as tobacco use among teens; health planners, who look to us for the information needed to prepare for future threats to the

health security of the communities they serve; national and local leaders, who use epidemiological data and analysis to determine how to prioritise spending related to health; and many others.

While we look to the future of epidemiology, and embrace new technologies, we must also remember our commitment to these traditional settings for the application of epidemiological data, where the knowledge we create has the largest impact at the community level.

Technology has forever changed the face of epidemiology. Whether we are talking about cutting edge investigations to identify linkages between specific genes responsible for myocardial infarcts as independent risk factors separate from lifestyle choices; or locally-relevant descriptive studies, such as risk factor analysis between betel nut use and oral cancers in Asia and the Pacific region, technology has forever altered the way in which we communicate, collaborate, and disseminate our findings. Egalitarian access to cutting-edge epidemiological research and data is key to both researchers as well as practitioners from around the globe.

Yet, the divide between developed and developing nations in terms of access to opportunities to share knowledge, as well as opportunities to learn from others while at the same time continuing to grow the efforts of researchers from around the globe, is significant. Traditional routes of knowledge dissemination, including conferences and the customary publications, are increasingly beyond the reach of researchers and practitioners. Many researchers working in smaller universities, community settings, or developing nations perform stellar research which has the potential for impact on practice at the community level; yet, they are handicapped in disseminating this information through traditional routes.

This is where journals, such as *Biostatistics and Epidemiology International Journal*, come into their own. At *Biostatistics and Epidemiology International Journal*, we celebrate and embrace both the past, present, and future contributions of epidemiology; while at the same time providing an open-access platform for the dissemination of impactful research which may otherwise have been only available at the local level where it is produced, and thus lost to the global audience of researchers and practitioners who rely upon epidemiology data and best practices from smaller, often times overlooked settings, to further the goal of evidence-based practice in the myriad of settings they serve.

For me, this is why I am so thrilled to serve as Editor-in-Chief of *Biostatistics and Epidemiology International Journal*, or that it provides an egalitarian opportunity to share high-quality research done at the local level with a global audience. In so doing, I believe the future of both epidemiology as well as this journal can be summed

up in one sentence: world class science, real world impact.

Warmest regards,

Dr Brian P Mangum

Editor-in-Chief