

Editorial

This month we are pleased to present a range of clinical papers from urology, gynaecology and coloproctology that maintain the standard set in our first English issue. Pelviperineology is focussing on clinical papers that provide practical information that is of use to the clinician.

We are particularly keen to publish the results of surgeons who report what they have seen in their own practice. The best available information to improve our practice and to help raise the standard of treatment that we provide to our patients comes from randomised controlled trials. Auditing our own work and reporting our results is the first step in developing the evidence base we need design effective and appropriate trials.

Practical ways to increase the usefulness of audit data and making it easier to collect such data will be discussed at a special session of the next AAVIS Conference in Sydney this month. "Evidence in Practice" will raise this issue with presentations from a number of speakers with experience in this area. It is our intention to develop a low cost data collection system to enable clinicians who are not in academic practice to take part in the audit process and help record the clinical data that we are happy to report anecdotally but too busy to document scientifically.

In the past Pelvic Surgeons have tended to meet in the context of special interest groups or associations where a prerequisite of attendance and participation is implied agreement with the views of that particular society. Recent years have seen a steady increase in the number of cross discipline meetings and more openness between clinicians. This change can only be applauded and it is the aim of this journal to promote such meetings. If you are arranging a meeting which aims to increase inter-disciplinary communication then let us know and we will make our readers aware. Such a meeting is planned for Padua, Italy where one day workshop in Pelvic Anatomy and Surgery will be held on 23rd October 2007. Details will be available on the internet at www.integratedpelvisgroup.org

What's in a name? It is only 3 years since AAVIS decided to broaden its' base and accept members from other countries and other disciplines. Already some members are questioning the relevance of a name that implies we are only interested in vaginal incontinence surgery in Australia. Pelvic surgery seems a better option. Pelviperineology is far too big a word and would only confuse those of us who are already struggling with the name of the journal. Clearly this needs to be decided by the membership and will be an item of discussion in the months to come.

On a sad note we report the recent passing of Joe Tjandra in Melbourne. Joe was a respected Colorectal surgeon on the world stage who regularly took part in research and educational activities that many of our readers will have taken advantage of. Despite being unwell for some time Joe had continued a rigorous clinical and conference agenda until only a few days before his death. Joe had agreed to join the expanded Editorial Board of this Journal and will be sorely missed by his friends and colleagues.

THE EDITORS

PELVIPERINEOLOGY

A multidisciplinary pelvic floor journal

Pelviperineology is published quarterly. It is distributed to clinicians around the world by various pelvic floor societies. In many areas it is provided to the members of the society thanks to sponsorship by the advertisers in this journal.

The Integrated Pelvic Group (IPG) is made up of interested societies and individuals who consider the pelvis as a unit. The Interdisciplinary Society of the Pelvic Floor (SIPP, Italy), the Indonesian Society for Pelvic Floor Dysfunction and AAVIS are the foundation affiliated societies that make up the IPG.

AAVIS is a multidisciplinary pelvic floor society based in Australia and New Zealand. Membership is open to gynaecologists, urologists and colorectal surgeons with an interest in Pelvic Floor medicine.

SUBSCRIPTIONS: If you are unable to receive the journal through your local pelvic floor society or you wish to be guaranteed delivery of the journal Pelviperineology then subscription to this journal is available by becoming an International Member of AAVIS. The cost of membership is € 75 (75 euro), and this includes airmail delivery of Pelviperineology. If you wish to join AAVIS visit our website at www.aavis.org and download a membership application.

The aim of Pelviperineology is to promote an inter-disciplinary approach to the management of pelvic problems and to facilitate medical education in this area. Thanks to the support of our advertisers the journal Pelviperineology is available free of charge on the internet at www.pelviperineology.org The Pelvic Floor Digest is also an important part of this strategy. The PFD can be viewed in full at www.pelvicfloordigest.org while selected excerpts are printed each month in Pelviperineology.

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