Editorial view of this issue

This is the eighth issue of the Iraqi New Medical Journal since January 2015. We would like to draw the attention of our audience that from this issue onward the counting of the issues will be sequential starting from the first one. So, this issue would be volume 4 number 8 in stead of volume 4 number 2.

It is intuitive to say that recording and registering data related to any health topic is very crucial for its development and promotion. At the same time, comparing new data with the old would provide a suitable ground for taking decisions; result based decision. A trend of decision making that Ministry of Health in Iraq is adopting these days. We think that our duty is to provide data resulted from implementing any health policy or system honestly and scientifically to help policy makers in reforming and promoting these policies or systems effectively. Based on this fact you will find in this issue a study talking about infrastructure of haemodialysis in Iraq in 2012, see *Majeed et al* page 91. These days, the author of this study is doing a similar work to record the change after 5 years (due to be published in our journal after completing data collection and analysis. What is between 2012 and 2018? The answer is the haemodialysis leasing program, a program of proving haemodialysis services for Iraqi patients with end stage renal disease by international companies according to a contract with Ministry of Health. So, such kind of research will enable us to assess the effectiveness of such contract based on the results of studies rather than personal opinions. The current issue is also including two other nephrology related issues, the challenges of vascular access in patients with end stage renal disease in Iraq from a surgeon perspective (page 84) and renal transplant registry in Iraq (page 86) .

The introduction of e learning in promoting knowledge and skill of health care providers is gaining a growing attention worldwide. It is a time and cost effective approach. In June 2018, the Clinical Decision Support Training Initiative has been launched in Iraq. It is provided by the BMJ, through which over 1500 Iraqi health care providers have been given a free access to two educational, updated, and evidence based cites; BMJ learning and BMJ best practice. This initiative aiming at improvement of the detection, diagnosis and management of infectious diseases for frontline clinicians from primary and secondary care, infectious disease and public health in Iraq. In this issue (page 80), *Kieran Walsh* the clinical director of BMJ Learning and BMJ Best Practice writes about the use of e learning in education of doctors and other healthcare professionals both before and during an outbreak of infectious diseases.

Lastly, I invite our junior doctors to read the international recommendations about treatment of infectious diarrhoea in adults (page 138), the disease that is very common in Iraq in summer every year.

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