Editorial

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# Building a Scholarly Home for Dialogue between Medicine, Ethics, and Society

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The practice of medicine has always been more than the management of disease. It is based on science, but it is exercised with judgment, formed in human relationships and challenged by ethical responsibility. In every age medicine has had to respond to changing patterns of illness as well as to changing expectations of society [1,2]. Today, with the technological sophistication and social complexity of healthcare systems increasing, it is more obvious than ever that a scholarly platform that efficiently links medicine and medical ethics is needed. It is in this vein that Annals of Medicine and Medical Ethics aims to provide a timely and much-needed academic forum.

A journal isn't just a place to archive manuscripts. It is a questioning philosophy. It sets the tone for conversations that are worth serious consideration. It allows disciplines to talk to one another instead of being stuck within their own borders The vision of this journal is grounded in the understanding that clinical medicine and ethical reflection are not parallel enterprises. They are interconnected. Good medical care needs scientific competence but also fairness, accountability, sensitivity and moral clarity [3]. Likewise, the ethical dimensions of health care need to have their feet planted firmly in the concrete aspects of medical practice, suffering patients, organizational limitations, and the social environments within which medicine operates.

Worldwide, practitioners in health care are facing tougher questions each day. When challenges to decisions arise, how do health care providers negotiate between the patient's right of self-determination and the professional expertise of the practitioner? How can we allocate scarce resources during times of inequality and/or scarcity? How can we introduce artificial intelligence technology and other advanced digital technology to the healthcare sector without infringing on the right to privacy and trust for the individual? These are not trivial academic questions. These are in the everyday realities of hospitals, clinics, classrooms, ethics committees, research environments, and health systems. So a journal which embraces medicine and ethics is not only desirable, it is essential.

One of the main aims of Annals of Medicine and Medical Ethics is to encourage a cross-disciplinary forum which does not always get enough interaction in conventional publishing spaces. Even though clinicians can document the outcomes of their patients' treatment plans, they might find it difficult to explain the moral aspect associated with them. Though ethicists can provide conceptual analysis, they might fail to deliver them to the relevant practitioners. Questions of great relevance to medicine are often addressed by experts in public health, educators, legal scholars, sociologists and policymakers but their perspectives are often scattered across separate journals and audiences. Such a journal aims to create a shared intellectual forum where these various perspectives can engage, challenge, and enhance each other.

A journal of this kind is all the more necessary when we consider the era of exploding scientific knowledge that surrounds us. There are amazing possibilities in terms of diagnosis, treatment, life support, reproduction, genetic science, and personalised medicine. But along with every breakthrough comes ethical questions of access, choice, affordability, quality of life, and justice. It often makes them keener. In this space, the role of an academic journal is not just to celebrate novelty, but to examine its implications with seriousness and balance [4].

The journal also acknowledges that medical ethics are not confined to exceptional dilemmas. It is found in routine care, everyday decisions, ordinary systems. This is evident in delivering bad news, in gaining consent, in caring for vulnerable patients, in disclosure of errors, in protecting research participants and in mentoring trainees. It is encountered in the ethics of documentation, publication, authorship, peer review and professional conduct. It is reflected in the culture of institutions and the trust between society and the medical profession. The journal encompasses the full range of these concerns, and welcomes contributions from across the spectrum of clinical medicine, research ethics, medical humanities, public health ethics, professionalism, policy and emerging technologies.

Another important goal of this journal is to promote academic inclusiveness. Important ethical and clinical lessons are not only learned in large centers or in systems of high resources. They also arise from community practice, district hospitals, training institutions, public sector settings and resource-constrained environments where the most difficult choices are often most visible [5,6]. But the real-life situation faced by practitioners and scholars working in these contexts warrants academic scrutiny. It is in this context that some of the most difficult ethical dilemmas emerge, such as those related to equality, access, prioritization, costs, public accountability, and culture. We hope that this journal will highlight research that is locally

rooted, yet universally applicable. This journal could also be used for training purposes by students and young researchers.

Traditionally, medical education has emphasized the acquisition of knowledge and technical skill. But there is a growing recognition that the development of a good doctor or health care professional also depends on ethical literacy, reflective capacity, professionalism, and sensitivity to the broader meaning of care. Such a journal can be part of that formation by publishing work which helps readers to think more clearly, more responsibly, and more compassionately about the profession in which they live. As Co-Editor, I would like to emphasize the necessity for the journal to contribute to the protection of scholarly integrity. In the face of increasing academic pressures and changes in the environment of scholarly publishing, much thought should be invested into such issues as authorship, transparency, plagiarism, artificial intelligence, peer review integrity, and scientific misconduct. Ethical publication equals ethical medicine, period. Therefore, a journal dedicated to medicine and ethics requires high editorial standards and ethical publishing practices.

The fate of the Annals of Medicine and Medical Ethics is in no way dependent on its editorial board, but rather on the community that it creates around itself. It must carry forward scholarly articles, insightful commentaries, case studies, reflective writings, educational insights, and cross-disciplinary papers. We look forward to receiving papers which raise clinical questions and discuss their implications from an ethical, professional, and sociological point of view. We will appreciate academic rigor in our papers, but scholarship can only be enriched by engagement.

The basic premise on which we shall run the journal could hardly be simpler. It can be stated as follows: medicine will serve humanity well if it is based on science and ethics. In other words, there need be no dichotomy between excellence in practice and morality. Indeed, each reinforces the other. If science dominates a healthcare system, there could be a problem of its unjust and impersonal character. If ethics dominates it, then it would be non-evident.

We hope that Annals of Medicine and Medical Ethics will be a meaningful forum for that joint effort. Contributions to this endeavour from clinicians, researchers, educators, ethicists and scholars from a range of disciplines are welcomed. We aim to build a future of health care which is intellectually robust, morally coherent and deeply responsive to the needs of patients and society through discourse, contemplation and scholarship.

**Declarations**

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