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Advancing Clinical Research, Building Trust-The Path Forward for PJCR

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It is with considerable pride that we present Volume 2, Issue 2 (2025) of The Pakistan Journal of Clinical Research (PJCR). This issue arrives at a pivotal moment, not only for the journal but for the broader landscape of clinical science in Pakistan. Globally, healthcare is being reshaped by rapid technological advancement and an ever-deepening understanding of disease. In this dynamic context, the imperative for clinical research that is methodologically robust, ethically sound, and transparently reported is absolute. Scholarly journals bear a profound responsibility in this ecosystem: to curate, validate, and disseminate reliable evidence that informs clinical decision-making, shapes policy, and ultimately, improves human health. This issue reflects our steadfast commitment to that role, showcasing research that meets high scientific standards while addressing pressing regional health challenges.

We are pleased to mark significant infrastructural progress. PJCR is now indexed with Crossref, with Digital Object Identifiers (DOIs) assigned to all articles, ensuring permanent, traceable links to our published work. Furthermore, our inclusion in Scilit, the MDPI-supported database, enhances the discoverability and citability of our authors' contributions. These are not mere technicalities; they are foundational steps in building scholarly trust. They signal our dedication to international publishing norms, safeguarding the long-term preservation and accessibility of research. While we view these as early milestones on a longer journey, they affirm our direction toward broader recognition and our aspirational goal of inclusion in premier databases like PubMed and MEDLINE.

The six original articles in this issue coalesce around a compelling theme: the integration of technical precision with holistic patient care, with a particular focus on neurosciences. This concentration mirrors global trends where advances in neuro-oncology and neurosurgery demand both technological sophistication and multidisciplinary integration.

The issue leads with "Enhancing Diagnostic Accuracy in Paediatric Posterior Fossa Tumors Through Combined Radiologic and Intraoperative Assessment." Pediatric posterior fossa tumors represent a area where diagnostic nuance directly dictates surgical strategy and prognosis. This study underscores the translational value of marrying pre-operative imaging with intraoperative findings, a practice that refines real-time decision-making and aims to minimize neurological morbidity. It is a prime example of research that bridges departmental silos for direct patient benefit.

This is followed by "Impact of Extent of Resection on Survival Outcomes in Glioblastoma Patients." Glioblastoma, with its grim prognosis, remains a touchstone for surgical oncology. The pursuit of maximal safe resection is a cornerstone of care. By contributing robust regional data to this global discourse, the study reinforces a critical neurosurgical principle and highlights the life-altering potential of meticulous technique and planning.

Surgical nuance is further explored in "Comparative Surgical Outcomes of Schwannomas and Meningiomas in the Cerebellopontine Angle Using the Retrosigmoid Approach." The cerebellopontine angle is a anatomical crucible where millimeter precision matters. This comparative analysis of two distinct pathologies managed via a standardized approach provides actionable evidence for surgical strategy, patient counseling, and setting realistic expectations for functional recovery.

Expanding the surgical oncology paradigm, "Role of Pre-operative Trans-Arterial Embolization in Reducing Surgical Morbidity of Vascular Head and Neck Tumors" highlights the indispensable role of interdisciplinary collaboration. It demonstrates how interventional radiology, when integrated into the surgical workflow, can significantly mitigate risk turning high-morbidity procedures into safer endeavors. This study is a testament to the modern model of team-based surgical care.

However, true clinical excellence looks beyond the operative microscope. "Psychological and Socioeconomic Impact of Benign and Malignant Brain Tumors" provides a vital, sobering counterpoint. It reminds us that the burden of disease extends far beyond pathology reports and MRI scans, engulfing patients and families in psychological distress and financial ruin. This research is a clarion call for oncology services to formally

integrate psychosocial support, financial counseling, and survivorship planning into standard care pathways.

Finally, we broaden our lens to the well-being of the medical community itself with "Prevalence of Lumbar Pain, Muscle Fatigue, and Gastrointestinal Problems in Medical Students: A Cross-sectional Study." The high prevalence of these issues among future caregivers is an alarming indicator of systemic strains within medical education. Protecting the health of trainees is not an ancillary concern; it is a fundamental prerequisite for building a resilient, effective, and empathetic healthcare workforce.

Collectively, these studies embody PJCR's editorial vision. We prioritize clinical relevance research that answers real-world questions. We insist on methodological rigor and transparent reporting, championed by a robust, double-blind peer-review process. We seek multidisciplinary perspectives that acknowledge the biopsychosocial model of illness. And above all, we are committed to ethical publishing, adhering strictly to the guidelines of COPE and ICMJE, and employing rigorous plagiarism screening.

The progress reflected in this issue is a collective achievement. As Editor-in-Chief, I extend my deepest gratitude to our authors for entrusting us with their work, to our reviewers for their invaluable scholarly diligence, and to our editorial board for their strategic guidance. Our integration of Crossref and Scilit is a direct result of their collective commitment to quality.

The path ahead is clearly charted. We must continue to strengthen our processes expanding our expert reviewer pool, streamlining editorial timelines, and further solidifying our ethics framework. A central, strategic focus remains our pursuit of indexing in major international databases, a goal we will achieve by unwavering commitment to scientific quality.

We therefore extend a renewed invitation to the clinical research community in Pakistan and beyond. We actively encourage submissions from early-career investigators and established scientists alike, particularly well-designed clinical trials, systematic reviews, and translational studies that adhere to CONSORT, STROBE, PRISMA, and CARE guidelines. By providing a credible, rigorous platform, PJCR aims to amplify diverse scientific voices and contribute tangibly to strengthening the nation's clinical research capacity.

In closing, we thank our readers for their engagement and trust. We welcome your feedback, your submissions, and your collaboration. Together, through a shared dedication to evidence, integrity, and patient-centric inquiry, we can advance the science of healing and fulfill the promise of improved health for all.

Ethical Approval

Ethical approval was not required for this study as it did not involve human or animal participants.

Data Availability

Data sharing is not applicable to this article as it is an editorial piece.

Author Contributions

Naveed Iqbal contributed to the conceptualization, methodology, formal analysis, original draft writing, and review and editing of the manuscript.

Informed Consent

Informed consent was not required for this study as it does not involve human participants or patient-specific data.

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Conflict of Interest

The authors declare that they have no competing interests.

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