COMMENT

Letters to the editor

Send your letters to the Editor, *British Dental Journal*, 64 Wimpole Street, London, W1G 8YS. Email bdj@bda.org. Priority will be given to letters less than 500 words long. Authors must sign the letter, which may be edited for reasons of space.

Dental practice

Admiration and respect

Sir, I would like to congratulate Professor Liz Kay on her splendid Presidential address (*BDJ* 2021; **231:** 264–265). Her theme of 'admiration and respect' for our work as dentists is absolutely 'on the button' and has been a particular mantra of mine for some time.

I have been a very happy practising dentist for many years and over the last decade or so, I have had the privilege to present the endodontic lecture slot to the local foundation dentists.

During this presentation, I encourage a lot of interaction and role play with particular regard to how challenging it can be to see a new patient who has come to see you suffering from intense pulpal pain, who has been awake all night, whose last experience of dentistry was 'bad' and who is terrified. The clinician has to arrive at a correct diagnosis, effect good local anaesthesia and carry out a very demanding technical procedure. Which other healthcare worker faces that degree of challenge? I think not many, if any. Well done dentists, we are doing one hell of a job!

C. Emery, Hayling Island, UK https://doi.org/10.1038/s41415-021-3571-1

Dental research

Once in 50 years

Sir, it is over 50 years since I became a member of the British Dental Association and a regular reader of the *BDJ*. In all that time, I do not recall reading such a moving, educational and inspirational Clinical paper as appeared in a recent edition under the title 'Contemporary management of advanced mid-face malignancy in the age of Instagram - a parallel surgical and patient's perspective' (*BDJ* 2021; **231**: 233–238).

On so many levels, the paper was educational. From the regular blogs submitted by the courageous patient, Jen Taylor, we learnt the importance of choosing the right words in conversation with patients, especially those confronted by serious or lifethreatening conditions. Many patients will not demonstrate such stoicism as this patient nor request as much information from their surgical and support team, but all deserve the highest degree of honesty and endeavour shown in this case.

The paper confirmed the overriding importance of multi-disciplinary teams; the value of centres of excellence for the treatment of rare and serious conditions; and the value of feedback from the patient, in this case a commentary over a prolonged time.

The paper invited us to follow her progress on social media platforms. I have done this (a first) and in her blog of 13 August 2021, Jen Taylor wrote: 'I have found that all my friends with cancer (and other chronic/rare illnesses) share – IF something good can come from our suffering, we will do whatever we can to facilitate that'. Manifestly by writing her blog and allowing her words to be used in this paper, she has done 'some good'.

But perhaps there is a little more.
Osteosarcomas of the bones of the skull are very rare and most general dental practitioners and dental students are unlikely to see a patient presenting with one. But all should be aware that sarcomas and other serious bony lesions do exist. It is a long time since I have been a clinician and I have not seen the original radiographs or clinical notes, but I do wonder if an extensive history was taken and the traditional 'surgical sieve' carried out for this patient – or is this a rather old-fashioned approach?

Like many of my generation, I am not a fan or user of social media. I generally leave

that to my children and, especially, to my grandchildren, but this paper woke (in the old-fashioned sense) me up. Encouraged by the paper, I have now read all of Jen Taylor's powerful blogs: an achievement which would not have occurred were it not for the *BDJ* and the authors of this groundbreaking paper.

J. M. G. Hunt OBE, Ipplepen, UK https://doi.org/10.1038/s41415-021-3576-9

Post-publication peer reviews

Sir, any paper or textbook may contain weak or fallacious claims. Regardless of the authors' reputation or the number of citations, it is crucial not to accept any claim unless it is substantiated by scientific facts, data, or experiments. There have been some efforts to teach everyone critical thinking in health. For example, the Informed Health Choices (informedhealthchoices.org) has provided such education for children using *The health choices book*. Another resource is the *Testing treatments* book. We believe these materials are worthy for the dental community as well.

According to the Retraction Watch Database (retractiondatabase.org), up to 9 September 2021, there were 298 entries in the dentistry section. There might be more retraction cases as yet unknown because of not being investigated or, in some cases, letters or reviews not being accepted by the journals. As such a process may be time-consuming, we encourage using social media (eg Twitter) or PubPeer (a specific place for commenting on articles) for further peer reviewing. Doing such post-publication peer reviews will force researchers to do more rigorous research and enhance critical thinking in the scientific community.

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