Dear colleagues,
It has been a very eventful year, in my capacity as the Editor-in-Chief of the *Indian Journal of Radiology and Imaging* (IJRI) that, along with my team, I have tried to bring the best of latest in the field of Radiology, through our quarterly publications. I would like to convey my sincere thanks to all of you for having been with me in helping sail the year smoothly.

As we have stepped into the New Year, it greets us with newer challenges and frontiers to conquer, for which I solicit your continued support.

The recently concluded 67th National IRSA Congress at Agra was a mixture of scientific education, at the backdrop of the misty Taj Mahal, one of the Seven Wonders of the World. The growing academic viewership along with workshops added newer dimensions to an awakening globe. The various advances in imaging, coupled with the rich International faculty, gave the congress the much needed push in the arena.

Two important issues simmered up during the actual proceedings. One of them is extremely relevant to the young writers about the order of authors in an article, as raised by one senior faculty member. According to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, designation as an author must satisfy three conditions. The author must have:

- Contributed substantially to the conception and design of the study, the acquisition of data, or the analysis and interpretation
- Drafted or provided critical revision of the article
- Provided final approval of the version to publish.

Acquisition of funds, or general supervision of the group alone does not constitute authorship. Many medical journals have abandoned the strict notion of author, with the flexible notion of contributor.[2]

In scientific literature, the head or the principal investigator's name is put last in the author's list in order of their contribution. However, this concept is much easier interpreted than practiced giving rise to conflict, more often than not. A recent study published in the Canadian Medical Association Journal revealed that more than two-thirds of 919 corresponding authors disagreed with their co-authors regarding contributions of each author.[3] While the scope for conflict keeps on increasing in the highly competitive academic world, with all contributors owning all credit for authorship, due care needs to be exercised by the Head of the department in ameliorating this situation.

The second issue that cropped up during the congress was modalities of Radiology are surely but steadily going out to other Clinicians/Physicians/Surgical colleagues and who's to stop all this? One of the leading vivid examples is Lung Sonography being actually practiced by Intensivists and not Radiologists! In fact, the path seems to have assumed steeper dimensions with Emergency Medicine colleagues performing Sonography as well. While all the hue and cry about the above two specialities of medicine making ways in using Sonography as the regular modality in their daily practice is being made, it looks rather strange and indigestible that Intensivists are teaching Lung Sonography! Radiological and Diagnostic Imaging Modalities, right from X-rays to positron emission tomography and computed tomography (PET CT), are the birth right of any Radiologist, as we have received the due qualification in this regard, on the completion of the necessary training and examination conducted by the Medical Council of India. A very pertinent question that comes to our mind is that are we incompetent in using our own modalities, despite having received the due certificate of practice to handle these equipment?

On the one hand, as this trespassing of other medical specialities into Radiological arena is creating waves, its quiet a elephant in the room situation, since, Obstetricians and Gynecologists have been practicing ultrasound for a fairly long time, now. Bodies like Indian Federation of Ultrasound in Medicine and Biology (IFUMB), which comprises of Radiologists and Gynecologists, have Gynecologists who practice Sonography vehemently.
The apex body of Gynecologists in India, Federation of Obstetric and Gynaecological Societies of India (FOGSI), has a dedicated Imaging Sciences Committee, which takes care of imaging-related aspects. The period of awakening and action at all governmental levels is needed; otherwise, we as Radiologists would actually face the danger of extinction.

In pursuit of offering specialized issues to our learned members, with colleagues acting as Guest Editors to dedicated issues, we begin Functional magnetic resonance imaging (MRI) segment in this issue, which is being edited by Dr. Santosh Gupta. The issue features leading contributors with their latest articles. The capability of the brain with its myriad problems can be assessed in a good measure by Functional MRI, thus paving the path for future research.

One of the important features of any IRIA Annual Congress is the swearing in of the new President. Dr. Bhavin Jankharia has taken over as President, IRIA, at Agra. His presidency assumes significance as he was the Immediate Past Editor of IJRI. As a custom, his Presidential Address is featured in the journal.

Please keep writing to me on the areas of interest that you would like to concentrate upon, IJRI would delve into them, by bringing in newer research-based original articles, from edition to edition.

References