



Editorial

Trauma Care—A New Open Access Journal

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Welcome to *Trauma Care* (ISSN: 2673-866X)! This new peer-reviewed, international, open access, on-line journal targets a major gap in trauma care. We intend to combine the efforts of clinicians, basic scientists, epidemiologists, behavioural scientists, and preventive and therapeutic policy makers from the fields of both physical and psychological trauma for the benefit of the injured/traumatised patient. While physical and psychological trauma most frequently manifest together, care providers tend to focus on their field related to either the body or the soul. From the patients' point of view these problems are blended together in a complex way, rather than being simply dichotomous, unlike our clinical care which is centered around specialisation, convenience, logistics and infrastructure required.

The word "trauma" (Greek for wound) is used naturally in both physical and psychological domains by specialists in the corresponding fields. The public associates this term to either domain to varying degrees depending on education background, country of origin, primary language, or exposure to either part of health care; however, in general, colloquially it is more likely to be used in the psychological or emotional context. The plural use of the term "traumas" is quite uncommon and for most it sounds rather awkward; it is more likely to be used with adjectives expressing frequency (multiple, frequent, recurring etc.) rather than in simply anglicised plural with -s. Infrequently, the plural form of trauma is used as it would be for a neutral noun in Greek, "traumata". The recent consensus of our senior editorial board members was to discontinue the use of "Traumas" as the journal title and give a fresh start to our journal with a new, very inclusive title: *Trauma Care*. This title includes all aspects of trauma and the full spectrum of activities affecting trauma care from prevention to rehabilitation, with all research (clinical, preclinical etc.), actual treatment, education in these disciplines and quality improvement. We believe *Trauma Care* is the true comprehensive reflection of the mission and specific aims of our emerging journal.

Physical and psychological trauma have a huge burden on our societies and are frequently not considered as diseases due to their typically sudden starting point from a usually well-defined external non-infectious "agent", the injury [1,2]. The responses to injury by the human body, both physical and psychological, definitively lead to specific diseases with unique clinical presentations, most frequently requiring distinct treatment from seemingly similar conditions with non-traumatic aetiology.

As an emerging journal, *Trauma Care* is fortunate to have world leaders in their relevant fields on the editorial board. Our approach is strict specialist editor-driven reviewer selection and only editorial board-initiated focused article commissioning of leaders in their field to shape the character of our journal. I hope that this accepted editorial standard coupled with MDPI's proven track record of expeditious article processing will provide an attractive platform to publish high quality submissions on the broad scope of trauma related research.

The first issue of *Trauma Care* (Volume 1, Issue 1 (June 2021)) covers a wide range of topics related to trauma including but not limited to: suicide, traumatic brain injury and advanced soft tissue coverage techniques for traumatic defects on the lower extremity.



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As an editor, I would like to see healthy competition from researchers representing diverse scientific and clinical fields to shape the character of our Journal, which is starting out with great potential by filling a unique niche.

Conflicts of Interest: The author declares no conflict of interest.

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