

## **Editorial**

There is a plethora of microbiology and infectious diseases journals available for clinicians, microbiologists, epidemiologists and others interested in these areas. Many such journals including SLJID are now freely accessible on the web. This increased access, over the past couple of decades, has been and is a great boon to many living and working in countries where access to print journals was and remains difficult because of resource limitations. In this 'new' world of increased access, what do e journals such as SLJID have to offer?

Many advances have been made in the diagnosis, management and prevention of infectious diseases in the past 4-6 decades. There have been and will continue to be major advances in rapid diagnosis of infections. However, as seen with Ebola virus infections in the recent past, many countries still struggle with accurate and timely diagnosis of common as well as rare or emerging infections. Journals such as SLJID could be used for discussion of improvements in diagnosis where resources of personnel, adequate training and equipment and reagents are still in short supply. In this context, contributions to the current journal discuss diagnostic dilemmas in unusual presentation of hydatid cyst, the diagnosis of co-infections and the non specificity of a routinely performed diagnostic test in toxoplasmosis.

In countries with well developed laboratories, antenatal screening for Group B streptococcal colonization is taken for granted and strategies for prevention of neonatal Group B disease are well in place. However, I suspect that in many countries of the world with poor microbiology services, this still remains a dream. An e journal like SLJID could be a means through which important gaps such as the two reports on Group B screening and post Hepatitis B vaccination screening in the current journal could be highlighted and discussed and used as a means of improving practices in both management and prevention of infectious diseases.

I would like to encourage those working in these fields, particularly where resources are limited, to consider submitting reviews, research papers, short reports and case reports which highlight the mismatch between what is known to be the 'standard' and what is actually done. This could generate ideas that help move us to improve diagnostics and management as well as take appropriate preventive actions in limited resource settings in the field of infectious diseases.

We hope that you will continue to find the contents of this issue useful and thought provoking. Do let us have your feedback as well as contributions for publication in forthcoming issues. Please visit the journal's submission and peer review website at <http://www.sljol.info/>. We would also invite you to register as a Reviewer, as the availability of a wide pool of subject specialists for this purpose would assist us in our task of continuously improving the quality of the Journal.

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