

Editorial

Growth of the Journal of Arthroscopic Surgery and Sports Medicine (JASSM) continues

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It is indeed satisfying to see the growth of the Journal of Arthroscopic Surgery and Sports Medicine (JASSM), since its launch in April 2020. In lesser than 2 years, we are publishing the 5th issue, without any break. We have been publishing all article types, related to Arthroscopy and Sports Medicine and have published 56 articles so far. Some of these articles have been published by top-notch people in this field globally. We also have seen its growing readership, with more than 200,000 downloads and it has started receiving an increasing number of citations of its publications in a short span of time. The JASSM is registered with several International abstracting partners such as Google Scholar, Crossref, Scilit, Index Copernicus, China National Knowledge Infrastructure, Wang Fung, and ReadCube. We plan to apply for more abstracting partners such as Directory of Open Access Journal and PubMed Central.

This issue contains several interesting Original and Review articles, apart from some useful case reports and surgical arthroscopic techniques. “Kabaddi” is a commonly played sport in Asia and is associated with several musculoskeletal injuries. Gupta *et al.* have attempted to define standard definitions related to “Kabaddi”-related injuries so that uniform reporting can be done.^[1] Anterior cruciate ligament reconstruction is now a commonly done procedure for sports injuries of the knee. However, it may be associated with failure due to incorrect placement of the femoral tunnel. Thapa *et al.* have found in the study 50 cases that a combination of eyeballing and the use of femoral offset aimer help in achieving an accurate placement of the femoral tunnel.^[2]

High-velocity injuries are being seen more often due to road traffic accidents and contact sports leading to multiple knee ligament injuries, involving injury to two or more (of the four) major knee ligaments. These serious injuries are commonly

associated with soft-tissue trauma, neurovascular deficit, and concomitant articular cartilage or meniscus tears. These are surgically challenging to treat, even by the most experienced knee surgeons. Pardiwala *et al.* have presented a review on this topic to analyze and describe the management principles of multiple ligament knee injuries. They have formulated clinical practice guidelines with treatment algorithms, which are essential to plan individualized management of these complex knee injuries.^[3] Anatomic-based reconstruction of the injured knee ligaments have been described by LaPrade *et al.* They have emphasized on having a precise knowledge of the relevant anatomical landmarks, careful planning of reconstruction tunnel positions, orientations to avoid tunnel convergence, and employment of immediate early motion in the post-operative rehabilitation regimen to provide the patient the best chance for relatively normal use of the affected limb.^[4]

Arthroscopic surgery is an art that needs to be learned and cultivated by understanding the tips and tricks of the procedures. JASSM has, therefore, started publishing arthroscopic technique-related articles. We have two of such techniques described in this issue on meniscal repair^[5] and a new type of sliding surgical knot for shoulder surgery.^[6]

Shoulder arthroscopic surgery is now being done increasingly, after the success of knee arthroscopy, in the past few decades. Two case reports related to shoulder arthroscopy on the management of anterolateral labral cyst causing axillary nerve compression,^[7] and synovial chondromatosis^[8] have been presented. Management of a common clinical condition of the shoulder, that is, adhesive capsulitis has been done traditionally with conservative means with variable results. Arthroscopic capsular release has been found to provide better outcomes in diabetics than the conservative treatment, in a study by Sinha *et al.*^[9]

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I hope that you enjoy reading this issue of JASSM and would continue providing your valuable support to this journal as a reader, reviewer, author, and critic.

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