Lessons from India

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I felt honoured to be invited to join the journal editorial team as executive editor to participate in the rejuvenation of the society's journal and re-instate Scopus indexing. In this role, I acknowledge the move from roles of authorship, scholarly writing, and reviewing, to that of joint editorial responsibility shared with Indian Fertility Society (IFS) members and overseas colleagues in a multidisciplinary board to embrace and exploit the benefits of rapid advancing IT with its positive and negative features.

The realization of the diversity of the regional, geographic, and climate factors, with like-minded colleagues in our chosen field of reproductive biology and clinical practices, has reminded me how much we can all benefit from the experience and research of colleagues who live and work elsewhere near and far. In short, there are many lessons that can and should be learnt from the vast and varied continent of India.

The diversity implies we should go beyond exploring not only climate, flora and fauna, healthcare provision and culture, but also to address the impact of society, if any, such as, the environmental consequences of work place,

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urban or rural, whether agricultural or industrial, leading to society being exposed to pollutants.

Given these differences and the increasing research resources, this is a unique opportunity to add to the many important lessons from India to date.

Women's health conditions which easily come to mind for ongoing and update study include, endometriosis, infections and notably tuberculosis, resulting in uterine and tubal abnormalities. As our pregnancy outcome wish is the birth of a healthy baby and a healthy mother, resources should continue to be committed to explore possible causes of complications of pregnancy, both early and late, notably congenital abnormalities of the new-born. Our research resources and detailed records should be used to identify possible causes, iatrogenic, societal or environmental.

Male reproductive health clearly is an active interest of the journal, as evidenced by the number of Andrology reports in the last issue. As Andrology research suffers varying degrees of neglect globally, we are provided with an important focus in our objectives, not only for the

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journal, but also improving preventative and therapeutic strategies for couples seeking our advice.

I have chosen to mention but a few of the important advances to which India will contribute in management of the sub-fertile couple especially globally. Financial support and sponsorship Nil.

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