I Am a Staunch Advocate of Publishing Clinical Cases. Am I Wrong or Not?

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What a case report is?

Case report is the oldest and best-known type of publication in medicine. Many original observations, recognition of new diseases, novel diagnostic and therapeutic methods, unusual forms of common diseases, and complications were first published as case reports. Case reports have become a standard and indispensable part of the medical literature [1].

What is the value of publishing a case report in the era of evidence-based medicine?

In the era of evidence-based medicine available schemes for ranking the various levels of evidence place randomized controlled trials at the top-superseded only by meta-analyses of multiple randomized controlled trials and retrospective studies, case series, and unsystematic observations at the bottom [2]. Most such hierarchies do not list case reports at all. Those that do, relegate them to the evidence ladder’s lowest rungs along with anecdotal observation and expert opinion.

On the other hand, several authors have pointed out that, prepared carefully and interpreted with appropriate circumspection, case reports have a valuable part to play in both the advance of medical knowledge and the pursuit of education [3-5]. Moreover, in a thoughtful defense of case reports and case series in the era of evidence-based medicine, Vandenbroucke [6] listed 5 roles of potential contribution for this type of publication:

- Recognition and description of a new disease
- Recognition of rare manifestations of a known disease
- Elucidation of the mechanisms of disease
- Detection of adverse or beneficial side effects of drugs (and other treatments)
- Medical education and audit.

It is very difficult not to agree with these affirmations.

Statistics of case reports published in the journal - EC Cardiology

In order to have an idea of the importance that the Editorial Board of EC Cardiology journal gives to the item “Case Report”, we must know some statistical data. Of the 452 articles published from 2016 to 2019, in the regular volumes of the EC Cardiology 110 (24%) are case reports.

As we can see in figure 1, the number of articles published in the journal increased from 35 in 2016, to 220 in 2019. The number of published case reports has also increased, albeit to a lesser extent than the total number of published articles. Thus, there was a decrease in the percentage of case reports from 37% in 2016 to 24%, 21%, and 25% in 2017, 2018 and 2019 respectively (Figure 2).

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This decrease should alert us to the need to maintain special attention to case reports and not allow other items, such as original articles, review articles, opinion articles and others, to make the case report item disappear from our journal, as it happened in other journals that don’t publish anymore case reports. Other reasons to explain the extinction of the case report of many journals are related to the non-recognition of their value, the low citation rate of this type of publication, which leads to the reduction of the journal’s impact factor [7,8].
On the other hand as pointed by Niessen and Wynn, from the early 1990s, onwards several editorials, short reviews and commentaries highlighted the advantages of case reports case series. In their amazing review the authors described also seven possible causes of the renewed interest in case reporting [8].

In the case of Cardiology I would highlight the creation in 2017, of the European Heart Journal: Case Report. In the editorial of the first edition of the first volume of this journal the authors write [9]: “The case report is perhaps the oldest form of medical publication. Reports on specific patients date back at least to the 2nd millennium BCE, and until the 20th century, case reports were considered a mainstay of clinical research1. Indeed, many diseases and syndromes still bear witness to the influence of case reports and case series on the medical lexicon. With the rise of more advanced research techniques, case reports rightly no longer exhibit the same power in guiding medical practice they once did; however, they still have an important part to play in medical practice”.

What are the main recommendations for writing a good case report?

Preparing a case report can be a great learning experience. For experienced physicians, case reports offer an opportunity to teach and provide guidance. For medical students, residents and young doctors, presenting a case report serves as an excellent introduction to academic writing. Case reports can also have a significant impact on the reader. They represent a valuable resource for learning not only about rare diseases, but also about unknown manifestations of common entities and unexpected findings [5,9].

Therefore, the importance of publishing clinical cases is undeniable. However, it is necessary to follow some recommendations to increase the likelihood that a clinical case will be published and favor learning. Guidelines on writing a case report are widely described in the literature [10,11] and we herein, just want to remember the following:

- **Title:** It is the most commonly read part of your article, therefore it should be relevant, concise, informative descriptive and appealing enough to attract readers to your report.

- **Abstract:** It is the most important of your article as it will be freely accessible for others to read when retrieved from any medical database during the relevant search. It should summarize the clinical case in order to allow the reader to have a complete view of it. Under no circumstances should it exceed 250 words and some journals require up to 150 words, so it is recommended to always take the instructions to authors into account.

- **Keywords:** This is quite important for indexing your article, and it should be from three to ten words, and you should be very careful in your selection, as it would help in retrieving your paper during the search.

- **Introduction:** Not all journals require this section. If it is mandatory the definition and a brief description of the pathology, including common presentations and disease progression, are discussed, explaining the background of the selected topic. It should be followed by a brief description of what is going to be reported and the purpose of reporting that case. The message must be clear, concise and attract the attention and interest of the reader.

- **Case presentation:** Provide a clear picture of the patient’s condition and presentation. Describe the patient’s relevant demographic information, censoring all details that could lead to patient identification.

    Start with the main complaint and current medical condition followed by a detailed history, including past medical history, relevant family history, occupational and social history, medication and allergy.

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Positive findings from the physical examination and results all relevant investigations, laboratory images and their analysis should be briefly reported. Describe the rationale of the management approach, including treatment, follow-up and final diagnosis. Finish his section by saying what the patient’s outcome was.

- **Discussion:** Compare your findings with what is known in the literature and why you think this case is different. Only discuss what is relevant to your case and do not provide any unproven and unsupported speculation. Explain how this case would contribute to the literature and suggest justifiable recommendations.

- **Conclusion:** The section should include a concise and brief statement, explaining the importance and relevance of your case and it should relate to the purpose of the paper.

**Should we continue to publish case report or not?**

The answer is definitely yes. The main message I wanted to convey in this opinion is that we must continue to publish clinical cases in our journal. We must pay special attention to the following aspects: first, the message must be clear; second, clinical cases must be well presented and well discussed; finally, at the end of the report, the authors should emphasize what are the main learning points to be kept in the case presented.

**Conflict of Interests**

None to declare.

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**Bibliography**


