Preface



Colleagues, Readers,
Authors, Reviewers,
Members of the Scientific Committee,
Thematic Editors,
Members of the Editorial Board,

It is my great pleasure to welcome you all to the twenty-second year of *Family Medicine* & *Primary Care Review*! I thank you for staying with us as our community continues to expand, as a result of our introduction of an Open Access policy, DOI numbers, and the publication of full texts on our website. All our issues have now been entirely digitized, and so papers are more easily available to all readers, which translates into an increased number of citations in scientific publications. Our Editorial System is an advanced tool that stream-

lines the admissions and review process and allows better online collaboration between authors, reviewers, and editors. This new approach allows us to maintain our Polish Ministry of Science and Higher Education score of 20 points.

FM&PCR is visible in both European and global indexing databases. Since 2016, our papers have been indexed and abstracted in Thomson Reuters' Emerging Sources Citation Index (Clarivate Analytics, Web of Science) and the EBSCO database. With issue 3/2016, American English became our language of publication, and this has seen an increasing number of health care professionals and researchers from around the world joining us as authors and reviewers.

The issue of FM&PCR you are now reading continues to follow the guidelines set out twenty years ago, publishing research on evidence-based practice and education with the aim of supporting primary care physicians' daily work. Family medicine is the basis of the healthcare system in every country. At present, it is also undergoing a strengthening in its position as an academic and scientific discipline and healthcare specialty in its own right, with its own educational content, body of accepted data, scientific research, and clinical activity oriented towards primary health care. We primary care physicians, whether we work in more modern or less developed healthcare systems, continue to follow the major principles of family medicine: versatility, coordination, and effective cooperation between specialists from different fields. At the same time, we act to extend patient engagement and empowerment. This current issue results from cooperation between family doctors and researchers in other disciplines from Poland and throughout the world. I am confident that, in this issue of FM&PCR, you will find not only interesting insights into healthcare issues to inspire your further research projects, but also a source of practical information for the everyday care of patients.

Our main aims are to maintain the position of our publication and our score of 20 from the Polish Ministry of Science and Higher Education while, in the longer perspective, having FM&PCR represented in the PubMed system, supporting authors, and continuing to improve the quality of information in our publication. We encourage you to submit the results of your research projects and to communicate with the Editorial Board. Our Thematic Editors and Editorial Board Members will guide you throughout the process of submitting articles through our Editorial System, as well as during the reviewing and editing of your article.

This issue presents papers related to family medicine and primary care submitted to the Polish Society of Family Medicine (PTMR) Congress. The papers discuss vaccinations as the key preventive measure in primary care, stressing the escalation approach to the community and the importance that all citizens are educated in the basics of human biology and medicine; compensation for medical incidents as a result of extrajudicial settlement procedures managed by provincial governments in Poland; the relationship between sleep disorders and insomnia and professional and social functioning, as well as hypertension and cardiovascular system diseases; the relationship between subsyndromal hypothyroidism and kidney function disorders; Atherogenic Index of Plasma (AIP) tests in patients with type-2 diabetes and an assessment of the risk of cardiovascular complications (which, coupled with education, is very important for prevention); the relationship between depression and strong pain with the duration of therapy in hemodialyzed patients. Attention is also paid to the important role of the family or primary care doctor in Poland in preventing ischemic stroke, including clinically silent vascular cerebral lesions (CSVCL); to the need to monitor and treat risk factors, such as hypertension, which may result not only in stroke, but also epistemic function disorders; to the involvement of doctors in pain treatment, even when the primary care physician's access to pain control therapy may be limited (it is nonetheless crucial to be involved in the treatment process, as this is related to patient satisfaction with primary care); and to smoke-free environments – zones where smoking, production, sale, advertising, and promotion of tobacco products is forbidden - which have become standard in the municipality of Tegal, where any smoking that does occur is an individual deviation.

I pray that you all can avoid COVID-19 by observing the sanitary recommendations, and can engage in new challenges that you're passionate about, while achieving success in your research projects into the realities of family medicine, which I hope will result in publications in the pages of *FM&PCR*!