Before giving the comments on some important articles in this issue of the Medical Journal of Indonesia (MJI), I am pleased to announce some changes which have been done. The first change concerns the transformation of working system from conventional system to complete Open Journal System (OJS), and the second is the change in its appearance which is quite significant compared to that of the past 23 years. Along with the target of the MJI to become an internationally recognized scientific journal, implementation of the OJS system becomes a must. In this system, everyone of editorial board member, the peer review, as well as the author must work in harmony and in synchrony. The journal has to be ready for very timely working and should follow every step required by the OJS. As we know that in a developing country, where scientific culture is still far from hope, working in high speed, yet well organized and harmonized, is really not a simple problem.

As usual, the biggest problem comes from the quality of articles submitted. Approximately half, or may be more, of the articles can be classified as low scientific and poor writing quality. The dilemma faced by a developing journal such as MJI is whether to reject or to accept after substantial correction. Not like a big journal, in which all article which doesn’t meet the criteria are easily rejected, it is not the case for our journal. Due to the lack of submitted paper, we have to work hard helping the author to improve the quality of their paper, and it is very time and energy consuming. However, this should be done. Otherwise, we do not have sufficient number of manuscript to publish. Beside the delay from the part of author, the second delay may arise from reviewing process.

As already well known, the reviewers are independent people which have very heavy workload, and have no obligation to review the manuscript. All what they do depends on their willingness, and they are not rewarded for that. Only those who have time and willing to do so, will do it. In addition, the small journal is much less interested for reviewers. In many occasions, the reviewers are unable to finish the process in timely manner, and in this case, the editor should find another reviewer. However, the same problems are normally encountered. We hope that these problems would not become a serious obstacle for the future of MJI during implementation of the open journal system.

Along with major changes in the working system in this coming year, the MJI makes some significant changes in its appearance. A big change has been made in instruction for author in order to adapt more with the code of conduct from Committee on Publication Ethics (COPE) and the new update of International Committee of Medical Journal Editors. Change of cover layout with addition of logo and relevant figure in cover page is hoped to make it more attractive.

When turning the second page, the reader will see the new appearance in which the main and scope and some other information of this journal is clearly readable. Classification of each article into basic medical research, clinical research, or community medicine research is noted by a grey background letter and uses different type of character compared to previous editions.

In this issue, we are glad to have some important and interesting papers. As a country with a high endemic malaria, Indonesia faces a problem of drug resistance. The effort of identifying the factor responsible in this resistance should be greatly appreciated. The study conducted by Saleh et al\textsuperscript{1} from South Sumatra presented his finding of polymorphism of plasmodium falciparum chloroquin resistant transporter/pfcrt, and plasmodium falciparum multidrug resistant/pfmdr1. This finding is hoped to open our understanding on how
the resistance occur and it is hoped to open next findings of how this resistance could be overcome.

Dilogo et al\(^2\) presented his paper on the efficacy of allogenic mesenchymal stem cell in treating non-union bone fracture. This is an experimental animal study which has a big value as translational research. During this last decade, Indonesia has also implemented the use of stem cell in medicine. So far, Indonesia has implemented the autologous stem cell in the treatment of some diseases, while using allogenic stem cells is in research.

Not less interesting in this issue, is an in silico study by Mustarichie\(^3\) concerning some natural product which potentially used as inhibitors of alpha estrogen receptor, which ultimately directed for the treatment in breast cancer. This study enables us to make a high throughput screening of product to be used for breast cancer. Although, this study is not yet entering living organism, nor yet in tissue culture, it opens our mind how computer technology give important contribution in drug development research.

Two case reports in this issue are also very interesting. The first one is the case report by Sareo et al\(^4\) from India, who presented a very rare case of hepatocellular carcinoma in young adult with situs inversus totalis. Due to rareness of this case, misdiagnosis from physical examination is a common thing. Alertness of this author on chest X-ray has enabled early diagnosis of this rare disease.

A case report from Rohdiana,\(^5\) shows us of the delay of diagnosis of nasopharyngeal carcinoma, due to unspecific manifestation of the disease. In this case, a patient with non specific uncomfortable feeling of unilateral ear has been treated under uncertainty of diagnosis. After one year of delay, this patient is revealed to have nasopharyngeal carcinoma, and then treated specifically as it should be.

**REFERENCE**