The SARS-CoV-2 (COVID-19) pandemic was a sudden and unprecedented event that led to a radical change in dentistry globally. During the pandemic period, it was particularly difficult for the dental profession and for patients to be able to properly deliver and use dental care due to the risks of spreading SARS-CoV-2 (Public Health England, 2021), and therefore acted as a moment of deep and comprehensive reflection.

In this regard, the Evidence-Based Medicine (EBM) medical approach has been defined as "the judicious use of the best current evidence in making decisions about individual patient care". Following the SARS-CoV-2 pandemic, the use of a dental code of conduct at an international level has been requested and established thanks to scientific studies that have used EBMs in order to be able to codify a working methodology that could be of support to the international dental community to comply correctly and without risk with urgent care in the first pandemic phase, and routine maintenance in the subsequent and current stages.

The British Dental Association estimated that 19 million fewer dental treatments were provided during the pandemic due to routine dental care restrictions that meet patients’ needs or the dental profession by determining significant disparities between nations and continents (British Dental Association, 2020). The pandemic has further highlighted the limitations of the current modality of dental care, which does not meet the needs of patients or the dental profession, leading to essential disparities between nations and continents. In this regard, some evidence has identified the recovery from the pandemic as an ideal opportunity to be able to transform the dental care service for the better so that they are oriented towards preventive care. Moreover, there is also a need to address the oral health needs more equitably in the population and capitalize on the mix of skills and innovation while minimizing infections transmissible (Gabriel et al., 2018).

Beyond the current pandemic emergency, the biomedical sector must, however, face fundamental concomitant pressures, such as the raising of the demographic age and the chronic course of a considerable number of pathologies even more aggravated by the diagnostic delay caused by the pandemic that professionals and institutions will have to face and on which to develop effective and sustainable care responses. Consequently, it now becomes a high priority to promoting models of care in dentistry that provide for the constitution of multidisciplinary teams capable of integrating different professionals for increasingly effective care of the person that allows overall patient care.

In the light of the evidence analyzed, the concept of active patient care based on the best evidence has assumed an ever more excellent value both in the scientific field and in healthcare practice.

To echo all this, the current and ever-increasing web and network revolution determine a continuous updating of treatment methods in dentistry, with an approach increasingly based on personalized and multidisciplinary medicine that is irreversibly destined to transform medicine and modern dentistry.

Therefore, given the continuous increase in the demand for more evidence in the dental field, in agreement with the editorial committee, I agreed to open - as Section Editor - a new specific section from the "dentistry" theme of the journal that could better meet all the needs of dental researchers.

Heliyon Dentistry, a section in Heliyon, will have as its primary purpose the publication of original scientific and clinical research articles, including short communications with a methodological impact in the field of dentistry.

Every crisis comes out exclusively through competence, research and innovation.

Through strict cooperation among Section Editor, Associate Editors, Advisory Board Members and reviewers, the dentistry section aims to contribute and make science widely available so that dentistry and general medicine can serve and transform society positively impact the lives of the people.

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References

British Dental Association, 2020. Dentists: Government Holds the Key to Restore Services to Millions. Available at. https://bda.org/news-centre/press-releases/dentists-government-holds-the-key-to-restore-services-to-millions (accessed October 2021).

Gabriel, M., Cayetano, M.H., Galante, M.L., Carrer, F.C., Dussault, G., Araujo, M.E., 2018. A global overview of the geographical distribution of dentists: a scoping review. JDR Clin. Trans. Res. 3 (3), 229–237.

Public Health England, 2021. COVID-19: Guidance for Maintaining Services within Health and Care Settings - Infection Prevention and Control Recommendations. Available at. https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-guidance-for-maintaining-services-within-health-and-care-settings-infection-prevention-and-control-recommendations (accessed October 2021).

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