Dear readers,

And so 2017 comes to an end and 2018 begins. This has been an eventful year with political and climate issues impacting all, even health care. It is hard to predict what the coming year will bring – it highlights how poor at prediction we are, even in medicine. I am reminded of this every time I calculate cardiovascular risk for a patient. We can calculate probabilities but these calculations cannot say whether the individual who sits in front of me will fall into the 20% who will have a cardiovascular event in ten years or the 80% who will not.

This year, the Board of Editors came together to revisit the aims and objectives of this journal. Our focus will continue to be on family medicine in Malaysia as it has always been. We aim to act as the voice of family physicians both locally and globally. The objectives of the Malaysian Family Physician are to disseminate both research and education relevant to family medicine. We will continue to publish both research and educational articles but have added a new section: ‘A Moment in the Life of a Family Physician’. This will be published in the form of a short narrative that will share perspectives, views and opinions on a family physician’s experience that has had an impact on their practice or life. Sharing of views and experiences has always been an important part of family medicine and we hope that this will similarly play an important part in our journal.

At times, the different areas covered, namely research, training and clinical practice, seem very different from one each other. But in reality all of them have their roots in evidence-based medicine (EBM). EBM has taken a beating lately from academicians, clinicians and politicians. Yet, we cannot and should not diverge from this approach even when it is no longer trendy. Like all root concepts, it helps to inform and guide us. This approach attempts to ensure that medical decision-making is patient-centred and based on the best available research evidence (even if the best available is simply a case report) and clinical expertise. This approach is not easy because it requires time and resources. This approach is not simple because it requires that attention be paid to all three aspects. This approach is not always what the patient wants the treatment to be, what the doctors think is the best approach, nor what the policy maker believes is the most effective strategy. But medical decisions are seldom easy or simple to make and should not be based simply on views, opinions or trends. We practice EBM because it helps guide complex decisions and medical decisions are usually complex.

The Malaysian Family Physician would like to wish all our readers a Happy New Year.