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## *Editor's choice*

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Clinical medicine is becoming a dying art. Secondary dysmenorrhoea and menorrhagia in a parous woman does not ring a bell in many practitioners today. Instead, the three features are independently considered, examination is done without thinking of the most possible diagnosis of adenomyosis. A vaginal ultrasound probe is inserted and ultrasound waves are expected to give the magic diagnosis.

It is about time that the art of clinical diagnosis is revived and ancillary information is prudently applied to ascertain a definitive diagnosis. Dr. Tiran Dias and Prof. Baski Thilaganathan's commentary on the role of ultrasound in obstetrics is an article which has been over due for a long time.

A revisit to the asymptomatic bacteriuria by Prof. Jeniffer Perera is comprehensive yet easy to absorb. It is frequently met in exams and in clinical practice, thus it's inclusion in this issue.

On behalf of Sri Lanka College of Obstetricians and Gynaecologists, I wish to express my gratitude to all contributors, both overseas and local for helping me to compile an appealing assortment of informative articles. I hope the good trend will continue and an environment of practical yet evidence based clinical medicine thrives.

**Hemantha Perera**

*Editor*