

## EDITORIAL | INAUGURAL ISSUE

# From physicochemical reality to reliable digital evidence

## Physicochemical foundations for translational research

Lisandro Gonçalves, DDS, MSc<sup>1,2</sup>

<sup>1</sup> Editor-in-Chief, Journal of Digital Health and Advanced Biomaterials (JDHAB), Maringá, Paraná, Brazil.

<sup>2</sup> MSc Program in Endodontics, University of Ribeirão Preto, São Paulo, Brazil.

ORCID: 0009-0004-8140-2876 · Corresponding author: editor@jdhhab.org

**Published** 7 March 2026

**DOI** to be assigned

**Article type** Editorial

**Issue** Vol. 1, No. 1, 2026

**ISSN** to be assigned

**Editorial process** Editorial assessment

## ABSTRACT

This inaugural editorial defines the scientific identity of the *Journal of Digital Health and Advanced Biomaterials* (JDHAB) by arguing that credible digital health evidence must remain accountable to physicochemical reality, methodological transparency, and clinically interpretable outcomes. It positions digital health, advanced biomaterials, and translational sci-

ence as convergent fields united by rigorous measurement, reproducibility, validation, and responsible innovation. The journal therefore welcomes experimental, translational, clinical, methodological, and analytical studies that connect material characterization, data generation, and health-related evidence through robust design and clear editorial standards.

## KEYWORDS

digital health; advanced biomaterials; translational research; methodological rigor; digital evidence.

### How to cite:

Gonçalves L. From physicochemical reality to reliable digital evidence. *J Digit Health Adv Biomater.* 2026;1(1):1-4. doi: to be assigned.



**Online version**

Scan the QR code to access the official journal platform.

The *Journal of Digital Health and Advanced Biomaterials* (JDHAB) is grounded in a simple, though scientifically demanding, premise: in health research, digital claims become credible only when they remain accountable to the material phenomena they seek to describe, measure, or transform. Hypotheses are tested at that level. Methods either hold or fail there. Inference, likewise, finds its support there - or not. Measuring, modeling, and controlling the physicochemical behavior of systems is therefore not a peripheral technical task. It is a central condition for innovation that is both technically consistent and clinically relevant.<sup>1-3,11,13</sup>

The most durable advances in digital health rarely result from computational sophistication alone. They depend, rather, on rigorous attention to signals, materials, biological variability, calibration, sampling, uncertainty, and physical interaction. The same reasoning applies to advanced biomaterials. What endures is not what merely impresses at first encounter, but what can relate composition, microstructure, and performance through valid methods, reproducible protocols, and transparent documentation. JDHAB is situated precisely within that zone of convergence. Its purpose is not simply to assemble adjacent fields, but to recognize the scientific demand they share: the translation of physicochemical understanding into digital evidence that is robust, verifiable, and open to scrutiny.<sup>2,7,8,11,12,14</sup>

This convergence is not rhetorical. Decisions in health depend on evidence that can be justified, reproduced, and interpreted with precision. Yet the real is seldom stable or uniform. It appears through biological heterogeneity, contextual variation, acquisition limits, and interpretive difficulty. In that setting, innovation cannot be reduced to functionality alone. It must also yield results that are traceable, replicable, clinically intelligible, and defensible under sustained critical examination.<sup>2,3,8,10</sup>

### Scope and objectives of the journal

If JDHAB begins from the requirement that the digital must remain answerable to the real, its scope must be consistent with that commit-

ment. The journal is devoted to publishing studies that contribute, at different levels of inquiry, to the advancement of digital health, advanced biomaterials, translational science, and innovation applied to health care.<sup>1,11</sup>

This includes work on biosensors, digital platforms, artificial intelligence, telemonitoring, data science, diagnostic instrumentation, functional biomaterials, bioactive interfaces, surface engineering, delivery systems, regenerative devices, and clinical or experimental applications in which the relation between materiality, measurement, and evidence is decisive. Experimental, translational, clinical, methodological, and analytical studies are all welcome, provided that they rest on sound design, demonstrable scientific relevance, and interpretive clarity.<sup>11,13-15</sup>

Underlying this editorial position is a refusal to treat digitalization, material characterization, and experimental validation as dissociated domains. The journal is not guided by novelty in isolation, nor by the uncritical adoption of emerging technologies. Its concern is with knowledge that is methodologically intelligible, scientifically solid, and capable of remaining relevant under critical review.<sup>2,6,8</sup>

### Commitment to rigor and editorial integrity

If digital evidence retains value only insofar as it remains tied to the material and methodological conditions that produce it, editorial rigor cannot be treated as a merely administrative stage. It is part of the journal's identity. In fields increasingly marked by automation, processing speed, and models whose internal operation is not always transparent, rigorous editing means preserving the scientific intelligibility of what is published.<sup>2,3,8-10</sup>

For that reason, JDHAB adopts methodological clarity, analytical consistency, and transparency in the presentation of results as central editorial references. The journal values manuscripts whose procedures can be followed, whose limitations are stated objectively, and whose conclusions remain proportionate to the available evi-

ence. Technological sophistication does not reduce the demand for intelligibility. If anything, it intensifies it.<sup>4-7</sup>

The same principle guides editorial assessment. Manuscripts are examined according to scientific merit, ethical integrity, data traceability, coherence between method and inference, and relevance to both academic and professional communities. When appropriate, the journal expects precise descriptions of protocols, measurement conditions, statistical procedures, validation strategies, calibration parameters, reproducibility conditions, data availability, and potential conflicts of interest. This is not formalism. It is a means of ensuring that published knowledge can be read with confidence, examined with rigor, and used with responsibility.<sup>3-9</sup>

By contrast, the journal does not accept opacity as a substitute for consistency. In areas where scientific maturity does not always advance at the same pace as technological innovation, JDHAB adopts a clear position: innovation acquires scientific value only when it can be verified, critically discussed, and sustained under methodological scrutiny.<sup>2-6,9,10</sup>

### **Inaugural statement**

This first issue marks more than the launch of a new title. It establishes an editorial space oriented by rigor, relevance, and responsibility. JDHAB begins its trajectory with the aim of bringing together contributions capable of articulating technical precision, clinical relevance, experimental consistency, and intellectual re-

sponsibility. Its goal is not merely to follow developments in the field, but to participate in defining the standards by which those developments ought to be assessed.<sup>1-3,11</sup>

As an inaugural statement, this text also clarifies the identity of the journal before readers, authors, reviewers, and indexing and formalization processes. It delineates the scientific scope of the periodical, the aims that orient its editorial project, and the parameters by which it seeks to build credibility, continuity, and institutional recognition. Within that same movement of consolidation, JDHAB now includes the participation of Professor Marlene Gonçalves Curty as Managing Editor for Standards, Methodology and Indexing. Her experience in scientific methodology, document standardization, information science, and the editorial development of scholarly journals constitutes a relevant contribution to the journal's technical consistency and institutional maturation.<sup>7,8</sup>

Researchers, clinicians, engineers, and scholars from related fields are invited to submit work capable of withstanding not only immediate interest, but also the continuing examination of time, method, and scientific community. Ultimately, it is this horizon of permanence, more than novelty in isolation, that gives a journal density and justifies its existence.<sup>2,8</sup>

#### **Lisandro Gonçalves, DDS, MSc**

Editor-in-Chief, JDHAB  
Maringá, Paraná, Brazil  
ORCID iD: 0009-0004-8140-2876  
editor@jdhhab.org

## References

1. World Health Organization. Global strategy on digital health 2020-2025. Geneva: World Health Organization; 2021.
2. Kelly CJ, Karthikesalingam A, Suleyman M, Corrado G, King D. Key challenges for delivering clinical impact with artificial intelligence. *BMC Med.* 2019;17(1):195. doi:10.1186/s12916-019-1426-2.
3. Goldsack JC, Coravos A, Bakker JP, Bent B, Dowling AV, Fitzer-Attas C, et al. Verification, analytical validation, and clinical validation (V3): the foundation of determining fit-for-purpose for biometric monitoring technologies (BioMeTs). *npj Digit Med.* 2020;3:55. doi:10.1038/s41746-020-0260-4.
4. Liu X, Cruz Rivera S, Moher D, Calvert MJ, Denniston AK; SPIRIT-AI and CONSORT-AI Working Group. Reporting guidelines for clinical trial reports for interventions involving artificial intelligence: the CONSORT-AI extension. *BMJ.* 2020;370:m3164. doi:10.1136/bmj.m3164.
5. Cruz Rivera S, Liu X, Chan AW, Denniston AK, Calvert MJ; SPIRIT-AI and CONSORT-AI Working Group. Guidelines for clinical trial protocols for interventions involving artificial intelligence: the SPIRIT-AI extension. *BMJ.* 2020;370:m3210. doi:10.1136/bmj.m3210.
6. Collins GS, Moons KGM, Dhiman P, Logullo P, Beam AL, Peng L, et al. TRIPOD+AI statement: updated guidance for reporting clinical prediction models that use regression or machine learning methods. *BMJ.* 2024;385:e078378. doi:10.1136/bmj-2023-078378.
7. Wilkinson MD, Dumontier M, Aalbersberg IJ, Appleton G, Axton M, Baak A, et al. The FAIR Guiding Principles for scientific data management and stewardship. *Sci Data.* 2016;3:160018. doi:10.1038/sdata.2016.18.
8. National Academies of Sciences, Engineering, and Medicine. Reproducibility and replicability in science. Washington (DC): National Academies Press; 2019. doi:10.17226/25303.
9. U.S. Food and Drug Administration, Health Canada, Medicines and Healthcare products Regulatory Agency. Good machine learning practice for medical device development: guiding principles. Silver Spring (MD): U.S. Food and Drug Administration; 2021.
10. U.S. Food and Drug Administration, Health Canada, Medicines and Healthcare products Regulatory Agency. Transparency for machine learning-enabled medical devices: guiding principles. Silver Spring (MD): U.S. Food and Drug Administration; 2024.
11. Ratner BD, Hoffman AS, Schoen FJ, Lemons JE, editors. Biomaterials science: an introduction to materials in medicine. 4th ed. London: Elsevier; 2020.
12. Roach P, Farrar D, Perry CC. Interpretation of protein adsorption: surface-induced conformational changes. *J Am Chem Soc.* 2005;127(22):8168-73. doi:10.1021/ja042898o.
13. International Organization for Standardization. ISO 10993-1:2018. Biological evaluation of medical devices - Part 1: Evaluation and testing within a risk management process. Geneva: International Organization for Standardization; 2018.
14. D'Alton L, Souto DEP, Punyadeera C, Abbey B, Voelcker NH, Hogan C, et al. A holistic pathway to biosensor translation. *Sens Diagn.* 2024;3(8):1234-1246. doi:10.1039/D4SD00088A.
15. de Farias FAC, Dagostini CM, Bicca YA, Falavigna VF, Falavigna A. Remote patient monitoring: a systematic review. *Telem J E Health.* 2020;26(5):576-583. doi:10.1089/tmj.2019.0066.

## License and reuse

© 2026 Lisandro Gonçalves. This work is licensed under a Creative Commons Attribution 4.0 International License (CC BY 4.0).



Creative Commons Attribution 4.0 International (CC BY 4.0)  
<https://creativecommons.org/licenses/by/4.0/deed.en>



Online version

## Publisher AI and text-mining notice

Automated bulk harvesting, scraping, or machine-learning reuse of the journal platform requires prior written permission where applicable.