Current Perspective

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Ophthalmology Retina: Why a New Journal?

ecently, the Academy announced a new journal in our field: *Ophthalmology Retina*. This is a pretty big deal as it will be our first new peer-reviewed journal in over 100 years.

Some history: *Ophthalmology*'s predecessor journal (*Transactions of the American Academy of Ophthalmology and Otolaryngology*) was published annually in a single bound volume until 1941, when it became bimonthly. With the separation of otolaryngology and ophthalmology into discrete academies in 1978, *Transactions* was renamed *Ophthalmology*, accepted "free papers," and expanded to monthly issues. From these roots, the journal has flourished far beyond expectations, moving from soliciting free papers in 1978 to now receiving more than 2,500 submissions annually!

This huge number of submissions, as well as the highest impact factor among ophthalmology journals, reflect the efforts and expertise of those who make the journal a success: the Editorial Board, reviewers, Editor-in-Chief, Editorial Director, and staff—and, most of all, the talented investigators and authors in our field.

Ophthalmology accepts about 12% of submitted manuscripts, and this creates a wonderful problem, but a problem nonetheless. What do we do with the many hundreds of favorably reviewed and deserving manuscripts that *Ophthalmology* is forced to reject for lack of space? We considered increasing the frequency of publication to every 2 weeks. However, on analysis, we found that a substantial portion of the growth in manuscript submissions occurred in a single subspecialty: retina.

We believe that the high-quality retina papers *Ophthal-mology* now rejects can become the core material for another journal. Of course, the retina papers with the broadest interest will continue to be published in *Ophthalmology*. The vitreoretinal subspecialty is not without subspecialty journals. The independent journal, *Retina*, for example, has been published since 1981. Under the leadership of its splendid Editor-in-Chief, Alexander (Sandy) Brucker, MD, it has grown to a monthly publication with a strong reputation. However, the vast quantity of manuscripts received by *Ophthalmology* indicates a need for more publishing capacity in the subspecialty.

The name *Ophthalmology Retina* was chosen to indicate that its home is within the *Ophthalmology* journal family. I've already been asked: Does this mean that *Ophthalmology Glaucoma* and *Ophthalmology Pediatrics* will soon follow? Absolutely and positively not. The American Glaucoma Society and the American Association for Pediatric Ophthalmology and Strabismus each publishes a subspecialty journal, and these journals are well suited to serve the volume of high-quality new science in their respective fields (combined with the additional capacity provided by the larger, specialty-wide journals).

Ophthalmology Retina will offer a tremendous advantage to authors through its seamless editorial link to *Ophthal*-

mology, whereby retina reviews will be coordinated between the 2 journals. For both the author and the reader, this means faster turnaround from submission to publication. The information will be more current. And, yes, the journal will appear both in print and online. Ophthalmologists have made it very clear that they prefer to have both options.

Finally, *Ophthalmology Retina* has a secret weapon—Dr. Andrew Schachat. In 2012, Andy completed a decade of service as Editor-in-Chief of *Ophthalmology* and remains one of its two Distinguished Senior Editors. A highly respected retina clinician and Vice-Chair at the Cleveland Clinic's

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Cole Eye Institute, he remains on the *Ophthalmology* editorial board and now also becomes the inaugural Editor-in-Chief of *Ophthalmology Retina*.

The first issue is scheduled to appear in January-February 2017. Manuscripts can be submitted now to the *Ophthal-mology* website; the *Ophthalmology Retina* submission portal will open Aug. 1, 2016. My sincerest thanks to all involved in birthing the Academy's newest peer-reviewed journal.