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Looking forward to another exciting year of *Clinical Ophthalmology*

Welcome to the first edition of *Clinical Ophthalmology* of 2008. This is our second year of publication after an extremely busy first year. We continue to get a huge number of submissions and this has accelerated now that the journal is almost completely open access. The reasons for this acceleration may be wider access of published articles from the journal or may simply be a result of the number of excellent articles that continue to be rejected by the more established journals. The latter often cite lack of print space as a reason for this rejection – something that we at *Clinical Ophthalmology* will never do. If our peer reviewers feel an article is good enough, then it will be published.

As a testament to this excellence you can browse the current edition and, whatever your interests are, you will be sure to find at least one paper that catches your eye. For an up-to-date review of the role of ranibizumab in age-related macular degeneration treatment turn to the review by Spitzer and colleagues (2008). To give some hope to your patients with homonymous hemianopias, look at the work by Lane and colleagues (2008). The thorny issue of raised intraocular pressure after intravitreal triamcinalone is discussed by Kocabora and colleagues (2008).

As always, we carry a number of case reports. I have previously discussed the role of case reports in journals, but there is little doubt they are popular among readers. This may be because they so obviously reflect the idiosyncrasies of daily practice. Who can resist such titles as 'Ischemic maculopathy in zidovudine-induced anemia in an HIV-positive man' (Yoganathan & Austin 2008) or 'Inverse Argyll Robertson pupil in Burkitt's lymphoma' (Chalam et al 2008), or 'Experimental effect of retinoic acids on apoptosis during the development of diabetic retinopathy' (Nishikiori et al 2008)?

Finally, those of you who read my last editorial will realize that I am very pleased that this edition carries 'Letters to the Editor'. As I had mentioned excellent letters, such as two you will find in the current edition, represent dynamism in a journal. This is something we constantly have and will continue to strive for. So, once again, if you have any comments in regard to the papers in this edition – positive, negative, or adding further information – please do not hesitate to contact me.

References

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