Publication objectives and processes at the *British Journal of Ophthalmology*: what authors and readers need to know

Frank Larkin ¹, Ludwig M Heindl,² Mingguang He ³,
Mariya Moosajee ^{4,5}

What articles do we seek to publish in the *British Journal of Ophthalmology* (BJO)? First, novel information from clinical studies and laboratory research which will influence practice and policy in ophthalmology, or our thinking on eye disease. Second, reviews on a disease area written by leading investigators who have published extensively on the topic. These are usually commissioned but uninvited review articles by experts in the field are occasionally accepted for the opinion of referees. Third, editorials commissioned to accompany articles particularly worthy of comment.

With a new BJO editorial board commencing duty in 2021¹ it is an appropriate time to review the journal's publishing policies and processes which facilitate publishing the above. These processes must serve the journal's objectives in putting highest value on thorough clinical or laboratory evaluation, on independent analysis and helping readers evaluate innovation, all of these to attract and disseminate the most influential articles as widely as possible.

PROCESS FOR MANUSCRIPT REVIEW AND PUBLICATION DECISION

The journal commits to review processes which are as fast as possible, while allowing the time essential to secure and allow rigorous reviews. In 2020 the acceptance rate of submissions was 16%, average interval to first decision was 16 days, and the time from acceptance to publication was 18 days. As a first stage all appropriately submitted manuscripts will

be evaluated by one of the senior editors within 1 week for overall quality and priority for publication in the BJO. At this stage, editors may judge that a manuscript would be more appropriate for a subspecialty journal or that it would justify fast-track review and publication. This rapid first decision allows authors to submit their manuscript to an alternative journal with minimum delay. In a second step editorial board members with the appropriate ophthalmology subspecialty expertise will distribute 30%–40% of submitted manuscripts for peer review, to be completed within 2 weeks. Reviewers will recommend acceptance for publication, revision with minor or major suggested amendments, or rejection. Authors will be asked to submit their revised manuscripts within 6 weeks. If these revisions are sufficient to address editors' and reviewers' comments, the manuscript can usually be accepted within 1 week of resubmission.

FAST-TRACK DECISION-MAKING AND PUBLICATION PROCESS FOR CLINICAL TRIALS

Authors of major clinical trial reports with potential to impact clinical practice should know that special publication arrangements are now in place for trials which can be requested at submission. Nor is that all, as we will also consider publication of clinical trial protocols and statistical analysis plans. These will be peer-reviewed—but not published—by the BJO and published in our online partner journal *BMJ Open Ophthalmology*. When the trial results paper is subsequently submitted to the BJO, provided the study follows through the methodology of the already reviewed protocol, it will be fast-tracked through review, journal production and prioritised for publication; this should be requested in the submission cover letter. These papers will not be rejected on the outcomes of the study, but only if there are major flaws in either the conduct of the study (eg, if it deviates from the reviewed protocol) or the writing of the paper. In addition an online publication embargo

until their chosen date will allow authors to have their publication scheduled to coincide with a conference presentation or press release.

EXPERT AND OBJECTIVE PUBLICATION DECISION-MAKING

The two principles underlying peer review will be (1) expertise and (2) objectivity and fairness. Editorial board members are selected for their knowledge of their field and research methodologies therein. The principle of fairness, meaning the greatest possible freedom from bias, is less easy to ensure. Transparency facilitates this, best exemplified by the BJO recusal process. For a particular submission, editorial board members (including the editor-in-chief, whose recusals transfer to the deputy editors) withdraw from any editorial responsibility when they believe that objectivity may not be maintained due to institutional affiliation, personal or financial reasons. A further clear example is when an editorial board member is coauthor or collaborator on a manuscript.

PROCESS FOR PUBLICATION AND DISSEMINATION

Other than fast-track publication detailed above, the BJO is committed to publishing original articles online first in a fully citable form within 3 weeks of acceptance and can be viewed on the 'Latest Content' page (<https://bjo.bmj.com/content/early/recent>). Authors whose work is accepted for publication in the journal benefit from excellent exposure: in 2020 the BJO site had over 2 million page views (36.7% from Asia, 29.4% Americas, 26.0% Europe) and 938 949 total content accesses (30% in the USA).

One of the positive consequences of the COVID-19 pandemic is heightened public and media interest in medical research—evidence for proposed new treatments and its reliability, clinical trials, comparative mortality rates, statistical analysis etc.—and this is likely to continue post pandemic. Moreover, there is significant public interest in sight and vision loss² which deserves more coverage in the general news media. For these reasons newsworthy BJO papers will be selected by BMJ for press release; the media team will liaise directly with the authors and their institutions. The latest papers will be highlighted by the journal's social media editor on our twitter feed @BMJ_Ophth and the facebook page @BMJOphthalmology, and we encourage all authors to share their Twitter handle when they submit their paper. For more advice on

¹NIHR Moorfields Biomedical Research Centre, London, UK

²Department of Ophthalmology, University of Cologne, Köln, Germany

³Centre for Eye Research Australia, University of Melbourne, Melbourne, Victoria, Australia

⁴Development, Ageing and Disease, UCL Institute of Ophthalmology, London, UK

⁵Genetics, Moorfields Eye Hospital NHS Foundation Trust, London, UK

Correspondence to Prof Frank Larkin, NIHR Moorfields Biomedical Research Centre, London EC1V 2PD, UK; f.larkin@ucl.ac.uk

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Finally, there is an ambition that the *BJO* will fulfil the criteria of the transformative journal policy detailed in 'Plan S' by gradually transitioning all of its research to open access while ensuring that all authors can continue to publish in the journal, regardless of their funding provision. Plan S is endorsed by a number of funders in

cOAlition S, including the Wellcome Trust, UK Research and Innovation, the European Research Council and the Bill & Melinda Gates Foundation, who may eventually stop funding open-access publications in hybrid journals. If or when this happens, the *BJO* will be ready.

Twitter Mariya Moosajee @MariyaMoosajee

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ORCID iDs

Frank Larkin <http://orcid.org/0000-0003-2506-0280>
Mingguang He <http://orcid.org/0000-0002-6912-2810>

Mariya Moosajee <http://orcid.org/0000-0003-1688-5360>

REFERENCES

- 1 Larkin F. Success and succession. *Br J Ophthalmol* 2021;**105**:445.
- 2 Enoch J, McDonald L, Jones L, *et al.* Evaluating whether sight is the most valued sense. *JAMA Ophthalmol* 2019;**137**:1317–20.