Netted!

The BJO has joined the increasing number of journals to have a ‘website’, a term for an information source on BJO matters which can be ‘accessed’ via the Internet. Actually, the BJO takes its place among the 30 or so specialist journals published through BMJ publications. Information that is available to ‘website visitors’ includes contents of the latest issue, an archive of contents, details of membership of the editorial board, instructions for authors, plus subscription details. In the future, article abstracts will be available but there are no plans as yet to publish the journal in full ‘online’. There are multiple reasons for this, one of which is lack of information on readership acceptability of an online publication as opposed to ‘hard copy’. Of course, equally important are problems such as how such publications would be peer reviewed and who should have access to the full publication for what is after all a free service (for the moment). In the meantime, the BJO website is looking forward to a large number of visitors and of course feedback. The address is http://www.bmjrg.com/data/sjbody.htm

A forum for the ophthalmic physician?

A recent commentary in the BJO highlighted the widening dichotomy between the ophthalmic surgeon and the ophthalmic physician, in part spearheaded by the new subspeciality of medical ophthalmology. Developments like these are fashioned by changes in practice and indeed the ever increasing subspecialisation in ophthalmology has necessitated the emergence of fully trained ophthalmic physicians who are expert in diagnosis and management of many difficult medical ophthalmic conditions, properly out of the purview of the superspecialist surgeon.

As a result a new association has been formed—namely, the UK Medical Ophthalmological Society, which held its second meeting at the start of the year (Birmingham, 17 January 1997). The remit of the society is to bridge the gap between the physician and the ophthalmologist and it aims to attract members from both sides of the divide. Its field of interest is very broad and includes cardiovascular disease, rheumatology, immunology and inflammation, endocrinology, and neurology and, indeed, any aspect of general medicine that may impinge on ophthalmology and vice versa.

The first meeting in 1996 emphasised diabetes and the eye, while the second meeting comprised in part a symposium on Sjogren’s syndrome. Like the new subspeciality of medical ophthalmology, the MOS has had broad support from members of the Royal College of Physicians and the Royal College of Ophthalmologists. The next meeting is provisionally planned to be held in the Royal College of Physicians, London in 1998.

Contact lenses under the microscope

Public awareness programmes on TV such as Watchdog clearly have an effect. As a result of a recently raised issue concerning the safety of contact lenses (Watchdog, BBC1, 13 February 1997), the British Standards Institution has set a new standard for the production of contact lenses which the consumer will be able to verify by looking for the new standard number on the packaging of lenses (BS7208). Thus, the consumer will be able to feel comfortable that any claims made by the manufacturer regarding, for instance, reduction of UVA radiation by the lens or level of release of potentially toxic substances from the lens are, in fact, true. There are now 11 parts to the standard dealing with optical and non-optical properties of lenses and presumably new parts will be added as newer processes and biomaterials are introduced.

The visually impaired child

A recent survey by LOOK Scotland (the Scottish Federation of Families with Visually Impaired Children) has reported on the experiences of 56 blind or partially sighted children which indicated a worrying failure to provide for the needs of the children and their families as fully as might have been expected in today’s climate of awareness. The problem may be that despite many excellent statutory and voluntary services being available for such children, the logistics of bringing those services to the child may be the main deterrent, particularly in the presence of multiple handicap. The Royal National Institute for the Blind has started a campaign of education among health workers to raise awareness in this area, particularly at the point of diagnosis to ensure that the various agencies combine more effectively.