LETTER TO THE EDITOR

Analysis of publication trends in two internationally renowned ophthalmology journals

EDITOR.—International journals represent a forum for exchange of current information with contributions from all over the world. High standards are essential. In this report, we compared the publishing trends of two internationally renowned ophthalmology journals—the *British Journal of Ophthalmology* (*BJO*) and the *American Journal of Ophthalmology* (*AJO*).

METHOD AND RESULTS

Using the public Medline facility provided by the National Institutes of Health, the numbers of prospective studies and case reports published in the *AJO* and the *BJO* from January 1980 to December 1999 were determined. These were done using the following keyword searches: “prospective” and “case report.” The countries of origin of the articles were counted manually for the years 1990 and 1999, and were taken as the addresses of the corresponding author. Keyword searching was not possible owing to the non-uniformity of the way the addresses were registered.

The total number of publications remained fairly constant in the *AJO* over the two decades (Fig 1A). The percentage of prospective studies increased greatly from 1% to 12% (Fig 1B). Case reports, on the other hand, constituted 34–45% of the published articles (Fig 1C) with no obvious trend.

In comparison, there was a steady increase in the total number of articles (Fig 1A) in the

Figure 1 Histograms showing (A) the total number of articles (B) the percentage of prospective articles, and (C) the percentage of case reports in 2 yearly intervals in both journals.

Figure 2 Histograms showing the contributions from native and foreign countries in the years 1990 and 1999 in the two journals.

BJO. The trends in the percentages of prospective studies and of case reports were similar to that in the *AJO* (Fig 1B and C).

The native countries (that is, the countries in which the journals are published) were the major contributors of articles for their respective journals (Fig 2A). The United States made a considerably larger contribution to the *BJO* than the United Kingdom did to the *AJO* (Fig 2B). Comparing 1990 with 1999, the contribution from foreign countries had risen significantly from 40% to 60% in the *BJO* and from 14% to 36% in the *AJO*. The top few foreign countries contributing to the respective journals are shown in Figures 2C and D.

COMMENT

In an ideal world, all studies will be randomised and controlled. In reality, however, this is often not the case for various reasons. In our present study, we arbitrarily and simplistically chose the prospective design as an indicator of a good quality publication. In both the *BJO* and the *AJO*, there had been an increasing percentage of prospective studies published (from 3% to 6% and from 1% to 12% respectively) over the past two decades. This is an encouraging sign but the percentages remain small, especially in the *BJO*, when compared with other types of publications. This is not necessarily the fault of the journals but merely a reflection of the research work done during that period.

Contributions from abroad appeared to be on the increase in both journals when comparing 1990 with 1999 with the *BJO*

being the more cosmopolitan of the two. This increasing trend of foreign contribution was also noted by Kaugars *et al* in the journal *Oral Surgery Oral Medicine Oral Pathology*.¹

There are limitations to the present study. The *AJO* and the *BJO* may not be representative of the international ophthalmic journals from the United States and the United Kingdom respectively. Secondly, the total number of articles may be deceptive as the *BJO* and the *AJO* may have articles such as book reviews, editorials, letters, etc at different frequencies. Thirdly, there is the possibility of inadequate keyword classification of the publications in the journals. Finally, the address of the corresponding author may not always correspond to the country where the research was performed.

In conclusion, our study suggests that the standard of publications has improved in the *AJO* and the *BJO*, with an increasing international contribution over the past two decades.

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- 1 Kaugars GE, Riley WT, Grisius TM, *et al*. Comparison of articles published in Oral Surgery Oral Medicine Oral Pathology in 1972 and 1992. *Oral Surg Oral Med Oral Pathol* 1994;78:351-3.

BOOK REVIEW

Colour Atlas of the Eye in Systemic Disease. Eds DH Gold, TA Weingeist. Pp 663; £115. Philadelphia: Lippincott Williams & Wilkins, 2001. ISBN 0-397-51525-1.

This is a large reference multiauthored, well illustrated text on a multitude of systemic conditions that have ophthalmic manifestations. It certainly is an enjoyable book to "flick through," with some excellent photographs ranging from retinal disorders associated with infection and systemic disease to genetic disorders, including a multitude of pictures on dysmorphic syndrome. There are chapters on relatively rare conditions such as ocular pharyngeal muscular dystrophy, periodic paralysis and myopathies, and encephalopathies associated with vitamin disorders. The list goes on and indeed the book is a useful reference, with illustrations and bullet points on the manifestations seen in these diseases. But, without prior knowledge or other texts to read the book is not easy to use. However, with an impressive 159 chapters every library should have this book is on the shelf. It would offer residents and students from all disciplines the opportunity to appreciate how many diseases have ocular manifestations. What a great subject we are involved with!

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NOTICES

Onchocerciasis

The latest issue of *Community Eye Health* (No 38) discusses onchocerciasis and the impact of interventions, with an editorial by Bjorn Thylfors, former director of the Programme for the Prevention of Blindness and Deafness, WHO. For further information please contact *Community Eye Health*, International Centre for Eye Health, Institute of Ophthalmology, 11-43 Bath Street, London EC1V 9EL. (tel: (+44) (0) 20-7608 6909/6910/6923; fax: (+44) (0) 7250 3207; email: eyesource@ucl.ac.uk) Annual subscription £25. Free to workers in developing countries.

International Centre for Eye Health

The International Centre for Eye Health has published a new edition of the *Standard List of Medicines, Equipment, Instruments and Optical Supplies* (2001) for eye care services in developing countries. It is compiled by the Task Force of the International Agency for the Prevention of Blindness. Further details: Sue Stevens, International Centre for Eye Health, 11-43 Bath Street, London EC1V 9EL, UK (tel: (+44) (0) 20-7608 6910; email: eyesource@ucl.ac.uk).

Second Sight

Second Sight, a UK based charity whose aims are to eliminate the backlog of cataract blind in India by the year 2020 and to establish strong links between Indian and British ophthalmologists, is regularly sending volunteer surgeons to India. Details can be found at the charity website (www.secondsight.org.uk) or by contacting Dr Lucy Mathen (lucymathen@yahoo.com).

Specific Eye ConditionS (SPECS)

SPECS is a not for profit organisation acting as an umbrella organisation for support groups of any conditions or syndrome with an integral eye disorder. The SPECS website (www.eyecconditions.org.uk) acts as a portal to support groups, and is a valuable resource for professionals and may also be of interest to people with a visual impairment or who are blind. Further details: Kay Parkinson, SPECS development officer. (tel: +44 01803 524 238; email: k@eyecconditions.org.uk).

41st St Andrew's Day Festival Symposium on Therapeutics

The 41st St Andrew's Day Festival Symposium on Therapeutics will be held on 6-7 December 2001 at the Royal College of Physicians of Edinburgh. Further details: Ms Eileen Strawn, Symposium Co-ordinator (tel: 0131 225 7324; fax: 0131 220 4393; email: e.strawn@rcpe.ac.uk; website: www.rcpe.ac.uk).

4th International Conference on the Adjuvant Therapy of Malignant Melanoma

The 4th International Conference on the adjuvant therapy of malignant melanoma will

be held at The Royal College of Physicians, London on 15-16 March 2002. Further details: Conference Secretariat, CCI Ltd, 2 Palmerston Court, Palmerston Way, London SW8 4AJ, UK (tel: + 44 (0) 20 7720 0600; fax: + 44 (0) 20 7720 7177; email: melanoma@confcomm.co.uk; website: www.confcomm.co.uk/Melanoma).

EUPO 2002 Course Retina

A course on retina will be held on 15-17 March 2002 at Erlangen, Germany, where European professors will teach European residents. Further details: Priv Doz Dr Ulrich Schonherr, Friedrich-Alexander-University of Erlangen-Nuemberg, Department of Ophthalmology, Schwabachanlage 6 (Kopfklinikum), D-91054 Erlangen, Germany (tel: +49 9131-853-4379; fax: +49 9131-853-4332; email: ulrich-schoenherr@augen.imed.uni-erlangen.de).

XXIXth International Congress of Ophthalmology

The XXIXth International Congress of Ophthalmology will be held on 21-25 April 2002 in Sydney, Australia. Further details: Congress Secretariat, C/- ICMS Australia Pty Ltd, GPO Box 2609, Sydney, NSW 2001, Australia (tel: +61 2 9241 1478; fax: +61 2 9251 3552; email: ophthal@icmsaust.com.au; website: www.opthalmology.aust.com).

International Society for Behçet's Disease

The 10th International Congress on Behçet's Disease will be held in Berlin 27-29 June 2002. Further details: Professor Ch Zouboulis (email: zoubbere@zedat.fu-berlin.de).

Singapore National Eye Centre 5th International meeting

3-5 August 2002, Singapore. Further details: Ms Amy Lim, Organising Secretariat, Singapore National Eye Center, Third Hospital Avenue, Singapore 168751 (tel: +65 322 8374; fax: +65 227 7290; email: amy_lim@snecc.com.sg).

CORRECTIONS

In a paper published by Minassian *et al* in the July issue of the *BJO* (2001;85:822-9) two authors who made significant contributions to the project were omitted. They are Sunny Kaushal, research optometrist, Oxford Eye Hospital, and Nicholas Wingate, research optometrist, Moorfields Eye Hospital. We apologise or this omission.

A translation error occurred in the article by Demailly *et al* which appeared in the August issue of the *BJO* (2001;85:921-4). In the abstract (p 921 line 16) and the text (p 922, line 8) the dose for carteolol alginate was given as "four times daily" when it should be once daily. We apologise for this error.