



Is IJOOO Needed

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Dear Readers,
Greetings

It gives me immense pleasure to pen down this space as the editor-in-Chief! First of all I would like to welcome you to the inaugural issue of our new peer-reviewed journal, the “**International Journal of Ocular Oncology and Oculoplasty**“. Ophthalmology has made great advances in the last few decades and many sub-specialties have emerged like ophthalmic plastic surgery and oncology which are, exponentially growing. Before we conceived the idea of initiating a new peer-reviewed journal, we have in our mind certain questions and apprehensions as well, about the IJOOO. What is need for his journal? What are the goals of IJOOO? Does we accomplish these goals and how?

Explosion in scientific knowledge of this sub-specialty needed journals for effective global communication of new information's. There is enormous increase in the number of ophthalmic journals during the past three decades but there is scarcity of journals related to ocular oncology and oculo-facial reconstructive surgery. The goal of this journal is to describe current scenario of oculoplastic conditions, to help in disseminating newer publications introduces a number of new diagnostic and therapeutic options and innovative surgical techniques in the field of ocular oncology and ophthalmic plastic surgery. Earlier we referred our patients of epiphora to ENT surgeons because DCR surgery might affect the phaco-time in OT but our oculoplastic surgeons are now well versed with endoscopic endonasal surgery. Most of the patients of blepharospasm and hemispasm are sent to neurologists either for diagnosis or for treatment but now such patients are well treated by an aesthetic oculoplastic surgeon by using Botulinum toxin. Unfortunately old tradition of referral of orbital tumor to neurosurgeon still continues in spite of the fact that orbital & oculoplastic surgeons can manage it scarlessly by endoscopic orbital surgery or transconjunctival orbitotomy approach. Eyelid and orbito-facial trauma patients often send to plastic surgery department and same patient referred back to ophthalmologists for treatment of diplopia, visual impairment or intense epiphora due to unmanaged associated canalicular injury, involvement of extra ocular muscles or optic nerve and vitreo-retina as evaluation and management of canalicular laceration is only possible in hands of oculoplastic surgeon. Dear friends thus oculo-plastic surgeon must be involved in the management of such oculo-facial trauma in order to minimize the functional and structural disability.

With the revolution in cataract and refractive surgery, ocular oncology has taken to back seat. Ocular malignancies are highly problematic and challenging due to their potential threat to both sight and life. These lethal malignancies are often diagnosed late in our country. The malignant tumors are mismanaged due to referral tendency or due to ignorance. The patients seen and not treated but referred for opinions and some of them are advised for surgery and refused treatment. The patients of ocular malignancy require combined multi-specialty treatment. The major surgical operations or an established and equally effective alternative nonsurgical procedures like cryotherapy, chemotherapy and radiotherapy are available for management of ocular malignant tumors. Hence, in our country there is great need of multidisciplinary ocular oncology centers rendering services of oculoplastic surgeons, radiotherapists, radiologists and ophthalmic pathologists.

I truly believe that IJOOO will be an ideal journal which will provide a common platform to ocular oncologists, ocular pathologists, oculoplastic surgeons and ophthalmologists worldwide to share the advances in their fields. The journal publishes editorials, review articles, original articles, brief communications, case series, case reports, letters to editor and photo essay related to ocular oncology & oculoplasty and its allied subjects such as ocular pathology, genetics cancer research and biomarkers etc.

This peer reviewed journal will be published four times a year (January–March, April–June, July– September and October –December) with open access policy. Our aim is to get this journal indexed in as many indexing system as possible including PubMed, InMed, Scopus and MedInd etc. Currently the journal is indexed in Google Scholar, Ebsco, OAJI, DOAJ and International scientific indexing.

My first priority as Editor-in-Chief is to deliver quality issue timely and make IJOOO a successful reader friendly journal. I am quite confident about the success of IJOOO as we have fast track service for publication, fair review system, competent editorial board, dedicated editorial staff. For success of this journal we need support of our readers, authors, reviewers and editors. We need to receive manuscripts from variety of institutions and authors. In this issue we have interesting articles on Blepharoplasty by Kashturi Battacharjee, a renowned asthetic oculoplastic surgeon from Shri Sankaradeva Nethralaya Guwahati, Custom Ocular prosthesis by Raizada from L V Prasad, Hyderabad, Sinonasal Embryonal Rhabdomyosarcoma by Parija from AIIMS Bhubneshwar and Synovial Sarcoma of lachrymal gland by Syeed Mehbub Al-Kadir from Dhaka, Bangladesh.

I would like to request all ophthalmologists to make IJOOO their prime choice to publish their research work.