

LETTERS

On the new PJO format



DEAR EDITOR: Thank you on the efforts done. Your journal is one of the best ophthalmology journals. I hope you give me the chance to follow the journal.

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EDITOR'S REPLY: Thank you for your interest and support of the PJO. The Editorial Board strives to give our readers quality and relevant articles in the field of Ophthalmology and Visual Science. We hope to serve the educational needs of practicing ophthalmologists in the Philippines.

Patricia M. Khu, MD
Editor in Chief

Welcome changes, but why are authors mostly from PGH?



DEAR EDITOR: Congratulations on the "new" PJO. The latest changes introduced are very welcome, specifically the utilization of color. Vol 29 No 2 has improved further when you used colored pictures. The present form of PJO makes it more inviting to read; it looks more vibrant. What a great job!

I would like to thank you for sending copies to me. But I'm wondering if the first 2 issues are just "sample" issues because there is an order form enclosed in each issue. Does that mean that if I don't place an order, I won't receive the subsequent issues? All the while I thought the PJO is free to all members in good standing, meaning those who pay their annual dues. Right now, the only thing tangible that I get from PAO (in exchange for my annual dues) is PJO.

I noticed that most of the papers are from PGH doctors. Does that mean that only a few doctors from other hospitals submit papers?

Comment on the article *The diagnostic properties of a nerve-fiber analyzer in glaucoma*.¹ In contrast to all the other articles, in its abstract, the objective and the conclusion do not match or meet. The conclusion does not answer the objective.

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EDITOR'S REPLY: Thank you for your interest and support of the PJO. Your continual support of the Philippine Academy of Ophthalmology (PAO) with payment of the annual dues entitles you to a one-year subscription (4 issues) of the PJO. The order form enclosed in the journal is for those who wish to subscribe but are not members of the PAO.

Undoubtedly, only a few teaching institutions in our country are involved in quality research. We hope this scenario will change in the near future when research will be a part not only of an academic's life but a clinician's as well. Research results from keen observation of diseases encountered in the clinics and is a source of continuing medical education. Those who claim to be experts in particular fields not only have extensive experience but also do research.

On the article *The diagnostic properties of a nerve-fiber analyzer in glaucoma*,¹ the conclusion mentioned that the GDx 400 is primarily used as a screening tool to detect the presence or absence of glaucoma because of the fair sensitivity and specificity obtained. When one studies the diagnostic properties of an instrument, one deals with sensitivity, specificity, predictive values, and likelihood ratios. These were extensively discussed in the paper.

I trust that you read the whole article and was able to glean the message imparted.

Patricia M. Khu, MD
Editor in Chief

1. Khu PM, et al. The diagnostic properties of nerve-fiber analyzer in glaucoma. *Philipp J Ophthalmol* 2004; 29: 66-72.