Whom Do You Believe?

hat a great time to be a chief medical editor of a glaucoma journal! Such was my reaction when Gillian McDermott and David Cox—Editor-in-Chief and Publisher. respectively—asked if I were interested in being

the first to hold the position for Glaucoma Today. With so much occurring on many different research and clinical levels in glaucoma, there could be no better time to share the innovative developments in our subspecialty.

One of the most important challenges in medicine is keeping current. How we efficiently remain up to date in our thinking and practice is less structured

than years ago. In the past, we depended on peer-reviewed journals and society meetings (and, to some extent, the gossip from the surgical lounge). Information was largely centralized and controlled. Today, the release of new information seems irrepressible and its sources far more varied—some trustworthy, some not. Our colleagues are local and international. Information off list serves and the Internet instantly provide questions and analysis not

available years ago. The plethora of local, regional, and national meetings supplements the surge of information. It also provides an avenue for industry to market and display goods. What was once a distinction between education and marketing, academician and cli-

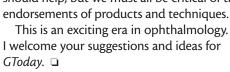
> nician, and lecturing and consulting is no longer clear. The question of whom we can believe is as important now as ever.

The explosion in information and technology will continue. My goal as Chief Medical Editor of GToday will be to use the publication to inform and teach. We all strive to provide the best in patient care and practice efficiency. With a print circulation of nearly 9,000 sub-

scribers and an impressive Web site, GToday is well positioned to keep you current. We will strive to offer articles that are clinically relevant to your practice yet balanced. The continued listing of financial disclosures by our authors should help, but we must all be critical of the

This is an exciting era in ophthalmology. I welcome your suggestions and ideas for

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