Promising Advances for Devastating Disease

Many well-known visual function and quality-of-life studies have been performed for patients with sight-threatening conditions including age-related macular degeneration, diabetic retinopathy, glaucoma, and cataracts. In many of these surveys, participants have ranked vision loss as comparable to severe illness or death. As retina specialists, however, we rarely see patients with ocular conditions that could literally translate to an endpoint of fatality. When we do, it is most often a diagnosis of cancer. Our colleagues who specialize in ocular oncology see these scenarios more often, including retinoblastoma, lymphoma, and uveal melanoma, but patients often present to the retina specialist or general ophthalmologist first. For most of us, these are the only potentially fatal diseases that we will diagnose in our careers.

Fortunately, much work has been done in the field of ocular oncology to develop therapies that can help these patients. In some cases, such as in retinoblastoma, new techniques can not only help to save the lives of patients, but also spare eyes from enucleation and improve visual acuity prognoses. Other areas of research focus on genomic and genetic factors to develop new therapies that can treat metastatic manifestations of cancers, such as uveal melanoma, and that can provide effective alternatives to currently used treatments, such as in retinoblastoma, which although successful, have undesirable side effects.

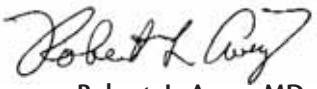
There are many subtopics within ocular oncology and this issue of *Retina Today* features several experts in the field who focus on a few of the most relevant and timely issues. Although many of us will not see a large number of these patients in our offices, it is important to remain abreast of the latest technologies and research so that we can best manage these patients when they present.

NEW YEAR, NEW COLUMNS

In 2008 *Retina Today* "re-launched" as an international publication for retina specialists with a new editorial board, a new format, new columns, and overall extended editorial coverage. Since that time, *Retina Today* has continued its growth, improved its focus, and remained a strong and healthy publication in a poor economy.

Every year, we review the content of the publication with the Editor-in-Chief and the Publisher to consider new ideas and to determine what should stay the same, what needs tweaking, and what may have run its course. In 2011, we are excited to introduce *Retina on Wall Street*, which will feature profiles of publicly traded companies that have a stake in retina. Additionally, George Williams, MD, will be the section editor for our new column *Pennsylvania Avenue Updates*, which will tackle the complex and trying issues that face physicians in regard to health care reform, Medicare reimbursements, and other decisions that reside on the policy tables in Washington.

As always, we welcome your feedback on these new additions and any other content within the publication. ■



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