

MAY 9, 1994

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DEAR RUBENS:

The enclosed letter is directed specifically to refractive surgeons, but should you think it useful to publish it in the Brazilian Archives of Ophthalmology or a newsletter coming from the Brazilian Council of Ophthalmology, it would be fine with me.

I know such efforts have taken place in the past, but I think the problems have been the hiring of personnel with inadequate training, political misunderstandings, and the attempt to do retrospective studies where the data is totally inadequate.

I hope to see you again soon.

Cordially

George O. Waring, M. D., F. A. C. S.
Editor-in-Chief

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RE: PUBLICATION OF REFRACTIVE SURGICAL INFORMATION FROM BRAZILIAN OPHTHALMOLOGISTS

DEAR RICARDO:

This is an open letter that might be published in your newsletter, *Ophthalmology in Focus*. It is well known that Brazilian refractive surgeons have taken the lead in developing many techniques and expanding experience with techniques that have been developed elsewhere. Although that information is often presented at regional, national and international meetings, it seldom seen in print.

As Editor of *The Journal of Refractive and Corneal Surgery*, I would be pleased to receive manuscripts for review and possible publication in the journal. However, I am fully aware of the time constraints of a busy practice and the lack of resources that plague the busy practitioner.

I have a few concrete suggestions that might help.

1. Establish simple and realistic prospective protocols or databases. Make out simple forms, and fill them in at each patient visit. This will eliminate the problems of retrospective analysis, where missing information is the rule rather than the exception.
2. Charge one member of the office staff with insuring patient follow up, through phone calls, letters, etc. Limit this effort to follow up specific consecutive group of patients who have had specific procedures that are being studied prospectively.

3. Engage the services of a "computer literate" person who can design data forms, transfer data from clinical records to a computer database, and perform simple analysis. Although this can be done manually, there are plenty of commercially available computer programs and plenty of individuals graduated in computer science that could be trained in Ophthalmology to allow the utilization of computers. Alternatively, simply engage the services of someone to do the work manually.
4. Create collaborative working relationships between high volume busy practitioners and academic ophthalmologists who can give guidance in simple practical study design, analysis of results, and preparation of papers.
5. Consider employing through a formal society an individual who is a science writer and who knows how to write scientific papers. That may or may not be the same individual who does the data analysis. Such an individual could help write the papers in conjunction with the ophthalmologist and do it in a form that would be acceptable to journal reviewers and editors.
6. Distinguish different kinds of reports: New surgical techniques and ideas without much experience and a few case examples, case reports of unusual complications or observations, simple case series describing "proof of concept" for a particular operation, and a more formal prospective analysis of a consecutive series of eyes over a defined period of time, usually 6 to 12 months. Each of these type of reports can be published in the journal as long as the goals of the publication are clear.
7. Realize that critical comments from reviewers and editors are almost always aimed at trying to improve the paper and trying to present the author's results in the best possible way. Although such comments sometimes seem hostile, obstructionistic, bureaucratic, and aimed at blocking publication - they seldom have these negative purposes.

It is clear that refractive surgery in Brazil is among the leaders in the world, and often is far in advance of that in the United States, because of the differences in regulatory constraint. I hope that useful information can be disseminated internationally through peer reviewed publications.

Cordially,

George O. Waring, M.D., F.A.C.S.
Professor of Ophthalmology
Director, Refractive Surgery

CC: *RUBENS BELFORT JR., M.D., Ph.D.*
ROBERTO ZALVIDAR, M.D.