The world of ophthalmology is fortunate to have had the scholarly leadership of Daniel Albert, MD, MS, as one of the longest-serving editors of JAMA Ophthalmology, formerly the Archives of Ophthalmology. It is an honor and a privilege for me to follow Dr Albert as the next (and ninth) editor of JAMA Ophthalmology. Far beyond just a new editor in chief, this July 2013 issue begins the transition to a major redesign coordinated with JAMA and the 9 specialty journals, including JAMA Ophthalmology, that represent The JAMA Network. As a result of these changes, and the tight bond of The JAMA Network structurally and conceptually, the imprimatur of JAMA, with its high impact factor of 30 and hopefully growing, and its ability to reach millions of people in print, on the web, or through digital media, provides an intangible benefit to JAMA Ophthalmology that is not available previously to it or other peer-reviewed journals in ophthalmology. Readers, authors, and reviewers can learn more about the revolutionary changes in an editorial accompanying the July 1, 2013, issue of JAMA.1

JAMA Ophthalmology’s vision will continue to be, simply, to have the best peer-reviewed publications in ophthalmology. To do so, the journal must focus on getting some of the best people in ophthalmology to serve on the editorial board. The deputy editors, Roy Beck, MD, PhD, and Michael Kass, MD, and the associate editor, Frederick Ferris, MD, will lead an editorial board dedicated to keeping JAMA Ophthalmology the strong and essential journal that it has been for more than 100 years. The ophthalmology community should expect the editorial board to reach out to authors of major clinical trials, basic discovery, early translation, comparative effectiveness, and dissemination of clinical research that are critical to ophthalmology research, education, clinical care, and public health.

In this age of instantaneous communication, authors and readers should note that all major content is now posted online, ahead of print, saving months from time of acceptance to time of publication. Some additional upcoming changes to JAMA Ophthalmology will need some time to implement, but not too much time. Readers should expect new content starting in 2014. This content will be meant to enhance the cutting-edge clinical research publications. Readers should anticipate expanded sections on viewpoints and perspectives that discuss how one might consider applying new evidence from clinical trials into everyday practice. An illustrious group of contributing writers from the ophthalmic branches of the US Food and Drug Administration, the National Institutes of Health, and the Cochrane Collaboration will provide commentaries of contemporary interest to the community-based and academic-based clinicians. Popular sections, including continuing medical education and clinical challenges, will continue to be available.

It’s not just the content that may look different and unique in JAMA Ophthalmology over the next few years; one of the next important challenges for peer-reviewed journals will be the role of the web and digital media. The JAMA Network, including JAMA Ophthalmology, is ready to use the evolving power of these digital platforms and identify ways to apply it (for example, see the May 20, 2013, Facebook posting and linked video on primary open-angle glaucoma2), recognizing that daily habits for obtaining medical knowledge involve more than reading the print edition of medical journals.

In the end, the best peer-reviewed content and the finest digital media are only of value if the core principles of the journal and its editorial board remain dedicated to maintaining scientific integrity, concern for patient and human subject risks, and ethical behavior that define JAMA Ophthalmology. To help achieve this goal, the journal will maintain an advisory committee of leaders from around the world, independent of the editorial board, whose charge will be to ensure that the journal is true to its mission.

On behalf of The JAMA Network, welcome to the beginning of the next decade of JAMA Ophthalmology. We invite our readers, reviewers, and authors to contact the journal at any time as we strive to be the indispensable source of ophthalmic knowledge through authoritative peer review in the 21st century.

REFERENCES