## ABOUT THE JOURNAL

### Aims and Scope

Eye seeks to provide the international practising ophthalmologist with high quality articles, of academic rigour, on the latest global clinical and laboratory based research. Its core aim is to advance the science and practice of ophthalmology with the latest clinical- and scientific-based research. Whilst principally aimed at the practising clinician, the journal contains material of interest to a wider readership including optometrists, orthoptists, other health care professionals and research workers in all aspects of the field of visual science worldwide. Eye is the official journal of The Royal College of Ophthalmologists.

Eye encourages the submission of original articles covering all aspects of ophthalmology including:

- external eye disease
- oculo-plastic surgery
- orbital and lacrimal disease
- ocular surface and corneal disorders
- paediatric ophthalmology and strabismus
- glaucoma
- medical and surgical retina
- neuro-ophthalmology
- cataract and refractive surgery
- ocular oncology
- ophthalmic pathology
- ophthalmic genetics

### Journal Details

**Editor-in-Chief**
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**Frequency:** 12 issues a year

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- Abstract
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- Results
- Discussion
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In the interests of transparency and to help readers form their own judgments of potential bias, authors must declare whether or not there are any competing financial interests in relation to the work described. This information must be included in their cover letter and on the title page of their manuscript. In cases where the authors declare a competing financial interest, a statement to that effect is published as part of the article. If no such conflict exists, the statement will simply read that the authors have nothing to disclose. For the purposes of this statement, competing interests are defined as those of a financial nature that, through their potential influence on behaviour or content, or from perception of such potential influences, could undermine the objectivity, integrity or perceived value of a publication. They can include any of the following:

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• Employment: Recent (while engaged in the research project), present or anticipated employment by any organization that may gain or lose financially through this publication. This includes positions on an advisory board, board of directors, or other type of management relationship.

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It is difficult to specify a threshold at which a financial interest becomes significant, but note that many US universities require faculty members to disclose interests exceeding $10,000 or 5% equity in a company. Any such figure is arbitrary, so we offer as one possible practical alternative guideline: “Declare all interests that could embarrass you were they to become publicly known after your work was published.” We do not consider diversified mutual funds or investment trusts to constitute a competing financial interest.

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Following the Conflict of Interest heading, there must be a listing for each author, detailing the professional services relevant to the submission. Neither the precise amount received from each entity nor the aggregate income from these sources needs to be provided. Professional services include any activities for which the individual is, has been, or will be compensated with cash, royalties, fees, stock or stock options in exchange for work performed, advice or counsel provided, or for other services related to the author’s professional knowledge and skills. This would include, but not necessarily be limited to, the identification of organizations from which the author received contracts or in which he or she holds an equity stake if professional services were provided in conjunction with the transaction.

Examples of declarations are:

- **Conflict of interest.**
  The authors declare no conflict of interest.

- **Conflict of interest.**
  Dr Caron’s work has been funded by the NIH. He has received compensation as a member of the scientific advisory board of Acadia Pharmaceutical and owns stock in the company. He also has consulted for Lundbeck and received compensation. Dr Rothman and Dr Jensen declare no potential conflict of interest.

Non-financial interests that authors may like to disclose include:

- a close relationship with, or a strong antipathy to, a person whose interests may be affected by publication of the article,

- an academic link or rivalry with someone whose interests may be affected by publication of the article,

- membership in a political party or special interest group whose interests may be affected by publication of the article, or

- a deep personal or religious conviction that may have affected what the author wrote and that readers should be aware of when reading the article.

Reviewers approached for assessment of submitted articles are also requested to declare conflicts of interest that may impede on their judgment of that article. This specifically includes competing research in the same area that could be negatively affected by publication of the submitted article.

**Clinical Trials**

As defined by the International Committee of Medical Journal Editors (ICMJE), a clinical trial is any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. A medical intervention is any intervention used to modify a health outcome and includes but is not limited to drugs, surgical procedures, devices, behavioural treatments, and process-of-care changes. A trial must have at least one prospectively assigned concurrent control or comparison group in order to trigger the requirement for registration. Nonrandomized trials are not exempt from the registration requirement if they meet the above criteria.

When reporting experiments on human subjects, authors must indicate whether the procedures were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) or with the Helsinki Declaration of 1975 (as revised in 1983). Include Institutional Review Board or Animal Care and Use Committee approvals.

All clinical trials must be registered in a public registry prior to submission. The journal follows the trials registration policy of the ICMJE ([www.icmje.org](http://www.icmje.org)) and considers only trials that have been appropriately registered before submission, regardless of when the trial closed to enrolment. Acceptable registries must meet the following ICMJE requirements:

- be publicly available, searchable, and open to all prospective registrants
- have a validation mechanism for registration data

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• be managed by a not-for-profit organization

Examples of registries that meet these criteria include:

1. the registry sponsored by the United States National Library of Medicine (www.clinicaltrials.gov);
2. the International Standard Randomized Controlled Trial Number Registry (www.controlled-trials.com);
3. the Cochrane Renal Group Registry (http://www.cochrane-renal.org);

The trial registry number must be included in the manuscript and provided on submission.

Randomised Controlled Trials (RCTs) must adhere to the CONSORT statement, (CONsolidated Standards of Reporting Trials) and submissions must be accompanied by a completed CONSORT checklist (uploaded as a related manuscript file). Further information can be found at www.consort-statement.org.

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Reproducibility

EYE requires authors of original research papers that are sent for external review to include in their manuscripts relevant details about several elements of experimental and analytical design. This initiative aims to improve the transparency of reporting and the reproducibility of published results, focusing on elements of methodological information that are frequently poorly reported. Authors being asked to resubmit a manuscript will be asked to confirm that these elements are included by filling out a checklist that will be made available to the editor and reviewers.

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Publication of identifiable images from human research participants (or a parent or legal guardian for participants under the age of 16 years) must be accompanied by a statement attesting that the authors have obtained consent to publication of the images. If the participant is deceased, consent must be sought from the next of kin of the participant. In all such instances, all reasonable measures must be taken to protect patient anonymity. Black bars over the eyes are not acceptable means of anonymization. In certain cases, the journal may insist upon obtaining evidence of informed consent from authors. Images without appropriate consent must be removed from publication.

Data Fabrication & Falsification

Falsification is the practice of altering research data with the intention of giving a false impression. This includes, but is not limited to, manipulating images, removing outliers or “inconvenient” results, or changing, adding or omitting data points. Fabrication is the practice of inventing data or results and recording and/or reporting them in the research record. Data falsification and fabrication call into question the integrity and credibility of data and the data record, and as such, they are among the most serious issues in scientific ethics.

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Some manipulation of images is allowed to improve them for readability. Proper technical manipulation includes adjusting the contrast and/or brightness or colour balance if it is applied to the complete digital image (not parts of the image). The author should notify the Editor in the cover letter of any technical manipulation. Improper technical manipulation refers to obscuring, enhancing, deleting and/or introducing new elements into an image. See Image Integrity & Standards below for more details.

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Springer Nature takes seriously all allegations of potential misconduct. As a member of the Committee on Publication Ethics (COPE), Eje will follow the COPE guidelines outlining how to deal with cases of suspected misconduct. As part of the investigation, the journal may opt to do one or more of the following:

- suspend review or publication of a paper until the issue has been investigated and resolved;
- request additional information from the author, including original data or images or ethics committee or IRB approval;
- make inquiries of other titles believed to be affected;
- forward concerns to the author’s employer or person responsible for research governance at the author's institution;
- refer the matter to other authorities or regulatory bodies (for example, the Office of Research Integrity in the US or the General Medical Council in the UK); or
- submit the case to COPE in an anonymized form for additional guidance on resolution.

Please note that, in keeping with the journal’s policy of the confidentiality of peer review, if sharing of information with third parties is necessary, disclosure will be made to only those Editors who the Editor believes may have information that is pertinent to the case, and the amount of information will be limited to the minimum required.

Image Integrity and Standards
Images submitted with a manuscript for review should be minimally processed (for instance, to add arrows to a micrograph). Authors should retain their unprocessed data and metadata files, as editors may request them to aid in manuscript evaluation. If unprocessed data is unavailable, manuscript evaluation may be stalled until the issue is resolved.

A certain degree of image processing is acceptable for publication, but the final image must correctly represent the original data and conform to community standards. The guidelines below will aid in accurate data presentation at the image processing level:
- Authors should list all image acquisition tools and image processing software packages used. Authors should document key image-gathering settings and processing manipulations in the Methods section.
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- Touch-up tools, such as cloning and healing tools in Photoshop, or any feature that deliberately obscures manipulations, is to be avoided.
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For gels and blots, positive and negative controls, as well as molecular size markers, should be included on each gel and blot – either in the main figure or an expanded data supplementary figure. The display of cropped gels and blots in the main paper is encouraged if it improves the clarity and conciseness of the presentation. In such cases, the cropping must be mentioned in the figure legend.
- Vertically sliced gels that juxtapose lanes that were not contiguous in the experiment must have a clear separation or a black line delineating the boundary between the gels.
- Cropped gels in the paper must retain important bands.
- Cropped blots in the body of the paper should retain at least six band widths above and below the band.
- High-contrast gels and blots are discouraged, as overexposure may mask additional bands. Authors should strive for exposures with gray backgrounds. Immunoblots should be surrounded by a black line to indicate the borders of the blot, if the background is faint.
- For quantitative comparisons, appropriate reagents, controls and imaging methods with linear signal ranges should be used.

Microscopy adjustments should be applied to the entire image. Threshold manipulation, expansion or contraction of signal ranges and the altering of high signals should be avoided. If ‘pseudo-colouring’ and nonlinear adjustment (for example ‘gamma changes’) are used, this must be disclosed. Adjustments of individual colour channels are sometimes necessary on ‘merged’ images, but this should be noted in the figure legend. We encourage inclusion of the following with the final revised version of the manuscript for publication:
- In the Methods section, specify the type of equipment (microscopes/objective lenses, cameras, detectors, filter model and batch number) and acquisition software used. Although we appreciate that there is some variation between instruments, equipment settings for critical measurements should also be listed.
- The display lookup table (LUT) and the quantitative map between the LUT and the bitmap should be provided, especially when rainbow pseudo-colour is used. It should be stated if the LUT is linear and covers the full range of the data.
- Processing software should be named and manipulations indicated (such as type of deconvolution, three-dimensional reconstructions, surface and volume rendering, ‘gamma changes’, filtering, thresholding and projection).
- Authors should state the measured resolution at which an image was acquired and any downstream processing or averaging that enhances the resolution of the image.

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**Cell Line Authentication**
If human cell lines are used, authors are strongly encouraged to include the following information in their manuscript:

- the source of the cell line, including when and from where it was obtained,
- whether the cell line has recently been authenticated and by what method, and
- whether the cell line has recently been tested for mycoplasma contamination.

Further information is available from the [International Cell Line Authentication Committee (ICLAC)](https://www.iclac.org). We recommend that authors check the [NCBI database](https://www.ncbi.nlm.nih.gov) for misidentification and contamination of human cell lines.

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