David F Chang, MD, is a Clinical Professor at the University of California, San Francisco (UCSF) (where he completed his ophthalmology residency). Having chaired the American Society of Cataract and Refractive Surgery (ASCRS) Cataract Clinical Committee, Dr Chang joined the ASCRS Executive Committee in 2009 and served as the President between 2012 and 2013. He is immediate past chair of the American Academy of Ophthalmology (AAO) Cataract Preferred Practice Pattern Panel and in 2009 completed his 5-year term as chair of the AAO Annual Meeting program committee. Dr Chang is the chief medical editor of *EyeWorld*, associate international editor for the *Asia-Pacific Journal of Ophthalmology*, and served for 5 years as co-chief medical editor for *Cataract and Refractive Surgery Today*. He is also chair of the ASCRS Foundation International Committee and serves on the medical advisory board of Himalayan Cataract Project and Project Vision. He is the 2014 recipient of the Jose Rizal International Medal, the highest international award from the Asia-Pacific Academy of Ophthalmology. In 2006, Dr Chang became only the third ophthalmologist to ever receive the Charlotte Baer Award honoring the outstanding clinical faculty member at the UCSF Medical School. He has received the highest honor for cataract surgery from the following organizations: ASCRS (Binkhorst Medal), AAO (Kelman Lecture), Asia Pacific Association of Cataract & Refractive Surgery (Lim Medal), United Kingdom and Ireland Society of Cataract & Refractive Surgery (Rayner Medal), Canadian Society of Cataract and Refractive Surgery (Award of Excellence/ Stein Lecture), Indian Intraocular Implant & Refractive Society (Gold Medal), Italian Ophthalmological Society (Strampelli Medal), and Royal Australia and New Zealand College of Ophthalmologists (Gregg Medal). Dr Chang is a *summa cum laude* graduate of Harvard College and Harvard Medical School.

One of our greatest challenges as practicing clinicians is staying abreast of the continually evolving diagnostics, therapeutics, and new technology in ophthalmology. In some respects, this is a nice problem to have because it means that impactful innovation is continuing at a rapid pace in our field. However, I perceive that information overload has spawned two trends regarding what clinicians most often read. One is a tendency to increasingly plumb ophthalmic trade journals and the internet for practical insights and conclusions. We are accustomed to having information at our fingertips, and this approach requires much less time and effort than reading peer-reviewed journal articles. However, it is hard to discuss topics in sufficient depth with such concise formats. A second trend is for us to effectively focus on new information within our subspecialty, or our greatest subjects of interest. In other words, being a general jack of too many trades risks mastering none.

This is why *US Ophthalmic Review* fills a special niche for me. Producing only two issues a year, it is able to publish expert, in-depth review articles devoted to important clinical topics. As a cataract specialist, I enjoy having these carefully referenced and comprehensive summaries to update me about conditions that I do not specialize in, but yet encounter regularly. This month's review articles on glaucoma, corneal procedures, and diabetic retinopathy are a perfect example.

In the glaucoma arena, Drs Kornmann and Giaconni review important considerations when initiating intraocular pressure (IOP)-lowering medical therapy. Drs Cheng and Buys provide a comprehensive overview of laser treatments for glaucoma patients. Finally, Drs Samuelson, Stamper, and Gallardo review the role for the EX-PRESS® glaucoma drainage filtration device for trabeculectomy. There is an excellent assessment of corneal crosslinking by Dr Thornton, and Drs Hjortdal and Ivarsen discuss femtosecond flap-free lenticule extraction for myopia and astigmatism.

What is the current treatment algorithm for diabetic macular edema? Drs John and Harris used phone surveys to compare the practice patterns of European and US ophthalmologists. Drs Marozas and Fort provide an excellent overview of prevention and treatment of diabetic retinopathy. Finally, cataract surgery is not the only procedure to recently incorporate computerized laser automation. Drs Kernt, Ulbig, Kampik, and Neubauer introduce us to navigated laser therapy for diabetic macular edema, which integrates the diagnostic imaging and the laser to precisely control spot placement and parameters.

Such a compelling lineup of clinical reviews comes only twice a year and we hope you enjoy this issue of *US Ophthalmic Review*. ■