Editorial

I am delighted to present the 7th issue of the International Journal of Keratoconus and Ectatic Corneal Diseases. Indeed, we have completed 2 years of publishing in this journal, accounting for six issues, and here we are in our 3rd year.

We achieved this due to the emergence of keratoconus as a new subspecialty in ophthalmology. Three noticeable changes in the last few years account for the above:

- 1. The development of new technologies and indexes for the diagnosis of keratoconus, some are reported in this issue (*see* the article of Ovette F Villavicencio from the group of Michael W Belin and Renato R Ambrósio Jr on the 'Independent population validation of the Belin/Ambrósio enhanced ectasia display: Implications for keratoconus studies and screening' and the article on 'Corneal elevation values in normal eyes, *forme fruste* keratoconus and keratoconus at different stages measured by Scheimpflug imaging' by Maria A Henriquez, et al). Moreover, the ability to examine the biomechanical properties of the cornea *in vivo* is very interesting and promising field (*see* the article, corneal of our group on the biomechanical properties of the cornea after LASEK).
- 2. The 'increased' frequency and incidence of keratoconus. Some experts believe that this is due to the development of new diagnostic tools and the increase in our ability to diagnose keratoconus, others due to genuine increase in incidence and frequency (*see* the report of our group of 3% frequency among Arab students in Israel).
- 3. The development of new technologies for the treatment of keratoconus and ectatic corneal diseases. Some of them are reported in this issue such as the myoring developed by Albert Daxer (*see* the articles of Albert Daxer on MyoRing implantation for keratoconus). Collagen corneal cross-linking (CXL) for arresting the progression of keratoconus and the insertion of intraocular lenses for the visual acuity improvement in keratoconic patients (*see* the article on 'Implantable collamer lens for correction of refractive errors in patients with keratoconus following collagen cross-linking: One year follow-up' by Hassenien Safa Shuber). Photorefractive keratectomy and CXL (*see* the article on 'Long-term improvement after the Athens protocol for advanced keratoconus with significant ectasia progression in the fellow eye' by Luis Claudio Pereira, et al).

Post-LASIK ectasia is a feared complication, in this issue there are two case reports, one of them with literature review: 'Post-LASIK keratoectasia developing with sleep apnea and floppy eyelid syndrome: Case report and review of the literature' by Noa Avni-Zauberman and David S Rootman and 'Unilateral Post-LASIK ectasia in a topographical normal eye with a slight asymmetry in the contralateral eye' by Marouen Berguiga, Alain Saad and Damien Gatinel).

Finally, I hope that this journal continues to be the stage for all those who deal and investigate these diseases.

A great thank you for the co-editor Renato Ambrosio Jr, the associate editor David Smadja and the editorial board for their contribution to the continuity and development of this journal.

Adel Barbara MD, MRCOph *Editor-in-Chief*