Instruction to Authors

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All submissions are reviewed by the Editor-in-Chief, Associate Editors and Editorial Board Members, as well as invited referees and a statistician when appropriate.

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Originality and clinical impact are essential for acceptance of Original Articles. Structured abstract is limited to 300 words. The length should be 5,000 words maximum excluding abstract, references, tables and figures. The abstract should contain the following subheadings: Background, Methods, Results and Conclusions.

Original article should entail a section describing the contribution each author made to the manuscript. See section “Author contributions” for details. Meta-analysis will be categorized into this type.

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Title page
The title page should carry: a) the title of the article; b) authors’ names with institutional affiliations; c) corresponding author’s name with phone and fax numbers, street address and E-mail address.

Abstract and key words
The second page should carry an abstract of no more than 450 words (see also instructions for specific categories above). Do not use reference, table or figure in the abstract. The abstract of an original article should be structured into four paragraphs with headings of Background, Methods, Results and Conclusions. The abstracts for all other manuscript types should be non-structured. An abstract is not required for Letter.

Provide three to five key words. Use terms from the medical subject headings (MeSH) list of Index Medicus.

References
The Vancouver system of referencing should be used. In the text, references should be identified using numbers in round brackets in which they appear consecutively [e.g., “cancer-related mortality (19)”; “denocarcinoma (29,30)”]. Number references consecutively in the order in which they are first mentioned in the text. The titles of journals should be abbreviated according to the style used in Index Medicus. List all authors, but if the number exceeds three, give three followed by “et al.”


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Number all tables consecutively in the order of reference in the text. Each column must carry an appropriate heading and, if measurements are given, the units should be given in the column heading. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all nonstandard abbreviations that are used in each table. When statistical methods are used, exact P values should be given, such as P=0.230 instead of the term ‘N.S.’ or ‘not significant’. For online submission, insert tables at the end of the text to be saved as a part of the main document, or save them as separate image files. (Note that when a manuscript is accepted for publication, tables must be submitted as data-.doc,.rtf, Excel or PowerPoint files-because tables submitted as image data cannot be edited for publication.) The Journal may reject manuscripts if remarkable deviation from this instruction is found.

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All illustrations (line drawings and photographs) are classified as figures. Figures should be cited in consecutive order in the text. Magnifications should be indicated using a scale bar on the illustration. If figures have been reproduced from another source, a letter from the copyright holder (usually the Publisher), stating authorization to reproduce the material, must be attached to the covering letter.

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Duration: Video files should be limited to 20 minutes.

Quality: Please set the video aspect ratio as 4:3 or 16:9 (widescreen). The original video should be of high quality. The resolution is no less than 1280*720, the frame rate no less than 24 frames per second and the bit rate no lower than 5Mbps.

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Survival curves
Cumulative survival rates are usually calculated with the Kaplan-Meier’s method and the differences are evaluated with the log-rank test. Survival curves are preferably drawn in the following style.

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Censored cases should be shown as short vertical lines (“whiskers”) on the curves. Alternatively, the exact numbers
of the cases at each unit time should be shown in an attached table as “No. at risk”.

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The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement. If many (>20) abbreviations are used, they should also be listed and explained at the foot of the first page of the text.

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Describe which statistical methods were used for which analyses. A P value or confidence interval should be cited in the abstract and in the text for any statistically significant finding reported; wherever possible, exact P values should be given. Outcome variables should generally be given as point estimates, with 95% confidence intervals rather than standard deviations or standard errors.

Appendix
The Supplementary Appendix should be paginated, with a table of contents, followed by the list of investigators (if there is one), text (such as methods), figures, tables, and then references. The supplementary appendix should not be included in the article’s reference list.

The Appendix must be submitted in a Word file. The Appendix will not be edited for style. It will be presented online as additional information provided by the authors.

The published article will contain a statement that supplementary material exists online and will provide the reader with a URL and link. To reference the supplementary appendix in the text of the article, refer to it as in the following example:

“Many more regressions were run than can be included in the article. The interested reader can find them in a supplementary appendix online.”

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The Author contributions section should be completed as follow:
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(III) Provision of study materials or patients:
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(VII) Final approval of manuscript: All authors

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An example is given here: ‘This work was supported by the National Institutes of Health [AA123456 to C.S., BB765432 to M.H.]; and the Alcohol & Education Research Council [hfygr667789].’

**FOOTNOTE**

a. Conflicts of Interest: See section “Conflict of interest” for details.

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