Clinical Pharmacology & Therapeutics

GUIDE TO AUTHORS

ABOUT THE JOURNAL

SCOPE

Clinical Pharmacology & Therapeutics is the authoritative, cross-disciplinary journal in experimental and clinical medicine devoted to publishing advances in the nature, action, efficacy and evaluation of therapeutics in humans. *CPT* welcomes original articles in the emerging areas of translational, predictive and personalized medicine; new therapeutic modalities including gene and cell therapies; pharmacogenomics, proteomics and metabolomics; bioinformation and applied systems biology complementing areas of pharmacokinetics and pharmacodynamics, human investigation and clinical trials, pharmacovigilance, pharmacoepidemiology, pharmacometrics, and population pharmacology. The journal also publishes articles by invitation. Commentary and Point-Counterpoint provide a forum for perspectives in clinical pharmacology and therapeutics in the context of contemporary scientific, political, economic and social issues. State of the Art contributions summarize the latest advances in the science underpinning drug discovery, development, regulation and utilization. *CPT* highlights issues transforming the practice of clinical pharmacology, including ethics, education and public policy. Bench-to-bedside translation in therapeutics is presented in the context of clinical applications of basic pharmacology, discovery and translational medicine and drug development. *CPT* does not consider animal studies. *CPT* will consider case reports on a case-by-case basis.

ABSTRACTING

This journal is covered by: British Library, Chemical Abstracts, China Academic Library & Information System, CrossRef, Current Contents/Thomson Reuters, EBSCO, Infotrieve, Nature Publishing Index Asia-Pacific, OVID, Portico, PubMed, PubMed Central, Scopus, Swets, and University of Toronto Libraries.

IMPACT FACTOR

With an impact factor of 7.266, *CPT* is the top-ranked journal publishing primary research in the field of pharmacology and pharmacy.

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FREQUENCY Printed monthly. Accepted Article and Early View Publication as available.

Submission Fee (Does not apply to invited authors) Manuscripts submitted for consideration will incur a submission fee of $75 (plus VAT where applicable) to cover, in part, the time and resources required to manage submissions. Members of ASCPT will receive a discounted submission rate. Fees must be paid prior to submission of a paper and will not be waived or refunded.

EDITORIAL PROCESS

Criteria for Publication

The principal criteria for publication of papers in *CPT* are that they:

- Report original scientific research (the main results and conclusions must not have been published or submitted elsewhere)
- Are of outstanding scientific importance
- Reach a conclusion of interest to an interdisciplinary readership.

Selection Process of Submitted Papers

CPT has space to publish approximately 10% of all submitted papers, requiring rigorous selection criteria. Upon submission, the manuscript is assigned to an Associate Editor covering the subject area, who makes the initial decision on whether to send it out for peer-review. The journal receives many more high-quality submissions than it can publish and *CPT*'s Associate Editors strive to identify maximally impactful papers to compete for the limited publication space available. Papers not chosen for peer-review are quickly returned to the authors to minimize unproductive delays and allow sufficient time to prepare the manuscript for submission to another journal.

If selected for peer review, referees are chosen by the Associate Editor based upon subject expertise and ability to evaluate the paper fully and fairly, and in a timely manner. The ideal referee report indicates who will be interested in the new results and why, and will be used by the Associate Editor to help determine the impactfulness of publication in *CPT*. If a paper is selected for further consideration, authors are required to address the comments of the referees in a revised version of the paper.

The Associate Editor assigned to the paper is responsible for making a decision recommendation to the *CPT* Editorial Team in light of the referees' reports. All papers recommended for acceptance are then considered by the entire Editorial Team of *CPT*, including the Editor-in-Chief, who determines the final disposition for all papers.

PREPARATION OF MANUSCRIPTS

CONTENT TYPES

Author Submissions (1) Article, (2) Clinical Trial, (3) Letter to the Editor

Invited Submissions (4) Book Review, (5) Commentary, (6) Conference Proceedings, (7) Development, (8) Discovery, (9) Macroscopy, (10) Opinions, (11) Point-Counterpoint, (12) Practice, (13) Review, (14) State of the Art, (15) Translation. Submissions that do not adhere to the guidelines provided in this document will be returned to the author prior to consideration. Material that cannot fit within the allowed limit may be submitted as supplementary information.

ORIGINAL RESEARCH

(1) Article

Word Limit: 4,000 words excluding abstract, references, tables, and figures
Abstract: 150 words maximum
References: 50 maximum
Figures/Tables: 7 maximum
Substantial novel research

(2) Clinical Trial

Word Limit: 4,000 words excluding abstract, references, tables, and figures
Abstract: 150 words maximum
References: 50 maximum
Figures/Tables: 7 maximum
Manuscripts developed from well-conducted, well reported, and relevant clinical trials. See Clinical Trials: Guide to Authors for additional information.

(3) Letter to the Editor

Word Limit: 400 words excluding references, tables, and figures
Abstract: no abstract for this article type
References: 5 maximum
Figures/Tables: 1 maximum
Letters must be submitted within 6 months of publication of the subject article. A Letter to the Editor must reference the original source, and a Response to Letter must reference the Letter to the Editor in the first few paragraphs. Letters to the Editor can use an arbitrary title, but a Response must cite the title of the Letter: e.g., Response to [title of Letter]

OTHER CONTRIBUTIONS

(4) Book Review [typically by invitation of Editors]

Word Limit: 700 words
Abstract: no abstract for this article type
References: no references for this article type
Figures/Tables: Cover image will be secured prior to publication by the Editorial Office

(5) Commentary [typically by invitation of Editors]

Word Limit: 1,600 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 10 maximum
Figures/Tables: 2 maximum
Typically highlights findings of a paper in the same issue, presented in a wider scientific and clinical context

(6) Conference Proceedings [typically by invitation of Editors]

Word Limit: 1,600 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 10 maximum
Figures/Tables: 2 maximum
Typically highlights topics from recent conferences that impact clinical pharmacology

(7) Development [typically by invitation of Editors]

Word Limit: 1,500 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 5 maximum
Figures/Tables: 2 maximum. At least 1 color figure is required.
Emerging innovations in tools, platforms, and applications transforming diagnostic and therapeutic development; new algorithms optimizing the clinical utility of patient- and population-based interventions; evolution of regulatory and economic policies centered on optimizing disease management.

(8) Discovery [typically by invitation of Editors]

Word Limit: 1,500 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 5 maximum
Figures/Tables: 2 maximum. At least 1 color figure is required.
Cellular or molecular mechanisms emerging from enabling platform technologies providing insight into pathophysiology, opening new avenues for diagnostic and therapeutic intervention; novel integration of fundamental principles across communities of practice and disciplines producing unexpected paradigms with transformative clinical potential.

(9) Macroscopy [typically by invitation of Editors]

Word Limit: 1,600 words
Abstract: no abstract for this article type
References: 5 maximum
Figures/Tables: 1 maximum
Should offer a broad view on critical issues facing clinical pharmacology and therapeutics in science, healthcare, policy, and society

(10) Opinions [typically by invitation of Editors]

Word Limit: 1,500 words excluding introduction, references, tables, and figures

Abstract: no abstract for this article type; should include a 75-word introduction
References: 5 maximum
Figures/Tables: 2 maximum
These short pieces are designed to give the author's perspective on current topics of relevance to the readership in areas of education, ethics, and public policy

(11) Point-Counterpoint [typically by invitation of Editors]
Word Limit: 1,600 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 10 maximum
Figures/Tables: 2 maximum
Balanced discussion of controversies in clinical pharmacology

(12) Practice [typically by invitation of Editors]
Word Limit: 1,500 words excluding introduction, references, tables, and figures.
Abstract: no abstract for this article type; should include a 75-word introduction
References: 5 maximum
Figures/Tables: 2 maximum. At least 1 color figure is required.
Cases of exceptional novelty that hold teaching points applicable to clinical pharmacology and established therapeutic approaches in clinical care

(13) Review
Word Limit: 4,000-8,000 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 75-100 maximum
Figures/Tables: 8 maximum. At least 2 color figures are required.
High-quality, timely reviews and perspectives covering important topics in the entire field of clinical pharmacology and therapeutics

(14) State of the Art [typically by invitation of Editors]
Word Limit: 4,000-8,000 words excluding abstract, references, tables, and figures
Abstract: 150 words maximum
References: 75-100 maximum
Figures/Tables: 8 maximum. At least 2 color figures are required.
Typically topical reviews, award lectures, keynote addresses, and State of the Art Lectures

(15) Translation [typically by invitation of Editors]
Word Limit: 1,500 words excluding introduction, references, tables, and figures
Abstract: no abstract for this article type; should include a 75-word introduction
References: 5 maximum
Figures/Tables: 2 maximum. At least 1 color figure is required.
Diagnostic and therapeutic paradigms and pharmacological agents emerging from mechanistic insights in pathophysiology bridging discovery science and clinical practice; new tools optimizing therapeutic decision-making; novel algorithms from development and clinical science accelerating discovery of targeted interventions; clinical observations providing unexpected insights into fundamental mechanisms underlying pathophysiology (reverse translation).

FORMAT OF MANUSCRIPTS

General format Manuscripts must be typed in English and be in a single column, double-spaced format. All manuscript pages must be numbered.

Title page This should include (a) the complete manuscript title; (b) all authors' names and affiliations; (c) the name and address for correspondence, fax number, telephone number, and e-mail address; (d) Conflict of Interest statement; and (e) Funding information. The title page should also include the keywords.

Text For contributions requiring abstracts, the lengths are defined in the respective sections of *Preparation of Manuscripts*. For contributions that do not require an abstract, introductory paragraphs may contain references to cited work. Articles should consist of the following ordered sections:

Title Page
Abstract
Introduction
Results
Discussion
Methods (must contain IRB or IACUC approval: see **Informed Consent and Ethics** below)
Study Highlights
Acknowledgements
Author Contributions
References
Figure Legends

Originality A submitted manuscript must be an original contribution not previously published (except as an abstract), must not be under consideration for publication elsewhere, and, if accepted, must not be reproduced elsewhere without the consent of the American Society for Clinical Pharmacology and Therapeutics (ASCPT). Although the editors, editorial board, and referees make every effort to ensure the validity of published manuscripts, the final responsibility rests with the authors, not with *Clinical Pharmacology & Therapeutics*, its editors, ASCPT, or Wiley.

Conflict of Interest *CPT* subscribes to the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*. These principles require that participants in the peer review and publication process disclose all relationships that could be viewed as presenting a potential conflict of interest. Disclosures must include employment, consultancies, honoraria, stock ownership, stock options, expert testimony, grants received and pending, patents received and pending, royalties, and in-kind contributions. Editors may publish disclosed information if they believe readers will find it important in judging the manuscript. Institutional and personal conflicts of interest must also be declared.

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Clinical Trials Registry Registration in a public trials registry is required for publication in *CPT*. A clinical trial is defined as any research project that prospectively assigns human subjects to intervention or comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. Studies designed for other purposes, including exploring pharmacokinetics or safety and tolerability (e.g., phase 1 trials) are exempt. Registration must be with a registry that meets the following criteria: (1) accessible to the public at no charge; (2) searchable by electronic methods; (3) open to all prospective registrants free of charge or at minimal cost; (4) validates registered information; (5) identifies trials with a unique number; and (6) includes information on the investigator(s), research question or hypothesis, methodology, intervention and comparisons, eligibility criteria, primary and secondary outcomes measured, date of registration, anticipated or actual start date, anticipated or actual date of last follow-up, target number of subjects, status (anticipated, ongoing or closed), and funding source(s). Examples of registries that meet these criteria include (1) The registry sponsored by the United States National Library of Medicine (http://www.clinicaltrials.gov); (2) The International Standard Randomised Controlled Trial Number Registry (http://www.controlled-trials.com); (3) The Cochrane Renal Group Registry (http://www.cochrane-renal.org/trialsubmissionform.php); (4) The National (United Kingdom) Research Register (http://www.update-software.com/national/); and (5) European Clinical Trials Database (http://eudract.emea.eu.int/).

Abbreviations Abbreviations should be defined at the first mention in the text and in each table and figure. Write out the full term for each abbreviation at its first use unless it is a standard unit of measure. For a list of standard abbreviations, please consult the CSE Manual for Authors, Editors, and Publishers (available from the Council of Science Editors, 12100 Sunset Hills Road, Suite 130, Reston, VA 20190) or other standard sources.

Style *The American Medical Association Manual of Style* (9th edition), *Stedman's Medical Dictionary* (27th edition) and *Merriam-Webster's Collegiate Dictionary* (10th edition) should be used as standard references. Refer to drugs and therapeutic agents by their accepted generic or chemical name, and do not abbreviate them (a proprietary name may be given only with the first use of the generic name). Code names should be used only when a generic name is not yet available (the chemical name and a figure giving the chemical structure of the drug is required). Copyright or trade names of drugs should be capitalized and placed in parentheses after the name of the drug. Names and locations (city and state in United States; city and country outside United States) of manufacturers of drugs, supplies, or equipment cited in a manuscript are required to comply with trademark law and should be provided in parentheses. The official HUGO gene should be indicated in parentheses with the first reference in the paper.

Language Editing Authors who require editing for language are encouraged to consult language editing services prior to submission.

STUDY HIGHLIGHTS

Original research articles should include a Study Highlights section after the Methods in the manuscript text. The highlights section should include and answer each of the questions below. The entire section, not including the questions, should be under 150 words.

o What is the current knowledge on the

topic?
- o What question did this study address?
- o What does this study add to our knowledge?
- o How might this change clinical pharmacology or translational science?

AUTHOR RESPONSIBILITY

Upon submission, the corresponding author must confirm full access to all data in the study and final responsibility.

AUTHOR CONTRIBUTIONS

A list of each authors' contributions should be provided in the manuscript text on the title page. The standard contributions include: Wrote Manuscript, Designed Research, Performed Research, Analyzed Data, and Contributed New Reagents/Analytical Tools.

ACKNOWLEDGMENTS

This should include sources of support, including federal and industry support. All authors who have contributed to the manuscript must be acknowledged. Medical writers, proofreaders, and editors should not be listed as authors, but acknowledged here.

DISCLOSURE

At the time of submission, each author must disclose and describe any involvement, financial or otherwise, that might potentially bias his or her work. Disclosures must be included on the title page and in the online submission form.

REFERENCES

The reference list should contain the references in the order in which they are cited in the text (Vancouver style). Citations included in tables/figures count toward the maximum references allowed for the article type and must be included in the reference list. Tables created solely of references are not permitted. Only published works, as well as manuscripts in press, should be included in the reference list; articles that are submitted or in preparation should be referred to as "unpublished data" in the text (for which all authors up to 6 total should be listed, then *et al.*). For publications in the reference list, all authors should be included unless there are more than six, in which case only the first author should be given, followed by '*et al.*' Titles of cited articles are required for all article types. Journal names are italicized and abbreviated (with periods after each abbreviated word) according to common usage; refer to Index Medicus (PubMed) for details. For book citations, the publisher and city of publication are required; include the country (and state for US) for lesser-known cities or where any ambiguity is possible (e.g., John Wiley & Sons, Hoboken, New Jersey, USA, 2003; MIT Press, Cambridge, Massachusetts, USA).

Please note the following examples:

Journal articles:

Kashuba, A.D. *et al*. Effect of fluvoxamine therapy on the activities of CYP1A2, CYP2D6, and CYP3A as determined by phenotyping. *Clin. Pharmacol. Ther.* **64**, 257–268 (1998).

Books:

Eisen, H.N. *Immunology: An Introduction to Molecular and Cellular Principles of the Immune Response* 5th edn. (Harper & Row, New York, 1974).

Articles in books:

Weinstein, L. & Schwartz, M.N. Pathogenic properties of invading microorganisms. In *Pathologic Physiology: Mechanisms of Disease* (eds. Sodeman, W.A., Jr. & Sodeman, W.A.) 457–473 (W.B. Saunders, Philadelphia, 1974).

Website:

Fleischbein, J. Northeast Pacific long-term observation program. US GLOBEC <http://globec.oce.orst.edu/groups/nep/index.html> (2003). Accessed 13 April 2006.

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FIGURE LEGENDS

Legends should be brief and specific and should appear after the Reference section in the manuscript text.

GUIDELINES FOR FIGURES AND ARTWORK

Detailed guidelines for submitting figures and artwork can be found at: http://authorservices.wiley.com/prep_illust.asp. Using the guidelines, please submit production quality artwork at submission.

FIGURES IN PRINT

Accepted figure files include PDF, TIFF, or EPS. [color charges may apply]

Minimum resolutions:

- Halftone images, 300 dpi (dots per inch)
- Color images, 300 dpi saved as CMYK
- Images containing text, 400 dpi
- Line art, 1,000 dpi

Sizes:

- Figure width – single image 86 mm (should be able to fit into a single column of the printed journal)
- Figure width – multi-part image 178 mm (should be able to fit into a double column of the printed journal)

Text size

- 8 point (should be readable after reduction – avoid large type or thick lines) line width between 0.5 and 1 point

COLOR ON THE WEB

Figures supplied in color will appear as such on the web for free. If authors choose to forego color charges, these figures will be converted to black and white for the print journal automatically as part of the regular production process. For any figures that include elements that would become inaccurate due to conversion to gray scale (eg, a color key in a bar graph), separate color and black and white versions should be submitted as well as separate versions of the figure legend where color used in the figure is referred to directly. The black and white versions of figures should be submitted as supplementary information and indicated as such in the submission letter.

TABLES

Accepted file types include MS Word DOC or DOCX format. Tables should be numbered consecutively in the order of first citation in the text. Minimize empty space and restrict the number of characters per row to 130. Supply a brief title for each, but place explanatory matter in the footnotes (not in the heading). Do not use internal horizontal and vertical lines. Tables and figures must be uploaded separately from the manuscript text. Each table must be provided as an individual file. Please do not include multipart tables (such as Table 1a and 1b). Tables should be editable and not embedded images or excel files.

JOURNAL STYLE

Papers should be prepared as follows:

1. See the artwork guidelines above
2. Do not make rules thinner than 1 pt (0.36mm)
3. Use a coarse hatching pattern rather than shading for tints in graphs
4. Color should be distinct when used as an identifying tool
5. Commas should be used to separate thousands
6. At first mention of a manufacturer, the town (state if USA) and country should be provided

FILE FORMATS & REQUIREMENTS

Authors are required to submit final, publication-ready files at the revision stage, along with a version tracking all changes to the paper. Use the Track Changes mode in MS Word or indicate the revised text with bold, highlighted, or colored type.

SUPPLEMENTARY INFORMATION

Supplementary information is peer-reviewed material directly relevant to the conclusion of an article that cannot be included in the printed version owing to space or format constraints. It is posted on the journal's website and linked to the article online; it may include data files, graphics, movies, or extensive tables. The printed article must be complete and self-explanatory without the supplementary information.

Supplementary Information Charges

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Supplying Supplementary Information Files

Authors should ensure that supplementary information is supplied in its FINAL format at submission, as it is not copy edited and will appear online exactly as submitted. It cannot be altered, nor new supplementary information added, after the paper has been accepted for publication. Please supply the supplementary information via the electronic manuscript submission and tracking system in an acceptable file format. Each supplementary figure must be provided as an individual high-resolution PDF, TIFF, or EPS file. Each supplementary table must be provided as an individual DOC, DOCX, or Excel file. Supplementary text must be provided in DOC or DOCX format. The number of files should be limited to eight, and the total file size should not exceed 8 MB. Individual files should not exceed 1 MB. Please use the following naming structure for your supplementary figures and tables: Figure S1 and Table S1, etc. Please do not refer to supplementary materials as appendices.

Accepted File Formats File sizes must be as small as possible to expedite downloading. Images should not exceed 640 x 480 pixels. Movie files can be in Quick Time (.mov), or MPEG (.mpg) format. For movies, we recommend 480 x 360 pixels as the maximum frame size and a frame rate of 15 frames per second. If applicable to the presentation of the information, use a 256-color palette. Please consider the use

of lower specification for all of these points if the supplementary information can still be represented clearly. Our recommended maximum data rate is 150 KB/s. Seek advice from the editorial office before sending files larger than our maximum size to avoid delays in publication. Questions about the submission or preparation of supplementary information should be directed to the editorial office.

EDITORIAL POLICIES

PLAGIARISM

Plagiarism is when an author attempts to represent someone else's work as his or her own. Duplicate publication, sometimes called self-plagiarism, occurs when an author reuses substantial parts of his or her own published work without providing the appropriate references. This can range from getting an identical paper published in multiple journals, to 'salami-slicing', where authors add small amounts of new data to a previous paper. Plagiarism can be said to have clearly occurred when large chunks of text have been cut-and-pasted. Such manuscripts would not be considered for publication in *CPT*. But minor plagiarism without dishonest intent is relatively frequent, for example, when an author reuses parts of an introduction from an earlier paper. The journal editors judge any case of which they become aware (either by their own knowledge of and reading about the literature, or when alerted by referees) on its own merits. If a case of plagiarism comes to light after a paper is published, the journal will conduct a preliminary investigation. If plagiarism is found, the journal will contact the author's institute and funding agencies. A determination of misconduct will lead the journal to run a statement, bidirectionally linked online to and from the original paper, to note the plagiarism and to provide a reference to the plagiarized material. The paper containing the plagiarism will also be obviously marked on each page of the PDF. Depending on the extent of the plagiarism, the paper may also be formally retracted.

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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 are unavailable, manuscript evaluation may be stalled until the issue is resolved. A certain degree of image processing is acceptable for publication (and for some experiments, fields and techniques is unavoidable), 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 must also take care to exercise prudence during data acquisition, where misrepresentation must equally be avoided. 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. Images gathered at different times or from different locations should not be combined into a single image, unless it is stated that the resultant image is a product of time-averaged data or a time-lapse sequence. If juxtaposing images is essential, the borders should be clearly demarcated in the figure and described in the legend. The use of touch-up tools, such as cloning and healing tools in Photoshop, or any feature that deliberately obscures manipulations, is to be avoided. Processing (such as changing brightness and contrast) is appropriate only when it is applied equally across the entire image and is applied equally to controls. Contrast should not be adjusted so that data disappear. Excessive manipulations, such as processing to emphasize one region in the image at the expense of others (for example, through the use of a biased choice of threshold settings), is inappropriate, as is emphasizing experimental data relative to the control. When submitting revised final figures, authors may be asked to submit original, unprocessed images.

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CPT expects that data supporting the results in the paper will be archived in an appropriate public repository. Whenever possible the scripts and other artefacts used to generate the analyses presented in the paper should also be publicly archived. Exceptions may be granted at the discretion of the editor for sensitive information such as human subject data or the location of endangered species. Authors are expected to provide a data accessibility statement, including a link to the repository they have used, to accompany their paper.

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Authors must not discuss contributions with the media (including other scientific journals) until the publication date. The only exception is in the week before publication, during which contributions may be discussed with the media if authors and their representatives (institutions, funders) clearly indicate to journalists that their contents must not be publicized until the journal's press embargo has elapsed. Authors will be informed of embargo dates and timings after acceptance for publication of their articles. We reserve the right to halt the consideration or publication of a paper if this condition is broken. From time to time *CPT* will distribute to a registered list a press release summarizing selected content of the next issue's publication. Journalists are encouraged to read the full version of any papers they wish to cover, and are given the names of corresponding authors, together with phone and fax numbers and email addresses. They receive access to the full text of papers about a week before publication on a password-protected website, together with other relevant material (for example, an accompanying News and Views article, and any extra illustrations provided by the authors). The content of the press release and papers is embargoed until the time and date clearly stated on the press release. Authors may therefore receive calls or emails from the media during this time; we encourage them to cooperate with journalists so that media coverage of their work is accurate and balanced. Authors whose papers are scheduled for publication may also arrange their own publicity (for instance through their institutional press offices), but they must strictly adhere to our press embargo.

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We recognize our responsibility to correct errors that we have previously published. Our policy is to consider refutations (readers' criticisms) of primary research papers, and to publish them (in concise form) if and only if the author provides compelling evidence that a major claim of the original paper was incorrect. Corrections are published for significant errors at the discretion of the editors. Readers who have identified such an error should send an email to the editorial office of the journal, clearly stating the publication reference, title, author and section of the article, and briefly explaining the error.

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Publishable amendments requested by the authors of the publication are represented by a formal printed and online notice in the journal because they affect the publication record and/or the scientific accuracy of published information. Where these amendments concern peer-reviewed material, they fall into one of four categories: erratum, corrigendum, retraction, or addendum, described here.

Erratum Notification of an important error made by the journal that affects the publication record or the scientific integrity of the paper, or the reputation of the authors or the journal.

Corrigendum Notification of an important error made by the author(s) that affects the publication record or the scientific integrity of the paper, or the reputation of the authors or the journal.

All authors must sign corrigenda submitted for publication. In cases where coauthors disagree, the editors will take advice from independent peer-reviewers and impose the appropriate amendment, noting the dissenting author(s) in the text of the published version.

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Addendum Notification of a peer-reviewed addition of information to a paper, usually in response to readers' request for clarification. Addenda are published only rarely and only when the editors decide that the addendum is crucial to the reader's understanding of a significant part of the published contribution.

SUBMISSION AND PUBLICATION

SUBMISSION OF PAPERS

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