

X Tips for Authors

Clinical Therapeutics, Current Therapeutic Research, and The American Journal of Geriatric Pharmacotherapy

The editors of *Clinical Therapeutics*, *Current Therapeutic Research*, and *The American Journal of Geriatric Pharmacotherapy* expect all manuscripts to conform to the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals,” also known as Vancouver style (*N Engl J Med.* 1997;336:309–315). Authors are encouraged to refer to the *AMA Manual of Style: A Guide for Authors and Editors*. The journals’ specific style can be found in the “Information for Authors” printed in the back of each issue.

The following are selected tips for authors from *CT*, *CTR*, and *AJGP*’s editors-in-chief, section editors, editors, and peer reviewers.

GENERAL REMARKS

- Avoid subjective words and phrases (define in a quantitative manner or eliminate words such as *low, mild, moderate, severe, good, few, many, most, vast majority, usually, young, elderly, quick, rapid, short, standard lunch, generally consistent, and randomly selected*).
- Reference or provide data for all statements of fact (even those that appear obvious to the author). Without a reference or data, observations should be identified as personal opinion to prevent others who may reference the paper from interpreting these statements as fact.
- “Data on file” references are unacceptable. If the results of an internal company report must be cited, the author should include the manufacturer’s unique internal study number. Referencing statements as personal communication is acceptable, but the date of the communication should be included.
- *P* values should be included whenever statistical significance is claimed. (*Approaching significance* or *a trend toward significance* is not acceptable.)
- Safety may be used as a title to a section in the paper, but cannot be applied to the results of studies, which can, at best, show *tolerability* or *safety profile*. An appropriate statement in a study might be, “The drug appeared to be safe in this patient population.”

If you need additional assistance before submitting your paper, please contact Jo-Ann E. West, Associate Publisher, at 908-547-2082 (phone), 908-547-2204 (fax), or j.e.west@elsevier.com (e-mail).

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www.CurrentTherapeuticRes.com
www.AJGeriPharmacother.com

ABSTRACT

- ~300 words (or less); structured.
- Type of trial should be included (eg, *randomized*, *placebo-controlled*, *double-blind*, *uncontrolled*, *open-label*).
- Briefly indicate the population studied (including age range for eligibility and severity of disease), size, setting, and methods used.
- Both efficacy and adverse effects should be summarized in detail and balanced without bias.
- Everything mentioned in the abstract should be contained in the body of the paper.

INTRODUCTION

- Include background information and the objectives of the study or review article.
- Details of previous studies mentioned should include sample size, study design, dose and duration of treatment studied, and relevant data and *P* values.

MATERIALS AND METHODS

- Patient demographic characteristics should not appear in the Methods section; please move to the Results section.
- Indicate whether the study protocol was approved (or waived) by an IRB or ethics committee.
- Indicate that informed consent, specifying written or oral, was provided by all participants or guardians.
- Adverse effects: Indicate how adverse events were determined and whether assessment of severity or association between drug and adverse effects was done.
- Indicate masking/unmasking procedures and parties involved.
- Vital signs: Indicate in detail what was measured, by whom, and whether masked.
- Blood drawing: Include specific details such as collection method and volume, handling, centrifugation (*g* or rpm, duration, and temperature), and storage.
- Clinical/lab tests: Provide the labs' maximum in-day and between-day coefficients of variation. This gives the reader a sense of the reliability of the lab and allows readers to evaluate the possible effect on the results of potential assay variability.
- Provide details of literature-search methods (databases, key terms, languages, and years searched). For review articles, at least 2 databases in addition to *MEDLINE* are suggested.
- Statistical tests: Include a description and power analysis and provide a reference (even if only a book). If possible, please indicate the name and version number of the software used.
- Indicate whether and how compliance was assessed.

RESULTS

- Provide all pertinent patient demographic characteristics.
- Use both numbers and percentages of patients for clarity.
- Provide detailed data on efficacy and all adverse events. These results should be presented in a balanced fashion, without bias.
- Avoid including comments in this section that belong in the Discussion section, such as possible reasons for results.

DISCUSSION

- Include limitations of the study, and, where appropriate, why improvements were not incorporated into the study.
- In review articles, the author is encouraged to comment on the limitations of the search or the studies cited.
- If applicable, acknowledge that the study design (eg, inclusion/exclusion criteria) may limit the generalizability of the conclusions.
- Include suggestions for future research.

CONCLUSIONS

- Extrapolations should be reasonable and conclusions justified by the data and/or material presented.
- This section should include only conclusions from the present study; please reserve limitations and future direction for the Discussion section.

ACKNOWLEDGMENTS

- Please indicate study support and nonauthor assistance (eg, manuscript preparation).
- Any current or previous support that the authors received from industry, including grants, honoraria, consultancies, speakers' bureau or advisory-board positions, and significant stockholdings, for the present or any other research/work, should also be acknowledged.

REFERENCES

- Follow AMA and journal style. References to "articles submitted for publication" are not acceptable.
- For nonjournal references, authors are encouraged to provide more, rather than less, information, including a URL (Internet/WWW) address and approximate date accessed if available.
- Should be comprehensive and up-to-date.