Future Medicine Author Guidelines

This document outlines how to prepare articles for submission. We recommend you read these guidelines in full before submitting your article. A pre-submission enquiry to the Journal Editor is also strongly encouraged before submission.

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Journal aims & scope

Aims and scope information can be found on the individual journal webpages, along with information regarding Editorial Board members and indexing:

Bioelectronics in Medicine
Biomarkers in Medicine
Concussion
Epigenomics
Future Cardiology
Future Microbiology
Future Neurology
Future Oncology
Future Virology
Immunotherapy
Journal of 3D Printing in Medicine
Journal of Comparative Effectiveness Research
Nanomedicine
Personalized Medicine
Pharmacogenomics
Regenerative Medicine

For the following journals, please see the separate Management Series Author Guidelines:

Breast Cancer Management
CNS Oncology
Colorectal Cancer
Hepatic Oncology
International Journal of Hematologic Oncology
International Journal of Endocrine Oncology
Lung Cancer Management
Melanoma Management
Neurodegenerative Disease Management
Pain Management
Audience

The audience for Future Medicine titles consists of clinicians, research scientists, decision-makers and a range of professionals in the healthcare community. Authors should bear in mind the multidisciplinary status of the readership when writing the article.

Future Medicine articles have been engineered specifically for the time-constrained professional. The structure is designed to draw the reader’s attention directly to the information they require.

Find a journal based on your requirements

<table>
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<tr>
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*Optional: This journal is a subscription journal; however, authors are able to opt for Open Access publication if they wish; Full open access: This journal is a fully gold open access title.
†For Drug, Device and Vaccine Evaluation articles, the open access option is only available where open access is mandated by funding bodies (as described in the section “Compliance with funder open or public access policies” below).

PMC: PubMed Central.
At-a-glance article formatting checklist

<table>
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<tr>
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</table>

*For article types where Figures & Tables are permitted, unless specified differently above, we have no strict limit on the number included (we prefer these to be included as needed to represent the data appropriately); however, in some cases where there is a high number of figures/tables (generally >8 Figures/Tables combined) the Editor will recommend that some are included as online-only supplementary materials.

†For certain journals, including Nanomedicine, this limit can be exceeded. Please consult the Journal Editor if your article does not fit within these limits.

Article templates

In the first instance, Future Medicine journals are happy to consider articles that have not been fully formatted to the journal style. However, should you wish to format your article in advance of submission, the following templates are designed to help you do so, and are available here:

- Title page template (all journals)
- Article body template
- Article body template (management series journals)

Please note, articles will need to be formatted to the journal style prior to final acceptance.
Search engine optimization

Why are search engines important?
One of the most common ways for readers to find an article is using a search engine, such as Google, Google Scholar or Bing etc. Therefore, it is important to write your article with a few points in mind, to help interested readers find your work.

How can I help my article be discovered?
- Include key phrases that represent your research in the abstract. Think about what you might search for when looking for articles yourself and include this.
- Make sure the most important/relevant key phrase is also in the article title whilst ensuring the content has a natural flow.
- Choose appropriate keywords that reflect the content of your work – where different words are commonly used to describe the same thing (i.e., a full term and an abbreviation), include both.
- Aim to be as concise as possible in the abstract (within the journals’ word limit of 120 words or fewer).
Article types
Future Medicine publishes a range of article types, descriptions of which are outlined below. Authors are encouraged to consult the ‘at-a-glance formatting checklist’ for details on word counts and other formatting requirements.

The information below gives an overview of the requirements for each article type published by Future Medicine. However, authors should consult the International Committee of Medical Journal Editors (ICMJE) “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” (http://www.icmje.org/recommendations/), in particular the section on “Preparing a Manuscript for Submission to a Medical Journal” prior to submitting to a Future Medicine journal, for more detailed information.

Reviews
Reviews aim to highlight recent significant advances in research, ongoing challenges and unmet needs; authors should be concise and critical in their appraisal of the subject matter and strive for clarity. The focus should be on key, defining developments rather than providing a comprehensive literature survey. Reviews should provide balanced coverage of the field and not focus predominantly on the author’s own research. Authors are encouraged to include their own perspective on current trends and future directions, particularly in the ‘Future perspective’ section.

Review articles undergo external peer review.

Future Medicine journals consider both narrative and systematic reviews. Systematic reviews should be conducted following the recommendations of PRISMA (http://www.prisma-statement.org/).

Word limit: 4000–6000 words (excluding abstract, executive summary, references and figure/table legends)

Required sections (for a more detailed description of these sections see Article sections):
- Title
- Author(s) names & affiliations
- Abstract
- Keywords
- Body of article
- Future perspective
- Executive summary
- References: target of approximately 80 references
- Reference annotations
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information

Perspectives
Perspectives have the same basic structure and length as review articles; however, they should be more speculative and forward-looking, even visionary. They offer the author the opportunity to present criticism, address controversy or provide a personal angle on a significant issue. Authors of perspectives are encouraged to be opinionated, with all positions concisely and clearly argued and referenced. Perspective articles undergo external peer review; however, referees will be briefed to review these articles for quality and relevance of argument only. They will not necessarily be expected to agree with the author’s position.
**Word limit:** 4000–6000 words (excluding abstract, executive summary, references and figure/table legends)

**Required sections** (for a more detailed description of these sections see [Article sections](#)):  
- Title  
- Author(s) names & affiliations  
- Abstract  
- Keywords  
- Body of article  
- Future perspective  
- Executive summary  
- References: target of approximately 80 references  
- Reference annotations  
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors  
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information  

**Special Reports**  
Special reports are short review-style articles that highlight a particular niche area, be it a specific emerging field, novel hypotheses or method. Articles are categorized as Special Reports at the discretion of the Editorial team. Special Report articles undergo external peer review.

**Word limit:** 1500–3000 words (excluding abstract, executive summary, references and figure/table legends)

**Required sections** (for a more detailed description of these sections see [Article sections](#)):  
- Title  
- Author(s) names & affiliations  
- Abstract  
- Keywords  
- Body of article  
- Future perspective  
- Executive summary  
- References: target of approximately 50 references  
- Reference annotations  
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors  
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information  

**Original Research Articles**  
Authors of original research **must** provide a supporting Cover Letter on submission briefly detailing:  
- Relevance to the journal’s audience  
- Where the novelty in the study lies  
- How the study advances understanding of the field  
- Direct and potential implications of the findings  

**NB.** All Future Medicine journals will consider studies presenting positive, negative or inconclusive data.

Authors are also advised to consult the [Methods Reporting Checklist for Authors](#), available [here](#).
Original Research Articles undergo external peer review.

**Experimental details & data:** Only where a novel experimental procedure has been employed full details must be provided, such that a skilled scientist would be able to reproduce the results presented. The synthesis of all new compounds must be described in detail. Details of routine or previously reported experimental procedures should be provided via references only. Experimental procedures and/or data running to more than two Word document pages should be placed in a supplementary information file.

**Data & materials sharing:** From 1st July 2018, the ICMJE requires that all manuscripts that report the results of clinical trials must contain a data sharing statement, as described on their website here: [http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html](http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html). Please see the Author Disclosure Form (available on our website [here](http://www.icmje.org)) for further information. For other types of original research, authors should be able to provide additional relevant original data underpinning their research, if requested by the Editor or reviewers.

**Data deposition:** We encourage the deposition of data to a discipline-specific, community-recognized repository where one exists, or a generalist repository if no suitable specific resource is available. Repositories can be found via sites such as [re3data.org](http://www.re3data.org).

Where data have been deposited in a public repository, authors should state at the end of the abstract the dataset name, repository name and number.

**Clinical trial reporting:** For authors presenting the results of clinical trials, the guidelines recommended by CONSORT ([http://www.consort-statement.org/](http://www.consort-statement.org/)) and GPP3 ([http://www.ismpp.org/gpp3](http://www.ismpp.org/gpp3)) should be followed. In addition, where available the clinical trial registration number should be included at the end of the abstract, and on the first mention of the trial in the main body of text. Unregistered clinical trials should be declared as such, and the reason for nonregistration should be provided. Mention of other trials should also include the relevant registration number, where available.

Secondary outcomes, exploratory analyses, and *post hoc* analyses should be clearly identified as such; these may be included in the primary publication or published separately, in which case they should clearly reference the primary publication and should not be published before it.

**Observational studies:** Where observational research has been carried out, authors should follow the recommendations of STROBE ([https://www.strobe-statement.org/](https://www.strobe-statement.org/)).

**Word limit:** See below for full Research Articles, Preliminary or Short Communications, and Methodologies.

**Required sections** (for a more detailed description of these sections see Article sections):

- Title
- Author(s) names & affiliations
- Structured abstract
- Keywords
- Introduction
  - Should only cite directly pertinent references
  - Should not include data of conclusions from the work being reported
- Patients & methods/Materials & methods
  - Where an organization was paid or otherwise contracted to help conduct the research (e.g., data collection and management), this should be detailed
Should include information indicating that the research was approved or exempted from the need for review by the responsible review committee (institutional or national). Where no formal ethics committee is available, a statement indicating that the research was conducted according to the principles of the Declaration of Helsinki should be included.

Information on the selection and description of participants should define how authors measured race or ethnicity and justify their relevance.

- **Results**
  - Numeric results should be given not only as derivatives (e.g., percentages) but also as the absolute numbers from which the derivatives were calculated.
  - Statistical significance of results should be specified, if any.

- **Discussion**
  - Authors should distinguish between clinical and statistical significance, and avoid making statements on economic benefits and costs unless the manuscript includes the appropriate economic data and analyses.
  - Authors should avoid claiming priority or alluding to work that has not been completed.

- **Conclusions**
- **Summary points**
- **References**
- **Reference annotations**
- **Acknowledgements**: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors.
- **Disclosures**: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information.
- **Ethical conduct of research statement**
- **Data sharing statement (for studies reporting the original results of a clinical trial or the secondary analysis of clinical trial data only)**

Four types of research article are accepted:

**Full Research Article**

*Word limit:* 5000–8000 words (excluding abstract, summary points, references and figure/table legends)

Research articles should present novel work that makes a significant impact within the scope of the journal, and which represents an important advancement in knowledge or understanding. Routine or incremental work is not suitable for full research papers. Research should be reported succinctly; the inclusion of detailed background discussion is to be avoided. Supporting data or further experimental details can be submitted as Supplementary Information.

**Preliminary Communication**

*Word limit:* 2000–4000 words (excluding abstract, summary points, references and figure/table legends)

Preliminary communication articles are intended for short reports of studies that present promising improvements or developments on existing areas of research. The significance and potential implications of the developments must be explicit.

**Short Communication**

*Word limit:* 2000–4000 words (excluding abstract, summary points, references and figure/table legends)
Short communication articles are short articles that build on a previously published study, document partial research results from an ongoing study, or discuss results from studies limited in scope.

**Methodology**

**Word limit:** 4000–8000 words (excluding abstract, summary points, references and figure/table legends)

Methodology articles should provide an overview of a study method, test or procedure. The method described may be either completely novel or may offer a demonstrable improvement on an existing method. The significance and potential implications of the developments must be explicit.

**Case Studies/Case Series**

Case studies/series present a notable medical case or series of related cases of interest and aim to further the reader’s understanding of the issues relating to such situations. Case study/series articles undergo external peer review. **NB.** The journals *Future Oncology* and *Nanomedicine* do not consider Case studies/series.

**Word limit:** 1500–3000 words

**Required sections** (for a more detailed description of these sections see Article sections):

- Title
- Author(s) names & affiliations
- Abstract
- Keywords
- Body of the article. A suggested structure could be:
  - Presentation of case – setting and patient details/history
  - Initial diagnosis/assessment
  - Treatment/management
  - Outcome and implications
- Discussion/conclusion
- Summary points
- References
- Reference annotations
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
- Ethical conduct of research statement

**White Papers**

White Papers are authoritative reports that bring together the opinions and current thinking of leading stakeholders or recognized experts. They may offer recommendations, outline proposals and aim to set out current ‘consensuses’ related to an issue. The issue under discussion should be of immediate importance to the advancement of the field. White Papers may undergo external peer review and will be accepted at the discretion of the Editor.

**Word limit:** 1500–3000 words

**Required sections** (for a more detailed description of these sections see Article sections):

- Title
- Author(s) names & affiliations
- Abstract
- Keywords
Body of the article
Discussion/conclusion
Executive summary
References: approximately 50 references or fewer
Reference annotations
Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information

Editorials
Editorials are short articles that provide an insight into, or snapshot of issues of topical importance to the journal’s target audience or researchers and other professionals. The intention is that the article should offer an expert perspective on a topic of recent interest. More detailed discussions can take the form of Commentary articles. Invited Editorial articles undergo internal review; unsolicited Editorials will undergo external peer review at the Editor’s discretion.

Word limit: 1500 words maximum (excluding keywords and references).
Required sections (for a more detailed description of these sections see Article sections):
  - Title
  - Author(s) names & affiliations
  - Keywords
  - Body of article
  - References: Please note: A maximum of 20 references are permitted
  - Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
  - Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
  - Please note: No figures, tables or boxes are permitted in editorials

Commentaries
Commentaries are short articles that are similar to Editorials yet provide a more detailed discussion of a topic. Invited Commentary articles undergo internal review; unsolicited Commentaries will undergo external peer review at the Editor’s discretion.

Word limit: 1500–3000 words (excluding keywords and references).
Required sections (for a more detailed description of these sections see Article sections):
  - Title
  - Author(s) names & affiliations
  - Keywords
  - Body of article
  - References: Please note: A maximum of 20 references are permitted
  - Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
  - Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
  - Please note: No figures, tables or boxes are permitted in commentaries
**Interviews**
Interviews are conducted with key opinion leaders in the field and can include a look back over their career and achievements to date, a discussion on their current research, and their thoughts and observations on the field as a whole. Individuals are invited to take part in an Interview, either verbal or written, at the Editor’s discretion, and the contents of the interview undergo internal review. The opinions expressed in an Interview are those of the Interviewee, and do not necessarily reflect the views of Future Medicine. Interviewees are asked to include relevant disclosures in the published interview, including financial and/or conflict-of-interest statements.

**Word limit:** 1500 words

**Required sections:**
- Title
- Interviewee name & affiliation
- Summary/biographical paragraph
- Series of questions for discussion (provided by the Journal Editor)
- Response from the author to each point
- Additional reference sources for the interested reader
- Disclosures

**Priority Paper Evaluations**
Priority paper evaluations review significant, recently published original research articles carefully selected and assessed by specialists in the field (not a paper from the author’s own group). The original research detailed in the chosen paper is discussed with the aim of keeping readers informed of the most promising discoveries/breakthroughs relevant to the subject of the journal through review and comment from experts. Priority Paper Evaluations are intended to extend and expand on the information presented in the original publication, putting it in context and explaining why it is of importance. The ideal article will provide both a critical evaluation and the author’s opinion on the quality and novelty of the information disclosed.

Invited Priority paper evaluations articles undergo internal review; unsolicited Priority paper evaluations will undergo external peer review at the Editor’s discretion.

**Word limit:** 1500 words maximum (excluding abstract, keywords and references).

**Required sections** (for a more detailed description of these sections see [Article sections](#)):
- Title
- Author(s) names & affiliations
- Abstract
- Keywords
- Summary of methods and results
- Discussion
- Future perspective
- Executive summary
- References: **Please note:** a maximum of 20 references are permitted in priority paper evaluations
- Reference annotations
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
- Figures/tables: if necessary, only one of each is permitted
Research Highlights
Research highlights discuss a number of recent original research papers, summarizing and commenting on each paper to give readers a real sense of the cutting edge of research in the field. Invited Research highlights articles undergo internal review; unsolicited Research highlights will undergo external peer review at the Editor’s discretion.

Word limit: 3–4 brief summaries on recent research of 200–500 words each (excluding references).

Required sections:
- Citation of original research paper
- Summary paragraph
- References: Please note: A maximum of 20 references are permitted
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
  - Please note: No figures, tables or boxes are permitted in research highlights

Conference Scenes
Conference scenes aim to summarize the most important research presented at a recent relevant meeting or event. It is not usually feasible to attempt comprehensive coverage of the conference; authors should therefore focus on those presentations that are most topical, interesting or thought-provoking. Invited Conference scenes articles undergo internal review; unsolicited Conference scenes will undergo external peer review at the Editor’s discretion.

Word limit: 1500 words maximum (excluding abstract, conference details and references).

Required sections:
- Conference details (title, date, location)
- Abstract/overview of meeting (120 words maximum)
- Body of article
- References: Please note: A maximum of 20 references are permitted
- Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
- Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
  - Please note: No figures, tables or boxes are permitted in conference scenes

Company Profiles
Company profiles allow representatives from pharmaceutical, biotechnology, etc. companies to describe the work currently being carried out within their particular organization, relevant to the field of the journal in question.

These reports are intended to provide an insight into the history and strategy of a company and profile its corporate capabilities, advanced technologies and future potential. Individuals are invited to write a Company Profile at the Editor’s discretion, and the contents of the piece undergo internal review.

Word limit: 2000 words

Required sections (for a more detailed description of these sections see Article sections):
- Title
- Author(s) names & affiliations
Abstract
Keywords
Introduction – brief factual account of the history and strategy of the company including background information e.g., the year the company was founded, number of employees etc.
Body of article
Summary points
Acknowledgements: author acknowledgements, plus, where relevant, details of individuals who contributed to the article, but who did not fulfill the criteria to be listed as authors
Disclosures: to include funding information, financial and/or conflict-of-interest disclosures, disclosure of any writing assistance (and the funding source for this), and any other relevant information
Please note: A maximum of 20 references are permitted
Figures/tables: if necessary, only one of each is permitted

Letters to the Editor
Readers may submit Letters to the Editor, commenting on an article published in the journal.

Word limit: 1500 words

Inclusion of Letters to the Editor in the journal is at the discretion of the Editor, and they may undergo external review. All Letters to the Editor will be sent to the author of the original article, who will have 28 days to provide a response to be published alongside the Letter.

Drug, Device & Vaccine Evaluations
Separate author guidelines for the submission of these article types are available. Please contact the Drug Evaluations Commissioning Editor to request a copy.

Clinical Trial Protocols & Clinical Trial Evaluations
Separate author guidelines for the submission of these article types are available. Please contact the Drug Evaluations Commissioning Editor to request a copy.
Article sections

The following list provides notes on the key article sections; authors should consult the ‘at-a-glance formatting checklist’ to determine which sections are required for their submission.

Title
Concisely and clearly conveys the scope/novelty of the article; not more than 120 characters.

Author(s) names & affiliations
Including full name, address and e-mail.

Guidance on author sequence:
Author sequence is at the authors’ discretion; however, Future Medicine journals suggest following the recommendations in GPP3 Appendix Table 2 (http://www.ismpp.org/gpp3), whereby authors are listed either in order of the level of their contribution, or alphabetically. The corresponding author should always be indicated.

Guidance on a change of affiliation during writing:
Where an author has changed their affiliation prior to the publication of an article, the affiliation should reflect where the major part of the work was completed. Current affiliation and contact information should be listed in an acknowledgement.

Authorship criteria:
Future Medicine follows the recommendations of the ICMJE as regards authorship – authorship should be based on the following 4 criteria:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Contributors who do not fulfill all four criteria should be listed in the acknowledgements section.

Group authorship:
When a group name is included as an author (i.e., the XYZ Study Group), the respective group member names should be listed in the acknowledgements section. In relevant Medline/PubMed-indexed journals, these individuals are acknowledged as contributors to the article. The submitting author/agent should therefore ensure that group member names are included in full, are spelled correctly, and appear in the order they wish them to be listed on Medline/PubMed. More guidance from Medline can be found here: https://www.nlm.nih.gov/bsd/policy/authorship.html.

Changes to authorship:
Should a change to authorship be required either before or after article publication, this should be brought to the attention of the Journal Editor. This will then be investigated, and corrections made if deemed appropriate by the Editor and with the agreement of all authors involved.

Abstract
Not more than 120 words; no references should be cited in the abstract. The abstract should highlight the importance of the field under discussion within the journal’s scope, and clearly define the parameters of the article.
Structured abstract (for Research Articles)
Not more than 120 words, broken down into Aims, Patients & Methods/Materials & Methods, Results and Conclusions. For authors presenting the results of clinical trials, the guidelines recommended by CONSORT should be followed when writing the abstract (http://www.consort-statement.org/), and the clinical trial registration number included at the end of the abstract, where available.

Data deposition: where data have been deposited in a public repository, authors should state at the end of the abstract the data set name, repository name and number.

Keywords
Up to 10 keywords (including therapeutic area, mechanism[s] of action etc.) plus names of drugs and compounds mentioned in the text.

Body of the article
The article content should be arranged under relevant headings and subheadings to assist the reader.

Future perspective
The author is challenged to include speculative viewpoint on how the field will have evolved 5–10 years from the point at which the article was written.

Executive summary
A series of bulleted summary points that illustrate the main topics or conclusions made under each of the main headings of the article.

Example:

Executive summary
Triple negative breast cancer
- Triple negative breast cancer (TNBC) is one of the most aggressive breast cancer subtypes which disproportionately affects younger women, African-Americans, and those who carry the BRCA1 gene mutation.
- Unfortunately, there are no approved targeted therapies available for non-BRCA TNBC, which remains a high unmet need.

Antibody-drug conjugate
- Antibody-drug conjugate (ADCs) are monoclonal antibodies conjugated to cytotoxic agents, which allows for selective delivery to tumor cells expressing the target antigen.
- Here, we review three ADCs that are currently being evaluated in TNBC in both early and advanced clinical trials.

CDX-011
- CDX-011 is an ADC that combines a humanized monoclonal antibody against GPNMB with a potent microtubule-disrupting agent monomethyl auristatin E (MMAE).
- In a phase II trial (EMERGE), CDX-011 was found to be effective in patients with TNBC and/or GPNMB overexpressing breast cancer. This is currently being evaluated in a larger cohort of metastatic TNBC patients with high GPNMB expression (METRIC).

SGN-LV1a
- SGN-LV1a is an ADC that conjugates a monoclonal antibody against the extracellular domain of LIV-1 with MMAE.
- We describe a Phase I trial evaluating SGN-LV1a in LIV-1 expressing metastatic breast cancer (63 with TNBC), with 25% achieving partial responses and 33% with stable disease and median progression-free survival of 11 weeks.

IMMU-132
- IMMU-132 is an ADC that conjugates the humanized antibody targeting Trop-2 with a topoisomerase-I inhibitor SN-38, the active metabolite of irinotecan.
- In a Phase II trial in patients with relapsed or refractory metastatic TNBC, most of whom were heavily pretreated with median of five lines of treatment; there was an improvement in both progression-free survival and overall survival. Based on these results, IMMU-132 was granted breakthrough therapy designation from the US FDA for patients with TNBC who have failed at least two prior therapies for metastatic disease.

Combination therapies
- There is increasing interest in the field of ADC/immmuno-oncology combination therapy with three planned combination trials with checkpoint blockade.
- IMMU-132 has also been studied in combination with three different Poly(ADP-ribose) polymerase inhibitors in preclinical TNBC models.
Summary points (Research Articles & Company Profiles only)
8–10 bullet point sentences highlighting the key points of the article.

Author contributions (optional, Research Articles only)
Brief summary of the contribution of each individual meeting the criteria to be listed as an author on the manuscript. For example: “Author X was responsible for study conception and design; authors X and Y were responsible for acquisition of data; authors X, Y and Z were responsible for data analysis, and drafting and revision of the manuscript.”

Acknowledgements
Author acknowledgements, plus, where relevant, details of individuals who contributed to the article, such as study group members, or those who contributed but who did not fulfill the criteria to be listed as authors.

Financial disclosure/conflicts of interest
Disclosing any financial and/or material support that was received for the research or the creation of the work. Also disclosing any relationships any authors have (personal, academic or financial relationships that could influence their actions) or financial involvement with an organization or entity with a financial interest in or financial conflict with the subject matter or materials discussed in the manuscript. If writing assistance has been used in the creation of the manuscript, this should also be stated and any sources of funding for such assistance clearly identified.

Ethical conduct of research
For studies involving data relating to human or animal experimental investigations, authors should obtain appropriate institutional review board approval and state this within the article (for those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki should be followed). In addition, for investigations involving human subjects, authors should obtain informed consent from the participants involved and include an explanation of how this was obtained in the manuscript.

Data sharing statement
For studies reporting the original results of a clinical trial or the secondary analysis of clinical trial data, authors should include a data sharing statement, as described on the ICMJE website: http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html

Authors are asked to specify whether their manuscript reports either the original results of a clinical trial, or the secondary analysis of clinical trial data that have been shared with them.

Original results of a clinical trial
For the reporting of original results, authors will be asked to complete the following table (found in the Author Disclosure Form), which will form the basis of the data sharing statement:

<table>
<thead>
<tr>
<th>Will individual, de-identified participant data be available (including data dictionaries)?</th>
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<td>What data in particular will be shared?</td>
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<td>What other documents will be available, if any (e.g., study protocol, statistical analysis plan, etc.)?</td>
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<tr>
<td>When will data be available (start and end dates)?</td>
<td></td>
</tr>
<tr>
<td>By what access criteria will data be shared? To</td>
<td></td>
</tr>
</tbody>
</table>
Examples:

“The authors certify that this manuscript reports original clinical trial data. The data will not be made publicly available.”

“The authors certify that this manuscript reports original clinical trial data. Individual, de-identified participant data that underlie the results reported in this article (text, tables, figures, and appendices) are available from the corresponding author following publication, including the clinical study report and study protocol.”

“The authors certify that this manuscript reports original clinical trial data. Data reported in this manuscript are available within the article or posted publicly at www.clinicaltrials.gov, according to the required timelines. Additional data from the study (e.g., study protocol) are available upon reasonable request.”

Secondary analysis of shared clinical trial data

For the reporting of secondary analyses of clinical trial data that have been shared with the authors, a statement to this effect must be included, including the source of the data.

Example:

“The authors certify that this manuscript reports the secondary analysis of clinical trial data that have been shared with them, and that the use of this shared data is in accordance with the terms (if any) agreed upon their receipt. The source of this data is: *****.”
References

Key points

▪ Authors should focus on recent papers and papers older than 5 years should not be included except for an over-riding purpose.
▪ Primary literature references, and any patents or websites, should be numerically listed in the reference section in the order that they occur in the text (including any references that only appear in figures/tables/boxes).
▪ Information from manuscripts submitted but not accepted should be cited in the text as “unpublished observations” with written permission from the source.
▪ Avoid citing a “personal communication” unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in the text, with written permission from the source.
▪ References should be denoted numerically and in sequence in the text, using Arabic numerals placed in square brackets, i.e., [12].
▪ Quote first six authors’ names. If there are more than six, then quote first three et al.
▪ Reference annotations: 6–8 references should be highlighted that are of particular significance to the subject under review as “* of interest” or “** of considerable interest”, along with a brief (1–2 line) synopsis.
▪ The Future Medicine Reference Manager and EndNote styles can be downloaded from our website at: https://www.futuremedicine.com/authorguide/preparingyourarticle

Format

▪ Author’s names should appear without full stops in their initials
▪ Quote first six authors’ names. If there are more than six, then quote first three et al.
▪ A full stop follows authors’ names
▪ Journal name should be in italics and abbreviated to standard format
▪ Volume number followed by comma, not bold
▪ Page number range separated by a hyphen with no spaces, followed by the year in brackets, and then a full stop

Examples

Journal example:

Book example:

Meeting abstract example:

Patent example:
Website example (organization homepage):
US Food and Drug Association.
www.fda.gov

Website example (specific webpage/document):
www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2015/index

www.hcup-us.ahrq.gov/reports/statbriefs/sb30.pdf

Reference annotations
Papers or of particular interest should be identified using one or two asterisk symbols:

- * = of interest
- ** = of considerable interest

Each of the chosen references should be annotated with a brief sentence explaining why the reference is considered to be of interest/particular interest.

Example:


** This preclinical study demonstrated antitumor responses of an anti-Trop2 antibody–drug conjugate in both mouse and monkey models.
Making the most of article abstracts

Multimedia abstracts can include graphical abstracts (or infographics), video or audio abstracts.

If you are interested in including a graphical, video or audio abstract with your article, please discuss with the Journal Editor at any stage.

Graphical abstracts

All Future Medicine journals encourage the use of graphical abstracts; a concise, visual summary of the main findings of the article, helping readers to quickly understand the findings of the paper and its relevance to them.


Graphical abstracts are made freely accessible to all readers and feature prominently on the article webpage alongside the main abstract. They will also be used by the journal Editors to promote articles to audiences via social media.

Graphical abstracts are peer reviewed alongside the article and should be submitted with the first draft. However, this does not need to be the final version – we are happy to accept a rough sketch or equivalent that will resemble the final version. The final version can then be created whilst the draft is being reviewed and finalized based on the reviewers’ feedback.

The graphical abstract should feature the essential elements discussed in the article, ideally with a short description or legend. There are no limits on the size of the graphical abstract and you should provide a single image or split panels in one image, ideally using font HELVETICA; size 8 points. Files should be supplied as a .jpg, .pdf or .tif file.

TIP: If your article features an Executive Summary or Summary Points section, why not use this information as the basis for your graphical abstract?

If required, we can provide a range of design support services, from polishing an existing figure to completely creating the graphical abstract from a hand-drawn figure.

Using our in-house graphic designers

We offer a number of creative services for authors interested in having a graphical abstract.

Polishing service

Our Graphics Team can work with you to refine and polish your graphical abstract. An example can be found below. This service is available to authors at no additional cost.
Before

After


Creative service
If you are interested in featuring a graphical abstract alongside your article but do not have the resources to create this, our graphics team can assist. Our team will work with you on the concept and design of an abstract. A preliminary version can be created (to be submitted for peer review alongside the article) and the final version created based on editorial feedback. Pricing for this option is available upon request.

Video abstracts
Video abstracts are featured alongside articles as well as on our YouTube channel (where they will be tagged with keywords, a short description and a link to the original publication). For an example video abstract please visit https://www.futuremedicine.com/doi/10.2217/fon-2017-0636. Download our guide to preparing a video abstract (available on our website here) or check out our handy video.

Video abstracts give you the opportunity to introduce readers to your work in your own words. Various formats are accepted including you discussing your work on camera or providing audio commentary that is complemented with a series of slides/images. Video abstracts should be short and to the point – no more than 2–3 mins in total. The aim is to create something that will draw in potentially interested readers – so keep your language clear, and include any key words or phrases associated with your work.

Video abstracts can be published at the time of publication or at a later date post-publication. In each instance, the Journal Editor will post links to the video via the journal’s social media accounts. Therefore, we recommend that you suggest keywords or hashtags the Editor could use when promoting your papers to aid its discoverability.

Video abstracts are freely available to all readers and featured alongside the article abstract as supplemental files within the Details section (as in the example below). Video abstracts will be shared by the Journal Editor via social media (across Twitter, LinkedIn and Facebook) and can also be made available via the Future Science Group YouTube channel.
We are able to offer a number of options for video abstracts, including, for a fee, filming or creating a video from scratch, editing in figures/slides etc. If you are interested in this service please contact Joanne Walker, Head of Publishing Solutions.

Getting started
Before you begin, please let the Editor of the journal know that you are interested in using a video abstract alongside your article.

We recommend that you do not film or create your video until the paper has undergone peer review. The Editor will need to see a transcript of what will be said when the article is submitted that will be sent to peer reviewers alongside the article. Any recommendations for changes will be returned with the editorial feedback. Only once the Editor and/or peer reviewers have approved any changes should filming of the video begin. The video abstract will then be published simultaneously with the article.

If the video abstract is to be created post-publication, the reviewers of the original article will be asked to review the transcript of the video. As above, any recommendations for changes will be returned to you and filming should begin following approval of the Editor/peer reviewers. The video abstract once finalized will be published alongside the article online.

Preparing the transcript
The aim of video abstracts is to go beyond the information presented in your article abstract, providing readers with more in-depth detail and discussion. Videos should be 2–3 mins in length, which equates to ~500 words. When drafting the script, please consider the language used (this should be clear and to the point) and adding images or animations to help emphasize the points made.

If you are looking to create an audio abstract that is complemented with a series of slides/images, you might want to consider creating a storyboard alongside the transcript to help visualize the video. All video transcripts will be published alongside articles as supplementary material.
TIP: If you are interested in creating an image-based video abstract or adding images to a video you have already created but are unable to do this yourself, why not consider using our in-house videographers?

Filming tips
We always recommend a few takes of a video before you film the whole thing to ensure the lighting, sound etc. is right for you.

Equipment – Your institution might already have digital recording equipment you could use. However, using a smart phone (such as an iPhone) affixed to a tripod should suffice. Alternatively, why not ask a colleague (with a steady hand) to take the video?

Location – Try to choose a quiet location where there will be no noise interference. The ideal location is your office or (a quiet) lab. Please ensure the background is as uncluttered as possible (or ideally a light solid color, preferably white). Rather than facing the camera directly, you should be positioned at an angle (either sitting or standing)

Sound – if you have access to a professional microphone please consider using this. Otherwise a USB microphone or built-in microphone available with your smartphone should be sufficient (provided there is no background noise).

Lighting – a well-lit office or lab should provide enough lighting for the video. Please ensure there is no light behind you (such as from a window).

Technical requirements
Ideally files should be supplied in .mov, .mpg, or .mp4 format. If supplying audio only, please provide as an mp3.

The maximum file size should be 100 MB. You can transfer files using any file transfer website (ideally WeTransfer).

Please provide the transcript of the video. This will be published alongside your article (as supplementary material) and used by our Editors when promoting your article via social media.

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Lay abstracts
Lay abstracts are a summary of your article with any technical jargon removed – the aim of these is to make your article more accessible and discoverable by readers who might not be experts in the field but have an interest in the topic – this can include anyone, but lay abstracts are particularly useful for patients and patient advocates, for example. Lay abstracts should be of a similar length to a regular abstract or shorter and can be featured within your article alongside the main abstract.
Figures, tables, boxes & supplementary materials (including videos)

Summary figures, tables and boxes are very useful, and we encourage their use in certain article types (see above section on Article types for details on which articles can include figures/tables/boxes). The author should include illustrations to condense and illustrate the information they wish to convey. Commentary that augments an article and could be viewed as ‘stand-alone’ should be included in a separate box. An example would be a summary of a particular trial or trial series, a case study summary or a series of terms explained.

Figures, tables and boxes should be numbered consecutively according to the order in which they have been first cited in the text.

Figure/table/box guidelines

- **File format:** All figures, tables and boxes should be submitted in an editable format. For figures that will be included without editing (i.e., photos, imaging data, etc.) please submit as a .jpeg, .pdf or .tiff. Other figures (i.e., graph/bar charts or complex illustrations) should ideally be provided as Adobe Illustrator files (.ai or .eps) if possible, otherwise as a .jpeg, .pdf or .tiff. Tables/boxes should be provided as Microsoft Word, Microsoft Excel or Adobe Illustrator files, and must be editable. If you are uncertain whether the format of your files is appropriate, please check with the Journal Editor.

- **Resolution:** Figure resolution should be as high as possible, ideally 300 dpi or higher for a .jpeg. Images that are blurry or illegible in any way will not be accepted.

- **Font:** If possible, please use Helvetica 8pt.

- **Abbreviations:** All abbreviations used within Figures/tables/boxes should be defined in the legend (even if previously defined in the body of the manuscript).

- **Photomicrograph:** Please ensure that scale bars are included in figures where appropriate (i.e., photomicrographs). Symbols, arrows or letters used in photomicrographs should contrast with the background. Please explain internal scale and identify the method of staining in photomicrographs.

Future Medicine is able to offer a number of design services to authors, from polishing an existing figure to creating one from scratch (subject to fees). If you would be interested in learning more about this service, please contact Joanne Walker.

Chemical structures

If possible, please submit structures drawn in ISISDraw or ChemDraw format. However, chemical structures can be redrawn in-house. Please use the following conventions:

- Always indicate stereochemistry where necessary – use the wedge and hash bond convention for chiral centers and mark cis/trans bonds as such.
- Draw small peptides (up to five amino acids) in full; use amino acid abbreviations (Gly, Val, Leu, etc.) for larger peptides.
- Refer to each structure with a number in the text; submit a separate file (i.e., not pasted throughout the text) containing these numbered structures in the original chemical drawing package that you used.

Color figure charge

Future Medicine has a charge for the printing of color figures (i.e., each color figure) in the print issue of the journal. We have no page charges, unlike some other publishers, and aim to keep our color charge to a minimum.
This charge does not apply to the online (including PDF) version of articles, where all figures appear in color at no charge.

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  - not more than five figures from a whole book or journal issue/edition;
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Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to judge its appropriateness for the study and to verify the reported results.

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Open access fees

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Melanoma Management

*Plus VAT where applicable.

#Fee of $850/$485 only applies to content that is not reviewed externally as standard, e.g., editorials, commentaries and interviews.

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Access tokens

What is an access token?
An access token allows a single user to access a certain amount of content an indefinite number of times. Most commonly, this is a single article – but can be any set of content, up to and including access to all of our content. Please note that access tokens are only available to authors for non-commercial purposes. For authors or third parties wishing to host an article on a company website, please contact reprints@futuremedicine.com.

Why use an access token?
An access token offers a cost-effective and time-efficient way of offering access to a targeted group of people. It allows an author to share their work with their colleagues, peers and friends effortlessly by providing them a link to directly access the article, increasing the visibility of the article and its readership.

How does it work?
▪ An author should request access tokens directly through a staff member of Future Medicine, stating the article which they wish to purchase the tokens for.
▪ Once payment has been processed, the access tokens are immediately available for activation. The author will receive an automated e-mail that contains the details of how to share the access tokens with their colleagues, peers and friends - including suggested text which they can use as the base for any e-mail they might send.
▪ Each user who wishes to access the content must be provided with the activation link (contained in the e-mail the author receives) - in order to access the content, they must simply click on the link, then register (or login, if already a registered user) and the content will be available to them.
▪ There is no time limit within which the tokens must be activated, so there is no pressure on the author to ensure the content is accessed immediately.
▪ Once all the access tokens have been used, additional bundles of 50 can be purchased and the author can continue to distribute his content in the same way as described above.

Costs
Access tokens can be purchased in bundles of 50 at a time at a cost of **$150 per 50 tokens**, which is very cost effective compared with a single user purchasing a single pay-per-view article. Therefore, an author can share his work at a cost of only $3 per person – with no expiry date.
Post-publication tools

There are many ways to help increase the reach of your article; see the information below, and check out our infographic on “How to spread the word about your article” here:

Social media

Sharing the news that your article has been published, via social media, is a great way to let your peers know about your work. Twitter, Facebook and LinkedIn are all great places to spread the word. All Future Medicine articles include sharing links at the top of the page, making it easy for you to create posts for your various accounts:
## Journal social media sites

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Twitter
Tips for creating a tweet about your article:

- Include a link to your article!
- Include an image – tweets that include images attract far more engagement than those that don’t. We are happy for authors to include images of any figures, or perhaps another image you think reflects the content of your article well
  - Be sure to check any image you use is in the public domain
- Use appropriate hashtags (utilize http://hashtagify.me/ for information on hashtags) – by marking out a key word or phrase by preceding it with a hashtag (such as #AlzheimersDisease), your tweet will be searchable and discoverable by other users. Many people follow certain hashtags regularly, so do have a look to find out what the key terms are for your subject area.
- @mention your co-authors, institution, funders etc. – most universities and some individual departments have their own Twitter accounts, and by mentioning their username (such as @futuresciencegp), they will be notified of your tweet in the Mentions section of their account. Once you have their attention, they may click to read your article or share your tweet with their followers! The tweet will also be visible to anyone who follows you, as normal.
  - Beware of the difference between @mention and @reply – an @reply places the username at the front of your tweet and is generally used to reply to another user’s tweet or to send them a specific message. By placing the username at the start of your tweet (i.e., with no text before it), the tweet will only be visible to the user you’ve replied to, or anyone who follows both you and the other user. So if you want your tweet to be widely seen, include the username within your tweet but not at the beginning.
- @mention the journal – all Future Science Group journals (see above) have a Twitter account, and we’ll be sure to re-tweet you if you mention us!
- Ask your co-authors to re-tweet your message, to spread the word further to their networks. You can also encourage people to re-tweet in your tweet itself!

Facebook
You may think that Facebook is just for personal use, but it can be a great tool to spread the word about your article. Post information about your article on your own profile, add depth to your information along with a related image, and a link to the article. Don’t forget to copy in @futuresciencegroup so we can ‘like’ and share it as well.
LinkedIn
Future Science Group and many of the individual journals have their own LinkedIn groups. We encourage authors to join these groups, and post about their article (or any other topics they think would be of interest to the group members).

Sharing on an FSG knowledge hub
Many Future Medicine journals are partnered with an associated knowledge hub; an online community offering medical professionals easy access to breaking news, peer-reviewed articles and multimedia content. For a fee, your article can be featured on the journal’s partner site, and made exclusively accessible to site’s registered members. The article abstract will be hosted on the site, with a direct link to the article PDF featured on the homepage, shared via social media and highlighted in the knowledge hub’s weekly newsletter. This will automatically ensure your article reaches its target audience, helping to increase its readership and extend its impact. If you are interested in finding out more about this option, as well as other options for reaching your target audience via our digital sites, please contact Joanne Walker for further information.

Article metrics
Various article metrics are available on an article’s page on our website, including download numbers, and information from Altmetric and Dimensions.

Altmetric
All Future Medicine articles are tracked by Altmetric, with each article receiving a score reflecting the quantity and reach of the attention it has received. Click on this score on each article page to find out more about how much and where an article is being talked about! For more information on Altmetric, go to https://www.altmetric.com.

Dimensions
Information from the Dimensions platform can be viewed alongside articles, including citation information. Click on the Dimensions badge on the article page to find out more information.