Future Medicine Management Series
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:

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

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

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
Audience

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

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>
<th>Journal</th>
<th>Audience</th>
<th>Medline</th>
<th>Impact Factor (2017)</th>
<th>Open Access**</th>
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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.
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<tr>
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*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) we 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: 3000 words (excluding practice points, abstract, references and figure/table legends)

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

- Title
- Author(s) names & affiliations
- Practice points
- Abstract
- Keywords
- Body of article
- Future perspective
- 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 very forward looking, even visionary. They offer the author the opportunity to present criticism or address controversy.

Authors of perspectives are encouraged to be highly 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.
Perspectives are divided into three types:

**Management Perspective** – authors are encouraged to discuss their own expert experience and opinions on a medical management topic that is the cause of debate in the field. This can include, for example, a clinical issue for which the optimum treatment is undecided, a new treatment type that has not yet entered mainstream use or existing approaches on which there are differing opinions.

**Policy Perspective** – authors are encouraged to discuss their own expert experience and opinions on a policy issue of relevance to current medical management. This can include, for example, topics such as health policy, health care reform, disease management guidelines, economic issues, etc.

**Ethical Perspective** – authors are encouraged to discuss their own expert experience and opinions on an ethical issue related to the treatment of their patients.

**Word limit:** 3000 words (excluding practice points, abstract, references and figure/table legends)

**Required sections** (for a more detailed description of these sections see Article sections):
- Title
- Author(s) names & affiliations
- Practice points
- Abstract
- Keywords
- Body of article
- Future perspective
- 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 practice points, abstract, references and figure/table legends)

**Required sections** (for a more detailed description of these sections see Article sections):
- Title
- Author(s) names & affiliations
- Practice points
- Abstract
- Keywords
- Body of article
- Future perspective
- 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. Please see the Author Disclosure Form (available on our website here) 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.

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/) and 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/).
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. If requested by the Editor or reviewers, authors should be able to provide additional relevant original data underpinning their research.

**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, peer-reviewed 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.

*Word limit: 1500–3000 words*

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

- Title
- Author(s) names & affiliations
- Practice points
- 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
- 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

Journal Watch
The Journal Watch highlights the most important research articles across the spectrum of topics relevant to the field of the journal. Recently published original research articles (within the last 1–2 months) are selected by experts and briefly summarized, to provide readers with a snapshot of the most important current research. Invited Journal Watch articles undergo internal review; unsolicited Journal Watch articles will undergo external peer review at the Editor’s discretion.

Word limit: 100–150 words (per summary)
Required sections (for a more detailed description of these sections see Article sections):

- Article citation
- Summary paragraph

Ask the Experts
Ask the Expert articles aim to document the opinions of a key opinion leader on a topical subject. Individuals are invited to take part in an Ask the Experts feature, either verbal or written, at the Editor’s discretion, and the contents of the piece undergo internal review. The opinions expressed in an Ask the Experts feature are those of the invited Expert, and do not necessarily reflect the views of Future Medicine. Experts are asked to include relevant disclosures in the published interview, including financial and/or conflict-of-interest statements.

Word limit: 1500 words
Required sections:

- Summary/biographical paragraph
- Series of questions for discussion (provided by the journal’s Commissioning Editor)
- Response from the author to each point
- Additional reference sources for the interested reader
- Disclosures

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’s Commissioning Editor)
- Response from the author to each point
- Additional reference sources for the interested reader
- Disclosures

**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

**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. 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.

Practice points
A series of 6–10 bulleted points outlining methods of diagnosis and clinical treatment options – the key points for a clinician to bear in mind when presented with a situation of this type in their day-to-day practice (NB. for authors writing reviews describing lab research rather than clinical topics, a
bulleted summary list of the main points of the article should be included in place of the practice points).

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.

Summary points (Research articles 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](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>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>What data in particular will be shared?</td>
<td></td>
</tr>
<tr>
<td>What other documents will be available, if any (e.g., study protocol, statistical analysis plan, etc.)?</td>
<td></td>
</tr>
<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 include:</td>
<td></td>
</tr>
<tr>
<td>- With whom?</td>
<td></td>
</tr>
<tr>
<td>- For what types of analyses?</td>
<td></td>
</tr>
<tr>
<td>- By what mechanism?</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](http://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-Trep2 antibody-drug conjugate in both mouse and monkey models.
Making the most of article abstracts

Multimedia abstracts can include graphical (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 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.

**Copyright**
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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 (incl. video)

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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- Use up to three figures (including tables) from a journal article or book chapter, but:
  - not more than five figures from a whole book or journal issue/edition;
  - not more than six figures from an annual journal volume; and
  - not more than three figures from works published by a single publisher for an article, and not more than three figures from works published by a single publisher for a book chapter (and in total not more than thirty figures from a single publisher for re-publication in a book, including a multi-volume book with different authors per chapter).

- Use single text extracts of less than 400 words from a journal article or book chapter, but not more than a total of 800 words from a whole book or journal issue/edition.

Permission to go beyond such limits may be sought although in such instances the permission grant may require permission fees. Important – although permission may be granted without charge, authors must ensure that appropriate permission has nevertheless been obtained. Co-signatories of the permissions agreement can be found on the following website: http://www.stm-assoc.org/copyright-legal-affairs/permissions/permissions-guidelines/.

Please send us copies of letters or forms granting you permission for the use of copyrighted material so that we can see that any special requirements with regard to wording and placement of credits are fulfilled. Keep the originals for your files. If payment is required for use of the figure, this should be covered by the author.

Supplementary materials, including videos
Figure, tables and boxes larger than one A4 page will be included as online-only supplementary information. At the Editor’s discretion data or experimental details can also be included.

Our articles can be supported by other videos online, including mechanism of action videos, videos of procedures, etc.

Videos are freely available to all readers and featured alongside the article abstract as supplemental files within the Details section (as in the example below). Videos will be shared via social media (across Twitter, LinkedIn and Facebook) and can also be made available via the Future Science Group YouTube channel.
The copyright for any videos provided by the author will remain with the author. The author will grant Future Medicine a license to publish the video, in accordance with the terms of the Copyright Assignment Form.

Please let the Journal Editor know that you are interested in using a video alongside your article.
Units of measurement

Measurements of length, height, weight and volume should be reported in metric units (meter, kilogram or liter) or their decimal multiples.

Temperatures should be in degrees Celsius.

Blood pressures should be in millimeters of mercury.

Any other units should be reported using the International System of Units (SI) where possible.

Statistics

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.

When possible, appropriate indicators of measurement error or uncertainty (such as confidence intervals) should be included.

Please define any statistical terms, abbreviations and symbols used.
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Future Medicine partners with Enago to provide pre-submission editing services for our authors.

Editing services include:

- Language check
- Copyediting
- Substantive editing

For more information, please visit the website here: [http://futuremedicine.enago.com](http://futuremedicine.enago.com)
Submission
All our journals welcome unsolicited proposals for articles. Please send a pre-submission email to the Journal Editor outlining the scope of the paper you wish to submit before formally submitting your article via our online submission system. Please ensure that solicited manuscripts are submitted on or before the agreed deadline. If a manuscript requires authorization by your organization before submission, please remember to take this into account when working towards these deadlines.

First draft submission should be made via our online submission system in the first instance. Guidelines to using the system can also be found on this page. If possible, manuscripts should be submitted in .docx format. However, we can convert most word-processing packages.

To help with the speed of processing of an article, authors should ensure that their article has been edited for language and grammar by a fluent English speaker prior to submission.

Submitting agents
Any third party (such as a medical writer or assistant) can submit via ScholarOne Manuscripts as a Submitting Agent. A “Guide to Article Submission for Submitting Agents” is available here.

Copyright assignment
Future Medicine journals have different publishing options, depending on the title you are publishing in. Some journals are ‘hybrid’ – articles are published behind a paywall as standard (accessible to journal subscribers and those who choose to pay a one-off fee to access the article), but authors also have the option to pay a fee to publish their article open access (making them freely available for all readers to access). Other journals are fully open access, with all articles requiring the payment of the open access fee on acceptance for publication. To find out what options are available for your chosen journal, see the table of information above. For more information on Open Access publication, see below.

Transfer of copyright
For authors publishing via the standard, non-Open Access route, copyright of the article is transferred to the journal. However, the author retains certain rights to re-use the content in future. For further details on this, please read the details in the Copyright Assignment Form, available on our website.

Required forms
These documents should be completed and submitted alongside article submissions as appropriate.

Compulsory:
- **Author Disclosure Forms** – required for all submissions. These are available on our website.
- **EITHER: Copyright Assignment Form** – required if the open access option is not being taken. For articles where copyright is to be assigned to the journal, please complete the Copyright Assignment Form available on our website.
  - **OR: Open Access Form** – required if the open access option is being taken. For authors wishing to publish their article open access, a copyright form is not required. Please see visit the Open Access page for details on this option, and for the forms required.

Optional:
- **Accelerated Publication Form** – required if the accelerated publication option is being taken. For authors opting to use the Accelerated Publication service, please complete the form available on our website. For more information on this option, see below.
Peer review
Once the manuscript has been received in-house, it will undergo initial internal review by the Journal Editor. Articles deemed suitable for consideration will then proceed to external peer review (dependent on article type – for more details, see the section on External peer review below). This usually takes around 4 weeks, although an Accelerated Publication option is also available. Please provide a list of suitable peer reviewers with your initial submission.

Revision
After peer review is complete, a further 2 weeks is allowed for any revisions (suggested by the referees/Editor) to be made.

In-house production
Accepted manuscripts will undergo production in-house. This will involve type-setting, copy-editing, proof-reading and re-drawing of any graphics. Authors will receive proofs of their article for approval and sign off.

Please note that once the author receives the copy of their article for approval, our production department will need to hear from them within a tight deadline to ensure the issue is published on schedule. If you believe you may be away and unable to check the galley proofs at any point, please let the Journal Editor know.

Production process:
- Manuscript accepted by Journal Editor, and sent to the Production team
- Manuscript is typeset, figures/tables formatted, and house styles applied
- Manuscript is imported into the PXE Digital Publishing Platform (see: http://powerxeditor.aptaracorp.com/), and copyedited
- **Author receives an email from their Production Editor, with information on how to access their article via the PXE platform.** They are asked to:
  - Answer any queries highlighted by the Production Editor
  - Conduct any final minor edits to the text that they wish to make
  - Sign the article back over to the Production Editor
- This process may be repeated, until all the Production Editor’s queries have been addressed
- The Production Editor then creates a final PDF of the article from the PXE platform, and conducts any final edits to the layout etc. – at this point the article content and layout is finalized
- XML files of the final article are produced
- Article is published online, in the journal’s ‘Ahead of print’ section
- Once all the articles for a journal issue are complete, they are compiled into the final journal issue and assigned page numbers
**Accelerated publication option**

Our fee-based accelerated publication option provides publication of accepted articles online ahead of the print issues, within 6 weeks of submission (subject to receiving a signed Accelerated Publication Agreement form on the day of submission, and acceptance following peer-review and article revisions). If you are interested in this option, please inform the relevant Editor once they have confirmed receipt of your first draft.

Accelerated publication fees are as follows:

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<th>Journal</th>
<th>Accelerated publication fee$^5</th>
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<td><strong>Subscription journals</strong></td>
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<tr>
<td>▪ Bioelectronics in Medicine</td>
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<td>▪ Melanoma Management</td>
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$^5$Discounts are available for authors choosing both the Open Access and Accelerated Publication options (NB. For Drug, Device and Vaccine Evaluation articles, the Open Access option is only available where OA is mandated by funding bodies [as described in the section “Compliance with funder open or public access policies”]).

*Plus VAT where applicable
Editorial policies

Future Medicine titles endorse the *Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals*, issued by the International Committee for Medical Journal Editors, and GPP3 ([http://www.ismpp.org/gpp3](http://www.ismpp.org/gpp3)). This information is also available at [https://www.futuremedicine.com/authorguide](https://www.futuremedicine.com/authorguide).

Manuscript submission & processing

Future Medicine titles publish a range of article types, including solicited and unsolicited reviews, perspectives and original research articles. Receipt of all manuscripts will be acknowledged within 1 week and authors will be notified as to whether the article is to progress to external review. Initial screening of articles by internal editorial staff will assess the topicality and importance of the subject, the clarity of presentation, and relevance to the audience of the journal in question.

If you are interested in submitting an article, or have any queries regarding article submission, please contact the Journal Editor, via the Editorial Director. For new article proposals, the Journal Editor will require a brief article outline and working title in the first instance. We also have an active commissioning program whereby the Journal Editor, under the advice of the Editorial Board, solicits articles directly for publication.

External peer review

Through a rigorous peer-review process, Future Medicine titles aim to ensure that articles are unbiased, scientifically accurate and clinically relevant. All Original Research Articles (including full studies, short/preliminary communications, case studies/series, etc.), Review Articles, Perspectives, and any other articles deemed necessary by the Journal Editor, are peer reviewed by two or more members of the International Editorial Board or other specialists selected on the basis of experience and expertise. Review is performed on a double-blind basis – the identities of peer reviewers and authors are kept confidential. Peer reviewers must disclose potential conflicts of interests that may affect their ability to provide an unbiased appraisal (see Conflict of Interest Policy below). Peer reviewers complete a referee report via ScholarOne Manuscripts, to provide general comments to the editor and both general and specific comments to the author(s). More information is available on our For Reviewers page, where you can view our Peer Review Guidelines.

Where an author believes that an editor has made an error in declining a paper, they may submit an appeal. The appeal letter should clearly state the reasons why the author(s) considers the decision to be incorrect and provide detailed, specific responses to any comments relating to the rejection of the article. Further advice from members of the journal’s Editorial Board and/or other external experts will be sought regarding eligibility for re-review.

Volunteer to review

If you are interested in acting as a peer review for any Future Science Group journal, in the first instance please get in touch with the Editorial Director, with a copy of your CV and details of the topics you are interested in reviewing on.

Journal Transfers

The popularity of our journals means they are unable to publish every manuscript with merit. In some instances, articles declined by a journal will be given the opportunity to have their articles transferred to a suitable sister publication. This may take place before or after the peer review process and is at the discretion of the Journal Editor. For articles that have already undergone peer review in the original publication the initial peer review will also be transferred. The ease of transfer and portability of peer reviews helps to decrease the time taken to a final decision.
The journal offered to authors as a transfer option will be chosen by the Journal Editor as the most suitable for the manuscript in question. This could be a hybrid journal or Future Science OA, the broad-scope open access journal from Future Science. All journals published by Future Science Group meet high publication standards.

Revision
Most manuscripts require some degree of revision prior to acceptance. Authors should provide two copies of the revised manuscript – one of which should be highlighted to show where changes have been made. A detailed Author Response to the reviewers’ comments is also required, and should be provided via ScholarOne Manuscripts. Manuscripts may be accepted at this point or may be subject to further peer review. The final decision on acceptability for publication lies with the Journal Editor.

Post-acceptance
Accepted manuscripts will undergo production in-house. For more information on this, see the In-house production section above.

Embargo policy
- Following the acceptance of articles for publication, authors (and their institutions, etc.) are welcome to publicize the publication; authors wishing to do so, should advise the editor of the details beforehand.
- No publicity relating to publication in a Future Medicine journal should be carried out while the manuscript is under consideration. However, prior publicity linked to presentations at meetings does not jeopardize publication in a Future Medicine journal.
- In cases where data may be of overwhelming public health importance, the above policy may be waived; should this be the case, the appropriate authorities responsible for public health should decide whether to disseminate information to physicians and the media in advance and should be responsible for this decision. The journal editor should be informed if these circumstances apply.

Any queries relating to publicity of manuscripts should be directed to the journal editor.

Disclosure & conflict of interest policy
Authors must state explicitly whether financial and/or nonfinancial relationships exist that potentially conflict with the subject matter or materials discussed in the manuscript and any such potential conflict of interest (including sources of funding) should be summarized in a separate section of the published article. Authors must disclose whether they have received writing assistance and identify the sources of funding for such assistance. Authors declaring no conflict of interest are required to publish a statement to that effect within the article.

Authors must certify that they have disclosed relationships in which they (or a close family member): is employed, is a contractor, provides services, or has otherwise collaborated in commercial or scientific pursuits – even in the absence of direct monetary remuneration. Stock holdings and issued or pending patents of an author or family member should also be disclosed. This is list is not exclusive of other forms of financial involvement. A 36-month disclosure window should be used. Details of relevant conflicts of interests (or the lack of) must be declared in the ‘Disclosure’ section of the manuscript for all listed authors.

External peer reviewers must disclose any conflicts of interest that could bias their opinions of the manuscript, and they should disqualify themselves from reviewing specific manuscripts if they believe it appropriate. Should any such conflict of interest be declared, the journal editor will judge whether the reviewer’s comments should be recognized or will interpret the reviewer’s comments in the context of any such declaration.
Future Medicine titles endorse the *Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals*, issued by the International Committee for Medical Journal Editors, regarding conflicts of interest, including those related to Authors, Peer Reviewers, and Editors and Journal Staff.

**Ethical conduct of research**

For studies involving data relating to human or animal experimental investigations, appropriate institutional review board approval is required and should be described within the article, as per the [ICMJE recommendations on Protection of Research Participants](https://www.icmje.org/recommendations/browse/ethics/protection-research-participants.html), and the further recommendations of the [International Association of Veterinary Editors’ Consensus Author Guidelines for Animal Use](https://www.iave.org/guidelines-for-animal-research). For those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki should be followed. For investigations involving human subjects, authors should explain how informed consent was obtained from the participants involved.

**Patients’ rights to privacy**

Patients have a right to privacy that should not be infringed without informed consent. Identifying information should not be included unless the information is essential for scientific purposes and the patient (or parent or legal guardian) gives written informed consent for publication. Informed consent for this purpose requires that the patient be shown the manuscript to be published. When informed consent has been obtained it should be indicated in the manuscript.

In attempting to maintain patient anonymity, identifying details should be omitted where they are not essential. However, patient data should never be amended or falsified. Informed consent should be obtained whenever there is any doubt that anonymity can be assured.

**Use of personal communications & unpublished data**

Where an individual is identified within an article as a source of information in a personal communication or as a source for unpublished data, authors should include a signed statement of permission from the individual(s) concerned and specify the date of communication.

**Clinical trial registration**

Future Medicine titles prefer to publish clinical trials that have been included in a clinical trials registry that is accessible to the public at no charge, is electronically searchable, is open to prospective registrants and is managed by a not-for-profit organization, such as [www.clinicaltrials.gov](https://clinicaltrials.gov) (sponsored by the United States National Library of Medicine). Where a clinical trial registration number is available, this should be included at the end of the abstract and also listed the first time the authors use a trial acronym to refer to the trial they are reporting in the manuscript. Unregistered clinical trials should be declared as such, and the reason for nonregistration should be provided.

Whilst referees will take registration status into account, all well designed and presented trials and corresponding data will be considered for publication.

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Mistakes by either editor or author should be identified wherever possible and an erratum or corrigendum published at the earliest opportunity. We will attempt to contact the author of the original article to confirm any error, and publish an appropriate erratum or corrigendum at the earliest opportunity. Please note, while the journal will make every effort to correct errors that are of scientific importance or critical to the understanding of the article, corrections will only be carried out at the discretion of the editor. It is therefore important to check you are happy with the article
proof before it goes to print, as minor errors (such as spelling errors) introduced by the author(s) cannot always be corrected at a later date.

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Where specific findings from a particular study have been previously published (in Future Medicine titles or elsewhere), Future Medicine titles will not consider manuscripts reporting the same findings, except where:

- the results are substantially reanalyzed, reinterpreted for a different audience, or translated into another language;
- the primary publication is clearly acknowledged and cited and the trial registration number (where available) of the original research is included; and
- the publication is clearly presented as an analysis derived from the primary publication results or marked as a translation, with appropriate permission obtained from the previous publisher and copyright laws upheld.

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The use of published or unpublished ideas, words or other intellectual property derived from other sources without attribution or permission, and representation of such as those of the author(s) is regarded as scientific misconduct and will be addressed as such.

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**Compliance with funder open or public access policies**

Future Medicine is supportive of open and public access policies mandated by various funding bodies (see list below). In the first instance, please check whether your article type is covered by your funder mandate (i.e., in some cases, funder policies only cover research articles, rather than review articles) – for a full list of funders with open access requirements, please visit the SHERPA/JULIET website. Please advise the Journal Editor on submission if your article was funded a funder that requires open access publication.

Where open access publication is a requirement of your funding, our article processing charge will need to be paid (in many cases, this will be covered by your funder, and you should check the specific details of this on the funder website). Please see further information below on our Open Access Option for authors.
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- Europe PMC see: [http://europepmc.org/Funders/](http://europepmc.org/Funders/)

NB. The funders listed in the above websites may not be exhaustive; should you have requirements related to a funder that is not listed above, please contact the Editorial Director to discuss further.

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To assist our NIH- and Wellcome Trust-supported authors in meeting the requirement to deposit their article with PubMed Central (NIH) and Europe PMC (Wellcome Trust), Future Medicine will deposit the final published PDF of the article on their behalf, within 2 weeks of online publication. Authors will then be contacted to provide the final information to complete the process (i.e., funding source).

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a) **Submitted version** – authors’ version of the article that has been submitted to the journal and entered into the peer review process (no revisions have yet been made)

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The Future Medicine self-archiving policies differ depending on the final copyright status of your article. Authors should adopt the self-archiving policy corresponding to the publishing route that they have opted for. The first section sets out the policy applicable for instances where copyright is
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Authors may:
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Those interested in TDM for commercial purposes should contact us here: info@futuremedicine.com
Open access

Subscription journal open access option
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Future Medicine also publishes a number of fully Open Access journals. See journal list above for more information. For these journals an article processing fee is charged for accepted articles, and the articles published under a Creative Commons CC BY-NC-ND license, which allows dissemination on an open access basis, but does not permit commercial exploitation or the creation of derivative works without permission (for further details from https://creativecommons.org/), unless otherwise specified in the journal information.

Open access fees

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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
  o 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 @futuresciencecgp), 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.
  o 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.

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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.