

## Antiviral Therapy

### Guidelines for preparation of manuscripts

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# Antiviral Therapy

## Guidelines for preparation of manuscripts

### EDITORIAL POLICY

*Antiviral Therapy* welcomes the submission of high-quality research on the clinical development and use of antiviral agents and vaccines, and the treatment of all virus diseases.

Manuscripts submitted to *Antiviral Therapy* are considered for publication on the understanding that the work contained therein has not been submitted simultaneously to another journal. Copies of related manuscripts submitted elsewhere or in press should accompany the submitted manuscript.

All submissions must be accompanied by a covering letter (a letter template is available on the online submission website), signed by all the authors (or the corresponding author on behalf of all others) stating that all authors have contributed to the paper and are familiar with the contents of the final draft, and that all authors meet the criteria for authorship as established by the [International Committee of Medical Journal Editors](#). The letter should also state whether any author has any conflict of interest. You must declare sources of funding, any influence the funding source may have had on the analysis and reporting of the results and any related interest in the Acknowledgements section. Illustrations and other material obtained from other sources must be acknowledged and permission for reproduction must be obtained from the publisher.

All manuscripts should be submitted via the [online submission site](#). Manuscripts should not be submitted via e-mail or post.

Papers will be peer reviewed and assessed statistically before acceptance. Priority and time of publication of accepted material will be decided by the editors. The editors retain the right to shorten material accepted for publication. This can include subediting the text for style. The editors endorse the [guidelines on good publication practice](#) from the Committee on Publication Ethics (COPE).

### Ethics

Papers based on clinical investigation must conform to ethical standards as set out in the Declaration of Helsinki. Reports describing data obtained from experiments performed in animals must clearly indicate that humane standards were adhered to.

For experiments on isolated tissues the paper must indicate precisely how the donor tissue was obtained. The NIH *Guide for the Care and Use of Laboratory Animals* (National Institutes of Health Publications) gives guidelines for the acquisition and care of animals.

### Randomized controlled trials

Authors are requested to report these in accordance with the CONSORT (Consolidated Standards of Reporting Trials) statement (Hopewell S, *et al.* 2008 *PLoS Med* **5**(1): e20 [doi:10.1371/journal.pmed.0050020](https://doi.org/10.1371/journal.pmed.0050020)). This ensures that enough information is provided for editors, peer reviewers and readers to see how the study was performed and to judge whether the findings are likely to be reliable. For behavioural and public health evaluations involving non-randomized designs, authors should include with their submission a complete checklist from the [TREND statement](#).

### Observational studies

Observational studies (cohort, case-control or cross-sectional designs) should be reported according to the STROBE recommendations (see [www.strobe-statement.org](http://www.strobe-statement.org)).

**Systematic reviews**

Authors are requested to report these in accordance with the QUOROM (Quality of Reporting of Meta-analyses) statement (*Lancet* 1999; **354**:1896–1900) and the [Cochrane Collaboration guidelines](#). When conducting any literature review, it is important that there is complete transparency concerning the choice of material included. All literature reviews must therefore contain a brief section entitled *Search strategy and selection criteria*. This should state clearly the sources (databases, journals, or book reference lists, etc) of the material covered and the criteria used to include or exclude studies; for example, English language only or studies conducted after a specific date.

**SUBMISSION CATEGORIES****Case reports****1,500 words****≤20 references****≤3 display items**

A case report should cover the details of an unusual case or any case that warrants discussion in the journal. However, case reports can be published as an article if the editor feels that the author has adequately extended the report into a topic discussion that meets the criteria for an article, or if the case report itself is used as an example of a point in the author's article.

**Correspondence****1,000 words****≤15 references**

The correspondence section is for letters that are addressing issues or exchanging views on topics arising from published articles in *Antiviral Therapy*. Correspondence should not exceed 1,000 words.

**Meeting report****1,500 words****≤20 references**

*Antiviral Therapy* encourages submissions on written reports from relevant and recent workshops and conferences. An abstract is not required.

**Original articles****≤4,000 words****≤50 references****≤5 display items****Review articles****3,000–5,000 words****≤100 references****≤5 display items**

Reviews are usually commissioned, but unsolicited reviews may occasionally be considered. Articles will be assessed in-house and those considered suitable will be peer reviewed before an editorial decision is made. Reviews should either be definitive overviews of a major topic connected with antiviral therapies or updates of knowledge in a somewhat narrower field of current interest. The word count will depend on the breadth of the topic. All reviews should be prefaced by a summary of 100–120 words. The summary is important: it should contain sufficient information for the reader to be able to appreciate the relevance of the full article when read alone. Summaries are used by abstracting services and many users of these services read only the summary. It should include background information and specific examples of recent advances. References should not be included and abbreviations should be avoided as far as possible in the summary. References selected for publication in the article should be chosen for their importance, ease of access, and for the 'further reading' opportunities they provide. *Antiviral Therapy* welcomes systematic reviews (see [Systematic reviews](#), above).

### Short communication

**1,500 words**

**≤20 references**

**≤3 display items**

Original research findings that do not require a full paper, but are completed studies, may be submitted as a short communication. All short communications should contain an introduction, methods, results and discussion section.

### MANUSCRIPT FORMAT

Manuscripts should be prepared in accordance with '[Uniform Requirements for Manuscripts Submitted to Biomedical Journals](#)' (International Committee of Medical Journal Editors).

All manuscripts should be submitted using editable files; manuscripts will be converted to PDFs for peer review. No page charges will be made for standard text, diagrams and black & white photographs. The use of colour figures will incur a page charge, due to the additional printing costs involved.

The manuscript should contain the following:

- [Title](#)
- [Authors](#)
- [Corresponding author details](#)
- [Running head](#)
- [Structured abstract](#)
- Introduction
- [Methods](#)
- Results
- Discussion
- [Acknowledgements](#)
- [Disclosure statement](#)
- [References](#)
- [Display items](#) (optional)
- [Supplementary material](#) (optional)

#### Title

Use of abbreviations should be avoided in the title and it should not exceed three typeset lines (~150 characters, including spaces).

#### Authors

Forenames and brief addresses should be included. If an author's current affiliation address differs from the one at which the research was conducted this may also be indicated. Authors (including members of study groups, working group and the like) included in the byline must satisfy the criteria of authorship given by the [International Committee of Medical Journal Editors](#). All individuals who qualify for authorship must be included.

A multicentre group can be credited with sole authorship; however, the group must identify and include in their manuscript a corresponding author on the title page and the principle investigators who accept direct responsibility for the manuscript in a separate section before the references. These principle investigators should fully meet the criteria for authorship defined by the [International Committee of Medical Journal Editors](#) and be willing to complete relevant journal-specific forms on behalf of the group. A full membership list will be published as an additional file.

#### Corresponding author details

Name, address, telephone and fax numbers, and e-mail address should be supplied. Unless instructed otherwise the editorial office will send page proofs of the article to this e-mail address.

**Running head**

A running header of up to 75 characters should be supplied. This will appear at the top of each right-hand page.

**Structured abstract**

The headings Background, Methods, Results, Conclusions should be used. The abstract must not exceed 250 words. All abbreviations should be defined at first mention. References and display item citations must not appear in the abstract, and the abstract must be clear and comprehensible in its own right.

**Main text****Methods**

The supplier (with brief address e.g. town, state and country) must be given for all laboratory equipment and materials.

**Acknowledgements**

Acknowledgements should be made to those, not including the authors, who have made a substantial contribution to the study. Authors are responsible for obtaining written permission from people acknowledged by name in case readers infer their endorsement of data and conclusions.

Details of sources of funding, editorial support and previous presentation of should be placed in this section, when appropriate. A summary of the role of each author on a collaborative paper may also be included.

**Disclosure statement**

All conflicts of interest relevant to the article should be disclosed in this section. If there are no conflicts of interest, a sentence to this effect should be included.

**References**

The accuracy of references is essential and this remains the responsibility of the author. As formatting information (italics, special characters and subscript and superscript text) is often lost on PubMed and other websites, the original versions should be consulted. References must be cited numerically by order of appearance in the text and listed in the bibliography. References should be cited in square brackets, for example, [3] or [1,3–5]. The manuscript bibliography must present full references in the formats given below.

In the full list of references give the names and initials of all authors. If there are more than six, cite only the first three, followed by *et al.* The authors' names are followed by the title of the article, the title of the journal (italics) abbreviated according to the style of [Index Medicus](#), the year of publication; the volume number (in bold) and the first and last page numbers in full followed by a full stop. Titles of books should be followed by the city of publication, the publisher, the year and inclusive page numbers. See the following examples:

**Standard journal article**

1. Bar S, Alizon M. Role of the ectodomain of the gp41 transmembrane envelope protein of human immunodeficiency virus type 1 in late steps of the membrane fusion process. *J Virol* 2004; **78**:811–820.

**More than six authors**

2. Hirsch MS, Brun-Vézinet F, Clotet B, *et al.* Antiretroviral drug resistance testing in adults infected with human immunodeficiency virus type 1: 2003 recommendations of an International AIDS Society-USA Panel. *Clin Infect Dis* 2003; **37**:113–128.

**Translated journal title**

3. Schäfer W. Vergleichende sero-immunologische Untersuchungen über die Viren der Influenza und klassischen Geflügelpest [Comparative sero-immunological investigations on the viruses of influenza and classical fowl plague]. *Zeitschrift für Naturforschung* 1955; **10b**:81–91. German.

**Book**

4. Glantz SA. *Primer of Biostatistics*. 3rd edn. New York: McGraw-Hill 1997; pp. 440.

**Chapter in a book**

5. Jilbert AR, Burrell CJ, Triatni M, Kann M. Hepatitis B virus replication. In *Human Virus Guide: Hepatitis B Virus*. Edited by CL Lai and S Locarnini. London: International Medical Press; 2002. pp. 43–53.

**Abstract**

6. Torriani F, Rockstroh J, Rodriguez-Torres M, *et al.* Final results of APRICOT: a randomized, partially blinded, international trial evaluating peginterferon-alfa-2a + ribavirin vs. interferon-alfa-2a + ribavirin in the treatment of HCV in HIV/HCV co-infection. *11th Conference on Retroviruses & Opportunistic Infections*. 8–11 February 2004, San Francisco, CA, USA. Abstract 112.

**Website**

7. Panel on Antiretroviral Guidelines for Adult and Adolescents. Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents. Department of Health and Human Services (Updated 10 October 2006. Accessed 3 August 2007.) Available from <http://aidsinfo.nih.gov/contentfiles/AdultandAdolescentGL.pdf>

**Prescribing information**

8. Viread (tenofovir disoproxil fumarate). *Package insert* 2005. Gilead Sciences, Foster City, CA, USA.

**Patents**

9. Hurst DN, Jones PS, Parkes KEB, Parratt MJ, Wilson FX, inventors; Hoffmann-La Roche Inc., assignee. Inhibitors of HPV E1 helicase enzyme. United State patent US 6703387. 2004 March 9.

**Display items**

References to figures and tables should be made in order of appearance in the text and should be in Arabic numerals in parentheses, e.g. (Figure 2). Any abbreviation used in a figure or table must be defined, even if it has already been defined in the main text. Units should be stated after a comma, for example 'Time, years' or 'HCV RNA, log<sub>10</sub> copies/ml'.

If a figure or table has been published before, in total or in part, the original source must be acknowledged and written permission from the copyright holder for both print and electronic formats should be submitted with the material. It is the responsibility of the author to obtain this permission, and failure to do so may delay publication. Permission is required regardless of authorship or publisher, except for documents in the public domain.

**Tables**

Create tables using the table editor of a word processing package. Do not embed tables as images in the manuscript file or upload tables in image or PDF formats. Each piece of data needs to be contained in its own cell in the table. Vertical rules should not be used. Avoid creating tables using spaces or tabs. Do not align cells with hard returns or extra spaces. Furthermore, no cell should contain a hard return or tab. Although individual empty cells are acceptable, be sure there

are no empty columns. Tables should not be split into separate sections and should not exceed one typeset page in size.

Each table should be assigned an Arabic numeral and a brief title. Identify all statistical measures, along with all units. Place explanatory matter in footnotes, not in the heading or within the table. The footnote symbols used in the journal are <sup>a</sup>, <sup>b</sup>, <sup>c</sup>, <sup>d</sup>, <sup>e</sup>, <sup>f</sup>, and so on.

Please note, accepted manuscripts not following these table guidelines must be retyped during the editing process, which may result in delays and opportunities for error.

### **Figures**

Figures may be reduced, cropped or omitted at the discretion of the editor. Colour illustrations are acceptable, but authors will be expected to cover the extra reproduction costs (for current charges, contact the publisher). Chemical schemes should be supplied as standard figures and be called figures. Where a figure has several parts these should be labelled with upper-case letters. No lettering should be placed directly over images. Amino acid sequences should be given in Courier or a similar monospaced font.

For ease of review, clear, complete figures should be submitted in .jpg or .pdf.

Should the article be accepted for publication, the authors should be ready to supply print-quality images in cases of electron micrographs, images of blots and gels, computer-generated protein structures and the like. This will ideally be in .eps format for computer-generated images (all programs have the facility to print to an .eps file) or .tif format for photographic images. Images intended to be printed across the width of one column should be a minimum of 600 pixels (5 cm wide at 300 dpi) in width. Those intended to occupy two columns should be a minimum of 1,300 pixels (11 cm at 300 dpi) in width. It is also worth remembering that RGB colour profile figures will necessarily be converted to CMYK for printing – therefore if possible authors should supply figures as CMYK, to ensure that the alteration in colour is satisfactory.

Graphs, schemes and simple diagrams will be redrawn by in-house illustrators so the initially submitted images will usually be sufficient.

### **Supplementary material**

Supplementary online data can be published as part of the online journal. It should be referred to within the text. Lists of members of study groups and the like can also be incorporated into the supplementary material. Supplementary material will be reproduced as submitted and will not be subedited or styled by the editorial office.

## **GENERAL POINTS ON MANUSCRIPT PREPARATION**

### **Drug names**

International non-proprietary names for drugs should be used throughout the text.

### **Spelling**

Spelling should follow the Oxford English Dictionary.

### **Units of measurement**

SI units of measurement should be used wherever applicable. Temperatures should be given in degrees Celsius. Blood pressures should be given in millimetres of mercury.

### **Abbreviations and symbols**

The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement. Abbreviations which have been defined in the abstract must be defined again at first mention in the main text. Abbreviations should only be used when helpful to

the reader, as an improvement in clarity. As a guideline, use abbreviations for terms appearing three or more times in the article. Use only standard abbreviations. Avoid abbreviations in the title and abstract. All abbreviations must be redefined in each table and figure in which they are used.

## **PROOFS**

Page proofs of articles will be sent to the corresponding author shortly before publication and these should be corrected and returned within 2 days. For this reason please ensure that the e-mail address supplied is checked regularly. Only corrections and essential changes should be made and the cost of additional changes will be charged to the authors. However, in some cases information that has become available since acceptance of the manuscript may be included as an addendum in proof. This is at the discretion of the editors. The editors reserve the right to make minor modifications to the manuscripts. Material changes will be submitted to the authors for approval at the proof stage.

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## **OFFPRINTS**

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