

Acta Neuropsychiatrica

Acta Neuropsychiatrica is an international journal that publishes translational high-quality research papers in neuropharmacology, neuropsychiatry and neuroscience. The journal provides a forum for original basic and clinical research from disciplines and research areas relevant to the pathophysiology, neurobiology, and treatment of neuropsychiatric disorders.

Acta Neuropsychiatrica provides its readership with the latest perspectives from current and emerging fields of psychiatry, neurology, pharmacology, genetics and neuroimaging. Such research may derive from the full spectrum of biological and psychological fields of inquiry encompassing classical and novel techniques/strategies. Emphasis will be given to translational original research that is of wide interest and clearly advances the field.

Acta Neuropsychiatrica welcomes full-length Original Research Articles, Short Communications, Perspectives, and Review Articles. Debate is encouraged in the form of Letters to the Editor. All articles published in *Acta Neuropsychiatrica* undergo peer review.

Submission

All manuscript submissions to *Acta Neuropsychiatrica* must be completed electronically through the *Acta Neuropsychiatrica* ScholarOne Manuscripts (formerly known as Manuscript Central) website:

<http://mc.manuscriptcentral.com/acn>

Submission is considered on the conditions that papers are previously unpublished, and are not offered simultaneously elsewhere; that all authors have read and approved the content and agree to the submission of the manuscript to the Journal.

Acta Neuropsychiatrica employs a plagiarism detection system. By submitting your manuscript to this journal you accept that your manuscript may be screened for plagiarism against previously published works.

Categories of papers

Acta Neuropsychiatrica accepts the following contributions:

Original research articles

Original articles report the results of original research, and are intended for full-scale basic or clinical studies including large controlled trials. Translational work is encouraged, but not required. Original articles should not exceed 6,500 words (not including references, figures and tables) and should include an abstract of up to 250 words and 3–5 key words (Exceptions to the length limitation will be considered for unusually large or complex studies).

Short communications

This category is for 'fast-breaking' new work, which is of great potential interest and can be succinctly presented. Papers in this category may contain up to 2,500

words (not including references, figures and tables) and should include a maximum of 25 references, up to 2 illustrations (figures or tables), an abstract of up to 150 words and 3–5 key words.

Review articles

Acta Neuropsychiatrica will publish a limited number of scholarly, comprehensive reviews that summarize and critically evaluate research in the field addressed and identify future implications. Reviews may be invited by the Editors but can also be submitted. Reviews may contain up to 10,000 words (not including references, figures and tables) and should include an abstract of up to 250 words and 3–5 key words (Exceptions to the length limitation will be considered if justified by the scope of the Review).

Perspectives articles

Acta Neuropsychiatrica will publish a limited number of Perspective articles that critically perspective research in the field addressed and describe future potentials. Perspectives may be invited by the Editors but can also be submitted. Perspective length and article structure are as described for Reviews.

Case reports

Case reports are welcome in *Acta Neuropsychiatrica*, especially if they contribute to highlight unusual and interesting aspects of neuropsychiatry. Case reports may contain up to 2500 words (not including references, figures and tables) and should include an abstract of up to 150 words and 3-5 key words. A maximum of 25 references can be included.

Debate papers

Letters to the Editor are welcomed to the *Acta Neuropsychiatrica* debate section, especially if they relate to ongoing debates or comment on recent publications in the Journal. A maximum of 5 references can be included in papers published in the Debate Section.

Papers in all categories, whether invited or submitted, will be peer reviewed.

Review process

All manuscripts submitted to the journal will first be editorially reviewed by the Editor-in-Chief, who will then assign the papers to a subject-specific Associate Editor.

The Associate Editor will then assign at least two independent referees to review each paper. Based on the referee reports received along with input from the Associate Editor, the Editor-in-Chief will decide to either reject, request revisions or accept the manuscript.

Once a revised version is received, the Editors and referees will evaluate the revised manuscript. Authors will then be notified of whether their paper has been accepted or rejected for publication in the Journal.

All manuscripts accepted for publication are subject to editing by the publisher for presentation, style and grammar. The Editor-in-Chief's decision is final.

Manuscript style

Consult a current issue of the Journal for style and format. The manuscript should be typed double-spaced throughout on 'Letter' or A4 paper. Pages should be numbered sequentially beginning with the Title Page. Margins should not be less than 2.5cm on all sides and the font should be clearly legible and uniform throughout.

Review Articles, Original Articles and Short Communications all follow the same concept:

Title page

A concise, informative title (max 15 words; abbreviations, acronyms, colon, semicolon or the like are not allowed), the authors' names, the names in English of departments and institutions to be attributed, and their city and country of location. Please also include a running title with a maximum of 50 characters (letters and spaces). Name, telephone number, fax number, e-mail address and full postal address of the corresponding author should be stated.

Abstract (Page 2)

Abstract not exceeding 250 words with the following structure:

Objective: State the objective of the study and the main hypothesis tested in the second sentence.

Methods: Describe the basic design of the study as well as its setting, participants and key measurements or outcomes. Describe, if appropriate, the essential features of any interventions, including their method and duration of administration. For systematic reviews, list the data sources used, including time restrictions and search terms. Provide the number of studies reviewed and the selection criteria.

Results: Provide data for the key measurements in this section. Give confidence intervals for differences where appropriate or other measures of statistical significance. All data in the abstract must be reported in the text of the paper as well.

Conclusion: Briefly summarise the main findings and potential application. A consideration of the significance of the study and recommendations for further work should appear in the main text, not the abstract.

The main part of the Abstract should be devoted to Results.

3 - 5 keywords in strict accordance with Medical Subject Headings.

For original articles and short communications specifically:

Significant Outcomes

Provide up to 3 Significant Outcomes encapsulating the 'take-home messages' of the article, and identify the main issues addressed with particular emphasis on the scientific significance. The Significant Outcomes are to be presented succinctly (1 max 2 sentences each), in tabulated form, and logically emerge from the conclusions of the paper (without repeating). However, they must not be dogmatic, raise new issues or pose further questions.

Limitations

In addition, each original article must cite up to 3 noteworthy Limitations. These should inform the reader about potential weaknesses, for instance in aspects of study design, methodology, analyses, the wider generalizability, or the wider application of findings. The Significant Outcomes and the Limitations are placed immediately below the Abstract/Keywords.

For review articles specifically:

Summations

Provide up to 3 significant Summations encapsulating the 'take-home messages' of the paper, and identify the main issues addressed with particular emphasis on their clinical and/or scientific significance. The Summations should be presented succinctly (1 max 2 sentences each), in tabulated form, and logically emerge from the conclusions of the paper (without repeating). However, they must not be dogmatic, raise new issues or pose further questions.

Considerations

In addition, each review article must cite up to 3 noteworthy Considerations in which authors essentially criticise the summations and include any caveats or

limitations either of the review process or its conclusions. The Summations and Considerations are placed immediately below the Abstract/Keywords.

For Perspectives articles specifically:

Summations

Provide up to 3 significant Summations encapsulating the 'take-home messages' of the paper, and identify the main issues addressed with particular emphasis on their clinical and/or scientific significance. The Summations should be presented succinctly (1 max 2 sentences each), in tabulated form, and logically emerge from the conclusions of the paper (without repeating). However, they must not be dogmatic, raise new issues or pose further questions.

Perspectives

In addition, each perspective article must cite up to 3 noteworthy perspectives in which authors essentially criticise the summations and include any caveats or limitations either of the perspective or its conclusions. The Summations and Perspectives are placed immediately below the Abstract/Keywords.

Manuscript body (from page 3)

Introduction

One to two pages, providing an appropriate background to the article, drawing on relevant literature and explaining the research question to be addressed. The introduction should be concluded by the subtitle *Aims of the Study* (3 to 5 lines without literature references and abbreviations).

Material and methods

It should be possible to read every article by itself. The author cannot refer to design, method and material described in previously published articles. This section should demonstrate a clear and documented design or strategy directed towards a specific research question. The study design should be appropriate to the aims of the study and be clearly described. The criteria for selecting the sample should be clearly described and justified. A clear description of sampling, recruitment to the study, data collection, and data analysis should be provided. Full details of interventions should be given for intervention studies. The authors should use metric units and the generic names of drugs throughout the manuscript. Laboratory units must be followed by SI (System International) units.

Results

Clear and short avoiding double documentation to tables/figures. The results section be clear and short, containing all the information required to assess the validity of the conclusions. Double documentation to tables/figures should be avoided, but the characteristics of the sample included in the study should be clearly described. Any analyses should be clear and systematic. Results of statistical tests should be reported with confidence intervals in order to provide an estimate of precision. All tables or figures must be referred to by name in the text.

Discussion

A structured discussion covering but not limited to the following sections should be included; summary of main findings; the strengths and the limitations of this study; relevance to the existing literature, and the implications for future research or clinical practice. Acta Neuropsychiatrica articles do not have a conclusion section. If the authors find it necessary, they may include a concluding remark of maximum 5 lines as the final part of the Discussion.

Authors Contributions

It is a requirement that the corresponding author submits a short description of each individual's contribution to the research and its publication. Acta Neuropsychiatrica adheres to the definition of authorship set up by The International Committee of Medical Journal Editors (ICMJE). According to the ICMJE authorship criteria should be based on 1) substantial contributions to

conception and design of, or acquisition of data or analysis and interpretation of data, 2) drafting the article or revising it critically for important intellectual content and 3) final approval of the version to be published. Authors should meet conditions 1, 2 and 3. Contributors who do not qualify as authors should be mentioned under 'Acknowledgements'.

Acknowledgements

You may acknowledge individuals or organisations that provided advice, support (non-financial). Formal financial support and funding should be listed in the following section.

Financial support

Please provide details of the sources of financial support for all authors, including grant numbers. For example, "This work was supported by the Medical research Council (grant number XXXXXXX)". Multiple grant numbers should be separated by a comma and space, and where research was funded by more than one agency the different agencies should be separated by a semi-colon, with "and" before the final funder. Grants held by different authors should be identified as belonging to individual authors by the authors' initials. For example, "This work was supported by the Wellcome Trust (A.B., grant numbers XXXX, YYYY), (C.D., grant number ZZZZ); the Natural Environment Research Council (E.F., grant number FFFF); and the National Institutes of Health (A.B., grant number GGGG), (E.F., grant number HHHH)". Where no specific funding has been provided for research, please provide the following statement: "This research received no specific grant from any funding agency, commercial or not-for-profit sectors."

Statement of interest

Please provide details of all known financial, professional and personal relationships with the potential to bias the work. Where no known conflicts of interest exist, please include the following statement: "None."

Ethical standards

Where research involves human and/or animal experimentation, the following statements should be included (as applicable): "The authors assert that all procedures contributing to this work comply with the ethical standards of the relevant national and institutional committees on human experimentation and with the Helsinki Declaration of 1975, as revised in 2008." and "The authors assert that all procedures contributing to this work comply with the ethical standards of the relevant national and institutional guides on the care and use of laboratory animals."

Figure Legends (see also below)

Legends should be provided for each Figure on a separate sheet in the manuscript.

Reference list (start on a separate page)

Use the Vancouver system (see below). We recommend the use of a tool such as Reference Manager for reference management and formatting.

Reference Manager reference styles can be searched for here:

<http://www.refman.com/support/rmstyles.asp>

Tables and figures

A maximum of 7 tables/figures can be included (two for short communication). Figures are given priority. Tables and figures should be included on separate sheets, and numbered in order of their mention in the text with Arabic numerals and should include a brief, self-explanatory, descriptive title. Scale bars should be added to photomicrographs and other similar images.

Legends should be provided for each Figure on a separate sheet in the manuscript.

A separate image file of each figure is required. Ensure that figures will be legible and comprehensible at final size and are of sufficiently high resolution. Figures

should be supplied (permitted file formats are TIFF (.tif), JPEG (.jpg) and EPS (.eps)) where possible at approximately the size in which they are to reproduce. Line artwork should be supplied in black and white mode at a resolution of 1200 dpi; combination artwork (line/tone) at a resolution of 800 dpi; black and white halftone artwork should be saved in 'grayscale' mode at a resolution of 300dpi; color halftone artwork should be saved in CMYK mode at a resolution of 400 dpi. Tables should be double-spaced, no wider than 120 typewriter characters (including spaces).

All figures/tables should clarify the text and their number be kept to a minimum and not exceed 7 in total. Avoid data overload. Details must be large enough to retain their clarity after reduction in size. Illustrations should be planned to fit the proportions of the printed page. Colour illustrations are welcomed.

There will no cost to authors for the publication of colour images in the online-only edition journals.

Abbreviations and symbols

For abbreviations and symbols use Units, Symbols and Abbreviations for Authors and Editors in Medicine Related Sciences, Sixth Edition. Edited by D.N. Baron and M McKenzie Clarke. ISBN: 9781853156243, Paperback, April, 2008. All terms or abbreviations should be fully explained at first mention. All units should be metric. Use no Roman numerals. Abbreviations are not allowed in titles, headings and "Aims of the Study".

References

Should be kept to the pertinent minimum and numbered consecutively in the order in which they appear in the text in accordance with the Vancouver System. Identify references in text, tables, and legends by Arabic numerals (in parentheses). References cited only in tables or figure legends should be numbered in accordance with a sequence established by the first identification of that figure or table in the text. Use the style of the examples below, which are based on Index Medicus. Abstracts cannot be used as references, unless published in an indexed scientific journal. Include manuscripts accepted, but not published; designate the abbreviated title of the journal followed by (in press). Papers published electronically, not yet hard copy publication should be identified by their DOI-number. Information from manuscripts not yet accepted should be cited in the text as personal communication. References must be verified by the authors against the original documents. Titles of journals should be abbreviated in accordance with Index Medicus. Examples:

Standard journal article: List all authors when 6 or fewer. When there are 7 or more, list only the first 3 authors and add "et al": MAZZONCINI R, DONOGHUE K, HART J et al. Illicit substance use and its correlates in first episode psychosis. *Acta Psychiatr Scand* 2010; 121: 351-358.

Chapter in book: ISMAIL K. Unraveling the pathogenesis of the depression-diabetes link. In KATON W, MAJ, M, SATORIUS N, eds. *Depression and diabetes*, Wiley-Blackwell, UK, 2010.

Whole Book: Ignarro LJ. *Nitric oxide: biology and pathobiology*. London: Academic; 2009.

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