

Cancer Research and Treatment (Cancer Res Treat) is a peer-reviewed publication of the Korean Cancer Association. *Cancer Research and Treatment* is published quarterly on the last day of March, June, September, and December, one volume per year. *Cancer Research and Treatment* accepts manuscripts for submission under a broad scope of topics relevant to experimental and clinical cancer research. Subjects include carcinogenesis, tumor biology, molecular oncology, cancer genetics, tumor immunology, epidemiology, predictive markers and cancer prevention, pathology, cancer diagnosis, screening, and therapies including chemotherapy, surgery, radiation therapy, immunotherapy, gene therapy, multimodality treatment, and palliative care. Physicians or researchers throughout the world can submit a manuscript if its scope is appropriate.

Manuscripts should be submitted in English. Manuscripts for submission to *Cancer Research and Treatment* should be prepared according to the following instructions. *Cancer Research and Treatment* follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (http://www.icmje.org/urm_main.html), commonly known as "Vancouver style" if not otherwise described below.

1. Research and publication ethics

The journal adheres to the ethical guidelines for research and publication described in Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/publishing_ethics.html) and *Guidelines on Good Publication* (<http://www.publicationethics.org.uk/guidelines>).

Registration of Clinical Trial Research

It is recommended that any research dealing with a clinical trial be registered with a primary national clinical trial registration site such as <http://hcr.cdc.gov.kr/cris>, or other sites accredited by the WHO or the International Committee of Medical Journal Editors.

Conflict-of-Interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

Statement of Informed Consent

Copies of written informed consent and Institutional Review Board (IRB) approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval or study conduct.

Statement of Human and Animal Rights

All human investigations must be conducted according to the principles expressed in the Declaration of Helsinki. All studies involving animals must state that the guidelines for the use and care of laboratory animals of the authors' institution, or any national law, were followed.

Authorship

Authorship credit should be based on 1) substantial contributions to conception and design, 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. Each author should meet these 3 conditions. If the number of authors is greater than six, there should be a list of each author's role for the submitted paper.

Originality and Duplicate Publication

All submitted manuscripts should be original and should not be considered by other scientific journals for publication at the same time. No part of the accepted manuscript should be duplicated in any other scientific journal without the permission of the Editorial Board. If duplicate publication related to the papers of this journal is detected, the authors will be announced in the journal and their institutes will be informed, and there will also be penalties for the authors.

Secondary Publication

It is possible to republish manuscripts if the manuscripts satisfy the conditions of secondary publication of the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*.

2. MANUSCRIPT CATEGORIES

Original Articles

Original Articles are the primary presentation mode of scientific communication in the journal. Original Articles are generally reviewed at least by two peer reviewers and, when required, a biostatistician. Comments offered by reviewers are returned to the authors for their consideration. Acceptance of manuscripts is based on many factors, including the importance of the research to the field of oncology and the originality of the work. Authors are encouraged to focus on accuracy, clarity, and brevity in their presentations.

Review Articles

Review Articles are usually solicited by the Editor-in-Chief. However, unsolicited Reviews will also be considered, in which case authors should contact the Editor-in-Chief in advance to determine the appropriateness of the Review to the journal. Please send an e-mail to Il Han Kim, Editor-in-Chief, at ihkim@snu.ac.kr.

Editorials

Editorials are usually solicited by the Editor-in-Chief to accompany a published article or an accepted manuscript. Editorials should be no more than four to five pages in length.

Special Articles

Special Articles include those manuscripts for which content and style do not fall under the category of Original Articles or Review Articles; these may include, but are not limited to, guidelines, summaries of consensus meetings, and other scholarly communications. Submissions should be prepared according to the "Manuscript Preparation" section of this document.

Case Reports

Case Reports are not encouraged and are considered only if justified by their unique significance. Nevertheless, if a case report is submitted, including visual images, whether in color or black and white, is recommended when appropriate. Each submission should be accompanied by a brief overview describing the topic, and figure descriptions should be included within the case report.

Letters to the Editor

The Editors welcome readers' comments on articles published recently in the journal or topics of interest.

3. PEER REVIEW PROCESS

The acceptance criteria for all papers are based on the quality and originality of the research and its clinical and scientific significance. Original Articles are generally reviewed by at least two peer reviewers and, when required, a biostatistician. An initial decision will normally be made within 4 weeks of receipt of a manuscript, and the reviewers' comments are sent to the corresponding authors by e-mail. Revised manuscripts must be submitted online by the corresponding author. The corresponding author must indicate the alterations that have been made in response to the referees' comments item by item. Failure to resubmit the revised manuscript within 12 weeks of the editorial decision is regarded as a withdrawal.

4. ELECTRONIC SUBMISSION OF A MANUSCRIPT

Manuscripts are submitted online to Cancer Research and Treatment via Homepage (<http://journal.cancer.or.kr>). Submission instructions are available at the website. All articles submitted to the journal must comply with these instructions. Failure to do so will result in return of the manuscript and a possible delay in publication. For assistance please contact us via e-mail (journal@cancer.or.kr), tel (+82-2-792-1486), or fax (+82-2-792-1410)

5. MANUSCRIPT PREPARATION

General Guidelines

Manuscripts must be written succinctly in clear, grammatical English. All manuscripts originating from non-English speaking countries must be revised by a professional linguistic reviewer, and it must be evident from the cover letter that this has been done. All manuscripts are subject to editorial peer review. The editors reserve the right to improve the style and, if necessary, return the manuscript to the author for revision. When a manuscript is received for consideration, the editors assume that no similar paper has been

or will be submitted for publication elsewhere. The main document with manuscript text and tables should be prepared with MS Word or HWP files.

- The manuscript should be written in 10-point font with double-line spacing on A4 sized (21.0 × 29.7 cm) paper with 2.5 cm margins on the top, bottom, right, and left.
- All manuscript pages are to be consecutively numbered at the middle of the bottom, beginning with the title page as page 1.
- The use of acronyms and abbreviations is discouraged and should be kept to a minimum. When used, they are to be defined where first used, followed by the acronym or abbreviation in parentheses.
- Drug and chemical names should be stated in standard chemical or generic nomenclature. Units of measure should be presented according to the International System (SI) of units.

Reporting Guidelines for Specific Study Designs

For the specific study design, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies and non-randomized studies, it is recommended that the authors follow the reporting guidelines listed in the following table.

Initiative	Type of study
CONSORT (Source)	Randomized controlled trials http://www.consort-statement.org
STARD (Source)	Studies of diagnostic accuracy http://www.stard-statement.org/
PRISMA (Source)	Preferred reporting items of systematic reviews and meta-analyses http://www.prisma-statement.org
STROBE (Source)	Observational studies in epidemiology http://www.strobe-statement.org
MOOSE (Source)	Meta-analyses of observational studies in epidemiology http://www.consort-statement.org/resources/downloads/other-instruments/moose-statement-2000pdf

ORIGINAL ARTICLES

Original articles are reports of basic or clinical investigations. Although there is

no limitation on the length of these manuscripts, the Editorial Board may abridge excessive illustrations and large tables. The manuscript for an original article should be organized on a separate page in the following sequence: title page, abstract and keywords, text, conflicts of interest, acknowledgments (if necessary), references, tables, and figure legends.

1) Title page:

The Title Page should carry the following information.

- Manuscript title, which should be concise but informative.
- Each author's name (given name, middle name, and surname) followed by the highest academic degree.
- The name of the department(s) and institution(s) where the work was conducted.
- A running title of fewer than 50 characters.
- The complete mailing address, telephone, facsimile, and e-mail address for correspondence and reprints.

2) Abstract and Keywords:

The abstract should be no more than 250 words, and describe concisely, in a paragraph, the Purpose(s), Materials and Methods, Results, and Conclusion(s). Below the abstract, authors should provide 3 to 10 keywords or terms to be used as index terms. Terms from the Medical Subject Headings (MeSH) list (<http://www.nlm.nih.gov/mesh/MBrowser.html>) should be used; if suitable MeSH terms are not yet available for recently introduced terms, current terms may be used.

3) Text:

The text should be arranged in this order: Introduction, Materials & Methods, Results, Discussion, Conclusion(s). Footnotes are to be used only for tables and figures. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), route(s) of administration, and city and country of manufacturer. Use only standard abbreviations. A subject that is to be abbreviated must be spelled in full for its first use in the text, followed by the abbreviation in parentheses.

4) Conflicts of Interest:

All potential conflicts of interest must be stated within the text of the manuscript, under this heading. This pertains to relationships with pharmaceutical companies, biomedical device manufacturers, or other corporations whose products or services are related to the subject matter of the article. Such relationships include, but are not limited to, employment by

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Instructions for Authors

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5) Acknowledgments:

If necessary, persons who have made substantial contributions, but who have not met the criteria for authorship, are acknowledged here. All sources of funding applicable to the study should be stated here explicitly.

6) References:

In the text, references should be cited with Arabic numerals in brackets and numbered in the order cited. In the references section, the references should be numbered in order of appearance in the text and listed in English. The total number of references should be less than 25. List all authors if there are less than or equal to six authors. List the first six authors followed by "et al." if there are more than six authors. If an article has been published online, but has not yet been given an issue or pages, the digital object identifier (DOI) should be supplied. Journal titles should be abbreviated in the style used in Medline. Other types of references not described below should follow *Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers*.

Journal articles:

1. Baek KK, Lee J, Park SH, Park JO, Park YS, Lim HY, et al. Oxaliplatin-induced chronic peripheral neurotoxicity: A prospective analysis in patients with colorectal cancer. *Cancer Res Treat*. 2010;42:185-90.
2. Falcone A, Masi G, Loupakis F, Vasile E, Ciardo A, Cavaciocchi D, et al. FOLFOXIRI (irinotecan, oxaliplatin and infusional 5 FU/LV) in combination with bevacizumab in the first-line treatment of metastatic colorectal cancer. *J Clin Oncol*. 2008;26(15S):4031.
3. Zhang L, Jiang M, Zhou Y, Du XB, Yao WX, Yan X, et al. Survey on breast cancer patients in China toward breast-conserving surgery. *Psycho-Oncology*. 2011 Feb 14 [Epub]. Doi: 10.1002/pon.1922.

Book:

4. Abeloff MD, Armitage JO, Niederhuber JE, Kastan MB, McKenna WG. *Abeloff's clinical oncology*. 4th ed. Philadelphia, PA: Churchill Livingstone; 2008.
5. Wang JC, Dick JE. Cancer stem cells. In: DeVita VT, Lawrence TS, Rosenberg SA, editors. *DeVita, Hellman, and Rosenberg's cancer: principles & practice of oncology*. 8th ed. Philadelphia, PA: Lippincott Williams & Wilkins; 2008. p. 135-46.

Conference paper:

6. Cigler T, Singer O, Moore A, Chuang E, Vahdat LT, Reichman VS, et al. Evaluation of vitamin D levels and aromatase inhibitor-associated musculoskeletal symptoms. In: 2010 Breast Cancer Symposium; 2010 Oct 1-3; Washington, DC. Columbia, MD: American Society of Breast Surgeons; Abstr 166.

Online sources:

7. American Cancer Society. *Cancer facts & figures* [Internet]. Atlanta, GA: American Cancer Society; c2011 [cited 2011 Feb 20]. Available from: <http://www.cancer.org/Research/CancerFactsFigures/index>.
8. National Cancer Information Center. *Cancer incidence* [Internet]. Goyang (KR): National Cancer Information Center; c2011 [cited 2010 Oct 20]. Available from: <http://www.cancer.go.kr/cms/statics>.

7) Tables:

Tables should have a title, begin a new page, and be numbered with Arabic numerals in the order in which they are cited in the text. The title and contents of a table should be concise and clear, so that a reader can understand the table without referring to the text. The total number of tables should not exceed ten. Within a table, if a non-standard abbreviation is used or description may be necessary, then list them under annotation below. Use lowercase letters in superscripts ^{a, b, c} . . . on the right side of the part that needs explanation; the annotation should be recorded according to the lowercase letters listed below the table. Statistical measures such as SD or SE should be identified. Vertical or horizontal lines between entries should be omitted.

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Upload each figure as a separate image file. The figure images should be provided in high resolution (preferably 300 dpi for figures and 600 dpi for

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line art and graphs). They should be submitted in EPS or TIF format, although JPEG format is allowed for color figures. The figures should be sized to column width (8.5 cm or 17.5 cm). If the figures are not original, the author must contact each publisher to request permission and this should be remarked on in the footnote to the figure. Figures should be numbered, using Arabic numerals, in the order in which they are cited. All figures should be cited in the text (e.g., Fig. 1, Fig. 1A-C, Figs. 1 and 2). In the case of multiple prints bearing the same number, use capital letters after the numerals to indicate the correct order (e.g., Fig. 1A, Fig. 1B). The total number of figures must not exceed ten. Figure legends should be in English and consist of a one-sentence description rather than a phrase or a paragraph. A legend for each light microscopic photograph should include the name of the stain and magnification. Electron microscopic photographs should have an internal scale marker.

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Reviews are invited by the editor and should be comprehensive analyses of specific topics. They are organized as follows: title page, abstract and keywords, introduction, body text, conclusion, conflicts of interest, acknowledgments, references, tables, and figure legends. Upload each figure as a separate image file. There should be an unstructured abstract equal to or less than 250 words. There is no specific requirement for subsections of the body text of the paper.

EDITORIAL

Editorials are invited by the editors and should be commentaries on articles published recently in the journal. Editorial topics could include active areas of research, fresh insights, and debates. Editorials should be no more than four to five pages in length including references, tables, and figures.

CASE REPORTS

Case reports will be published only in exceptional circumstances, when they illustrate a rare occurrence of clinical importance. The manuscript for a case report should be organized in the following sequence: title page, abstract and keywords, introduction, case report(s), discussion, conflicts of interest, acknowledgments (if necessary), references, tables, and figure legends. Upload

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Notice: These recently revised instructions for authors will be applied beginning with the March 2011 issue.