

Instructions for authors 2008

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Neuroendocrinology Letters is an international, peer-reviewed transdisciplinary journal covering the fields of Neurosciences, Neurophysiology, Neuroendocrinology, Psychoneuroimmunology, Neuropsychopharmacology, Reproductive Medicine, Chronobiology, Human Ethology and related areas for **RAPID** publication of Original Papers, Review Articles, Clinical Reports, and other contributions from all the fields covered by Neuroendocrinology Letters.

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Papers from both basic research (methodology, molecular and cellular biology, anatomy, histology, biology, embryology, teratology, normal and pathological physiology, biophysics, pharmacology, pathology and experimental pathology, biochemistry, neurochemistry, neuropsychopharmacology, enzymology, human ethology, chronobiology, receptor studies, endocrinology, immunology and neuroimmunology, animal physiology, animal breeding and ethology, psychology and others) and from clinical research (reproductive medicine, obstetrics and gynecology, endocrinology, immunology, neuropsychopharmacology, cardiovascular studies, internal medicine, pediatrics, neurology, psychiatry and child psychiatry, oncology and others) will be considered.

The Journal publishes original papers and review articles. Brief reports, special communications, proved they are based on adequate experimental evidence, clinical studies, case reports, commentaries, discussions, letters to the editor (correspondence column), book reviews, congress reports and other categories of articles (philosophy, art, social issues, medical and health policies, biomedical history, etc.) will be taken under consideration.

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The Editors and the Publisher support the principles of the Declaration of Helsinki of 1975, as revised in 1983, and expect that the authors of papers submitted to the Journal will have obtained ethical consent and followed those legal and regulatory requirements for human experimentation with drugs, including informed consent, according to procedures which apply in their institution and country.

When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on, the care and use of laboratory animals was followed.

PRESENTATION

Manuscripts should be typed on numbered pages and conform to the "Uniform Requirements for Manuscripts

Submitted to Biomedical Journals” except the Reference section (see below).

The pages should be numbered consecutively, beginning with the Title page. The **sections of the manuscript** should be in following sequence: Title page, Abstract (structured for Original papers and non-structured for Review Articles), Key words, Abbreviations, Main text (Introduction, Material and methods, Results and Discussion), Acknowledgments, References, Tables and Figures. **Particular attention should be taken to ensure that the manuscript adheres to the Instructions for Authors of the Neuroendocrinology Letters in all respects.** The use of footnotes is not permitted (numbered comments/footnotes can be added at the end of the main text, before the Reference section).

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The Editors reserve the right to alter manuscripts whenever necessary to make them conform to the stylistic and bibliographic conventions of the Neuroendocrinology Letters.

TITLE PAGE

Title page of the manuscript should contain:

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2. The name(s) of the author(s): **first name(s)** spelled out, **family name** and highest academic degree.
3. Author's Affiliations: The name(s) of the department(s) or institution(s) from which the study originated.
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5. A “running headline,” a maximum of 40 characters, including word spaces.

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Abstract and Key words follow directly after the Title page (no extra page) A **structured abstract (Original Articles) and non-structured abstract (Review papers)** not exceeding 250 words should state what was done, including **objectives, design, setting, results, the main findings, conclusions**, and how the work was interpreted. **Additional headings may be used.**

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List of abbreviations and symbols used and spell them out in full. Abbreviations and symbols must be standard, and SI units (The International System of Units) should be used throughout. Drugs should be described by their official names, but trade names should be indicated in brackets the first time a drug is quoted in the main text.

MAIN TEXT

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State clearly the purpose of the paper. Do not review the subject extensively and give only pertinent references.

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Describe your selection of the observational subjects (patients or laboratory animals, including controls) clearly. Describe the study population in detail. Identify the methods and procedures in sufficient detail to allow other workers to reproduce the results. If the methods used are new or substantially modified, describe them and state their limitations.

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Do not repeat in the text all the data displayed in the tables or illustrations; only important observations should be emphasized or summarized.

DISCUSSION

Emphasize only the new and important aspects and conclusions of the study, including the implications and the limitations of the findings and their relation to other relevant studies. The conclusions should be clearly linked with the objectives of the study. Avoid unqualified statements and conclusions that are not supported by the data. Do not claim priority, and do not allude to work in progress. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.

STATISTICS

Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported details. The design of the study

and the data sources should be clearly identified. The statistical methods used should be described so that it is clear which method was used and where. Give relevant references and additional details if nonstandard methods or analyses have been applied. The basic principle is to supply sufficient information about design and analysis to allow the research to be repeated by someone else. The presentation of the analysis should include relevant summaries of the data, not just the results of significance testing. The use of confidence interval is encouraged.

REFERENCES

Responsibility for the accuracy of bibliographic citations lies entirely with the authors. **Citations in the text:** Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either “Unpublished results” or “Personal communication”, Citation of a reference as “in press” implies that the item has been accepted for publication.

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Examples: “reports and open studies are available (Norton, 2000; Edwards et al. 2001; Krusz & Stillman, 2001). Mathew et al. (2000) used a fixed and relatively low dosage of valproate and accomplished ...”

In the Reference List:

References should be numbered and arranged first alphabetically and then further sorted chronologically if necessary. More than one reference from the same author(s) in the same year must be identified by the letters “a”, “b”, “c”, etc., placed after the year of publication.

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Examples of the correct form of references:

SEE LAST PAGE!

1. Standard journal article List all authors when six or less. When seven or more, list only the first six and add et al.

Example: Parkin DM, Clayton D, Black RJ, Masuyer E, Friedl HP, Ivanov E, et al (1996). Childhood leukaemia in Europe after Chernobyl: 5 year follow-up. *Br J Cancer*. **73:** 1006–1012.

If the language is not English, add the translated title in brackets, e.g. Swedin G (1979). Transkutan elektrisk nervstimulering som smärtlindring vid förlossning. [(Transcutaneous electrical nerve stimulation for analgesia in childbirth.) (In Swedish with English abstract.)] *Läkartidningen*. **776:** 1946–1948.

2. Books and other monographs

a/ Personal author(s):

Ringsven MK, Bond D (1996). *Gerontology and leadership skills for nurses*. 2nd ed. Albany (NY): Delmar Publishers.

b/ Editor(s) as author(s):

Norman IJ, Redfern SJ, editors (1996). *Mental health care for elderly people*. New York: Churchill Livingstone.

c/ Chapter in a book:

Phillips SJ, Whisnant JP (1995). Hypertension and stroke. In: Laragh J Brenner BM, editors. *Hypertension: pathophysiology, diagnosis, management*. 2nd ed. New York: Raven Press. p. 465–478.

d/ Conference proceedings:

Kimura J, Shibasaki H, editors (1996). *Recent advances in clinical neurophysiology*. Proceedings of the 10th International Congress of EM and Clinical Neurophysiology; Oct 15–19, 1995; Kyoto, Japan. Amsterdam: Elsevier.

e/ Conference paper:

Bengtsson S, Solheim BG (1992). Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92*. Proceedings of the 7th World Congress on Medical Informatics; Sept 6–10, 1992; Geneva, Switzerland. Amsterdam: North-Holland. p. 1561–155.

f/ Dissertation:

Kaplan SJ (1995). *Post-hospital home health care: the elderly's access and utilization (dissertation)*. St. Louis (MO): Washington Univ.

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ACKNOWLEDGMENTS

The scientific and material contributions of others to the work should be acknowledged. Any grant supports should be listed and permission for reproduction of published material acknowledged. Authors are responsible for obtaining written permission from anyone acknowledged by name. The acknowledgments will be published as an appendix to the text.

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Before publication the correspondent author will receive a copy of the final version of the paper, which should be read carefully for errors and returned promptly. Proofs will be sent for the correction of **typographic errors only**. No other changes will be accepted. Proofs not returned within 7 days will be considered as approved by the author(s).

DOCTORAL THESES & DISSERTATIONS in brief

This Journal encourages the submission of important works by young investigators, researchers and practitioners. In this section the Editor wishes to recognize innovative research conducted during graduate and postgraduate studies. Each doctoral thesis or dissertation should contain an abstract and provide a concise synopsis (10 manuscript pages maximum) of the major findings presented in the final version.

LETTERS TO THE EDITOR

The Neuroendocrinology Letters has a section carrying comments, questions, or criticism about articles that have been published and where the original authors can respond. This section takes the form of Letters to the Editor, where also other topics and views from readers may be published and discussed.

SUPPLEMENTS

Monographs or series of articles that have undergone regular scientific review, university approved theses, conference proceedings, symposia on related issues or topics, etc. may be printed as supplements to the Neuroendocrinology Letters. Supplements are published as a separate issues of the Journal and are negotiated in advance with the Editor-in-Chief, and must be prepaid prior to publication. The Supplements are not automatically included in the subscription price, but can be purchased separately at publisher@nel.edu

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Example of a Structured Abstract in NEL

OBJECTIVES: The distribution of serotonin (5-HT) and its effect on insulin and glucagon secretion were investigated to examine whether there are changes in the pattern of distribution and effect of 5-HT after the onset of experimental diabetes.

METHODS: The pattern of 5-HT and its effect of insulin and glucagon secretion was examined using immunohistochemical and radioimmunoassay techniques, respectively.

RESULTS: 5-HT was demonstrated mainly in the neural elements of the pancreas. 5-HT-containing fine varicose nerve fibers were discerned in the wall of blood vessels and pancreatic ducts. 5-HT-containing nerves were also observed in the periacinar and periinsular regions of normal pancreas. The pattern or intensity of the distribution of serotonergic nerves did not change after the onset of diabetes. The perivascular, periductal, periacinar and periinsular regions of diabetic pancreas all contained 5-HT positive nerves. 5-HT elicited marked increases in insulin secretion from normal pancreas but had an inhibitory effect on insulin secretion from diabetic pancreatic tissues. In contrast, 5-HT inhibited glucagon secretion from normal pancreatic tissue fragments but stimulated glucagon release from diabetic pancreatic tissue fragments.

CONCLUSION: 5-HT is well distributed in normal and diabetic pancreatic tissues and has stimulatory effects on insulin secretion from normal pancreas and glucagon

secretion from diabetic pancreas. This result indicates that although 5-HT may help in the maintenance of the blood sugar level in normal pancreas by increasing insulin secretion and decreasing glucagon secretion, it may also aggravate the hyperglycemia observed in diabetes mellitus and hence exacerbate the symptoms of hyperglycemia in poorly controlled diabetes mellitus.

EXAMPLE OF REFERENCES IN NEL

- 1 Adeghate E, Donáth T (1990). Intramural serotonin immunoreactive cells in normal and transplanted pancreas. *Biogenic Amines*. 7: 385–390.
- 2 Cardinali DP, Larin F, Wurtman RJ (1972). Control of the rat pineal gland by light spectra. *Proc Natl Acad Sci USA*. 69: 2003–2005.
- 3 Hellerstrom C, Swenne I, Andersson A (1988). Islet cell replication and diabetes. In: Lefebvre PJ, Pipeleers DG, editors. *The pathology of the endocrine pancreas in diabetes*. Berlin: Springer-Verlag.
- 4 Karasek M. Zależność (1974). Ultrastruktury szyszynki szczura od wieku. [(The dependence of white rat pineal gland ultrastructure on age.) (In Polish with English abstract)] *Endokrynol Pol*. 25: 275–287.
- 5 Legros C, Chalivoix S, Gabriel C, Mocaer E, Delagrèze P, Fuchs E, Malpoux B (2007). First evidence of melatonin receptors distribution in the suprachiasmatic nucleus of tree shrew brain. *Neuroendocrinol Lett*. 28: 267–273.
- 6 Nishino T, Kodaira T, Shina S, Imagawa K, Shima K, Kumahara Y, et al (1981). Glucagon radioimmunoassay with use of antiserum to glucagon C-terminal fragments. *Clin Chem*. 27: 1690–1697.
- 7 Pathak MA, Nghiem P, Fitzpatrick TB (1999). Acute and chronic effects of the sun. In: Freedberg IM, Eisen AZ, Wolff K, Austen LA, Goldsmith K, Katz SI, Fitzpatrick TB, editors. *Fitzpatrick's Dermatology in General Medicine*, 5th edition. New York: McGraw-Hill. p. 1598–1607.