Instructions for authors
Dialogues in Clinical Neuroscience

AIM AND SCOPE

Dialogues in Clinical Neuroscience is a quarterly peer-reviewed publication that aims to serve as an interface between clinical neuropsychiatry and the neurosciences by providing state-of-the-art information and original insights into relevant clinical, biological, and therapeutic aspects. Each issue addresses a specific topic, and also publishes free contributions in the field of neuroscience as well as other non–topic-related material.

GENERAL INSTRUCTIONS

Submission: Manuscripts should be submitted as a Word file by e-mail to susannah.squire@servier.com. All pages should be numbered. The lead author or corresponding author should supply a portrait photo for the Contributing Authors' page. This should have a resolution of at least 300 dpi.

Title page: The title page should include a title, the full names of all the authors, the highest academic degrees of all authors (in country-of-origin language), affiliations (names of department[s] and institution[s] at the time the work was done), a short running title (no more than 50 letters and spaces), 5 to 10 keywords, the corresponding author's complete mailing address, telephone, e-mail, and acknowledgments.

Disclosure/Acknowledgments: Full statements of funding acknowledgments and disclosure of conflicts of interest must be included at the end of the article.

Abstract: A 150-word abstract should be provided for all articles. Abstracts will be translated into French and Spanish by the publisher's editorial department; authors who are native French or Spanish speakers may choose to provide an abstract in their own language, as well as an English abstract. Please note that the French and Spanish abstracts will appear in the online versions of the journal, but not the printed version.

Text: All texts should be submitted in English. Authors who do not write fluently in English are strongly advised to have their article checked by a native or fluent English speaker before submission, in order to avoid extra revisions. Abbreviations should be used sparingly and expanded at first mention. A list of selected abbreviations and acronyms should be provided where necessary. The style of headings and sub-headings should be consistent throughout the text. The editorial department reserves the right to add, modify, or delete headings if necessary. Dialogues in Clinical Neuroscience uses SI units and generic names of drugs.

REFERENCES
The number of references should be limited to 70.

Citation in text: List references in numerical order of use in the text, at the end of the document (the "author-date" system is not acceptable). Use Arabic superscript references outside periods and commas, and inside colons and semicolons. References which have been submitted to a journal, but have not yet been accepted for publication, must not be included in the list.

Reference list: Presentation of the references should be AMA style:
- Author(s). Title. Journal Name [using National Library of Medicine abbreviations]. Year;vol(issue No.):inclusive pages.
- Abbreviate and italicize journal names using National Library of Medicine abbreviations at http://www.ncbi.nlm.nih.gov/nlmcatalog/journals.
- List all authors unless there are more than six. If there are more than six, list the first three then use "et al."
- Use authors' last name followed by initials. No periods after initials. Separate names with commas.

The authors bear total responsibility for the accuracy and completeness of all references and for correct text citation, and must ensure that the reference formatting complies with requirements.

Examples of style for references:
Journal article:
1. Heinssen RK, Cuthbert BN, Breiling J, Colpe LJ, Dolan-Sewell R. Overcoming barriers to research in early serious mental illness: issues for future collaboration. *Schizophr Bull.* 2003;29(4):737-745.
Article in a supplement:
2. Greenamyre JT, Betarbet R, Sherer TB. The rotenone model of Parkinson's disease: genes, environment and mitochondria. P*arkinsonism Relat Disord.* 2003;9(suppl 2):S59-S64.

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Chapter in a book:

3. Carpenter WT Jr, Buchanan RW. Domains of psychopathology relevant to the study of etiology and treatment in schizophrenia. In: Schulz SC, Tamminga CA, eds. *Schizophrenia: Scientific Progress.* New York, NY: Oxford University Press; 1989:13-22.

Web-based material:

4. Peripheral and Central Nervous System Advisory Committee. Meeting Documents. Available at: http://www.fda.gov/ohrms/dockets/ac/cder01.htm. Rockville, Md: Food and Drug Administration. Accessed October 21, 2004.

Presentation at a conference:

5. McGlashan TH, Zipursky RB, Perkins DO, et al. Olanzapine versus placebo for the schizophrenic prodrome: 1-year results. Paper presented at: 156th Annual Meeting of the American Psychiatric Association; May 17-22, 2003; San Francisco, Calif.

FIGURES AND TABLES

There should be no more than two figures/tables per article. Original figures and tables should be used wherever possible. There is a possibility of including some extra material as supplementary online material in the Web version of the journal. Figures should be of good quality or professionally prepared, with the proper orientation indicated when necessary (eg, "top" or "left"). As figures and graphs may need to be reduced or enlarged, all absolute values and statistics should be provided. Provide tables and figures in separate files. Legends must be provided with all illustrations, including expansion of all abbreviations used (even if they are already defined in the text). All figures and tables should be numbered and cited in the text.

SPECIFIC FORMATS

Word limits must be strictly adhered to. Articles significantly exceeding the word limit will need to be shortened before reviewing. Word limits do not include abstract and references.

State of the art: 5000 words.
Pharmacological aspects; Clinical research; Basic research/ Translational research: 3000-4000 words.
Brief report: 1500 words.

EDITORIAL ASSESSMENT AND PROCESSING

Peer review: All contributions to Dialogues in Clinical Neuroscience will be reviewed by members of the Editorial Board and submitted to expert consultants for peer review. All contributions should be original review articles.

Editorial processing: All manuscripts are copyedited according to the guidelines of the latest edition of the American Medical Association Manual of Style (Baltimore, MD: Williams & Wilkins); the spelling used is American (reference dictionaries: latest editions of Merriam-Webster's Collegiate Dictionary and Stedman's Medical Dictionary).

Duplicate content detection software: All manuscripts are run through iThenticate http://www.ithenticate.com/.

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