

INSTRUCTIONS FOR AUTHORS

Clinical Neuropsychopharmacology and Therapeutics (CNPT) is the official web journal of the Japanese Society of Clinical Neuropsychopharmacology (JSCNP). The Journal publishes original articles on all aspects of clinical neuropsychopharmacology and therapeutics.

SCOPE

- 1) **CNPT** is an open-access web journal aimed primarily at the publication of original research in clinical neuropsychopharmacology and therapeutics, which includes articles on the pathophysiology of psychiatric diseases if they are relevant to neuropsychopharmacological treatments but excludes those articles that are entirely dependent on animal studies. Clinicians and researchers are invited to submit their findings and observations to the following sections: Review Articles, Original Contributions, Brief Communications, Case Reports, Editorials, and Letters to the Editor.
- 2) **CNPT** provides a wide gateway and ensures rapid processing for the publication of new original findings. In principle, at least two external peer reviewers evaluate each submission. A decision is generally taken within one month of receipt; acceptance cannot be entirely guaranteed. For exceptionally good papers, publication could be decided by the editor-in-chief alone.
- 3) **CNPT** requests that all submitted work adhere to the Journal's ethical guidelines (see below). The editors reserve the right to require authors to submit their original data for comparison with descriptions in the manuscript. Discovery of failure to comply will result in rejection of the manuscript, retraction of the published article, and/or a ban on future submissions by the author(s).
- 4) **CNPT** only accepts original articles that are not under consideration for publication elsewhere and in which the data described have not been previously published (except in abstract form). As a condition of publication, the copyright of the articles is transferred from the authors to the publisher, the JSCNP.

TYPES OF MANUSCRIPTS

The following types of material are considered for publication:

1) **Review Articles**

The editor-in-chief encourages the submission of reviews on both topical and controversial issues. Authors planning for or proposing such papers should consult with the editor-in-chief before submitting their manuscripts.

2) **Original Contributions**

These articles are not limited in length, but authors should ensure clear and concise presentation. Tables and figures that enhance clarity are encouraged.

3) **Brief Communications/Case Reports**

These articles (including short studies and case reports) should describe previously unpublished material. Papers are limited to 1500 words, 15 references, and no more than 3 figures and tables (combined). Case reports will be considered for publication only if they are judged by the editors to be of exceptional readership interest.

4) **Letters to the Editor**

Letters in response to articles published are welcome. Letters containing original research can also be submitted. These letters are limited to 750 words, 5 references, and 1 figure or table. Letters may be shortened for publication at the discretion of the editor-in-chief.

MANUSCRIPT PREPARATION

1) General Style

Manuscripts must be submitted in English. Writers not fluent in English should seek assistance to ensure proper grammar and syntax. In some cases, we need the certificate of English corrections by a native English speaker to maintain the level of manuscripts at the international level. International non-proprietary (generic) names should be used when referring to drugs; avoid proprietary (brand) names. All abbreviations should be spelled out at first mention. Spell out all numbers that begin a sentence. For any information that is not mentioned in these guidelines, authors should consult the [ICMJE Recommendations](#).

2) Manuscript Format

Manuscripts (text, references, and tables) should be prepared in MS Word format. The lead author's name and page number should appear in the upper right-hand corner of each page. Number the Title Page as "1," and number subsequent pages consecutively, including those with the references, figure legends, and tables. Texts and references should be double-spaced and typed in 12-point font. When submitting a revised manuscript, highlight the altered portions of the manuscript in yellow.

a. Review Articles

Reviews should generally begin with a brief (less than 200 words) unstructured summary of the contents, which provides the reader with an abstract of the paper. This abstract should be followed by a list of 3–6 Key words. There is no designated structure for the body of Review Articles. The use of sub-headings to separate major sections and facilitate clarity is preferable. The style of other sections is the same as that required for Original Contributions (see below).

b. Original Contributions/Brief Communications/Case Reports

1) **Title Page** should include the following information: full title of the manuscript; author names and institutional affiliations; contact information of the corresponding author (name, address, telephone number, fax number, e-mail address); running title (no more than 40 characters including spaces); word count of the main text; number of tables and figures; and number of references.

2) **Abstract** must be no more than 250 words (150 words for Brief Communications and Case Reports). Original Contributions should have a concise and specific summary that is divided into four sections—Purpose, Methods, Results, and Discussion. The summary for Brief Communications or Case Reports should not be structured into sections but should cover the same topics as those covered in the structured summary. The Abstract should be followed by 3–6 Key words.

3) **Introduction** should state the objectives of the study clearly and briefly.

4) **Subjects and Methods** of the research should be provided in sufficient detail for the work to be duplicated; alternatively, references to previous comprehensive descriptions can be provided. Identify the statistical procedures that have been used and the rationale for choosing a particular method, especially if it is not standard. Reports must explicitly certify that the research has received prior approval from the appropriate institutional review board and that informed consent has been obtained from each volunteer or patient.

5) **Results** should be reported fully and concisely, in a logical order. There should be no duplication in text, tables, or figures. When appropriate, provide the sample numbers, range, and standard deviation (or mean error) of measurements, and the significance values for compared populations.

6) For Case Reports, **Case Presentation** should be used instead of the Subjects and Methods

and Results sections.

7) **Discussion** should provide an interpretation of the results and should assess their significance in relation to previous work in the field. Conclusions should be supported by the results obtained in the study. Label speculation clearly, and avoid speculation not warranted by the results. Discuss how the data is significant for an understanding of the clinical relevance of the study.

8) **Acknowledgements** should be brief and should precede References. In addition, each author should provide full disclosure of any conflicts of interest.

9) **References** should be cited in the text by numbers in brackets, in order of appearance, and should follow the Vancouver Style. If there are more than three authors, the first three should be named, followed by 'et al'. Only articles that have been published or have been accepted for publication should be included in the references. Unpublished results or personal communications should be cited as such in the text. Authors are responsible for the accuracy of references. Examples follow:

[1] Yasui-Furukori N, Sato Y, Furukori H, et al. Glucose metabolism in Japanese schizophrenia patients treated with risperidone or olanzapine. *J Clin Psychiatry* 2009; 70: 95-100.

[2] Saeki Y, Watanabe T, Ueda M, et al. Genetic and pharmacokinetic factors affecting the initial pharmacotherapeutic effect of paroxetine in Japanese patients with panic disorder. *Eur J Clin Pharmacol* Published online: March 4, 2009; doi: 10.1007/s00228-229-0633-8.

[3] Rowland M, Tozer TN. *Clinical pharmacokinetics: Concepts and applications* (2nd edition). Lea & Febiger, Philadelphia, 1982.

[4] Bertilsson L. Clinical relevance of the CYP2D6 polymorphism for the treatment of psychiatric disorders. In Kaneko S, Motomura S, Tateishi T, Kondo T, Furukawa K-I (eds) *Pharmacogenetics - Tailor-made pharmacotherapy*. Elsevier, Amsterdam, 2002, pp. 1-9.

10) **Figure legends** should be on a separate page, and should be numbered sequentially to correspond to figure numbers (e.g., Figure 1). The legend should provide a brief description of the figure, with explanations of all symbols and abbreviations. Written permission to use non-original material must be obtained by the authors; this permission must be included when the manuscript is submitted. Credit for previously published material (author(s), date, journal/book title, and publisher) must be included in the legend.

11) **Tables** should be presented together at the end of the manuscript, with each table on a separate manuscript page. Each table should be given a number and a descriptive title. Notes and explanations of abbreviations should be given below the table. Do not duplicate data given in the text and/or in figures. Written permission must be submitted with the manuscript if non-original material has been reproduced; credit to the original source must be explicitly included in the table notes.

12) **Figures** such as line drawings (i.e., line graphs, bar graphs, and simple diagrams), complex figures (i.e., in color, in half-tones, and in black and white), and other recorded traces need to be saved as separate image files, with names that include the first author's last name and the figure number, as referenced in the text (e.g., Kaneko-fig1.tif). Each figure must have a minimum resolution of 300dpi. Lettering should be large enough to be clearly legible when the figure is reduced for publication. The figures must also be labeled appropriately. For multi-part figures, label the parts as A, B, C, etc. The maximum size of any figure published in the Journal is 40 mega pixels. In order to ensure consistency throughout the Journal, the editor-in-chief reserves the right to re-draw figures with the appropriate font type, size, and colors. The photographs of patients should not reveal their identities.

COVER LETTER

Each manuscript should be accompanied with a cover letter addressed to the editor-in-chief at the time of submission. The cover letter must include the following information: full title of the manuscript; authors' names; institutional affiliation of each author; contact information of the corresponding author (name, address, telephone number, fax number, e-mail address); number of tables and figures; and number of references. The format can be downloaded from **CNPT** (<http://www.jstage.jst.go.jp/browse/cnpt>) or from the official website of the JSCNP (<http://www.jscnp.org/en/cnpt/index.html>).

MANUSCRIPT SUBMISSION

Manuscripts should be submitted to the editor-in-chief (e-mail: terao@oita-u.ac.jp). Separate files should be submitted for: 1) cover letter to the editor in MS Word Format, 2) manuscript text in MS Word Format (figure legends and tables can be incorporated into the body of the text), and 3) each figure in GIF, BMP, JPEG, or TIF format. Each file should be given a label that includes the first author's last name and the nature of the file (e.g., Kaneko-manuscripttext.doc; Kaneko-Fig1.tif).

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PROOFS

After formal acceptance of the article, proofs are mailed electronically and must be returned within three business days of receipt. Late return of proofs will cause considerable delay in the publication of the article. It is the authors' responsibility to make sure that all information given is accurate.

PAYMENT

The author(s) other than JSCNP members is required to pay 2,500 ¥ (JPY) for each page of the accepted manuscript (online PDF version) toward publication costs. Procedures for payment will be notified after the number of pages for publication is determined at the completion of the overall editing process.

ETHICAL GUIDELINES

1) Authorship

CNPT follows the guidelines of the International Committee of Medical Journal Editors regarding criteria for authorship (<http://www.ICMJE.org>). Each person listed as an author is expected to have participated in the study to a significant extent. We discourage the inclusion of “honorary” authors (i.e., individuals who have been listed as authors but who have not contributed to the work/manuscript) and “ghost” authors (i.e., individuals who have substantively contributed to the work/manuscript but who are not listed as authors or contributors). Although the editors and referees make every effort to ensure the validity of the manuscript, the final responsibility rests with the authors, not with CNPT, its editors, or the publisher, JSCNP. When authors find inaccuracy in their own published work, authors must notify the editorial office promptly to retract or correct the paper.

2) Funding

Sources of funding should always be disclosed in the Acknowledgements section. Sources may include government funding agencies, government institutions and/or departments, private industry, and charitable organizations and foundations. Funding for all authors should be acknowledged.

3) Ethical Consideration and the Anonymity of Patients

CNPT requires authors to affirm that original studies submitted for publication have been carried out in accordance with the Declaration of Helsinki. The authors must verify that any experimental investigation with human subjects that is reported in the manuscript has been performed with the informed consent of the subjects and with approval from the relevant research ethics committee or institutional review board. When figures, pictures, and images of individual patients have been presented, information that can identify an individual must be removed.

4) Disclosure

Authors are required to fully disclose associations that might affect their ability to present and/or interpret data objectively, particularly financial ties to funding sources for the work under review.

5) Research Misconduct (data fabrication/falsification)

CNPT will attempt to ensure that any allegations of misconduct are properly investigated. In the case of any allegations, authors will be given a right to respond. While CNPT is limited in its ability to investigate misconduct, we will alert appropriate bodies and encourage them to investigate. The Editorial Board may issue an expression of concern, or retraction of the article, pending the outcomes of those investigations.

6) Plagiarism, Duplication, and Redundant Publication

CNPT requires that authors submit their own work and not any misappropriated work. When previously published material is used, appropriate credit must be given and written permission obtained. Authors must provide a signed CTF when the manuscript is accepted. The CTF states clearly that the content is the author’s original work. Duplication of published material and redundant publication must be prevented. Ensure that the material contained in a submitted article has not been previously published and is not being considered for publication elsewhere.

7) Peer Review

CNPT is committed to a peer-review system that is fair to the author and enhances the value of the articles published in the Journal. Reviewer identity is kept confidential. Reviewers are chosen for their expertise in the field. If there are any conflicts of interest, authors can appeal to the editors-in-chief to seek an additional reviewer. While the editor-in-chief reserves the right to make the final decision to accept or reject an article, appeals will be seriously considered. For exceptionally good papers, publication may be decided by the editor-in-chief alone, to facilitate rapid publication processing.