

# Biological Psychiatry

A Journal of Psychiatric Neuroscience and Therapeutics

## GUIDE FOR AUTHORS

*Biological Psychiatry* is the official journal of the Society of Biological Psychiatry. The *Journal* rapidly publishes reports of novel results on a broad range of topics related to the pathophysiology and treatment of major neuropsychiatric disorders. Both basic and clinical neuroscience contributions are encouraged, particularly those addressing genetic and environmental risk factors, neural circuitry and neurochemistry, and important new therapeutic approaches. Except where explicitly stated otherwise, *Biological Psychiatry* conforms to the guidelines set forth by the International Committee of Medical Journal Editors (ICMJE) (see Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (December 2016): Available from <http://www.ICMJE.org>).

All new manuscripts must be submitted through the journal website: <http://ees.elsevier.com/bps>. Please direct questions to the Editorial Office at (214) 648-0880, or [Biol.Psych@utsouthwestern.edu](mailto:Biol.Psych@utsouthwestern.edu).

**ARTICLE TYPES AND CONTENT** Our readership is diverse, and authors should consider that many of our readers are in specialty areas other than their own. It is important, therefore, to avoid jargon. A focused and clearly written manuscript is more likely to appeal to the readership. The brevity and clarity of the presentation will be taken into consideration by the Editors. In highly specialized areas, the introduction should be a concise primer.

**Archival Reports** are original research papers reporting novel results on a broad range of topics related to the pathophysiology and treatment of major neuropsychiatric disorders. Clear explication of methods and results is critical to facilitate review of papers and replicability of findings. The main text must be no more than 4000 words, and be structured with sections entitled and ordered as follows: Introduction, Methods and Materials, Results, Discussion. Abstracts should be 250 words or less, structured with sections entitled as follows: Background, Methods, Results, Conclusions. Figures, tables, and references should be included as necessary.

**Priority Communications** are Archival Reports that clearly document novel experimental findings of unusual and timely significance. These papers should represent a conceptual advance in the field and are not intended for publication of preliminary results. They are expected to be acceptable for publication in essentially the form submitted. Papers that require substantial revisions or do not fit the criteria will be considered as Archival Reports. See Archival Reports for structure, word length, and other requirements.

**Reviews** are concise (4000 words or less) and focus on current aspects of interest and research. Up to 150 references are allowed. Abstracts are unstructured and limited to 250 words. Figures and tables should summarize or illustrate important points.

**Techniques and Methods** articles feature new, improved, or noteworthy comments about techniques or methods relevant to basic or clinical research in, or treatment of, psychiatric disorders. Maximum length is 3000 words (main body of text only; excludes acknowledgments, disclosures, legends, and references). Abstracts are unstructured and limited to 150 words. Figures and tables should illustrate important points and are limited to ½ typeset page.

**PREPARATION & SUBMISSION REQUIREMENTS** All manuscripts must be submitted in electronic form through the *Biological Psychiatry* online submission and review website (<http://ees.elsevier.com/bps/>). Submission is a representation that all authors have personally reviewed and given final approval of the version submitted, and neither the manuscript nor its data have been previously published (except in abstract) or are currently under consideration for publication elsewhere. To ensure transparency, authors are expected to clearly declare other reports/publications of their own that have used the same dataset or sample. Authors must also identify figures, tables, and/or data that have been published elsewhere. Permission from the copyright holder(s) must be obtained to reproduce or modify any previously published materials.

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Files (cover letter, text, figures) will be uploaded separately during the submission process, and should be labeled with appropriate and descriptive file names (e.g., SmithText.doc, Fig1.eps, Table3.doc). The system will then build a single PDF of the submission from the uploaded files.

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**Correspondence** is directly related to methods, procedures or interpretation of data presented in work recently published in our journal and uses new analysis of data presented, the support of previously published work, and/or scientific points to be addressed based on methodological issues. It may also present a case report that clearly and unambiguously illustrates important new principles that have not yet been demonstrated in clinical trials. When warranted, a reply from author(s) of the original work is solicited. Correspondence is published online only as e-content. Maximum length is 1000 words (main body of text only). No abstract and no supplements are allowed. Figures and tables are not encouraged, but allowed to illustrate important points.

**Commentaries and Editorials** address points directly related to articles in the concurrent issue, and/or focus on topics of current research and interest. These are generally invited, but interested contributors are encouraged to contact the Editor. A single summarizing figure or table is encouraged. Length is restricted to 1500 words with no more than 10 references.

**Early Career Investigator Commentaries** provide publishing opportunities to early career investigators (ECI), as part of a joint project between the *Journal* and the Education Committee of the Society of Biological Psychiatry. These are invited articles for which an ECI serves as the sole and corresponding author. Each ECI shall be 1) a current member of the Society of Biological Psychiatry, 2) no more than 10 years out from terminal degree, and 3) not hold an academic faculty rank higher than Assistant Professor. A senior investigator mentors each ECI, acts as a content reviewer, and is recognized in the Acknowledgments section. ECI commentaries are published online only as e-content. Length is restricted to 1500 words with no more than 10 references. A single summarizing figure or table may be allowed.

**Clinical Commentaries**, submitted by invitation only, are directly related to articles in the concurrent issue. Unlike regular commentaries, however, these articles have a specific clinical focus and are intended for a clinical audience, including medical students, residents, and clinicians. These commentaries are published online only as e-content. Length is restricted to 1500 words with no more than 10 references. A single summarizing figure or table is allowed.

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**Style** Manuscripts should be double-spaced. Pages must be numbered and include the first author's name. Acronyms must be spelled out on first use in both the abstract and the text, and where used in tables or figures, in each of their legends. American spellings should be used. The location (city and state or country) of all manufacturers should be provided. Gene symbols should be italicized and differentiate by species. Human symbols should be all uppercase, whereas symbols for rodents and other species should be lowercase using only an initial capital. Protein products, regardless of species, are not italicized and use all uppercase letters. Accepted manuscripts are copyedited to conform to the *AMA Manual of Style*.

**Title Page** On the title page, include the full names of all authors and their academic or professional affiliations, along with the corresponding author's complete contact information. Multiple corresponding authors are not allowed. Six key words, used for indexing, should also be included. Separately list the number of words in both the abstract and article body (excluding abstract, acknowledgments, financial disclosures, legends and references), and the number of figures, tables, and supplemental information (if zero, state zero for each item). Article titles may not contain acronyms, and should be less than 100 characters. For full-length articles (Archival Reports, Priority Communications, Reviews), a short title of 55 characters or less (including spaces) must also be included. Only standard acronyms (e.g., ADHD, PTSD, etc.) and gene symbols are permitted in short titles.

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**Abstract** Abstracts should be formatted according to the article type and should not exceed the word limits as detailed above. The Methods section should explicitly state the sample size of the trial. For those manuscripts that require clinical trials registration (see Clinical Trials Registration section, below), the registry name, URL, and registration number should be included at the end of the abstract.

**Acknowledgments** This section should include acknowledgments for non-author contributors/collaborators and individuals who provided personal and technical assistance, in addition to detailed information regarding all sources of funding, including grant and other material or financial support. The role of study sponsor(s), if any, should also be provided. If a research group is listed as an author, then the individual members of the research team must be named here. Written permission should be obtained from all individuals named in this section. Data that was published previously, such as in an abstract or poster, should also be identified.

**Financial Disclosures** This section must include the required conflict of interest statements for each author (see section on disclosure, below).

**References** References should be numbered and listed by their order of appearance in the text. Refer to references in the text with the appropriate number in parentheses. References in tables and figures should also be numbered. List all authors; if there are more than seven authors, list the first six then *et al.* Periodical abbreviations should follow those used by Index Medicus. It is not appropriate to reference papers that have not yet been published (i.e., are submitted or under review). The following are sample references for a journal article (1), a book (2), and an edited book (3).

1. Krystal JH, Carter CS, Geschwind D, Manji HK, March JS, Nestler EJ, *et al.* (2008): It is time to take a stand for medical research and against terrorism targeting medical scientists. *Biol Psychiatry* 63: 725-727.
2. American Psychiatric Association (1994): *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. Washington, DC: American Psychiatric Press.
3. Martin JH (1985): Properties of cortical neurons, the EEG, and the mechanisms of epilepsy. In: Kandel ER, Schwartz JH, editors. *Principles of Neural Science*, 2nd ed. New York: Elsevier, pp 461-471.

**FIGURES AND TABLES** Figures and tables should be cited in the text, numbered consecutively (i.e., 1, 2, 3) in the order of their mention, and have brief descriptions. If not included in the manuscript file, tables should be uploaded individually in an editable text format, such as DOC. Table footnotes should use superscript lowercase letters, rather than symbols.

The preferred file format for figures and graphics is EPS, TIFF, or PDF. Please upload high quality versions of each figure individually (i.e., two figures should be uploaded separately as Figure 1 and Figure 2). Parts/panels in composite figures should be labeled with capital letters (A, B, C). Each figure should be consistent in color, size, and font, and be designed proportionally so that each item within it is to scale (particularly numbers, letters, and symbols) so it can later be sized as needed without loss of legibility or quality. Figure titles and legends should be included as text in the manuscript file and not in the figure file itself. Complete instructions for electronic artwork preparation and submission can be found at <http://www.elsevier.com/artwork>.

Images should represent the original data and be minimally processed. Uniform adjustments (e.g., brightness, contrast) may be applied to an entire image, but individual elements of an image may not be adjusted, manipulated, or cropped in order to selectively highlight, obscure, delete, or otherwise misrepresent the image or its interpretation.

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## NOMENCLATURE

**Psychopharmacology** *Biological Psychiatry* supports the Neuroscience-based Nomenclature (NbN) project (<http://nbnomenclature.org/>), which aims to promote the use of mechanism-based nomenclature that is pharmacologically-driven, rather than indication-based. The NbN system characterizes medications based on their pharmacological domain and mode(s) of action. Authors should use NbN's glossary or official apps in order to translate between the old and new nomenclature.

**Genetics** Authors should use approved nomenclature for gene symbols by consulting the appropriate public databases for correct gene names and symbols. Please use symbols (e.g., *SLC6A4*, *DISC1*) as opposed to italicized full names, and avoid listing multiple names separated by a slash, such as '*Oct4/Pou5f1*'. Use one name throughout and include any alias(es) upon the first reference. Approved human gene symbols are available from HUGO Gene Nomenclature Committee (HGNC) at <http://www.genenames.org/>. Approved mouse symbols are provided by The Jackson Laboratory at <http://www.informatics.jax.org/mgihome/nomen>. Authors should submit proposed gene names that are not already approved to the appropriate nomenclature committees as soon as possible. It is the authors' responsibility to ensure these are deposited and approved before publication of an article.

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Authors should be aware that manuscripts may be returned without outside review when the editors deem that the paper is of insufficient general interest for the broad readership of *Biological Psychiatry*, or that the scientific priority is such that it is unlikely to receive favorable reviews. Editorial rejection is done to speed up the editorial process and to allow the authors' papers to be promptly submitted and reviewed elsewhere.

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**AUTHORSHIP** To qualify for authorship, an individual must have participated sufficiently in the work to take public responsibility for all or part of the content, given final approval of the submitted version, and made substantive intellectual contributions to the submitted work in the form of: 1) conception and design, and/or acquisition of data, and/or analysis of data; and 2) drafting the article, and/or revising it critically for important intellectual content. Authorship also requires agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or

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**CLINICAL TRIALS REGISTRATION** In concordance with the ICMJE, *Biological Psychiatry* requires the prospective registration of all clinical trials as a condition of consideration for publication. For this purpose, a clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example, drugs, surgical procedures, devices, behavioral treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic

**RESEARCH AND DATA REPORTING GUIDELINES** *Biological Psychiatry* supports initiatives aimed at improving the reporting of biomedical research. Checklists have been developed for a number of study designs, including randomized controlled trials (CONSORT), systematic reviews (PRISMA), meta-analyses of observational studies (MOOSE), diagnostic accuracy studies (STARD), and animal research (ARRIVE). The Minimum Information for Biological and Biomedical Investigations (MIBBI) portal also provides data-reporting standards, such as MIAME for microarray experiments. A comprehensive list of reporting guidelines is available from the EQUATOR Network Library ([http://](http://www.equator-network.org)

**GENETIC ASSOCIATION STUDIES** The ability to perform a replication of experiments performed by other investigators is a fundamental concept in scientific and biomedical research. Therefore, the failure to replicate the majority of genetic association studies is troubling and provides a challenge for journals attempting to publish work that will stand the test of time, or at the very least, not lead other investigators in non-productive research directions. At the same time, the difficulty in balancing type I error with type II error is a key issue in association studies of neuropsychiatric disease, where sample sizes are often constrained by practicality and the fact that effect sizes due to any single genetic risk factor may be small. Given these tradeoffs, it is often difficult for authors to know what level of proof is acceptable for publication in a given journal, leading to multiple resubmissions and publication delays. We have adopted the following editorial policies to provide guidelines for those submitting manuscripts involving genetic association studies.

integrity of any part of the work are appropriately investigated and resolved. All individuals who meet criteria for authorship must be named as authors, and all individuals named as authors must meet all authorship criteria. If authorship is attributed to a group (either solely or in addition to 1 or more individual authors), all members of the group must meet the full criteria and requirements for authorship as described above. Requests to change the corresponding author or to add/delete any authors must be submitted directly to the Editorial Office.

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explicitly stated. Authors should contact the Editorial Office with questions or concerns, but should err on the side of inclusion when in doubt. The following is a sample text:

Dr. Einstein reports having received lecture fees from EMC Laboratories, and research funding from Quantum Enterprises. Dr. Curie disclosed consulting fees from RA Inc. Dr. Newton reported his patent on "Newtonian physics". Dr. Archimedes reported no biomedical financial interests or potential conflicts of interest.

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measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

Trials must have been registered at or before the onset of patient enrollment. Retrospective registration (i.e., at the time of submission) is not acceptable. For all clinical trials and secondary analyses of original clinical trials, the trial name, URL, and registration number should be included at the end of the abstract. Acceptable registries are ClinicalTrials.gov (<http://www.clinicaltrials.gov>) or any primary registries in the World Health Organization International Clinical Trials Registry Platform (<http://www.who.int/ictcp/network/primary/en/index.html>).

[www.equator-network.org](http://www.equator-network.org)). Authors should make use of the appropriate guidelines when drafting their papers. Peer reviewers are asked to refer to these checklists when evaluating these studies.

*Biological Psychiatry* requires the inclusion of the CONSORT materials (flow diagram and checklist) at submission for all randomized controlled trials. Authors of other study designs are encouraged, but not required, to include the relevant checklists at submission. All such materials will be published as supplemental information.

*Biological Psychiatry* is interested in genetics/association studies that are replicable and generalizable. The following guidelines are offered in pursuit of this goal. 1) Studies need to be sufficiently large. 2) Information about subject ethnicity, and how it was determined, should be provided. The use of an analytic strategy that controls for potential stratification, such as family-controlled association, or structured association, is encouraged. 3) There must be a clear description of how the phenotype was ascertained. 4) Negative studies should always include estimates of power.

We realize that independent replication of an initial finding in the same manuscript may not be feasible in every case, but studies providing such replication of findings in an independent sample will be given highest priority. Confirmation of the functional consequences of a common disease-associated variant is useful information, but does not substitute for a rigorous demonstration of a statistically significant association. Analysis of pathways or candidate regional

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analysis is encouraged over single gene studies. Candidate gene studies must have strong positional or biological rationale or precedents in the literature that motivate gene choice.

For studies of anonymous variants, there should generally be sufficiently dense marker coverage to allow a relatively comprehensive analysis of common variants within a gene or genes. Analysis of the extent of marker coverage using standard methods to assess linkage disequilibrium should be presented. If rare

**MATERIALS AND GENES** Upon publication, it is expected that authors willingly distribute to qualified academic researchers any materials (such as viruses, organisms, antibodies, nucleic acids and cell lines) that were utilized in the course of the research and that are not commercially available.

GenBank/EMBL accession numbers for primary nucleotide and amino acid

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variants are being tested, the same method of assessment (sequencing, copy number assessment, etc.) should be used in both case and control groups.

We will consider both negative and positive association studies, as well as large replication studies. Negative studies should be based on an attempt to replicate previous studies. Power calculations considering reasonable effect sizes must be provided to show that the study had sufficient power to be informative.

sequence data should be included in the manuscript at the end of the Methods and Materials section. All microarray data (proteomic, expression arrays, chromatin arrays, etc.) must be deposited in the appropriate public database and must be accessible without restriction from the date of publication. An entry name or accession number must be included in the Methods and Materials section.

the repository governing publications using repository data and/or biomaterials must also be followed. Authors must provide sufficient information in the manuscript for the Editor and reviewers to determine that these conditions have been met and that the repository has been established and maintained according to current ethical standards. The Editors may require authors to provide additional documentation regarding the repository during the review process.

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