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Original articles should normally be in the format of introduction, methods, results, and discussion. Each manuscript must have a 200-word structured abstract. Lengthy manuscripts are likely to be returned for shortening. The discussion in particular should be clear and concise and should be limited to matters arising directly from the results. Avoid discursive speculation. Randomized clinical trials should be clearly identified as such in the title and abstract.

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On the title page give (1) the title of the article; (2) the name and initials of each author; (3) the department and institution to which the work should be attributed; (4) the name, address and telephone, facsimile and e-mail numbers of the author responsible for correspondence and to whom requests for reprints should be addressed; (5) sources of financial support; and (6) the category in which the manuscript is being submitted (original article, review etc.)

Abstract

This should be not more than 200 words on the second page of the manuscript and be presented in a structured format. Background: state why the study was done, and its main aim; Method: describe patients, laboratory material and other methods used. Clearly identity the nature of the study: randomized controlled trial, retrospective review, experimental study, etc. Results: state the main findings of the study; include important numerical values. Conclusion: state the main conclusion drawn from the results. Controversial or unexpected observations may be highlighted, but keep this section brief. Write the abstract in clear prose.

Tables and illustrations

Submit one copy of all illustrations and tables. Type each table on a separate page with an appropriate brief title. Line drawings are acceptable as clear black on white graphics, computer printout or photocopies. Submit radiographs, photomicrographs, etc unmounted in the form of glossy prints, original transparencies or negatives. If you include photocopies, they should be of sufficient quality to enable the Journal’s referees to judge their content and value. Label each illustration on the reverse side giving its number (to correspond with its reference in the text) and the name(s) of the author(s); indicate the top of the illustrations. Include a measure of magnification of photomicrographs. Illustrations should be drawn and labeled appropriately for reduction to one or two column widths of the Journal. Include explanations of symbols and shading in the legend. Survival curves should be accompanied by a table giving the actual numbers of patients involved. Include in the legends to illustrations and the footnotes to tables brief but comprehensive explanations of all the information presented. Look at recent issues of the Journal for examples of accepted layout. If a table of an illustration has been reproduced from a published work give the original source in full. Obtain permission to use published work from the original author and the publisher before submission.

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Use the decimal point. Not a comma, e.g. 5.7. Use a space not a comma after thousands and multiples thereof, e.g. 10 000. Use SI units (International System of Units) except for the measurement of blood pressure (mmHg). Where measurements were made in non-SI units, give the actual values and units, with SI equivalents inserted in parentheses at appropriate points.

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Set out clearly the objectives of the study, identify the primary and secondary hypotheses, and the chosen endpoints, and explain the rationale for the choice of sample size.

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Actual \( P \) values should be reported to two decimal places, especially when the result is not significant, rather than stating 'not significant'. Whenever possible, the results of the primary analyses should be reported using confidence intervals instead of, or in addition to, \( P \) values.

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