

# *Homeopathy*

## **Author Instructions**

Thank you for planning to contribute an article to *Homeopathy*. Please read the instructions carefully and observe all the directions given. Failure to do so may result in delays in handling your article.

***Homeopathy* is an international peer-reviewed journal aimed at improving the fundamental understanding and clinical practice of homeopathy by publishing relevant high-quality original research articles, reviews, and case reports. It also promotes commentary and debate on matters of topical interest in homeopathy.**

### **SUBMISSION CHECKLIST**

**All manuscripts must be submitted at the following link:**

**<http://www.editorialmanager.com/homp>**

- ☐ **AUTHOR INFORMATION**
  - All authors: full name, department, affiliation
  - Corresponding author: full name, degrees, department, affiliation, mailing address, telephone number, e-mail address
- ☐ **MANUSCRIPT FILE**
  - Must be digital – hard-copy submissions are not accepted
- ☐ **ABSTRACT AND KEYWORDS**
  - See the section Article Types for word limit
- ☐ **REFERENCES**
  - Cited sequentially in American Medical Association (AMA) style
- ☐ **FIGURES AND TABLES**
  - Cited sequentially in the main document; must be saved separately from the main document
- ☐ **ART FILES**
  - Must be saved separately from the main document
- ☐ **PERMISSIONS**
  - Required if you plan to reproduce content from a published source or include a photograph of a patient – permission forms available at [www.thieme.com/journal-authors](http://www.thieme.com/journal-authors)

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## MANUSCRIPT FORMAT

### Article Types

The following table shows what types of articles are accepted for publication, and what requirement they may have.

| Article Type                | Abstract Limit | Keywords Limit  | Title Limit    |
|-----------------------------|----------------|-----------------|----------------|
| Review Article              | 400 words      | 3 to 5 keywords | Up to 30 words |
| Original Research Article   | 300 words      | 3 to 5 keywords | Up to 30 words |
| Special Issue Article       | 300 words      | 3 to 5 keywords | Up to 30 words |
| Conference Report           | 300 words      | 3 to 5 keywords | Up to 30 words |
| Clinical Case Series        | 300 words      | 3 to 5 keywords | Up to 30 words |
| Clinical Case Report        | 200 words      | 3 to 5 keywords | Up to 30 words |
| * Debate/Commentary Article | 200 words      | 3 to 5 keywords | Up to 30 words |
| Editorial / Guest Editorial | Not applicable | Not applicable  | Up to 30 words |
| Letter to the Editor        | Not Applicable | Not Applicable  | Up to 30 words |
| Conference Abstracts        | Not applicable | Not applicable  | Up to 30 words |
| Obituary                    | Not applicable | Not applicable  | Up to 30 words |
| Book Review                 | Not applicable | Not applicable  | Up to 30 words |

\* The editors will decide whether a given article, if accepted for publication, is designated 'Debate' or 'Commentary'.

## General Guidelines

- You must submit a digital copy of your manuscript. Hard copy submissions are not accepted.
- Keep the format of your manuscript simple and clear. We will set your manuscript according to our style—do not try to “design” the document.
- The manuscript, including the title page, abstract and keywords, text, references, and figure captions, should be typewritten, double-spaced in 12-point font with 1-inch margins all around and saved as one file.
- Each figure and table should be saved as its own separate file. Do not embed figures/tables within the manuscript file itself: this requires special handling by Thieme’s Production Department.
- Keep abbreviations to a minimum and be sure to explain each of them the first time they are used in the text.
- The manuscript must be written in excellent English, with consistent use of either British or American spellings. Please note that papers whose clarity is compromised by insufficient quality of English will be returned to the author for language editing prior to re-submission.
- The authors should use Système International (SI) units of measurement. For clarity if required, the corresponding non-SI unit may also be included in parentheses.
- Use generic names for drugs. You may cite proprietary names in parentheses along with the name and location of the manufacturer.
- Credit suppliers and manufacturers of equipment, drugs, and other brand-name material mentioned in the manuscript within parentheses, giving the company name and primary location.
- **Names of homeopathic medicines** should appear in italics. The binomial system and abbreviations should be used: e.g. *Nat-m*, *Kali-bi*. Homeopathy potencies are indicated as, e.g., 6x, 30c, 1M, 10M (or use units dH, cH, MK etc., where the method of dilution is specified).
- **Footnotes** should be used sparingly. Number them consecutively throughout the article. Many word processors can build footnotes into the text, and this feature may be used. Otherwise, please indicate the position of footnotes in the text and list the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

The manuscript should comply with the [Uniform Requirements of the International Committee of Medical Journal Editors \(ICMJE\): Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](http://www.icmje.org/about-icmje/faqs/icmje-recommendations) <http://www.icmje.org/about-icmje/faqs/icmje-recommendations>

## Title Page

- This journal adheres to a double-blinded peer-review policy. The title page must not be included in the main document.
- The title page must be in a separate document and list the article title and the corresponding author’s full name, degree, title, department, affiliation, mailing address, e-mail address and telephone number. It should also list the full name, department, and affiliation of every co-author.

## Abstract, Keywords and Short Title

See the section Article Types for word limits of the abstract.

The abstract should briefly outline the content of the article and the major conclusion(s) it reaches. The abstract should be structured, using the following sections: Background; Methods; Results; Conclusions. An abstract typically does not require any references but, if essential, then cite author(s) and year(s).

The keywords should be words that a reader would be likely to use in searching for the content of the article.

Include within this page a suggested short title for your paper; this will be used by the typesetter as a running header within the typeset article.

## **Main Document**

- Please clearly distinguish the hierarchy of headings within the manuscript by using capital letters, underline, italic, and bold styles as necessary.
- Include page numbers and line numbers in the manuscript file.
- As needed, use italic, superscripts, subscripts, and boldface, but otherwise do not use multiple fonts and font sizes.
- Do not insert page or section breaks except where noted in the Author Instructions.
- Use hard returns (the Enter key) only at the end of a paragraph, not at the end of a line. Allow lines of text to break automatically in your word-processing software. Do not right-justify your text.
- Use only one space, not two, after periods.
- Create tables using the Table function in Microsoft Word.

## **Highlights**

This section appears after the main text of a published article and before the list of references. It should comprise 4–6 bullet-points that convey, at a glance, the ‘key things to remember’ from the article. The Highlights section therefore serves a different purpose from that of the Abstract.

## **Acknowledgements**

The source of any financial support received and recognition of personal assistance for the work being published should be indicated at the end of the article, just before the References section, under the heading Acknowledgements.

## **Conflict of Interest**

All authors must disclose any financial and personal relationships with other people or organisations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Any conflicts of interest must be disclosed at the end of the submitted manuscript under the sub-heading ‘Conflict of interest statement’. If there are no conflicts of interest then please state, ‘Conflicts of interest: None’.

In addition, please click <http://www.icmje.org/conflicts-of-interest> to download an ICMJE Conflict of Interest form. This form must be completed and submitted one per author, under the designation “Conflict of Interest Form”, to the journal’s online submission system, Editorial Manager, along with all the other files that comprise the submitted article. (See also **Submission Procedure**, page 10.)

## **Funding Support**

You are requested to identify who, if any, provided financial support for the conduct of the research and/or preparation of the article, and to describe briefly any role of a sponsor(s) in study design, in the collection, analysis and interpretation of data, in the writing of the report, and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

## References

References should be the most recent and pertinent literature available. It is essential that they are complete and thoroughly checked. If the reference information is incomplete, good online sites to search for full details are the National Library of Medicine: [www.nlm.nih.gov](http://www.nlm.nih.gov); Books in Print: [www.booksinprint.com](http://www.booksinprint.com); PubMed: [www.ncbi.nlm.nih.gov/PubMed/](http://www.ncbi.nlm.nih.gov/PubMed/); or individual publisher websites.

- References should be listed in AMA (American Medical Association) style, using Index Medicus journal title abbreviations.
  - The list of references follows the main text of the article. Insert a page break between the end of text and the start of references.
  - References must be cited sequentially (NOT alphabetically) in the text using superscript numbers. At the end of the paper, the references should be listed in that numerical order. Please ensure that every reference cited in the text is also present in the reference list (and vice versa).
  - By way of exceptions to AMA style, do not italicise book titles or journal title abbreviations, do not include month of publication or issue number, and do not put a period at the end of a reference.
  - List all author names, up to and including six names. For more than six authors, list the first three followed by 'et al'.
  - Do not include DOI information for a journal article that is already fully published.
  - References should be styled per the following examples:
1. Citing a journal article:  
Newburger JW, Takahashi M, Burns JC, et al. The treatment of Kawasaki syndrome with intravenous gamma-globulin. *N Engl J Med* 1986;315:341–347
  2. Citing a chapter in a book:  
Toma H. Takayasu's arteritis. In: Novick A, Scoble J, Hamilton G, eds. *Renal Vascular Disease*. Philadelphia: WB Saunders; 1995:47–62
  3. Citing a book:  
Stryer L. *Biochemistry*. 2nd ed. San Francisco: WH Freeman; 1981
  4. Citing a thesis:  
Stern I. Hemorrhagic Complications of Anticoagulant Therapy [PhD dissertation]. Evanston, IL: Northwestern University; 1994
  5. Citing a government publication:  
Food and Drug Administration. Jin Bu Huan Herbal Tablets. Rockville, MD: National Press Office; April 15, 1994. Paper T94-22
  6. Citing an online-only article:  
Rosenthal S, Chen R, Hadler S. The safety of acellular pertussis vaccine vs whole-cell pertussis vaccine [abstract]. *Arch Pediatr Adolesc Med* [serial online]. 1996;150:457460. Available at: [http://www.ama-assn.org/sci-pubs/journals/archive/ajdc/vol\\_150/no\\_5/abstract/htm](http://www.ama-assn.org/sci-pubs/journals/archive/ajdc/vol_150/no_5/abstract/htm). Accessed November 10, 1996
  7. Citing an in-press journal article:  
A DOI should be used to cite and link to electronic articles where an article is in-press and full citation details are not yet known, but the article is available online. A DOI is guaranteed never to change, so you can use it as a permanent link to an electronic article. An example of a citation using DOI for an article not yet in an issue is: VanDecar JC, Russo RM, James DE, Ambeh WB, Franke M. Aseismic continuation of the Lesser Antilles slab beneath north-eastern Venezuela. *J Geophys Res* 2003; <https://doi.org/10.1029/2001JB000884>. Please note that the format of such citations should be in the same style as for other references in the paper.

8. Citing a conference article:

Eisenberg J. Market forces and physician workforce reform: why they may not work. Paper presented at: Annual Meeting of the Association of American Medical Colleges; October 28, 1995; Washington, DC

Bengston S, Solheim BG. Enforcement of data protection, privacy and security in medical informatics. In: Proceedings of the 7<sup>th</sup> World Congress on Medical Informatics; September 6-10, 1992; Geneva, Abstract 209

9. Data references:

*Homeopathy* encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your reference list. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add '[dataset]' immediately before the reference so we can properly identify it as a data reference. The '[dataset]' identifier will not appear in your published article.

10. Unpublished results and personal communications:

These 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'.

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### **Figure Captions**

- Figures include photographs or radiographs, drawings, graphs, bar charts, flow charts, and pathways, but NOT lists or tables.
- Figures must be cited sequentially in the text. Number all figures (and corresponding figure captions) sequentially in the order they are cited in the text.
- Figure captions should be written after the reference list. Insert a page break between the end of references and the start of figure captions.
- Figure captions should include a description of the figure and/or each lettered part (A, B, etc.) and of any portions of the figure highlighted by arrows, arrowheads, asterisks, etc.
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### **Tables**

- Data given in tables should be commented on but not repeated in the text. Be sure that lists or columns of related data are composed in a word-processing program like the rest of the text.
- Do not intersperse tables in the text. Each table should be saved as its own separate file.
- Tables must be double-spaced and numbered in the same sequence they are cited in the text. A short descriptive title should be provided for each table.
- If a table contains artwork, supply the artwork separately as a digital file.
- For tables borrowed or adapted from another publication (used with permission), add a credit line as the first footnote beneath each table. This credit line should be a complete bibliographical listing of the source publication (as a reference), or other credit line as supplied by the copyright holder. For example, “Reprinted with permission from Calfee DR, Wispelwey B. Brain abscess. *Semin Neurol* 2000;20:357.” (“Data from . . .” or “Adapted from . . .” may also be used, as appropriate.)
- Other footnotes for tables should be indicated in the table using superscript letters in alphabetical order.
- Any abbreviations used in the table should be explained at the end of the table in a footnote.

### **Supplementary material**

- Supplementary files, such as appendices, applications, images or sound clips, can be published with your article to enhance it: such files will be published online only. Submitted supplementary items are published exactly as they are received (Word, Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate or track-change any corrections on a previous version.
- If using supplementary material, please insert a textbox at the end of your manuscript, labelled 'Supplementary material', containing the number and title of each supplementary file.

## DIGITAL ARTWORK PREPARATION

### General Guidelines

- It is best to use Adobe Photoshop to create and save images, and Adobe Illustrator for line art and labels.
- Do not submit art created in Microsoft Excel, Word, or PowerPoint. These files cannot be used by the typesetter.
- Save each figure in a separate file.
- Do not compress files.
- All black-and-white and colour artwork should be at a resolution of 300 dpi (dots per inch) in TIFF format. Line art should be 1,200 dpi in EPS or TIFF format. Contact the Production Editor at Thieme if you are unsure of the final size.
- It is preferable for figures to be cropped to their final size (approximately 3½ inches for a single column and up to 7 inches for a double column), or larger, and in the correct orientation. If art is submitted smaller and then has to be enlarged, its resolution (dpi) and clarity will decrease.

**Note:** Lower resolutions (less than 300 dpi) and JPEG format (.jpg extension) for greyscale and colour artwork are strongly discouraged due to the poor quality they yield in printing, which requires 300 dpi resolution for sharp, clear, detailed images. JPEG format, by definition, is a lower resolution (compressed) format designed for quick upload on computer screens.

### Black-and-White Art

- Black-and-white artwork can be halftone (or greyscale) photographs, radiographs, drawings, line art, graphs, and flowcharts. Thieme will only accept digital artwork.
- If possible, do not send colour art for conversion to black-and-white. Please do the conversion yourself so that you can check the results and confirm in advance that no critical details are lost or obscured by the change to black-and-white.
- For best results, line art should be black on a white background. Lines and type should be clean and evenly dark. Avoid screens or cross-hatching, as they can darken or be uneven in printing and lead to unacceptable printing quality.

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We will convert colour illustrations to black-and-white unless it is essential for the message to be conveyed. All colour artwork should be saved in CMYK, not RGB.

### Art Labels

- Arrows, asterisks, and arrowheads (or other markers) should be white in dark or black areas, and black in light or white areas, and large in size. If not, these highlighting marks may become difficult to see when figures are reduced in size during the typesetting process.
- Use 1-point (or thicker) rules and leader lines.
- Capitalise the first word of each label and all proper nouns. Consider using all capitals if you need a higher level of labels.
- Where there are alternative terms or spellings for a named structure, use the most common one and make sure it is consistent with what is used in the text.
- Avoid using multiple fonts and font sizes for the labels; use only one or two sizes of a serif font.

## SUBMISSION AND REVISION PROCEDURE

### Submission Procedure

- Consult the checklist on the first page of this document to ensure that you are ready to submit your manuscript.
- Manuscripts must be submitted electronically using Editorial Manager at the following link: <http://www.editorialmanager.com/homp>
- Always review your manuscript before submitting it. You may interrupt a submission at any phase and save it to submit later. After approving submission, you will automatically receive a confirmatory email. You can also check the status of your manuscript by logging in to the submission system.
- All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then sent out to independent expert review to help assess the scientific quality of the paper. The editor will inform you via email from Editorial Manager once a decision has been made about acceptance, revision or rejection.
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Homeopathy encourages the submission of manuscripts that have been deposited in an initial draft version in preprint repositories such as Research Square, arXiv, and medRxiv. Drafts of short conference abstracts or degree theses posted on the website of the degree-granting institution, and draft manuscripts deposited on authors' or institutional websites are also welcome. All other prior publication is forbidden.

During submission, authors should (1) note use of the preprint repository in the cover letter, (2) state what adjustments and/or updates the draft has undergone between deposition and submission, and (3) cite the preprint, including the DOI, as a reference in the manuscript.

After submission to the journal, and until a final decision has been made, authors are discouraged from depositing versions of their manuscript as preprints. Upon publication authors should add a link from the preprint to the published article. Twelve months after publication, authors can update the preprint with the accepted manuscript.

### Revision Procedure

- Should the editors decide that your article is potentially suitable but requires a revision, you will need to make the changes via a word-processing program and resubmit it electronically.
- Log-in to the submission system and find your article, which will be marked for revision.
- One way to make revisions to your manuscript is by enabling the Track Changes mode in Microsoft Word, which will automatically highlight and mark up revised text: please then submit both a marked-up copy and a clean copy of your revised manuscript to the submission system. Preferably, changes in the manuscript can be highlighted simply using a coloured font.
- Your original files will still be available after you upload your revised manuscript, so you must delete any redundant files before completing the submission.
- You will also be provided space in which to respond to the reviewers' and editors' comments. Please be as specific as possible in your response.

### Appeals

If, as an author, you believe that the editor has made an error in declining a paper, you may appeal within two weeks of the date of the 'Reject' decision letter. Please send your appeal letter to [rmathie@facultyofhomeopathy.org](mailto:rmathie@facultyofhomeopathy.org). In that letter, please state why you think the decision is mistaken, and set

out your specific responses to any peer reviewers' comments if relevant. The editor will consider the appeal and decide if a re-review is appropriate. The editor's consequent decision is final.

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## POLICY STATEMENTS

### Statement on Liability

The legislation on product liability makes increased demands on the duty of care to be exercised by authors of scientific research and medical publications. This applies in particular to papers and publications containing therapeutic directions or instructions and doses or dosage schedules. We therefore request you to examine with particular care – also in your own interest – the factual correctness of the contents of your manuscript once it has been copy-edited and returned to you in the form of page-proofs. The responsibility for the correctness of data and statements made in the manuscript rests entirely with the author.

### Definition of Authorship

Authorship credit should be based on criteria established by the [International Committee of Medical Journal Editors](#):

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the article or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

All contributors who do not meet the criteria for authorship as defined above should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a departmental chair who provided only general support. Authors should disclose whether they had any writing assistance and identify the entity that paid for this assistance.

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This journal adheres to the ethical standards described by the [Committee on Publication Ethics](#) and the [International Committee of Medical Journal Editors](#). Authors are expected to adhere to these standards.

Work on human beings published in *Homeopathy* will comply with the principles laid down in the [Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects](#), as amended by the 64th WMA General Assembly, Fortaleza, Brazil, 2013. The author should ensure that the work described has been carried out in accordance with [The International Code of Ethics of the World Medical Association](#). The manuscript must contain a statement that the work has been approved by the appropriate ethics committee or institutional review board and that subjects in the work gave their informed consent to participate.

### **Patient Permission Policy and Thieme GDPR Policy**

You must obtain a signed patient permission form for every patient whose recognizable photograph will be used. If you do not supply this, the identity of the patient must be obscured before the image is published; this could interfere with the instructive value of the photograph.

The personal rights of people who are recognizable on images must be protected. Please provide a written consent form for publication signed by every recognizable person. For persons under 18 years of age / persons supervised, please provide the signature of both parents / the legal guardian / supervisor. A suitable declaration of consent form can be obtained in our author lounge. Patient permission forms are available at [Thieme's Author Lounge](#).

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### **Reporting Clinical Trials**

All clinical trials submitted for publication in *Homeopathy* must include a CONSORT flow-chart (<http://www.consort-statement.org/>) and conform to the [RedHot Guidelines](#) which supplement CONSORT for homeopathy.

All clinical trials, including pilot or feasibility trials, must be registered in a public trials registry; state the registry and the registration number in the manuscript. For this purpose, a clinical trial is defined as any research project that prospectively assigns human subjects to intervention or comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. Studies designed for other purposes are exempt.

### **Reporting Basic Research in Homeopathy**

All homeopathic basic research submitted for publication in *Homeopathy* should conform to the [REHBaR guidelines](#) for reporting such experiments.

### **Clinical Case Reports (CARE and HOM-CASE)**

*Homeopathy* welcomes case reports and has adopted the guidelines for clinical case reporting (CARE) and its supplement (HOM-CASE) – see links in <http://www.equator-network.org/>. See also: van Haselen R, *Complement Ther Med* 2016;**25**:78-85. A completed copy of the HOM-CASE checklist must be submitted (as a Supplementary file) with the manuscript. As part of the HOM-CASE guidelines, an assessment of causal attribution using the Modified NARanjo Criteria for Homeopathy (MONARCH) must also be submitted within the manuscript – see Lamba CD et al, *Homeopathy* 2020;109:191-197.

Each reported case explicitly must have attained informed consent by the patient to have his/her anonymised data used for academic purposes including publication. An anonymised copy of the original signed consent form must be submitted with the manuscript; the form is for journal records only and will not be published with an accepted article.

All of the above guidelines apply also to a report comprising 2-5 clinical cases. A case series comprising more than 5 patients does not require the submission of a HOM-CASE checklist, assessments using the MONARCH inventory or copies of the signed consent forms.

### **Reporting Research that involves Experiments on Animals**

Animals used for scientific purposes:

The recognised standards are as detailed by the [EU Directive 2010/63/EU](#) for animal experiments. In accordance with this EU Directive, the editors require that the benefits potentially derived from research involving animals are significant in relation to any harm endured by the animals.

Authors must particularly ensure that their research complies with the commonly accepted '3Rs': (1) *Replacement* of animals by alternatives wherever possible; (2) *Reduction* in number of animals used; (3) *Refinement* of experimental conditions and procedures to minimise the harm to animals.

Papers will only be accepted for publication if authors can confirm that:

- The research conforms to the standards set out in [EU Directive 2010/63/EU for animal experiments](#) and there is clear indication in the manuscript that this is the case.
- The research proposal went through a process of ethical review prior to the study commencing; this must include a weighing of the likely adverse effects on the animals against the benefits likely to result from the work.
- The potential for application of the 3Rs was rigorously analysed prior to starting, and that every opportunity was taken during the course of the study to implement each of them; this includes analysis of alternative research strategies that could potentially be used to address the research question and that would not involve the use of animals.
- Animal husbandry and care was in accordance with EU Directive 2010/63/EU for animal experiments.
- All individuals involved with the care and use of animals were trained and skilled to an acceptable level of competency, with euthanasia carried out according to contemporary best practice.
- Appropriate anaesthesia and analgesia were used to minimise pain and distress, and humane end-points were defined and implemented where appropriate.

In its manuscripts for publication, *Homeopathy* endorses the ARRIVE guidelines ([www.nc3rs.org.uk/ARRIVE](http://www.nc3rs.org.uk/ARRIVE)) for reporting experiments using animals. These guidelines were developed as part of the National Centre for 3Rs' initiative to improve standards of reporting and ensure that the data from animal experiments can be fully evaluated and utilised. Authors must ensure compliance with the ARRIVE guidelines for publication through use of the *ARRIVE checklist*, which can be found at [www.nc3rs.org.uk/ARRIVEchecklist](http://www.nc3rs.org.uk/ARRIVEchecklist). A fully completed checklist, normally designated as a Supplementary file, must be submitted with the manuscript.

Authors must also include the following information in the Methods section of their manuscript:

- A detailed description of how each of the 3Rs has been addressed.
- Detailed justification for the use of animals in their research through analysis of the potential benefits and harms of the study. Here authors must describe how the benefits potentially derived from the research are significant in relation to any harm endured by the animals.
- A statement describing the ethical approval for experimentation, including the nature of the ethical review process and how the research complies with EU Directive 2010/63/EU. A copy of the original letter-headed ethics approval or certificate must be submitted (as a Supplementary file) with the manuscript.

#### Veterinary research:

For practice-based research in veterinary medicine on client-owned animals (i.e. clinical research that aims to improve the health and welfare of animals), the ethical approval required must be that of a national standard-setting veterinary authority (e.g. the Royal College of Veterinary Surgeons [RCVS] in the United Kingdom). As per RCVS guidelines, '*A pragmatic threshold for the need for formal ethical review is any study where a reasonable person would expect to obtain permission from the owners or keepers of an animal before including that animal in that study*' (<https://www.rcvs.org.uk/document-library/erp-research-proposal-application-guidelines/>). A copy of the original letter-headed ethics approval or certificate must be submitted (as a Supplementary file) with the manuscript.

#### Peer-review procedure for papers that report experiments on animals:

These papers will be subjected to standard scientific review as well as to specific ethics-related review; the standard review will not preclude the consideration also of animal research ethics. The ethical review will be conducted by a specialist designated member of the journal's Editorial Board; clarification about matters of experimental research ethics will be sought from the original authors when required. Papers that do not comply with the required ethics standards will be rejected, and without the option for re-submission of the same research report.

## Further Reading

Further general Thieme journal policies can be found [here](#). These include:

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