

Instructions for authors

INTRODUCTION

The *British Journal of Psychiatry* is published monthly by The Royal College of Psychiatrists. The *Journal* publishes original work in all fields of psychiatry. Manuscripts for publication should be submitted online via <http://submit-bjp.rcpsych.org>.

All published articles are peer reviewed. Contributions are accepted for publication on the condition that their substance has not been published or submitted for publication elsewhere. Authors submitting papers to the *Journal* (serially or otherwise) with a common theme or using data derived from the same sample (or a subset thereof) must send details of all relevant previous publications and simultaneous submissions.

The *Journal* is not responsible for statements made by contributors. Material in the *Journal* does not necessarily reflect the views of the Editor or of The Royal College of Psychiatrists.

Manuscripts accepted for publication are copy-edited to improve readability and to ensure conformity with house style.

ONLINE SUBMISSION

Manuscripts for publication must be submitted online at <http://submit-bjp.rcpsych.org>. A unique account will be created for each contributor using his or her email address as identification. (Note for contributors with more than one email account: please ensure you use the same email address whenever logging on to the manuscript submission website.) Contributors may track the progress of their submissions at any time via this website. For assistance with online submission, please email bjp@rcpsych.ac.uk or telephone +44 (0)20 7235 8857.

A cover letter should be included with the submission explaining why you consider the submitted article suitable for publication in the *Journal*.

FAST-TRACK ASSESSMENT

Authors have the option of submitting articles for fast-track assessment. Those wishing to take this route should state this

in the first or second sentence of their cover letter, together with the reasons for rapid assessment. A decision whether to approve the fast-track route will be made within 10 days of submission; those papers that are not selected for this route will be assessed in the normal way unless the authors state specifically that they want fast-track assessment only. All papers approved for the fast-track route will be assessed within 4 weeks of submission.

TITLE AND AUTHORS

The title should be brief and relevant. If necessary, a subtitle may be used to clarify the main title. Titles should not announce the results of articles and, except in editorials, they should not be phrased as questions.

All authors must sign the copyright transfer and publication agreement, which can be downloaded from <http://submit-bjp.rcpsych.org> once a manuscript has been accepted. One of the authors should be designated to receive correspondence and proofs, and the appropriate address indicated. This author must take responsibility for keeping all other named authors informed of the paper's progress. The contribution of each author to the paper must be stated at the end of the article. Authorship credit should be based only on substantial contribution to:

- conception and design, or analysis and interpretation of data
- drafting the article or revising it critically for important intellectual content
- and final approval of the version to be published.

All these conditions must be met. Participation solely in the acquisition of funding or the collection of data does not justify authorship. In addition, the corresponding author must ensure that there is no one else who fulfils the criteria but has not been included as an author.

The *Journal* does not consider people thanked in the Acknowledgements or listed as members of a study group on whose behalf a paper is submitted to be authors. Only those who are listed as authors on the title page of the manuscript and (on

acceptance for publication) whose signed copyright agreement has been obtained, qualify as authors. It is the responsibility of the corresponding author to ensure that authorship is agreed among the study's workers, contributors of additional data and other interested parties, before submission of the manuscript.

The names of the authors should appear on the title page in the form that is wished for publication, and the names, degrees, affiliations and full addresses at the time the work described in the paper was carried out should be given at the end of the paper.

DECLARATION OF INTEREST

All submissions to the *Journal* (including editorials and letters to the Editor) require a declaration of interest. This should list fees and grants from, employment by, consultancy for, shared ownership in, or any close relationship with, an organisation whose interests, financial or otherwise, may be affected by the publication of the paper. This pertains to all the authors of the study.

STRUCTURE OF MANUSCRIPTS

Papers

A structured summary not exceeding 150 words should be given at the beginning of the article, incorporating the following headings: Background; Aims; Method; Results; Conclusions; Declaration of interest. The summary is a crucial part of the paper and authors are urged to devote some care to ensuring that all the important findings are within the word limit.

Introductions should normally be no more than one paragraph (up to 150 words). This should be followed by Method, Results and Discussion sections. Use of subheadings is encouraged, particularly in Discussion sections. A separate Conclusions section is not required.

The article should normally be between 3000 and 5000 words in length (excluding references, tables and figure legends) and include no more than 20 essential references beyond those describing statistical procedures, psychometric instruments and diagnostic guidelines used in the study.

References exceeding 20 essential ones may be reduced in number. Use of the option of including additional material in the online version of the *Journal* is encouraged; this in particular applies to large tables of data that may be of value to future researchers (see Online data supplements, below).

Three clinical implications and three limitations of the study should be included as brief bullet points at the end of the paper.

Review articles

Review articles should be structured in the same way as regular papers, but the restriction on the number of references does not apply. The procedure for the publication of systematic reviews is the preferred format.

Short reports

Short reports require an unstructured summary of one paragraph, not exceeding 100 words. The report should not exceed 1200 words (excluding references, tables and figure legends) and contain no more than one figure or table and up to 10 essential references beyond those describing statistical procedures, psychometric instruments and diagnostic guidelines used in the study. Short reports will not exceed two printed pages of the *Journal* and authors may be required to edit their report at proof stage to conform to this requirement. This may be necessary even if the report does not exceed 1200 words if the figure or table is unduly large.

Editorials

Editorials require an unstructured summary of one paragraph, not exceeding 50 words. Editorials should not exceed 1500 words and may contain no more than one figure or table and up to 10 essential references. Editorials may only exceed two printed pages in length at the Editor's discretion.

REFERENCES

References should be listed alphabetically at the end of the paper, the titles of journals being given in full. Reference lists not in the correct style will be returned to the author for correction.

Authors should check that the text references and list are in agreement as regards dates and spelling of names. The text reference should be in the form '(Smith *et al*, 1971)' or 'Smith *et al* (1971) showed that

. . .'. The reference list should follow the style example below (note that *et al* is used after three authors have been listed for a work by four or more). Documents published on the internet should be treated in the same way as printed documents but with the full URL included at the end of the reference. If a DOI exists, this should be included.

Abraham, H. D. (1974) Do psychostimulants kindle panic disorder? *American Journal of Psychiatry*, **143**, 1627–1628.

American Psychiatric Association (1980) *Diagnostic and Statistical Manual of Mental Disorders* (3rd edn) (DSM–III). Washington, DC: APA.

Aylard, P. R., Gooding, J. H., McKenna, P. S., et al (1987) A validation study of three anxiety and depression self assessment scales. *Psychosomatic Research*, **1**, 261–268.

De Rougemont, D. (1950) *Passion and Society* (trans. M. Belgion). London: Faber and Faber.

Fisher, M. (1990) *Personal Love*. London: Duckworth.

Flynn, C. H. (1987) Defoe's idea of conduct: ideological fictions and fictional reality. In *Ideology of Conduct* (eds N. Armstrong & L. Tenenhouse), pp. 73–95. London: Methuen.

Jones, E. (1937) Jealousy. In *Papers on Psychoanalysis*, pp. 469–485. London: Baillière Tindall.

Mayor, S. (2003) Value of prescribing heroin is uncertain. *BMJ*, **327**, 638, doi:10.1136/bmj.327.7416.638-b

Mullen, P. E. (1990a) Morbid jealousy and the delusion of infidelity. In *Principles and Practice of Forensic Psychiatry* (eds R. Bluglass & P. Bowden), pp. 823–834. London: Churchill Livingstone.

Mullen, P. E. (1990b) A phenomenology of jealousy. *Australian and New Zealand Journal of Psychiatry*, **24**, 17–28.

Pharmaceutical Research and Manufacturers of America (PhRMA) (2005) *PhRMA Guiding Principles on Direct to Consumer Advertisements About Prescription Medicines*. Washington, DC: PhRMA. <http://www.phrma.org/publications/policy//2005-08-02.1194.pdf>

Personal communications need written authorisation (email is acceptable); they should not be included in the reference list. No other citation of unpublished work, including unpublished conference presentations, is permissible.

TABLES

Each table should be submitted on a separate sheet. Tables should be numbered and have an appropriate heading. The tables should be mentioned in the text but must not duplicate information in the text. The heading of the table, together with any footnotes or comments, should be self-explanatory. The desired position of the table in the manuscript should be indicated. Do not tabulate lists, which should be incorporated into the text, where, if necessary, they may be displayed.

Authors must obtain permission from the original publisher if they intend to use tables from other sources, and due

acknowledgement should be made in a footnote to the table.

FIGURES

Figures should be clearly numbered and include an explanatory legend. Avoid cluttering figures with explanatory text, which is better incorporated succinctly in the legend. 3-D effects should be avoided. Lettering should be parallel to the axes. Units must be clearly indicated and should be presented in the form quantity (unit) (note: 'litre' should be spelled out in full unless modified to ml, dl, etc.). All figures should be mentioned in the text and the desired position of the figure in the manuscript should be indicated.

Authors must obtain permission from the original publisher if they intend to use figures from other sources, and due acknowledgement should be made in the legend.

Colour figures may be reproduced if authors are able to cover the costs.

STATISTICS

Methods of statistical analysis should be described in language that is comprehensible to the numerate psychiatrist as well as the medical statistician. Particular attention should be paid to clear description of study designs and objectives, and evidence that the statistical procedures used were both appropriate for the analysis and correctly interpreted. The statistical analyses should be planned before data are collected and full explanations given for any *post hoc* analyses carried out. The value of test statistics used (e.g. *t*, *F*-ratio) should be given as well as their significance levels so that their derivation can be understood. Standard deviations and errors should not be reported as \pm , but should be specified and referred to in parentheses.

Trends should not be reported unless they have been supported by appropriate statistical analyses for trends.

The use of percentages to report results from small samples is discouraged, other than where this facilitates comparisons. The number of decimal places to which numbers are given should reflect the accuracy of the determination, and estimates of error should be given for statistics.

A brief and useful introduction to the place of confidence intervals is given by Gardner & Altman (1990, *British Journal*

of *Psychiatry*, 156, 472–474). Use of these is encouraged but not mandatory.

Authors are encouraged to include estimates of statistical power where appropriate. To report a difference as being statistically significant is generally insufficient, and comment should be made about the magnitude and direction of change.

RANDOMISED CONTROLLED TRIALS

The *Journal* recommends to authors the CONSORT guidelines (1996, *Journal of the American Medical Association*, 276, 637–639) and their basis (2001, *Annals of Internal Medicine*, 134, 663–694) in relation to the reporting of randomised controlled clinical trials; also recommended is their extension to cluster randomised controlled trials (2004, *BMJ*, 328, 702–708). In particular, a flow chart illustrating the progress of subjects through the trial (CONSORT diagram) must be included.

QUALITATIVE RESEARCH

The *Journal* welcomes submissions of reports of studies that have used qualitative research methods. These may, for example, be based on fieldwork notes, interview transcripts, recordings or documentary analysis. Such studies may be judged using criteria that differ from those used to judge reports based on statistical evidence. The following checklist (adapted, with permission, from the *BMJ*'s guidelines) should serve as a useful guide.

- Is the research question clearly defined?
- Are the theoretical framework and methods used at every stage of the research made explicit?
- Is the context clearly described?
- Is the sampling strategy clearly described and justified?
- Is the sampling strategy theoretically comprehensive to ensure the generalisability of the conceptual analysis (diverse range of individuals and settings, for example)?
- How was the fieldwork undertaken? Is it described in detail?
- Could the evidence (fieldwork notes, interview transcripts, recordings, documentary analysis, etc.) be inspected

independently by others? If relevant, could the process of transcription be independently inspected?

- Are the procedures for data analysis clearly described and theoretically justified? Do they relate to the original research questions?
- How were themes and concepts identified from the data?
- Was the analysis repeated by more than one researcher to ensure reliability?
- Is quantitative evidence used to test qualitative conclusions where appropriate?
- Have observations that might have contradicted or modified the analysis been sought out and reported?
- Is sufficient of the original evidence presented systematically in the written account to satisfy the sceptical reader of the relation between the interpretation and the evidence (for example, were quotations numbered and sources given)?

GENERAL

Abbreviations, units and footnotes

All abbreviations must be spelt out on first usage and only widely recognised abbreviations will be permitted.

The generic names of drugs should be used.

Generally, SI units should be used; where they are not, the SI equivalent should be included in parentheses. Units should not use indices: i.e. report g/ml, not gml⁻¹.

The use of notes separate to the text should generally be avoided, whether they be footnotes or a separate section at the end of a paper. A footnote to the first page may, however, be included to give some general information concerning the paper.

Materials, equipment and software

The source of any compounds not yet available on general prescription should be indicated. The version number (or release date) and manufacturer of software used, and the platform on which it is operated (PC, Mac, UNIX etc.), should be stated. The manufacturer, manufacturer's location and product identification should be included when describing equipment central to a study (e.g. scanning equipment used in an imaging study).

Case reports and consent

If an individual is described, his or her consent must be obtained and submitted with the manuscript. Our consent form can be downloaded from <http://www.rcpsych.ac.uk/publications/bjpConsentForm.pdf>. The individual should read the report before submission. Where the individual is not able to give informed consent, it should be obtained from a legal representative or other authorised person. If it is not possible for informed consent to be obtained, the report can be published only if all details that would enable any reader (including the individual or anyone else) to identify the person are omitted. Merely altering some details, such as age and location, is not sufficient to ensure that a person's confidentiality is maintained. Contributors should be aware of the risk of complaint by individuals in respect of defamation and breach of confidentiality, and where concerned should seek advice. In general, case studies are published in the *Journal* only if the authors can present evidence that the case report is of fundamental significance and it is unlikely that the scientific value of the communication could be achieved using any other methodology.

Online data supplements

Material related to a paper but unsuitable for publication in the printed journal (e.g. very large tables) may be published as a data supplement to the online *Journal* at the Editor's discretion. For large volumes of material, charges may apply.

PROOFS

A proof will be sent to the corresponding author of an article. Offprints, which are prepared at the same time as the *Journal* is printed, should be ordered when the proof is returned to the Editor. Offprints are despatched up to 6 weeks after publication.

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'This is an author-produced electronic version of an article accepted for publication in the *British*

Journal of Psychiatry. The definitive publisher-authenticated version is available online at <http://bjp.rcpsych.org>.'

LETTERS TO THE EDITOR

Letters should not exceed 350 words. They will be edited for clarity and conformity to *Journal* style and may be shortened. There should be no more than five references. Proofs will not be sent to authors. Letters describing original research may be peer-reviewed under the moderation of the Correspondence Editor. If an individual is described, his or her consent should be obtained and submitted with the manuscript (see above). Letters must include a 'Declaration of interest' (see above), to be published at the discretion of the

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