

EBioMedicine is a gold open-access journal dedicated to publishing original research that illuminates, or aims to modify, disease pathways and mechanisms—with the goal of advancing our knowledge in any biomedical discipline with relevance to human health. We publish papers investigating the basic determinants of human health and disease, the discovery and characterisation of new therapeutic targets and treatments, and the identification of biomarkers and diagnostic tools which may help researchers and clinicians better understand and monitor disease. *EBioMedicine* covers the whole spectrum of biomedical research, from in vitro and preclinical studies with clear human relevance, through to proof-of-concept studies and clinical trials. The journal will also publish relevant reviews, commentaries and opinion pieces. We aspire to catalyse dialogue and collaboration between basic scientists, clinical researchers and healthcare professionals, enhance the accessibility and applicability of basic research findings for health professionals, and promote a better understanding of clinical challenges for biomedical researchers.

Manuscript preparation must adhere to relevant reporting standards on EQUATOR network website ([Enhancing the Quality and Transparency of Health Research](#)). Further details on the different sections of *EBioMedicine*, and how to submit to the journal, are provided below. If you require further clarification, the journal's editorial staff will be pleased to help (ebiom@lancet.com).

Manuscripts must be solely the work of the author(s) stated, must not have been previously published elsewhere, and must not be under consideration by another journal. *The Lancet* journals are signatories of the [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#), issued by the International Committee of Medical Journal Editors (ICMJE Recommendations), and to the Committee on Publication Ethics (COPE) code of conduct for editors. We follow [COPE's guidelines](#).

How to submit your paper

Manuscript submission

Manuscript submission to all *Lancet* journals is free. Payment of article processing fees is made after acceptance (see Article Processing Charges section). Manuscripts should be submitted online via the *EBioMedicine's* online submission and peer review website (known as EES) at <http://ees.elsevier.com/ebiom>

- Simply log on to EES and follow the on-screen instructions for all submissions
- If you have not used EES before, you will need to register first. In EES, the corresponding author is the person who enters the manuscript details and uploads the submission files
- Inclusion of illustrations (photographs, graphs, diagrams, etc) is a prerequisite for publication. Submission of original and editable artwork files is encouraged. Digital photography files should have a resolution of at least 300 dpi and be at least 107 mm wide. Before and after images should be taken with the same intensity, direction, and colour of light
- In almost all cases, if you have a finished manuscript, you should submit it, rather than contacting *EBioMedicine* to enquire whether an unseen manuscript is likely to be accepted. Unless you have been asked by the Editor to submit by email, you should use the online system for all types of submission
- If you have any technical problems or questions, please contact our dedicated customer support:

For the Americas: +1 888 8347287 (09:00 to 17:00 central standard time)

For Asia and Pacific: +81 3 55615032 (09:30 to 17:30 Japan standard time)

For Europe and rest of the world: +44 1865 843577 (08:30 to 17:00 GMT)

For Chinese-speaking customers: +86 10 85208780 (9:00 to 17:30 China standard time)

For Spanish-speaking customers: +34 932 406176 (09:00 to 17:00 GMT)

For French-speaking customers: +33 171 165608 (09:00 to 17:00 GMT)

Email: ebiom@lancet.com

First submissions to *EBioMedicine* should include:

- 1 Covering letter
- 2 Manuscript including tables and panels
- 3 Figures
- 4 Author statement form (see next section)
- 5 Declaration of interests and source of funding statements (Conflict of Interest statement, see next section)
- 6 In-press papers—one copy of each with acceptance letters
- 7 Protocols and CONSORT details for randomised controlled trials or relevant reporting details for non-RCT studies, such as ARRIVE checklist for animal studies. Please see full list of reporting guidelines in Research papers section, below.
- 8 We encourage disclosure of correspondence from other journals and reviewers, if previously submitted, and we might contact relevant editors of such journals
- 9 Research in context and Highlights statements (see below), for all primary Research papers

Covering letter

- Please upload a covering letter with your submission
- Use the covering letter to explain why your paper should be published in *EBioMedicine*. In the letter, please briefly describe any relevant literature to provide context for the work, as well as a summary of the main findings of the paper—with a clear indication of how the work advances the field. In particular, a brief description of how the study relates to human health, as well as the translationally-relevant insights provided by the work, can be helpful

Your paper, your way

We differentiate between the requirements for new and revised submissions. You may choose to submit your manuscript (text, figures and tables) as a single Word or PDF file to be used in the refereeing process. Figures must be of high enough quality and resolution for refereeing, and all manuscripts must contain essential elements needed to evaluate a manuscript

(Abstract, Keywords, Introduction, Materials & Methods, Results, Conclusions, Artwork and Tables with Captions, and References). When a paper is at the revision stage, or before acceptance, the authors will be requested to put the paper into a standardised *EBioMedicine* format and layout, and provide any remaining items and forms required for the publication of the article.

Statements, permissions, and signatures

Authors and contributors

- Designated authors should meet all four criteria for authorship in the ICMJE Recommendations
- All authors, and all contributors (including medical writers and editors), should specify their individual contributions at the end of the main text within the manuscript (in addition to the Author statements form, below)

Forms and signatures

For Commentaries, we require you to upload your forms at submission. For original Research papers, if forms have not been included in the initial submission, we will request them after peer review. The following signed statements are a pre-requisite for acceptance and publication in *EBioMedicine*:

- [Authors' contributions](#) and signatures (Author statements form). *EBioMedicine* will not publish any paper unless we have the signatures of all authors
- [Conflicts of interest statements](#), see guidelines below
- Statements of role, if any, of medical writer or editor
- Acknowledgments—written consent of cited individual
- Personal communications—written consent of cited individual
- Use of copyright-protected material—signed permission statements from author and publisher

These statements can be scanned and submitted electronically with your submission. Please note that *The Lancet* journals will accept hand-signed and electronic (typewritten) signatures.

Conflicts of interest (COI) statements

A conflict of interest exists when professional judgement concerning a primary interest (such as patients' welfare or validity of research) may be influenced by a secondary interest (such as financial gain). Financial relationships are easily identifiable, but conflicts can also occur because of personal relationships or rivalries, academic competition, or intellectual beliefs. A conflict can be actual or potential, and full disclosure to the Editor is the safest course. Failure to disclose conflicts might lead to publication of a correction or even to retraction. All submissions to *EBioMedicine* must include disclosure of all relationships that could be viewed as presenting a potential or actual conflict of interest (see [Lancet 2001; 358: 854–56](#) and [Lancet 2003; 361: 8–9](#)). The Editor may use such information as a basis for editorial decisions, and will publish such disclosures. Agreements between authors and study sponsors that interfere with authors' access to all of a study's data, or that interfere with their ability to analyse and interpret the data and to prepare and publish manuscripts independently, may represent conflicts of interest, and should be avoided.

- At the end of the text, under a subheading "Declaration of interests", all authors must disclose any financial and personal relationships with other people or organisations that could

inappropriately influence (bias) their work. Examples of financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patents or patent applications, and travel grants, all within 3 years of beginning the work submitted. If there are no conflicts of interest, authors should state that none exist

- All authors are required to provide a Conflict of Interest Statement and should complete a standard form, which is available at <http://www.thelancet.com/for-authors/forms#icmje-coi>. The form has been modified by the ICMJE following consultation with authors and editors. Further information is available in a joint ICMJE statement published on July 1, 2010. For more information see [Lancet 2009; 374: 1395–96](#).
- For Commentary, *EBioMedicine* will not publish if an author, within the past 3 years, and with a relevant company or competitor, has any stocks or shares, equity, a contract of employment, or a named position on a company board; or has been asked by any organisation other than *EBioMedicine* to write, be named on, or to submit the paper (see [Lancet 2004; 363: 2–3](#))

Role of the funding source

- All sources of funding should be declared as an acknowledgment at the end of the text
- After the "Acknowledgements" section, authors must describe the role of the study sponsor(s), if any, in study design; in the collection, analysis, and interpretation of data; in the writing of the report; and in the decision to submit the paper for publication
- If the funding source had no such involvement, the authors should state this
- The corresponding author should confirm that he or she had full access to all the data in the study and had final responsibility for the decision to submit for publication

Role of medical writer or editor

- If a medical writer or editor was involved in the creation of your manuscript, we need a signed statement from the corresponding author to include their name and information about funding of this person
- This information should be added to the Acknowledgments or Contributors section
- We require signed statements from any medical writers or editors declaring that they have given permission to be named as an author, as a contributor, or in the Acknowledgments section

Patient and other consents

- Appropriate written consents, permissions, and releases must be obtained where you wish to include any case details, personal information, and/or images of patients or other individuals in *The Lancet* journals in order to comply with all applicable laws and regulations concerning privacy and/or security of personal information. Studies on patients or volunteers need approval from an ethics committee and informed consent from participants. These should be documented in your paper.
- Since the consent form needs to comply with the relevant legal requirements of your particular jurisdiction, we do not provide

sample forms; this is your responsibility. Your affiliated institution should be able to provide an appropriate form.

- For the purposes of publishing in *The Lancet* journals, a [consent](#), permission, or release should include, without limitation, publication in all formats (including print, electronic, and websites), in sublicensed and reprinted versions (including translations), and in other works and products.
- To respect your patient's and any other individual's privacy, **please do not send signed forms to EBioMedicine**. Please instead complete the patient consent section of the [Author statements](#) while retaining copies of the signed forms in the event they should be needed.
- If consent, permission, or release is made subject to any conditions, *EBioMedicine* must be made aware in writing of all such conditions before publication.
- For more information about our policy, please visit <https://www.elsevier.com/about/our-business/policies/patient-consent>.

Manuscript types and formats

Please ensure that all submissions to *EBioMedicine* follows the guidelines provided for each article type. For instruction on how to format the text of your paper, including tables, figures, panels, and references, please see our [Formatting guidelines](#).

Research papers

Article section order

All accepted articles must conform to the following order:

- Title page (article title, full authorship and affiliations, corresponding author contact details)
- Abstract
- Keywords (4-6 keywords)
- Research in Context section
- Introduction
- Materials and Methods
- Results
- Discussion (please make sure Results and Discussion are separate sections, not combined)
- Acknowledgements
- Funding Sources
- Declaration of Interests
- Author Contributions
- References
- Figure Legends

Title page

Titles should be informative but not excessively detailed or heavy on jargon. Please avoid abbreviations in title. Please either define functionally (eg, "the influenza viral HA protein") or spell out ("influenza viral hemagglutinin"). A brief title, author name(s), preferred degree (one only), affiliation(s), and full address(es) of the authors must be included. The name and address of the corresponding author should be separately and clearly indicated with email and telephone details.

Abstract

Include an abstract (semi-structured summary), with five paragraphs

(Background, Methods, Findings, Interpretation, and Funding), not exceeding 250 words. Our electronic submission system will ask you to copy and paste this section at the "Submit Abstract" stage

For randomised trials, the abstract should adhere to CONSORT extensions: abstracts (see [Lancet 2008; 371: 281-83](#))

When reporting Kaplan-Meier survival data, at each timepoint, authors must include numbers at risk, and are encouraged to include the number of censored patients

For intervention studies, the abstract should include the primary outcome expressed as the difference between groups with a confidence interval on that difference (absolute differences are more useful than relative ones). Secondary outcomes can be included as long as they are clearly marked as secondary and all such outcomes are reported

Keywords

Please provide a short list of keywords

Research in context

All research papers (including systematic reviews/meta-analyses) submitted to *EBioMedicine* must include a panel putting their research into context with previous work in the format outlined below (see [Lancet 2014; 384: 2176-77](#), for the original rationale). This panel should not contain references. Editors will use this information at the first assessment stage and peer reviewers will be specifically asked to check the content and accuracy. This should contain a full description and discussion of the context. This should be written not only for scientists and clinicians, but also for curious members of the general public. Therefore, please use clear and simple language, avoiding jargon and abbreviations.

Research in context

Evidence before this study

This section should include a description of all the evidence that the authors considered before undertaking this study. Authors should briefly state: the sources (databases, journal or book reference lists, etc) searched; the criteria used to include or exclude studies (including the exact start and end dates of the search), which should not be limited to English language publications; the search terms used; the quality (risk of bias) of that evidence; and the pooled estimate derived from meta-analysis of the evidence, if appropriate.

Added value of this study

Authors should describe here how their findings add value to the existing evidence.

Implications of all the available evidence

Authors should state the implications for practice or policy and future research of their study combined with existing evidence. In particular, for *EBioMedicine*, please describe why the findings are relevant to human health (for the more basic research papers), and/or how the findings can help improve our understanding of the disease mechanisms (for the more clinical papers).

Research in context panels should not contain references; key studies mentioned here should be referenced in the main text.

Introduction

Please include a clear explanation for the rationale of the study, and sufficient scientific background information. The general reader (i.e., non-specialist) should have a clear sense for why the study was undertaken, and how the current study advances translational goals relative to the published literature. Define all abbreviations first time even if they have been defined in the Abstract.

Materials and Methods

Provide sufficient detail to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarised, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.

Reporting Standards

Interventional studies:

We require the registration of all interventional trials, whether early or late phase, in a primary register that participates in WHO’s International Clinical Trial Registry Platform (see [Lancet 2007; 369: 1909–11](#)) or in [ClinicalTrials.gov](#), in accord with ICMJE recommendations. We also encourage full public disclosure of the minimum 20-item trial registration dataset at the time of registration and before recruitment of the first participant (see [Lancet 2006; 367: 1631–35](#)). The registry must be independent of for-profit interest

Reports of trials must conform to [CONSORT 2010 guidelines](#) and should be submitted with their protocols

All reports of randomised trials should include a section entitled Randomisation and masking, within the Methods section. Please refer to The Lancet’s [formatting guidelines](#) for randomised trials

Cluster-randomised trials must be reported according to [CONSORT extended guidelines](#)

Randomised trials that report harms must be described according to [extended CONSORT guidelines](#)

Non-interventional studies:

Please carefully follow the linked guidelines of reporting standards if your study falls within one of the following categories, and fill in and return the checklist(s) where applicable:

Animal preclinical studies	ARRIVE
Observational cohort and case-control studies*	STROBE
Observational studies using routinely collected health data*	RECORD
Systematic reviews and meta-analyses	PRISMA
Genetic association studies	STREGA
Genetic risk prediction studies	GRIPS
Diagnostic/prognostic studies	STARD and TRIPOD
Case reports	CARE
Health economic evaluation	CHEERS
Health quality improvement	SQUIRE
Biospecimens	BRISQ
Microarrays	MIAME

* We encourage the registration of all observational studies on a WHO-compliant registry (see [Lancet 2010; 375: 348](#))

For more information on reporting standards, please visit: <http://www.equator-network.org/>

Replicates

Authors should report how often each experiment was performed and whether the results were substantiated by repetition under a range of conditions. Sufficient information about sample collection must be provided to distinguish between independent biological data points and technical replicates.

Statistics

Statistics should be fully reported in the paper, including the statistical test used, exact value of N, definition of centre, dispersion and precision measures (e.g., mean, median, SD, SEM, confidence intervals).

Sample-size estimation

Authors should state whether an appropriate sample size was computed when the study was being designed and include the statistical method of computation. If no power analysis was used, include how the sample size was determined.

Randomisation

Authors should state whether the samples were randomised and specify method of randomisation, for all experiments.

Blinding

Authors should state whether experimenters were blind to group assignment and outcome assessment, for all experiments.

Inclusion and exclusion criteria: authors should clearly state the criteria that were used for exclusion of any data or subjects. Include any similar experimental results that were omitted from the reporting for any reason, especially if the results do not support the main findings of the study. Describe any outcomes or conditions that were measured or used and are not reported in the results section.

Ethics statement

Include a statement to indicate approval by appropriate ethics committee on animal and human experimentations.

Reagent identification

In an effort to support reproducibility, we request that you please—whenever available—include a Research Resource Identifier (RRID) for any biological reagents used in the study. These include, for example, antibodies, genetically modified organisms and cell lines. To find an RRID, please visit <https://scicrunch.org/resources> and enter your search term(s) there. For search tips and help, contact rii-help@scicrunch.org. Once you have located an RRID, please insert “RRID:” plus the identifier in the appropriate location in the manuscript. For example:

- Antibodies: “Sections were stained with a rabbit polyclonal antibody against ERK1 (Abgent Cat# AP7251E, RRID: AB_2140114).”
- Genetically modified organisms: “Subjects in this study were Fgf9Eks/Fgf9+ mice (RRID: MGI_3840442)...”

Data deposition and materials sharing

EBioMedicine requires and enables you to share data that supports your research publication and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, we also encourage you to share your protocols, models, reagents and other useful materials related to the project, to qualified researchers for their own use upon written request. Datasets must be made freely available to readers from the date of publication and must be provided to editors and peer reviewers at submission for the purposes of evaluating the manuscript. If there are restrictions to the availability of any materials or data, these must be disclosed in the cover letter and in the Methods at the time of submission.

Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers one-click access to underlying data that give them a better understanding of the research described. [Mendeley Data](#) is a secure online repository for research data, permitting archiving of any file type and assigning a permanent and unique digital object identifier (DOI) so that the files can be easily referenced. If authors wish to share their supporting data, and have not already made alternative arrangements, a Mendeley DOI can be referred to in a section entitled "Data sharing" at the end of the Methods section. If authors have already deposited their data in another repository, or have made other arrangements for data to be shared (e.g., by means of an adjudication process or contacting the authors), they should use this section to elaborate.

For [supported data repositories](#), including Mendeley Data, a repository banner will automatically appear next to your published article on ScienceDirect.

Newly described data sets must be deposited to a public repository, and accession numbers must be clearly identified under a separate subheading at the end of the Methods section. Please refer to relevant database identifiers using the following format in your article: "Database:xxxx" for single accession numbers and "Database:xxxx, yyyy, zzzz" for multiple accession numbers (e.g., "Genbank: NM_000492"; "GEO: GSE6364"; "PDB: 1TUP, 1KW4, 3H5X"). Examples of appropriate public repositories are:

- DNA and RNA sequences: [GenBank](#), [EMBL-EBI](#), [DDBJ](#)
- Protein sequence: [EMBL-EBI](#), [Protein Data Bank](#)
- Microarray and deep sequencing data: [GEO](#), [ArrayExpress](#)
- SNPs and CNVs: [dbSNP](#), [DGVa](#), [dbVAR](#)
- Genotypes and phenotypes: [dbGaP](#)
- Proteomics data: [PRIDE](#), [PeptideAtlas](#)
- Protein interaction data: [IMEx consortium of databases](#)
- Chemical compound: [PubChem](#)
- Brain imaging data: [OpenfMRI repository](#), [Neurovault repository](#)

Results

Subheadings should be fewer than 100 characters including spaces. Please describe the experiments clearly and what each figure shows. All figures and tables must be called out in sequential order.

Tables should be provided in an editable Word or Excel format (so individual numbers/texts can be copied). Please ensure that each table fits within one A4-sized page.

Discussion

Please include discussion on limitations, generalisability, and interpretation of results. The Discussion should be no longer than 5 pages of A4 paper. Please do not include subheadings in the Discussion, and please do not repeat a description of the results.

Please conclude with a brief paragraph highlighting main points of study, including a statement regarding the translational value of the work. As with the Introduction and Abstract, please make sure the language is clear to the general audience, including non-specialists.

Data sharing

From July 1, 2018, all submitted reports of clinical trials must contain a data sharing statement, to be included at the end of the manuscript. Data sharing statements must indicate:

- Whether data collected for the study, including individual participant data and a data dictionary defining each field in the set, will be made available to others;
- What data will be made available (deidentified participant data, participant data with identifiers, data dictionary, or other specified data set);
- Whether additional, related documents will be available (eg, study protocol, statistical analysis plan, informed consent form);
- When these data will be available (beginning and end date, or "with publication", as applicable);
- Where the data will be made available (including complete URLs or email addresses if relevant);
- By what access criteria data will be shared (including with whom, for what types of analyses, by what mechanism – eg, with or without investigator support, after approval of a proposal, with a signed data access agreement - or any additional restrictions).

See [table](#) for examples. Clinical trials that begin enrolling participants on or after Jan 1, 2019, must include a data sharing plan in the trial's registration. If the data sharing plan changes after registration, this should be reflected in the statement submitted and published, and updated in the registry record. For reports of research other than clinical trials, data sharing statements are encouraged but not required. [Mendeley Data](#) is a secure online repository for research data, permitting archiving of any file type and assigning a permanent and unique digital object identifier (DOI) so that the files can be easily referenced. If authors wish to share their supporting data, and have not already made alternative arrangements, a Mendeley DOI can be referred to in the data sharing statement.

Acknowledgements

Acknowledgements should be brief, and should not include thanks to anonymous referees and editors, extraneous words, or fulsome comments. Acknowledgements can contain grant and contribution numbers.

Funding sources

All sources of funding should be declared at the end of the text. After the "Acknowledgements" section, authors must describe the role of the study sponsor(s), if any, in study design; in the collection,

analysis, and interpretation of data; in the writing of the report; and in the decision to submit the paper for publication. If the funding source had no such involvement, the authors should state this.

Declarations of interests

At the end of the text, under a subheading “Declaration of interests”, all authors must disclose any financial and personal relationships with other people or organisations that could inappropriately influence (bias) their work. Examples of financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patents or patent applications, and travel grants, all within 3 years of beginning the work submitted. If there are no conflicts of interest, authors should state that none exist

Author contributions

Please list here the contribution each author made to the manuscript—eg, literature search, figures, study design, data collection, data analysis, data interpretation, writing etc. If all authors contributed equally, please state this. The information provided here must match that of the [Author statements form](#).

References

All references must be in Vancouver style formatting. Please see more detailed information below in Formatting section.

Figure legends

Please provide titles for all figures. Legends should briefly describe the experiment and clearly describe the display item. There should be no discussion or statement (conclusion) about the results. Each part of the display item should be clearly defined and explained, e.g., numbers in the quadrant indicate the percentage of cells. Statistical tests should be clear. Error bars should be defined. The number of independent experiments must be indicated. Please be sure to include number of subjects used for each experiment.

General Considerations

Patent Applications

If you intend to file a patent related to the findings presented in this manuscript, please ensure your patent application is submitted as soon as possible, in some cases before submitting the manuscript. Please check with the patent agencies within your institute to determine specific timelines for applications within your country. Please note that if/once a paper is accepted by the Editor, the accepted (uncorrected proof) version will appear online fairly quickly—usually within 48 hours of acceptance. This online version is accessible to the public, and may affect patent applications in certain countries.

All Research papers should, as relevant:

- Use the SI system of units and the recommended international non-proprietary name (rINN) for drug names. Ensure that the dose, route, and frequency of administration of any drug you mention are correct
- Compound structures for all compounds used in the manuscript must be provided, per journal policy. Please either refer to published chemical structure, or provide complete

geometric representation of the molecular structure in the manuscript, if referring to a new compound.

- Use approved gene nomenclature and formatting. For example, mouse and human gene names should be italicised, with all caps for human genes and first letter only capped for mouse genes. Please check nomenclature for all genes at approved nomenclature site (eg. <http://www.genenames.org/> or <http://www.informatics.jax.org/>)
- All accepted articles should include a link to the full study protocol published on the authors’ institutional website (see *Lancet* 2009; 373: 992 and *Lancet* 2010; 375: 348)
- We encourage researchers to enrol women and ethnic groups into clinical trials of all phases, and to plan to analyse data by sex and by race
- For all study types, we encourage correct use of the terms sex (when reporting biological factors) and gender (when reporting identity, psychosocial, or cultural factors). Where possible, report the sex and/or gender of study participants, and describe the methods used to determine sex and gender. Separate reporting of data by demographic variables, such as age and sex, facilitates pooling of data for subgroups across studies and should be routine, unless inappropriate. Discuss the influence or association of variables, such as sex and/or gender, on your findings, where appropriate, and the limitations of the data.
- Please avoid priority claims such as “first”, “new” or “novel”.
- Define all abbreviations.

Commentaries

- This section contains Commentaries that accompany papers published in *EBioMedicine*, or to issues of wide-reaching concern in translational research. Most Commentaries are commissioned, but unsolicited Commentaries are also welcome. Commentaries may be peer reviewed
- Commentaries should be no more than 750 words, 10 references, and one figure, panel, or small table
- See **Conflicts of Interest** guidelines for comments

Letters

- Letters should be written in response to previous content published in *EBioMedicine*
- Letters for publication must reach us within 4 weeks of publication of the original item and should be no longer than 250 words and 5 references
- Letters of general interest, unlinked to items published in the journal, can be up to 400 words long
- Letters are not usually peer reviewed, but we might invite replies from the authors of the original publication, or pass on letters to these authors
- Only one table or figure is permitted, and there should be no more than 5 references and five authors
- All accepted letters are edited. Proofs will be sent out to authors before publication

Reviews

At *EBioMedicine*, it is our aim to curate concise and informative reviews of topical interest to researchers from both basic science and

clinical realms. Reviews should be focused on a specific biomedical topic with timely translational relevance.

Reviews for *EBioMedicine* should provide a clear and logical synthesis of the literature on a potentially complex topic, so that it can be easily understood by the general readership of the journal regardless of their expertise. Please avoid jargon, but do not oversimplify: be accurate and precise throughout. A good Review also provides a fresh point of view or a new conceptual framework on recent literature and proposes future directions in the field of study. Authors are encouraged to give their subjective opinion of the topics discussed, yet it is important that a fair and balanced representation of alternative viewpoints is presented. Although Reviews do allow room for some speculation and debate, it should be made clear where the authors' own opinions are being presented.

Title

Title of the Review should be short and enticing (<10 words).

Authorship

We prefer the Review to have no more than 5 authors.

Abstract

With a maximum of 150 words, briefly explain the necessary background and encapsulate the take-home message for a non-specialist reader. Please emphasise the recent developments or novel conclusions, concepts, or models that make your Review timely.

Keywords

Please provide 4-6 descriptive keywords.

Highlights

Please provide 2-3 sentences in bulleted format, summarising the key messages in your Review.

Each sentence (bullet) should be <125 characters including spaces.

Main text

Because we place an emphasis on concise and timely Reviews, the main text of the Review should be no more than 3500-4000 words (excluding references and tables). Please provide a synthesis, not a summary, of recent developments. Use concise, informative subheadings and provide clear links between sections. Unpublished data should not be included.

Figures and Tables (Reviews)

The Review can contain up to 5 additional items (Figures, Tables, Text Boxes), to enhance the understanding and the interest level of the readers. Each item should have a short explanatory title, and be cited in the main text. If any item has been published previously, the original source must be acknowledged, and the Review authors are responsible to obtain copyright permission as necessary.

Figures should preferably be in colour. If you have visually outstanding figures or images that are related to but not necessarily presented in the Review, we would be happy to consider it for our cover art.

Outstanding Questions

Please provide a short paragraph highlighting important questions for future research. This section provides an excellent opportunity to offer input and guidance on new directions for the field.

Search strategy and selection criteria

Transparency about the choice of material included is important to any Review paper. Therefore, the Review should include a brief section entitled "Search strategy and selection criteria" stating the sources of the material covered, and the criteria used to include or exclude studies. Citations to papers published in non-peer-reviewed supplements are discouraged.

Example:

Search strategy and selection criteria

Data for this Review were identified by searches of MEDLINE, Current Contents, PubMed, and references from relevant articles using the search terms "sentinel node", "breast cancer", and "axilla". Abstracts and reports from meetings were included only when they related directly to previously published work. Only articles published in English between 1980 and 2006 were included.

References (Reviews)

No more than 75 references, with particular emphasis on literature published in the past 5 years.

Citations and reference format should be in Vancouver referencing style.

General Formatting guidelines

Language

- Manuscripts should be submitted in English. Authors writing in Chinese, Portuguese, or Spanish may wish to use the Webshop (<http://webshop.elsevier.com/languageervices>) to provide an English translation of their manuscript for submission.

Formatting of text

- Type a single space at the end of each sentence
- Do not use bold face for emphasis within text
- We use a comma before the final "and" or "or" in a list of items
- Type decimal points midline (ie, 23.4, not 23.4). To create a midline decimal on a PC: hold down ALT key and type 0183 on the number pad, or on a Mac: ALT shift 9
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph
- Do not use the automated features of your software, such as hyphenation, endnotes, headers, or footers (especially for references). Please use page numbering

References

- Cite references in the text sequentially in the Vancouver numbering style, as a superscripted number after any punctuation mark. For example:

“...as reported by Saito and colleagues.¹⁵”

- Two references are cited separated by a comma, with no space. Three or more consecutive references are given as a range with an en rule. To create an en rule on a PC: hold down CTRL key and minus sign on the number pad, or on a Mac: ALT hyphen
- References in tables, figures, and panels should be in numerical order according to where the item is cited in the text
- Here is an example for a journal reference (note the use of tab, bold, italic, and the en rule or “long” hyphen):
“15[tab]Saito N, Ebara S, Ohotsuka K, Kumeta J, Takaoka K. Natural history of scoliosis in spastic cerebral palsy. *Lancet* 1998; **351**: 1687–[en rule]92.”
- Give any subpart to the title of the article
- If there are six authors or fewer, give all six in the form:
surname space initials comma
- If there are seven or more give the first three in the same way, followed by et al
- For a book, give any editors and the publisher, the city of publication, and year of publication
- For a chapter or section of a book, also give the authors and title of the section, and the page numbers
- For online material, please cite the URL, together with the date you accessed the website
- Online journal articles can be cited using the DOI number
- Do not put references in the Summary

Guidelines for supplementary material

All material should be submitted as one PDF (with numbered pages) with the paper and will be peer reviewed. Material will be published at the discretion of *The Lancet* journals' editors. All material should be provided in English.

Text

- Main heading for the web extra material should be in 12 point Times New Roman font **BOLD**
- Text should be in 10 point Times New Roman font, single spaced
- Headings should be in 10 point **BOLD**

Tables

Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules and shading in table cells.

- Main table heading should be in 10 point Times New Roman font **BOLD**
- Legends should be in 10 point, single spaced
- Tables should be in 8 point Times New Roman font, single spaced
- Headings within tables should be in 8 point **BOLD**
- Each table should fit on one A4 sheet

Data

- SI units are required

- Numbers in text and tables should always be provided if % is shown
- Means should be accompanied by SDs, and medians by IQR
- Exact p values should be provided, unless $p < 0.0001$

Drug names

- Recommended international non-proprietary name (rINN) is required
- We encourage use of neuroscience-based nomenclature for psychotropic drugs

References

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). References should be in Vancouver style formatting. Any references cited in the abstract must be given in full. Unpublished results and personal communications 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’. Citation of a reference as ‘in press’ implies that the item has been accepted for publication.

Increased discoverability of research and high quality peer review are ensured by online links to the sources cited. In order to allow us to create links to abstracting and indexing services, such as Scopus, CrossRef and PubMed, please ensure that data provided in the references are correct. Please note that incorrect surnames, journal/book titles, publication year and pagination may prevent link creation. When copying references, please be careful as they may already contain errors. Use of the DOI is encouraged.

A DOI can 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 any electronic article. An example of a citation using DOI for an article not yet in an issue is: VanDecar J.C., Russo R.M., James D.E., Ambeh W.B., Franke M. (2003). Aseismic continuation of the Lesser Antilles slab beneath northeastern Venezuela. *Journal of Geophysical Research*, <https://doi.org/10.1029/2001JB000884>. Please note the format of such citations should be in the same style as all other references in the paper.

For web references, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

Figures

A [detailed guide on electronic artwork](#) is available.

- All images must have a minimum resolution of 300 dpi, width 107 mm
- Main figure heading should be in 10 point Times New Roman font **BOLD**
- Legends should be in 10 point, single spaced
- Be consistent with the font size throughout.
- Use lowercase font (a, b, c...) to denote individual panels in a composite figure.

- Do not add box outline to graphs.
- Do not use titles in the graph or artwork. Titles should appear at the beginning of the figure legend.
- Nomenclature and abbreviations should be consistent with the text.
- All figure panels must be on a single page. (One figure per page, please.)

Audio/video material

Elsevier accepts video material and animation sequences to support and enhance your scientific research. Authors who have video or animation files that they wish to submit with their article are strongly encouraged to include links to these within the body of the article. This can be done in the same way as a figure or table by referring to the video or animation content and noting in the body text where it should be placed. All submitted files should be properly labeled so that they directly relate to the video file's content. In order to ensure that your video or animation material is directly usable, please provide the file in one of our recommended file formats with a preferred maximum size of 150 MB per file, 1 GB in total. Video and animation files supplied will be published online in the electronic version of your article in Elsevier Web products, including ScienceDirect. Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalise the link to your video data. For more detailed instructions please visit our [video instruction pages](#). Written consent from all parties must be obtained (see also the above section on Patient and other consents)

Audio

- Audio material submitted as an mp3 file, no larger than 50 Mb
- Your paper may be selected for a podcast. If so, the Web Editor will contact you to arrange a pre-recorded interview to discuss your paper. For more information, see [Audio](#)

Video

- Video material should be submitted in .mp4 format with aspect ratio of 16:9, and be no larger than 50 Mb
- We welcome your videos and invite you to submit any video material (reports, interviews, scans, imaging) for consideration in the online journal. Please ensure that all those featured in the video have given permission for publication (see also the previous section on **Patient and other consents**)
- All video files can be submitted alongside your article in EES

Online publication

- *EBioMedicine* aims to publish papers online within 2–3 weeks from acceptance

How *EBioMedicine* handles your paper

Acknowledgment

Receipt of your paper will be acknowledged by an email containing a reference number, which should be used in all future communications

Peer review process

EBioMedicine offers a transparent and expeditious editorial process. Every Research article published at *EBioMedicine* has been peer reviewed. Occasional contributions (e.g., Commentaries) are accepted without peer review. The peer review process is handled by the editorial team. Upon submission to *EBioMedicine*, your manuscript will first be read by one or more of the journal's staff of scientists. This is an important feature of our selection process and many papers are turned away on the basis of in-house assessment alone. That decision will be communicated quickly. Peer review is single blind, with a minimum of two reviews required per article. Once review reports are received, the editors make the final decision on a manuscript, based in part on these reviews.

Submission declaration

Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, see '[Multiple, redundant or concurrent publication](#)' for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder.

Disclosure of results before publication

- Presentation of data at a scientific meeting, as a poster, abstract, orally, on a CD, or as an abstract on the web, or on a preprint server does not conflict with submission to the *Lancet* journals. As a member journal of the International Committee for Medical Journal Editors, *EBioMedicine* does not regard results that are posted in the same clinical trials registry in which primary registration resides as a previous publication, if the results are presented in the form of a brief structured abstract or table
- The *Lancet* journals operate an embargo system, whereby journalists are given access to papers and press releases ahead of publication, allowing them a protected window to develop their stories. We believe that this window can help encourage balanced and accurate coverage of peer-reviewed scientific and medical research to inform public debate. As such, we ask that authors and their institutions refrain from actively seeking media attention for articles that have been submitted to *EBioMedicine* or that are available as a preprint. The important steps of thorough peer review and experienced editorial scrutiny and guidance, together with putting research findings into a wider context and highlighting implications for clinical practice, will make the final published paper in *EBioMedicine* very different to the submitted or preprint version. Coverage that results from pre-publication communication can impact media interest at the time of publication and our ability to support responsible journalism
- For more information on Preprints with *The Lancet*, please see www.thelancet.com/preprints. For additional questions regarding media, please contact pressoffice@lancet.com

Authorship

All authors should have made substantial contributions to all of the

following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

Changes to authorship

Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors **after** the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Ethics in publishing

For information on Ethics in publishing and Ethical guidelines for journal publication see <http://www.elsevier.com/publishingethics> and <http://www.elsevier.com/journal-authors/ethics>.

Human and animal rights

If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with [The Code of Ethics of the World Medical Association](#) (Declaration of Helsinki) for experiments involving humans; [Uniform Requirements for manuscripts submitted to Biomedical journals](#). Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

All animal experiments should comply with the [ARRIVE guidelines](#) and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, [EU Directive 2010/63/EU for animal experiments](#), or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed.

Plagiarism check

The journal will not publish papers which have appeared partially or completely in other journals, which plagiarise other works or are incompletely referenced. All manuscripts are routinely screened for similarity with the published record. High levels of duplication will automatically result in rejection without review. Authors should also bear in mind that even a moderate level of duplication diminishes the originality of the manuscript and may thereby jeopardise the possibility of the paper being selected for publication. Verification will be performed using the CrossRef Similarity Check software.

See for further details at: <http://www.ithenticate.com/products/crosscheck>.

Availability of materials

By publishing in the journal, the authors agree that, subject to requirements or limitations imposed by laws or governmental regulations, any DNAs, viruses, microbial strains, mutant animal strains, cell lines, antibodies, and similar materials described in the article are available from a national collection or will be made available in a timely fashion, at reasonable cost, and in limited quantities to members of the scientific community for non-commercial purposes. The authors guarantee that they have the authority to comply with this policy either directly or by means of material transfer agreements through the owner.

Decision

Submissions that have undergone in-house and peer review may be referred back to authors for revision. This is an invitation to present the best possible paper for further scrutiny by the journal; it is not an acceptance.

Two copies of the revised version should be sent back, one of which should be highlighted to show where changes have been made. Detailed responses to reviewers' comments, in a covering letter, are also necessary.

The Lancet journals and other Elsevier journals

- If your paper is rejected by *EBioMedicine*, we might judge it suitable to pass to other editors in the *Lancet*-group for consideration or to editors of other relevant journals within Elsevier's portfolio.

Appeals

- Sometimes editors make mistakes. When we do, we like to hear about them. If an author believes that an editor has made an error in declining a paper, we welcome an appeal. In your appeal letter, which should be sent to ebiom@lancet.com), please state why you think the decision is mistaken, and set out your specific responses to any peer reviewers' comments if those seem to have been the main cause of rejection.
- At least two editors will decide whether to invite a revised manuscript and whether re-review, or otherwise, is indicated.

Proofs

- Corresponding authors will receive an e-mail with a link to our online proofing system, allowing annotation and correction of proofs online. The environment is similar to MS Word: in addition to editing text, you can also comment on figures/tables and answer questions from the Copy Editor. Web-based proofing provides a faster and less error-prone process by allowing you to directly type your corrections, eliminating the potential introduction of errors.
- If preferred, you can still choose to annotate and upload your edits on the PDF version. All instructions for proofing will be given in the e-mail we send to authors, including alternative methods to the online version and PDF.
- We will do everything possible to get your article published.

quickly and accurately. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. It is important to ensure that all corrections are sent back to us in one communication. Please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed.

Open access policy

Article processing charges

- No subscription or pay-per-view charges will apply to any content published in *EBioMedicine*. An article processing fee of \$3500 will be charged upon acceptance of submitted research articles (no fee will apply to Reviews, Commentaries or In Focus articles). The fee reflects the anticipated low ratio of acceptance to submission
- Authors whose main funder is located either in group A or B countries of the Health Inter Network Access to Research Initiative (HINARI) or in a country with a low UNDP [human development index](#) will be exempt from payment. For authors with no formal funding, the country of origin of the majority of authors' institutions will be taken as the source country. If there is no majority country, the corresponding author's country will be so designated
- Payments are processed by a department unconnected to *EBioMedicine's* editorial department

Copyright and reuse

- Authors will be asked to sign a transfer of copyright agreement, which recognises the common interest that both journal and author(s) have in the protection of copyright. We accept that some authors (eg, government employees in some countries) are unable to transfer copyright. However, such policies do not provide anyone other than *The Lancet* journals the right to make in any form facsimile copies of the version printed
- All content is published under [Creative Commons](#) licensing, which enables authors to retain copyright while allowing others to copy, distribute, and make some uses of their work, provided full credit is given to them as originators.

EBioMedicine offers authors a choice of a CC BY or CC BY-NC-ND 4.0 license. Wholly commercially funded articles will only be eligible for a CC BY-NC-ND 4.0 license. Authors will be asked to sign an exclusive licence (or non-exclusive licence for government employees) to permit our publisher, Elsevier Ltd, to publish the work in *EBioMedicine*.

For Creative Commons licensing see <http://creativecommons.org/licenses/>

Ombudsman

For information about what our ombudsman can and cannot investigate, articles about past ombudsmen, and how to contact the current ombudsman see <https://www.thelancet.com/ombudsman>.

What happens after publication?

Press release

Press releases are issued by *The Lancet* journals' press office for selected content published in our journals. You will be advised in advance if your paper has been selected for press release. *The Lancet* journals' media relations team will contact you with detailed instructions about the embargo for your paper, and will provide a draft press release for your comments ahead of the publication date. If your institution would like to issue a press release for your paper, please inform pressoffice@lancet.com.

Author interview

Your paper may be selected for a podcast. If so, the Web Editor will contact you to arrange a pre recorded interview to discuss your paper. For more information, see [Audio](#)

Data storage

Authors may be required to provide the raw data for research papers when they are under review and up to 10 years after publication in *EBioMedicine*

Responsible sharing

The Lancet supports responsible sharing. We recognise that authors want to share their papers and we encourage this. Find out how you can share your paper [here](#)