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EPIDEMIOLOGY publishes original research from all fields of epidemiology. The journal also welcomes descriptions of new methods, commentaries, review articles, and meta-analyses.

EPIDEMIOLOGY publishes about 15% of all submitted manuscripts. The editors decline about two-thirds of submissions within a week of receipt; corresponding authors are notified promptly by e-mail. The rest are sent for double-blind peer review. Average time to first decision for reviewed manuscripts is 37 days, with 90% receiving a first decision within eight weeks. Expedited review and publication is possible for time-sensitive papers.

We do not consider pre-submission inquiries, because we can best evaluate your paper when we see the entire manuscript (see [editorial](#)).

Published papers are eligible for the annual [Rothman EPIDEMIOLOGY Prize](#), which includes an award of \$5000.

Word counts for comparison to limits should include all text to appear in print except the title page information, abstract, bibliography, tables, and figures.

Original Research Articles (1500 to 4000 words): Research articles should begin with a short introduction (background and reason for undertaking the work), followed by Methods, Results, and Discussion. Authors may wish to consult STROBE for guidance on the presentation of original epidemiologic research ([see editorial](#)). Papers on methodology are not required to follow this structure. EPIDEMIOLOGY welcomes papers that present precisely measured persuasively null results for which either prior data or a compelling rationale exists for a non-null effect ([see editorial](#)).

Brief Reports (up to 1500 words): We encourage brief reports of research results or methodological developments that can be presented succinctly. Brief reports should follow the content and structure of original research articles.

Validation Studies (2000 words): Validation studies should follow the outline for an Original Research Article and should provide estimates to inform bias analyses or otherwise be of use in epidemiologic research ([see editorial](#)). Examples include estimates of measurement error for continuous variables, classification parameters for discrete variables (sensitivity, specificity, or positive

and negative predictive values), strengths of association to inform analyses of an unmeasured confounder, or participation proportions within combinations of exposures and outcomes. The validation study should be designed and the results presented to optimize their utility in other similar settings.

Review Articles and Meta-analyses (up to 5000 words): We welcome review articles and meta-analyses. These should be written for a general epidemiologic audience. Authors may wish to consult [PRISMA](#) or other published guidelines for the conduct and presentation of meta-analyses.

Commentaries (up to 2000 words): Commentaries may address any topic of interest to the epidemiologic community, including the implications of specific findings for public health policy or descriptions of novel hypotheses with strong plausibility. The editors occasionally invite commentaries on selected papers without consulting the authors; authors who wish to respond are free to do so through a letter to the editor.

Letters (up to 400 words, 4 references): Letters allow authors to submit critical responses to published papers. Letters are published only online, but will be listed in the corresponding issue's table of contents and indexed in PubMed.

Research Letters (up to 600 words, 1 table or figure, 8 references): Research letters allow authors to present original data in a succinct format. Like Original Research Articles or Brief Reports, these manuscripts are subject to peer review. Letters are published only online, where they are available for free. They will be listed in the table of contents of an issue and indexed in PubMed.

Book or Software Reviews (up to 800 words): Authors interested in submitting a review of a recent book or new software should consult the Editor-in-Chief.

Remembrances (up to 400 words, with photograph): The journal publishes brief memorials in honor of recently deceased epidemiologists. These should be signed, without references, and include a distilled combination of essential information (full name, dates of birth and death, main institutional affiliations and accomplishments) and personal memories (see an [example](#)).

Essential Conditions

Author Responsibility: All submitted manuscripts must be original contributions, not previously published (except as an abstract) and not under consideration for publication elsewhere.

Authors must include any closely related manuscripts (published, in press, or under review) as part of the online submission. Results from related manuscripts should be discussed in the submitted manuscript, providing readers with a synthesis of findings (see [editorial](#)).

If any part of a manuscript is copied directly from another paper (even a paper by the same authors), set that text in quotation marks and provide the reference (including the page number of the quotation). The Editorial Office checks manuscripts for duplication with published papers.

Each author must qualify for authorship per the criteria of the [International Committee of Medical Journal Editors](#).

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Manuscript Submission

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Manuscript Preparation

Cover Letter: Although the cover letter should not repeat the main points of the abstract, authors are encouraged to state what they believe to be the main contribution of their paper and the main reasons they have elected to submit the paper for consideration by EPIDEMIOLOGY. The cover letter must state that the paper and the data have not previously been published, either in whole or in part (unless as an abstract), and that no similar paper is in press or under review elsewhere. The cover letter must also state potential conflicts of interest, or state that there is no conflict of interest. The cover letter must list closely related papers by any of the authors that are included with the submission, or state that there is no closely related paper.

Upload the cover letter as a separate file when you submit the manuscript.

Title Page: Include the following details on the title page:

- Type of manuscript (Original Research Article, Brief Report, *etc.*)
- Manuscript title (simple, direct, and without naming the specific study; see [editorial](#)).
- Authors' full names (without degrees) and affiliations at the time the work was done
- Corresponding author's name and mailing address, telephone number, and e-mail address
- Suggestion for a running head (abbreviated title, up to 50 characters)
- Description of conflicts of interest, or statement that there is no conflict of interest
- Sources of financial support (see instructions above); please note especially the National Institutes of Health, Research Councils UK, Wellcome Trust, or the Howard Hughes Medical Institute, which have special requirements for manuscript access.
- Description of the process by which someone else could obtain the data and computing code required to replicate the results reported in your submission (or explanation why data or code are not available). This description will be included in the article notes of published papers.

Acknowledgements (including colleagues who contributed to the research but who do not meet the requirements for authorship)

Upload the title page as a separate file when you submit the manuscript.

Style: We prefer text with clear, declarative sentences in the active voice (see "[Writing for Epidemiology](#)"). Once a manuscript is accepted, we edit and return it to the author for final approval. All co-authors are responsible for all parts of their paper, including changes made by the manuscript editor and approved by the corresponding author.

Please adhere to the following style and format details:

- Submissions should conform to the [Uniform Requirements for Manuscripts Submitted to Biomedical Journals](#). For details of style and format, consult the *AMA Manual of Style: A Guide for Authors and Editors* (10th edition).
- To facilitate blind review, please remove obvious identifying information from all parts of the manuscript except the separately submitted title page. Do not delete or mask authors' names in the reference list.
- Avoid acronyms unless they are widely recognized (e.g., HIV is acceptable but UGH is not [Uveitis Glaucoma Hyphema syndrome]). Define acronyms and abbreviations at first mention in text (see [editorial](#)) and the [Editors' Notepad](#).
- Use metric and SI units of measure.
- Footnotes are acceptable in tables but not in the main text or figures. Use lower-case letters as footnote symbols, in alphabetical order within each table.
- Manuscripts should be in a standard word processing format. We prefer Microsoft Word but we can also use PDF, RTF, TXT, LaTeX2e, and AMSTeX.
- Errors in proof are more likely with programs other than Microsoft Word. For such papers, careful checking of galley proofs is particularly important.
- For papers with numerous mathematical formulae, we prefer LaTeX2e or Word with Arial Unicode font. If using MathType, use Arial Unicode or Symbol font.
- Format all files for 8.5 X 11-inch paper with at least a 1-inch (2.5-cm) margins on all sides. Number the pages but do not provide other information in headers or footers. Double-space all text, and align text only on the left side. Do not include line numbers.
- When specifying brand names for software programs, equipment, etc., include the company name and location in parentheses.

METHODOLOGICAL ISSUES

Significance Testing: For estimates of causal effects, we strongly discourage the use of categorized P-values and language referring to statistical significance (see discussion of this [topic](#)). We prefer instead interval estimation, which conveys the precision of the estimate with respect to sampling variability. We are more open to testing with respect to modeling decisions, such as for tests of interaction ([see editorial](#)) and for tests for trend, and with respect to studies using high-dimensional testing, such as genome-wide association or other genomic platforms.

Reproducibility: The editors encourage authors to provide information that enables other researchers to reproduce their analyses (see [editorial](#)). For example, include:

- Counts for cell numbers in crude analyses
- Analytic code used for the analysis
- Code used to develop and analyze data
- Source of data, if publicly available

Interactions: We prefer evaluation of interactions between variables as departure from additive effects. Whether evaluated as departure from additive or multiplicative effects, authors who report interactions should present effects of the separate exposures and their joint effects (with confidence intervals)—each relative to the group not exposed to either factor. An equivalent approach is to report the relevant parameters from a regression model (*i.e.*, the individual coefficients for both exposures and their product term) (see [editorial](#)).

Validity: We encourage the use of quantitative methods to evaluate the influence of important threats to validity, including missing data, differential selection or loss-to-follow-up, confounding due to an unmeasured potential confounder, or measurement error (see [Good Practices paper](#)).

Precision: Avoid an excessive number of decimal places (pseudo-precision). For example, percents should be rounded to nn%, n.n%, or 0.0n% and risk ratios should be rounded to nn, n.n, or 0.nn unless clarity of the presentation and the sample size justify more significant digits (see [editorial](#)).

Study participation: Provide detailed information on the number and response proportions at each step in the assembly of the study population and analysis of data (see [editorial](#)). Flow charts to depict study enrollment can be very effective in portraying this information.

Instrumental variables: We provide specific guidelines for reporting instrument variable analyses (see [guidelines](#)).

Comparative effectiveness and safety research: Specify the randomized trial that is being emulated ([see editorial](#)).

FOR RESEARCHERS FROM LOW RESOURCE COUNTRIES

Resources, including a mentoring program, are available to help researchers in low resource countries publish their work. Consult [AuthorAID](#). Authors of papers on environmental epidemiology can sign up for AuthorAID through a special program of the [International Society of Environmental Epidemiology](#).

Researchers from low resource countries can use the World Health Organization's [HINARI](#) program for free or low-cost access to the medical and public health literature.

MANUSCRIPT SECTIONS

Abstract: Research articles should have a structured abstract, with headings for Background, Methods, Results, and Conclusions. The Methods section should identify the study population, study years, and location, if appropriate. Unstructured abstracts are allowed for unstructured papers (*e.g.*,

methodology papers). Abstracts are limited to 250 words (150 words for Brief Reports); these do not count as part of the main text word count. Do not include references in abstracts. Use abbreviations sparingly and only in accordance with the instructions above.

Enter the abstract in 2 places: the appropriate box in Editorial Manager and also as the first page of the main text file.

Main Text: Include the following in the main text file: the abstract, the body of the text, tables, figures, figure legends, and reference list.

Discussion: Policy implications of research results are reserved for commentaries, and may not be included in research reports (see [editorial](#)). As noted above, EPIDEMIOLOGY prefers quantitative evaluation of threats to validity in the methods, results, and discussion over qualitative descriptions in a list of limitations presented in the Discussion.

Tables: Prepare tables using the "Table" feature of your word processing software. Tables from Excel or other spreadsheet programs should not be used. Double-space tables, and use no lines except horizontal lines in the headings. See any issue of EPIDEMIOLOGY for examples.

Number tables in order of their presentation in text. Give each table a clear title, without repeating details from the text. Explanatory footnotes should be labeled with lower-case letters, in alphabetical order.

Figures: Well-designed figures can enhance papers greatly. Aim for clarity and simplicity, using words and numbers sparingly. Make font sizes larger and lines heavier than the default of most graphics generators in software programs. Show ratio measures (such as odds ratios) on a logarithmic scale. Twenty tips for preparing figures can be found [here](#).

Submit figures exactly as you would like them to appear in print. Figures are typically published as one column width (8.5 cm); prepare them approximately this size. See any issue of EPIDEMIOLOGY for examples.

Number figures in the order they are discussed in the text. For figures with several parts, label each part alphabetically (A, B, etc.) in the upper left corner of the figure. Panel figures should have the same scale for all axes. Color figures are printed at the author's expense, except when the Open Access fee is paid (see [Publication Charges](#)).

The instructions below detail the publisher's requirements for production of figures. Authors are not required to adhere to these specifics for initial submissions, but for accepted papers authors will be asked to submit their final figures according to these instructions.

A) Creating Digital Artwork

1. Learn about the publication requirements for Digital Artwork: <http://links.lww.com/ES/A42>
2. Create, scan and save your artwork and compare your final figure to the Digital Artwork Guideline Checklist (below).

B) Digital Artwork Guideline Checklist

Here are the basics to have in place before submitting your final digital artwork (post acceptance):

- Artwork should be saved as TIFF, EPS, or MS Office (DOC, PPT, XLS) files. High resolution PDF files are also acceptable.
- Crop out any white or black space surrounding the image.
- Diagrams, drawings, graphs, and other line art must be vector or saved at a resolution of at least 1200 dpi. If created in an MS Office program, send the native (DOC, PPT, XLS) file.
- Photographs, radiographs and other halftone images must be saved at a resolution of at least 300 dpi. Any retouching of a photograph must be described in the figure legend.
- Photographs and radiographs with text must be saved as postscript or at a resolution of at least 600 dpi.

Figure Legends: Provide brief legends for each figure.

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Step 1 > Create SDC files per these [file requirements](#)

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Cite supplementary digital content in the text as eAppendix, eTable, *etc.* If possible, create one PDF file containing all SDC. If multiple files are required because the SDC includes computer code, a video, a database, *etc.*, include in the main text a numbered list of Supplemental Digital Content.

Step 3 > Upload the SDC file(s) into Editorial Manager as part of the [online submission process](#).

Data collection instruments: We request that you include the data collection instruments on which data are based (either the entire questionnaire or a subset of the key analytic variables) as an eAppendix. If the questionnaire is online elsewhere, provide the link in the main text.

References: Number the references in order of appearance in the text, tables and figures, and list them at the end of the main text file. Reference numbers in the text should be superscripts placed after punctuation. Any reference style is acceptable for initial submissions, but for accepted papers authors will be asked to put references in the format specified below. For more than six authors, list only the first three, followed by "et al." Verify all references using [PubMed](#). Abbreviate journal names

as listed in the Journals Database section of the PubMed Web site. Double-space the reference list. An Endnote output style is [available](#).

Reliance on unpublished sources (such as personal communications, unpublished data, most abstracts, or papers under review) is discouraged. When cited, these should appear in the text in parentheses. For personal communications, include the name of the source, date, and type of communication.

Examples of Reference Style

Journal article

1. Botto LD, Lynberg MC, Erickson JD. Congenital heart defects, maternal febrile illness, and multivitamin use: a population-based study. *Epidemiology*. 2001;12:485-490. NOTE: If the journal article is an editorial, commentary, letter or abstract, include this word in brackets following the title of the article.

Book chapter

2. Greenland S. Applications of stratified analysis methods. In: Rothman KJ, Greenland S, eds. *Modern Epidemiology*. 2nd ed. Philadelphia: Lippincott Williams & Wilkins; 1998:288-300.

Entire book

3. MacMahon B, Pugh TF. *Epidemiology: Principles and Methods*. Boston: Little Brown and Co.; 1970.

Online journals

4. Harsha HC, Kandasamy K, Ranganathan P, et al. A compendium of potential biomarkers of pancreatic cancer. *PLoS Med* 2009;6(4):e1000046. doi:10.1371/journal.pmed.1000046.

Web Site

5. National Cancer Institute. PDQ® - NCI's Comprehensive Cancer Database. <http://www.cancer.gov/cancertopics/pdq/cancerdatabase>. Accessed April 14, 2009.

Unpublished material should be cited in the text only and as follows:

(AK Smith, written communication, June 2003)

(SB Jones, unpublished data, 2003)

Checklist for Submitted Manuscripts

Please review the list below to be sure you have all relevant components of your submission. See specifications above for each component. Order the components in Editorial Manager as follows:

- Cover letter
- Title page (submitted as a separate file)
- Abstract (entered into Editorial Manager abstract box and as the first page of the main text file)
- Main text file (including abstract, text, tables, figures, figure legends, and references)

- Authorship Responsibility, Financial Disclosure, and Copyright Transfer forms submitted via Editorial Manager by corresponding author (initial submission) or all authors (resubmissions) (PDF link at top right of this page to be used only if the Editorial Manager submission fails)
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