



Instructions to Authors

Editorial Policy

European Cardiology Review endeavours to publish unbiased content pertinent to healthcare professionals practicing in the field of cardiology. A statement of the journal's aims and scope is available [online](#).

The title and scope of articles should be agreed with the Editor-in-Chief and Managing Editor prior to submission.

Uninvited submissions will be considered provided they meet our publication criteria. If you are interested in submitting a manuscript, please contact the Managing Editor.

Following submission, articles will be subject to independent double-blind peer review and in-house editing prior to publication. All articles must receive the approval of the Editor-in-Chief prior to publication.

Editorial Contact

All editorial queries should be directed to Lindsey Mathews commeditor@radcliffecardiology.com
Managing Editor, *European Cardiology Review*.

Submission Types

The following article types appear in *European Cardiology Review*:

Guest Editorial – Guest editorials are approximately 800 words in length (this excludes references) and are by invitation of the Editor-in-Chief only.

Review Articles – Review articles (otherwise known as narrative reviews; systematic reviews are discussed separately, see below) selectively assess the medical literature while discussing a topic broadly; *European Cardiology Review* readers must benefit from the expert author(s)' explanation and assessment of the validity and applicability of individual studies. The topic of the review should be of common interest and relevance to the cardiology fraternity active in Europe, and should be confirmed with the Editor-in-Chief and Managing Editor prior to submission. Review articles are approximately 3,000 words in length (this excludes references; extensions to word limits by prior agreement with the Managing Editor).

Viewpoint Articles – Viewpoint articles are usually commissioned by the Editor-in-Chief and aim to provide brief expert views on topical issues. Commentaries from experts in their fields are expressed in a 'positive' and constructive manner albeit providing a critical view on novel or controversial issues in cardiology. Viewpoint articles should always remain accessible and interesting enough for the general audience of the Journal. The length of a viewpoint article will vary depending on the topic but should not exceed 1,500 words, and include up to five references (*extensions to word limits by prior agreement with the Managing Editor*). The Editor-in-Chief would be pleased to consider non-commissioned original Viewpoint contributions from world experts.

Systematic Reviews – These manuscripts are systematic assessments of the evidence pertaining to a particular hypothesis, be it regarding a disease cause, diagnosis, prognosis, therapy, or prevention. A systematic review of quality can be recognised by its:

- clearly stated objectives
- pre-defined eligibility criteria for included evidence
- explicit, reproducible methodology
- a systematic, exhaustive search to identify all available evidence
- assessment of the validity of the findings of the included studies (e.g. risk of bias)
- systematic presentation, and synthesis, of the characteristics and findings of the included studies¹

For advice on preparing systematic reviews consult: [The Cochrane Reviewers' Handbook](#). Other resources for preparing systematic reviews can be found [here](#).

Additional manuscript specifications

- Systematic reviews are approximately 4,000 words in length (this excludes references; extensions to word limits by prior agreement with the Managing Editor)
- The abstract should be no more than 250 words and should be divided into the following sequential sections: Background; Objectives; Search Strategy; Selection Criteria; Data Collection and Analysis; Results; Conclusions
- A PRISMA statement and checklist are required, uploaded as Supplementary Information, further information can be found [here](#)
- PROSPERO, the online international register for systematic reviews aims to reduce unplanned duplication and promote efficient use of resources: [International register for systematic reviews](#). We recommend registration with PROSPERO for all systematic reviews to improve the transparency and rigour of secondary research but, at present, it is not a requirement. Please note that retrospective registration is not possible. Further information can be found [here](#)

1. University of Edinburgh, 2013: <http://www.ccace.ed.ac.uk/research/software-resources/systematic-reviews-and-meta-analyses>

Meta-analyses – Meta-analyses differ from – or are a sub-type of – systematic reviews (as per the above section); authors of a meta-analysis must combine or integrate several independent data sets by undertaking statistical analysis of these sources to generate a clear and unidirectional conclusion/s.

Given the need to undertake statistical analysis, special care must be taken to define the eligibility criteria for the data to be included (i.e., compatible data sets must be used to ensure a reliable outcome). Special attention should be paid to the quality of trials, type of trials, patient populations, endpoints, outcomes, and lengths of follow-up.

Additional manuscript specifications

- Systematic reviews are approximately 4,000 words in length (this excludes references; extensions to word limits by prior agreement with the Managing Editor)
- The abstract should be no more than 250 words and should be divided into the following sequential sections: Background; Objectives; Search Strategy; Selection Criteria; Data Collection and Analysis; Results; Conclusions
- Please see the above section on systematic reviews as regards the PRISMA statement and checklist, and the PROSPERO register

Manuscript Preparation

All manuscripts must be supplied in Microsoft Word.

All submissions must include:

- **A Title Page** – Comprising: the title of the article; short title (<50 characters); author(s) full name, position and institution; a statement of disclosure/conflicts of interest relevant to the article for each author* (conversely, please state clearly if there are no conflicts of interest to declare); a postal correspondence address for the lead author; email addresses for all authors
- **A Supporting Information Page** – Comprising: a short biography of each author for inclusion on the journal website; a brief summary of the paper (two to three sentences) and an image (.jpeg format) to accompany the article title on the electronic table of contents

Viewpoints, Review Articles, Systematic Reviews and Meta-analyses must also include:

- An unstructured, unreferenced abstract (approximately 120 words)
- A list of keywords (5–12 words)

Content

Layout

Divide the text under headings and subheadings. Keep these short and succinct and similar in sense and style.

Language

All articles should be written in plain, UK English, free from jargon, and the writing should be clear and direct. All acronyms and abbreviations must be explained in full at first mention.

Figures – Tables, illustrations, screenshots and photographs.

- A maximum of five may be included†
- Clear and concise titles / captions must be provided, and all symbols and abbreviations used must be defined in a footnote
- All figures must be referred to in the main text
- Figures must be supplied as digital files only (.tif, .pdf or .jpeg files) and be at least 300dpi
- Graphs and tables must be supplied as editable files formatted as a table in Microsoft Word or Excel
- Authors are responsible for obtaining permission for all copyright material, including tables, figures and images. Evidence will need to be provided where permission has been granted upon request

References

- In text – All articles must be fully referenced using the Vancouver in-text referencing style. References must be numbered in order of first mention. They must be indicated in the text by a superscript number with the full list at the end of the article in numerical order
- Reference list – Journal abbreviations are used as per Medline. Include the first three authors only.
- Example references:
 - *Journal article* – Delpón E, Cordeiro JM, Núñez L, et al. Functional effects of KCNE3 mutation and its role in the development of Brugada syndrome. *Circ Arrhythm Electrophysiol* 2008;**1**:209–18. DOI: 10.1161/CIRCEP.107.748103; PMID: 19122847
 - *Book Chapter* – H Mansbach, Sumatriptan: Looking Back and Looking Forward. In: Humphrey P, Ferrari M and Olesen J (eds), *The Triptans: Novel Drugs for Migraine*, New York: Oxford University Press, 2001;183–9.

*Relevant conflicts of interest are any commercial interests that may be construed to have influenced opinion such as research funding, consultancy services, serving on speakers' bureaus, travel expenses, appearance fees, the receipt of share options, or direct employment by a commercial entity. For more information visit: www.icmje.org/conflicts-of-interest/acknowledgements

†Additional images by prior agreement with the Managing Editor.

Submission and Peer Review Process

Articles must be submitted electronically via Epress at <http://www.epress.ac.uk/ecr/webforms/author.php>

Articles that do not fall within the aims and scope of the journal will be rejected outright.

Articles submitted that fall within the aims and scope of the journal will be subjected to independent double-blind peer review. Peer reviewers are selected on the basis of their expertise in the article subject matter. Following review, manuscripts are accepted without modification, accepted pending modification (in which case the manuscripts are returned to the author/s to incorporate required changes), or rejected. The Editor-in-Chief reserves the right to accept or reject any proposed amendments. Once the authors have revised a manuscript in accordance with the reviewers' comments, the manuscript is assessed to ensure the revised version meets quality expectations. The Editor-in-Chief provides final approval for acceptance for publication.

Copyright for the publication and reproduction of submitted articles transfers to Radcliffe Cardiology.

Publication

All accepted manuscripts will be subject to editorial revisions for clarity, punctuation, syntax and conformity to house style. Wherever possible, the author/s will be fully involved in the editorial process, although the final decision remains with the publisher.

A PDF proof of manuscripts accepted for publication will be sent to the corresponding author. Any requests for changes must be returned by the deadline given. Only minor changes can be made at the proofing stage. It is the corresponding author's responsibility to liaise with co-authors on any needed corrections or proof approval.

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