Guide for Authors

Introduction

The Prostate International (Prostate Int, PI), the Official Journal of Asian Pacific Prostate society (APPS) and Korean Prostate Society (KPS), is an international peer-reviewed academic journal dedicated to basic and clinical studies on prostate cancer, benign prostatic hyperplasia, prostatitis, and other prostatic diseases. It is published four times per year, March 30, June 30, September 30, and December 30. Its formal abbreviation is Prostate Int. Original articles and topical reviews on various prostate-related conditions and problems are published in *Prostate International*, covering the state-of-the-art contents. Prostate International represents the only academic journal devoted to various prostatic diseases in Asian Pacific region. The incidence, characteristics, and management of various diseases may vary according to region and race. Prostate International brings solid coverage of prostatic diseases in Asian Pacific men. Prostate International also serves as a medium for cooperation amongst urologists and specialists from around the world focusing on various aforementioned prostatic conditions. All or part of Prostate International is indexed/tracked/covered by DOI/Crossref, Google Scholar, ScienceCentral, ScienceDirect and PubMed.

Types of paper

1. Review article

Review article shall be limited to an invited review article, which, by the Editorial Board, was selected as a significant theme from areas relevant to prostate disease field and whose authors were selected and referred on the basis of articles published in this or other journals. The submitted manuscript should be decided to be published via reviewing of the Editorial Board. The length of the manuscript should not exceed 3,500 words except for the cover, tables, figures, and references. The works in the references should not exceed 100.

2. Original article

The manuscript for original articles should be organized in the following order: 1) title page, 2) abstract and keywords, 3) introduction, 4) materials (or subjects) and methods, 5) results, 6) discussion, 7) conflict of interest, 8) acknowledgments (if necessary), 9) references, 10) tables, 11) figures and photos, and 12) legends.

The manuscript should be provided in MS Word file (doc, docx), double spaced on 212×297 mm (A4 size) with 2.5 cm margins at the top, bottom, and left margin.

The length of the manuscript should not exceed 3,000 words except for the cover, tables, figures, and references. No more than 35 references can be cited. All manuscript pages are to be numbered consecutively, beginning with the abstract as page 1. Neither the authors' names nor their affiliations should appear on the manuscript pages. The use of acronyms and abbreviations is discouraged and should be kept to a minimum. When used, they are to be defined where first used, followed by the acronym or abbreviation in parentheses. Abbreviations are not allowed in the title. The names and locations (city, state, and nation) of manufacturers of equipment and nongeneric drugs should be given. When quoting from other sources, give a reference number in bracket after the author's name or at the end of the quotation.

Contact details for submission

Manuscripts for Prostate International may be submitted using online http://www.evise.com/evise/faces/pages/navigation/NavController.jspx?JRNL_ACR=PI. For editorial questions, please contact us via e-mail pi@approstate.org.

Before You Begin

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

For human or animal experimental investigations, appropriate institutional review board or ethics committee approval is required, and such approval should be stated in the methods section of the manuscript. For those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki should be followed (World Medical Association. Declaration of Helsinki: ethical principles for medical research involving human subjects. Available at: http://www.wma.net/e/policy/pdf/17c.pdf).

Articles where human subjects can be identified in descriptions, photographs or pedigrees must be accompanied by a signed statement of informed consent to publish (in print and online) the descriptions, photographs and pedigrees from each subject who can be identified (see relevant section below).

Articles covering the use of human samples in research and human experiments must be approved by the relevant review committee (see relevant section below).

Articles covering the use of animals in experiments must be approved by the relevant authorities.

Conflict of Interest

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. Conflict of interest statements will be published at the end of the text of the article, before the 'References' section. Please consult the COPE guidelines (http://www.publicationethics.org/) on conflict of interest. Even when there is no conflict of interest, it should also be stated.

Submission declaration

Redundant (or duplicate) publication is publication of a paper that overlaps substantially with one already published in print or electronic media. Submitted manuscripts are considered with the understanding that they have not been published previously in print or electronic format (except in abstract or poster form) and are not under consideration in totality or in part by another publication or electronic medium. For more information, please refer to 'Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication' (Available at: http://www.icmje.org/2006_urm.pdf).

Clinical trial results

Clinical trials are recommended to register a primary national clinical trial registration site such as http://www.clinicaltrilas.gov/, http://ncrc.cdc.go.kr/cris, or other sites accredited by WHO or the International Committee of Medical Journal Editors.

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Articles should be written in English (using American English spelling) and meet the following basic criteria: the material is original, the information is important, the writing is clear, concise and grammatically correct, the study methods are appropriate, the data are valid, and the conclusions are reasonable and supported by the data. For non-native English-speaking authors, we suggest that manuscripts be checked and edited by a native English speaker.

Submission

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Preparation

Use of Word Processing Software

- Articles should be prepared in the simplest form possible and submitted in Microsoft Word (*.doc or *.docx).
- Manuscripts must be typed in English, double-spaced and 10 or 12-point type. And all pages must be numbered consecutively starting from the title page.
- You may use automatic page numbering, but do NOT use other kinds of automatic formatting such as footnotes.
- Put text, references, tables, and legends in one file, with each table on a new page.

Article Structure

The text for Original Articles, for example, should include the following sections: Introduction, Materials and Methods, Results, and Discussion. The Introduction should be as concise as possible, without subheadings. The Methods section should be sufficiently detailed. Subheadings may be used to organize the Results and Discussion. Each section should begin on a new page

Introduction

The Introduction should provide a brief background to the subject of the paper, explain the importance of the study, and state a precise study question or purpose.

Material and methods

The Methods section should describe the study design and methods (including the study setting and dates, patient samples or animal specimens used, with inclusion and exclusion criteria, the laboratory methods followed, or data sources and how these were selected for the study, the essential features of any interventions, the main outcome measures), and state the statistical procedures employed in the research.

Results

The Results section should comprise the study results presented in a logical sequence, supplemented with tables and/or figures. Take care that the text does not repeat data that are presented in the tables and/or figures.

Discussion

The Discussion section should be used to emphasize the new and important aspects of the study, placing the results in context with published literature, the implications of the findings, and the conclusions that follow from the study results.

Essential Title Page Information

The title page should include: category of paper, article title, names (spelled out in full) of all authors, academic degrees, the institutions with which they are affiliated (only 1 affiliation per author is permitted); indicate all affiliations with a superscripted lowercase number after the author's name and in front of the appropriate affiliation, short running title not exceeding 30 characters, separate word count for abstract and text, and the corresponding author details (name, address, phone and fax, e-mail information).

Abstract

An abstract is required for the following article categories: Review Article, Original Article.

Abstracts should be no more than 300 words in length. Abstracts for Original Articles should be structured, with the section headings: Background, Methods, Results, Conclusion. Abstracts for Review Articles are unstructured in one single paragraph.

Keywords

Keywords (in alphabetical order) are required for the following article categories: Review Article, Original Article.

For selecting keywords, refer to the Index Medicus Medical Subject Headings (National Library of Medicine (US). MeSH [Internet]. Bethesda (MD): National Library

of Medicine (US); 1954 [updated 2009, cited 2009 Nov 1]. Available from: http://www.ncbi.nlm.nih.gov/mesh).

Abbreviations

Where a term/definition is continually referred to (i.e. 3 times or more in the text), it is written in full when it first appears, followed by the subsequent abbreviation in parentheses (even if it was previously defined in the abstract); thereafter, the abbreviation is used.

Acknowledgements

General acknowledgments for consultations, statistical analysis, etc., should be listed after main body of text, before the references, including the names of the individuals involved. All financial and material support for the research and the work should be stated here clearly explicitly.

(Nomenclature and) Units

Current standard international nomenclature for genes should be adhered to. Genes should be typed in italic font and include the accession number. For human genes, use genetic notation and symbols approved by the HUGO Gene Nomenclature Committee (http://www.genenames.org/) or refer to PubMed (http://www.ncbi.nlm.nih.gov/sites/entrez).

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Figures must be in numerical order using Arabic numerals in the order of their citation in the text. Figures should be uploaded as separate files, not embedded in the manuscript file.

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Citation in text

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). 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

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References should include, in order, authors' surnames and initials, article title, abbreviated journal name, year, volume and inclusive page numbers. The last names and initials of all the authors up to 6 should be included, but when authors number 7 or more, list the first 6 authors only followed by "et al". Abbreviations for journal names should conform to those used in MEDLINE. Journal titles in references should be set in Italics.

Examples:

Journal article:

- 1. Kim WT, Kim WJ. MicroRNAs in prostate cancer. Prostate Int 2013;1:3-9.
- 2. Lu-Yao GL, Albertsen PC, Li H, Moore DF, Shih W, Lin Y, et al. Does primary androgen-deprivation therapy delay the receipt of secondary cancer therapy for localized prostate cancer? Eur Urol 2012;62:966-72.

Book

Wein AJ, Kavoussi LR, Novick AC, Partin AW, Peters CA, editors. Campbell-Walsh urology. 9th ed. Philadelphia: Saunders; 2007.

Book chapter:

Klein Ea, Platz EA, Thompson IM, Epidemiology, etiology, and prevention of prostate cancer. In: Wein AJ, Kavoussi LR, Novick AC, Partin AW, Peters CA, editors. Campbell-Walsh urology. 9th ed. Philadelphia: Saunders; 2007. p. 2854-73.

Website:

International Committee of Medical Journal Editor. Uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publication [Internet]. Philadelphia: International Committee of Medical Journal Editor, c2009 [cited 2013 Jan 1]. Available from: http://www.icmje.org/urm_main.html.

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