

Manuscript Submission Guidelines

Publishing in the Nutritional Medicine Journal

The Nutritional Medicine Journal (NMJ) is a specialist peer-reviewed scientific publication related to the application of personalised dietary interventions, foods, dietary factors, and nutritional supplements in clinical practice.

Topics include clinical nutrition, personalised nutrition, lifestyle medicine in the context of nutritional medicine, micronutrients, amino acids, fatty acids, phytochemicals, probiotics, prebiotics, and functional beverages and foods.

Aims and Scope

The aim of the NMJ is to provide health professionals with authoritative and scientifically accurate articles on topics in nutritional medicine. Narrative reviews, systematic reviews, meta-analysis, original research relevant to clinical nutrition, qualitative and quantitative research, case reports that describe novel or interesting treatments, research letters, and hypothesis are considered for publication. All submitted articles undergo peer review before acceptance for publication.

If you are uncertain if your work falls within the scope of the journal, please email the title and abstract of the article to the Editor prior to submission.

Manuscript Types and Guidelines

Original Research

Original research should be focused on topics that have relevance to evidence-based clinical practice. Original research likely to be considered for publication include human clinical trials, N-of-1 trials, brief reports, pilot studies, cohort studies, case-control studies, epidemiologic assessments, observational studies, and qualitative research.

- Approximately 3,000-5,000-words (not including abstract, tables, figures, and references)
- Abstract of 300-400 words

- Reporting requirements:

Human clinical trials; Consolidated Standards of Reporting Trials (CONSORT)¹

N-of-1 trials; CONSORT extension for reporting N-of-1 trials (CENT)²

Observational studies; STrengthening the Reporting of OBservational studies in Epidemiology (STROBE)³

Ethical approval (if relevant)

Helsinki declaration (if clinical human intervention)

Review Articles

Narrative reviews, systematic reviews, and meta-analysis will be considered. Narrative or non-systematic reviews may address broad subject areas and should be accompanied by clear reasoning in the cover letter supporting the decision for not following a systematic review. Systematic reviews and meta-analyses should be critical assessments of research literature relating to clinical topics.

- Approximately 5,000-7,000-words (not including abstract, tables, figures, and references)
- Abstract of 300-400 words
- Reporting requirements:
 - Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA)⁴

Case Reports

Case reports should concisely describe unusual or novel observations and aim to stimulate further ideas or investigation relevant to clinical practice in a particular area. Positive treatment responses or adverse outcomes can be presented. Cases reports may be used to illustrate new theories. A review of literature relevant to the topic may be included.

- Approximately 2,000-4,000-words (not including abstract, tables, figures, and references)
- Abstract of 150-200 words
- Signed patient consent form
- Reporting requirements:
 - Case Report (CARE) statement and checklist⁵

Clinical Practice Guidelines

Clinical practice guidelines are statements that include recommendations intended to improve patient care. They cover step-by-step systematic clinical instructions for clinical practice to optimise patient management and care. Practice guidelines may be consensus-based or informed by a systematic review of evidence and are focused on clinical assessment, testing, and interventions.

- Approximately 5,000-7,000-words (not including abstract, tables, figures, and references)
- Abstract of 300-400 words
- Reporting requirements:
 - Appraisal of Guidelines for Research and Evaluation (AGREE) criteria⁶

Letters to the Editor

Letters to the editor are responses to an article previously published in NMJ.

- Approximately 5,000-1,000-words (not including abstract, tables, figures, and references)
- No abstract

Information for Authors

General peer-review and editorial procedure

All manuscripts are peer-reviewed by expert reviewers. The Editor performs an initial check of the manuscript's suitability upon receipt. The peer-review process is then performed by independent experts and at least two review reports are obtained per manuscript. Based on peer review comments the authors are required to perform adequate revisions, with a second round of peer-review if required, before a final decision to publish the manuscript. The final decision is made by the Editor. Accepted articles are copy-edited and English-edited.

Publication fees and charges

Articles published in NMJ are published in Open Access. Publication is currently free for authors. Costs of peer review, copyediting, typesetting, archiving, journal management, and article processing are paid for by the publisher (the Nutritional Medicine Institute). The publisher generates revenue to cover publication fees and charges from educational events, sponsorship, and advertising independently of manuscript processing and publication.

Open access

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Checklist for Authors

Cover letter

Include a brief cover letter that explains why you think your paper fits the scope of the journal.

All cover letters are required to include the following statements:

- We confirm that neither the manuscript nor any parts of its content are currently under consideration or published in another journal.
- All authors have approved the manuscript and agree with its submission to the Nutritional Medicine Journal

Affiliations

Authors affiliations should be provided.

Example of affiliation:

- Affiliation: Author A is with the Nutritional Medicine Institute, London, UK.

Corresponding author

An email address for the corresponding author should be provided. This will appear on the final publication.

Funding sources

Funding sources must be disclosed.

Example of funding disclosures:

- Funding: Author A received a non-restricted grant from Company X for the publication of this article. Company X was not involved in the manuscript preparation or final decision to publish this manuscript.

If no funding was received, the authors should state:

- Funding: No funding was received for this work.

Manuscript

Please send an electronic version of your manuscript, including the following:

- Title page, to include:
 - Title of manuscript
 - Running title
 - Authors' full names in publishing order
 - Authors affiliations
 - Corresponding author's name and email address
 - Funding sources
 - Declarations of interest
- Abstract, on a separate page
- Text, starting on a new page
- References, starting on a new page, numbered consecutively as they appear in the text, and following AMA format
- Tables, including title and legend, as a separate document. Number and title tables consecutively in the order in which they are mentioned in the text. Each column within a table should have a heading. Define abbreviations in the key and description.
- Images, including figure title and legend, as a separate document. Number and title images consecutively in the order in which they are mentioned in the text. Define abbreviations in the key and description.
- Permissions (e.g., for personal communications or reproduced figures)
- Author contributions (acknowledging each authors contribution to elements related to the research and development of the manuscript)
- Additional contributions (e.g., for image contribution, or additional input into the manuscript development)

References

- ¹Schulz KF, Altman DG, Moher D; CONSORT Group. CONSORT 2010 statement: updated guidelines for reporting parallel group randomised trials. *BMJ*. 2010 Mar 23;340:c332.
- ²Vohra S, Shamseer L, Sampson M, Bukutu C, Schmid CH, Tate R, Nikles J, Zucker DR, Kravitz R, Guyatt G, Altman DG, Moher D; CENT Group. CONSORT extension for reporting N-of-1 trials (CENT) 2015 Statement. *J Clin Epidemiol*. 2016 Aug;76:9-17.
- ³Vandenbroucke JP, von Elm E, Altman DG, Gøtzsche PC, Mulrow CD, Pocock SJ, Poole C, Schlesselman JJ, Egger M; STROBE Initiative. Strengthening the Reporting of Observational Studies in Epidemiology (STROBE): explanation and elaboration. *Int J Surg*. 2014 Dec;12(12):1500-24.
- ⁴Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, Moher D, Peters MDJ, Horsley T, Weeks L, Hempel S, Akl EA, Chang C, McGowan J, Stewart L, Hartling L, Aldcroft A, Wilson MG, Garritty C, Lewin S, Godfrey CM, Macdonald MT, Langlois EV, Soares-Weiser K, Moriarty J, Clifford T, Tunçalp Ö, Straus SE. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Ann Intern Med*. 2018 Oct 2;169(7):467-473.
- ⁵Riley DS, Barber MS, Kienle GS, Aronson JK, von Schoen-Angerer T, Tugwell P, Kiene H, Helfand M, Altman DG, Sox H, Werthmann PG, Moher D, Rison RA, Shamseer L, Koch CA, Sun GH, Hanaway P, Sudak NL, Kaszkin-Bettag M, Carpenter JE, Gagnier JJ. CARE guidelines for case reports: explanation and elaboration document. *J Clin Epidemiol*. 2017 Sep;89:218-235.
- ⁶The AGREE Reporting Checklist: a tool to improve reporting of clinical practice guidelines. *BMJ*. 2016 Sep 6;354:i4852.