Aims and Scope

Covering **advances in the field of psychotropic drugs**, *Pharmacopsychiatry* provides psychiatrists, neuroscientists and clinicians with **key clinical insights** and describes **new avenues of research and treatment**. The **pharmacological and neurobiological bases of psychiatric disorders** are discussed by presenting **clinical and experimental research**.

Includes articles on:
- Basic/translational/clinical psychopharmacology
- Biological psychiatry
- Neuroimaging and neurophysiology
- Basic and clinical neurosciences
- Biological psychology
- Pharmacogenetics

Submission of Papers

Pharmacopsychiatry accepts
- Original papers
- Review articles
- Letters to the Editors
- Commentaries

written in English.

All manuscripts must be submitted exclusively via the online submission system at *http://mc.manuscriptcentral.com/pharmacopsychiatry*.

Submissions of hardcopy manuscripts or by email will not be considered.

For submission of all manuscripts, please follow the instructions on the online submission system. Before submission, keep ready full metadata of all manuscripts (title, short running title, authors' names including affiliations and addresses, list of keywords and abstract). The author submitting the manuscript will be corresponding author. Figures should be uploaded separately as *.tif, *.jpg, *.ppt, *.doc or*.xls files (resolution: colored and black-white bitmaps: 300 dpi; diagrams and line drawings: 600 dpi minimum). Tables should be uploaded as a separate Word file (not as a .jpg file). Legends to figures and tables including Arabic numerals should be entered in the appropriate fields during the file upload. Please note that figures and tables should not be integrated into the main document, but a list with the legends of the figures and tables should be included here.

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Principally, only contributions will be accepted that have not been published previously, not even in summary form. The submitting author is requested to indicate where a similar topic has been published and whether he has submitted his paper in total or in part in any language as contribution either to a journal, a book chapter, or an abstract.
All original contributions should not exceed 6 printed pages (i.e. 5.000 words), including abstract, references, tables and figures.

Review Articles

Review articles are welcome. They are usually written on request. However, if an author wishes to submit a review article, he should write to the Editor-in-Chief or to an Editor prior to finalizing his article. Review articles should not exceed 6 printed pages (i.e. 5.000 words), including abstract, references, tables and figures.

Commentaries (invited)

Commentaries are welcome if they have been invited by one of our editors. The average length should not exceed more than 1 printed page (i.e. 1.000 words), no figures or tables please.

Letters to the Editors

Letters must refer to an article published in *Pharmacopsychiatry*. The average length should not exceed more than 1 printed page, including 1 table or 1 figure (i.e. 1.200 words).

Arrangement

Title page
The first page of each paper should indicate the title (main title underlined), the authors' names, and the institutions where the work was conducted and/or where the authors work.

Abstracts

Original Papers: provide a structured abstract not longer than 250 words. The abstract should be divided into four sections in the following order: Introduction, Methods, Results, Discussion.
Letters, short and rapid communications: please supply a short (ca. 100 words), non-structured abstract.
Reviews: also require a nonstructured abstract.

Key words

Please provide 3–5 key words.

Text

Generally, the text should be organized as follows: Introduction, Methods, Results, and Discussion. Type footnotes at the bottom of manuscript page on which they are cited. Credit suppliers of drugs, equipment, and other brand-name material mentioned in the paper in parentheses in text, giving company name and location. Type acknowledgments, including complete grant or subsidy information from both profit and nonprofit organizations, at the end of the text before the references.

Tables and figures

Tables and figures should be prepared in separate files. Tables require a heading and figures a legend, also prepared in a separate file. Cite illustrations, and tables in numerical order in the text. Order of mention in text determines the number given to each.
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Methodology section

Clinical trials: *The CONSORT Statement (www.consort-statement.org)* is considered the minimal standard for reporting randomized clinical trials in Pharmacopsychiatry. Pharmacopsychiatry supports clinical trial registration. No results of unregistered trials will be published. You will be prompted for trial registration information during submission. Approved registries are "http://www.clinicaltrials.gov"ClinicalTrials.gov and the HYPERLINK "http://www.who.int/ictrp/network/primary/en/index.html"Primary Registries of the WHO Registry Network. Registration in other databases will not be considered to sufficiently fulfill this condition.

Subjects: The total number of subjects included (cases intended to treat) should be given: the number and reason for dropouts should be indicated, and the number of valid cases as well as the criteria for selecting the valid cases should be given. The type of subjects, both volunteers and patients, should be described in detail; the therapeutic milieu should be mentioned.

Methods: All methods and variables (primary, secondary) used in a trial should be described. If not all variables are reported in this paper, then this should be indicated. For each method and variable either a detailed description including aspects of sensitivity, validity, reliability and/or adequate reference should be given.

Data presentation: The data presentation should enable a reader to comprehend to a maximum extent the results from the data. Prefer if applicable graphical displays. If each single parameter is not presented in distribution, state the mean standard deviation. 95% and 99% confidence interval of the mean resp. median, Q50, quartiles Q25 and Q75 should be given. It is not sufficient to present mean and p values only. For nominal or ordinal data frequency tables are applicable (absolute values, percentages).

Biometrics and statistics: The type of study (e.g. phase I, early or late phase II, phase III or IV) and the aims should be clearly defined. It is of relevance whether a study is performed to form or to test hypotheses. The statistical procedure, including the statistical model and the underlying assumptions should be presented in detail. If more than one statistical method is used for primary variables, the reason should be indicated. It should be stated clearly whether exploratory (pe) descriptive (pd) or confirmatory (pc) data analyses are done. If confirmatory statistics are done (e.g. in a phase III trial to prove efficacy), then the test strategy to avoid an inflation of the type I error (α) must be clearly indicated. If a comparison to a standard drug is done, the type II error (β) in relation to the difference must be taken into consideration.

Rater and interrater training: The type, qualification and experience of the raters should be indicated. If more than one rater was involved in one rating then it has to be indicated how care was taken of interrater reliability. This is of special importance if studies are performed in more than one ward of a hospital or center or as multicenter trials.

Monitoring: Indicate the type of study monitoring.

Ethics: Ethical considerations, benefits and risks of a trial must be mentioned: in addition, it should be indicated how informed consent was obtained, and the approval of an ethics committee must be stated where applicable.

References

The reference style follows the "*Uniform requirements for manuscripts submitted to biomedical journals*" of the International Committee of Medical Journal Editors (New Engl J Med 1997; 336: 309–315; the latest version is always available at *www.icmje.org*). **Use PubMed abbreviations for journal titles.** Citations and references should be numbered consecutively, using square brackets, in the order in which they are cited in the text, followed by any in tables or legends. Example: " ...serum concentrations were determined according to Lowry et al. [12]." Please do not number references under alphabetical order of authors. Do not use footnotes and hyperlinks. If authors are mentioned in the text, only the first author should be given followed by "et al." whenever the reference has three or more authors. If a reference has more than three authors, only name the first three followed by et al.

Articles in journals:

1. Broich K, Grünwald F, Kasper S et al. D2-Dopamine receptor occupancy measured by IBZM-SPECT in relation to extrapyramidal side effects. Pharmacopsychiatry 1998; 31: 159–162
2. Burda K, Czubak A, Nowakowska E et al. Interactions of nicotine and drugs used in the treatment of mental illnesses with respect to cognitive functions. Drug Res 2010; 60: 527–543

Chapters in books:

2. Ebel K-D. The Skull and Intracranial Space. In: Ebel KD, Blickman H, Willich E, Richter E, eds. Differential diagnosis in pediatric radiology. Stuttgart: Thieme; 1999: 449–592

Authors bear complete responsibility for the accuracy of the references.

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