

INSTRUCTIONS TO AUTHORS

Aims and Scope

Intestinal Research (Intest Res) is the official journal of Asian Organization for Crohn's and Colitis (AOCC) and the joint publication of Chinese Society of IBD (CSIBD), Japanese Society for IBD (JSIBD), Korean Association for the Study of Intestinal Diseases (KASID), Taiwan Society of IBD (TSIBD) and Colitis and Crohn's Foundation (India) (CCF, India).

The aim of the journal is to provide broad and in-depth analysis of intestinal diseases, especially inflammatory bowel disease, which shows increasing tendency and significance. As a journal specialized in clinical and translational research in gastroenterology, it encompasses multiple aspects of diseases originated from the small and large intestines. The journal also seeks to propagate and exchange useful innovations, both in ideas and in practice, within the research community.

As a mode of scholarly communication, it encourages scientific investigation through the rigorous peer-review system and constitutes a qualified and continual platform for sharing studies of researchers and practitioners. Specifically, the journal presents up-to-date coverage of medical researches on the physiology, epidemiology, pathophysiology, clinical presentations, and therapeutic interventions of the intestinal diseases. General topics of interest include inflammatory bowel disease, colon and small intestine cancer or polyp, endoscopy, irritable bowel syndrome and other motility disorders, infectious enterocolitis, intestinal tuberculosis, and so forth.

Research Ethics

This regulation is revised based on the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (ICMJE, <http://www.icmje.org>) and are supplemented ethical principles and rules for references.

1) The manuscripts with following misconduct or dishonest act cannot be published either online or in journals.

- (1) Forgery (Fabrication): Record or reporting with mak-

ing up data or research results that do not exist.

- (2) Alteration (Falsification): Manipulate research data, equipment, processes, or results intentionally to distort research contents or results.
- (3) Plagiarism: Using others' ideas, research process, contents, and/or results without proper authorization or citation.

2) Only original contribution that has not been previously published or submitted elsewhere can be submitted.

- (1) Submissions are accepted only when they are not submitted elsewhere and have not been published elsewhere. All or part of manuscripts that are already published or submitted to *Intestinal Research* cannot publish in any other publication without permission of editorial board.
- (2) Multiple or duplicate publication is only limited to review article or publication with other language after receive approval from both journals.
- (3) The Journal does not accept any divided or salami manuscripts.
- (4) Misconduct or any other ethical violation will be judged (decided) on final deliberation by Editorial Board.

3) The manuscripts submitted to *Intestinal Research* should satisfy following ethical requirement.

- (1) When reporting experiments on human subjects, the manuscript must include a statement of acquirement of informed consent after indicate all possible physical and psychological damages on subjects and/or their guardians before the experiment is conducted, in accordance with the Helsinki (<http://www.wma.net>) of 1975.
- (2) In case of clinical research including clinical trial, the manuscript must include a statement of approval from Institutional Review Board (IRB) or ethic committee (revised June 2009) and status of informed consent (revised October 2017).
- (3) In case of clinical trial, we recommend register the

clinical trial in public registry site that matches the criteria established by ICMJE or WHO to ensure scientific objectivity and transparency of study procedure (revised June 2010).

- (4) Author must have obtained informed consent from identifiable patient, if author plan to include any personal information including photo, image, illustration and video. Any information that could have revealed patient's and research subjects' identities, such as name, initials, ethnicity, occupation or date of birth, should not appear as much as possible. Formal consents are waived for the use of entirely anonymized image from which the individual cannot be identified. (revised October 2017).
- (5) When reporting experiments on animals, authors should describe the measures they have taken to ease pains and inconvenience to the subjects, and a statement identifying whether the NIH Guide for the Care and Use of laboratory Animals or IRB guideline was followed. When necessary, Editorial Board ask for approval letter issued by IRB or Animal Ethics Committee.

4) Corrections of errors (revised August 2018)

- (1) Intestinal Research will publish corrections as soon as possible detailing changes from and citing the original publication when errors are detected. We follow the ICMJE and COPE guidelines where applicable.
- (2) An erratum refers to a production error, caused by the journal.
- (3) A corrigendum refers to an error made by the authors.
- (4) Authors who notice an error should contact the editorial office of the journal.

For more information including administration of research ethics violation, please check out the "ETHICAL POLICIES OF INTESTINAL RESEARCH" (www.irjournal.org).

Preparing a Manuscript for Submission

1) General principles

- (1) MS Word (.doc) should be used for manuscripts. The manuscripts must be written with double-spacing and 3 cm margins on A4 sized format.
- (2) The pages of manuscripts must be numbered consecutively, beginning on the title page and located at the center of the footer.

- (3) Manuscripts should be written in English. Medical terminology should be followed by the recent terminology book. For abbreviations, authors can refer to the "Common Abbreviations and Acronyms" provided by the journal. Other abbreviations, which are not listed on it, must be defined at the first mention in the text using parentheses. Abbreviations should be used in case that they appear in the text at least 3 times. Do not use abbreviation(s) in the title. It is helpful if a separate list is provided of any abbreviations.
- (4) When the use of reagents or devices is reported in the text, the name of manufacturer, city, state, and country should be indicated.
- (5) The use of the International System of Units (SI) is encouraged.
- (6) The text of original articles is organized in the following order; title page, abstract, introduction, methods, results, discussion, acknowledgments, references, figure legends and tables.

2) Title page

The title page should have the following information in order. Article title, authors (affiliation, name), shortened title, contact information for corresponding authors (name, mailing address, telephone and fax numbers, and e-mail address of the author responsible for correspondence regarding the manuscript). A short running title should be provided if the article title is longer than 12 words. When authors have multiple affiliations, list the affiliation where most of the research was conducted. Other affiliations should follow the major affiliation with superscripts on each of them. The superscripts (only Arabic numerals) should refer to the co-authors belonging to the various affiliations as the first author. Authors must declare all financial, if relevant, any editorial assistance received to support the underlying research project and/or the preparation of the article for submission.

3) Abstract

Abstracts for original articles must be 200–250 words and should be divided with the headings: Background/Aims, Methods, Results, Conclusions. Case reports and reviews should be an unstructured paragraph, and it must be 150–200 words. No references should be cited in the abstract.

4) Key words

A list of key words (3–5 words) should be provided below the

abstract. Each key word should start with a capitalized letter, and be separated by a semi colon. Use of terms from the medical subject headings (MeSH) list of Index Medicus is recommended (<http://www.nlm.nih.gov/mesh/meshhome.html>).

5) Main text

(1) *Original Articles*

All original manuscripts must include the following:

- **Introduction** - Provide a context or background for the study, which must be explicitly related to the aims of the study. The introduction should not contain either results or conclusions.
- **Methods** - Describe the plan of research, characteristics of subjects, and the length and methods of observation in as much details as possible. Statistical methods used should be outlined. Indicate that the study has received the permission from the ethical committee for experiments on human subjects, and from the animal experiments committee for experiments on animals.

Description of participants follows the ICMJE recommendations - Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance.

- **Results** - Results should be presented in logical sequence in the text. Tables and illustrations and repetitive presentation of the same data in different forms should be avoided. The results should not include material appropriate to the discussion. All data in the text must be presented consistently.
- **Discussion** - Discussion should explain results in relation to any hypotheses advanced in the introduction. This may include an evaluation of the methodology and of the relationship of new information to the existing corpus of knowledge in that field. Emphasize the new and important aspects of the study and the conclusions that follow from them in the context of the aim of the study.

(2) *Case Reports*

General rules for original articles apply to other types of man-

uscripts as well. The format should include introduction, case report, and discussion which are similar to that of an original article. The abstract must be 150–200 words and list key words of 3–5 words. Describe briefly the case and other issues that are only directly related to the case. Avoid an exhaustive literature review, but provide a focused discussion on the aspects of interest that the reported case brings in. List no more than 20 references.

(3) *Reviews*

Review articles, focused on specific topics of research, are submitted only if requested by the editorial board. The format and structure of review articles follow those of original articles, but authors can change them freely, if necessary. An abstract must be included in 150–200 words.

(4) *Letters to the Editor or Brief Communication*

The journal welcomes readers' comments on articles published recently in the journal or topics of interest. Letters to the editor or brief communication will be the rapid publication of new findings of unique importance in clinical settings that lead to the new direction of a short and concise communication. It could be organized in the following sequence: the title, main text (not divided into separate section), references, tables, and figures. Abstract is not required. The number of tables and figures in total should not exceed 3. References should not exceed 10.

(5) *Editorial*

Editorials express opinions on current topics of interest or provide comments on papers published elsewhere in the same issue. Editorials are usually solicited by the editor. Tables and/or figures may be included. References should not exceed 10.

(6) *Perspective, Statement or Commentary*

Perspective or Commentary present a viewpoint on an important area of research. Perspective focus on a specific field or subfield within a larger discipline and discuss current advances and future directions. Perspective or commentary is written only at the invitation of the Editorial Board. The formatting requirements for Perspectives or Commentary are similar to those for Letters to the Editor. Statements are welcome on any topic. They can be overview statements, comments about surveys, and evidence-based or eminence-based consensus recommendations. They should contain a tight linear argument and be more than just a mini-review. The format and structure

of Statements follow those of Review Articles.

(7) Images of the Issue

General rules for case reports apply to images as well. This section presents unusual or classic, challenging or informative images. The format should include title page, question with short case description, answers, references and images. Discussion should include important features of the images, differential diagnosis, and clinical significance. Number of references should be less than 5. Up to 4 figures of high quality are accepted.

(8) Corrigenda and Errata

6) Acknowledgements

A brief Acknowledgement of persons who made a genuine contribution, yet not active and sufficient enough to be co-authors.

7) Author contribution

What authors have done for the study should be described in this section. *Intestinal Research* participates in the CRediT standard for author contributions. The contributions of all authors must be described using the CRediT Taxonomy of author roles. For each of the categories below, please enter the initials of the authors who contributed in that category. If listing more than one author in a category, separate each set of initials with a space. If no one contributed in a category, you may leave that box blank. The corresponding author is responsible for completing this information at submission, and it is expected that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time.

An example:

Conceptualization: AB. Methodology: AB, CD, EFG. Formal analysis: EFG. Funding acquisition: AB. Project administration: AB. Visualization: CD, EFG. Writing - original draft: CD, EFG. Writing - review and editing: AB, CD, EFG. Approval of final manuscript: all authors.

8) References

References should be numbered consecutively as a superscript in the order in which they are first mentioned in the text, and listed at the end of the manuscript. The names of all authors should be cited up to 6 authors; in case there are more than 6 authors, the first three authors should be cited, followed by the

expression "et al." Journal titles are abbreviated in accordance with the style of Index Medicus. Abstracts are not accepted as a reference.

Examples of reference style:

Journal articles

Lee JK, Kim YS, Kim SE, Ryu SH, Lee JW, Moon JS. Comparative value of sigmoidoscopy and stool cytotoxin-A assay for diagnosis of pseudomembranous colitis. *Intest Res* 2005;3:61-67.

Foroughi S, Foster B, Kim N, et al. Anti-IgE treatment of eosinophil-associated gastrointestinal disorders. *J Allergy Clin Immunol* 2007;120:594-601.

Supplement

Parsonnet J. *Helicobacter pylori*: the size of the problem. *Gut* 1998;43(Suppl 1):S6-S9.

Online journal

Wiffen PJ, Derry S, Moore RA, et al. Buprenorphine for neuropathic pain in adults. *Cochrane Database Syst Rev* 2015; 9:CD011603. doi:10.1002/14651858.CD011603.pub2.

Asger A, Møller JM, Daugaard PC, et al. Effects of phosphodiesterase-5 inhibition by sildenafil in the pressure overloaded right heart. *Eur J Heart Fail*. [published online ahead of print March 12, 2008]. <https://doi.org/10.1016/j.jheart.2008.09.016>.

Books

Day RA. *How to write and publish a scientific paper*. 3rd ed. Phoenix: Oryx, 1988.

A chapter in a book

Costa M, Furness JB, Llewellyn-Smith IF. Histo-chemistry of the enteric nervous system. In: Johnson LR, ed. *Physiology of the gastrointestinal tract*. Volume 1. 2nd ed. New York: Raven, 1987:1-40.

Websites

Understanding cancer pain - What is cancer pain? Cancer-Pain Web site. <http://www.cancer-pain.org/understanding/whatis.html>. Updated July 26, 2002. Accessed May 16, 2015.

Other literatures

Refet to International Committee of Medical Journal Editors

Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Sample References. http://www.nlm.nih.gov/bsd/uniform_requirements.html.

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9) Tables

Each table must be simple and typed on a separate page. All tables should be numbered consecutively in the order in which they are first mentioned in the text. Each table should have a clear and self-explanatory title (a form of clause or phrase is encouraged) without a period. Capitalize the first letter of nouns and adjectives. Vertical rules and horizontal rules between entries should be omitted. If abbreviations are used, provide with a note showing the original terms at the bottom of the table. For footnotes, use the following symbols, in sequence: a, b, c, d, e, f, g, h, i...

10) Figure legends

Figure legends should be typed double-spaced on a separate sheet. Provide with a subtitle and explanation for the figure in English as brief as one paragraph. When presenting a micro-photograph, indicate stain methods and level of magnification.

11) Figure

Only high-resolution figure files (minimum 300 dpi) should be submitted, preferably in JPEG, GIF or TIF format. Each figure should be submitted in a separate single file. Figures should be numbered consecutively in the order in which they are first mentioned in the text. Symbols, arrows, and letters should be used to indicate parts of illustrations. If a figure has been published previously, acknowledge the original source and submit written permission from the copyright holder to reproduce the figure. The authors should state at the bottom of the figure that they received the permission. All types of figures may be reduced, enlarged, or trimmed for publication by the editor.

Submission of Manuscript

1) Online submission system

All manuscripts must be submitted through the online submission system of the journal (<http://www.irjournal.org/submission>). If you have any questions, please contact the Editorial Office.

The Editorial Office Contact Information

Intestinal Research Editorial Office

Address: Room 305, Lotte Gold Rose II, 31 Seolleung-ro

2) Peer review

The peer review afterward is conducted through the system as well. All manuscripts undergo peer review by at least two reviewers with relevant expertise who are selected by the editorial board. The decision to publish will be made by the editorial board of the journal after the peer review. If the data need professional statistical review by a statistician, statistical editing is performed. The board has the right to reject and demand the revision of the submitted manuscripts if the board believes that the manuscripts do not abide by the rules of the regulations. The editorial board has the right to revise and edit the styles and structures of submitted manuscripts within the context if necessary. Once the decision on publication as an accept, revision or reject is made, it is directly notified to the corresponding author. The corresponding author must indicate clearly what alterations have been made in response to the referee's comments point by point. Acceptable reasons should be given for noncompliance with any recommendation of the referees. It is the responsibility of the corresponding author to ensure that the authors concerned are aware of and agree to the change in authorship. *Intestinal Research* has no responsibility for such changes. After the final draft of manuscripts are proven to be appropriate according to the publication policies and styles of the journal, the decision of publication is finalized and expected publication date will be given. Rejected manuscripts are not to be considered again.

3) Copyright

Upon the submission of manuscripts, all authors must sign and submit the "Copyright Transfer Agreement Form," and it is not permitted to change the first or corresponding author, or to add or remove co-author(s) once the manuscript is submitted. The Copyright Transfer Agreement Form must be submitted through the online submission system of the journal (<http://www.irjournal.org/submission>).

4) Ethical policies check lists

Upon the submission of manuscripts, corresponding author must check and sign the "Ethical policies check lists." This form must be submitted through the online submission system of the journal (<http://www.irjournal.org/submission>).

5) Manuscripts checklists

Before the submission, the authors are advised to check the “manuscripts checklist” (available at http://www.irjournal.org/authors/IR_checklist.pdf) for the correct composition. The editorial board may return the submitted manuscripts if they are not correctly composed according to the “checklist” for technical reasons. Authors should revise their manuscripts according to the regulations before resubmission.

Others

1) Similarity check

Similarity Check is a multi-publisher initiative to screen published and submitted content for originality. To find out more about Similarity Check, visit <http://www.crossref.org/cross->

[check/index.html](#). All manuscripts submitted to Clinics in Shoulder and Elbow may be screened, using the iThenticate tool, for textual similarity to other previously published works.

2) Conflict of interest

Any financial arrangements (e.g., employment, consultancies, honoraria, etc) related to the manuscript should be stated in title page. Authors are responsible for obtaining written permission to use any copyrighted text and/or illustration. All funding related with the work should be specifically stated.

3) Publication charges

There is no article processing charge or submission-related fees to author-side until there is a policy change.