

Instructions for Authors 2019

General Policy. ANTICANCER RESEARCH (AR) will accept original high quality works and reviews on all aspects of experimental and clinical cancer research. The Editorial Policy suggests that priority will be given to papers advancing the understanding of cancer causation, and to papers applying the results of basic research to cancer diagnosis, prognosis, and therapy. AR will also accept the following for publication: (a) Abstracts and Proceedings of scientific meetings on cancer, following consideration and approval by the Editorial Board; (b) Announcements of meetings related to cancer research; (c) Short reviews (of approximately 120 words) and announcements of newly received books and journals related to cancer, and (d) Announcements of awards and prizes.

The principal aim of AR is to provide prompt publication (print and online) for original works of high quality, generally within 1-2 months from final acceptance. Manuscripts will be accepted on the understanding that they report original unpublished works in the field of cancer research that are not under consideration for publication by another journal, and that they will not be published again in the same form. All authors should sign a submission letter confirming the approval of their article contents. All material submitted to AR will be subject to peer-review, when appropriate, by two members of the Editorial Board and by one suitable outside referee. All manuscripts submitted to AR are urgently treated with absolute confidence, with access restricted to the Managing Editor, the journal's secretary, the reviewers and the printers. The Editors reserve the right to improve manuscripts on grammar and style.

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Format. Two types of papers may be submitted: (i) Full papers containing completed original work, and (ii) review articles concerning fields of recognisable progress. Papers should contain all essential data in order to make the presentation clear. Reasonable economy should be exercised with respect to the number of tables and illustrations used. Papers should be written in clear, concise English. Spelling should follow that given in the "Shorter Oxford English Dictionary".

Manuscripts. Submitted manuscripts exceeding 4 printed pages will be subject to excess page charges. The 4 printed pages correspond approximately to twelve (12) document pages (~250 words per double-spaced typed page in Arial 12), including abstract, text, tables, figures, and references. All manuscripts should be divided into the following sections: (a) *First page* including the title of the presented work [not exceeding fifteen (15) words], full names and full postal addresses of all Authors, name of the Author to whom proofs are to be sent, key words, an abbreviated running title, an indication "review", "clinical", "epidemiological", or "experimental" study, and the date of submission. (Note: The order of the Authors is not necessarily indicative of their contribution to the work. Authors may note their individual contribution(s) in the appropriate section(s) of the presented work); (b) *Abstract* not exceeding 150 words, organized according to the following headings: Background/Aim – Materials and Methods/Patients and Methods – Results – Conclusion; (c) *Introduction*; (d) *Materials and Methods/Patients and Methods*; (e) *Results*; (f) *Discussion*; (g) *Conflicts of Interest*; (h) *Authors' contributions*; (i) *Acknowledgements*; (j) *References*. All pages must be numbered consecutively. Footnotes should be avoided. Review articles may follow a different style according to the subject matter and the Author's opinion. Review articles should not exceed 35 pages (approximately 250 words per double-spaced typed page) including all tables, figures, and references.

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References. Authors must assume responsibility for the accuracy of the references used. Citations for the reference sections of submitted works should follow the form below and must be numbered consecutively. In the text, references should be cited by number in parenthesis. Examples: 1 Kenyon J, Liu W and Dagleish A: Report of objective clinical responses of cancer patients to pharmaceutical-grade synthetic cannabidiol. *Anticancer Res* 38(10): 5831-5835, 2018. PMID: 30275207. DOI: 10.21873/anticancer.12924. (PMIDs and DOIs only if applicable). 2 McGuire WL and Chamnes GC: Studies on the oestrogen receptor in breast cancer. In: *Receptors for Reproductive Hormones*. O' Malley BW, Chamnes GC (eds.). New York, Plenum Publ Corp., pp 113-136, 1973. 3 Global Health Estimates 2015: Disease Burden by Cause, Age, Sex, by Country and by Region, 2000-2015. Geneva, World Health Organisation, 2016. Available at http://www.who.int/healthinfo/global_burden_disease/estimates/en/index2.html. Last accessed on 3rd April 2018. (The web address should link directly to the cited information and not to a generic webpage).

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For International Standard Randomised Controlled Trials (ISRCTN) Registry (a not-for-profit organization whose registry is administered by Current Controlled Trials Ltd.) the unique number must be provided in this format: ISRCTNXXXXXXXX (where XXXXXXXX represents the unique number, always prefixed by “ISRCTN”). Please note that there is no space between the prefix “ISRCTN” and the number. Example: ISRCTN47956475.

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Specific information and additional instructions for Authors

1. Anticancer Research (AR) closely follows the new developments in all fields of experimental and clinical cancer research by (a) inviting reviews on topics of immediate importance and substantial progress in the last three years, and (b) providing the highest priority for rapid publication to manuscripts presenting original results judged to be of exceptional value. Theoretical papers will only be considered and accepted if they bear a significant impact or formulate existing knowledge for the benefit of research progress.
2. Anticancer Research will consider the publication of conference proceedings and/or abstracts provided that the material submitted fulfils the quality requirements and instructions of the journal, following the regular review process by two suitable referees.
3. An acknowledgement of receipt, including the article number, title and date of receipt is sent to the corresponding author of each manuscript upon receipt. If this receipt is not received within 20 days from submission, the author should call or write to the Editorial Office to ensure that the manuscript (or the receipt) was not lost in the mail or during electronic submission.
4. Each manuscript submitted to AR is sent for review in confidence to two suitable referees with the request to return the manuscript with their comments to the Editorial Office within 12 days from receipt. If reviewers need a longer time or wish to send the manuscript to another expert, the manuscript may be returned to the Editorial Office with a delay. All manuscripts submitted to AR, are treated in confidence, without access to any person other than the Managing Editor, the journal’s secretary, the reviewers and the printers.
5. All accepted manuscripts are peer-reviewed and carefully corrected in style and language, if necessary, to make presentation clear. (There is no fee for this service). Every effort is made (a) to maintain the personal style of the author’s writing and (b) to avoid change of meaning. Authors will be requested to examine carefully manuscripts which have undergone language correction at the pre-proof or proof stage.

6. Authors should pay attention to the following points when writing an article for AR:
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 - The presentation of the experimental methods should be clear and complete in every detail facilitating reproducibility by other scientists.
 - The presentation of results should be simple and straightforward in style. Results and discussion should not be combined into one section, unless the paper is short.
 - Results given in figures should not be repeated in tables.
 - Figures (graphs or photographs) should be prepared at a width of 8 or 17 cm with legible numbers and lettering.
 - Photographs should be clear with high contrast, presenting the actual observation described in the legend and in the text. Each legend should provide a complete description, being self-explanatory, including technique of preparation, information about the specimen and magnification.
 - Statistical analysis should be elaborated wherever it is necessary. Simplification of presentation by giving only numerical or % values should be avoided.
 - Fidelity of the techniques and reproducibility of the results, should be points of particular importance in the discussion section. Authors are advised to check the correctness of their methods and results carefully before writing an article. Probable or dubious explanations should be avoided.
 - Authors should not cite results submitted for publication in the reference section. Such results may be described briefly in the text with a note in parenthesis (submitted for publication by... authors, year).
 - The References section should provide as complete a coverage of the literature as possible including all the relevant works published up to the time of submission.
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General Policy

- **IN VIVO** is a multidisciplinary journal designed to bring together original high quality works and reviews on experimental and clinical biomedical research within the frames of human physiology, pathology and disease management. A special focus of the journal is the publication of works on: (a) Experimental development and application of new diagnostic procedures; (b) Pharmacological and toxicological evaluation of new drugs and drug combinations; (c) Clinical trials; (d) Development and characterization of models of biomedical research.
- The principal aim of **IN VIVO** is to provide prompt online publication for accepted articles, generally within 1-2 months from final acceptance (3 months from submission).
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● Selection of Recent Articles

Amelioration of Amyotrophic Lateral Sclerosis (ALS) in SOD1^{G93A} Mice by Transplanted Marrow Origin M₂ Microglia. M.W. EPPERLY, R. FISHER, L. RIGATTI, S. WATKINS, X. ZHANG, W. HOU, D. SHIELDS, D. FRANICOLA, H. BAYIR, H. WANG, S. THERMOZIER, A. HENDERSON, C. DONNELLY, P. WIPF, J.S. GREENBERGER (Pittsburgh, PA, USA)

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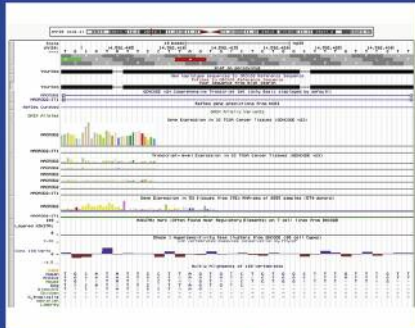
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CANCER GENOMICS & PROTEOMICS

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General Policy

- **CANCER GENOMICS & PROTEOMICS (CGP)** welcomes submissions of original high quality articles and reviews on all aspects of the application of genomic and proteomic technologies to experimental and clinical cancer research. The journal's scientific spectrum includes: (a) molecular causes of carcinogenesis, cancer progression and metastasis; (b) structural and functional aspects of genes in the cancer cell; (c) advances in genomic and proteomic technologies applicable to cancer research; (d) anticancer drug design and drug development. A main aim of CGP is to ensure the prompt and confidential review, and rapid publication of original works and reviews, generally within 1-3 months from submission.
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● Selection of Recent Articles

Multiregion Genomic Analysis of Serially Transplanted Patient-derived Xenograft Tumors. K. SATO, A. NIIDA, T. MASUDA, D. SHIMIZU, T. TOBO, Y. KURODA, H. EGUCHI, T. NAKAGAWA, Y. SUZUKI, K. MIMORI (*Oita; Fukuoka; Tokyo; Chiba, Japan*)

MicroRNAs as Potential Targets for Therapeutic Intervention With Metastasis of Non-small Cell Lung Cancer. U.H. WEIDLE, F. BIRZELE, A. NOPORA (*Penzberg, Germany; Basel, Switzerland*)

Three Poliovirus Sequences in the Human Genome Associated With Colorectal Cancer. S. LEHRER, P.H. RHEINSTEIN (*New York, NY, USA*)

mRNA Expression of CDK2AP1 in Human Breast Cancer: Correlation with Clinical and Pathological Parameters. R. GERA, L. MOKBEL, W.G. JIANG, K. MOKBEL (*London; Cardiff, UK*)

Molecular Genetic Characterization of Acute Myeloid Leukemia With Trisomy 4 as the Sole Chromosome Abnormality. S. TORKILDSEN, L. GORUNOVA, S. HEIM, G.E. TJØNNFJORD, S. SPETALEN, B. RISBERG, H.T.T. TRAN, I. PANAGOPOULOS (*Oslo; Lørenskog, Norway*)

Isoforms of Ionotropic Glutamate Receptor GRIK2 Induce Senescence of Carcinoma Cells. V.K. ZHAWAR, R.P. KANDPAL, R.S. ATHWAL (*Philadelphia, PA; Pomona, CA, USA*)

Human Periprostatic Adipose Tissue: Secretome from Patients With Prostate Cancer or Benign Prostate Hyperplasia. P.A. SACCA, O.N. MAZZA, C. SCORTICATI, G. VITAGLIANO, G. CASAS, J.C. CALVO (*Buenos Aires, Argentina*)

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