



ALZHEIMER'S & DEMENTIA: TRANSLATIONAL RESEARCH & CLINICAL INTERVENTIONS

AUTHOR INFORMATION PACK

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DESCRIPTION

AIMS AND SCOPE ABOUT THE JOURNAL

Alzheimer's & Dementia: Translational Research & Clinical Interventions (TRCI) is a peer-reviewed, open access journal from the Alzheimer's Association®. The journal seeks to bridge the full scope of explorations between basic research on drug discovery and clinical studies, validating putative therapies for aging-related chronic brain conditions that affect cognition, motor functions, and other behavioral or clinical symptoms associated with all forms dementia and Alzheimer's disease. The journal will publish findings from diverse domains of research and disciplines to accelerate the conversion of abstract facts into practical knowledge: specifically, to translate what is learned at the bench into bedside applications.

The journal seeks to publish articles that go beyond a singular emphasis on either basic drug discovery research or clinical research. Rather, an important theme of articles will be the linkages *between and among* the various discrete steps in the complex continuum of therapy development.

For rapid communication among a multidisciplinary research audience involving the range of therapeutic interventions, *TRCI* will consider only original contributions that include feature length research articles, systematic reviews, meta-analyses, brief reports, narrative reviews, commentaries, letters, perspectives, and research news that would advance wide range of interventions to ameliorate symptoms or alter the progression of chronic neurocognitive disorders such as dementia and Alzheimer's disease.

The journal will publish on topics related to medicine, geriatrics, neuroscience, neurophysiology, neurology, psychiatry, clinical psychology, bioinformatics, pharmaco-genetics, regulatory issues, health economics, pharmacoeconomics, and public health policy as these apply to preclinical and clinical research on therapeutics.

The forms of interventions that are of special interest include, but not limited to: drugs, biologics, devices, and psychotherapeutic, psychosocial, and non-pharmacological modalities. The types of research considered may range from animal model, early discovery and preclinical development to late-stage clinical trials and health technology assessment. Key topics for the journal include a broad array questions or approaches to research such as discovery, related-early protein chemistry, cell biology, mechanistic/exploratory/therapeutic animal models, therapeutic development, clinical pharmacology, preclinical studies, and the application of neuropsychology, clinical ratings, clinical

trials methods, neuroimaging, biomarkers, clinical research informatics, and other interdisciplinary approaches relevant to clinical therapeutics and outcomes.

Given the growing number of specialized manuscripts in the field of Alzheimer's and dementia research, *TRCI* provides an expanded platform for the publication of preclinical and clinical translational research. *TRCI* encourages the submission of manuscripts that describe preclinical research with a potential for clinical application, research from early human experimentation (experimental medicine) that may advance clinical treatment and prevention of Alzheimer pathology, neurodegeneration, and cognitive impairment.

Alzheimer's & Dementia: Translational Research & Clinical Interventions will publish manuscripts describing public health research with the potential for application for disease prevention or clinical therapeutics that bridges the laboratory and clinical settings, and laboratory studies of novel therapeutic interventions and new treatment paradigms. *TRCI* will provide a rapid communication vehicle for manuscripts that focus on translation and clinical research methods, procedures, protocols, analytical approaches and regulatory science.

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GUIDE FOR AUTHORS

Aims & Scope

Alzheimer's & Dementia: Translational Research & Clinical Interventions (TRCI) is a peer-reviewed, open access, journal of the Alzheimer's Association®. The journal seeks to bridge the full scope of explorations between basic research on drug discovery and clinical studies, validating putative therapies for aging-related chronic brain conditions that affect cognition, motor functions, and other behavioral or clinical symptoms associated with all forms dementia and Alzheimer's disease. The journal will publish findings from diverse domains of research and disciplines to accelerate the conversion of abstract facts into practical knowledge: specifically, to translate what is learned at the bench into bedside applications.

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Research In Context

Alzheimer's & Dementia: Translational Research & Clinical Interventions requires a section called "Research in Context". Authors must provide a summary, similar to an abstract, for inclusion during the online submission process. In the summary of 150 words or less, authors must place their results or findings into context with previous work.

The section has three elements.

The "systematic review" subheading describes the process authors used to search, identify, and evaluate the accumulated knowledge related to their scientific question. The "interpretation" subheading requires authors to declare what their findings contribute to the entirety of the accumulated knowledge related to the question of interest described in the paper. The "future directions" subheading challenges authors to state specifically the important scientific question or questions that are necessary to expand, confirm, or refute the author's findings in future research activities. Authors must be specific in outlining or defining future research directions or crucial questions that yet need to be answered.

Here is an example for the Research in Context section:

Systematic review: The authors reviewed the literature using traditional (e.g., PubMed) sources and meeting abstracts and presentations. While the pathophysiology of ARIA is not yet as widely studied as other aspects of AD biology, there have been several recent publications describing the clinical aspects of ARIA. These relevant citations are appropriately cited. **Interpretation:** Our findings led to an integrated hypothesis describing the pathophysiology of ARIA. This hypothesis is consistent with nonclinical and clinical findings currently in the public domain. **Future directions:** The manuscript proposes a framework for the generation of new hypotheses and the conduct of additional studies. Examples include further understanding: (a) the role of perivascular clearance pathways on vascular changes following anti-A β immunotherapy; (b) the role of alterations in water clearance mechanisms in the resolution of ARIA; (c) the potential reversibility of microhemorrhage events in the clinical setting; and (d) the relationship between the pathophysiology of ARIA-E and ARIA-H. Please see the editorial on page 171 in the March 2012 issue for further details.

Article Types

Review Articles:

Comprehensive Reviews are commissioned papers by the editors to provide comprehensive and balanced coverage of a timely and/or controversial issue by a recognized authority. Uninvited paper will not be reviewed. The invited review should integrate different points of view on groundbreaking, fast-moving or contentious topics with the objective of translating, informing or educating a wide multi-disciplinary audience about varying perspective. *Reviews* should provide a brief overview or background of critical issues and then concentrate on setting recent findings in context. It is crucial for all *Reviews*, particularly those tackling controversial topics, to provide a well-balanced view of developments; authors must never concentrate unduly on their own research. *Reviews*, unlike *Research Articles*, do allow some speculation designed to foster the formulation or testing of new hypothesis.

Reviews must include an abstract of approximately 300 words. Length of a *Review article* may not exceed 10,000 words (excluding the abstract, references, figures, and tables), a maximum of 60 references, no more than six figures, boxes or tables.

Perspectives and Open-Peer Commentaries:

Perspectives and *Open-Peer Commentaries* provide personal in-depth viewpoints, rather than a review, on hotly debated topics; controversial theoretical, research or policy issues. *Perspectives* should: a) stimulate debate, b) present new models or hypotheses, c) suggest future experiments, directions of research or policies and/or, d) speculate on the meaning/interpretation of new discoveries/data. Articles that merely outline recent advances rather than provide a thought provoking opinion on them are not suitable for this section of the Journal.

Perspectives must include an abstract of approximately 300 words. Length of a *Perspective* article may not exceed 5,000 words, a maximum of 50 references, no more than six figures, boxes or tables.

Open-Peer Commentaries must include an abstract of approximately 300 words. Length of *Open-Peer Commentaries* **may** not exceed 1,500 words (excluding the abstract, references, figures, and tables), a maximum of 20 references, no more than two figures, boxes or tables.

Research Articles:

Research Articles cover hypothesis driven research or evidence-based validation studies in any of the following generic areas of study: Biology, Chemistry, Clinical/Medical Interventions, Behavior/Neuropsychology, Social Sciences, Nursing, Health Economics, Health Services Research and Public Policy. Manuscripts must include: a) Structured Abstract, b) Background, c) Methods, d) Results, e) Discussion, f) References, g) Acknowledgements/Conflicts/Funding Sources and, h) Key Words. The manuscript, and specifically the abstract, should be written such that a diverse audience will understand the central research question and the significance of the findings or conclusion of the study.

Research Articles must include a structured abstract, using the IMRAD format (specifically, INTRODUCTION, METHODS, RESULTS, DISCUSSION, using all uppercase letters followed by a colon and space), not exceeding 300 words. Length may not exceed 3,500 words (excluding the abstract, references, figures, and tables), a maximum of 50 references, no more than six figures, boxes or tables.

All *Research Articles* must include a "Research in Context" section.

Short Reports:

Short Reports are brief communications dealing with Case Studies or information on Clinical Trials [including the negative results and/or adverse events in clinical studies]. *Short Reports* will also cover brief articles on the utility or potential applications of a new technique, instruments or analytical approaches; rather than the detail of the technique per se, which can be references for readers interested in complete technical details. These articles should educate and inform readers by comparing or contrasting new approaches/techniques with established ones and highlighting the pros and cons of each.

Short Reports using the IMRAD format (specifically, INTRODUCTION, METHODS, RESULTS, DISCUSSION, using all uppercase letters followed by a colon and space), not exceeding 300 words. Length may not exceed 1,500 words (excluding the abstract, references, figures, and tables), a maximum of 20 references, no more than two figures, boxes or tables. must include a "Research in Context" section.

Policy Forum:

Policy Forum manuscripts generally will cover topic related to "*Science and Society*" that might be relevant and/or interest to a broader audience. *Policy Forum* will include papers on: history and politics of science, brief biographies and policy analysis. The main aim of the *Policy Forum* articles is simply to tell an exciting story on an interesting topic; the style should be conversational and newsy. Length may not exceed 5,000 words (excluding the abstract, references, figures, and tables), a maximum of 50 references, no more than six figures, boxes or tables.

Policy Forum articles must include a "unstructured abstract" that may not exceed 300 words. The abstract should summarize the paper and answers questions such as: Who? What? When? Where? Why? How?

Letters:

Letters are brief communications relating to the content of earlier issues of *Alzheimer's & Dementia: Translational Research & Clinical Interventions* or general topics of interest. *Letters* relating to earlier issues of *Alzheimer's & Dementia: Translational Research & Clinical Interventions* will be sent to the appropriate authors for review and to give them an opportunity to reply. Previously unpublished data or letters concerning articles published elsewhere, however, will not be considered.

Length may not exceed 750 words (excluding the abstract, references, figures, and tables), a maximum of 10 references, no more than one figure.

Research News:

Research News is designed to highlight recent events, advances or developments (e.g., grants awarded, new funding opportunities, calendar of events, conference reports and abstracts of papers presented at international meetings) that might be a particular interest to the research community. The articles should inform not only a general audience but also offer an expert a balanced interpretation of the advances, developments or events being reported. The article should be restricted to report only novel and interesting information. Articles should be written in a lively style, giving brief essential background, putting recent advances in context and providing insight on future perspectives and direction. Rather than including extensive background information, the reader should be directed, via a citation, to an appropriate review article or text.

Research News articles must include a "summary lead" that may not exceed 50 words. The summary lead is the first few sentences that summarizes the event and answers the questions: Who? What? When? Where? Why? How? *Research News* articles may not exceed 1,500 words, a maximum of 20 references, no more than two figures, boxes or tables.

Submission checklist

You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:

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- Full postal address

All necessary files have been uploaded:

Manuscript:

- Include keywords
- All figures (include relevant captions)
- All tables (including titles, description, footnotes)
- Ensure all figure and table citations in the text match the files provided
- Indicate clearly if color should be used for any figures in print

Graphical Abstracts / Highlights files (where applicable)

Supplemental files (where applicable)

Further considerations

- Manuscript has been 'spell checked' and 'grammar checked'
- All references mentioned in the Reference List are cited in the text, and vice versa
- Permission has been obtained for use of copyrighted material from other sources (including the Internet)
- A competing interests statement is provided, even if the authors have no competing interests to declare
- Journal policies detailed in this guide have been reviewed
- Referee suggestions and contact details provided, based on journal requirements

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BEFORE YOU BEGIN

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Please see our information pages on [Ethics in publishing](#) and [Ethical guidelines for journal publication](#).

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If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with [The Code of Ethics of the World Medical Association](#) (Declaration of Helsinki) for experiments involving humans. The manuscript should be in line with the [Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#) and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms [sex and gender](#) should be used correctly.

Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

All animal experiments should comply with the [ARRIVE guidelines](#) and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, [EU Directive 2010/63/EU for animal experiments](#), or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed. The sex of animals must be indicated, and where appropriate, the influence (or association) of sex on the results of the study.

Declaration of interest

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. [More information](#).

Editors reserve the right to reject an article on the basis of a significant conflict of interest. If the article is accepted for publication, the disclosure statement may be published. When no competing interests are present the disclosure statement should confirm such.

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Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, see '[Multiple, redundant or concurrent publication](#)' for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service [Crossref Similarity Check](#).

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Please write your text in good English (American or British usage is accepted, but not a mixture of these). Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the [English Language Editing service](#) available from Elsevier's WebShop.

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Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (e.g., Word, LaTeX) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

Acceptance

Provisional or final acceptance is based on originality, scientific accuracy, relevance, clarity, and topical balance of *Alzheimer's & Dementia: Translational Research & Clinical Interventions*.

Submit your article

Please submit your article via <http://ees.elsevier.com/trci/>.

Potential Reviewers

Authors are encouraged to suggest the names of potential peer-reviewers that do not have any conflicts to assist with a prompt and fair review process. The submission letter should include the names, mailing addresses, phone and fax numbers, and e-mail addresses of 5-7 potential reviewers with appropriate expertise to evaluate the manuscript.

Embargoes

Public Presentation/Media Releases: Certain manuscripts accepted for publication in *Alzheimer's & Dementia: Translational Research & Clinical Interventions* will be embargoed until the posted publication date/time by Elsevier. Authors and their institutions are expected to abide by the copyright agreement and refrain from disclosing to media or the public findings of an accepted manuscript prior to embargo period [online publication].

PREPARATION

Peer review

This journal operates a single blind review process. All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then typically sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. [More information on types of peer review](#).

Use of word processing software

It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each

individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the [Guide to Publishing with Elsevier](#)). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Journal Style

Alzheimer's & Dementia: Translational Research & Clinical Interventions generally follows the American Medical Association's Manual of Style (AMA), 10th Edition.

There are a few instances where the journal style deviates from AMA. These differences are outlined in the [Style Guide Quick Reference](#).

Please review this document and ensure that your manuscript adheres to these style points before submitting it for consideration.

Article structure

General Format

Manuscripts should be typed double-spaced, and numbered, with wide margins. Computer-generated illustrations must be of the high quality of professional line drawings or they will not be accepted. The title page should contain: title of paper; author(s); laboratory or institution of origin with city, state, zip code, and country; complete address for mailing proofs; telephone, fax number, and email address (when available, the email address will appear in the correspondence footnote of the published article). References, footnotes, and legends for illustrations should be typed on separate sheets, double spaced. Illustrations should be identified with figure number and author(s) name; when necessary the top should be clearly marked. Each table should be typed on a separate sheet and double spaced. All dimensions and measurements must be specified in the metric system. Standard nomenclature, abbreviations and symbols (specified by Royal Society Conference of Editors. *Metrication in Scientific Journals*. *Am. Scient.* 56:159-164;1968) should be used throughout. Italics should not be used for the purpose of emphasis.

Length of Paper

The Editors insist upon clear, concise statement of facts and conclusions. Fragmentation of material into numerous short reports is discouraged. All accepted papers are subject to editorial revision and copyediting. Authors should avoid redundancy between sections of text and illustrations and text. The Editors may recommend that appendices and tables containing extensive data be published in the electronic version of *Alzheimer's & Dementia: Translational Research & Clinical Interventions* and only referenced in a footnote in the print edition.

Subdivision - numbered sections

Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, ...), 1.2, etc. (the abstract is not included in section numbering). Use this numbering also for internal cross-referencing: do not just refer to 'the text'. Any subsection may be given a brief heading. Each heading should appear on its own separate line.

Appendices

If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

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- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
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[1] J. van der Geer, J.A.J. Hanraads, R.A. Lupton, The art of writing a scientific article. *J Sci Commun* 2010;163:51-59.

Reference to a book:

[2] W. Strunk Jr., E.B. White, *The Elements of Style*, 4th ed. New York: Longman; 2000.

Reference to a chapter in an edited book:

[3] G.R. Mettam, L.B. Adams, How to prepare an electronic version of your article, in: B.S. Jones, R.Z. Smith (Eds.). *Introduction to the Electronic Age*. New York: E-Publishing Inc; 2009, p. 281-304

Dataset reference

[dataset] [4] Oguro M, Imahiro S, Saito S, Nakashizuka T. Mortality data for Japanese oak wilt disease and surrounding forest compositions, *Mendeley Data*, v1; 2015. <http://dx.doi.org/10.17632/xwj98nb39r.1>.

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