DESCRIPTION

The mission of Alzheimer's & Dementia: Journal of the Alzheimer's Association is to bridge the knowledge gaps across a wide range of bench-to-bedside investigation. The journal publishes the results of studies in: behavior, biochemistry, genetics, molecular biology, pharmacology, physiology, protein chemistry, neurology, neuropathology, psychiatry, geriatrics, neuropsychology, epidemiology, sociology, health services research, health economics, political science and public policy. Content emphasizes interdisciplinary investigations, integrative/translational articles, related to: etiology, risk factors, early detection, disease modifying interventions, prevention of dementia and applications of new technologies in health services. The journal publishes comprehensive reviews; research articles; information on clinical trials; short reports; in-depth perspectives/open-peer commentaries; theoretical and/or translational papers that attempt integrate knowledge across discipline; history & politics of science/brief biographies; abstracts of papers presented at international meetings; and negative results, particularly clinical trials, as short communications.

The ultimate objective is to create a novel forum for: rapid communication of new findings, ideas or perspectives; disseminating knowledge, across the spectrum of basic to clinical studies, necessary for optimal translation of research findings into practical applications/interventions; integrating knowledge across disciplines; increase knowledge in diverse disciplines to promote early detection/diagnosis and/or interventions; formulating new theories and/or strategies for the rigorous testing of theories or their predictions; identifying promising new directions of research; providing the scientific impetus for new initiatives; and public policies concerning research on prevention and new models of health services.

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Neurologists, Gerontologists, Internists, Family Practice Physicians, Nurses, Long-Term Care personnel

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Aims & Scope
The mission of Alzheimer's & Dementia: The Journal of the Alzheimer's Association (Alzheimer's & Dementia) is to bridge the knowledge gaps across a wide range of bench-to-bedside investigation. Alzheimer's & Dementia publishes the results of studies in: behavior, biochemistry, genetics, molecular biology, pharmacology, physiology, protein chemistry, neurology, neuropathology, psychiatry, geriatrics, neuropsychology, epidemiology, sociology, health services research, health economics, political science and public policy. Alzheimer's & Dementia emphasizes interdisciplinary investigations and integrative/translational articles related to: etiology, risk factors, early detection, disease modifying interventions, prevention of dementia, and applications of new technologies in health services. The Journal will publish only original contributions in the following forms: comprehensive reviews, research articles, information on clinical trials, short reports, in-depth perspectives/open-peer commentaries, theoretical and/or translational papers that attempt to integrate knowledge across disciplines, history and politics of science/ brief biographies, and abstracts of papers presented at international meetings.

Negative results, particularly clinical trials, are published as short communications.

The ultimate objective is to create a novel forum for: rapid communication of new findings, ideas, or perspectives; disseminating knowledge, across the spectrum of basic to clinical studies, necessary for optimal translation of research findings into practical applications/interventions; integrating knowledge across disciplines; increasing knowledge in diverse disciplines to promote early detection/diagnosis and/or interventions; formulating new theories and/or strategies for the rigorous testing of theories or their predictions; identifying promising new directions of research; and providing the scientific impetus for new initiatives or public policies concerning research on prevention and new models of health services.

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Alzheimer’s & Dementia 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.
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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-Aβ 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.

Note: The Research in Context should be uploaded as a "Supporting File" when submitting the manuscript files via the EVISE system.
**Article Types**

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Letters are brief communications relating to the content of earlier issues of Alzheimer’s & Dementia or general topics of interest. Letters relating to earlier issues of Alzheimer’s & Dementia 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.

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