



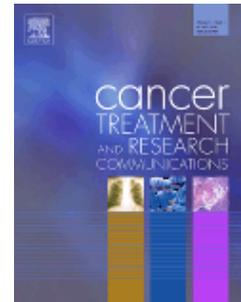
# CANCER TREATMENT AND RESEARCH COMMUNICATIONS

## AUTHOR INFORMATION PACK

### TABLE OF CONTENTS

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- **Description** p.1
- **Abstracting and Indexing** p.1
- **Editorial Board** p.1
- **Guide for Authors** p.4



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### DESCRIPTION

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**Announcement:** From January 2020 *Cancer Treatment and Research Communications* is an open access journal. Authors who publish in *Cancer Treatment and Research Communications* will be able make their work immediately, permanently, and freely accessible. *Cancer Treatment and Research Communications* authors will pay an article publishing charge (APC), have a choice of license options, and retain copyright to their published work.

*Cancer Treatment and Research Communications* is an international peer-reviewed publication dedicated to providing comprehensive basic, translational, and clinical oncology research. The journal is devoted to articles on detection, diagnosis, prevention, policy, and treatment of cancer and provides a global forum for the nurturing and development of future generations of oncology scientists. *Cancer Treatment and Research Communications* publishes comprehensive reviews and original studies describing various aspects of basic through clinical research of all tumor types. The journal also accepts clinical studies in oncology, with an emphasis on prospective early phase clinical trials.

Specific areas of interest include basic, translational, and clinical research and mechanistic approaches; cancer biology; molecular carcinogenesis; genetics and genomics; stem cell and developmental biology; immunology; molecular and cellular oncology; systems biology; drug sensitivity and resistance; gene and antisense therapy; pathology, markers, and prognostic indicators; chemoprevention strategies; multimodality therapy; cancer policy; and integration of various approaches. Our mission is to be the premier source of relevant information through promoting excellence in research and facilitating the timely translation of that science to health care and clinical practice.

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## GUIDE FOR AUTHORS

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*Cancer Treatment and Research Communications* is an international peer-reviewed publication dedicated to providing comprehensive basic, translational, and clinical oncology research. The journal provides a global forum for nurturing and development of future generations of oncology scientists, and the dissemination of knowledge related to the research and treatment of cancer. *Cancer Treatment and Research Communications* publishes comprehensive reviews, original studies, and case reports describing various aspects of basic through clinical research of all tumor types and is devoted to articles on detection, diagnosis, prevention, policy, and treatment of cancer.

Specific areas of interest include basic, translational, and clinical research and mechanistic approaches; cancer biology; molecular carcinogenesis; genetics and genomics; stem cell and developmental biology; immunology; molecular and cellular oncology; systems biology; drug sensitivity and resistance; gene and antisense therapy; pathology, markers, and prognostic indicators; chemoprevention strategies; multimodality therapy; cancer policy; and integration of various approaches. Our mission is to be the premier source of relevant information through promoting excellence in research and facilitating the timely translation of that science to health care and clinical practice.

### Types of paper

**Review Article:** Review articles collate, describe, and evaluate prior publications of important basic, translational and clinical subjects, accompanied by critical analysis leading to rational conclusions. These Reviews should contain very little, if any, original data from an author's own study; however, such data can be used to support the overall thesis of the article. We also accept targeted mini-reviews that cover specific topics or therapies.

*Mechanics:* Reviews articles should contain a short abstract stating the goal of the review, an introduction, discussion, and conclusion. We recommend that Review articles contain 2000-10,000 words,  $\leq 7$  figures and/or tables, and 50-120 references.

**Original Article:** Original Studies articles present results of original basic, clinical and/or translational (basic research with clinical applications) research. This article focuses on new data collected by the author(s) during the course of a clinical or preclinical trial, although other studies may be cited for support. The Original Study should contain the following sections: Title Page, Structured Abstract, Introduction, Patients (or Materials) and Methods, Results, Discussion, and Conclusion.

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- Preferred fonts: Arial (or Helvetica), Times New Roman (or Times), Symbol, Courier.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Indicate per figure if it is a single, 1.5 or 2-column fitting image.
- For Word submissions only, you may still provide figures and their captions, and tables within a single file at the revision stage.
- Please note that individual figure files larger than 10 MB must be provided in separate source files.

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**You are urged to visit this site; some excerpts from the detailed information are given here.**

#### *Formats*

Regardless of the application used, when your electronic artwork is finalized, please 'save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS (or PDF): Vector drawings. Embed the font or save the text as 'graphics'.

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TIFF (or JPG): Bitmapped line drawings: use a minimum of 1000 dpi.

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#### **Please do not:**

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); the resolution is too low.

- Supply files that are too low in resolution.
- Submit graphics that are disproportionately large for the content.

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Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules and shading in table cells. Tables should be submitted online as a separate file, bear a short descriptive title, and be numbered in Arabic numbers. Tables should be cited in the text.

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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.* 163 (2010) 51–59. <https://doi.org/10.1016/j.Sc.2010.00372>.

Reference to a journal publication with an article number:

[2] J. van der Geer, J.A.J. Hanraads, R.A. Lupton, 2018. The art of writing a scientific article. *Heliyon.* 19, e00205. <https://doi.org/10.1016/j.heliyon.2018.e00205>.

Reference to a book:

[3] W. Strunk Jr., E.B. White, *The Elements of Style*, fourth ed., Longman, New York, 2000.

Reference to a chapter in an edited book:

[4] 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*, E-Publishing Inc., New York, 2009, pp. 281–304.

Reference to a website:

[5] Cancer Research UK, Cancer statistics reports for the UK. <http://www.cancerresearchuk.org/aboutcancer/statistics/cancerstatsreport/>, 2003 (accessed 13 March 2003).

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[dataset] [6] M. Oguro, S. Imahiro, S. Saito, T. Nakashizuka, Mortality data for Japanese oak wilt disease and surrounding forest compositions, *Mendeley Data*, v1, 2015. <https://doi.org/10.17632/xwj98nb39r.1>.

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1. Tockman MS, Anthonisen MD, Wright EC et al. Airways obstruction and the risk of lung cancer. *Ann Intern Med* 1987;**106**:512-18.

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2. Colby VT, Carrington CB. Infiltrative lung disease. In: Thurlbeck WM, ed. *Pathology of the Lung*. New York: Thieme Medical Publishers, 1988.

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