DESCRIPTION

Integrative Medicine Research (IMR) is the official journal of the Korea Institute of Oriental Medicine. The journal is a quarterly, peer-reviewed, subsidized open access journal focused on evidence-based scientific research in integrative medicine, and traditional and complementary medicine, consisting of nonpharmacological interventions and practices as well as herbal medicines. The journal aims to provide new research perspectives on holistic integrative health, innovative health preservation approaches and convergence for clinical practice and biomedical sciences.

IMR aims to publish high-quality papers that are of interest to an international readership including researchers, clinical practitioners, administrators and others concerned with clinical best practice, research methodology, and education and policy development in integrative medicine. The current focus of the journal is globally diversified and IMR welcomes papers of international research collaborations and papers from all over the world.

IMR publishes articles of applied research and clinical research, including randomized controlled trials, intervention studies, cohort studies, observational studies, diagnostic test accuracy and reliability studies, qualitative and mixed method studies, animal studies, systematic reviews and narrative reviews. The types of publications considered are editorials, review articles, original research articles, case reports, letters to the editor, commentaries, study protocols, and short communications relating to integrative medicine.
ABSTRACTING AND INDEXING

EMBASE
CrossRef
CINAHL
Google Scholar
ScienceDirect
Korea Citation Index (KCI)
Directory of Open Access Journals (DOAJ)
Emerging Sources Citation Index (ESCI)
PubMed Central

EDITORIAL BOARD

Editor-in-Chief
Jong Yeol Kim, KMD, PhD, Professor, Korea Institute of Oriental Medicine, The Republic of Korea

Associate Editor
Myeong Soo Lee, PhD, Professor, Korea Institute of Oriental Medicine, The Republic of Korea

Editorial Advisory Board
Brian Berman, MD, Professor, University of Maryland, USA
Keji Chen, MD, Professor, China Academy of Chinese Medical Sciences, China
Klaus Linde, MD, Professor, Technical University of Munich, Germany
Denis Noble, FRS, Hon FRCP, Professor, University of Oxford, UK

Editorial Board Member
Terje Alraek, PhD, Professor, UiT The Arctic University of Norway, Norway
Ichiro Arai, PhD, Professor, Nihon Pharmaceutical University, Japan
Gunwoong Bahng, PhD, Professor, The State University of New York, South Korea, The Republic of Korea
Rudolf Bauer, PhD, Professor, Karl-Franzens-Universität Graz, Austria
Zhaoxiang Bian, MD, PhD, Professor, Hong Kong Baptist University, China
Stephen J. Birch, PhD, LicAc, MBAcC, Professor, Kristiania University College, Norway
Gerard Bodeker, EdD, Professor, University of Oxford, UK
Benno Brinkhaus, MD, PhD, Professor, Charité - Universitätsmedizin Berlin, Germany
Han Chae, KMD, PhD, Professor, Pusan National University, The Republic of Korea
Younbyoung Chae, KMD, PhD, Professor, Kyung Hee University, The Republic of Korea
Kelvin Chan, PhD, Professor, The University of Sydney, Australia
Fang-Pey Chen, MD, Professor, National Yang-Ming University, China
Hee Cheol Cho, PhD, Professor, Emory University, USA
William C.S Cho, PhD, Professor, Queen Elizabeth Hospital (Hong Kong), China
Sun Mi Choi, KMD, PhD, Professor, Korea Institute of Oriental Medicine, The Republic of Korea
Yung Hyun Choi, PhD, Professor, Dong-eui University, The Republic of Korea
Vincent C.H. Chung, PhD, Professor, The Chinese University of Hong Kong, Hong Kong
Holger Cramer, PhD, Universität Duisburg-Essen, Germany
Arturo Figueroa, MD, PhD, Texas Tech University, USA
Isabelle Gaboury, PhD, Professor, Université de Sherbrooke, Canada
Daniel F Gallego-Pérez, MD, Pan American Health Organization, USA
Brenda Gollanu, MD, Stanford University, USA
Aviad Haramati, PhD, Professor, Georgetown University, USA
Susanne Hempel, PhD, Professor, Pardee RAND Graduate School, USA
Elisabeth Hsu, PhD, Professor, University of Oxford, UK
Xiao-Yang Mio Hu, PhD, University of Southampton, UK
Ka-Kit Hui, MD, FACP, Professor, University of California, USA
Myung-Haeng Hur, RN, PhD, Professor, Eulji University, The Republic of Korea
Shinta-Jang Hwang, MD, Taipei Veterans General Hospital
Mohamed Khalil, MB BCH, MPH, MS, MD, Professor, National Center for Complementary and Alternative Medicine, Saudi Arabia
Honggie Kim, PhD, Professor, Chungnam National University, The Republic of Korea
Sung Hoon Kim, KMD, PhD, Professor, Kyunghee University, The Republic of Korea
Ohmin Kwon, KMD, PhD, Korea Institute of Oriental Medicine, The Republic of Korea
Lixing Lao, MD, PhD, LAc, Professor, University of Hong Kong, China
Hye Suk Lee, PhD, Professor, The Catholic University of Korea, The Republic of Korea
Ji-Young Lee, PhD, FAHA, Professor, University of Connecticut, USA
Sung-Jae Lee, MD, PhD, Professor, Korea University, The Republic of Korea
Jaung-Geng Lin, MD, PhD, Professor, China Medical University, Taiwan
Jianping Liu, MD, PhD, Professor, Beijing University of Chinese Medicine, China
Weidong Lu, MB, MPH, PhD, LicAc, Harvard University, USA
Hugh MacPherson, PhD, Professor, Foundation for Traditional Chinese Medicine, UK
Yoshiharu Motoo, MD, PhD, Professor, Kanazawa Medical University, Japan
Vitaly Napadow, PhD, LicAc, Professor, Harvard Medical School, USA
Arya Nielsen, PhD, LAc, MOUNT SINAI BETH ISRAEL, USA
Jongbae Park, PhD, LAc, Professor, Duke University School of Medicine, USA
Joon Young Park, PhD, Professor, Temple University, USA
Fan Qu, MD, PhD, Professor, Zhejiang University, China
Nicola Robinson, PhD, Professor, London South Bank University, UK
Sanggun Roh, PhD, Professor, Tohoku University, Japan
Volker G. Scheid, PhD, MBAcC, FRCHM, Professor, University of Westminster, UK
Takashi Seki, MD, PhD, Professor, Tohoku University, Japan
Byung-Cheul Shin, KMD, MPH, PhD, Professor, Pusan National University, The Republic of Korea
Caroline Smith, PhD, Professor, Western Sydney University, Australia
Chang Gue Son, KMD, PhD, Professor, Daejeon University, The Republic of Korea
Wook Song, PhD, Professor, Seoul National University (SNU), The Republic of Korea
Amie Steel, ND, MPH, PhD, Endeavour College of Natural Health, Australia
Kiichiro Tsutani, MD, PhD, Professor, Tokyo Ariake University, Japan
Herman van Wietmarschen, PhD, Louis Bolk Instituut, Netherlands
Chenchen Wang, MD, Professor, Tufts University, USA
Jon Wardle, ND, MPH, LLM, PhD, Professor, University of Technology Sydney, Australia
L. Susan Wieland, MPH, PhD, Professor, University of Maryland, USA
Zhelong Xu, MD, PhD, Professor, Tianjin Medical University Cancer Institute & Hospital, China
Charlie Xue, PhD, Professor, RMIT University, Australia
Hitoshi Yamashita, PhD, LAc, Professor, Morinomiya University of Medical Sciences, Japan
Gloria Y. Yeh, MD, MPH, Professor, Harvard University, USA
Christopher Zaslawski, PhD, Professor, University of Technology Sydney, Australia
David Zhang, PhD, Professor, The Hong Kong Polytechnic University, Hong Kong
Junhua Zhang, MD, PhD, Professor, Tianjin University of Traditional Chinese Medicine, China
Zhen Zheng, PhD, Professor, RMIT University, Australia

Former Editor-in-Chief (2012-2018)
Yung E. Earm, MD, PhD, Seoul National University, College of Medicine, The Republic of Korea

Managing Editor
Eunhye Song, Korea Institute of Oriental Medicine, The Republic of Korea
GUIDE FOR AUTHORS

INTRODUCTION

*Integrative Medicine Research* (IMR) is the official journal of the Korea Institute of Oriental Medicine. The journal is a quarterly, peer-reviewed, subsidized open access journal focused on evidence-based scientific research in integrative medicine, traditional medicine, and complementary and alternative medicine. The journal aims to provide new research perspectives on holistic integrative health, innovative health preservation approaches, and convergence for clinical medicine and biomedical sciences.

IMR aims to publish high-quality papers that are of high interest to an international readership, consisting of researchers, clinical practitioners, and others concerned with clinical practice, research methodology, and education and policy development in integrative medicine.

IMR publishes articles of basic science research and clinical research, such as randomized controlled trials, intervention studies, cohort studies, observational studies, diagnostic test accuracy and reliability studies, qualitative and mixed method studies, animal studies, systematic reviews and narrative reviews. The types of publications considered are review articles, original research manuscripts, case reports, letters to the editor, commentaries, study protocols, and short communications relating to integrative medicine.

IMR is indexed and archived in PubMed(PMC), Web of Science(ESCI), Embase, EBSCO(CINAHL Complete), DOAJ, KCI, ScienceDirect, and Google Scholar.

Manuscript Submission

* Manuscripts for Integrative Medicine Research may be submitted via the EVISE Editorial System (https://www.evise.com/profile/api/navigate/IMR). For editorial questions, please contact us via email at imr@kiom.re.kr, telephone (+82 42 868 9392), or fax (+82 42 869 2720). There are no article processing charges or publication fees.

Important information

Articles should be prepared in the simplest form possible and submitted in Microsoft Word (*.doc or *.docx). Manuscripts must be typed in English, double-spaced and 10 or 12-point type, and all pages must be numbered consecutively. You may use automatic page numbering, but do NOT use other kinds of automatic formatting such as footnotes. Put text, references, tables, and legends in one file, with each table on a new page. Authors are required to be in compliance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, which are compiled by the International Committee of Medical Journal Editors (ICMJE), available at www.icmje.org. Authors are required to adhere their manuscripts to recognized reporting guidelines (refer to 3.1 Reporting guidelines).

Please ensure that the following submission documents are also included, where applicable:

1. A cover letter. It must include your name, address, telephone and fax numbers, e-mail address, and state that all authors have contributed to the paper and have never submitted the manuscript, in whole or in part, to other journals.
2. A conflict of interest disclosure statement (see relevant section below).
3. Articles covering the use of human samples in research and human experiments must be approved by relevant research ethics review committees and their approval should be indicated in the manuscript.
4. Articles covering the use of animals in experiments must be approved by the relevant authorities.
5. Articles where human subjects can be identified in descriptions, photographs or pedigrees must be accompanied by a signed statement of informed consent to publish (in print and online) the descriptions, photographs and pedigrees from each subject who can be identified (see relevant section below).
6. Clinical trials are recommended to register a primary national clinical trial registration site such as http://www.clinicaltrials.gov, http://ncrc.cdc.go.kr/cris, or other sites accredited by WHO or the International Committee of Medical Journal Editors.
7. Where material has been reproduced from other copyrighted sources, the letter(s) of permission from the copyright holder(s) to use the copyrighted sources must be supplied.
(8) Articles should be written in English (using American English spelling) and meet the following basic criteria: the material is original, the information is important, the writing is clear, concise and grammatically correct, the study methods are appropriate, the data are valid, and the conclusions are reasonable and supported by the data. For non-native English-speaking authors, we suggest that manuscripts be checked and edited by a native English speaker or by professional English editing services.

There are no article processing charges or publication fees.

Types of article

Editorials
Editorials are invited articles or comments concerning a specific paper in the Journal or a topical issue in the field. Although editorials are normally invited or written by an Editor, unsolicited editorials may be submitted. Typical length: 1,500-2,000 words, 20-40 references.

Review Articles
These should aim to provide the reader with a balanced overview of an important and topical subject within the Journals aims and scope. The review should have a clear methodology of reviewing the contents for systematic reviews, narrative reviews and any other types of reviews. Most reviews are solicited by the editors, but unsolicited submissions may also be considered for publication.

No more than 100 references.

Original Articles
These may be clinical trials, intervention or diagnostic test accuracy studies, laboratory and animal studies, cohort studies, cost-effectiveness analyses, surveys, and historical, social, or policy studies on integrative medicine and health, which represent new and significant contributions to the field.

Case Reports
These are short discussions of a case or case series with unique features not previously described that make an important teaching point or scientific observation. Refer to the CARE guidelines and submit CARE checklist with the case report manuscript. Only the well-reported and informative case studies which follow the CARE guideline are considered for publication. Informed consent and/or IRB approval must be disclosed in the case report.

Letters to the Editor
These include brief constructive comments concerning previously published articles in the journal or very brief research reports. Letters are edited, sometimes extensively, to sharpen their focus. They may be sent for peer review at the discretion of the Editors.

No more than 10 references.

Commentaries
These are short, opinion articles which focus on current research topics and highlight articles of interest previously published elsewhere. Commentaries are generally invited by the Editors, but interested contributors with unsolicited commentaries are encouraged to submit them.

No more than 10 references.

Study Protocols
These describe detailed plans for conducting clinical studies, including randomized controlled trials, observational studies (cohort, case-control, cross-sectional studies), other clinical trials and systematic reviews. Study protocols should include the purpose and methodology of the study as well as the importance or significance of the study. We only published pre-registered studies in national clinical trial registries or PROSPERO registry. Clinical trial registration number, PROSPERO registry number and SPIRIT or PRISMA-P checklist are required for submission depending on the types of protocols.

Short Communications
These are short reports of significant research. Short communications may include up to 2 figures or tables.
No more than 20 references.

**BEFORE YOU BEGIN**

**Ethics in publishing**
Please see our information pages on Ethics in publishing and Ethical guidelines for journal publication.

**Studies in humans and animals**
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.

**Submission declaration and verification**
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.

**Preprints**
Please note that preprints can be shared anywhere at any time, in line with Elsevier's sharing policy. Sharing your preprints e.g. on a preprint server will not count as prior publication (see 'Multiple, redundant or concurrent publication' for more information).

**Use of inclusive language**
Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Articles should make no assumptions about the beliefs or commitments of any reader, should contain nothing which might imply that one individual is superior to another on the grounds of race, sex, culture or any other characteristic, and should use inclusive language throughout. Authors should ensure that writing is free from bias, for instance by using 'he or she', 'his/her' instead of 'he' or 'his', and by making use of job titles that are free of stereotyping (e.g. 'chairperson' instead of 'chairman' and 'flight attendant' instead of 'stewardess').

**Authorship**
All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

**Changes to authorship**
Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason
for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

**Copyright**

Published manuscripts become the permanent property of Korea Institute of Oriental Medicine, and must not be published elsewhere without written permission. All articles published in the Journal are protected by copyright, which covers the exclusive rights to reproduce and distribute the article, as well as translation rights. No part of this publication may be reproduced, stored in any retrieval system, or transmitted in any form or by any means, electronic, mechanical, by photocopying, recording, or otherwise, without prior written permission from Korea Institute of Oriental Medicine. A copyright transfer form should be downloaded in the Editorial System upon submission and submitted to the editorial office through the EVISE.

**Open Access**

Every peer-reviewed article appearing in this journal will be published open access. This means that the article is universally and freely accessible via the internet in perpetuity, in an easily readable format immediately after publication. The author does not have any publication charges for open access. Korea Institute of Oriental Medicine will pay to make the article open access. A CC user license manages the reuse of the article (see [https://www.elsevier.com/openaccesslicenses](https://www.elsevier.com/openaccesslicenses)). All articles will be published under the following license:

*Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND)*: for non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

*Elsevier supports responsible sharing*

Find out how you can share your research published in Elsevier journals.

**Role of the funding source**

You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

**Conflicts of Interest**

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. Conflict of interest statements will be published at the end of the text of the article, before the References section. Please consult the COPE guidelines ([http://www.publicationethics.org/](http://www.publicationethics.org/)) on conflict of interest. Even when there is no conflict of interest, it should also be stated.

**English Proofing**

Articles should be written in English (using American English spelling) and the English proofing should be taken before submission by the author.

**Submission**

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.

**Manuscript Preparation**

*Title page*
The title page should include: category of paper, article title, names (spelled out in full) of all authors, academic degrees, the institutions with which they are affiliated (only 1 affiliation per author is permitted); indicate all affiliations with a superscripted lowercase number after the authors name and in front of the appropriate affiliation, short running title not exceeding 30 characters, separate word count for abstract and text, and the corresponding author details (name, address, phone and fax, e-mail information).

Abstract and Keywords
An abstract and 3-5 relevant keywords (in alphabetical order) are required for the following article categories: Review Article, Original Article, and Case Report. Abstracts should be no more than 250 words in length. Abstracts for Original Articles and Short Communications should be structured, with the section headings: Background, Methods, Results and Conclusion. Abstracts for Review Articles and Case Reports should be unstructured in one single paragraph. But for Case Reports, it should include the significance and purpose of the case presentation, the diagnostic methods of the case, the key data, and brief comments and suggestions with regard to the case. Abstract for Study Protocols should be structured: Background, Methods, and Discussion. For selecting keywords, refer to the Index Medicus Medical Subject Headings (National Library of Medicine (US). MeSH [Internet]. Bethesda (MD): National Library of Medicine (US); 1954 [updated 2009, cited 2009 Nov 1]. Available from: http://www.nlm.nih.gov/mesh/MBrowser.html.

Main Text
The text for Original Articles, for example, should include the following sections: Introduction, Methods, Results, and Discussion. The Introduction should be as concise as possible, without subheadings. The Methods section should be sufficiently detailed. Subheadings may be used to organize the Results and Discussion. Each section should begin on a new page.

Abbreviations
Where a term/definition is continually referred to (i.e., 3 times in the text), it is written in full when it first appears, followed by the subsequent abbreviation in parentheses (even if it was previously defined in the abstract); thereafter, the abbreviation is used.

Gene nomenclature
Current standard international nomenclature for genes should be adhered to. Genes should be typed in italic font and include the accession number. For human genes, use genetic notation and symbols approved by the HUGO Gene Nomenclature Committee (http://www.genenames.org/) or refer to PubMed (http://www.ncbi.nlm.nih.gov/sites/entrez).

Units
Systeme International (SI) units must be used, with the exception of blood pressure values which are to be reported in mmHg. Please use the metric system for the expression of length, area, mass, and volume.

References
Authors are responsible for the accuracy and completeness of their references and for correct text citation.

In the main text, tables and figure legends
References should be identified using superscripted numbers, in numerical order, and be placed after punctuation.
References cited in tables or figure legends should be included in sequence at the point where the table or figure is first mentioned in the main text.
Do not cite abstracts unless they are the only available reference to an important concept.
Uncompleted work or work that has not yet been accepted for publication (i.e., unpublished observation, personal communication) should not be cited as references.

In the references list
References should be limited to those cited in the text and listed in the order in which they appear in the text.
References should include, in order, authors surnames and initials, article title, abbreviated journal name, year, volume and inclusive page numbers. The last names and initials of all the authors up to 6 should be included, but when authors number 7 or more, list the first 6 authors only followed by et al. Abbreviations for journal names should conform to those used in MEDLINE.

If citing a website, provide the author information, article title, website address and the date you accessed the information.

Reference to an article that is in press must state the journal name and, if possible, the year and volume.

Examples are given below.

**Standard journal article:**

**Journal supplement**

**Journal article not in English but with English abstract**

**Book with edition**

**Book chapter in book with editor and edition**

**Book series with editors**

**Bulletin**

**Electronic publications**


**Item presented at a meeting but not yet published**

**Item presented at a meeting and published**

**Thesis**

**Website**

Company/manufacturer publication/pamphlet

Acknowledgments
General acknowledgments for consultations, statistical analysis, etc., should be listed after main body of text, before the references, including the names of the individuals involved. All financial and material support for the research and the work should be stated here clearly explicitly.

Tables
Tables are numbered consecutively, in the order of their citation in the text. Table legend example: Table 1. Demographic characteristics of patients [note: Table 1. in bold font with end period; no end period after legend]. Shortening of some words inside table (NOT in table legend): year(s) · yr; month(s) · mo; day(s) · d; hour(s) · hr; minute(s) · min; second(s) · sec; and &. Use en dashes for empty entries. Footnotes are indicated using these symbols (in order of appearance): *, †, ‡, §, |, ¶, ** [note: when > 10 footnotes, use superscripted lowercase letters]. Abbreviations used in the table, even when already dened in the text, should be defined and placed after the footnotes and presented like in this example: CT, computed tomography; MRI, magnetic resonance imaging. [note: the use of ",," with a space on either side, semi-colon to separate, and a period after the last].

Figures
Figure legends should be submitted for all figures and should be brief and specific and placed on a separate sheet after the reference section. Figures must be in numerical order using Arabic numerals in the order of their citation in the text. Figures should be uploaded as separate files, not embedded in the manuscript file.

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: Vector drawings. Embed the font or save the text as “graphics”.
• TIFF: Color or grayscale photographs (halftones)-use a minimum of 300 dpi.
• TIFF: Bitmapped line drawings-use a minimum of 1000 dpi.
• TIFF: Combination of bitmapped line/half-tone (color or grayscale)-use a minimum of 600 dpi.
• DOC, XLS or PPT: If your electronic artwork is created in any of these Microsoft Office applications, please supply "as is".
Please do not:
• Supply files that are optimized for screen use (like GIF, BMP, PICT, WPG) as the resolution is too low;
• Supply files that are too low in resolution;
• Submit graphics that are disproportionally large for the content.

A detailed guide on electronic artwork is available at https://www.elsevier.com/artworkinstructions. Please note that the cost of color illustrations will be charged to the author.

REVIEW AND ACTION

The Editorial and Peer Review Process
As a general rule, the receipt of a manuscript will be acknowledged within 2 weeks of submission; authors will be provided with a manuscript reference number for future correspondence. If an acknowledgment is not received in a reasonable period of time, the author should contact the Editorial Office.

Submissions are reviewed by the Editorial Office to ensure that it contains all parts. Submissions will be rejected if the author has not supplied all the material and documents as outlined in the Journal’s author guidelines. Manuscripts are then reviewed by the Editors, who make an initial assessment. If the manuscript does not appear to be of sufficient merit or is not appropriate for the Journal, the manuscript will be rejected without review. All other manuscripts are sent to 2 or more expert consultants for double-blind peer review. Authors will usually be notified within 12 weeks of the initial acknowledgment of whether the manuscript is accepted for publication, rejected, or subject to revision before acceptance. However, do note that delays are sometimes unavoidable.

Roles of Editors and Editorial Board Members
Editor-in-Chief
- Responsible for the whole journal content
- Select, appoint and manage associate editors and editorial board members
- Attract high-quality manuscripts

**Associate Editors**
- Assist EiC in getting manuscripts reviewed and published
- Handle articles by subject areas
- Promote the journal

**Managing Editor**
- Assist EiC and AEs
- Handle day-to-day paperwork
- Perform technical check on all submitted manuscripts

**Advisory Editorial Board**
- A group of respected scholars in the field of Traditional Medicine, Complementary and Alternative Medicine, and Systems Medicine.
- Advise on policy and scope of the journal

**Editorial Board**
- A group of respected scholars in the field of Traditional Medicine, Complementary and Alternative Medicine, and Systems Medicine.
- Assist with peer review
- Encourage others to submit manuscripts
- Submit their own work
- Suggest ideas for special issues

**Use of the Digital Object Identifier**
The Digital Object Identifier (DOI) may be used to cite and link to electronic documents. The DOI consists of a unique alpha-numeric character string which is assigned to a document by the publisher upon the initial electronic publication. The assigned DOI never changes. Therefore, it is an ideal medium for citing a document, particularly 'Articles in press' because they have not yet received their full bibliographic information. Example of a correctly given DOI (in URL format; here an article in the journal Physics Letters B): http://dx.doi.org/10.1016/j.physletb.2010.09.059. When you use a DOI to create links to documents on the web, the DOIs are guaranteed never to change.

**Proofs**
Corresponding authors will receive an e-mail with a link to our online proofing system, allowing annotation and correction of proofs online. The environment is similar to MS Word: in addition to editing text, you can also comment on figures/tables and answer questions from the Copy Editor. Web-based proofing provides a faster and less error-prone process by allowing you to directly type your corrections, eliminating the potential introduction of errors. All instructions for proofing will be given in the e-mail we send to authors, including alternative methods to the online version and PDF. We will do everything possible to get your article published quickly and accurately. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. It is important to ensure that all corrections are sent back to us in one communication. Please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility.

**Peer review**
This journal operates a double 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.

**Double-blind review**
This journal uses double-blind review, which means the identities of the authors are concealed from the reviewers, and vice versa. More information is available on our website. To facilitate this, please include the following separately:
Title page (with author details): This should include the title, authors' names, affiliations, acknowledgements and any Declaration of Interest statement, and a complete address for the corresponding author including an e-mail address.

Blinded manuscript (no author details): The main body of the paper (including the references, figures, tables and any acknowledgements) should not include any identifying information, such as the authors' names or affiliations.

Data references
This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

Research data
This journal encourages and enables you to share data that supports your research publication where appropriate, and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, this journal also encourages you to share your software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your article or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the Data Statement page.

Data linking
If you have made your research data available in a data repository, you can link your article directly to the dataset. Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your article. When available, you can directly link your dataset to your article by providing the relevant information in the submission system. For more information, visit the database linking page.

For supported data repositories a repository banner will automatically appear next to your published article on ScienceDirect.

In addition, you can link to relevant data or entities through identifiers within the text of your manuscript, using the following format: Database: xxxx (e.g., TAIR: AT1G01020; CCDC: 734053; PDB: 1XFN).

Mendeley Data
This journal supports Mendeley Data, enabling you to deposit any research data (including raw and processed data, video, code, software, algorithms, protocols, and methods) associated with your manuscript in a free-to-use, open access repository. During the submission process, after uploading your manuscript, you will have the opportunity to upload your relevant datasets directly to Mendeley Data. The datasets will be listed and directly accessible to readers next to your published article online.

For more information, visit the Mendeley Data for journals page.

Data statement
To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate why during the submission process, for example by stating that the research data is confidential. The statement will appear with your published article on ScienceDirect. For more information, visit the Data Statement page.
**Offprints**
The corresponding author will be notified and receive a link to the published version of the open access article on ScienceDirect. This link is in the form of an article DOI link which can be shared via email and social networks. For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier’s Webshop. Authors requiring printed copies of multiple articles may use Elsevier Webshop's 'Create Your Own Book' service to collate multiple articles within a single cover.

**AUTHOR INQUIRIES**
Visit the Elsevier Support Center to find the answers you need. Here you will find everything from Frequently Asked Questions to ways to get in touch. You can also check the status of your submitted article or find out when your accepted article will be published.

© Copyright 2018 Elsevier | https://www.elsevier.com