DESCRIPTION

Neuropharmacology publishes high quality, original research within the discipline of neuroscience. The emphasis of Neuropharmacology is on the study and understanding of the actions of known exogenous and endogenous chemical agents on neurobiological processes in the mammalian nervous system. Work with non-mammalian and invertebrate species may be considered in exceptional circumstances. The journal does not usually accept clinical research, although neuropharmacological studies in humans may be considered on the condition that they provide novel insight into either the actions of drugs and/or neurobiological mechanisms. The journal only considers submissions in which the chemical structures and compositions of experimental agents are readily available in the literature or disclosed by the authors in the submitted manuscript. Similarly, manuscripts describing the use of natural products will only be considered if the active ingredient is known and disclosed.

The journal publishes Special Issues in which leading experts are invited to serve as Guest Editors to compile a collection of reviews, and occasionally original articles, around a particular topical theme in neuroscience research. The list of recent Special Issues can be found here. Suggestions for Special Issues can be made directly to the Editor-in-Chief.

Neuropharmacology also publishes topical narrative reviews on subjects within its remit. These reviews are commissioned by the Editorial Team or arise after correspondence with potential authors. Unsolicited reviews will be considered, but authors are encouraged to contact the Editor-in-Chief of their intention to submit a review. Potential review authors should clearly indicate their expertise in the area, and how the review differs from, and adds to, recent published reviews on related topics. On the basis of the case made by authors, potential overlap with planned Neuropharmacology content, and discussions with the Editorial Team, the Editor-in-Chief will provide authors with a prompt decision regarding the proposed review. Systematic reviews, meta- or bibliographic analyses will not be considered unless they are a necessary part of a Special Issue and conducted by experts in the field, and even then only under exceptional circumstances and at the discretion of the Editor-in-Chief.

AUDIENCE

Neuroscientists and neuropharmacologists, particularly in the field of cellular and molecular neuroscience.
ABSTRACTING AND INDEXING

BIOSIS Citation Index
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Please see our information on Ethics in publishing.

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From 1st September 2019, all new submissions to Neuropharmacology should show individual data points on figures wherever possible. This requirement may be relaxed for full concentration/dose-response curves or time-series data, but individual data points should be shown elsewhere, for example in bar-charts.

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Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability or health condition; and use inclusive language throughout. Authors should ensure that writing is free from bias, stereotypes, slang, reference to dominant culture and/or cultural assumptions. We advise to seek gender neutrality by using plural nouns (“clinicians, patients/clients”) as default/wherever possible to avoid using "he, she," or "he/she." We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, sexual orientation, disability or health condition unless they are relevant and valid. When coding terminology is used, we recommend to avoid offensive or exclusionary terms such as "master", "slave", "blacklist" and "whitelist". We suggest using alternatives that are more appropriate and (self-) explanatory such as "primary", "secondary", "blocklist" and "allowlist". These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

**Person-Centered Language**

Words used to describe people with neurological or mental health illnesses, or who have substance use disorder can have an impact on the likelihood they seek help and engage in their community. Such stigma - negative attitudes based on distinguishing characteristics - can be debilitating, and reducing its impact is vital to improve health outcomes. Utilizing person-centered language is a mechanism to reduce stigmatizing verbiage and we strongly encourage its use throughout the submitted manuscript. For example, do not use epileptic, use "person or people with epilepsy"; instead of manic, use "a person with bipolar mania", do not use schizophrenic, use "a person with schizophrenia", likewise do not use alcoholic, use “someone with alcohol use disorder”, or instead of addict or substance abuser, use "someone with substance use disorder". Additionally, commit suicide should be replaced with "died by suicide", likewise people "survived a suicide attempt", do not use failed suicide. When describing
traumatic events, do not use victim, instead use "someone who experienced...", likewise do not use challenged, use "person who has a disability". Finally, do not use AIDS victim, use "a person with AIDS", and do not use birth sex, use "assigned sex". Naturally, language evolves over time and use, but by focusing on person-centered language in your manuscript, you can help to reduce stigma and aid in people seeking mental and other health assistance.

**Reporting sex- and gender-based analyses**

**Reporting guidance**

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**Definitions**

Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous—thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

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For transparency, we require corresponding authors to provide co-author contributions to the manuscript using the relevant CRediT roles. The CRediT taxonomy includes 14 different roles describing each contributor's specific contribution to the scholarly output. The roles are: Conceptualization; Data curation; Formal analysis; Funding acquisition; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization; Roles/Writing - original draft; and Writing - review & editing. Note that not all roles may apply to every manuscript, and authors may have contributed through multiple roles. More details and an example.

**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**

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If a manuscript has been rejected by another journal in the Consortium, authors can submit the manuscript to Neuropharmacology and indicate that the referees' reports from the first journal will be made available to the Editors of Neuropharmacology.

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Authors should revise the original submission in accordance with the first journal's set of referee reports, and submit the paper to Neuropharmacology with a covering letter describing the changes that have been made, and informing the Editors that the authors will ask for the referee’s reports to be forwarded from the Consortium journal. The authors then must contact the first journal, and ask that reviews be forwarded, indicating they have submitted to Neuropharmacology, providing the new manuscript ID number.

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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.

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Results should be described in a clear, concise and logical manner, with sub-headings as appropriate to guide the reader. For describing statistical results, please provide details of the statistical test used, and full statistical reporting of the results. Full statistical reporting should include the statistical value, the degrees of freedom, and the exact p value. For example, an ANOVA would be reported as $F(1,13) = 15.484; \ p = 0.0017$, and a t-test as $t(39) = 3.83, \ p = 0.0004$. Individual data points should be shown wherever possible. This requirement may be relaxed for full concentration/dose-response curves or time-series data, but individual data points should be shown elsewhere, for example in bar-charts. Authors should provide the full, untruncated images of any gels or blots included in the figures as a supplemental figure in DOC, .PDF or PPT format, not as a compressed file. Failure to adhere to these requirements will result in the rejection of the manuscript. A revised manuscript will only be considered if these requirements are satisfied.

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