DESCRIPTION

Seizure - European Journal of Epilepsy is an international journal owned by Epilepsy Action (the largest member led epilepsy organisation in the UK). It provides a forum for papers on all topics related to epilepsy and seizure disorders.

Seizure focuses especially on clinical and psychosocial aspects, but will publish papers on the basic sciences related to the condition itself, the differential diagnosis, natural history and epidemiology of seizures, as well as the investigation and practical management of seizure disorders (including drug treatment, neurosurgery and non-medical or behavioural treatments).

The journal reflects the social and psychological burden and impact of the condition on people with epilepsy, their families and society at large, and the methods and ideas that may help to alleviate the disability and stigma, which the condition may cause. The journal aims to share and disseminate knowledge between all disciplines that work in the field of epilepsy.

AUDIENCE

Epileptologists, neurologists, epilepsy specialist nurses, clinical neurophysiologists, pharmacologists, psychiatrists.

ABSTRACTING AND INDEXING

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• Comparative effectiveness and interventional clinical trials in pediatric status epilepticus and epileptic encephalopathies• Inventing, evaluating and implementing clinically relevant biomarkers and treatment paradigms to assess and benchmark these based on clinical data, neurophysiology, imaging, pharmacogenomics and genetics, in collaboration with basic researcher locally, nationally, and internationally• Developing and evaluating monitoring tools for clinical biomarkers to further clinical epilepsy outcome measures including seizure characterization, neuropsychological outcome assessment, and quality of life assessment by means of seizure sensors and electronic tools including seizure tracking and outcome prediction modeling software, novel in- and outpatient monitoring devices and algorithms, neurophysiological, biochemical and genetic periodicity markers
K. Malmgren, Adult neurologist, Gothenburg, Sweden
• Biological markers for treatment and outcomes of epilepsy
A. Martins da Silva, Professor, Adult Neurologist and Neurophysiologist, Porto, Portugal
R. Matsumoto, Kobe, Japan
Research Interests, br>• functional and seizure networks using invasive neurophysiology and neuroimaging, • epileptogenesis using clinical neurophysiological methods, • Language function and its reorganization in epilepsy, • Impact of autoimmunity on epilepsy,

M Mazarati, Los Angeles, California, United States of America
Animal models of epilepsy, Post-traumatic epilepsy, Inflammation, Microbiome, Neurobehavioral comorbidities,

D.R. Nordli, Chicago, Illinois, United States of America
M. Oto, Glasgow, United Kingdom
Ç. Özkara, Fatih, Turkey
S.-P. Park, Adult neurologist, Daegu, South Korea

E. Perucca, Adult neurologist, Pavia, Italy

M. Privitera, MD, Professor of Neurology, Cincinnati, Ohio, United States of America

S.C. Schachter, Adult neurologist, Boston, Massachusetts, United States of America

HJ Schulze-Bonhage, Professor of Neurology and Neuropysiology and head of the Epilepsy Center at the University Hospital Freiburg, Germany

J.M. Serratosa, Madrid, Spain

M. L. Sillanpää, TURKU, Finland

M. B. Singh, New Delhi, India

Epilepsy, • Treatment gap, • Epilepsy in low-resource settings, • Epilepsy primary care, • Epilepsy Advocacy

H. Stefan, Adult neurologist, Erlangen, Germany
Research Interests: • Biomarkers for diagnosis and treatment of epilepsies including drug treatment? stimulation and epilepsy surgery? epilepsies in the elderly? high resolution electrophysiology? source localization and network

T. Syed, Cleveland, Ohio, United States of America

R.D. Thijs, Neurologist at Leiden University Medical Center, Dept. of Neurology, Netherlands

P. Tinuper, Adult neurologist, Bologna, Italy

J. M. Wilmshurst, Paediatric Neurologist, Cape Town, South Africa
Research Interests (related to epilepsy), • Management and practice of infantile seizures,
  • Neonatal seizures – optimal management and the effect of seizures on the maturing brain,
  • Co-morbidities of epilepsy in children, • Optimal care of children in acute convulsive status in resource poor countries,
  • Outcomes from basic training courses in electrophysiology, • Electrophysiology, optimizing the tool in resource poor countries, • The role of melatonin in attaining sleep EEGs,

P. Wolf, Neurologist consultant at Danish Epilepsy Centre Filadelfia, Dianalund, Denmark
Guest researcher, Federal University of Santa Catarina, Florianópolis, Brasil

E. M. T. Yacubian, Adult and Pediatric Neurologist, São Paulo, Brazil

D. Zhou, Chengdu, Sichuan, China
GUIDE FOR AUTHORS

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We now differentiate between the requirements for new and revised submissions. You may choose to submit your manuscript as a single Word or PDF file to be used in the refereeing process. Only when your paper is at the revision stage, will you be requested to put your paper in to a 'correct format' for acceptance and provide the items required for the publication of your article. **To find out more, please visit the Preparation section below.**

**INTRODUCTION**

**Types of articles**

Seizure - European Journal of Epilepsy publishes the following types of article:

1.1 Peer-reviewed articles

a. Full reviews.

Seizure welcomes comprehensive reviews on all subjects relating to epilepsy and other seizure disorders. Authors planning/proposing are invited to discuss their ideas with Editor-in-Chief prior to submission. Full reviews should be preceded by an abstract. Full reviews should not exceed 7,000 words, include no more than 6 figures or tables and 150 references.

b. Focused reviews.

Seizure is keen to publish focused reviews, especially on the latest developments in particular fields or on topics which are currently debated by clinicians and researchers. Authors are welcome to approach the Editor-in-Chief with their idea for a focused review prior to submission. Focused reviews should be preceded by an abstract. Focused reviews should be 1,500-2,500 words, and include no more than 3 figures or tables and 50 references.

c. Full-length original research articles.

The body of the text of these articles should be limited in length to 4,000 words, and there should be a maximum of 6 figures or tables. Additional figures, tables and other material (such as associated videos) can be submitted as online only Supporting Information (see section 'preparation of manuscripts' for further details). Full length research articles should be preceded by an abstract. The body of the text of the article should be clearly structured into 1) Introduction, 2) Methods 3) Results, 4) Discussion, 5) Conclusion and 6) References.

d. Short communications.

Comprise a number of different kinds of previously unpublished materials including short reports or small case series. Short communications should be preceded by an abstract. The body of the text is limited to 1,400 words. There are no more than 12 references, and 2 figures or tables (combined).

e. Case reports (Clinical Letters), see also Interactive Case Insights below

Seizure will also publish particularly instructive case reports in the format of Clinical Letters. Clinical Letters will not be preceded by an abstract. The word count is strictly limited to 1,000 words excluding title page information, references, and any figure or table legends. Clinical Letters can only include a maximum of 4 references and 2 figures or tables (combined), authors may include additional reading as supplementary material.

f. Letters to the Editor

Letters containing critical assessment of papers recently published in the Seizure - European Journal of Epilepsy will be considered for publication in the correspondence section. Letters should not exceed 1,000 words including references as necessary, one table or one figure. Letters should be typed in double spacing, should have a heading and no abbreviations. If related to a previously published article, the article should be identified by title, author(s), and volume/page numbers. All letters are subject to editorial review. At the Editor's discretion, a letter may be sent to authors of the original paper for comment, and both letter and reply may be published together.

1.2 Editorialy-reviewed material
Other contributions than original research or review articles will be published at the discretion of the Editor-in-Chief, with only editorial review. Such material includes: obituaries, workshop reports and conference summaries, letters/commentary to the Editors (500 word limit, exceptionally including figures or tables), special (brief) reports from ILAE Commissions or other working groups, book reviews and announcements.

1.3 Supplements / Special Editions
The Editor-in-Chief invites ideas for supplements or special editions of Seizure including meeting abstracts. Such materials may be published, but only after prior arrangement with the Editor-in-Chief. Supplements will incur a charge. The page rate for proposed supplements can be negotiated with the Editor-in-Chief. Special editions are issues of Seizure wholly or partially dedicated to one particular topic. They may be edited or co-edited by internationally recognised experts in their field. Such experts do not need to be members of the Editorial Board of Seizure and are welcome to approach the Editor-in-Chief with their ideas. Special editions of Seizure would be expected to contain the same kind of manuscripts which are published in normal editions.

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State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

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Observational Studies - **STROBE** - Strengthening the Reporting of Observational studies in Epidemiology

Systematic Review of Controlled Trials - **PRISMA** - Preferred Reporting Items for Systematic Reviews and Meta-Analyses

Study of Diagnostic accuracy/assessment scale - **STARD** - Standards for the Reporting of Diagnostic Accuracy Studies

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