DESCRIPTION

The Journal of Sexual Medicine publishes multidisciplinary basic science and clinical research to define and understand the scientific basis of male, female, and couples sexual function and dysfunction. As an official journal of the International Society for Sexual Medicine and the International Society for the Study of Women’s Sexual Health, it provides healthcare professionals in sexual medicine with essential educational content and promotes the exchange of scientific information generated from experimental and clinical research.

The Journal of Sexual Medicine includes basic science and clinical research studies in the psychologic and biologic aspects of male, female, and couples sexual function and dysfunction, and highlights new observations and research, results with innovative treatments and all other topics relevant to clinical sexual medicine.

The objective of The Journal of Sexual Medicine is to serve as an interdisciplinary forum to integrate the exchange among disciplines concerned with the whole field of human sexuality. The journal accomplishes this objective by publishing original articles, as well as other scientific and educational documents that support the mission of the International Society for Sexual Medicine.

International Society for Sexual Medicine Mission

Specifically, the ISSM aims: To establish a scientific Society to benefit the public by encouraging the highest standards of practice, education and research in the field of human sexuality; To develop and assist in developing scientific methods for the diagnosis, prevention and treatment of conditions affecting human sexual function; To promote the publication and encourage contributions to the medical and scientific literature in the field of sexual function.

IMPACT FACTOR

2016: 2.978 © Clarivate Analytics Journal Citation Reports 2017
ABSTRACTING AND INDEXING

Chemical Abstracts
Current Contents / Clinical Medicine
EMBASE
Journal Citation Reports
Science Citation Index Expanded
Index Medicus
MEDLINE®
PubMed
PsychINFO
Scopus

EDITORIAL BOARD

Editor-In-Chief
John P. Mulhall, MD, MSc, FECSM, FACS (USA)

Deputy Editors-In-Chief
Annamaria Giraldi, MD, PhD, FECSM (Denmark)
Andrea Salonia, MD, FECSM (Italy)

Editorial Office Staff
Jason Roberts, PhD (USA), Managing Editor
Donna Schena (USA), Assistant Managing Editor
Denise Gibson (USA), Peer Review Manager
Michael Newman (USA), Editorial Coordinator

Associate Editors
Fabio Castiglione, MD, PhD (Italy), Social Media Editor
Landon Trost, MD (USA), Male Medical/Surgical
Alan Shindel, MD (USA), Male Medical/Surgical
Pedro Nobre, PhD (Portugal), Mental Health
Stephanie Both, PhD (Netherlands), Mental Health
Eusebio Rubio-Aurioles, MD, PhD (Mexico), Mental Health
Faysal A. Yafi, MD, FRCSC (USA), Social Media Editor
Johannes Bitzer, MD (Switzerland), Female Medical/Surgical
Tami Rowen, MD (USA), Female Medical/Surgical
Guy T'Sjoen, MD, PhD (Belgium), Transgender Medicine
Mark-Bram Bouman, MD, FECSM (Netherlands), Transgender Surgical
Joana Carvalho, PhD (Portugal), Paraphilias
Selim Cellek, MD, PhD (UK), Basic Science
Sandrine Atallah, MD, MHM, FECSM (Lebanon), Social Media Editor
Giovanni Corona, MD, PhD (Italy), Male Medical
Sigrid Carlsson, MD, PhD, MPH (USA), Statistical Consultant
Nelson E. Bennett, MD (USA), Surgeon's Corner, Section Editor

Editorial Board
Carmita Abdo, MD, PhD (Brazil)
Javier Angulo Frutos, PhD (Spain)
Linda Banner, PhD (USA)
Peer Briken, MD, PhD (Germany)
Fabio Castiglione, MD, PhD (Italy)
Leonard R. Derogaitis, PhD (USA)
Fernando Nestor Facio, MD, PhD (Brazil)
Melissa Farmer, PhD (USA)
Stephanie Faubion, MD, FACP, NCMP (USA)
J. Paul Fedoroff, MD, FRCPC (Canada)
Janniko Georgiadis, PhD (Netherlands)
Gert Martin Hald, PhD (Denmark)
Johanna Hannan, PhD (USA)
Shin-ichi Hisasue, MD, PhD (Japan)
Ilpo Huhtaniemi, MD, PhD (UK)
Lawrence Jenkins, MD (USA)
Crista Johnson-Agbakwu, MD, MSc, FACOG (USA)
Ates Kadioglu, MD (Turkey)
Philip Kell, MD, FRCOG (UK)
Evie Kirana, PhD, FECSM (hon) (Greece)
Michael L. Krychman, MD (USA)
Roy J. Levin, MSc, PhD (UK)
Michael Lew-Starowicz, MD, PhD, FECSM (Poland)
Lesley Marson, PhD (USA)
Sean McBride, MD, MPH (USA)
Patricia Pascoal, PhD, MSc (Portugal)
Alexander Pastuszak, MD, PhD (USA)
Carol A. Podlasek, PhD (USA)
Caroline F. Pukall, PhD (Canada)
Giulia Rastrelli, MD, PhD (Italy)
David Rowland, PhD (USA)
Hossein Sadeghi-Nejad, MD, FACS (USA)
Yoshi Sato, MD (Japan)
James A. Simon, MD (USA)
Ryan Terlecki, MD (USA)
Jean-Etienne Terrier, MD (France)
Sarah Wåhlin-Jacobsen, MD (Denmark)
Daniela Wittmann, PhD, LMSW (USA)

Regional Affiliate Society Liaisons
Nelson E. Bennett, MD (USA), SMSNA
Selim Cellek, MD, PhD (UK), ESSM
Abdulaziz Baazeem, MD, FRCS, FECSM (Saudi Arabia), MESSM
Alejandro Carvajal, MD (Colombia), SLAMS
Vasan Satya Srin, MS (India), SASSM
Shari Goldfarb, MD (USA), ISSWSH
GUIDE FOR AUTHORS

Aims and Scope
The Journal of Sexual Medicine publishes multidisciplinary basic science and clinical research to define and understand the scientific basis of male, female, and couple's sexual function and dysfunction. As an official journal of the International Society for Sexual Medicine (ISSM) and the International Society for the Study of Women's Sexual Health, it provides healthcare professionals in sexual medicine with essential educational content and promotes the exchange of scientific information generated from experimental and clinical research.

The objective of The Journal of Sexual Medicine is to serve as an interdisciplinary forum to integrate the exchange among disciplines concerned with the whole field of human sexuality. The Journal accomplishes this objective by publishing original articles, as well as other scientific and educational documents that support the missions of the ISSM.

Manuscript Types
The Journal of Sexual Medicine publishes several types of manuscripts. A brief description of each type follows: Original Research
Original research papers are scientific reports from original research in sexual medicine. There is no limit on article length or the number of figures or tables, though we do request the article include a structured abstract of 400 words. It is strongly recommended you include a completed reporting guideline with your Original Research submission to demonstrate the completedness of reporting in your manuscript. Your manuscript will be assessed for the completedness of reporting and failure to adhere to reporting best practices will result in revisions being demanded ahead of publication. For more information on relevant reporting guidelines, please see the section below entitled Reporting Standards: Completeness and the Use of Reporting Guidelines.

Reports
The Journal is currently no accepting Case Reports. If you'd like to submit a case report, please visit Sexual Medicine.

Reviews
Review articles are timely, in-depth treatment of an issue. There is no limit on article length or the number of figures or tables, though we do request the article include an abstract of no more than 400 words. Though narrative reviews are welcomed, meta-analyses and systemic reviews are preferred complete with thorough adherence to the PRISMA reporting guideline criteria. You must demonstrate inclusion of these essential reporting criteria or the article will be returned for thorough revision.

Editorials
Editorials provide opinions of recognized leads in the field. Editorials providing commentary and analysis of an article in a particular issue of The Journal are always solicited. Authors of the original paper will be given opportunity to respond to the editorial comment. Editorial comments are limited to 1,000 words, with up to 7 references.

Brief Communication
Brief Communications should be no more than 1,000 words, and include a structured abstract, 1 figure, and up to 10 references.

Letters to the Editor
Letters to the Editor, subject to editing, are considered for publication provided they do not contain material submitted or published elsewhere. The text must not exceed 500 words or have more than 5 references, and one figure or table. Letters referring to a published article must be received within four months of the article's publication.

Surgeons Corner
Papers published in Surgeons Corner will include those commissioned for the section, and those submitted as original research papers that focus on the technical aspects of a broad range of surgical procedures in male and female sexual medicine. Manuscripts should adhere to the following structure: Introduction/Background (rationale for novel technique), Indications for procedure, Pre-operative preparation, Intra-operative considerations, Post-operative management and follow-up, Outcomes (including a brief review of the literature), Complications, Take-home message, References. The completed manuscript should not exceed 2500 words, excluding figures, tables, references, and the abstract.

Contact details
EDITOR-IN-CHIEF
John Mulhall, MD
Memorial Sloan Kettering Cancer Center
Director, Male Sexual and Reproductive Medicine Program
New York, NY, USA
jsmeditorinchief@gmail.com

Address correspondence to the Editorial Office:
Jason Roberts, PhD
Managing Editor, The Journal of Sexual Medicine (JSM)

Donna Schena
Assistant Managing Editor, The Journal of Sexual Medicine (JSM)

Denise Gibson
Peer Review Manager, The Journal of Sexual Medicine (JSM)
jsm@issm.info

Indexing
The Journal is indexed by Academic Search (EBSCO), CAS: Chemical Abstracts Service (CAS), Current Contents: Clinical Medicine (Clarivate Analytics), EMBASE (Elsevier), IBIDS: International Bibliographic Information on Dietary Supplements, Journal Citation Reports/Science Citation Index (Clarivate Analytics), Index Medicus/MEDLINE/PubMed (NLM), PsycINFO, Science Citation Index Expanded (also known as SciSearch), and Scopus (Elsevier).

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

Authors' Professional and Ethical Responsibilities
Should possible scientific misconduct or dishonesty in research submitted for review be suspected or alleged, The Journal of Sexual Medicine reserves the right to forward any submitted manuscript to the sponsoring or funding institution or to other appropriate authorities for investigation. The journal also screens manuscripts for incidents of plagiarism; please ensure that manuscripts present original data written in unique language.

Human and animal rights
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; Uniform Requirements for manuscripts submitted to Biomedical journals. 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.

Declaration of interest
All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted.

2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.

Disclosure Statement
The Journal of Sexual Medicine requires that all authors disclose any potential sources of conflict of interest. Any interest or relationship, financial or otherwise, which might be perceived as influencing an author's objectivity, is considered a potential source of conflict of interest. These must be disclosed when directly relevant or directly related to the work that the authors describe in their manuscript. Potential sources of conflict of interest include, but are not limited to, patent or stock ownership, membership of a company board of directors, membership of an advisory board or committee for a company, and consultancy for or receipt of speaker's fees from a company. The existence of a conflict of interest does not preclude publication in any ISSM journals. If the authors have no conflict of interest to declare, they must also state this at submission. It is the responsibility of the corresponding author to review this policy with all authors and collectively to list on the cover letter to the Editor-in-Chief, in the manuscript (under the Acknowledgements section), and in the online submission system ALL pertinent commercial and other relationships.

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.

Contributors
Each author is required to declare his or her individual contribution to the article: all authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure.

Authorship
The Journal of Sexual Medicine requires that all authors complete an authorship statement. All persons designated as authors should qualify for authorship. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship credit should be based only on substantial contributions to Category 1: a) conception and design, b) analysis of data, and c) interpretation of data; and Category 2: a) drafting the article, or b) revising it critically for important intellectual content; and on Category 3) final approval of the version to be published. Categories 1, 2, and 3 must all be met. Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Any part of an article critical to its main conclusions must be the responsibility of at least one author.

Editors may ask authors to describe what each contributed; this information may be published. Increasingly, multicenter trials are attributed to a corporate author. All members of the group who are named as authors, either in the authorship position below the title or in a footnote, should fully meet the above criteria for authorship. Group members who do not meet these criteria should be listed, with their permission, in the Acknowledgments or in an appendix. The order of authorship should be a joint decision of the coauthors. Because the order is assigned in different ways, its meaning cannot be inferred accurately unless it is stated by the authors. Authors may wish to explain the order of authorship in a footnote. In deciding on the order, authors should be aware that many journals limit the number of authors listed in the table of contents and that the U.S. National Library of Medicine (NLM) lists in MEDLINE only the first 24 plus the last author when there are more than 25 authors.

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.

Randomized Controlled Trials
Reports of Randomized Controlled Trials (RCTs) must state explicitly how the comparison groups were generated, so that readers will be able to assess the method of randomization. In the title and abstract, specify that the manuscript is a report of an RCT. Prior to submitting an RCT manuscript; authors should refer to the CONSORT checklist (Moher D, Schultz KF, Altman D, for the CONSORT Group. The CONSORT statement: revised recommendations for improving the quality of reports of parallel-group randomized trials. JAMA. 2001;285:1987–1991).

Reporting Checklists
Reporting Standards: Completeness and the Use of Reporting Guidelines
In an attempt to improve the quality of research reports in the journal, The Journal of Sexual Medicine now recommends a completed reporting guideline checklist is included with an article submission. The purpose of various reporting guidelines is to provide a guide - in the form of a checklist—to authors and editors alike on essential elements that should be included in a paper to ensure all stakeholders can properly validate results and replicate studies. We expect authors to not only use the reporting guidelines to improve the quality of reporting in their submission, but also use the associated guideline checklist to demonstrate the paper does include essential reporting criteria. Ultimately, this task is about improving a manuscript, not filling out a checklist for administrative purposes.

It is strongly recommended that authors complete one of the reporting checklist listed below that is most appropriate for the subject matter of an article to be submitted to any ISSM publication (The Journal of Sexual Medicine, Sexual Medicine, Sexual Medicine Reviews). This ensures a higher standard of reporting and will enhance the prospects of a manuscript being accepted for publication. Authors should upload a completed copy of the reporting checklist(s) with their submission.

1 STUDY TYPE STUDY TYPE CATEGORY CHECKLIST OF REPORTING STANDARDS CHECKLIST NAME Randomized controlled pharmacotherapy trials RCT (Pharmacotherapy) CONSORT—Consolidated Standards of Reporting Trials CONSORT Statement Case Reports Case Reports ISSM Case Report Checklist ISSM Case Report Checklist Other pharmacotherapy and herbal medicinal trials (noninferiority trials, pragmatic trials, cluster trials, reporting of harms) RCT (Other) CONSORT extensions (tailored versions of the main CONSORT Statement produced by CONSORT Checklist Observational epidemiology studies Observational Epidemiological Studies STROBE—Strengthening the reporting of observational studies in epidemiology STROBE Checklist Qualitative Research Qualitative Research COREQ—Consolidated criteria for reporting qualitative research COREQ Checklist Diagnostic Accuracy Studies Diagnostic Accuracy Studies STARD—Standards for reporting diagnostic accuracy STARD Checklist Systematic reviews Systematic Reviews PRISMA (formerly known as QUOROM)—Improving the quality of reports of meta-analyses of randomized controlled trials PRISMA Checklist Meta-analyses of controlled trials Meta-analysis of Controlled Trials PRISMA (formerly known as QUOROM)—Improving the quality of reports of meta-analyses of randomized controlled trials PRISMA Checklist Meta-analyses of observational studies Meta-Analyses of Observational Studies MOOSE—Meta-analysis of observational studies in epidemiology MOOSE Checklist Quality improvement reports Quality Improvement Reports SQUIRE—Standards for quality improvement reporting excellence SQUIRE Checklist


For more information, please refer to the guidelines at http://www.icmje.org/#clin_trials. Upon submission, please provide the registration identification number and the URL for the trial’s registry in your cover letter.

Reports of Diagnostic Tests

**Cell Line Authentication**

To ensure the highest standards of quality and accuracy, *The Journal of Sexual Medicine* strongly encourages the authentication of cell lines used in the research submitted. Manuscripts based on research using cell lines must include a statement addressing the following points in the Methods section of the manuscript:

1. Where the cells were obtained from
2. Whether the cell lines have been tested and authenticated
3. The method by which the cells were tested

If cells were obtained directly from a cell bank that performs cell line characterizations and passaged in the user’s laboratory for fewer than 6 months after receipt or resuscitation, re-authorization is not required. In these cases, please include the method of characterization used by the cell bank. If the cell lines were obtained from an alternate source, authors must provide authentication of the origin and identity of the cells. This is best achieved by DNA (STR) profiling. The DNA profile should be cross-checked with the DNA profile of the donor tissue (in case of a new cell line) or with the DNA profile of other continuous cell lines.

**Gene names and genetic profiling data:** Please mark all gene names in italics. However, only the gene names should be written in italics, to distinguish them from gene products, gene segments, clusters, families, complexes, or groups. Authors should only use the official gene name as assigned by the respective gene nomenclature committee. Regarding comprehensive data sets of genetic profiling (microarray) studies, raw data must be in a publicly available database that requires MIAME format (for example, “GEO” or “Array Express”) upon submission of a paper. Nucleotide sequence data can be submitted in electronic form to any of the three major collaborative databases: DDBJ, EMBL or GenBank. It is only necessary to submit to one database as data are exchanged between DDBJ, EMBL and GenBank on a daily basis. The suggested wording for referring to accession-number information is: ‘These sequence data have been submitted to the DDBJ/EMBL/GenBank databases under accession number U12345.’

**Statistical Guidelines**

All submitted manuscripts containing data analyses will be evaluated for the integrity of the statistical methods as well as a sufficient description of the methodological approach. This will entail evaluation of the study design, statistical analysis and presentation and interpretation of study results. As a general guideline, readers of the manuscript should be able to replicate the analysis with the same data based on the description given in the Methods section. Authors are encouraged to carefully select language in the Discussion that is appropriate given the study design and refrain from causal inferences from observational (nonrandomized) studies.

Authors should also be explicit about the limitations of the study. Failure to disclose important limitations upon submission will be viewed with greater scrutiny than those clearly discussed. Key elements which should be consistent for all submitted manuscripts include the following Report the sample size n for each study and each analysis Describe the power analysis to justify the sample size if appropriate Identify all statistical methods and verify the assumptions for all statistical tests Provide alpha (the probability of a Type I error) for all statistical tests Specify whether tests are one- or two-sided Report the descriptive statistics (n, mean, median, and standard deviation) for all continuous variables Report n and the sample proportion for binary variables Adequately explain complex statistical procedures such a multivariate logistic regression and the Cox proportional hazards regression model and verify the assumptions of each such procedure Report the actual P-values and explain what is meant by statistical significance Discuss and describe adjustments for multiple testing

**Copyright**

Upon acceptance of an article, authors will be asked to complete a ‘Journal Publishing Agreement’ (for more information on this and copyright, see [http://www.elsevier.com/copyright](http://www.elsevier.com/copyright)). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a ‘Journal Publishing Agreement’ form or a link to the online version of this agreement.
The Journal of Sexual Medicine requires that authors submit electronically via the ScholarOne Manuscripts online submission site. Complete, detailed instructions on uploading your manuscript are detailed below.

First click on the "Check for Existing Account" button on the opening page of the website (the bottom of the two buttons). If you do not already have an account, then create an account for yourself by clicking on the "Create an Account" button. You will then be able to submit and monitor the progress of your manuscripts. Follow the submittal instructions carefully.

At the end of a successful submission, a confirmation screen with manuscript number will appear and you will receive an E-mail confirming that the manuscript has been received by the journal. If this does not happen, please check your submission and/or contact the editorial office at jsm@issm.info. Through individual Author Centers on this website, authors can view the status of their manuscripts as they progress through the review process.

Any major word processor software may be used, and both DOS-based and Macintosh operating systems are acceptable.

Submit your article
Please submit your article via http://mc.manuscriptcentral.com/jsm.

Referrals to Sexual Medicine
The Journal of Sexual Medicine works together with the ISSM's Open Access Journal, Sexual Medicine, to enable rapid publication of good quality research that we are unable to accept for publication in The Journal of Sexual Medicine. Authors, whose papers are rejected by The Journal of Sexual Medicine, may be offered the option of having the paper, along with any related peer reviews, automatically transferred for consideration by the Editors of Sexual Medicine. Publication decisions will be made a short time after the transfer takes place. The Editors of Sexual Medicine will accept submissions that report well-conducted research which reaches the standard acceptable for publication. Sexual Medicine is an Open Access journal and article publication fees apply. For more information please go to http://www.sm.issm.info.

Please note that if you are an author or reviewer for The Journal of Sexual Medicine, you automatically have an account with Sexual Medicine and you should use the same login information for submission for that journal that you use for the other journal.

PREPARATION
Editorial and Peer Review Process
The Journal of Sexual Medicine maintains the highest standards of peer review and pursues editorial approaches that may help us avoid bias. All submitted manuscripts are reviewed for quality, novelty, scientific importance, and relevance to The Journal's readership. Manuscripts with insufficient priority for publication or those that are outside the scope of The Journal are rejected promptly, or, if appropriate, referred to Sexual Medicine. Manuscripts are assigned to an Associate Editor, who is a subject expert. Associate Editors select the external peer reviewers who are experts in the field, and submit a recommendation to the Editor-in-Chief along with the peer review reports. The Editor-in-Chief makes all final decisions on manuscripts. All research articles published in The Journal undergo full peer review. We do our utmost to judge research objectively on its own merits and to avoid favoring research, for example, from particular institutions, countries, or regions. The Journal of Sexual Medicine employs a double-blind review process in which author identities and peer reviewer identities are kept confidential from one another. All publication decisions are made by the Editor-in-Chief on the basis of the reviews provided. Members of the Editorial Board lend insight, advice, and guidance to the Editor-in-Chief generally and assist in decision making on specific submissions. The Managing Editor and Assistant Managing Editor provide administrative support to ensure The Journal maintains the integrity of peer review and delivers rapid and efficient publication to authors and reviewers. The existence of a manuscript under review is not revealed to anyone other than the peer reviewers and editorial staff. Peer reviewers are required to maintain confidentiality about the manuscripts they review and must not divulge any information about a specific manuscript or its content to any third party without prior permission from the journal editors. All authors will be sent notification of the receipt of manuscripts and editorial decisions by e-mail. During the review process, designated contact authors can also check the status of the submitted manuscript via ScholarOne Manuscripts at http://mc.manuscriptcentral.com/jsm.
Information for Peer Reviewers
As per the guidelines issued by the World Association of Medical Editors (for further information, refer to http://www.WAME.org):

Reviews will be expected to be professional, honest, courteous, prompt, and constructive. The desired major elements of a high-quality review should be as follows: The reviewer should have identified and commented on major strengths and weaknesses of study design and methodology. The reviewer should comment accurately and constructively upon the quality of the author's interpretation of the data, including acknowledgment of its limitations. The reviewer should comment on major strengths and weaknesses of the manuscript as a written communication, independent of the design, methodology, results, and interpretation of the study. The reviewer should comment on any ethical concerns raised by the study, or any possible evidence of low standards of scientific conduct. The reviewer should provide the author with useful suggestions for improvement of the manuscript. The reviewer's comments to the author should be constructive and professional. The review should provide the editor the proper context and perspective to make a decision on acceptance (and/or revision) of the manuscript.

Recommendations about publication are appreciated and are welcomed in the comments to the Editors. However, we kindly ask that reviewers not make such recommendations in their comments to the authors. Indeed, it is our policy to edit such comments out of any communications to authors.

Double-Blind Peer Review
This journal uses double-blind peer 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.

Use of word processing software
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.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Article structure

Subdivision - unnumbered sections
Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

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

Material and methods
Provide sufficient details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.
Results
Results should be clear and concise.

Discussion
This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

Conclusions
The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

Appendices
If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Essential title page information
• Title. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
• Author names and affiliations. Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.
• Corresponding author. Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author.
• Present/permanent address. If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

Structured abstract
The Journal of Sexual Medicine has changed the format of its abstract in an effort to permit the reader to glean a greater degree of understanding of the research by simply reading the abstract without reading the full manuscript. The aim is to expand the Methods and Results sections to facilitate a more meaningful interpretation of the research. The length of the abstract will be extended to 400 words.

Clinical papers will have the following headers (with suggested lengths):
Background (one sentence)
Aim (one sentence)
Methods
Outcomes (one sentence)
Results
Clinical Implications (one sentence)
Strengths & Limitations
Conclusion (one sentence)

Basic science papers will have the following headers (with suggested lengths):
Background (one sentence)
Aim (one sentence)
Methods
Outcomes (one sentence)
Results
Clinical Translation (one sentence)
Strengths & Limitations
Conclusion (one sentence)
Keywords
Below the abstract authors should provide, and identify as such, 4 to 10 key words or short phrases that will assist indexers in cross-indexing the article and may be published with the abstract. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used; if suitable MeSH terms are not yet available for recently introduced terms, present terms may be used.

Abbreviations
A list of acceptable abbreviations is published in the Uniform Requirements for Manuscripts submitted to Biomedical Journals (also known as the Declaration of Vancouver). For more information, refer to: International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journal (Ann Intern Med 1997;126:36-47). You may contact the Editor or publisher directly with questions.

Acknowledgements
Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

Formatting of funding sources
List funding sources in this standard way to facilitate compliance to funder's requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units
Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Math formulae
Please submit math equations as editable text and not as images. Present simple formulae in line with normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

Embedded math equations
If you are submitting an article prepared with Microsoft Word containing embedded math equations then please read this (related support information).

Footnotes
Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors can build footnotes into the text, and this feature may be used. Otherwise, please indicate the position of footnotes in the text and list the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

Artwork
Electronic artwork
General points
• Make sure you use uniform lettering and sizing of your original artwork.
• Embed the used fonts if the application provides that option.
• Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
• Number the illustrations according to their sequence in the text.
• Use a logical naming convention for your artwork files.
• Provide captions to illustrations separately.
• Size the illustrations close to the desired dimensions of the published version.
• Submit each illustration as a separate file.

A detailed guide on electronic artwork is available.

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

Formats
If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply ‘as is’ in the native document format.

Regardless of the application used other than Microsoft Office, 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 all used fonts.
- TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.
- TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
- TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

Please do not:
• Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
• Supply files that are too low in resolution;
• Submit graphics that are disproportionately large for the content.

Color artwork
Please make sure that artwork files are in an acceptable format (TIFF (or JPEG), EPS (or PDF), or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color online (e.g., ScienceDirect and other sites) regardless of whether or not these illustrations are reproduced in color in the printed version. For color reproduction in print, you will receive information regarding the costs from Elsevier after receipt of your accepted article. Please indicate your preference for color: in print or online only. Further information on the preparation of electronic artwork.

Illustration services
Elsevier's WebShop offers Illustration Services to authors preparing to submit a manuscript but concerned about the quality of the images accompanying their article. Elsevier's expert illustrators can produce scientific, technical and medical-style images, as well as a full range of charts, tables and graphs. Image 'polishing' is also available, where our illustrators take your image(s) and improve them to a professional standard. Please visit the website to find out more.

Figure captions
Ensure that each illustration has a caption. Supply captions separately, not attached to the figure. A caption should comprise a brief title (not on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

Tables
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.

References
Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.
References are to be cited consecutively in the text typed after the final punctuation. References at the end of each manuscript should be listed in the order in which they are first cited in the text, typed double-spaced. The references should conform to the Index Medicus style, omitting number and day of month of issue. Punctuation is shown in the examples below. References to articles in press must state name of journal and if possible, volume and year.

For journal articles: all authors should be listed, title of article; name of journal; year; volume number; first and last page.

For books: surname and initials of all authors, title and subtitle, edition (other than first), publishing house, city, year, page as specific reference.

For chapters in books: surname and initials of all authors of chapter, title of chapter, editors, authors, or compilers of book, title of book, edition (other than first), publishing house, city, year, page.


Reference links
Increased discoverability of research and high quality peer review are ensured by online links to the sources cited. In order to allow us to create links to abstracting and indexing services, such as Scopus, CrossRef and PubMed, please ensure that data provided in the references are correct. Please note that incorrect surnames, journal/book titles, publication year and pagination may prevent link creation. When copying references, please be careful as they may already contain errors. Use of the DOI is encouraged.

A DOI can be used to cite and link to electronic articles where an article is in-press and full citation details are not yet known, but the article is available online. A DOI is guaranteed never to change, so you can use it as a permanent link to any electronic article. An example of a citation using DOI for an article not yet in an issue is: VanDecar J.C., Russo R.M., James D.E., Ambeh W.B., Franke M. (2003). Aseismic continuation of the Lesser Antilles slab beneath northeastern Venezuela. Journal of Geophysical Research, https://doi.org/10.1029/2001JB000884. Please note the format of such citations should be in the same style as all other references in the paper.

Web references
As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

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.

References in a special issue
Please ensure that the words 'this issue' are added to any references in the list (and any citations in the text) to other articles in the same Special Issue.

Reference style
Text: Indicate references by number(s) in square brackets in line with the text. The actual authors can be referred to, but the reference number(s) must always be given.
List: Number the references (numbers in square brackets) in the list in the order in which they appear in the text.
Examples:
Reference to a book:
Reference to a chapter in an edited book:

Reference to a website:

Reference to a dataset:

Note shortened form for last page number. e.g., 51–9, and that for more than 6 authors the first 6 should be listed followed by 'et al.' For further details you are referred to 'Uniform Requirements for Manuscripts submitted to Biomedical Journals' (J Am Med Assoc 1997;277:927–34) (see also Samples of Formatted References).

Journal abbreviations source
Journal names should be abbreviated according to the List of Title Word Abbreviations.

Video
Elsevier accepts video material and animation sequences to support and enhance your scientific research. Authors who have video or animation files that they wish to submit with their article are strongly encouraged to include links to these within the body of the article. This can be done in the same way as a figure or table by referring to the video or animation content and noting in the body text where it should be placed. All submitted files should be properly labeled so that they directly relate to the video file's content. In order to ensure that your video or animation material is directly usable, please provide the file in one of our recommended file formats with a preferred maximum size of 150 MB per file, 1 GB in total. Video and animation files supplied will be published online in the electronic version of your article in Elsevier Web products, including ScienceDirect. Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data. For more detailed instructions please visit our video instruction pages. Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the article that refer to this content.

Supplementary material
Supplementary material such as applications, images and sound clips, can be published with your article to enhance it. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files as these will appear in the published version.

Manuscript Submission
In general, manuscripts should be prepared in accordance with “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” developed by the International Committee of Medical Journal Editors (http://www.icmje.org).

We place few restrictions on the way in which you prepare your article, and it is not necessary to try to replicate the layout of the journal in your submission. We ask only that you consider your reviewers by supplying your manuscript in a clear, generic and readable layout, and ensure that all relevant sections are included. Our production process will take care of all aspects of formatting and style.

Please use the Manuscript Submission Checklist below to ensure that the manuscript has all the information necessary for successful publication.

Checklist
Please complete the following steps to ensure the correct submission of your manuscript:
1. Include a title page for your manuscript that is separate from the rest of the main document (preferably uploaded as a Supplementary File Not for Review), including: Full author names and the highest qualifications (PhD, MD, etc.) for all authors; Institution, city and country details for each author; Address of corresponding author (especially email address for the person to whom the proof notification is to be sent).

2. Please upload the main manuscript without identifying author information, including: Title page WITHOUT authors’ names or authors’ affiliations; Abstract and 4–10 keywords; Text (introduction, materials and methods, results, discussion); Literature cited (see below for tips on references); Tables (may be sent as a separate file if necessary); Figure legends; Acknowledgements, including details of funding bodies with grant numbers.

3. Abstracts for Original Research articles must be structured as follows: Introduction, Aims, Methods, Main Outcome Measures, Results, Conclusion.

4. Provide a conflict of interest statement for every author.

5. Please pay attention to the quality of all figures and artwork supplied (see below for requirements): All charts must be in black and white or grayscale. Should your figures originate in a PowerPoint presentation, please remove: any previous presentation effects, such as line-art color that is not of didactic value; background color or shading effects and 3-dimensional views where 2-d can convey results with equal effectiveness. All text included in figure labels must be of a sufficient size to be legible should the figure be resized during typesetting. Do not include the figure title or figure identification number within the figure itself. This does not reproduce effectively and typically does not fit journal style. Please save your figure files at the highest resolution possible. Please also supply figure art in original file formats whenever possible. Images imbedded in a MS Word document typically do not possess a resolution as high as the original file.

6. Have all scientific symbols used in your manuscript transferred successfully to the PDF proof? Please correct this problem before submission.

7. All references must be displayed sequentially based upon order of citation. References ordered alphabetically are not acceptable. Failure to comply with, or perform, these important tasks may delay both peer-review of your manuscript and its eventual publication.

Drugs and Devices

Use of generic drug names (or generic name followed by trade name in parentheses) may be used. Include manufacturer and their location (city and country) for drugs and devices.

Permission

Information reproduced from another source must be properly cited. The corresponding author is responsible for obtaining written permission from the appropriate authors and/or copyright holders to use previously published or copyrighted material. Signed permission statements from the copyright holder for both print and online reproduction must be sent to The Journal of Sexual Medicine Editorial Office upon manuscript submission. Permission statements also must be obtained from at least one author when citing unpublished data, in press articles, and/or personal communications.

AFTER ACCEPTANCE

Proofs

One set of page proofs (as PDF files) will be sent by e-mail to the corresponding author (if we do not have an e-mail address then paper proofs will be sent by post) or, a link will be provided in the e-mail so that authors can download the files themselves. Elsevier now provides authors with PDF proofs which can be annotated; for this you will need to download the free Adobe Reader, version 9 (or higher). Instructions on how to annotate PDF files will accompany the proofs (also given online). The exact system requirements are given at the Adobe site. If you do not wish to use the PDF annotations function, you may list the corrections (including replies to the Query Form) and return them to Elsevier in an e-mail. Please list your corrections quoting line number. If, for any reason, this is not possible, then mark the corrections and any other comments (including replies to the Query Form) on a printout of your proof and scan the pages and return via e-mail. 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. We will do everything possible to get your article published quickly and accurately. 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.

Offprints
The corresponding author will, at no cost, receive a customized Share Link providing 50 days free access to the final published version of the article on ScienceDirect. The Share Link can be used for sharing the article via any communication channel, including email and social media. 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. Corresponding authors who have published their article gold open access do not receive a Share Link as their final published version of the article is available open access on ScienceDirect and can be shared through the article DOI link.

Production Questions
Please direct any questions regarding the production of your article to the Journal Manager, Deborah Stone, at d.stone@elsevier.com.

Embargo Policy
Once submitted, contributions cannot be discussed with the media until one week before the publication date. Accepted articles are embargoed from reporting by all media until 12:01 A.M. (EST) on the date of issue. Authors who discuss their work with the media prior to publication must ensure that the media representatives know the embargo policy and the embargo date. Authors arranging their own publicity on their articles are advised to notify The Journal of Sexual Medicine Editorial Office in advance. The Journal of Sexual Medicine does not provide embargo dates to authors arranging their own publicity.

SELF-ARCHIVING
Following publication of the final published version, the author retains the right to self-archive the submitted version on the author's personal website or in the author's institution's/employer's institutional repository or archive. This right extends to both intranets and the Internet. Authors may not self-archive on 3rd-party repositories. Authors may not update the submitted version or replace it with the published version. The version posted must contain a legend as follows: This is the pre-peer-reviewed version of the following article: FULL CITE, which has been published in final form at [Link to final article]. Please see the Copyright Transfer Agreement for additional details on author rights.

NIH PUBLIC ACCESS MANDATE
The Journal of Sexual Medicine fully complies with the NIH public access mandate. For those interested in Elsevier's policy on the NIH Public Access Mandate, please visit http://www.elsevier.com/about/open-science/open-access/agreements for our policy statement.

GETTING HELP
If you need additional help, please contact the Managing Editor at jsm@issm.info.

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.