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**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.

**IMPACT FACTOR**

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GUIDE FOR AUTHORS

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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 limited to 1,000 words. 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.

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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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In most cases a discussion of the limitations is appropriate and should be included in this section of the manuscript.
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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.

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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.

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To ensure a high and consistent quality of research reporting, Full Length Articles, Short Communications and Clinical Letters, must contain sufficient information to allow readers to understand how a study was designed and conducted. For review articles, systematic or narrative, readers should be informed of the rationale and details behind the literature search strategy.

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