Psychological Medicine

Editorial Policy

_Psychological Medicine_ is a journal aimed primarily for the publication of original research in clinical psychiatry and the basic sciences related to it. These include relevant fields of biological, psychological and social sciences. Review articles, editorials and letters to the Editor discussing published papers are also published. Contributions must be in English.

Submission of manuscripts

Manuscripts should be submitted online via our manuscript submission and tracking site, [http://www.editorialmanager.com/psm/](http://www.editorialmanager.com/psm/). Full instructions for electronic submission are available directly from this site. To facilitate rapid reviewing, communications for peer review will be electronic and authors will need to supply a current e-mail address when registering to use the system.

Papers for publication from Europe, (except those on genetic topics, irrespective of country), and all papers on imaging topics, should submitted to the UK Office.

Papers from the Americas, Asia, Africa, Australasia and the Middle East, (except those dealing with imaging topics), and all papers dealing with genetic topics, irrespective of country, should be sent to US Office.

All enquiries should be directed to the Editorial Office at psychmed@cambridge.org.
Please see the below table for the types of papers accepted:

<table>
<thead>
<tr>
<th>Article Type</th>
<th>Usual Max Word count*</th>
<th>Abstract</th>
<th>References</th>
<th>Tables/figures**</th>
<th>Supplementary material online only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original article</td>
<td>4500</td>
<td>250 words, structured, using subheadings Background, Methods, Results, Conclusions</td>
<td>Harvard style – see elsewhere in this document for full details</td>
<td>Usually up to 5 total</td>
<td>Yes</td>
</tr>
<tr>
<td>Review article</td>
<td>4500</td>
<td>250 words, not structured</td>
<td>Harvard style</td>
<td>Usually up to 5 total</td>
<td>Yes</td>
</tr>
<tr>
<td>Editorial</td>
<td>3500</td>
<td>No</td>
<td>Harvard style</td>
<td>Usually up to 5 total</td>
<td>Yes</td>
</tr>
<tr>
<td>Correspondence</td>
<td>1500</td>
<td>No</td>
<td>max 20 Harvard style</td>
<td>Max 1</td>
<td>No</td>
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<tr>
<td>Commentary</td>
<td>2000 By invitation of editor</td>
<td>No</td>
<td>max 20 Harvard style</td>
<td>Not usually</td>
<td>Yes</td>
</tr>
</tbody>
</table>

* Editors may request shortening or permit additional length at their discretion in individual cases  
** May be adjusted in individual cases at Editors’ discretion

NOTE:

1. Figures should be submitted as discrete files, not embedded in the text of the main document.
2. Supplementary material for online only should be submitted as discrete files, not as part of the main text.

Generally papers should not have text more than 4500 words in length (excluding abstract, tables/figures and references) and should not have more than a combined total of 5 tables and/or figures. Papers shorter than these limits are encouraged. For papers of unusual importance the editors may waive these requirements. Articles require a structured abstract of no more than 250 words including the headings: Background; Methods; Results; Conclusions. Review Articles require an unstructured abstract of no more than 250 words. The name of an author to whom correspondence should be sent must be indicated and a full postal address given in the footnote. Any acknowledgements should be placed at the end of the text (before the References section).

Contributors should also note the following:
1. S.I. units should be used throughout in text, figures and tables.
2. Authors should spell out in full any abbreviations used in their manuscripts.
3. Foreign quotations and phrases should be followed by a translation.

Neuroscience-based Nomenclature

For papers concerning neuropsychopharmacological treatments, Psychological Medicine encourages authors to utilize the ‘Neuroscience-based Nomenclature’ developed by the ECNP Taskforce on Nomenclature. The need for such a change arose to address a longstanding concern within the neuropsychopharmacological community that the nomenclature of psychotropic drugs did not properly reflect the underlying neuroscience of these compounds, as well as being unhelpful to clinicians and confusing to patients (e.g. the prescription of ‘antipsychotics’ for depression).

More information about the nomenclature can be found on the ECNP website here, and in the paper here. The Neuroscience-based Nomenclature (NbN) itself is available free of charge as a mobile app (for both Android and iOS devices).
References

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(2) The References section should be in alphabetical order. Examples follow:


Note: authors' names should be in bold font; journal titles should always be given in full.

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Required Statements

Acknowledgements

You may acknowledge individuals or organisations that provided advice, support (non-financial). Formal financial support and funding should be listed in the following section.

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(Revised 4 April 2016)