

Neuropsychopharmacology

At the intersection of brain, behavior, and therapeutics

Guide to Authors

About the Journal	1	Submission of Manuscripts	13
Editorial Policies	2	Further Information	18
Preparation of Manuscripts	7		

ABOUT THE JOURNAL

Aims and Scope

Neuropsychopharmacology is an international scientific journal and the official publication of the American College of Neuropsychopharmacology (ACNP). This journal focuses upon clinical and basic science contributions that advance our understanding of the brain and behavior, especially as related to the molecular, cellular, physiological and psychological properties of agents acting within the central nervous system and the identification of the new molecular targets for the development of the next generation of drugs. While original reports are preferred, mini-reviews and perspectives are invited by the editorial office. In view of the interdisciplinary nature of the field, particular emphasis is placed on:

- studies that advance the biological bases of normal and pathological behavior
- the nature, etiology and pathophysiology of neuropsychiatric disorders
- biologically relevant aspects of the epidemiology, diagnosis and treatment of these disorders
- the basic mechanisms by which psychopharmacological agents exert their effect

Journal Details:

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Examples of declarations are:

- Funding and Disclosure

The authors declare no conflict of interest.

- Funding and Disclosure

Dr. Brown's work has been funded by the NIH. He has received compensation as a member of the scientific advisory board of Rx Pharmaceutical and owns stock in the company. He also has consulted for BioScript and received compensation. Dr. Smith and Dr. Liu declare no potential conflict of interest.

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As defined by the International Committee of Medical Journal Editors (ICMJE), a clinical trial is any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. A medical intervention is any intervention used to modify a health outcome and includes but is not limited to drugs, surgical procedures, devices, behavioral treatments, and process-of-care changes. A trial must have at least one prospectively assigned concurrent control or comparison group in order to trigger the requirement for registration. Nonrandomized trials are not exempt from the registration requirement if they meet the above criteria.

When reporting experiments on human subjects, it must be indicated whether the procedures were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) or with the Helsinki Declaration of 1975 (as revised in 1983). Include Institutional Review Board or Animal Care and Use Committee approvals.

All clinical trials must be registered in a public registry prior to submission. *Neuropsychopharmacology* subscribes to the trials registration policy of the ICMJE (www.ICMJE.org) and considers only trials that have been appropriately registered before submission, regardless of when the trial closed to enrollment. Acceptable registries must meet the following ICMJE requirements:

1. Be publicly available, searchable, and open to all prospective registrants
2. Have a validation mechanism for registration data
3. Be managed by a not-for-profit organization

Examples of registries that meet these criteria include (1) the registry sponsored by the United States National Library of

Medicine (<http://www.clinicaltrials.gov>); (2) the [International Standard Randomised Controlled Trial Number Registry](#); and (3) the European [Clinical Trials Database](#).

All clinical trials submitted to *Neuropsychopharmacology* should be accompanied by a completed [CONSORT checklist](#) (Please submit as a "Related Manuscript File"). A CONSORT flowchart should also be provided as a Figure or as Supplemental Material. Please find the flowchart at <http://www.consort-statement.org/>.

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- [Medical Publishing Insights and Practices Initiative](#)

Consent to Participate Policy

For all research involving human subjects, informed consent to participate in the study should be obtained from participants (or their parent or legal guardian in the case of children under 16) and a statement to this effect should appear in the manuscript. For manuscript reporting studies involving vulnerable groups (for example unconscious patients) where there is the potential for coercion (for example prisoners) or where consent may not have been fully informed, manuscripts will be considered at the editor's discretion. In the case of articles describing human transplantation studies, authors must include a statement declaring that no organs/tissues were obtained from prisoners and must also name the institution(s)/clinic(s)/department(s) by which organs/tissues were obtained.

Publishing images from human research participants

When publishing identifiable images from human research participants in Nature Research journals, authors include a statement in the published paper affirming that they have obtained informed consent for publication of the images. All reasonable measures must be taken to protect patient anonymity. Black bars over the eyes are not acceptable means of anonymization. In certain cases, we may insist upon obtaining evidence of informed consent from authors.

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All systematic reviews or meta-analyses submitted to *Neuropsychopharmacology* should be accompanied by a completed PRISMA checklist (Please submit as a “Related manuscript File”). A PRISMA flowchart should also be provided as a Figure or as Supplemental Material. Please find the checklist and flowchart at <http://prisma-statement.org/>.

ANIMAL MODELS (Effective June 1, 2019)

Manuscripts should be free of data over-interpretation and/or sensationalism. Authors should refrain from the use of language to imply that they are able to replicate in laboratory animals complex neuropsychiatric disorders or traits that are unique to the human species. Terminology such as “Animal model of [psychiatric disorder X]” lacks precision and perpetuates misconceptions. Instead, authors should use terminologies such as “Animal model useful for the study of [psychiatric disorder X]” and/or focus on the objective endpoints being measured. When describing outcomes, authors should use the suffix “-like” (e.g., “antidepressant-like effects”).

As a broadly representative example: rather than stating “An SSRI had antidepressant effects in the tail suspension model of depression”, a more accurate description of the procedure and its outcome would be “An SSRI increased struggling time in the tail suspension test, an animal model useful in the study of depression, indicating an antidepressant-like effect”.

For more detail on the basis for this policy, see Bale et al., 2019, *Neuropsychopharmacology*, <https://www.nature.com/articles/s41386-019-0405-9.pdf>

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NPP is a member of the Neuroscience Peer Review Consortium (NPRC). The purpose of the NPRC is to decrease the time and effort involved in the peer review process, and reduce the burden placed on reviewers. Authors of papers that have been rejected after review may request that NPP transfer reviews to other member journals, and or request member journals transfer requests to NPP.

Authors can request to have reviews transferred by contacting [NPP's editorial office](#). For a complete list of member journals, please see the [list on the NPRC website](#).

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2. Include a rebuttal letter at initial submission to NPP to address previous reviews and outline changes or comments.
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A certain degree of image processing is acceptable for publication (and for some experiments, fields and techniques is unavoidable), but the final image must correctly represent the original data and conform to community standards. The guidelines below will aid in accurate data presentation at the image processing level.

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- Cropped gels in the paper must retain important bands.
- Cropped blots in the body of the paper should retain at least six band widths above and below the band.
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We strongly encourage that all datasets on which the conclusions of the paper rely should be available to readers. We encourage authors to ensure that their datasets are either deposited in publicly available repositories (where available and appropriate) or presented in the main manuscript or additional supporting files whenever possible. Where one does not exist, the information must be made available to referees at submission and to readers promptly upon request. Any restrictions on material availability or other relevant information must be disclosed in the manuscript's Methods section and should include details of how materials and information may be obtained.

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COMMUNICATION

Correspondence with the journal

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- Original Articles
- Review Articles
- Correspondence (Letters to the Editor)
- Commentaries
- Perspectives
- Editorials
- Research Highlights
- Consensus Articles
- Circumspectives

MANUSCRIPT SPECIFICATIONS BY ARTICLE TYPE

Article Type	Abstract	Word Count	Display Items (Figures and tables)	References (maximum)
Original Article†	Yes	4000	5	No limit
Review Article †*	Yes	4000	5	No limit
Correspondence (LTE)	No	500	1	6
NPPR Review Article *	By invitation only: authors will receive editorial guidelines upon invitation.			
NPPR Hot Topic *	By invitation only: authors will receive editorial guidelines upon invitation.			
Editorial *	No	1000	1	6

Commentary *	No	1000	1	6
Perspective *	No	1000	1	6
Research Highlight*	No	1000	1	6 (one must be article under discussion)
Consensus Article	Yes (250 word max)	4000	5	No limit

† Requires submitted CONSORT or PRISMA checklist and/or flowchart, where relevant. Please see below for instructions.

* By invitation or pre-submission approval only.

Neuropsychopharmacology does not consider Case Reports, Proceedings, Brief Reports or Rapid Communications for publication.

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The manuscript should be arranged in the following order: title, author(s), affiliation(s), abstract, text, acknowledgments, appendixes, and references. Figures, with figure captions, may be embedded within the manuscript to assist the reviewers and editors. In addition, please submit separate figure source files.

Papers should be formatted as follows:

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 - g. Funding and Disclosure (covers all authors and sources of funding listed for the manuscript)
 - h. Acknowledgments (includes special thanks or dedications)
 - i. Author contributions (mandatory) for all authors
 - j. References (listed by number, in order of appearance)
 - k. Figure legends (Figures should be uploaded as separate attachments but can be embedded for ease of reading.)
3. Tables
4. Figures (May be embedded within the text to assist the reviewers and editor. In addition, please submit separate figure source files.)
5. Supplemental Material (Will be published online only. See "SUPPLEMENTARY INFORMATION" section below.)
6. For all clinical trials: A completed CONSORT checklist and flowchart are required. For all

systematic reviews or meta-analyses, a completed PRISMA checklist and flowchart are required.

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For revised submissions (or original submissions transferred through the NPRC), responses to reviewers' critiques must be included in a rebuttal letter. Responses should NOT be submitted as a cover letter, as reviewers do not have access to cover letters.

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A cover letter is not required, but the authors may provide a cover letter if they wish to convey information to the editor or the editorial office.

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The title page should bear the title of the paper, the full names of all the authors, highest academic degree obtained, and their affiliations, together with the name, full postal address, telephone and fax numbers and e-mail address of the author to whom correspondence and offprint requests are to be sent (This information is also asked for on the electronic submission form). The title should be brief, informative, of 150 characters or less and should not make a statement or conclusion. The running title will be an auto-populated shortened version of the title and does not need to be provided on the title page. Please note - the running head for a manuscript on all pages after the title page will be the shortened manuscript title followed by an ellipsis.

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