

Instructions for Authors

Editors-in-Chief

Endocrinology
 Prof. Dr. med. Martin Reincke
 Universität München
 Medizinische Klinik und Poliklinik IV
 Ziemssenstr. 1, 80336 München
 martin.reincke@med.uni-muenchen.de

Diabetes

Prof. Dr. med. Karsten Müssig
 Klinik für Innere Medizin, Niels-Stensen-Kliniken
 Franziskus-Hospital Harderberg,
 Alte Rothenfelder Str. 23
 49124 Georgsmarienhütte
 Karsten.Muessig@niels-stensen-kliniken.de

Editorial Office

Sabine Klee
 Hamilton Services GmbH
 Landwehrstr. 9, 80806 München
 Tel.: 089/907793614
 eced.editorialoffice@thieme.de

Scope

Experimental and Clinical Endocrinology & Diabetes accepts manuscripts in English in the fields of endocrinology and diabetology from clinical and laboratory research. Special attention is given to obesity, bone metabolism and dyslipidemia. The journal publishes original papers, reviews, mini-reviews and commentaries. Abstracts from national and international meetings submitted by the organizers will also be considered for publication upon request. Manuscripts are received with the explicit understanding that they have not been published elsewhere and are not under simultaneous consideration by any other publication.

Preprint Server Statement

Experimental and Clinical Endocrinology & Diabetes encourages the submission of manuscripts that have been deposited in an initial draft version in preprint repositories such as Research Square, arXiv, and medRxiv. Drafts of short conference abstracts or degree theses posted on the website of the degree-granting institution, and draft manuscripts deposited on authors' or institutional websites are also welcome. All other prior publication is forbidden.

During submission, authors should (1) note use of the preprint repository in the cover letter, (2) state what adjustments and/or updates the draft has undergone between deposition and submission and (3) cite the preprint, including the DOI, as a reference in the manuscript.

After submission to the journal, and until a final decision has been made, authors are discouraged from depositing versions of their manuscript as preprints. Upon publication authors should add a link from the preprint to the published article. Twelve months after publication, authors can update the preprint with the accepted manuscript.

Manuscript Submission

All manuscripts must be submitted exclusively via online submission at <http://mc.manuscriptcentral.com/eced>

Submissions of hardcopy manuscripts will not be accepted. Please refrain from sending manuscripts via e-mail. For submission of all manuscripts, please follow the instructions on the online submission system. Before submission, keep ready full metadata of all manuscripts (title, short running title, authors' names including affiliations and addresses, list of keywords and abstract). Figures should be uploaded separately as *.tif or *.jpg files (resolution: colored and black-white bitmaps: 300 dpi; diagrams and line drawings: 600 dpi minimum). Tables should be uploaded in a separate Word file (not as a *.jpg file). The legends to the figure and table including Arabic numerals should be entered in the appropriate fields during the file upload. Please note that figures and tables should not be integrated into the main document, but a list with the legends of the figures and tables should be included here. Authors are responsible for the correctness of the manuscripts and the list of references.

A. Original Articles

Original papers should deal with investigations and results of high scientific value which have not been published previously.

Authors are asked to follow the outline set below: Page 1: a) title, b) short running title (limit: 40 characters), c) name of the author (no titles or academic grades) and address of the institute(s) where the investigations have been carried out. Should the address of the author at the time of publication differ from the one stated in the paper, the current address should be stated in a footnote, d) complete mailing address of corresponding author including telephone and telefax numbers and e-mail addresses. Page 2: a) an abstract containing not more than 250 words with no abbreviations, b) keywords (3–6 without repeating words in the title). Page 3 and onwards: a) introduction also indicating the aim of the study, b) materials and methods, c) results: double presentation of data in the form of text, tables or figures should be avoided, d) discussion and conclusions, e) list of references, f) legends of tables and figures.

3. References a) *Text*: Citations and references should be numbered consecutively using square brackets in the order in which they are mentioned in the text, followed by any tables or legends. Please do not alphabetize references and bibliographics. Do not use footnotes and hyperlinks. If authors are mentioned in the text, only the first author should be given followed by "et al." whenever the reference has three or more authors. Example: "...protein concentrations were determined according to Lowry et al. [12]. b) *List of References*: References should be given as plain text. Do not use fields in MS Word, as these are difficult to process later. The references should be listed in numbered order according to the sequence they appear in the text. All authors or groups of authors of each publication should be mentioned. The name of the author(s) should be followed by the full title of the paper, name of the journal in which it has been published (abbreviations according to Index Medicus viz. PubMed/Medline), year of publication, volume, first and last page. Abstracts and supplements have to be clearly marked. Chapters from books have to be cited as follows: author(s), title of chapter, title of book, editor(s), place of publication, publisher, year of publication, first and last page of the chapter. **Please note that the journal's reference style is covered by**

Endnote: <https://www.thieme.de/journal-authors>

Examples:

- 9 Lowry OH, Rosebrough NJ, Farr AL et al. Protein measurement with the Folin-phenol reagent. *J Biol Chem* 1951; 193: 265–275
- 10 Kerner W, Pfeiffer EF. The artificial pancreas. In: Samols E, ed. *The endocrine pancreas*. New York: Raven Press, 1991: 441–456

Original papers should not exceed 6 printed pages, including references, tables, figures and legends. One printed page equals approx. 630 words. Small tables/figures (sized 1/4 of a page) reduce the number of words by approx. 150 words per table/figure, large tables/figures (sized 1/2 of a page) reduce the number of words by approx. 300 words per table/figure. Please do not use more than one blank space between words and sentences. A maximum of 4 figures and 3 tables is allowed. Longer manuscripts will be subject to editing and a page charge of € 180 per printed page (including 19% VAT) starting with the seventh printed page.

B. Reviews, Mini-Reviews and Meta-Analyses

Reviews are normally published by invitation only. Reviews deal with previous research on a certain topic and serve to summarize the current state of the art. Their structure varies from an original paper according to the nature of the review. Reviews covering basic research should take a causal and mechanistic approach, whereas reviews dealing with clinical topics should focus on therapeutic relevance. They should not exceed 8 printed pages, including a maximum of 100 references. All reviews will be peer reviewed. **Please refrain from submitting uninvited reviews.** If you plan to submit a review, please contact the editors first, explaining in your letter to the editor why this review is unique and suited to advance the field. Mini-Reviews summarize the main findings only and give a brief outline. They should not exceed 3 printed pages. Meta-Analyses will only be considered if they make a substantial contribution to the field.

C. Methods and Techniques

This section focusses on papers covering novel methods and or substantial improvements on established, proven techniques in endocrinology and diabetes research. The aim is to provide researchers with new, innovative tools that will help them better conduct their research, hence practical relevance is of utmost importance to papers published in this section. Original articles covering recent technical and/or methodological developments or innovations are accepted. Methods must be accurately described and validated and there should ideally be an application to a specific question that the new technique addresses better than other, older methods. Methods must be described in detail so that other researchers can use this method for their own research.

For formal requirements please refer to the instructions for original articles above.

D. Commentaries

Commentaries are usually invited. They aim at commenting on subjects with a strong impact upon experimental endocrinology and diabetology or they refer to a published article directly.

E. Letters to the Editor

This section has been introduced in order to encourage the authors in a free exchange of ideas. The opinions presented will not necessarily reflect the opinions of the Editors.

Publication of manuscripts immediately upon acceptance

Experimental and Clinical Endocrinology & Diabetes offers its authors the option to have their manuscripts published immediately upon acceptance (if the publication preference Open Access is chosen, the manuscript gets published only after payment of the APC has been confirmed).

This means that the unedited, unformatted version of the manuscript as it stands after peer review is published online, with a DOI. Authors wishing to make use of this service will be asked to upload “clean” versions of their manuscripts after every revision; this is a precondition for this service, as is the confirmation that the Copyright Transfer Agreement (CTA) will be signed upon receipt. This service is offered for Original articles, Reviews, Mini-Reviews, Methods and Techniques and Meta-Analyses.

Implications of “accepted manuscript” publication

Once the paper has been accepted, the last clean version of the manuscript, including all metadata entered during submission (title, abstract, author affiliations etc.), becomes the first version of the article to be published online. This means that no changes can be made to the submitted clean version as this version will be published as the “Accepted Manuscript”, should it be accepted. Changes by the authors will only be possible subsequently in the proofs from the typesetters for correction. This means in detail:

- For all authors, the affiliation information entered **during submission** will be published.
- If an author is already in the system, please use “Edit” to update the address information if necessary.
- To facilitate the entry of co-author information, please use the “Quick Fill” option if applicable.
- The order of authors entered during submission will be the order of authors on the “Accepted Manuscript”.
- All authors named under step “Authors & Institutions” agree to the publication and signing of the CTA.
- The conflict of interest and funding information will be published as entered at the step “Details & Comments”.
- Clinical trial information will be published as entered at the step “Details & Comments”.

Instructions and further information are available during the submission process and upon request to the Editorial Office.

Abbreviations

Abbreviations should only be used when necessary, e.g., for procedures (ANOVA), long chemical names (ATP), or other expressions used throughout your paper. See below for the full list of abbreviations that do not need to be defined.

Supporting Information

To keep articles as concise and at the same time as informative as possible, authors are encouraged to submit part of their tables and figures as Supporting Information (SI). The following type of data will be published as SI: high-resolution halftone and color illustrations, and tables summarizing data that are not essential but useful to the understanding of an article. Tables and figures provided as SI must be referred to in the manuscript as follows: Table 1S and Figure 1S. SI has to be submitted as a separate file.

Clinical Trials

Experimental and Clinical Endocrinology & Diabetes supports trial registration. All trials reported must be registered at an official trial registry recognised by the International Committee of Medical Journal Editors, such as ClinicalTrials.gov (www.clinicaltrials.gov) or any of the primary registries on the World Health Organization’s International Clinical Trial Registry Platform (www.who.int/ictcp).

Conflict of Interest

A statement concerning the conflicts of interest of all authors is mandatory.

English Language

It is in the authors’ best interest that manuscripts be proofread by a native English speaker. We recommend language editing by a professional editing service such as Enago. Use this link to get a 15% discount on their services: www.enago.com/thieme/

Proofs and Reprints as PDF File

Galley proofs will be sent to the corresponding author as a PDF file. The corresponding author receives a PDF file of the published article free of charge.

Reproduction of Colour Figures

Figures are automatically reproduced in black and white in print and online. Should you want your figures in colour, you will be charged € 440 for the first colour figure and € 80 for any further figure (including 19% VAT).

IMPORTANT COPYRIGHT INFORMATION FOR AUTHORS

The publishers hold the copyright on all material appearing in *Experimental and Clinical Endocrinology & Diabetes*. A Copyright Transfer Agreement will be sent to the corresponding author together with the galley proofs. The agreement must be completed and returned to the publishers before the article can be published.

All your submitted figures, tables and videos must be original work. They must be created fully by you and/or co-authors for the purpose of this publication. We cannot accept any material that has already been

published in books, magazines or electronic products of other providers, including websites. We may also not publish any material to which a third party additionally has rights of use (e.g. your employer).

Please do NOT pay any license fees (e.g. for “Rights-Link”/ Copyright Clearance Center) for any such material. Even the standard license agreements of “Creative Commons” cannot be recognized as proof that the material may be used.

If you are including any material that is not strictly text, you are required to provide the following information in the cover letter on submission:

- Confirmation that all figures, images, illustrations, tables and videos are original work created fully by you and/or co-authors for the purpose of this publication
- Confirmation that every component of illustrations that combine more than one element (e.g. pictograms, images, etc.), are your and/or co-authors’ own work
- Confirmation that you and/or co-authors hold all rights of use for every submitted figure, table and video and no third party holds rights of use

To summarize which material may not be used in your submission:

- Please do not use images that have already been published in books, magazines or electronic products (including websites)
- Please do not use images to which a third party additionally has rights of use (e.g. your employer)
- Please do not use even a small part of a third party image. Such images are not free from copyright protection even if they have been altered using a graphic editor
- Please do not use screenshots of third-party material (e.g. third-party websites, publications, etc.)
- Please do not use any Industry photography
- Please do not use logos of institutions, manufacturers or any other branding

Please contact the Editorial Office if you have any questions regarding the use of illustrations.

In order to ensure that your manuscript meets the formal requirements of the publishers, please consult Author’s Guidelines for different Types of Articles available at

<https://www.thieme.de/de/autorenounge/journals-158774.htm>

Research Ethics

For all research involving humans, subjects must have given their informed consent. Research on animals must have been approved by the local ethics committee.

► **Table 1** These Abbreviations do not need to be defined in the text. Units of measure should only be abbreviated when used with numbers. Do not abbreviate types of diabetes. The only acceptable designations are type 1 diabetes and type 2 diabetes. Do not refer to people suffering from diabetes as diabetics.

Abbreviation	Meaning	Abbreviation	Meaning
ACE	angiotensin-converting enzyme	ATP	adenosine 5'-triphosphate
ACTH	adrenocorticotropin	AUC	area under the curve
ACTH	adrenocorticotrophic hormone	BMI	body mass index
ADP	adenosine 5'-diphosphate	bp	base pair
AIDS	acquired immunodeficiency syndrome	BSA	bovine serum albumin
AMP	adenosine 5'-phosphate	cAMP	3',5'-cyclic AMP
ANCOVA	analysis of covariance	cAMP	cyclic adenosine 3',5'-monophosphate
ANOVA	analysis of variance	cDNA	complementary DNA
CoA and acyl-CoA	coenzyme A and its acyl derivatives	IgA, IgD, IgE, IgG, IgM	immunoglobulins A, D, E, G, M
cpm; cps	counts/minute; counts/second	IGF	insulin-like growth factor
CRISPR	clustered regularly interspaced short palindromic repeats	IL	interleukin
cRNA	complementary RNA	IL (eg, IL-1, IL-6)	interleukin
CVD	cardiovascular disease	IM	intramuscular(-ly)
cyclic GMP	cyclic guanosine 3',5'-monophosphate	IP	intraperitoneal(-ly)
DMEM	Dulbecco's modified Eagle's medium	IQ	intelligence quotient
DMSO	dimethylsulphoxide	IQR; Q1–Q3 also acceptable	interquartile range
DNA	deoxyribonucleic acid	IV	intravenous(-ly):
DNase	deoxyribonuclease	LD50	median lethal dose
dpm	disintegrations/minute	LDL	low density lipoprotein
EC50	median effective concentration	LH	luteinizing hormone:
ECG	electrocardiogram	ln	logarithm (base e)
ED50	median effective dose	log10	logarithm (base 10)
EDTA	ethylene diamine tetra-acetic acid	MODY	maturity onset diabetes of the young
EEG	electroencephalogram	MRI	magnetic resonance imaging
EGTA	ethylene glycol-O-O'-bis (2-amino-ethyl)-N, N', N'-tetraacetic acid	mRNA	messenger RNA:
ELISA	enzyme-linked immunosorbent assay	"NAD if oxidation state not indicated NAD+ if oxidized NADH if reduced"	nicotinamide-adenine dinucleotide
FACS	fluorescence activated cell sorter	"NADP if oxidation state not indicated NADP+ if oxidized NADPH if reduced"	nicotinamide-adenine dinucleotide phosphate
FAD	flavin adenine dinucleotide	NF-κB	nuclear factor kappa beta
FADH2	flavin adenine dinucleotide (reduced form)	NMR	nuclear magnetic resonance
FSH	follicle-stimulating hormone	o-	ortho- (use only in chemical formulas)
G protein	GTP-binding protein	OD	optical density
GDP	guanosine 5'-diphosphate	OGTT	oral glucose tolerance test
GH	growth hormone (somatotropin)	OR	odds ratio
GMP	guanosine 5'-phosphate	P	probability
GTP	guanosine 5'-triphosphate	p	probability of an event being due to chance alone
HbA1	haemoglobin A1	PAGE	polyacrylamide gel electrophoresis
HbA1c	haemoglobin A1c	PBS	phosphate-buffered saline
HDL	high density lipoprotein	PCR	polymerase chain reaction
HEPES	N-2-hydroxyethylpiperazine-N'-2-ethane sulfonic acid	pg	picogram
HEPES	4-(2-hydroxyethyl)-1-piperazineethanesulfonic acid	pH	negative logarithm of hydrogen ion concentration
HIV	human immunodeficiency virus	ppm	parts per million
HLA	human leukocyte antigen	RCT	randomised controlled trial
HLA	human leucocyte antigen	rev	revolutions
HOMA	homeostatic model assessment	rev/min (not rpm) (use g if appropriate)	revolutions/minute

► **Table** Continued.

Abbreviation	Meaning	Abbreviation	Meaning
HOMA-B	homeostatic model assessment-beta cell function	Rh	rhesus (of, related to, or being an Rh antibody, blood group, or factor)
HOMA-IR	homeostatic model assessment-insulin resistance	RIA	radioimmunoassay
HPLC	high-performance liquid chromatography	RNA	ribonucleic acid
IC50	median inhibitory concentration	RNase	ribonuclease
IC50	half maximal inhibitory concentration	RR	relative risk
ICD	International Classification of Disease	rRNA	ribosomal RNA
IFN	interferon	RT-PCR	reverse transcription-polymerase chain reaction
Ig	immunoglobulin	s. c.	subcutaneously
SD	standard deviation	UV	ultraviolet
SDS-PAGE	sodium dodecyl sulfate-PAGE	UV-A, UV-B, UV-C	ultraviolet A, ultraviolet B, ultraviolet C
SDS-PAGE	sodium dodecyl sulphate-polyacrylamide gel electrophoresis	VLDL	very low density lipoprotein
SE	standard error	Vmax	maximum velocity
SEM	standard error of the mean	VO ₂	oxygen consumption
Sp.	species (singular)	VO ₂ max	maximal oxygen consumption
T3	3,5,3'-triiodothyronine	VO ₂ peak	peak oxygen consumption
T4	thyroxine (3,3',5,5' tetraiodothyronine)	W	watt
TGF	transforming growth factor	WHR	waist-to-hip ratio
TNF	tumor necrosis factor	Wnt	wingless/Int-1
TNF-α	tumour necrosis factor-α	λ	wavelength
tRNA	transfer RNA	Σ	sum
TSH	thyrotropin	χ ²	chi-square