What do editors look for?

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What do editors look for?

- Research that is going to change practice or thinking, at least within specialty of the journal
- Interest to journal audience
- First, last, or necessary replication
- Ethically sound
- Robust methods, suitable for research question
- Reported fully, without bias

Submission—where?

- Who is your audience?
- International *vs* regional
- General *vs* specialist
- Calls for papers
- Upcoming events
- If in doubt, check your references

Submission—where?

- Be familiar with your chosen journal
- Philosophy
- Interests
- Landmark papers
- Include publication strategy in your protocol

Submission—where?

- **Reporting requirements**
  - **Abstract structure**
  - **Word count**
  - **Number of references and reference style**
  - **Number of tables and figures (and submission format)**
  - **Reporting guidelines (***see* http://www.equator-network.org/reporting-guidelines**)**

Submission—where?

- **Supporting documents**
  - **Protocol**
  - **Trial registration**
  - **Signatures**
  - **Conflicts of interest statements**
  - **Patient consent**
  - **References in press**
  - **Permission to reproduce**

Submission—how?

Many journals will make an initial decision based on reading your cover letter and abstract; sometimes just the abstract

Submission—Cover letter

Dear Editor,

Please find attached a manuscript entitled: [redacted] that we would like to submit for publication in THE LANCET INFECTIOUS DISEASES.

This paper has not been submitted elsewhere and all the authors agree for this submission.
We do not declare any conflict of interest.

Thank you for your consideration.

Sincerely yours,

Submission—Cover letter

- **Short and snappy—elevator pitch**
  - **Give context and background to study**
  - **What question does your study address?**
  - **What method did you use to answer study question?**
    - **Mention you've followed reporting guidelines appropriate to study design**
  - **What did you find?**
  - **How do your findings affect totality of knowledge on subject; how might they influence practice or thinking?**
  - **Why is your paper relevant to journal's readership?**

Submission—Abstract

Unhelpful submitted abstract

Background: The presence of extended spectrum beta-lactamases (ESBL)-producing antimicrobial resistance organisms has been increasingly reported worldwide. Probiotics are often used to support the treatment of infections in clinical practice. These in vitro studies investigated the **effect of a probiotics, on ESBL-producing Escherichia coli**, the most widely distributed ESBL producer.

Methods: The probiotic strain C. butyricum MIYAIRI588 and bla-CTX-M-15-positive, **ESBL-producing E. coli clinical isolates** were used in this study. **The inhibitory effect** of C. butyricum MIYAIRI588 strain on the growth of ESBL-producing E. coli was examined by both co-culture and in C. butyricum MIYAIRI588 supernatant. **Beta-lactamase activity** produced by E. coli was analysed with or without C. butyricum MIYAIRI588 supernatant. A conjugation assay was performed by the broth mating method to determine **the frequency of transfer of antibiotic resistance** property between E. coli donor strains to recipient strain.

Findings: The growth of ESBL-producing E. coli **was suppressed** by both co-culture and in C. butyricum MIYAIRI588 supernatant. In addition, the activity of beta-lactamase was also **significantly reduced** by C. butyricum MIYAIRI588 culture supernatant. Moreover, transmissibility of antibiotic resistant properties from ESBL-producing E. coli to E. coli 5980 **was inhibited** by the C. butyricum MIYAIRI588 supernatant.

Interpretation: These findings are promising and **support the use of probiotics as adjuncts to antibiotic treatment of clinical infections**. We plan further studies on the effect of probiotics on ESBL-producing bacteria.

Submission—Abstract

- Context and background; study objectives and/or hypothesis
- Methods: population; design (eg, prospective/retrospective, RCT, case/control, cohort, case series, diagnostic, surveillance, in vitro, animal model); endpoints; trial registration
- Results: absolute number; primary endpoints; effect size (eg, relative risk, hazard ratio, sensitivity/specificity); confidence intervals; p-values; avoid stats with small numbers
- Conclusions: implications for practice/research; don't spin secondary endpoints

Submission—Abstract

- **How:** follow reporting guidelines
- **How many:** absolute numbers
- **How much:** effect size, confidence intervals, p-values
- **How useful:** implications for practice / research
- **How funded**

Submission—Abstract

Speaking in tongues—Avoid!

Interpretation: The efficacy and safety of ART has substantially improved with the introduction of newer drug classes of ARVs that are now available to patients and HIV care providers. Our SLR found that among ART-naïve patients, the use of INSTI + 2 NRTI, particularly DTG, have superior efficacy to EFV + 2 NRTI regimens and that low-dose EFV is non-inferior to standard dose EFV.

Submission—Research in context

Research in context/key messages: adding to existing knowledge and improving research efficiency

Research in context

Systematic review

We searched PubMed on Feb 11, 2015, for articles published between Jan 1, 2000, and Feb 11, 2015, using a combination of the MeSH search terms "HCV treatment", "antiviral agent", and "genotype 4" and consulted the hepatitis C virus (HCV) treatment guidelines for phase 2 or 3 clinical trials of treatments for patients with HCV genotype 4. We also searched the reference lists of articles from our search for additional reports that met our inclusion criteria of phase 2 and phase 3 clinical trials of interferon-free regimens for treatment of HCV genotype 4.

Four clinical trials have been reported (one journal article and four in abstract form) for interferon-free regimens for patients with HCV genotype 4. The results of these trials have shown promising safety and efficacy (sustained viral response at 12 weeks, 84–100%) with combination direct-acting antiviral drugs, with or without ribavirin for 12–24 weeks. Few patients with cirrhosis or who have previously been treated with interferon-containing regimens have been included.

Added value of this study

Although our study is small, we showed high rates of sustained viral response at 12 weeks with use of sofosbuvir and ledipasvir for 12 weeks, which supports the possibility that this simple regimen might be effective for some patients.

Implications of all the available evidence

Further development of this efficacious, simple, well tolerated regimen is warranted and studies in patients with cirrhosis and previously treated patients should be pursued.

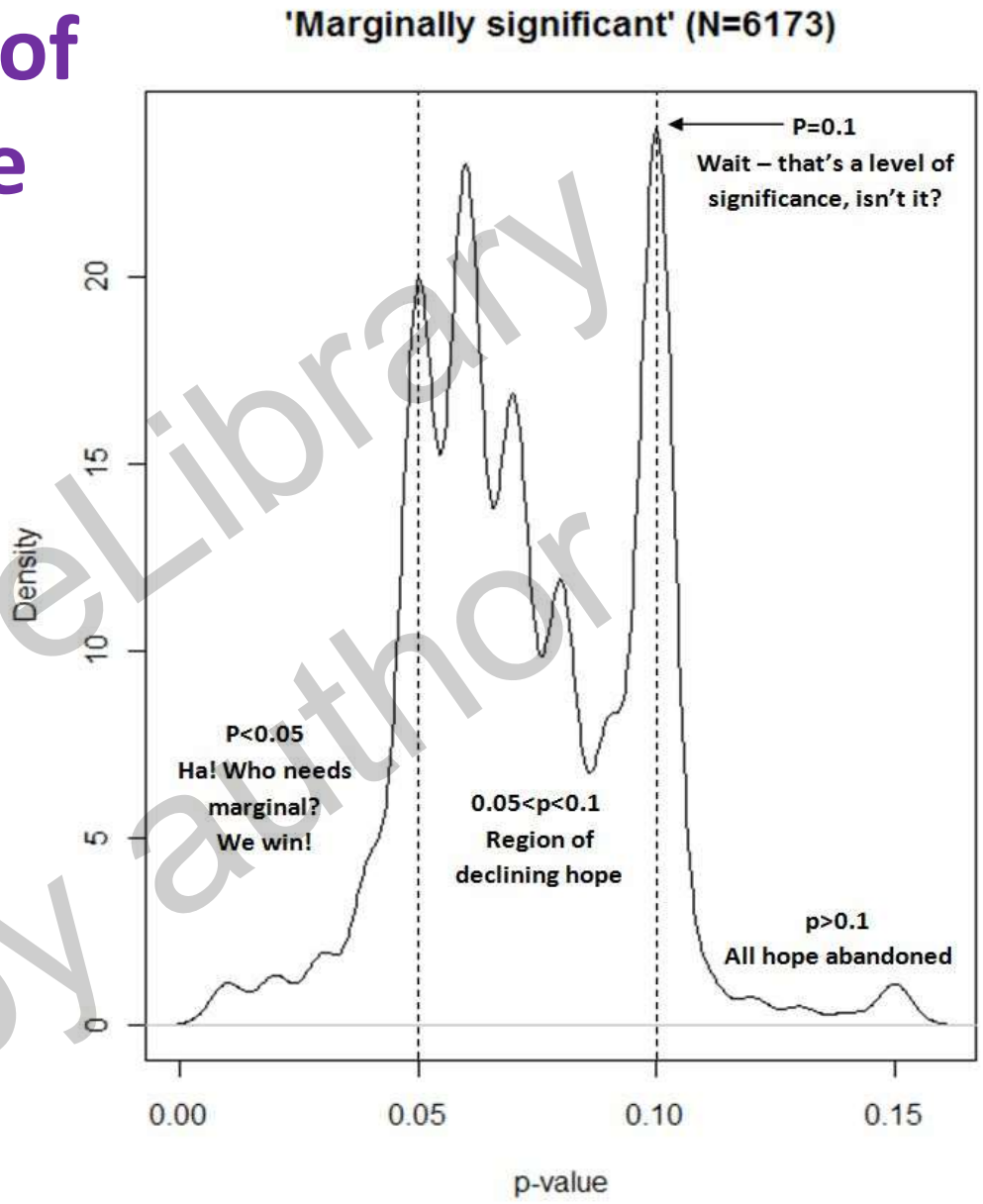
Bias—interpretation of statistical significance

- **"You don't need to play the significance testing game – there are better methods, like quoting the effect size with a confidence interval – but if you do, the rules are simple: the result is either significant or it isn't"**
- **"So if your p-value remains stubbornly higher than 0.05, you should call it 'non-significant' and write it up as such"**

https://mchankins.wordpress.com/2013/04/21/still-not-significant-2/
Accessed May 2016

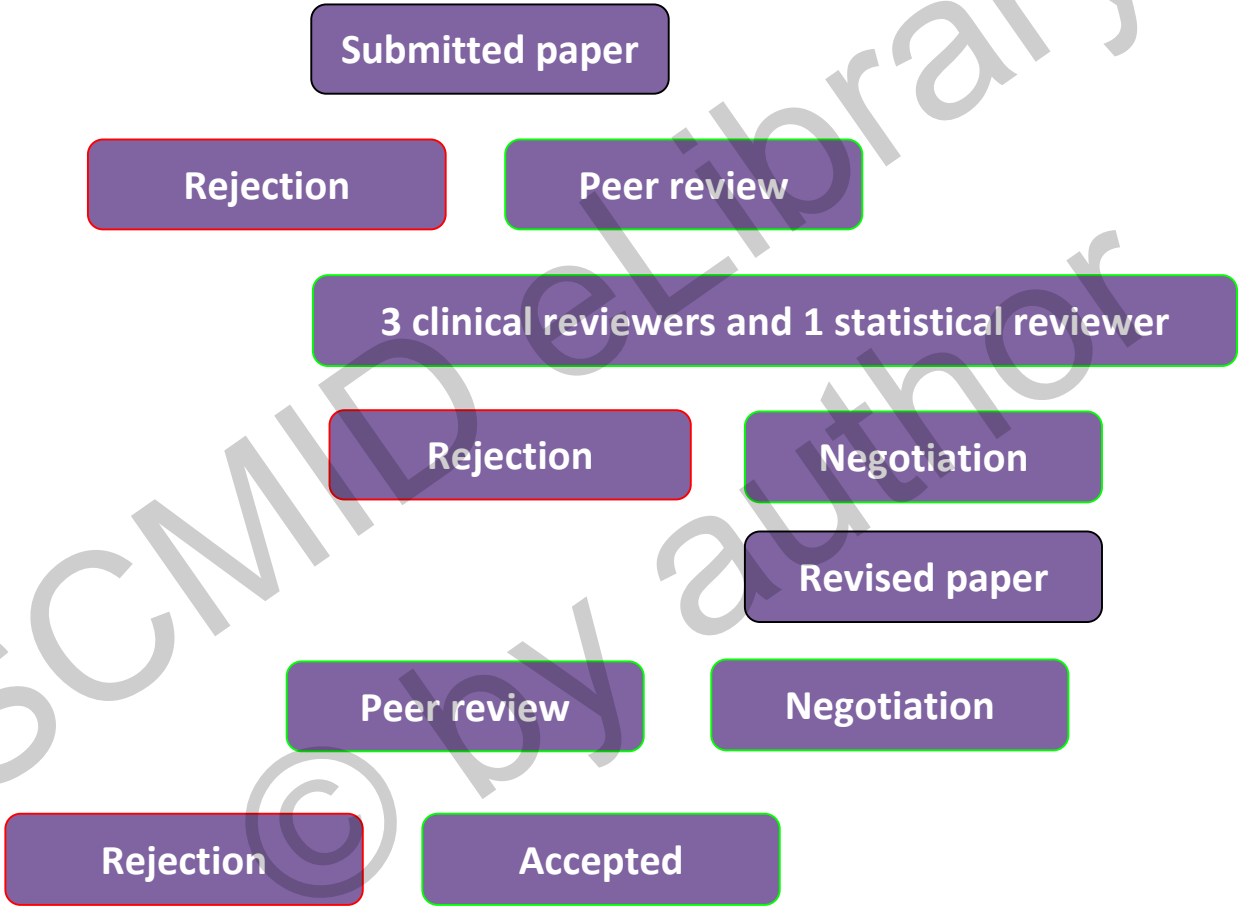
(barely) not statistically significant (p=0.052)
a barely detectable statistically significant difference (p=0.073)
a borderline significant trend (p=0.09)
a certain trend toward significance (p=0.08)
a clear tendency to significance (p=0.052)
a clear trend (p<0.09)
a clear, strong trend (p=0.09)
a considerable trend toward significance (p=0.069)
a decreasing trend (p=0.09)
a definite trend (p=0.08)
a distinct trend toward significance (p=0.07)
a favorable trend (p=0.09)
a favourable statistical trend (p=0.09)
a little significant (p<0.1)
a margin at the edge of significance (p=0.0608)
a marginal trend (p=0.09)
a marginal trend toward significance (p=0.052)
a marked trend (p=0.07)
a mild trend (p<0.09)
a moderate trend toward significance (p=0.068)
a near-significant trend (p=0.07)
a negative trend (p=0.09)
a nonsignificant trend (p<0.1)
a nonsignificant trend toward significance (p=0.1)
a notable trend (p<0.1)
a numerical increasing trend (p=0.09)
a numerical trend (p=0.09)
a positive trend (p=0.09)
a possible trend (p=0.09)
a possible trend toward significance (p=0.052)
a pronounced trend (p=0.09)
a reliable trend (p=0.058)
a robust trend toward significance (p=0.0503)
a significant trend (p=0.09)
a slight slide towards significance (p<0.20)
a slight tendency toward significance(p<0.08)

Bias—interpretation of statistical significance



https://mchankins.wordpress.com/2013/04/21/still-not-significant-2/
Accessed May 2016

Peer review process



Summary

- What do editors look for?
- Choosing a journal
- Importance of cover letter
- Importance of summary
- Key messages
- Review process

Thank you

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