

Joint Bone Spine

Instructions to authors

July 2016

Joint Bone Spine publishes articles in English that deal with disorders affecting the joints, bones, and spine and, more generally, with the entire field of rheumatology. Surgical techniques and work focusing specifically on orthopedic surgery are not within the scope of the journal. The contents of submitted manuscripts should show clearly how the study topic connects to clinical rheumatology, most notably when reporting experimental studies. Manuscripts accepted for publication in *Joint Bone Spine* may be translated into French for concomitant publication in the *Revue du Rhumatisme*, preferably by the authors.

1. Manuscript submission and handling

Manuscripts must be submitted in English via <http://ees.elsevier.com/bonsoi>

Manuscript submission implies that all the authors (represented by the corresponding author or submitting author) have read the present instructions to authors and approved of them without reservation. The authors must guarantee that the submitted manuscript was neither published previously nor submitted simultaneously for publication in another journal. The final decision to publish a manuscript is taken by the Editorial Board based on the following criteria: full conformity with the present instructions to authors, conformity with the style of the journal, originality, novelty, and expected impact within the medical or scientific community. When determining priorities, the Editorial Board also considers the articles published recently or to be published in the near future in *Joint Bone Spine*.

2. Manuscript categories

The authors should indicate the category of their manuscript as a paginated Word file (PDF format is not allowed for text and tables). However, the Editorial Board may decide to publish the manuscript in a different category. The authors are advised to read previous issues of the journal in order to choose their manuscript category. The categories are listed below.

- *Editorial*. Editorials expound opinions, describe noteworthy facts, summarize prominent studies, report news, or provide perspective. The authors are free to choose the outline. There is no abstract. Although editorials are often commissioned by the Editorial Board, spontaneous submissions are welcome, with or without a pre-submission inquiry to the editors. In some cases, the length of the editorial

can oversize the one mentioned in the *Table 1* below, but only with the agreement of editorial board.

- *Review articles*. Review articles either provide a comprehensive discussion of available knowledge or an update of recent data about a specific topic. They may be commissioned or spontaneous. Abstract and keywords are required. Although narrative overviews may be acceptable, the editorial board gives preference to systematic literature reviews that include a detailed description of the methodology used to retrieve and select the reviewed data.

- *Original articles*. Original articles report new and original work that has not been published elsewhere (except as an abstract at a conference). The last paragraph of the introduction should state the question or questions of the study, whose answers are found in the results section. The results should be described concisely, with no redundancies between the text and the tables or figures. The discussion should start with a brief summary of the results and an explanation of how the results contribute to answer the study question or questions. The discussion should be brief; in general, one-third of the total manuscript length is appropriate.

- *Recommendations and meta-analysis*. The journal encourages the publication of recommendations, after a pre-submission inquiry if appropriate. The article format may not allow the publication of all the data and the authors are therefore asked to prepare a condensed summary. The abstract is particularly important, in particular for the recommendations whom main database should be cited.

- *Case reports*. Description of one or more patients managed by the authors and whose analysis provides new information on clinical features, pathophysiological mechanisms, or basic science. The discussion should be brief and should start by pointing out the originality of the case or cases and their contribution to scientific knowledge. No attempt should be made to write a review of the topic (manuscripts reporting a case with a review of the literature will not be accepted).

- *Image*. Presentation of single figure with a legend of 100 words at the most. Up to two references may be supplied. There should be no other text: thus, the written material comprises only the title, keywords, and legend, with or without one or two references.

We insist on the fact that the legended figure itself represents the data, so it is not necessary to present all the details of the clinical observation. The text (including the figure callout) is a commentary on the image.

- *Letter to the Editor*. Brief presentation.
- *Correspondence*. Brief presentation as for a Letter to the Editor; the contents refer to an article published recently in the journal. The author or authors of that article may then submit a reply, which is usually published.

3. Manuscript length -- numbers of tables, figures, and references

The length limits listed in *Table 1* must be respected. Manuscripts that fail to respect these limits will be rejected, even those commissioned by the Editorial Board. The Editorial Board reserves the right to adapt these stringent limits in selected cases.

The tables and figures must be no wider than 120 characters (including spaces). To improve readability, the tables should be displayed in portrait mode and not in landscape mode. For any reproduction or adaptation from others works (revue, book, etc.) non published by Elsevier Masson, the authors have to provide an authorization signed by the referent publisher.

Table 1: Manuscript categories with length limits

Categories	Words	Ref.	Tables and figures (total)
Editorial	1800	20	3
Review article	3600	60	6
Original article	3600	40	6
Concise report	2400	30	4
Recommendations and meta-analysis	3600	60	6
Case report	2000	15	3
Image	100	2	1 (figure)
Letter to the Editor	500	10	2
Correspondence			

The maximum number of words and characters is given for the text, without the references, tables, or figures.
The authors have the possibility to submit supplementary material (figures, tables, references list, etc.) which will be published online.

4. Number of authors per manuscript

Each author accepts responsibility for all the information in the manuscript. In agreement with the rules governing scientific publications, each author must have contributed actively to the study, under the responsibility of the corresponding author. Supplying material or data not initially intended to be used in the study, obtaining authorizations or funding, or executing administrative tasks are not sufficient criteria for authorship. Corporations that

commission studies are not entitled to authorship. Please avoid naming a group of people or an entity as a co-author or last author.

The corresponding author is the first in charge of scientific and editorial integrity of the manuscript; he assumes the effective participation of all the authors and the originality of the data. This responsibility is shared by all co-authors. Concerning the editorial integrity, we can usefully consult the website COPE (<http://publicationethics.org>) which adheres *Joint Bone Spine*.

For manuscripts reporting a single case-report or a few case-reports (clinical reports, letters, images), the maximum number of authors is six in all. The Editorial Board reserves the right to ask for proof of authorship and to reject manuscripts that fail to comply with authorship rules.

The corresponding author should obtain written permission to include the names of the individuals mentioned in the acknowledgments section.

5. Disclosure of interest

Joint Bone Spine considers that conflicts of interest can arise as part of the normal process involved in designing or conducting a study. However, all conflicts of interest, most notably those of a financial nature, must be disclosed. The journal has adopted the standard policy of including a disclosure of interest section at the end of the text (before the reference list). In this section, the initials of each author are followed by a statement disclosing any competing interest, as shown below.

- "P.L. receives a salary (or holds stock) from"
- "P.L. received honoraria from..."
- "P.L.'s department (or laboratory) received a research grant from..."
- Specific situations: describe in detail

Authors must pay careful attention to writing a clear disclosure statement that is relevant to the submitted manuscript. Disclose only the conflicts of interest that might have had a bearing on the work reported in the manuscript. *Exhaustive lists of all potential conflicts of interest may hinder the identification of one or more significant conflicts of interest and are therefore unacceptable.*

The disclosure of interest section is separate from the acknowledgments section.

If an intermediary (e.g., a research organization) initially received funds from a corporation, this fact must be disclosed.

These rules are subject to change. The authors should be aware that the Editor or Editorial Board may have queries about conflicts of interest, to which the authors must reply satisfactorily if their manuscript is to be considered for publication.

If there is no disclosure of interest, the authors are invited to use the established expression: "The authors declare that they have no competing interest."

6. Presentation of manuscripts

6.1. Title page

The title page should include the following:

- The title, which may be modified by the Editorial Board to improve accuracy;
- The first and last names of each author, followed by one or more superscript letters indicating the affiliation(s) of the author;
- The names and addresses of the institutions where the authors were working at the time the manuscript was drafted (postal code is mandatory for all affiliations).
- The name and full address of the corresponding author (including number and name of the street and postal code), with the E-mail address, telephone number, and fax number; the corresponding author certifies that all authors approved the entirety of the submitted material and contributed actively to the study (see above). All correspondence from the Editorial Board will be sent only to the corresponding author, including the proofs and reprint (in electronic format).

6.2. Abstract

The abstract should be written on a new page. No abbreviations or references are allowed. An abstract is required for all manuscript categories except Editorials, Letters to the Editor, images and Correspondence. The maximum length is 250 words. Abstracts for original articles should be structured as follows: objectives, methods, results, conclusions (the last two paragraphs can be merged). Abstracts for the Recommendations category should include the main recommendations. The abstract should contain the most important information relevant to the manuscript. A high-quality abstract is essential to manuscript acceptance.

6.3. Keywords

List up to six keywords at the end of the abstract. Select keywords that will allow retrieval of the article after its publication. Avoid excessively general words (e.g., “diagnosis” or “clinical research”) and excessively specific words.

6.4. Body of the manuscript

Start the body of the manuscript on a new page. Conform to the journal’s style as it is apparent in recent issues. Write with concision and avoid excessively short paragraphs. Choose verb tenses carefully to distinguish previously published data from the results of the work reported in the manuscript and comments on their impact. Number each section; in general, the first section is the introduction (“1. Introduction”).

- *Contents.* Avoid reports that center on strictly local issues. In every case, authors are encouraged to supply online digital supplements.

- *Personal communications.* Permission from the source must be obtained first, under the responsibility of the corresponding author.

- *Numbers and statistics.* Numerical data should be reported with a reasonable number of digits after the decimal point. The precision needed to justify reporting more than three or four digits after the decimal point (e.g., 0.1% and 0.01%, respectively) is rarely achieved in the biological and medical sciences. Similarly, *P* values can almost always be reported as follows: $P < 0.05$, $P < 0.01$, $P < 0.001$, non significant. Exceptions exist for some types of analysis.

- *Abbreviations.* No abbreviations are allowed in the title, abstract, or headings. Limit the number of abbreviations in the body of the text. When using an abbreviation for the first time, place it in parentheses after the word or phrase spelled out in full. A table or list of the abbreviations used in the manuscript is not required.

- *Tables.* Tables should be designed to be printed over the width of one or two columns. The maximum table width is 120 characters, including spaces. Present tables in portrait mode; do not use landscape mode. Each table should start on a new page and must be preceded by a title. Number the tables (Arabic numerals) consecutively in the order of their citation in the text. Cite each table when the data in the table are first referred to in the text. All abbreviations used in the table should be spelled out in full in a specific footnote to the table.

- *Figures.* The authors should design the figures to make them suitable for publication, usually over the width of one column and rarely over two columns. When designing the figures, the authors should make allowances for a possible size reduction: the resolution – most notably of the characters – should be adapted accordingly. The criteria used to choose figures for a published article differ from those appropriate for an oral communication. In *Joint Bone Spine*, color images are published in color. The legends to all the figures should be given on a separate page at the end of the manuscript; these legends should spell out all abbreviations. High resolution is crucial to obtain good-quality figures. Manuscripts accompanied with poor-quality figures will be rejected.

- *References.* As a rule, the reference list should include only publications that can be accessed via international databases. References to journals that are not listed in Medline are not allowed. When reference must be made to a publication that is not indexed in international databases, the reference should be given in the text, in parentheses; the same applies to submitted articles. The reference list should be prepared according to the Vancouver style, as illustrated below. If number of authors is less or equal to 6, all authors' names are required. If greater than 6, keep only 3 authors names followed by "et al."

Typical journal article

[1] Poitras S, Rossignol M, Avouac J, et al. Management recommendations for knee osteoarthritis: how usable are they? *Joint Bone Spine* 2010;77:458-65.

Article in a volume supplement

[2] Pham T, Claudepierre P, Constantin A, et al. Tocilizumab: therapy and safety management. *Joint Bone Spine* 2010; 77 Suppl 1:S3-100.

Book

[3] Ritchlin CT, Fitzgerald O, Ed. Psoriatic and reactive arthritis. USA: Mosby;2007.

Book chapter











[4] Maigne R. Lombalgie d'origine lombosacrée. In: Maigne R. Douleurs d'origine vertébrale. Comprendre, diagnostiquer et traiter. Paris:Elsevier;2006. p. 230-9.

For articles that are in press, supply the digital object identifier (doi) listed in the database. For web sites, supply the URL and date of access by the author. Please do not cite abstracts published more than 2 years earlier.

The last two sections of an article should be the acknowledgments and disclosure of interest.

- Acknowledgments: this section can be used to acknowledge help received by study contributors who are not listed among the authors. Written permission must be obtained by the corresponding author from all individuals listed in the acknowledgments section. This section may also include the institutions, organizations, and other sources that funded the study.
- Disclosure of interest: They should be disclosed for each individual author. The conflicts of interest statement is under the responsibility of each individual author. Omitting or inexactitude to disclose conflicts of interest may lead to prosecution.

Online digital supplement. Authors may provide supplemental electronic material to be replicated as is. In the body text, the author should call "Fig. S1," "Fig. S2" or "Table S1", etc. each supplementary material, independently of other figures and tables. The journal encourages the submission of supplemental multimedia files that add meaningfully to the articles. These files (e.g., images, video and audio files, archives, spreadsheets, and slide-shows) are for online publication only. The link to the home page of the supplement is supplied in the layout version of the article and an icon is included on the first page of the article to indicate the existence of the supplement. Several formats are accepted for images (.gif, .tif, .jpg, .svg, .png, etc.), videos (.mov, .avi, etc.), podcasts (.mp3, .wma, .wav), or video podcasts (.mp4, .m4v, .mov, .avi, .wmv), documents (.doc, .pdf, etc.), spreadsheets (.xls, .cvs, etc.), and slide-shows (.ppt, .pps, etc.). Technical details on preparing online digital supplements are available at <http://www.elsevier.com/locate/authorartwork>.

	Podcast		Patient information sheet
	Video/Animation		Legal documents
	Interactive self-evaluation		Case-report
	Interactive decision tree		Additional display items
	Additional information		Self-evaluation

6.5. Editorials and Review articles

The outline varies. The sections are numbered consecutively starting with "1. Introduction".

6.6. Original Articles and concise reports

Introduction. Briefly position the topic within the international landscape. In the last paragraph, state the study question, in indirect style.

Methods (not Material or Patients and methods). Provide a concise description of the methods used, with supporting references. The last paragraph is entitled "Role of the funding source".

Results. Report the results as tables and figures whenever possible. Do not repeat information in the tables, figures, and text.

Discussion. Start by indicating the answer or answers supplied by the study results to the question of the study in the last paragraph of the introduction. Do not repeat material that is in the introduction. Be concise: the discussion should not be an update of the study topic. A formal conclusion is unnecessary and would repeat the information in the abstract.

7. Manuscript review by the Editorial Board and decision regarding publication

The Editorial Board examines the content and form of each manuscript. Advice is sought from several editors and/or reviewers, who may request modifications. The authors cannot make any assumptions about the nature of the decision before receiving notification of the final decision. At each stage of the review process, the corresponding author is informed of the decision.

- Receipt of the manuscript: the Editorial Board assesses the form of the manuscript and study design, as well as the position of the study topic among publication priorities at the time of submission.
- Peer review: the Editorial Board sends the reviewers' comments and requests for modifications to the corresponding author.
- Evaluation of the revised version (and less often of subsequent revisions) by the Editorial Board, who takes the final decision and communicates it to the corresponding author.
- If the manuscript is accepted for publication, the author undertakes to answer questions about practical issues that may arise during preparation of the proofs.

The Editorial Board then sends the proofs to the corresponding author, who must correct them and return them within 48 hours, failing which the Editorial Board will assume that they have been approved by the authors. Proof corrections must be minimal and limited to obvious mistakes.

Authors who submit a manuscript to *Joint Bone Spine* do so with the understanding that the manuscript may be published also in the *Revue du Rhumatisme*.

This decision is taken by the Editorial Board based on a review of the final version. In this case, the manuscript is translated into French at the time of acceptance for publication. Manuscripts that are provided by French speaking teams should be translated by the authors to enhance the accuracy of the translation and reduce the delay of publication. The French version should be sent one month after acceptance at the latest. For all other cases, the translation in French will be offered by the publisher. The Editorial Board has the translations performed by professionals, and in submitting a manuscript the authors agree to accept the style of the translation. To avoid publication delays, the authors will be sent the translation only in the form of the proofs and will be able to make only a limited number of alterations. Translations supplied by the authors are evaluated by the Editorial Board, which reserves the right to refuse them if they are not written in good idiomatic French.

The Editorial Board reserves the right to make copy-editing changes designed to improve the text or its comprehension. More specifically, changes may be made to the title, abstract, keywords, and reference list (corrections, additions, and deletions, including in the tables and figures). The Editorial Board may decide to publish part of the text as an online digital supplement. The manuscript may be published in a category that differs from the one suggested by the authors.

At the proof-reading stage, the documents required for publication will be sent to the corresponding author by the Editor, independently from the Editorial Board.

8. Editorial board disclosure of interest

Editorial Board, which also receives emoluments from Elsevier, declares the following competing interest:

- *Salaried employee of a pharmaceutical company.* None of the members is a salaried employee of a pharmaceutical company.
- *Shareholdings.*
 - M-C. B. holds Peptinov stocks.
- *Payment of fees.*
 - M-C.B. collects fees from Clevelexel, EM Produits de Santé, Néovacs and Sanofi.
 - F.L. collects fees from MSD, Astra-Zeneca et Ardea, for consulting activities.
 - M-F.K. collects fees from Rhumatisme et Travail (association which itself collects fees from pharmaceutical industry for managing and presenting the "Actualités rhumatologiques").

- C.M. collects fees from d'Abbvie, BMS, Pfizer, Roche Chugai, UCB (for EPU) and had his expenses related to participation in medical science events paid for by Abbvie, BMS, Lilly, MSD, Pfizer, Roche, Roche Chugai et UCB.
 - D.W. collects fees from d'Abbott, MSD, Pfizer, Roche Chugai, BMS, Amgen, UCB, Nordic, SOBI and Novartis, Janssen.
 - F.D. collects from d'Abbott, Abbvie, Alexion, Amgen, Astrazeneca, BMS, GSK, Lilly, MSD, Novartis, Pfizer, Roche and Servier.
- *Research Grants for hospital or university teams.*
 - M-C.B. collects research grants from Chugai, Innativiravax, MSD, Peptinov et Pfizer.
- F.L. collects research grants from Arthritis Fondation Courtin, from Société Française de Rhumatologie, and from Fondation de l'Avenir; and research grants from Pfizer France.
 - D.W. collects research grants from d'Abbott, Pfizer, Roche Chugai, Amgen and Servier.
 - F.D. collects research grants from d'Abbott, Abbvie, Amgen, BMS, Lilly, Novartis and Roche.
- *Grants for training and teaching events.*
 - F.L. collects grants from Ardea, Astra-Zeneca, Novartis France, SOBI, Ménarini France, Ipsen Pharma for European Crystal Network workshops since 2010.

Instructions to authors for manuscript resubmission

Comments or suggestions have been made about your manuscript. You are invited to modify your manuscript in accordance with these, and to submit the revised version to our journal. It is imperative that this revised version comply with the same instructions for authors used for the original version. The decision to accept or reject the revised manuscript will be made by the Editorial Board, with advice from reviewers, who may include one or more of the reviewers who evaluated the initial version.

You must follow the rules listed below.

1. Address each of the comments made by the reviewers, in a document that will not be published. If you decide not to follow some of the suggestions, you must explain why. Revised manuscripts that are not accompanied with a point-by-point reply to the reviewers and editors will not be considered for publication.
2. Supply a file of the revised version of your manuscript, with the modifications marked in a clearly visible manner (e.g., underlined in red).

Please make sure that your revised manuscript meets the following requirements, which are intended to

improve your manuscript:

- The abstract does not exceed 250 words;
- The discussion is concise, relevant to your results, and free of repetitions (please remember that a separate conclusion is useful only for review articles);
- The reference list complies with the instructions for authors.

Furthermore, please particularly check the following points:

- There is complete agreement across the different sections of the text and tables regarding all the information reported, most notably the numerical data;
- The legends to the figures and tables are self-explanatory; more specifically, the figure legends accurately describe what is being drawn to the reader's attention (use arrows if needed).

Resubmitted manuscripts that fail to meet these requirements will not be considered for publication.