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DESCRIPTION

Anais Brasileiros de Dermatologia is the official publication of the Brazilian Society of Dermatology (SBD - Sociedade Brasileira de Dermatologia).

The journal is published bimonthly and is devoted to the dissemination of original, unpublished technical-scientific study, resulting from research or reviews of dermatological topics and related matters. Exchanges with other publications may be accepted.

The opinions and statements contained in the journal are the sole and exclusive responsibility of their authors, and do not necessarily coincide with those of the Editorial Staff, the Advisory Board or the Brazilian Society of Dermatology.

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GUIDE FOR AUTHORS

INTRODUCTION

Anais Brasileiros de Dermatologia is the official peer-reviewed scientific journal of the Brazilian Society of Dermatology (Sociedade Brasileira de Dermatologia - SBD) and publishes articles related to Dermatology and associated specialties. Founded in 1925, the journal has been uninterruptedly published since then. ABD follows the [Ethical Guidelines of the Committee on Publication Ethics](#); the [Code of Ethics of the American Educational Research Association](#); the [Code of Good Scientific Practices of FAPESP](#); and the guidelines of the [Council of Science Editors](#).

The journal is divided into the following sections: Continuing Medical Education, Original Article, Review, Letter (subdivided into Tropical/Infectious and Parasitic Dermatology, Dermatopathology, Therapy, Clinical, and Research) and Correspondence.

Contributions can be sent to our electronic submission system: <https://www.editorialmanager.com/abd/>, in accordance with the Guidelines and Specifications described below.

Types of article

Manuscripts must be submitted through the online submission system, according to instructions.

The font used should be Times New Roman, size 12.

The journal publishes articles classified into the following categories:

Continuing Medical Education

Articles written by invitation, aiming at updating the readers' knowledge. Uninvited authors who are interested in collaborating with this section should contact the Editorial Team before submitting their work, to discuss interest, feasibility and to receive detailed information about this type of article.

The manuscript must have a maximum of 6,000 words and 12 illustrations. It is mandatory to provide updated bibliographic references, and a maximum of 100 references is suggested. It is recommended to divide the manuscript into sections, for instance: Introduction, Background; Epidemiology; Etiopathogenesis; Clinical Aspects; Classification; Clinical, Laboratory and Differential Diagnosis; Evolution; Prognosis; Treatment. The abstract must have a maximum of 250 words.

Original article

The following types of articles, not previously published, will be considered for this section: randomized clinical trials; cohort studies; case-control studies; cross-sectional studies; prevalence, incidence; accuracy; cost-effectiveness studies; series of cases (minimum number depending on the disease under study); studies on the pathophysiology of diseases and/or nosologic associations, studies on diagnostic and prognostic tests, basic research in dermatology (translational research) and systematic reviews with or without meta-analysis.

The manuscript must have a maximum of 6,000 words, 40 references and 10 illustrations. The article must be structured into the following sections: Introduction, Methods, Results, Discussion and Conclusion. The abstract must be structured into the following sections: Background (current state of knowledge); Objective; Methods; Results; Study limitations and Conclusions (with a precise level of clinical statistics significance, to prevent speculations). The abstract must have a maximum of 250 words.

The articles must follow the specific recommendations for each type of study:

- Randomized clinical trials: [CONSORT](#);
- Systematic review with or without meta-analysis: [PRISMA](#);
- Observational studies: [STROBE](#);
- Case series report: [CARE](#).

Specifications for different types of studies not described above are available at the [EQUATOR Network website](#).

Clinical trials must be registered in a public database, of which options are listed on the website of the [International Committee of Medical Journal Editors](#). Examples are: Brazilian Registry of Clinical Trials (Registro Brasileiro de Ensaio Clínicos [ReBEC](#) and [ClinicalTrials.gov](#)). The registration number must be informed in the submission archives.

Systematic reviews must also be registered with the international Prospective Register of Systematic Reviews [PROSPERO](#) or similar database. The registration number must also be informed in the submission archives.

Review

This article is written by invitation, by professionals with acknowledged experience. It aims to perform an in-depth analysis of the current state of knowledge on topics of clinical relevance, with emphasis on aspects such as the cause and prevention of dermatological diseases, their diagnosis, treatment and prognosis. It should preferably include critical analyses of the literature. The article must have a maximum of 6,000 words and 10 illustrations. A maximum of 100 references are suggested, which must be recent. The abstract must have a maximum of 250 words.

Letters

This section is destined to a faster publication of brief communications, and it is divided into the following categories:

- a) Letter - Tropical/Infectious and Parasitic Dermatology.** Including but not limited to, Hansen's disease, fungal and parasitic infections, AIDS, and other sexually transmitted diseases. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.
- b) Letter - Dermatopathology.** Reports that highlight relevant dermatopathological aspects. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.
- c) Letter - Therapy.** Reports that highlight therapeutic outcomes or new adverse drug reactions. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.
- d) Letter - Clinical.** Case reports of undeniable interest and well-documented. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.
- e) Letter - Research.** Less complex investigation studies, such as a small series of cases, disclosure of preliminary results from original research, and initial reports of therapeutic trials. The manuscript must have a maximum of 1,000 words, 10 references, and 4 illustrations.

All letters must not be divided into sections nor include an abstract and keywords.

Correspondence

This section admits questions and objective suggestions related to articles published in this journal, up to two previous numbers, whose text must be continuous and not exceed 400 words. Maximum of 5 references and 2 illustrations.

Must not be divided into sections nor include an abstract and keywords.

Special Article

Articles written by invitation only, on specific topics, such as: guidelines, consensus, protocols and similar; issues related to scientific publications; epidemiology and biostatistics applied to dermatology; photographic or imaging technique approach; memory with a historical approach to topics of dermatological interest, such as celebration of important events in the development of medicine or dermatology; biographies; obituaries and, tributes to relevant personalities of national and international dermatology.

The specifications of the manuscript, such as structure and number of authors, will be defined according to the type of article, upon the invitation.

Language

The journal welcomes submissions in English or Portuguese.

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All authors must inform their substantial contribution on the Title Page with the following options: (1) the study concept and design; (2) data collection, or analysis and interpretation of data; (3) statistical analysis; (4) writing of the manuscript or critical review of important intellectual content; (5) data collection, analysis and interpretation; (6) effective participation in the research guidance; (7) intellectual participation in the propaedeutic and/or therapeutic conduct of the studied cases; (8) critical review of the literature; (9) final approval of the final version of the manuscript.

Number of authors according to sections:

- Original Articles - no limit on the number of authors.
- Continuing Medical Education, Review Articles and all Letters - maximum of 6 authors.
- Correspondence - maximum of 4 authors.
- Special Articles - discussion and definition according to the type of article, upon invitation.

Illustrations

Each illustration may be composed of 2 images maximum. Histopathological, immunohistochemistry, electron microscopy, dermatoscopy, confocal and radiological illustrations may be composed of 4 images each.

Submission checklist

You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details and also this [Box](#) that recaps all information on the article types and mandatory submission items.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:

- E-mail address
- Full postal address.

All mandatory submission documents templates, including the Conflict of Interest Statement, the Copyright Transfer Agreement Form, the Consent for Publication of Patient Images, can be found at the [journal website](#)

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BEFORE YOU BEGIN

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Studies on patients or volunteers require the Informed Consent form and approval from the institution's Research Ethics Committee or relevant. The number of the research approval protocol by the Research Ethics Committee must be documented in the paper.

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Each author is required to declare their individual contribution to the article on the Title Page. All authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure. More info can be found in the section "Authorship".

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Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with [International Committee of Medical Journal Editors](#) recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more

health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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Blinded manuscript (no author details): The main body of the paper (including the references, figures, tables and any acknowledgements) should not include any identifying information, such as the authors' names or affiliations. If there is any mention to the institution or place where the study was conducted in the manuscript, it must be replaced by "XXX".

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It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the [Guide to Publishing with Elsevier](#)). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Article structure

Please check the "Types of paper" section for more information on the structure of each article type published by Anais Brasileiros de Dermatologia.

Subdivision - unnumbered sections

Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

Essential title page information

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- **Author names and affiliations, including ORCID iD.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. List each author affiliation followed by city, state and country. Author's positions/roles in their institutes will not be published. Indicate all affiliations with a lower-case superscript letter immediately after the author listing and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author. The e-mail address and ORCID iD of each one of the authors must be inserted in the submission system. If an author does not have an ORCID iD, it can be registered at <https://orcid.org/register>.
- Please inform, on the Title Page, whether there is any conflict of interests or financial support. The name of the institution where the study was conducted should also be presented on Title Page (including city, state and country).
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- **Author's contributions.** Each author must inform an accurate and detailed description of their diverse contributions to the published work. Please check the Authorship section.

Structured abstract

A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations. Please check the "Types of paper" section for more information on abstract's parameters for each article type. The abstract must be sent alongside the manuscript without mentioning the institution where the study was conducted.

Keywords

Immediately after the abstract, provide a minimum of 3 and a maximum of 7 keywords, avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). These keywords will be used for indexing purposes. Please choose keywords that are included in the Medical Subject Headings (MeSH), of Index Medicus, available at www.nlm.nih.gov/mesh or in the Descriptors in Health Sciences (DeCS), of Bireme, available at the URL <http://decs.bvs.br>.

Abbreviations

Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article. Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible.

Acknowledgements

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.). You will need to send a document of agreement signed by the acknowledged person.

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List funding sources in this standard way to facilitate compliance to funder's requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

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This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Artwork

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Whilst it is accepted that authors sometimes need to manipulate images for clarity, manipulation for purposes of deception or fraud will be seen as scientific ethical abuse and will be dealt with accordingly. For graphical images, this journal is applying the following policy: no specific feature within an image may be enhanced, obscured, moved, removed, or introduced. Adjustments of brightness, contrast, or color balance are acceptable if and as long as they do not obscure or eliminate any information present in the original image. Nonlinear adjustments (e.g. changes to gamma settings) must be disclosed in the figure legend.

Electronic artwork

General points

- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, or Symbol.
- Make sure you use uniform lettering and sizing of your original artwork.
- Inform, on the figure caption of histopathological images, the color and magnification.
- Size the illustrations close to the desired dimensions of the published version.
- Submit each illustration as a separate file.

A detailed [guide on electronic artwork](#) is available.

You are urged to visit this site; some excerpts from the detailed information are given here.

Formats

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Tables must be sent as Word files, using Times New Roman font, size 12, double space. Clinical images may be sent in Power Point format.

Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

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Dissertations or theses:

4. Borkowski MM. Infant sleep and feeding: a telephone survey of Hispanic Americans [dissertation]. Mount Pleasant (MI): Central Michigan University; 2002.

Homepage or Website:

5. eatright.org [Internet]. Chicago: Academy of Nutrition and Dietetics; c2016 [cited 2016 Dec 27]. Available from: <https://www.eatright.org/>.

Preprints and in press:

6. Tian D, Araki H, Stahl E, Bergelson J, Kreitman M. Signature of balancing selection in Arabidopsis. Proc Natl Acad Sci U S A. Forthcoming 2002.

7. Alvarez R. Near optimal neural network estimator for spectral x-ray photon counting data with pileup. arXiv:1702.01006v1 [Preprint]. 2017 [cited 2017 Feb 9]: [11 p.]. Available from: <https://arxiv.org/abs/1702.01006>

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