Perspectives on INTEGRATIVE MEDICINE

Guide for Authors

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I. General Information

Perspectives on Integrative Medicine (Perspect Integr Med: PIM) is the official, open access journal of Jaseng Medical Foundation, a non-profit medical organization dedicated to academic research and philanthropy. The journal is a triannual, peer-reviewed publication of high-quality academic, pre-clinical, and clinical research on complementary and integrative medicine and related therapies.

The journal promotes the scientific validation of complementary medicine therapies in an integrative medicine approach to wellness, wherein complementary and conventional medicine are used in combination. Complementary medicine may include physical practices (acupuncture, pharmacopuncture, chuna, tuina, osteopathy, manual therapy, yoga, and tai chi), natural products (e.g., naturopathic medicine, herbal medicine, medicinal plants, and dietary supplements), and mindfulness-based therapy (e.g., cognitive therapy and mindfulness-based stress reduction (MBSR)), whilst conventional medicine includes pharmacological drugs, surgery, and physical rehabilitation.

The aim of this journal is to promote the communication of biomedical scientific research on complementary medicine integrative therapies to bridge the gap between scientific research and clinical practice.

The content of the journal reflects the interests of clinicians and researchers involved in all areas of medicine. The research should be scientifically rigorous and presented in the form of editorial, an original article, a literature review, short communication, protocols, or case reports, and may cover retrospective, qualitative, or practice-based research networks. The journal regularly publishes articles with continuing medical education (CME) credits. Studies involving animal models or artificial intelligence are also within the scope of this journal.

PIM publishes tri-annually (at the end of February, June, and October), and covers editorials, original articles, review articles, short communications, protocols, case reports, commentaries, and letters to the editor.

Article Processing Charge (APC)

This journal is an open access (free submission and free access) journal where Perspectives on Integrative Medicine pays for the publishing costs incurred by the journal. The authors do not have any article processing charge for publication.

II. Ethical Policies

Perspectives on Integrative Medicine adheres completely to the ethical guidelines and best practices published by professional organizations, including Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Journals (http://publicationethics.org/resources/guidelines) of ICMJE and Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by COPE, DOAJ, WAME, and OASPA: http://doaj.org/bestpractice).

1. Research Ethics

All manuscripts should be prepared under strict observation of research and publication ethics guidelines recommended by the Council of Science Editors (http://www.councilscienceeditors.org), International Committee of Medical Journal Editors (ICMJE, http://www.icmje.org), and the World Association of Medical Editors (WAME, http://www.wame.org). Any study including human subjects or human data must be reviewed and approved by a responsible institutional review board (IRB). For further information on investigations involving human material, please refer to the principles in the Declaration of Helsinki (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects).

2. Authorship

Authorship credit must be based on the ICMJE, 2013 (http://www.icmje.org/icmje-recommendations.pdf): (1) substantial contributions to the conception and design, or acquisition, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged. These authorship criteria are intended to preserve the status of authorship for those who deserve credit and can take responsibility for the work. Group authorship should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship and should complete an authorship form.

3. Manuscript Originality

Manuscripts are considered with the understanding that the work is original, not under consideration by another journal, and has not been previously published, including in preprint form.

4. Conflicts of Interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated. Conflict of interest statements will be published at the end of the text of the article, before the 'References' section. Please consult the COPE

guidelines (http://www.publicationethics.org) on conflicts of interest.

5. Use of Generative AI and AI-Assisted Tools in Manuscript Preparation

This guidance applies specifically to the use of generative AI tools during the manuscript writing process and does not extend to their application in data analysis or research methodology.

If authors utilize generative artificial intelligence (AI) or AI-assisted technologies to support the writing of their manuscript, such tools should be limited to enhancing clarity, grammar, or overall readability. These technologies must be applied under direct human supervision, with thorough review and editing by the authors to ensure the accuracy and integrity of the final content.

AI tools should not be listed as authors, co-authors, or cited as sources of intellectual contribution. Authorship requires accountability and creative input—qualities that only human contributors can provide.

Authors are required to disclose any use of generative AI or AI-assisted tools in the preparation of their manuscript. This disclosure should be included in the manuscript under the dedicated heading:

Author Use of AI Tools Statement

Example Disclosure Statement:

During the preparation of this manuscript, the author(s) used [NAME OF TOOL OR SERVICE] for [PURPOSE, e.g., improving language clarity or grammar]. All content was subsequently reviewed and revised by the author(s), who accept full responsibility for the final version of the work.

6. Editorial Responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics: guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; promoting publication of corrections or retractions when errors are found; and preservation of the anonymity of reviewers.

7. Secondary Publication

It is possible to republish manuscripts if they satisfy the conditions of secondary publication of the ICMJE Recommendations (http://www.icmje.org/urm_main.html).

8. Role of the Funding Source

You are requested to identify who provided financial support to conduct the research and/or prepare the article and to briefly describe the role of the sponsor(s), if any, in the study design; in the collection, analysis, and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated.

9. Human and Animal Rights

Animal experiments should be reviewed by an appropriate committee (IACUC: Institutional Animal Care and Use Committee) for the care and use of animals. Studies involving pathogens requiring a high degree of biosafety should pass the review of a relevant committee (IBC: Institutional Biosafety Committee). The editor of PIM may request copies of informed consent from human subjects in all studies or IRB approval documents. Articles wherein human subjects can be identified in descriptions, photographs, or pedigrees must be accompanied by a signed statement of informed consent to publish (in print and online) the descriptions, photographs, and pedigrees from each subject who can be identified. Articles covering the use of human samples in research and human experiments must be approved by the relevant review committee. Articles covering the use of animals in experiments must be approved by the relevant authorities.

10. Redundant Publication and Plagiarism

Attempting to publish substantially similar work more than once without attribution of the original source(s) is considered a redundant publication. The definition of substantially similar can be explained as follows:

At least one of the authors is common to all reports (it is likely to be plagiarism if there are no common authors);

The subject or study populations are the same or similar;

The methodology is typically identical or nearly so;

Finally, the results and interpretation vary little or not at all. If all or part of the subject population has been reported previously, it should be declared in the Materials and Methods section and muwst be appropriately referenced. In cases wherein authors are concerned about any potential overlap with published manuscripts or manuscripts under review, they must include a letter explaining how the manuscript submitted to PIM significantly differs from other materials. For more information, please refer to "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication" (Available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3142758/).

11. Policy on Ethical Oversight

When the journal encounters suspected cases of research and publication misconduct, such as falsification of data, plagiarism, improprieties of authorship, misappropriation of the ideas of others, violation of generally accepted research practices, material failure to comply with legislative and regulatory requirements affecting research, and inappropriate behavior in relation to misconduct, the resolution process will follow the flowchart provided by the Committee on Publication Ethics (http://publicationethics.org/resources/flowcharts). The Editorial Board will discuss the suspected cases and reach a decision. We will not hesitate to publish errata, corrigenda, clarifications, retractions, and apologies when needed.

The World Association of Medical Editors defines scientific misconduct and provides a useful overview of the following issues:

Falsification of data

This ranges from fabrication, the deceptive reporting of findings, and the omission of conflicting data to willful suppression and/or distortion of data.

Plagiarism

This is the appropriation of the language, ideas, or thoughts of another without crediting their true source and representing them as one's own original work.

Improprieties of authorship

This is the improper assignment of credit, for example, by excluding others, presenting the same material in more than one publication, including as authors individuals who have not made a definite contribution to the work, and publishing or submitting multi-authored publications without the concurrence of all authors.

Misappropriation of the ideas of others

An important aspect of scholarly activity is the exchange of ideas among colleagues. Scholars can acquire novel ideas from others during the process of reviewing grant applications and

manuscripts. However, the improper use of such information can constitute fraud. The wholesale appropriation of such material constitutes misconduct.

Violation of generally accepted research practices

This category includes serious deviation from accepted practices in proposing or carrying out research, the improper manipulation of experiments to obtain biased results, deceptive statistical or analytical manipulations, and the improper reporting of results.

Material failure to comply with legislative and regulatory requirements affecting research

This includes but is not limited to serious or substantial, repeated, and willful violations of local regulations and laws involving the use of funds, care of animals, human subjects, investigational drugs, recombinant products, new devices, or radioactive, biological, or chemical materials.

Inappropriate behavior in relation to misconduct

This includes unfounded or knowingly false accusations of misconduct, the failure to report known or suspected misconduct, the withholding of information relevant to a claim, and any kind of misconduct or retaliation against persons involved in an allegation or investigation.

12. Complaints and Appeals

How the journal will handle complaints and appeals: The policy of the journal is primarily aimed at protecting the authors, reviewers, editors, and publisher of the journal. If not described below, the process of handling complaints and appeals follows the guidelines of the Committee on Publication Ethics, available at https://publicationethics.org/appeals.

Who complains or makes an appeal?

Submitters, authors, reviewers, and readers may register complaints and appeals in a variety of cases as follows: falsification, fabrication, plagiarism, duplicate publication, authorship dispute, conflict of interest, ethical treatment of animals, informed consent, bias or unfair/inappropriate competitive acts, copyright, stolen data, defamation, and legal problems. If any individuals or institutions want to report the cases, they can send a letter to the editor for the complaints or appeals. Concrete data with answers to all factual questions (who, when, where, what, how, and why) should be provided.

Who is responsible for resolving and handling complaints and appeals?

The Editor, Editorial Board, or Editorial Office is responsible for them.

What may be the consequence of remedy?

It depends on the type or degree of misconduct. The consequence of resolution will follow the guidelines of the Committee on Publication Ethics (COPE).

13. Research Reporting Guidelines

The journal requires that manuscripts adhere to recognized reporting guidelines relevant to the research design used and requires the author(s) to submit a checklist verifying that essential elements have been reported for all primary research and systematic reviews. The reporting guidelines endorsed by the journal are listed below:

- Observational cohort, case control and cross sectional studies
  STROBE - Strengthening the Reporting of Observational Studies in Epidemiology
  MOOSE - Meta-analysis of Observational Studies in Epidemiology
- Qualitative studies
  COREQ - Consolidated criteria for reporting qualitative research
  SRQR - Standards for Reporting Qualitative Research
- Quasi-experimental/ non-randomized trials
  TREND - Transparent Reporting of Evaluations with Non-randomized Designs
- Randomized (and quasi randomized) controlled trials
  CONSORT - Consolidated Standards of Reporting Trials
- Study of diagnostic accuracy/assessment scale
  STARD - Standards for the Reporting of Diagnostic Accuracy Studies
- Systematic review and meta-analysis
  PRISMA - Preferred Reporting Items for Systematic Reviews and Meta-Analyses
  MOOSE - Meta-analysis of Observational Studies in Epidemiology
  PRIOR - Overviews of Reviews of Healthcare Interventions: Development of the PRIOR Statement
- Quality improvement studies
  SQUIRE - Standards for Quality Improvement Reporting Excellence

III. Editorial Policies

For issues not addressed in these instructions, authors should refer to the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (http://www.icmje.org/recommendations/) of the International Committee of Medical Journal Editors (ICMJE).

1. Copyright

Jaseng Medical Foundation (publisher) holds the copyright on all submitted materials and the right to publish, transmit, sell, and distribute them in the journal or other media. The publisher applies the Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC 4.0) to works it publishes. Under this license, the copyright holder permits anyone to download, share, copy, redistribute, remix, transform, and build upon the published content for non-commercial purposes, provided that appropriate credit is given to the original author(s) and source, a link to the CC BY-NC 4.0 license is provided, and any changes made to the original work are indicated.

2. Technical Checks

The Editorial Office of Perspectives on Integrative Medicine prescreens all submitted manuscripts, and processes all submitted manuscripts confidentially. The submitted manuscripts are initially checked for format and duplication using Crosscheck (https://www.crossref.org/services/similarity-check/) before undergoing the peer-review process.

3. Double-Blind Peer Review Process

This journal operates a double-blind review process. Once the manuscript is prescreened for format and adherence to the aim & scope, it is sent to the two most relevant reviewers for review. The reviewers are selected by the editor from the Editorial Board's database or the board members' recommendations. The reviews are then conducted based on originality, validity, presentation, importance, interest, and, when considered necessary, statistics.

Acceptance of a manuscript depends on the evaluation, critiques, and recommended decisions of the reviewers. A reviewer's recommendation can be "accept," "minor revision," "major revision," or "reject." If there are conflicting decisions between reviewers, the Editor-in-Chief reserves the right to decide whether the manuscript will be published in the journal.

The reviewed manuscripts, with comments, recommended directions, and revisions, are returned to the corresponding author. The corresponding author is to submit the revised manuscript along with point by point replies to the editor's comments explaining how the revisions have been made.

Each change made (point by point) in the manuscript in

accordance with the reviewer's comments should be highlighted ("yellow highlighted" or "marked in red color").
If the revised paper is not received within 2 months of the revision intimation, the manuscript is considered to have been withdrawn.
After the final decision on the acceptance of the manuscript is made, the Editorial Office notifies the corresponding author. The peer review process takes approximately 6 weeks.
Accepted manuscripts will be copyedited in-house to ensure conformance to the journal's style and format.
The responsible editor independently evaluates the manuscript, the reviewers' comments, and the authors' responses. Where reviews conflict or further expertise is required, the editor may seek additional review before making a final decision.

4. Peer Review and Editorial Handling of Submissions from Editors, Editorial Board Members, and Journal Staff

These disclosure requirements also apply to editors and reviewers. Editors must recuse themselves from handling manuscripts where a personal, professional, financial, or institutional relationship could affect, or reasonably be perceived to affect, their impartiality. Manuscripts submitted by editors, Editorial Board members, journal staff, or authors affiliated with the journal's owner or supporting institutions are subject to the same editorial and peer-review standards as all other submissions. Such manuscripts are assigned to an editor with no relevant conflicts of interest, who has full authority over the editorial process and final decision. A conflicted editor-author does not participate in reviewer selection, peer review, or editorial decision-making.

5. Data Sharing Policy

PIM follows the data sharing policy described in "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors" (https://doi.org/10.3346/jkms.2017.32.7.1051). As of July 1, 2018 manuscripts submitted to ICMJE journals that report the results of interventional clinical trials must contain a data sharing statement as described below. Clinical trials that begin enrolling participants on or after January 1, 2019 must include a data sharing plan in the trial's registration. The ICMJE's policy regarding trial registration is explained at https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html.

6. Archiving Policy

The article of PIM has been archived in National Library Korea (https://www.nl.go.kr) and journal homepage (https://www.integrmed.org). In accordance with the deposit policy (self archiving policy) of Sherpa/Romeo (http://www.sherpa.ac.uk), authors are not permitted to archive preprints (i.e., versions prior to refereeing), but they are allowed to archive post-prints (i.e., final drafts after refereeing). Authors may archive the publisher's version/PDF.

7. Preprint Policy

Manuscripts submitted to Perspectives on Integrative Medicine (PIM) cannot have been published previously, and should not be simultaneously under consideration for publication by other journals including preprint during submission.

8. Open Access and Creative Commons Attribution License

This journal is a peer reviewed, open access (free submission and free access) journal where Perspectives on Integrative Medicine pays for the publishing costs incurred by the journal. Authors do not have to pay any Article Processing Charge or Open Access Publication Fee.

Articles are made available under the terms of the Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC 4.0). This license permits anyone to share, copy, redistribute, remix, transform, and build upon the articles for non-commercial purposes, provided that appropriate credit is given to the original author(s) and source, a link to the CC BY-NC 4.0 license is provided, and any changes made to the original work are indicated.

IV. Manuscript Preparation

Manuscripts must be written in English and submitted by the corresponding author. Manuscripts submitted to PIM will be preliminarily screened by the Editorial Office. Manuscripts not conforming to the instructions will be returned to the corresponding authors without being considered for peer-review.
For issues not addressed in these instructions, authors should refer to the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (http://www.icmje.org/recommendations/) of the International Committee of Medical Journal Editors (ICMJE).
Any inquiry concerning manuscript submission should be directed to the editorial office.

Perspectives on Integrative Medicine Editorial Office
Ye-Seul Lee, KMD, MPH, PhD
2nd Floor, 540, Gangnam-daero, Gangnam-Gu, Seoul 06110, Korea
Tel: 02-2222-2757 Fax: 02-2222-2737
Email: editorialoffice@integrmed.org

1. Online Submission of Manuscripts

Manuscripts must be submitted through the online submission system (https://www.editorialmanager. com/integrmed/), and all processes, including manuscript submissions, peer-reviews, and resubmissions to Perspectives on Integrative Medicine (PIM), shall be submitted to the system. The instructions for Editorial Manager are provided on the submission site.

2. General Style Guidelines

The following guidelines provide general advice on formatting and style.

Abbreviations

When a term/definition is referred to repeatedly (i.e., 3 times in the text), it must be written in full when it first appears, followed by the abbreviation in parentheses (even if it was previously defined in the abstract); thereafter, the abbreviation is used.

Gene Nomenclature

Current standard international nomenclature for genes should be adhered to. Genes should be typed in italic font and include the accession number. For human genes, use genetic notation and symbols approved by the HUGO Gene Nomenclature Committee (http://www.genenames.org/) or refer to NIH Gene (https://www.ncbi.nlm.nih.gov/gene).

Units

Système International (SI) units must be used, with the exception of blood pressure values, which are to be reported in mmHg. Please use the metric system for the expression of length, area, mass, and volume. There should be a space between the numerals and the unit symbol. When indicating time, the 24-hour system is to be used.

Math formulae

Present simple formulae in line with normal text where possible

and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Consecutively number any equations that have to be displayed separately from the text (if referred to explicitly in the text).

Footnote

A footnote at the bottom of the first page of the article includes the received date of the manuscript, date of acceptance for publication, and the e-mail address of the corresponding author. Any changes to the affiliations of authors should be noted.

Tables and figures

The main text, tables, figures, and images should be prepared in separate files.

Figures

Figures and images that are drawn or photographed professionally should be sent as JPG or PPT files. All images must be correctly exposed, sharply focused, and prepared in files of 500 dpi or more. Perspectives on Integrative Medicine will not take responsibility for the quality of the images that appear in the journal. Each figure must have an explanatory caption. Figures should be numbered using Arabic numerals. Figures should be cited in the text using parentheses as (Figure 1), (Figures 1 and 2), (Figures 1–3), etc.

Tables

Tables should be simple, self-explanatory, and supplemental, and should not duplicate the text or figures. Each table must be inserted on a separate page and must have a concise and informative title. Tables should be numbered with Arabic numerals in consecutive order. All units of measurements and concentrations must be indicated. Footnotes to tables should be indicated with superscript symbols in the following sequence: *; ‡; §; ||; ¶; **; ‡‡. and notes on level of probability (*, **, *** for p).

3. Types of Articles

PIM publishes editorials, original articles, review articles, short communications, protocols, case reports, commentaries, and letters to the editor.

Editorials

Editorials provide invited perspective on an area of perspectives on integrative medicine (PIM), dealing with very active fields of research, current interests, fresh insights and debates. An abstract is not required and a brief unstructured text should be prepared. Although editorials are normally invited or written by an Editor, unsolicited editorials may be submitted.

Manuscript length: Should not exceed 1,000 words including 20 references.

Original Articles

Original articles are papers containing the results of basic and clinical investigations that are sufficiently well documented to be acceptable to critical readers. Section headings should adhere to the following format: title page; abstract and keywords; introduction; materials and methods; results; discussion; conclusion (if any); acknowledgments; references; tables and figures.

Introduction: It should provide concise yet sufficient background information about the study to provide the readers with a better understanding of the study. A detailed literature survey and summary of the results should be avoided.

Materials and methods: This section should detail the procedure of the experiment, including the investigation period, methods of subject selection, and subject information, such as age, gender, and other significant features, in order to enable the replication of the experiment. All statistical procedures used in the study and criteria for determining significance levels must be described.

Results: The results should be presented in a logical sequence. Only the most important observations should be emphasized or summarized, with the main or the most important findings mentioned first. The statistical method used to analyze the results (statistical significance of differences) with the probability values provided in parentheses should be clearly stated.

Discussion: This section should contain an interpretation and explanation of the results and important aspects of the study, followed by the conclusion drawn from them. Information already mentioned in the Introduction or Results section should not be repeated, and the main conclusions of the study may be presented in the discussion.

Conclusion: It must be linked with the purpose of the study stated in the abstract, and clearly supported by the data produced in the study. New hypotheses may be stated when warranted, but must be clearly labeled.

Manuscript length: Up to 6,000 words, including abstract, references, and figure/table legends.

Review Articles

Review articles provide concise reviews of subjects important to medical researchers, and they can be written by an invited medical expert. These follow the same format as original articles, but the details may be more flexible, depending on the content.

Manuscript length: A maximum of 6,500 words, including abstract, references, and figure/table legends. A maximum of 200 words for the abstract, references, 10 figures, and 10 tables.

Short Communications

Short Communications are concise, peer-reviewed articles presenting a complete but narrowly focused scholarly contribution relevant to Integrative Medicine. They may report a bounded original empirical or methodological investigation or a critical, evidence-informed synthesis that advances an independently assessable interpretation or conclusion.

Conference-derived manuscripts may be considered when they critically synthesize defined material, relate it to the wider literature, explain the basis for selecting and synthesizing the material, distinguish the authors' analysis from participants' statements, and provide conclusions relevant beyond the individual event. Conference organizers, funding, the authors' roles, and relevant institutional or editorial relationships must be disclosed.

Preliminary or incomplete studies, unsupported hypotheses, abstract collections, transcript-style proceedings, meeting minutes, programme summaries without critical analysis, descriptive institutional or event reports, promotional accounts, and manuscripts too abbreviated for adequate reporting are not eligible. Applicable reporting guidelines must be followed. Final classification is determined by the editors according to the manuscript's principal scholarly function.

Manuscript length: Should not exceed 3,000 words, including references, tables, and figures.

Case Reports

Case reports are intended to report practical cases and include the significance and purpose of the case presentation, the diagnostic methods of the case, the key data, and brief comments and suggestions with regard to the case. Please refer to the CARE guidelines (https://www.care-statement.org).

Manuscript length: Should not exceed 2,500 words, including references, tables, and figures. The number of references is limited to 20.

Commentaries

They are brief articles with a narrow focus. The journal commissions most commentaries, but unsolicited commentaries will also be considered.

Manuscript length: Should not exceed 1,000 words, including 10 references and 1 figure or small table.

Protocols

Protocols detail the guidelines for conducting a trial. This type of article includes descriptions of standard protocols and experimental procedures followed in a study that explain each essential part of the study and clarify how it is carried out.

Registration is recommended for any clinical trial. Approved registries for clinical trials need to meet all the ICMJE Clinical Trial Registration guidelines. Trial Registration numbers will need to be included in the abstract.

Manuscript length: Up to 3,000 words, excluding the abstract, references, and figure/table legends.

Guidelines

Guidelines present systematically developed, evidence-based recommendations intended to support clinical, public-health, methodological, or policy decisions. Submissions must identify the guideline development group, scope, target population, and intended users and describe the systematic identification and appraisal of evidence, recommendation-development methods, management of competing interests, stakeholder or patient involvement where appropriate, external review, and updating plan.

The certainty of evidence and strength of recommendations must be reported using GRADE or another clearly described and justified framework. Authors must submit a completed RIGHT checklist, and the development process should address the relevant domains of AGREE II. Narrative reviews, expert opinions, consensus statements without systematic evidence appraisal, and institutional protocols without a transferable evidence base are not eligible as Guidelines.

Manuscript length: The main text should not exceed 6,000 words, excluding references and supplementary evidence or methodological materials.

Letter to the Editor

Letters to the editor should be useful to practitioners. Constructive comments from readers regarding articles published in the journal can be published at the discretion of the editors.

Manuscript length: Should not exceed 500 words. If accepted, the "author's reply" of the paper being discussed could be published simultaneously.

4. Manuscript Format

All manuscripts must be written in grammatically correct English and should be created using MS Word. Only a single, 11-point font (preferably Times New Roman) should be used. Figures as separate files, in EPS, TIFF, Adobe Photoshop (PSD), JPEG, or PPT format and all table and figure numbers are found in the text.

5. Main Text Preparation

Title page

The title page should include 1) the title of the article (less than 50 words); 2) names of the authors (first name, middle initial, last name in capitals) and institutional affiliation including the names of the department(s) and institution(s) of each author; 3) name, highest academic degree, full address (including the postal code) of the institutional affiliation, telephone numbers, and email address of the corresponding author; 4) a running title of 50 characters or less, including spaces and; 5) any disclaimers.

The ORCID of all authors should be provided. Authors should register on the ORCID website (http://orcid.org/) for their ORCID. Registration is free for all researchers.

Abstract and Keywords

An abstract and 3–6 relevant keywords (in alphabetical order) are required. Abstracts should be no more than 250 words in length. Abstracts for Original Articles should be structured, with the following section headings: Background, Methods, Results, and Conclusion.

Abstracts for Review Articles and Case Reports should be a single unstructured paragraph. However, Case Reports should include the significance and purpose of the case presentation, the diagnostic methods of the case, the key data, and brief comments and suggestions with regard to the case.

To select keywords, refer to the Index Medicus Medical Subject Headings (National Library of Medicine (US), MeSH [Internet]. Bethesda (MD): National Library of Medicine (US); 1954 [updated 2009, cited Nov 1, 2009]. Available from: http://www.ncbi.nlm.nih.gov/mesh).

Main Manuscript

(1) Introduction: The Introduction should be written as concisely as possible, without subheadings. The background and objective of the study should be described briefly here.

(2) Materials and methods: This section should provide sufficient detail to enable the replication of the work. Previously published methods should be indicated by a reference; only relevant modifications should be described. The research plan, materials (or subjects), and methods used should be described in that order. The names and locations (city, state, and country) of manufacturers of equipment and software should be provided. Methods of statistical analysis and criteria for statistical significance should be described. The study protocol was approved by the Institutional Review Board of #### (IRB no. ##-##-###). Informed consent was confirmed (or waived) by the IRB.

(3) Results: The Results section should be clear and concise.

(4) Discussion: This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is appropriate. Avoid extensive citations and discussion of published literature.

(5) Conclusion: The main conclusions of the study may be presented in a short Conclusion section, which may stand alone or form a subsection of the Discussion or Results and Discussion section.

(6) Acknowledgments: Contributions for consultations, statistical analysis, etc. from anyone who does not meet the criteria for authorship should be listed.

(7) Author contribution: The author contribution section is mandatory and all contributors should be listed.

Example: Conceptualization: xxx. Methodology: JN. Formal investigation: JY, AH, and IM. Data analysis: JN, AH, and IM. Writing original draft: JN. Writing - review and editing: JN, AH, and IM.

(8) Conflicts of interest: Any potential conflict of interest that could influence the authors' interpretation of the data, such as financial support from or connections to pharmaceutical companies, political pressure from interest groups, or academically related issues, must be stated. Please consult the COPE guidelines (http://www.publicationethics.org/) on conflict of interest. Even if no conflict of interest exists, it should be stated.

(9) Funding: Authors should list all funding sources. Authors are responsible for the accuracy of their funder designation. If in doubt, please check the Open Funder Registry for the correct nomenclature (https://www.crossref.org/services/funder-registry/).

(10) Ethical statement: Studies on humans or animals require relevant ethics committee approval and the approval number should be stated. For studies not involving human or animal, it should be stated that no ethics approval was needed.

(11) Data availability: Authors are recommended include a data accessibility statement, with the link to the repository they have used, in order that this statement can be published alongside their paper.

(12) References: Authors are responsible for the accuracy and completeness of their references and for correct in-text citations.

References should be cited in the text using non-superscript Arabic numerals in square brackets ([ ]). The reference format should conform to the NLM style (the National Library of Medicine for Authors, Editors, and Publishers : http://www.nlm.nih.gov/citingmedicine). A numbered list of references must be provided at the end of the paper, following the order of the citations in the text.

Author(s) – Family name and initials. Title of article. Title of journal – abbreviated. Publication year;volume(issue):pages.

The last names and initials of all the authors (up to 6) should be included. For articles with more than 6 authors, list only the first 6 authors followed by "et al."

Use of DOI is highly encouraged.

Journal articles

Author(s) – Family name and initials. Title of article. Title of journal – abbreviated. Publication year;volume(issue):pages.

[1] Han K, Kim M, Kim EJ, Park YC, Kwon O, Kim AR, et al. Moxibustion for treating cancer-related fatigue: a multicenter, assessor-blinded, randomized controlled clinical trial. Cancer Med 2021;10(14):4721–33

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Books

Author(s) – Family name and initials, Multiple authors separated by a comma. Title of book. Edition of book if later than 1st ed. Place of Publication: Publisher Name; Year of Publication. Pages.

[1] MacPherson H, Hammerschlag R, Lewith GT, Schnyer RN. Acupuncture research: strategies for establishing an evidence base. Amsterdam (Netherlands): Elsevier Health Sciences; 2007. 30 p.

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Author(s). Title of publication [type of medium – Internet]. Place of publication (if available): Publisher (if available). Date of publication – year month day (supply year if month and day not available) [updated year month day; cited year month day]. Available from: web address.

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(13) Supplementary materials: Any supplementary materials or appendix that help the understanding of readers or contain too great an amount of data to be included in the main text may be provided as supplementary data.

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