GUIDE FOR AUTHORS

INTRODUCTION
The journal Hipertensión y Riesgo Vascular, bibliographically referenced as Hipertens riesgo vasc., is the official Journal of the Spanish Society of Hypertension and Spanish League for the Fight against Arterial Hypertension (Sociedad Española de Hipertensión y Liga Española para la Lucha contra la Hipertensión Arterial) (SEH-LELHA). It considers those works related with hypertension and vascular risk for publication. Manuscripts written in Spanish or in English will be accepted.

The manuscripts should be written following the recommendations of the International Committee of Medical Journal Editors (original version available at: www.icmje.org), and adapted to the following instructions. In the cover letter, the author should include an explanation about the relevance of the paper to the field of hypertension research (maximum 1 paragraph).

Originals
These should preferentially be prospective works, research works and other original contributions on etiology, pathophysiology, clinical aspects, epidemiology, diagnosis and treatment. Maximum length is equivalent to 12 DIN-A4 pages, double spaced and up to 12 figures and/or tables will be accepted. Include a structured “resumen” and abstract of 240 words and structured “palabras clave” and keywords. Limit references to 30. Include no more than 6 signatories.

These should adhere to the following scheme.

Introduction. Keep it as short as possible, only providing the explanation needed to understand the text below.

Material (or patients) and methods. Indicate the duration of the work, the characteristics of the series studied, the variables of interest (primary and secondary), screening criteria followed and techniques used. Provide sufficient details to be able to reproduce an experience or certain work on the basis of this information. When referring to drugs or chemical products, indicate the generic name, dosage and administration route. In regards to apparatuses, avoid using the names of the supplier delegations, describing their properties and conditions under which they have been used. When referring to widely used and well-known methods or procedures, give the corresponding bibliographic citation and avoid providing a detailed description. In the case of clinical trials with random distribution, detail the method used for randomization and if the random allotment was occult. Describe the statistical methods used. Use the International System of Units to express the measurement units. When it concerns experiments with humans,
indicate if the procedures followed were approved by the Ethics Committee of the corresponding institution and if they followed the principles of the Declaration of Helsinki. Furthermore, it should be stated that authorization was obtained from the individuals. When performing research in animals, indicate if the guidelines of the European Community on animal research were followed.

Results. The findings should be quantified and presented using the appropriate indicators of measurements of error or uncertainty (as the confidence intervals). In this section, state but do not interpret the data obtained with the material and methods used, using figures and tables, if necessary. The results should be concise and clear. Manuscripts that present results of a clinical trial of parallel groups with random distribution should include the CONSORT flow chart (http://www.consortstatement.org) in which the distribution and progress of the patients during the study are illustrated. Manuscripts that present results of a meta-analysis should include the QUOROM flow chart (http://consort-statementorg/QUORUM.pdf). Manuscripts that present results of a study on validity of diagnostic tests should include the STARD flow chart (http://www.consort-statement.org/stardstatement.htm).

Conclusion. One’s own views on the subject should be given without repeating data provided in the Introduction or in the Results. In this section, the following aspects should be developed: a) the most relevant findings; b) the practical application of the results; c) agreement or disagreement with the previous observations; d) the methodological problems that may exist; and e) guidelines for future research, explaining new hypothesis when this is justified and clearly labeling them as such. It is not necessary to include conclusions. In any event, these should be derived exclusively from the study.

Types of article

Hipertensión y riesgo vascular publishes the following types of article:

Original papers (see above)

Reviews

Under request from the Editorial Board. In this section, bibliographic reviews on an updated subject that makes it possible to envision consensual positions in Medicine. They should have a maximum length of about 12-15 DIN-A4, double spaced, and could include up to 6 figures or tables. They should include a “resumen” and abstract of 150 words and “palabras clave” and keywords. Limit the number of signatories to 3. These should adhere to the following scheme.

Objective. The principal objective of the review should be established. Include information on the population studied, interventions, exposures, scales or results that are going to be reviewed.

Search strategy. Summarize the information sources used, mentioning the restrictions. Indicate if there were experts, data bases or publications, years included in the search, etc.

Selection of studies. Describe the methodology used for data extraction from each relevant article.

Synthesis of results. Mention the principal results of the review.

Conclusions. Indicate the relevant conclusions, avoiding generalizations in the review subject. Recommend the direction of future studies.
Editorials
These may be of scientific or opinion content.

Scientific editorials. They imply a rigorous up-date or interesting observation on a certain subject.
Opinion editorials. These identify points of view or socioscientific positionings of the SEH-LELHA.

The editorials will be commissioned by the Editorial Board of the Journal. They should have a maximum length of 6 pages and can include up to 4 figures or tables.

Case reports

Summary statement of one or more uncommon case reports or those of interest that suppose an important contribution. Maximum length of the text should be 4 DIN-A4, double spaced, and up to 3 figures or tables will be accepted. Include a “resumen” and abstract of 150 words and “palabras clave” and keywords. References should not exceed 10 and number of authors should be limited to 3.

Letters to the editor

Objections, comments, observations or experiences regarding articles recently published in Hipertensión y Riesgo Vascular or other subjects of related interest will be published in this section. Maximum length will be two pages and 2 figures and/or tables will be accepted. There should be no more than 4 authors.

Consensus Documents or Clinical Practice Guidelines of Scientific Societies, created with the participation of different working groups of the Scientific Societies for which we are the official publication.

Special articles: These are usually written at the request of the Editorial Committee. As an exception, the publication of a special article not requested by the Editorial Committee of the Journal will be considered after evaluation by the editors, who will decide if it should be rejected or sent to the reviewers. These articles should follow the same guidelines as review articles.

Contact details for submission
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Language
This journal is published mainly in Spanish, but manuscripts in English are also accepted and published.

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.

Ensure that the following items are present:
One author has been designated as the corresponding author with contact details:
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• Full postal address
All necessary files have been uploaded:
Manuscript:
• Include keywords
BEFORE YOU BEGIN

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**Authorship**

All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, 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 submitted.

**Changes to authorship**

Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

**Clinical trial results**

In line with the position of the International Committee of Medical Journal Editors, the journal will not consider results posted in the same clinical trials registry in which primary registration resides to be prior publication if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, divulging results in other circumstances (e.g., investors' meetings) is discouraged and may jeopardise consideration of the manuscript. Authors should fully disclose all posting in registries of results of the same or closely related work.

**Reporting clinical trials**

Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The CONSORT checklist and template flow diagram are available online.

**Registration of clinical trials**

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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**PREPARATION**

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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](http://www.elsevier.com)). 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**

**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'.

**Introduction**
State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

**Material and methods**
Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described.

**Results**
Results should be clear and concise.

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

**Conclusions**
The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

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- **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name 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.
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work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

**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.

In articles include: Abstract in Spanish and in English of approximately 250 words in articles for the Original section, structured with the following sections: Introduction, Material and methods, Results and Conclusion.

In Review articles, Case Reports and Practical applications of basic research, the “resumen” and abstract should be approximately 150 words and unstructured.

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Immediately after the abstract, provide a maximum of 6 keywords, using British spelling and avoiding general and plural terms and multiple concepts (avoid, for example, ‘and’, ‘of’). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

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

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

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Examples:

Reference to a journal publication:

Reference to a book:

Reference to a chapter in an edited book:

Reference to a website:

Reference to a dataset:

Note shortened form for last page number. e.g., 51–9, and that for more than 6 authors the first 6 should be listed followed by 'et al.' For further details you are referred to 'Uniform Requirements for Manuscripts submitted to Biomedical Journals' (J Am Med Assoc 1997;277:927–34)(see also Samples of Formatted References).

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