Instructions to the Authors

The Editorial Process

Each submission to Clinical Trials in Degenerative Diseases (CTDD) passes through a quality control check and peer-review evaluation process before receiving a decision. The initial in-house quality control check deals with issues such as plagiarism check, competing interests, ethical requirements for studies involving human participants or animals, financial disclosures, in full compliance with CTDD's data availability policy. Submissions may be returned to authors for queries, and will not be assigned to our Editorial Board or peer reviewers until they pass the quality control check.

Peer Review Process

Once the manuscript has passed quality control check, it is assigned to the strict double-blinded peer review process for a decision, either to accept, revise, or reject the article. Before manuscripts are sent for review, invited peer reviewers are confirmed regarding their availability, conflicts of interest with the manuscript, their agreements to have their names and comments published afterwords. A peer review report together with the reviewer's name, if permitted, will be posted at the end of the article. Only 15–20% of submitted manuscripts are published in CTDD. Most manuscripts will be evaluated by 3–5 external reviewers. Average time from the submission to the first editorial decision is 1 month. The review time could be shortened to 7 days for the paper with sophisticated review comments from other recognized journals in the field. According to these comments, the academic editors will make a decision as to accept, reject, request a revision or send to another peer review.

Manuscripts accepted for publication are copy edited for grammar, punctuation, print style, and format. Page proofs are sent to the corresponding author. The corresponding author is expected to return the corrected proofs within three working days. It may not be possible to incorporate corrections received after that period. The whole process of submission of the manuscript to final decision and sending and receiving proofs is completed online. To achieve faster and greater dissemination of knowledge and information, the journal publishes articles online as 'Ahead of Print' immediately on acceptance.

Reviewer Recognition

The quality of CTDD depends on the effort that is generously contributed by our reviewers who have dedicated their expertise and time helping to ensure we publish great science. CTDD will provide a certification of review for those who make general comments with more than 150 words and complete the peer-review process within 14 days. We encourage the reviewers to share and discuss their review comments on Publons (www.publons.com). CTDD will also give credit to registered reviewers on Publons.

Complaints Process

This procedure applies to complaints about the policies, procedures, or actions of the CTDD's editorial staff. We welcome complaints as they provide an opportunity and a spur for improvement, and we aim to respond quickly, courteously, and constructively. The procedure outlined below aims to be fair to those making complaints and those complained about.

Definition:

Our definition of a complaint is as follows:

a. The complainant defines his or her expression of unhappiness as a complaint.

b. We infer that the complainant is not simply disagreeing with a decision we have made or something we have published (which happens every day) but thinks that there has been a failure of process—for example, an unacceptably long delay or a rude response—or a severe misjudgement.

c. The complaint must be about something that is within the responsibility of CTDD editorial office – i.e. content or process.

How to make a complaint:

a. Complaints may be made by phone, email, or letter, ideally to the person the complainant is already in contact with over the matter being complained about. If that is not appropriate please email: stm.ctdd@gmail.com

b. Whenever possible complaints will be dealt with by the person to whom they are made. If that person cannot deal with the complaint he or she will refer it to the Editor-in-Chief.

c. Complaints about editorial matters that are sent to Medknow officers and officials will usually be referred in the first instance to the Editor.

d. All complaints will be acknowledged (immediately on the phone, within seven working days if by email or post).

e. If possible a definitive response will be made within two weeks. If this is not possible an interim response will be given within two weeks. Interim responses will be provided until the complaint is finally resolved.
f. If the complainant remains unhappy, complaints should be escalated to the editor, whose decision is final.
g. If the complainant has exhausted the internal processes and is still unhappy he or she can complain to the following body:
The Committee on Publication Ethics COPE publishes a code of practice for editors of scientific, technical, and medical journals http://www.publicationethics.org.uk/. It will consider complaints against editors but only once a journal's own complaints procedures have been exhausted.

Clinical trial registry

Clinical Trials in Degenerative Diseases favors registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. Clinical Trials in Degenerative Diseases would publish clinical trials that have been registered with a clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable: Australian New Zealand Clinical Trials Registry (ANZCTR)
Brazilian Clinical Trials Registry (ReBec)
Chinese Clinical Trial Register (ChiCTR)
Clinical Research Information Service (CRiS), Republic of Korea
ClinicalTrials.gov
Clinical Trials Registry - India (CTRI)
Cuban Public Registry of Clinical Trials (RPCEC)
EU Clinical Trials Register (EU-CTR)
German Clinical Trials Register (DRKS)
Iranian Registry of Clinical Trials (IRCT)
ISRCTN.org
Japan Primary Registries Network (JPRN)
Pan African Clinical Trial Registry (PACTR)
Peruvian Clinical Trials Registry (REPEC)
Sri Lanka Clinical Trials Registry (SLCTR)
Thai Clinical Trials Register (TCTR)
The Netherlands National Trial Register (NTR) This is applicable to clinical trials that have begun enrollment of subjects in or after June 2008. Clinical trials that have commenced enrollment of subjects prior to June 2008 would be considered for publication in Clinical Trials in Degenerative Diseases only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to public without charging any fees.

Authorship Criteria

Authorship credit should be based only on substantial contributions to each of the four components mentioned below:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
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.

Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content of the manuscript. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the contributors. The journal prescribes a maximum number of authors for manuscripts depending upon the type of manuscript, its scope and number of institutions involved (vide infra). The authors should provide a justification, if the number of authors exceeds these limits.

Update your ORCID record after publication
The first author or the corresponding author should provide ORCID upon manuscript submission. CTDD also helps authors to register a unique ORCID identifier to uniquely identify author's publication.

Contribution Details

Provide at minimum one contribution for each author in the submission system. Contributions will be published with the final article, and they should accurately reflect contributions to the work. The submitting author is responsible for completing this information at submission, and we expect that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time.

The author's names are listed in the following format: full family (sur)name followed by abbreviated family and first and middles names. For example, "WCL and LL contributed equally to this work. WCL, LL, FJF, ZCC, HF and WXM designed the research study. WCL, ZCC, HF and WXM performed the research. XJZ and LJR contributed new reagents and analytic tools. WCL, LL and FJF analyzed the data. WCL, LL and FJF wrote the manuscript. All authors have read and approved the final manuscript."

Conflicts of Interest/ Competing Interests

Authors:

When authors submit a manuscript of any type or format they are responsible for disclosing all financial and personal relationships that might bias or be seen to bias their work. Financial relationships (such as employment, consultancies, stock ownership or options, honoraria, patents, and paid expert testimony) are the most easily identifiable conflicts of interest and the most likely to undermine the credibility of the journal, the authors, and of science itself. However, conflicts can occur for other reasons, such as personal relationships or rivalries, academic competition, and intellectual beliefs. Authors should avoid entering in to agreements with study sponsors, both for-profit and non-profit, that interfere with authors' access to all of the study's data or that interfere with their ability to analyze and interpret the data and to prepare and publish manuscripts independently when and where they choose.

Peer Reviewers:
Reviewers must disclose to editors any conflicts of interest that could bias their opinions of the manuscript, and should recuse themselves from reviewing specific manuscripts if the potential for bias exists. Reviewers must not use knowledge of the work they're reviewing before its publication to further their own interests.

Editors and Journal Staff:
Editors who make final decisions about manuscripts should recuse themselves from editorial decisions if they have conflicts of interest or relationships that pose potential conflicts related to articles under consideration. Other editorial staff members who participate in editorial decisions must provide editors with a current description of their financial interests or other conflicts (as they might relate to editorial judgments) and recuse themselves from any decisions in which a conflict of interest exists. Editorial staff must not use information gained through working with manuscripts for private gain. Editors should publish regular disclosure statements about potential conflicts of interests related to the commitments of journal staff. Guest editors should follow these same procedures.

Submission of Manuscripts

Please submit your manuscript via our online manuscript handling site at http://www.journalonweb.com/ctdd/ using the log-in details provided to you by the editorial office. First time users will have to register at this site. Registration is free but mandatory. Registered authors can keep track of their articles after logging into the site using their user name and password.

Authors submitting manuscripts by email (stm.ctdd@gmail.com) also can be accepted.

If you experience any problems, please contact the editorial office by e-mail at stm.ctdd@gmail.com

The submitted manuscripts that are not as per the "Instructions to Authors" would be returned to the authors for technical correction, before they undergo editorial/ peer-review. Generally, the manuscript should be submitted in the form of two separate files:

[1] **Title Page/First Page File/covering letter**:

This file should provide

1. The type of manuscript (original article, clinical trial protocol, case report, review article, Perspective, Letter to editor, Images, etc.) title of the manuscript, running title, names of all authors/ contributors (with their highest academic degrees, designation and affiliations) and name(s) of department(s) and/ or institution(s) to which the work should be credited, . All information which can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files.
2. Source(s) of support in the form of grants, equipment, drugs, or all of these;
3. Acknowledgement, if any. One or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. This should be included in the title page of the manuscript and not in the main article file.
4. If the manuscript was presented as part at a meeting, the organization, place, and exact date on which it was read. A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work. Any such work should be referred to specifically, and referenced in the new paper. Copies

of such material should be included with the submitted paper, to help the editor decide how to handle the matter.

5. Registration number in case of a clinical trial and where it is registered (name of the registry and its URL)
6. Conflicts of Interest of each author/ contributor. A statement of financial or other relationships that might lead to a conflict of interest, if that information is not included in the manuscript itself or in an authors' form
7. Criteria for inclusion in the authors'/ contributors' list
8. A statement that the manuscript has been read and approved by all the authors, that the requirements for authorship as stated earlier in this document have been met, and that each author believes that the manuscript represents honest work, if that information is not provided in another form (see below); and
9. The name, address, e-mail, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs, if that information is not included on the manuscript itself.

[2] **Blinded Article file**: The main text of the article, beginning from Abstract till References (including tables) should be in this file. The file must not contain any mention of the authors' names or initials or the institution at which the study was done or acknowledgements. Page headers/running title can include the title but not the authors' names. Manuscripts not in compliance with the Journal's blinding policy will be returned to the corresponding author. Use rtf/doc files. Do not zip the files. **Limit the file size to 1 MB**. Do not incorporate images in the file. If file size is large, graphs can be submitted as images separately without incorporating them in the article file to reduce the size of the file. The pages should be numbered consecutively, beginning with the first page of the blinded article file.

[3] **Images**: Submit good quality color images. **Each image should be less than 2 MB in size**. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1600 x 1200 pixels or 5-6 inches). Images can be submitted as jpeg files. Do not zip the files. Legends for the figures/images should be included at the end of the article file.

[4] **The contributors' / copyright transfer form** (template provided below) has to be submitted in original with the signatures of all the contributors within two weeks of submission via courier, fax or email as a scanned image. Print ready hard copies of the images (one set) or digital images should be sent to the journal office at the time of submitting revised manuscript. High resolution images (up to 5 MB each) can be sent by email.

Contributors' form / copyright transfer form can be submitted online from the authors' area on http://www.journalonweb.com/ctdd.

Preparation of Manuscripts

Read the journal scope and criteria for publication for information on what CTDD publishes. CTDD welcomes presubmission inquiries. Manuscripts should be organized as follows.

Clinical Trials in Degenerative Diseases accepts manuscripts written in American English.

Redundant or duplicate publication
We ask you to confirm that your paper is original, has not been published in its current form or a substantially similar form (in print or electronically, including on a web site), that it has not been accepted for publication elsewhere, and that it is not under consideration by another publication. The ICMJE has provided details of what is and what is not duplicate or redundant publication. If you are in doubt (particularly in the case of material that you have posted on a web site), we ask you to proceed with your submission but to include a copy of the relevant previously published work or work under consideration by other journals. Authors must draw attention to any published work that concerns the same patients or subjects as the present paper in a covering letter with their article.

Permissions to reproduce previously published material
CTDD requires you to send us copies of permission to reproduce material (such as illustrations) from the copyright holder. Articles cannot be published without these permissions.

Patient consent forms
The protection of a patient's right to privacy is essential. Please collect and keep copies of patients' consent forms on which patients or other subjects of your experiments clearly grant permission for the publication of photographs or other material that might identify them. If the consent form for your research did not specifically include this, please obtain it or remove the identifying material.

A statement to the effect that such consent had been obtained must be included in the 'Methods' section of your paper. If necessary the individual journal Editor(s) may request a copy of any consent forms.

Ethics committee approval
All articles dealing with original human or animal data must include a statement on ethics approval at the beginning of the Methods section. This paragraph must contain the following information: the name and address of the ethics committee responsible; the protocol number that was attributed by this ethics committee; the name of the Chairperson of the ethics committee (or the person who approved the protocol) and the date of approval by the ethics committee.

Title page:

Title: 20 word maximum. Titles should be written in sentence case (only the first word of the text, proper nouns, and genus names are capitalized). Avoid specialist abbreviations if possible. For specific type of clinical trials, systematic reviews, or meta-analyses, the subtitle should include the study design.

Author list: All authors must meet the criteria for authorship in accordance with the standard proposed by the International Committee of Medical Journal Editors (ICMJE, http://www.icmje.org/). Author names(unabbreviated) should be given as first name, and family (sur)name. A hyphen should be included between the syllables of Chinese names, for example Xiao-Ming Xu.

Affiliations: The affiliation includes department, university, or organizational affiliation and its location, including city, state/province (if applicable), and country. If an author has multiple affiliations, enter all affiliations on the title page only. In the submission system, enter only the preferred or primary affiliation.

Corresponding Author(s): Include the academic degree (e.g., M.D., Ph.D., B.S.) and an email address for each corresponding author listed on the title page of the manuscript. The submitting author is automatically designated as the corresponding author in the submission system. The corresponding author is the primary contact for the journal office and the only author able to view or change the manuscript while it is under editorial consideration. Only one corresponding author can be designated in the submission system, but this does not restrict the number of corresponding authors that may be listed on the article in the event of publication. Whoever is designated as a corresponding author on the title page of the manuscript file will be listed as such upon publication.

ORCID: The corresponding author must provide an ORCID iD at the time of submission by entering it in the user profile in the submission system.

Funding information: This information should describe sources of funding that have supported the work, including full names of foundation that funded the study or authors, specific grant numbers, and initials of authors who received each award. It is important to gather these details prior to submission because your funding information cannot be changed after initial submission without journal approval. If your manuscript is published, your statement will appear in the Funding section of the article.

Main body:

Abstract: ≥500words, structured abstract. Please minimize the use of abbreviations and do not cite references in the abstract. Reports of randomized controlled trials should follow the CONSORT extension for abstracts. The abstract must include the following separate sections:

- Background: the context and purpose of the study
- Methods: how the study was performed and statistical tests used
- Results: the main findings
- Conclusions: brief summary and potential implications
- Trial registration: If your article reports the results of a health care intervention on human participants, it must be registered in an appropriate registry and the registration number and date of registration should be in stated in this section.

Key words: 8-10 keywords that reflect the main content of the study. Each keyword is separated by a semicolon.

Introduction: 500 words maximum. The Background section should include:
- The background to the study;
- A summary of the existing literature;
- Specific purpose and hypothesis why this study was necessary or its contribution to the field.

Subjects and Methods: The methods section should include:
- The study design: (1)Trial design: Description of trial design (such as parallel, factorial); (2) Ethical approval: the name of the approving institutional review board or equivalent committee(s) and its approval number; and (3) informed consent;
- The participants: (1) the recruitment process: Settings and locations where the data were collected and (2) Eligibility criteria: including inclusion criteria, exclusion criteria, rejection criteria;
- Intervention: The interventions for each group with sufficient details to allow replication, including how and when they were actually administered;
- Outcome measures: Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed;
- Sample size and power: How sample size was determined;
- Statistical analysis: Statistical methods used to compare groups for primary and secondary outcomes; Methods for additional analyses, such as subgroup analyses and adjusted analyses
- Data management:
- Data review: (1) Data review Committee; (2) Researchers' qualification; (3) Audit; (4) Compensation to the subjects; (5) Compensation to the Harms;
- Ethics and Dissemination: (1) Ethical approval; (2) Changes to the protocol; (3) Informed Consent; (4) Confidentiality; (5) Data collection; (6) Cares for the Harms; (7) Dissemination Policy;

Results: This should include the findings of the study including, if appropriate, results of statistical analysis which must be included either in the text or as tables and figures.
Statistical analysis: Authors must provide detailed information for each statistical test applied including: the type of test; specific p values (not > or <); degrees of freedom; population size; definition of population (e.g., number of individual measurements, number of animals, number of slices, number of times treatment was applied, etc.); and if performed, what correction was used to adjust for multiple pair wise comparisons.

Discussion: 1500 words maximum. This section should discuss the implications of the findings in context of existing research and highlight limitations of the study.

Trial status: Authors should report the protocol version number and date, the date recruitment began, and the approximate date when recruitment will be completed.

Figures and Tables: Flow diagram which displays the progress of all participants through the trial should be provided.
Figure legend(s) and Table title(s) are provided. The order and numerical labeling of tables and figures is consistent with their appearance and presentation in the text. Symbols in tables (e.g., +, -, ×, ÷, □) correctly correspond to the definitions in the footnotes. Only one legend is provided for each multi-panel figure consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. (A) …. (B) …. (C) …. (D) …. (E) …. (F) ….

References: 30 references minimum for original article, which 30% of cited references should have been published within the preceding 3 years. CTDD has adopted the reference style of *JAMA*. Please download it from EndNote.

Additional information requested at submission:
Author contributions: Provide at minimum one contribution for each author in the submission system. Contributions will be published with the final article, and they should accurately reflect contributions to the work. The submitting author is responsible for completing this information at submission, and we expect that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time.
The author's names are listed in the following format: full family (sur)name followed by abbreviated family and first and middles names. For example, "WCL and LL contributed equally to this work. WCL, LL, FJF, ZCC, HF and WXM designed the research study. WCL, ZCC, HF and WXM performed the research. XJZ and LJR contributed new reagents and analytic tools. WCL, LL and FJF analyzed the data. WCL, LL and FJF wrote the manuscript. All authors have read and approved the final manuscript."

Financial support: Financial Disclosure Statement should include: (1)Specific grant numbers; (2)Initials of authors who received each award; (3)Full names of commercial companies that funded the study or authors; (4)Initials of authors who received salary or other funding from commercial companies; (5) whether any sponsors or funders (other than the named authors) played any role in Study design/Data collection and analysis/Decision to publish/Preparation of the manuscript.
If they had no role in the research, include this sentence: "The funders had no role in study design, data collection and analysis, decision to publish, or preparation of the manuscript."
If the study was unfunded, include this sentence as the Financial support: "The author(s) received no specific funding for this work."

Acknowledgment: Those who contributed to the work but do not meet the authorship criteria should be listed in the Acknowledgments with a description of the contribution.

Conflict of interests: All potential competing interests must be declared in full. If the submission is related to any patents, patent applications, or products in development or for market, these details, including patent numbers and titles, must be disclosed in full.
If all authors have nothing to declare, include this sentence as the Conflicts of interest: "None declared."

Institutional review board statement: e.g. "The research involving human participants must have been approved by the hospital ethics committee (Approval number and date of approval). The study followed the principles in accordance with the Declaration of Helsinki. Participants. The study was registered in Trial Registry (registration number and date of registration), compulsory for all prospective clinical studies."

Declaration of participant consent: E.g. The authors certify that they have obtained all appropriate patient consent forms. In the form the patients have given their consent for their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.
Facial photos of human subjects should be obscured whenever possible to comply with publishing standards.

Reporting statement:
For human subjects research, the manuscript should conform to the following reporting guidelines according to ICMJE:
- Randomized trials: CONSORT
- Non-randomized trials: TREND
- Observational studies: STROBE

- Systematic reviews: PRISMA
- Case reports: CARE
- Quality improvement studies: SQUIRE
- Diagnostic accuracy studies: STARD
- Economic evaluation studies: CHEERS
- Other types of health-related research: Consult the EQUATOR web site for appropriate reporting guidelines

Biostatistics statement: E.g. The statistical methods of the study should be reviewed by the biostatistician of their institution.

Data sharing statement:
(1) Will individual participant data be available (including data dictionaries)?
(2) What data in particular will be shared (single choice)?
- All of the individual participant data collected during the trial, after deidentification
- Individual participant data that underlie the results reported in this article, after deidentification (text, tables, figures, and appendices)
(3) What other documents will be available (multiple choice)?
- Study Protocol; Statistical Analysis Plan; Analytic Code; Informed Consent Form; Clinical Study Report
(4) When will data be available (start and end dates) (single choice)?
- Immediately following publication, No end date;
- Beginning 3 months and ending 5 years following article publications
- Beginning 9 months and ending 36 months following article publication
(5) With whom (single choice)?
- Anyone who wishes to access the data
- Researchers who provide a methodologically sound proposal
- Investigations whose proposed use of the data has been approved by an independent review committee (“learned intermediary”) identified for this purpose
(6) For what types of analyses (single choice)?
- Any purpose; To achieve aims in the approved proposal; For individual participant data meta-analysis
(7) By what mechanism will data be made available (single choice)?
- Data are available indefinitely at (Link to be included)
- Proposals should be directed to xxx@yyy. To gain access, data requestors will need to sign a data access agreement. Data are available for 5 years at a third party website (Link to be included).
- Proposals may be submitted up to 36 months following article publication. After 36 months the data will be available in our University’s data warehourse but without investigator support other than deposited metadata. Information regarding submitting proposals and accessing data may be found at (Link to be provided).

Supporting Information:
Authors can submit essential supporting files and multimedia files along with their manuscripts. All supporting information will be subject to peer review. List supporting information captions at the end of the manuscript file. For example: Additional file 1: Text. Title is strongly recommended. Legend is optional.
For prospective clinical study, the following documents are encouraged to upload:
(1) Institutional Review Board Approval Document;
(2) Clinical Trial Protocol;
(3) Signed Informed Consent Form;
(4) Checklist of Reporting Guidelines, e.g. CONSORT 2010 Checklist.
Other supporting documents are welcomed, including:
(1) The approved grant application form;
(2) Copyright License Agreement;
(3) Conflict-of-interest Disclosure form (Download from http://www.icmje.org/conflicts-of-interest/).

Copyright/Permissions after Publication

Types of Manuscripts

Original Articles:

CTDD will consider manuscripts on any clinical topic that is relevant to all aspects of degenerative diseases, including degenerative heart diseases, metabolic degeneration, genetic metabolic disease during fetal and neonatal life, embryonic and neonatal structural abnormalities, neurodegenerative disorders, orthopedic degenerative diseases and degenerative eye diseases.

Study Protocols:

Study protocol articles will only be considered for proposed or ongoing trials that have not completed patient recruitment at the time of submission.
Please confirm the status of your study at submission. If the study has already undergone full external peer review as part of the ethics approval or funding process, the study protocol will usually only undergo editorial peer review by the handling editor. Proof of both ethics and funding will be required and we recommend that authors provide the relevant documentation on submission. Study protocols without major external funding will undergo full, external peer review. Study protocols without ethical approval will generally not be considered.

Reviews:
Invited reviews are topical reviews, generally 6,000 words in length, which cover a current topic of interest in degenerative diseases.

Perspectives:
Authors with outstanding achievements in the field from international renowned laboratories are invited to write a short paper that has not been previously published, introducing their scientific hypothesis, specific animal models or patients as participants, a novel technique or method, materials, or cell type. The invited perspectives should introduce compelling new stories about how scientists or laboratories yield their striking thoughts or achievements, rather than simply describe their research progress. These papers will provide readers with novel thoughts and insights.

Case Reports:
New, interesting and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These communications could be of up to 1000 words (excluding Abstract and references) and should have the following headings: Abstract (unstructured), Key-words, Introduction, Case report, Discussion, Reference, Tables and Legends in that order.
The manuscript could be of up to 1000 words (excluding references and abstract) and could be supported with up to 10 references. Case Reports could be authored by up to four authors.

Letters to the Editor:
Brief communications and case reports should offer an important new observation and not simply review the literature. In rare instances, we will consider case reports for this article type, but only if the topic is extraordinarily novel.

Corrections and Retractions:
CTDD publishes corrections, retractions, and expressions of concern as appropriate, and as quickly as possible. We follow the ICMJE and COPE guidelines where applicable.
• **Correction:** A notice of correction will be issued by CTDD to correct substantial errors that appear in published articles when these errors significantly affect the content or understanding of the work (e.g., error in data presentation or analysis) or when the error affects the publication's metadata (e.g., misspelling of an author's name). In these cases, CTDD will publish a correction that will be linked to the original article. In very rare cases, we may choose to correct the article itself and repost it online. If that course is taken, a correction notice will also be created to document the changes to the original article.
• **Author-Initiated Retractions:** CTDD will retract an article at the authors' request at any time unless it is under review for a possible violation of Responsible Conduct Regarding Scientific Communications. At the authors' option, the retraction notice may simply state that the article has been retracted at the authors' request. Alternatively, the authors may provide a brief explanation of the error(s) prompting the retraction. However, statements of retraction may not assign blame to specific authors or laboratories.
• **Retractions:** The editors reserve the right to retract an article at any time after publication without the consent of the authors if an investigation by an appropriate authority reveals a violation of CTDD's ethics policy.
To request a correction/retraction, please contact the editorial office directly at stm.ctdd@gmail.com.

• **Expression of Concern:** Investigation underway; Investigation results unreliable; Evidence of misconduct, but no investigation.

Plagiarism
• Each CTDD paper will be checked twice, using Crosscheck to verify originality after submission and prior to publication. The check report will be sent to the authors.
• The similarity of any CTDD paper should not be over 5% against one single published paper, not over 20% against all published papers.
• Similarity between new submitted manuscript and the published by the same research team or author should be not over 30%.

• No retracted articles should be cited.
• For dishonorable events including redundant (duplicate) publication, suspected plagiarism, and undisclosed conflicts of interest, CTDD will abide by COPE guidelines (http://publicationethics.org/resources).

Reporting Guidelines for Specific Study Designs

Initiative	Type of Study	Source
CONSORT	Randomized controlled trials	http://www.consort-statement.org
STARD	Studies of diagnostic accuracy	http://www.consort-statement.org/stardstatement.htm
QUOROM	Systematic reviews and meta-analyses	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf statement.org/Initiatives/MOOSE/moose.pdf
STROBE	Observational studies in epidemiology	http://www.strobe-statement.org
MOOSE	Meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf

Ethical Guidance
According to ICMJE recommendations, the authors should follow all ethical principles for medical research involving humans and experimental animals.

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