



Gastroenterología y Hepatología

AUTHORS INFORMATION PACK

GUIDE FOR AUTHORS

INTRODUCTION

The mission of Gastroenterología y Hepatología is to cover a broad spectrum related with gastroenterology and hepatology, including the latest advances in pathology of the gastrointestinal tract, inflammatory bowel disease, liver, pancreas and bile ducts, making it an indispensable tool for gastroenterologists, hepatologists, internists and general practitioners, offering in-depth reviews and updates on issues relating to the specialty.

In addition to the rigorously selected, systematically peer-reviewed manuscripts published in the research sections (research articles, scientific letters, editorials, and letters to the editor), the journal also publishes consensus documents and clinical guides from the most prominent scientific societies. The publication is the official journal of the Spanish Association of Gastroenterology (AEG), the Spanish Association for the Study of the Liver (AEEH), and the Spanish Working Group on Crohn's Disease and Ulcerative Colitis (GETECCU). The journal is included in Medline/Pubmed, Science Citation Index Expanded and SCOPUS.

Types of article

For any section of this journal, except letters to the editor, the three epigraphs: **Ethical considerations**, **Funding** and **Conflict of interest** should be added at Essential title page information.

Ethical considerations: If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with [The Code of Ethics of the World Medical Association](#) (Declaration of Helsinki) for experiments involving humans; [Uniform Requirements for manuscripts submitted to Biomedical journals](#). Authors should include a statement that informed consent was obtained for experimentation with human subjects, and all the ethical procedures were performed. The privacy rights of human subjects must always be observed. The **approval of the institutional review board (IRB)** or the appropriate committee must be stated in this epigraph.

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The article must have the following headings: Introduction; Patients and Methods; Results; and Discussion. The text is limited to a maximum of 4,000 words, not including references, abstract and figure legends. The abstract is limited to a maximum of 250 words and need to be structured. There should be no more than 30 references. The total combined number of tables and figures should not exceed 6.

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¹ Systematic Reviews (2021) 10:39 <https://doi.org/10.1186/s13643-020-01542-z>

² https://www.agreetrust.org/wp-content/uploads/2013/06/AGREE_II_Spanish.pdf

³ GRADE system: classification of the quality of the evidence and grading of the strength of the recommendation. DOI: 10.1016 / j.ciresp.2013.08.002

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Letters related to articles published by the journal are the first choice for this section as well as letters providing opinions and observations focused in a topic of current interest. The letters related with published articles must be received within three weeks after the publication of the article and at the discretion of the Editorial Board will be sent to the author of the article, who will have 4 weeks in which to answer. Letters should contain fewer than 700 words, one table or figure, and must contain no more than 5 references. After publication of the reply, no further correspondence will be accepted. Up to 4 authors are accepted.

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Divide your article into clearly defined sections. Each subsection is given a brief heading (Introduction, Patients and methods, Results, Discussion and Conclusions). 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.

Patients 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

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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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If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

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- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
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The headings will consist of: «Objective», «Patients and Methods», «Results» and «Conclusions».

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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.

Acknowledgements

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

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

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