



Actas Dermo-Sifiliográficas

AUTHORS INFORMATION PACK

GUIDE FOR AUTHORS

INTRODUCTION

<p>Actas Dermo-Sifiliográficas is the official publication of the Spanish Academy of Dermatology and Venereology (AEDV). Founded by Juan de Azúa in 1909, it is the longest-standing monthly Spanish medical journal. The journal is dedicated to articles on scientific research and continuing education with subjects related to medical-surgical dermatology and venereology. </p> <p>We suggest that articles by Spanish authors should comply with the general criteria of Law 14/2007, from 3rd July, for biomedical research (BOE n 159), which protects the rights of individuals who are subjects of research. Clinical assays should be registered with public databases prior to their initiation and patient recruitment, and only after approval of the institutional or regional Clinical Research Ethics Committee. The authors should provide the archive number and database where the assay is registered. For all clinical assays that initiate patient recruitment as of 1 January 2017, registration in public databases will be mandatory. Assays with patient recruitment prior to this date may still be submitted to the Journal for evaluation without this archive number and database.</p>

Types of article

Any article submitted to this journal will follow the guidelines described in this author's guide, so it is essential to consult it before submitting manuscripts.

FIRST PAGE

Regardless of the type of article, for any section of this journal, authors must always include on the first page of the article, in addition to the title, authors, affiliations, and email address, statements regarding Ethical Considerations, Informed Consent, Funding, Conflict of Interest, the Use of Artificial Intelligence, and Authorship.

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Funding

The author will identify who provided financial support for the conduct of the research and/or preparation of the article and will briefly describe the role of the sponsor(s), if applicable, in study design; data collection, analysis, and interpretation; drafting the report; and the decision to submit the manuscript for publication. If the funding source(s) did not participate in these activities, this should be declared.

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Any type of financial or personal relationship with other individuals or organizations that could have influenced the work should be disclosed, even if not directly related to the current manuscript. Examples of potential conflicts of interest include employment, consultancy, stock ownership, honoraria, paid expert testimony, patent applications or registrations, other funding, travel grants, and participation in courses and conferences as a paid expert. If none of these conditions apply, the statement should be: "Declaration of interest: none."

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BODY OF THE ARTICLE

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Ethics and Informed Consent

In the case of experiments involving humans or animals, the author must declare in the "**Materials and Methods**" section that the guidelines for Human and Animal Rights described in the "Ethics in Publishing" section of this author's guide have been followed. Specifically, for experiments with humans, authors should confirm that the research was conducted in accordance with the World Medical Association's Declaration of Helsinki, and for animals, that the ARRIVE guidelines were followed or that the research complies with the applicable laws on the Use and Care of Laboratory Animals and, when applicable, Animal Welfare Laws. Authors must also declare that they have obtained approval from the Institutional Review Board (IRB) or the relevant ethics committee, without revealing data that could hinder blinded review, and that they have obtained informed consent from the patients. Please note that the Spanish Biomedical Research Law states that ethics committees at each center must evaluate all biomedical research involving interventions in humans or the use of biological samples.

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They will be included in the Problem Case, Practical Dermatoscopy, or another section where one or more clinical cases appear.

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Original Articles. This section includes original work in clinical and basic research. Recommended study designs are experimental studies (clinical trials) or observational studies of analytical types (case-control and cohort studies) or descriptive (cross-sectional). For clinical trials, the CONSORT guidelines should be followed (available at: <http://www.consort-statement.org/>), as well as the STARD initiative for diagnostic tests (<http://www.stard-statement.org/>) and the STROBE guidelines for observational studies (<http://www.strobe-statement.org/>). It is advised that, in single-center studies, the number of authors does not exceed six. Multicenter studies may consider more authors. The maximum length of the manuscript is 2500 words (excluding the title page, abstract, references, tables, and figure legends). Up to 30 references, 6 figures, and 6 tables are permitted. Include an unstructured abstract of up to 250 words, structured into sections: background and objectives, materials and methods, results, conclusions, and keywords. Modifications to these guidelines are only allowed in exceptional cases with prior permission from the Editor. It is recommended to submit supplementary material such as additional tables, figures, or methodologies that, while not essential for understanding the work, may be useful for replication or detailed reading.

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Review. Aims to update a dermatological topic thoroughly based on current, high-quality scientific evidence. It should be signed by a maximum of 3 authors. The text should not exceed 3500 words (excluding title page, abstract, references, tables, and figure legends), include up to 8 tables/figures, and a maximum of 100 references. Include an unstructured abstract of up to 150 words and keywords. Reviews are commissioned by the Editorial Committee or upon prior request to the editor (ad@elsevier.com) and are peer-reviewed. Priority is given to systematic reviews, which should follow PRISMA guidelines (<https://www.prisma-statement.org/>). If they include meta-analyses, the format should resemble that of original articles. For reviews with recommendations concerning procedures and/or preventive, diagnostic, or therapeutic techniques, include the level of evidence and grade of recommendation according to SIGN, Oxford, or NICE classification systems.

Practical Dermatology. A review article on a topic with an essentially practical approach. It should be concise, focusing on clinical practice recommendations. Signed by up to 3 authors, with a maximum length of 2500 words (excluding title page, abstract, references, tables, and figure legends). Include an unstructured abstract (max 150 words) and keywords. Up to 8 figures, charts, tables, or algorithms are recommended to aid understanding. Up to 50 references are allowed. These are commissioned or submitted upon prior request and peer-reviewed. Evidence levels for recommendations should be included as described for general reviews.

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Consensus Documents. An article of up to 2500 words that compiles consensus documents, recommendations, and clinical or diagnostic guidelines developed by a working group or scientific society. Include an unstructured abstract of no more than 150 words and keywords. May include up to 8 tables or figures and 100 references. The article must specify levels of evidence and grades of recommendation according to current international guidelines. It is recommended to include supplementary material detailing procedures used in creating the document.

Challenging cases. Manuscripts will include original, unpublished clinical cases described by 1 to 3 authors, without an abstract but with keywords. The goal is to present cases with relevant educational features, such as atypical clinical presentation, characteristic findings, histological, dermatoscopic, etc. The title may suggest the final diagnosis if the diagnostic challenge is unrelated to the entity itself. High-quality, well-focused images with neutral backgrounds are required.

The manuscript will have two parts: 1) Case presentation (max 200 words for inclusion on a printed page), including: a) clinical history; b) physical examination; c) histopathology (describing findings without concluding diagnosis); d) other complementary tests; e) up to 3 high-quality color images (clinical, histological, dermatoscopic, etc., without figure legends, described in the text). 2) Diagnosis and comments (max 450 words, excluding references), including: a) diagnosis; b) clinical course and treatment; c) discussion of the disease, the presented case, and differential diagnosis, emphasizing the case's originality; and d) references (up to 6).

Practical Dermatoscopy. Focuses on the discussion of dermatoscopic-clinical case reports. Presents cases with challenging clinical diagnosis where dermatoscopy provides key diagnostic clues. Signed by up to 3 authors, no abstract required. Sections include: 1) Problem case presentation with two clinical images and a brief description (?50 words, excluding diagnosis); 2) two dermatoscopic images with the question: "What is your diagnosis?"; 3) Commentary (max 400 words, excluding references), describing the images and key features used for differential diagnosis. Up to 6 references are allowed.

Research Letters. This section is dedicated to publish short clinical or translational studies. Up to 6 authors, maximum 800 words (excluding abstract and keywords), with up to 3 figures/tables and 10 references.

Images in Dermatology. Original, high-quality images illustrating clinical, pathological, or imaging features (dermatoscopy, confocal microscopy, ultrasound, etc.) of dermatological diseases or test results, with significant educational value. Usually a single image or composed of up to 2 images, accompanied by a 200-word explanatory legend. The title should be brief (minusq10 words), indicating the pathology, and no more than three authors. The image must be exceptional in quality, well-focused, with a neutral background, and representative of the pathology.

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Resident Forum. Short bibliographic reviews by dermatology residents (medical trainees in dermatology), on current or impactful topics or recent articles providing new insights into etiology, pathophysiology, diagnostics, or treatments. Signed by up to 3 authors, no abstract, keywords required. Up to 500 words, with optional 1 figure/table, and up to 5 references from PubMed-indexed articles related to the discussed topic.

Contact details for submission

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For research involving or pertaining to humans, animals or eukaryotic cells, investigators should integrate sex and gender-based analyses (SGBA) into their research design according to funder/sponsor requirements and best practices within a field. Authors should address the sex and/or gender dimensions of their research in their article. In cases where they cannot, they should discuss this as a limitation to their research's generalizability. Importantly, authors should explicitly state what definitions of sex and/or gender they are applying to enhance the precision, rigor and reproducibility of their research and to avoid ambiguity or conflation of terms and the constructs to which they refer (see Definitions section below). Authors can refer to the [SSex and Gender Equity in Research \(SAGER\) guidelines](#) and the [S SAGER guidelines checklist](#). These offer systematic approaches to the use and editorial review of sex and gender information in study design, data analysis, outcome reporting and research interpretation - however, please note there is no single, universally agreed-upon set of guidelines for defining sex and gender.

Definitions

Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of

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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.

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[

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