

Anais Brasileiros de Dermatologia

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Introduction

Introduction

Anais Brasileiros de Dermatologia is the official peer-reviewed scientific journal of the Brazilian Society of Dermatology (Sociedade Brasileira de Dermatologia - SBD) and publishes articles related to Dermatology and associated specialties. Founded in 1925, the journal has been uninterruptedly published since then. ABD follows the [Ethical Guidelines of the Committee on Publication Ethics](#); the [Code of Ethics of the American Educational Research Association](#); the [Code of Good Scientific Practices of FAPESP](#); and the guidelines of the [Council of Science Editors](#).

The journal is divided into the following sections: Continuing Medical Education, Original Article, Review, Letter (subdivided into Tropical/Infectious and Parasitic Dermatology, Dermatopathology, Therapy, Clinical, and Research) and Correspondence.

Contributions can be sent to our electronic submission system: <https://www.editorialmanager.com/abd/>, in accordance with the Guidelines and Specifications described below.

Types of article

Manuscripts must be submitted through the online submission system, according to instructions.

The font used should be Times New Roman, size 12.

The journal publishes articles classified into the following categories:

- **Continuing Medical Education**

Articles written by invitation, aiming at updating the readers' knowledge. Uninvited authors who are interested in collaborating with this section should contact the Editorial Team before submitting their work, to discuss interest, feasibility and to receive detailed information about this type of article.

The manuscript must have a maximum of 6,000 words and 12 illustrations. It is mandatory to provide updated bibliographic references, and a maximum of 100 references is suggested. It is recommended to divide the manuscript into sections, for instance: Introduction, Background; Epidemiology; Etiopathogenesis; Clinical Aspects; Classification; Clinical, Laboratory and Differential Diagnosis; Evolution; Prognosis; Treatment. The abstract must have a maximum of 250

words.

- **Original article**

The following types of articles, not previously published, will be considered for this section: randomized clinical trials; cohort studies; case-control studies; cross-sectional studies; prevalence, incidence; accuracy; cost-effectiveness studies; series of cases (minimum number depending on the disease under study); studies on the pathophysiology of diseases and/or nosologic associations, studies on diagnostic and prognostic tests, basic research in dermatology (translational research) and systematic reviews with or without meta-analysis.

The manuscript must have a maximum of 6,000 words, 40 references and 10 illustrations. The article must be structured into the following sections: Introduction, Methods, Results, Discussion and Conclusion. The abstract must be structured into the following sections: Background (current state of knowledge); Objective; Methods; Results; Study limitations and Conclusions (with a precise level of clinical statistics significance, to prevent speculations). The abstract must have a maximum of 250 words.

The articles must follow the specific recommendations for each type of study:

- Randomized clinical trials: [CONSORT](#);
- Systematic review with or without meta-analysis: [PRISMA](#);
- Observational studies: [STROBE](#);
- Case series report: [CARE](#).

Specifications for different types of studies not described above are available at the [EQUATOR Network website](#).

Clinical trials must be registered in a public database, of which options are listed on the website of the [International Committee of Medical Journal Editors](#). Examples are: Brazilian Registry of Clinical Trials (Registro Brasileiro de Ensaios Clinicos [ReBEC](#) and [ClinicalTrials.gov](#)). The registration number must be informed in the submission archives.

Systematic reviews must also be registered with the international Prospective Register of Systematic Reviews [PROSPERO](#) or similar database. The registration number must also be informed in the submission archives.

- **Review**

This article is written by invitation, by professionals with acknowledged experience. It aims to perform an in-depth analysis of the current state of knowledge on topics of clinical relevance, with emphasis on aspects such as the cause and prevention of dermatological diseases, their diagnosis, treatment and prognosis. It should preferably include critical analyses of the literature.

The article must have a maximum of 6,000 words and 10 illustrations. A maximum of 100 references are suggested, which must be recent. The abstract must have a maximum of 250 words.

- **Letters**

This section is destined to a faster publication of brief communications, and it is divided into the following categories:

a) Letter - Tropical/Infectious and Parasitic Dermatology. Including but not limited to, Hansen's disease, fungal and parasitic infections, AIDS, and other sexually transmitted diseases. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.

b) Letter - Dermatopathology. Reports that highlight relevant dermatopathological aspects. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.

c) Letter - Therapy. Reports that highlight therapeutic outcomes or new adverse drug reactions. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.

d) Letter - Clinical. Case reports of undeniable interest and well-documented. The manuscript must have a maximum of 700 words, 10 references, and 4 illustrations.

e) Letter - Research. Less complex investigation studies, such as a small series of cases, disclosure of preliminary results from original research, and initial reports of therapeutic trials. The manuscript must have a maximum of 1,000 words, 10 references, and 4 illustrations.

All letters must not be divided into sections nor include an abstract and keywords.

- **Correspondence**

This section admits questions and objective suggestions related to articles published in this journal, up to two previous numbers, whose text must be continuous and not exceed 400 words. Maximum of 5 references and 2 illustrations.

Must not be divided into sections nor include an abstract and keywords.

- **Special Article**

Articles written by invitation only, on specific topics, such as: guidelines, consensuses, protocols and similar; issues related to scientific publications; epidemiology and biostatistics applied to dermatology; photographic or imaging technique approach; memory with a historical approach to topics of dermatological interest, such as celebration of important events in the development of medicine or dermatology; biographies; obituaries and, tributes to relevant personalities of national and international dermatology.

The specifications of the manuscript, such as structure and number of authors, will be defined according to the type of article, upon the invitation.

Language

The journal welcomes submissions in English or Portuguese.

Authorship

All authors must inform their substantial contribution on the Title Page according to the [Contributor Roles Taxonomy \(CRediT\)](#). Here are the options: (1) the study concept and design; (2) data collection, or analysis and interpretation of data; (3) statistical analysis; (4) writing of the manuscript or critical review of important intellectual content; (5) data collection, analysis and interpretation; (6) effective participation in the research guidance; (7) intellectual participation in the propaedeutic and/or therapeutic conduct of the studied cases; (8) critical review of the literature; (9) final approval of the final version of the manuscript.

Number of authors according to sections:

- Original Articles and Letter - Research - no limit on the number of authors.
- Continuing Medical Education, Review Articles and all Letters, except Letter - Research - maximum of 6 authors.
- Correspondence - maximum of 4 authors.
- Special Articles - discussion and definition according to the type of article, upon invitation.

Illustrations

Each illustration may be composed of 2 images maximum. Histopathological, immunohistochemistry, electron microscopy, dermatoscopy, confocal and radiological illustrations may be composed of 4 images each.

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 and also this [Box](#) that recaps all information on the article types and mandatory submission items.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:

- E-mail address
- Full postal address.

All mandatory submission documents templates, including the Conflict of Interest Statement, the Copyright Transfer Agreement Form, the Consent for Publication of Patient Images, can be found at the [journal website](#)

All documents must be signed by all the authors and uploaded to the submission system, following the submission process.

The Consent for Publication of Patient Images is needed solely for images that may identify the patient.

Please check if all needed information has been submitted, as described in the [Box](#)

For further information, visit our [Support Center](#).

Research Ethics, Informed Consent and Patient Details

The ABD journal adopts the principles of publication ethics included in the ABD code of conduct of the [Committee on Publication Ethics](#) COPE. Studies on patients or volunteers require the Informed Consent form and approval from the institution's Research Ethics Committee or relevant. The number of the research approval protocol by the Research Ethics Committee must be documented in the paper.

Appropriate consents, permissions and releases must be obtained whenever an author wishes to include case details, personal information or images of patients and any other individuals in an Elsevier publication. Written consent must be retained by the author but not be sent to the journal. When there is a photograph revealing the face and allowing the patient's identification, it is necessary to send the patient's consent document, when submitting the article, establishing the use of the photograph for scientific purposes. The author must provide copies of the consents or evidence that such consents were obtained only if specifically requested by the journal in exceptional circumstances (for instance, if a legal issue arises). For more information, see the Elsevier Policy on the Use of Images or Personal Information of Patients or Other Individuals (<https://www.elsevier.com/about/policies/patient-consent>). Unless you have written permission from the patient (or, where applicable, from close relatives), any patient's personal information included in any part of the article and in any supplementary material (including all illustrations and videos) must be removed before being sent.

Studies in humans and animals

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. The manuscript should be in line with the [Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#) and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms [sex and gender](#) should be used correctly.

The author should ensure that the manuscript contains a statement that all procedures were performed in compliance with relevant laws and institutional guidelines and have been approved by the appropriate institutional committee(s). This statement should contain the date and reference number of the ethical approval(s) obtained. Authors should also include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

The journal will not accept manuscripts that contain data derived from unethically sourced organs or tissue, including from executed prisoners or prisoners of conscience, consistent with recommendations by [Global Rights Compliance on Mitigating Human Rights Risks in Transplantation Medicine](#). For all studies that use human organs or tissues authors must provide sufficient evidence that they were procured in line with [WHO Guiding Principles on Human Cell, Tissue and Organ Transplantation](#). The source of the organs or tissues used in clinical research must be transparent and traceable. Authors of manuscripts describing organ transplantation must additionally declare within the manuscript:

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2. that organs/tissues were not sourced from executed prisoners or prisoners of conscience.

All animal experiments should comply with the [ARRIVE guidelines](#) and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, [EU Directive 2010/63/EU for animal experiments](#), or the National Research Council's [Guide for the Care and Use of Laboratory Animals](#) and the authors should clearly indicate in the manuscript that such guidelines have been followed. The sex of animals must be indicated, and where appropriate, the influence (or association) of sex on the results of the study.

Declaration of competing interest

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors should complete the declaration of competing interest statement using [this template](#) and upload to the submission system at the Attach/Upload Files step. **Note: Please do not convert the .docx template to another file type. Author signatures are not required.** If there are no interests to declare, please choose the first option in the template. Please also indicate if the study received any funding.

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In case of acceptance and publication of the article at ABD, it is the authors' responsibility to update the record on the preprint server, informing the complete reference of the publication in the journal.

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Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability or health condition; and use inclusive language throughout. Authors should ensure that writing is free from bias, stereotypes, slang, reference to dominant culture and/or cultural assumptions. We advise to seek gender neutrality by using plural nouns ("clinicians, patients/clients") as default/wherever possible to avoid using "he, she," or "he/she." We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, sexual orientation, disability or health condition unless they are relevant and valid. When coding terminology is used, we recommend to avoid offensive or exclusionary terms such as "master", "slave", "blacklist" and "whitelist". We suggest using alternatives that are more appropriate and (self-) explanatory such as "primary", "secondary", "blocklist" and "allowlist". These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

Reporting sex- and gender-based analyses

Reporting guidance

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 [Sex and Gender Equity in Research \(SAGER\) guidelines](#) and the [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 women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous--thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the [resources on this page](#) offer further insight around sex and gender in research studies.

Contributors

Each author is required to declare their individual contribution to the article on the Title Page. All authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure. More info can be found in the section "Authorship".

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.

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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

Double-blind review

This journal uses double-blind review, which means the identities of the authors are concealed from the reviewers, and vice versa. [More information](#) is available on our website. To facilitate this, please include the following separately:

Title page (with author details): This should include the title, authors' names, affiliations, ORCID iDs, individual contribution of each author, acknowledgements and any Declaration of Interest statement and

financial support, and a complete address for the corresponding author including an e-mail address.

Blinded manuscript (no author details): The main body of the paper (including the references, figures, tables and any acknowledgements) should not include any identifying information, such as the authors' names or affiliations. If there is any mention to the institution or place where the study was conducted in the manuscript, it must be replaced by "XXX".

Use of word processing software

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](#)). 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

Please check the "Types of paper" section for more information on the structure of each article type published by Anais Brasileiros de Dermatologia.

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'.

Essential title page information

- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **Author names and affiliations, including ORCID iD.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. List each author affiliation followed by city, state and country. Author's positions/roles in their institutes will not be published. Indicate all affiliations with a lower-case superscript letter immediately after the author listing 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. The e-mail address and ORCID iD of each one of the authors must be inserted in the submission system. If an author does not have an ORCID iD, it can be registered at <https://orcid.org/register>.
- Please inform, on the Title Page, whether there is any conflict of interests or financial support. The name of the institution where the study was conducted should also be presented on Title Page (including city, state and country).
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• **Author's contributions.** Each author must inform an accurate and detailed description of their diverse contributions to the published work. Please check the Authorship section.

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. Please check the "Types of paper" section for more information on abstract's parameters for each article type. The abstract must be sent alongside the manuscript without mentioning the institution where the study was conducted.

Keywords

Immediately after the abstract, provide a minimum of 3 and a maximum of 7 keywords, avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). These keywords will be used for indexing purposes. Please choose keywords that are included in the Medical Subject Headings (MeSH), of Index Medicus, available at www.nlm.nih.gov/mesh or in the Descriptors in Health Sciences (DeCS), of Bireme, available at the URL <http://decs.bvs.br>.

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. Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible.

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.). You will need to send a document of agreement signed by the acknowledged person.

Formatting of funding sources

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

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

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2. Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology, 4th ed. St. Louis: Mosby;2002.

Book chapter:

3. Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. The genetic basis of human cancer. New York: McGraw-Hill; 2002. p. 93-113.

Dissertations or theses:

4. Borkowski MM. Infant sleep and feeding: a telephone survey of Hispanic Americans [dissertation]. Mount Pleasant (MI): Central Michigan University; 2002.

Homepage or Website:

5. eatright.org [Internet]. Chicago: Academy of Nutrition and Dietetics; c2016 [cited 2016 Dec 27]. Available from: <https://www.eatright.org/>.

Preprints and in press:

6. Tian D, Araki H, Stahl E, Bergelson J, Kreitman M. Signature of balancing selection in Arabidopsis. Proc Natl Acad Sci U S A. Forthcoming 2002.

7. Alvarez R. Near optimal neural network estimator for spectral x-ray photon counting data with pileup. arXiv:1702.01006v1 [Preprint]. 2017 [cited 2017 Feb 9]: [11 p.]. Available from: <https://arxiv.org/abs/1702.01006>

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