

## **Instructions to Authors for Submission of Articles**

### **AIMS AND SCOPE**

Homœopathic Links is dedicated to linking different views, knowledge, and people in homœopathy from around the world. It aims to give information that is reliable, inspiring, educational and innovative to all its readers.

### **EDITORIAL POLICY**

Submission of a manuscript to Homœopathic Links implies that it represents original research not previously published and that it is not being considered for publication elsewhere.

The corresponding author must declare that the manuscript is submitted on behalf of all authors. With the acceptance of a manuscript, the publishers acquire the exclusive rights of translation, of duplication by photocopy, or similar methods, and of electronic data processing.

### **SUBMISSION OF MANUSCRIPTS**

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Manuscripts must be written in English and should be made available electronically. Please send discs or an e-mail with the manuscript attached to the editor's address above. Industry-standard text processors should be used and the operating system, program, and version numbers should be indicated on the diskette. Please save your file in the standard format of your text processor and in one or more exchange formats (for example, \*.txt, \*.rtf). If possible, the "endnote" function of the text processor should be used for the management of references. Figure legends and tables should be listed at the end of the document. Please save figures and tables as separate files. They should not be integrated into the text document. The following graphic file formats should be used:

- For coloured and black-and-white bitmaps: \*.eps, \*.tif, \*.jpg, \*.wmf (resolution: 300 dpi).
- For diagrams and line drawings: \*.eps (resolution: 800 dpi).

Included with each article should be an abstract of approximately 150 words and three to four keywords. Each manuscript must contain the title of the manuscript, authors' name and full address, including e-mail-address and telephone and fax number of the corresponding author.

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Authors must obtain permission to reproduce all maps, diagrams, figures and photographs. As a rule it is necessary to obtain permission for single passages of prose exceeding 250 words, or scattered passages totalling more than 400 words from any one work. Please supply the publisher with full information for all work cited, including author, dates published, publisher, and page references.

Patient's or, where appropriate, parents' consent must be obtained to use photographs of patients.

### **PAGE PROOFS**

Page proofs will be sent to the corresponding author for proof reading as a PDF file. Proof reading is for typesetting errors only. At this stage manuscripts cannot be changed. Alterations made in galley proofs, other than the correction of printer's errors, may be charged to the author. The galley proofs should be returned to the address of the editors within a week so that the publication is not delayed.

### **GENERAL INFORMATION**

Names (i.e., first and last names) should be written in italics (Samuel Hahnemann) upon first citation and thereafter in normal font style (Samuel Hahnemann). Unabbreviated homoeopathic remedies mentioned in the text should likewise be written in italics. Passages that are to be highlighted should be written in bold typescript. Add sub-heading where possible and structure the text as well as possible.

### **REFERENCES**

References should be numbered in the order in which they are cited in the text [1].[2].[3]. .... and the list of references should be arranged consecutively according to the numbers in the text.

For papers, a maximum of 20 references is suggested.

#### **Examples:**

References from books:

Name of author(s) followed by initial(s) (if more than six authors give the first three and add et al), chapter title, name and initial(s) of editor(s), full title of the book, volume, edition, place of publication, publisher, year of publication, page number or range.

[1] Bradford TL: Index to Homoeopathic Provings. Philadelphia: Boericke & Tafel; 1901: 305 - 320. [2] Klein L: Clinical Focus Guide to Homeopathic Remedies, Vol. 1. New York: Luninos Homeopathic Courses; 2003: 35-39. [3] Hahnemann S: Organon of medicine, 6th ed. New Delhi: B. Jain Publishers; 1970: 63 - 68.

References from book chapters:

[1] McMichael DF: Mollusks - Classification, distribution, venoms apparatus and venoms, symptomatology of stings. In: Bucherl W and Buckley EE (eds): Venomous Animals and their Venoms, Vol III Venomous Invertebrates. New York: Academic Press Inc; 1971: 373-393.

References from journals:

Name of author(s) followed by initial(s) (if more than six authors, give the first three and add et al), full title of paper, abbreviated title of the journal, year of publication, volume number, page number(s).

[1] Vickers AJ: Clinical trials of homoeopathy and placebo: analysis of a scientific debate. J Altern Complement Med 2000; 6 (1): 49-56.  
[2] Walach H, Van Asseldonk T, Bourkas P, et al: Electric measurement of ultra-high dilutions - a blinded controlled experiment. Br Hom J 1998; 87: 3-12.

## **TABLES AND FIGURES**

Tables and figures must be referred to in the text by Arabic numerals.

## **ABBREVIATIONS**

Abbreviations should generally be used sparingly. Non-standard abbreviations must be defined in the text following their first use.

Abbreviations of homoeopathic remedies should be avoided unless in repertorisations. In those cases abbreviations used in common repertories such as "Kent, Repertory", "van Zandvoort, Complete Repertory/Millennium Repertory/Repertorium Universale" and "Schroyens, Synthesis" should be applied.

## **POTENCIES**

Potencies should be indicated as follows: 6X, 30C, MK, 10 MK, Q1

## **CASE REPORTS**

- Cases should be well presented. They need to be concise as well as justified.
- Give all relevant data, including information of the patient's age, gender, relationships, occupation, follow-up and duration of illness and treatment.
- Give a full description of the complaints, including modalities, aetiology, etc., as well as the allopathic diagnosis and medical treatment.
- Give your observation of the patient, appearance, and behaviour.
- State relevant symptoms with related rubrics, that made you choose the remedy and explain your choice.
- Explain differential diagnosis.
- The follow-up should include a detailed description and reason for arriving at remedy, potency, and repetition.
- When changing the remedy, give reasoning.
- Add rubrics and references to repertoria.
- Give contemplation and assessment of the case.
- The follow-up time should be a minimum of one, but preferably two years

## **EDITORIAL CONTACTS**

Should you have any further questions, please contact the Editor or Thieme Medical Publishers:

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