

Hypertension

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SUBJECT: Publication of Proceedings of 63rd Council for High Blood Pressure Research, September 23-26, 2009, InterContinental Chicago O'Hare Hotel, Chicago, IL

Plans are underway to publish the Proceedings of the 63rd High Blood Pressure Research Council. The editors of *Hypertension* welcome the opportunity to consider your manuscript for publication. All poster and oral presentations selected for the program are eligible for publication in a special issue of *Hypertension*.

In an effort to publish the Proceedings of the meeting in a timely manner, manuscript submissions will be via Online only, beginning **September 10, 2009** and ending **October 10, 2009**, by **4:00 p.m. CDT**. Instructions for submission are attached.

For original research papers, only new information (i.e., previously unpublished methods, data, or conclusions) can be considered for publication. In addition, the paper cannot have been submitted for publication or be in press elsewhere, in whole or in part. Authors in doubt should submit copies of work in question with their papers.

Manuscripts must follow the journal style explained in the condensed instructions to authors (enclosed). Manuscript submissions **MUST BE COMPLETE** with all the necessary files submitted online (i.e., **word doc, electronic figure files, any in press articles submitted as a supplemental file, etc.**). Since we must follow the guidelines for rapid publication, submissions that do not comply with these requirements will not be published in the supplement.

It is important that manuscripts are final at the time of submission. Papers are sent for review immediately. Therefore, revised submissions received after the deadline cannot be published in this special issue. Authors are reminded that manuscripts requiring extensive revisions or additional experiments cannot be published in the Proceedings. If extensive revisions are required for the preparation of your manuscript, we will be glad to consider your manuscript as a regular submission to *Hypertension*. This procedure is necessary to prevent delay of the accepted papers of other participants from timely publication.

Manuscripts should not exceed **5 journal pages (approximately 5000 total words including figures and tables)**. Manuscripts accepted for publication that exceed 5 journal pages will be assessed a cost of \$425.00 for each page over the 5 journal page limit, the cost which is assessed to the Council by the publisher.

Please contact our office if you have any questions regarding manuscript submissions. We look forward to reviewing your manuscripts, and greatly appreciate the opportunity to consider your work for publication in *Hypertension*.

Sincerely,



John E. Hall, Ph.D.
Editor

63rd High Blood Pressure Research Council
Hypertension's Instructions to Contributors

When you enter your title in the online system, please make sure that **CHBPR** is placed in front of your title. Also, please make sure to enter your submission via the “Submit Supplement Paper” link in the author area and **NOT** the regular “Submit New Paper” link.

Manuscripts should not exceed 5000 words including title page, abstract, references, legends, tables, and figures.

We will accept submissions of manuscripts On-Line at <http://submit-hyper.ahajournals.org> . Manuscripts must be submitted online starting **September 10, 2009** through **October 10, 2009, 4:00 p.m. CDT**.

Instructions for Manuscripts

- Manuscripts must be typed, double-spaced using a 12-point font, including references, figure legends, and tables, on one side of the page only.
- Leave 1-inch margins on all sides. Do not use proportional spacing or justified margins.
- Number every page except the title page, including figures, tables, and references. Cite each figure and table in text in numerical order.
- Assemble manuscripts in this order:
 1. Title page
 2. Abstract
 3. Text, including Introduction, Methods, Results, Discussion, and Perspectives
 4. Acknowledgments
 5. Source(s) of Funding
 6. Conflict(s) of Interest/Disclosure(s)
 7. References
 8. Figure Legends
 9. Tables
 10. Figures
- Cite each reference in text in numerical order and list in the References section. In-text reference numbers may be repeated but not omitted.
- Use SI units of measure in all manuscripts. For example, molar (M) should be changed to mol/L; mg/dL to mmol/L; and cm to mm. Units of measure previously reported as percentages (ie, hematocrit) are expressed as a decimal fraction. Measurements currently not converted to SI units in biomedical applications are blood and oxygen pressures, enzyme activity, H⁺ concentration, temperature, and volume. The SI unit should be used in text, followed by the conventionally used measurement in parentheses.

- For style, consult the American Medical Association Manual of Style, 9th ed, Baltimore, MD, Williams & Wilkins, 1998.
- Please provide sex-specific and/or racial/ethnic-specific data, when appropriate, in describing outcomes of epidemiologic analyses or clinical trials; or specifically state that no sex-based or racial/ethnic-based differences were present. See the [Uniform Requirements \(http://www.icmje.org\)](http://www.icmje.org) for more details.
- Consult current issues of *Hypertension* for examples of format.

Guidelines for Clinical Trials

- In accordance with the [Clinical Trial Registration Statement from the International Committee of Medical Journal Editors \(ICMJE\) \(http://circ.ahajournals.org/cgi/content/full/111/10/1337\)](http://circ.ahajournals.org/cgi/content/full/111/10/1337) (*Circulation*. 2005;111:1337-1338.), all clinical trials submitted for publication in Hypertension must be registered in a public trials registry at or before the onset of participant enrollment. This requirement applies to all clinical trials that begin enrollment after July 1, 2005.
- Research is considered to be a clinical trial if it involves prospective assignment of human subjects to an intervention or comparison group to study the relation between a medical intervention and a health outcome. Studies that are designed for other purposes, such as to study pharmacokinetics or major toxicity studies (e.g., phase 1 trials) are exempt.
- The registry must be accessible to the public at no charge, searchable, open to all prospective registrants, and managed by a not-for-profit organization. The registry must include the following information: a unique identifying number, a statement of the intervention(s), study hypothesis, definition of primary and secondary outcome measurements, eligibility criteria, target number of subjects, funding source, contact information for the principal investigator, and key dates (registration date, start date, and completion date). The registries listed below are approved by the ICMJE:
 1. [United States National Library of Medicine \(http://www.clinicaltrials.gov\)](http://www.clinicaltrials.gov)
 2. [International Standard Randomized Controlled Trial Number \(ISRCTN\) \(http://isrctn.org\)](http://isrctn.org)
 3. [University Hospital Medical Information Network \(UMIN\) \(http://www.umin.ac.jp/ctr/index/htm\)](http://www.umin.ac.jp/ctr/index/htm)
 4. [Australian Clinical Trials Registry \(ACTR\) \(http://www.actr.org.au\)](http://www.actr.org.au)
 5. [Netherlands Trial Register \(http://www.trialregister.nl/trialreg/index.asp\)](http://www.trialregister.nl/trialreg/index.asp)

Clinical trials maybe listed with Other registries, but these registries must meet the above-mentioned requirements.

- The authors will be requested to provide the exact URL and unique identification number for the trial registration at the time of submission. This information will be published in a footnote on the first page of the article.
- Clinical trial reports should also comply with the Consolidated Standards of Reporting Trials ([CONSORT\) \(http://www.consort-statement.org/\)](http://www.consort-statement.org/) and include a flow diagram presenting the enrollment, intervention allocation, follow-up, and data analysis with number of subjects for each. Please also refer specifically to the CONSORT Checklist of items to include when reporting a randomized clinical trial.

General Instructions for Preparing a Manuscript

1. Title Page (Page 1, but do not number)

- Full title of manuscript, in capital letters, limited to 120 characters total.
- Authors' full names and affiliations
- A short title (total characters must not exceed 50, including spaces) to be typeset at the top of the journal page
- Word count of manuscript, including references, figures, legends, word count of abstract, and total number of figures
- The full name, title, and complete address for corresponding author, including street and post office box as well as telephone and fax numbers, and email address

2. Abstract

- Maximum abstract length is 250 words
- Do not use acronyms or abbreviations
- Do not use subheadings
- Do not cite references
- The abstract should include the rationale for the study, a brief description of methods and presentation of significant results, and a succinct interpretation of the data.
- Provide five to seven key words for your manuscript, using Index Medicus as a guide

3. Text

Abbreviations. Abbreviations should be defined at the first mention in the text.

Methods section. The methods section should provide sufficient detail for the experiments to be reproduced.

- **Materials and Data Availability:** To allow others to replicate and build on work published in *Hypertension*, authors should make materials, data, and associated protocols available to readers or list the primary source of materials. Authors must disclose upon submission of the manuscript any restrictions on the availability of materials or information.

Authors should make Unique Materials (e.g., cloned DNAs; antibodies; bacterial or animal cells; viruses; and computer programs) promptly available on request by qualified researchers for their own use. It is reasonable for authors to charge a modest amount to cover the cost of preparing and shipping the requested material and some materials may require a Materials Transfer Agreement between institutions.

- **Studies in Experimental Animals:** Indicate that the study was approved by an institutional review committee. All studies in animals should be conducted in accordance

with the [National Institutes of Health \(NIH\) Guide for the Care and Use of Laboratory Animals](http://grants.nih.gov/grants/olaw/references/phspol.htm) (<http://grants.nih.gov/grants/olaw/references/phspol.htm>), or the equivalent. The species, strain, number used, and other relevant characteristics of the animals should be stated. When describing surgical procedures, identify the pre-anesthetic and anesthetic agents used and state the amount or concentration and the route and frequency of administration for each. The use of paralytic agents, such as curare or succinylcholine, is not an acceptable substitute for anesthetics. For other invasive procedures, report the analgesic or tranquilizing drugs used. If none was used, provide justification for such exclusion. Generic names of drugs must be given.

- **Studies in Humans:** Indicate that the study was approved by an institutional review committee and that the subjects gave informed consent. All studies that involve the use of humans must adhere to the principles of the [Declaration of Helsinki](http://www.wma.net/e/policy/b3.htm) (<http://www.wma.net/e/policy/b3.htm>) and [Title 45, U.S. Code of Federal Regulations, Part 46, Protection of Human Subjects, Revised November 13, 2001, effective December 13, 2001](http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm) (<http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm>). Describe the characteristics of human subjects or patients and indicate that the procedures followed were in accordance with institutional guidelines.
- **Blood Pressure Methods for Human Studies:** Blood pressure measurement methods should be described in detail in the text or by reference. Information should include number of readings, instrument type(s), cuff size(s), arm position, posture, and observer training.
- **Genomic and Proteomic Studies:** All papers reporting gene expression profiling data must comply with the Minimum Information About Microarray Data Experiments (MIAME) (http://www.mged.org/Workgroups/MIAME/miame_checklist.html) standard. Authors of papers that include genomic, proteomic, or other high-throughput data are required to make their data easily accessible for the reviewers and the editors during the review process. You may submit your data to the NCBI gene expression and hybridization array data repository (GEO) (<http://www.ncbi.nlm.nih.gov/geo>) and provide the GEO accession number, or you may provide a link to a secure or publicly accessible website which hosts the data. Prior to publication, the data must be submitted and an accession number obtained. Access to the information in the database must be available at the time of publication. GEO has a web-based submission route, suitable for a small number of samples, or a batch submission tool (called SOFT). Submission [FAQ](http://www.ncbi.nlm.nih.gov/projects/geo/info/faq.html) (<http://www.ncbi.nlm.nih.gov/projects/geo/info/faq.html>).
- **Guidelines for Protein and Nucleic Acid Sequences:** Newly reported nucleotide or protein sequences must be deposited in GenBank or EMBL databases, and an accession number must be obtained. Access to the information in the database must be available at the time of publication. Authors are responsible for arranging release of data at the time of publication. The authors must also provide a statement in the manuscript that this sequence has been scanned against the database and all sequences with significant relatedness to the new sequence identified (and their accession numbers included in the text of the manuscript).

1. [GenBank](http://www.ncbi.nlm.nih.gov/Genbank/index.html) (<http://www.ncbi.nlm.nih.gov/Genbank/index.html>)

GenBank Submissions, National Center for Biotechnology Information, 8600 Rockville Pike, Building 38A, Room 8N-805, Bethesda, MD 20894, Tel: (301) 496-2475

2. [EMBL Nucleotide Sequence Submissions \(http://www.ebi.ac.uk\)](http://www.ebi.ac.uk)

European Bioinformatics Institute, Hinxton Hall, Hinxton, Cambridge CB10 1SD, UK, Tel.: 44-1223-494401; Fax: 44-1223-494472; e-mail: support@ebi.ac.uk

3. [DNA Data Bank of Japan \(http://www.ddbj.nig.ac.jp\)](http://www.ddbj.nig.ac.jp)

Center for Information Biology, National Institute of Genetics, Mishima, Shizuoka, 411, Japan, Tel.: 81-559-81-6853; Fax: 81-559-81-6849

- Submission to any data bank is sufficient to ensure entry in all.

- **Guidelines for Human Phenotype-Genotype Association or Linkage Studies:**

A. Reporting issues.

1. Report process for selecting genes and SNPs.
2. Report Hardy-Weinberg statistics or p-values and method of calculating same.
3. Refer to existing public domain websites for the Human Gene Ontology name and the rs number for SNPs.

- <http://www.gene.ucl.ac.uk/nomenclature/>

- <http://www.ncbi.nlm.nih.gov/projects/SNP/>

- <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=Snp>

4. Describe genotyping methods. If numerous primers have been used, please include them in an online supplement.

B. False positive and false negative concerns. Given well-described problems with both false positive and false negative associations, phenotype-genotype association studies should meet some or all of the criteria below:

1. Phenotype is clearly defined, is heritable, and if a quantitative phenotype is reported, reproducibility data are provided or referenced.
2. The sample size is adequate to detect a SNP or haplotype with a modest effect. For genotype-trait associations, provide an estimate of the effect size that could be detected with power 0.80 or higher with the allele frequency and sample size reported.
3. Since multiple statistical testing methods are frequently used in genotyping-phenotyping studies, please include specifics of the primary model(s) tested. Non-essential secondary models may be published as electronic data supplements. Clinically relevant confounders should be included in multivariable models or residuals.

C. Review criteria for human linkage studies. Manuscripts should include the following:

1. Identifying plausible candidate genes under the linkage peak.
2. Follow-up fine mapping to narrow the region of linkage, &/or genotyping some of the candidate genes under the linkage peak.
3. Replication data from another sample.

- **Guidelines for Studies on Diagnostic Tests:** For information regarding the Standards for Reporting of Diagnostic Accuracy (STARD) go to [Clinical Chemistry.2003;49:7-18.](http://www.clinchem.org/2003/49/7-18)

(http://www.consort-statement.org/Initiatives/stardClinical_Chemistry_background.pdf) or *Ann of Intern Med.* 2003;138:W1-W12. (<http://www.annals.org/cgi/content/full/138/1/W1>)

- **Drugs and Reagents:** Give generic rather than trademark names of drugs. The generic chemical identification of all investigational drugs must be provided. The complete name and location of the manufacturer must be supplied for all reagents, equipment, and devices used in the Methods.
- **Statistics:** A subsection on statistics should be included in the Methods section and the measures of variance, such as standard deviation or standard error, should be indicated.
- Methods should be limited to essential new information. To save space for the authors and the journal, if methods have been previously published, the author may refer to that paper and submit copies of that paper as reference material.

The following information should be included as an **Online Data Supplement:**

- For animals used in experiments, state the species, strain, number used, and other pertinent descriptive characteristics.
- For human subjects or patients, describe their characteristics.
- When describing surgical procedures on animals, identify the pre-anesthetic and anesthetic agents used and state the amount or concentration and the route and frequency of administration for each. The use of paralytic agents, such as curare or succinylcholine, is not an acceptable substitute for anesthetics. For other invasive procedures on animals, report the analgesic or tranquilizing drugs used. If none was used, provide justification for such exclusion. Generic names of drugs must be given.
- Manuscripts that describe studies on humans must indicate that the study was approved by an institutional review committee and that the subjects gave informed consent. Reports of studies on both animals and humans must indicate that the procedures followed were in accordance with institutional guidelines. To save space for the authors and the journal, if methods have been previously published, the author may refer to that paper and submit copies of that paper as reference material.

Discussion. This section should not be used to restate the results but rather to illuminate and place into perspective the results. Excessive discussion and reiteration of points that are obvious from the results are discouraged.

"Perspectives". Authors should include a brief (<250) "Perspectives" section at the end of the Discussion Section. The "Perspectives" section should be clearly labeled with a separate heading. The purpose of "Perspectives" is to indicate the broad implications of the study, and to permit reasonable speculation on the overall importance and future directions of the work. Such perspectives should not replace the conclusions drawn from the study and should be limited to one paragraph. This section should, however, replace the "In summary..." paragraph that is often placed at the end of the discussion.

4. **Acknowledgments**

The Acknowledgments section lists substantive contributions of individuals. The Editorial Office must receive written, signed consent from each person recognized in the Acknowledgments to be

mentioned in the article, because acknowledgment can imply endorsement of data and conclusions.

5. Sources of Funding

Authors **must** list all sources of support for research in this section.

6. Conflict(s) of Interest/Disclosure(s) Statement

Authors **must** disclose any and all relationships that could be perceived as real or apparent conflict(s) of interest as a **FOOTNOTE** after the Sources of Funding section. Conflict-of-interest/disclosure will be published as a footnote to the accepted article. This pertains to relationships with pharmaceutical companies, biomedical device manufacturers, or other corporations whose products or services are related to the subject matter of the article. Such relationships include, but are not limited to, employment by an industrial concern, ownership of stock, membership on a standing advisory council or committee, being on the board of directors, or being publicly associated with the company or its products. Other areas of real or perceived conflict of interest related to the subject of the article could include receiving honoraria or consulting fees or receiving grants or funds from such corporations or individuals representing such corporations.

If no author has anything to disclose, please list "None".

7. References

- References must conform to the journal's style -- consult the American Medical Association Manual of Style, 9th ed, Baltimore, MD, Williams & Wilkins, 1998.
- Accuracy of reference data is the author's responsibility. Verify all entries against original sources, especially journal titles, inclusive page numbers, publication dates, accents, diacritical marks, and spelling in languages other than English.
- All references must be double-spaced.
- All authors must be listed in references. Shortened lists of author names followed by "et al" must be replaced with complete information.
- Cite references in numerical order according to first mention in text.
- Personal communications, unpublished observations, and submitted manuscripts must be cited in the text as "(authors' full names, unpublished data, year)."
- Abstracts may be cited only if they are the sole source and must be identified in the reference as "Abstract."
- "In press" citations must have been accepted for publication and the name of the journal or book publisher included.

8. Tables

- Each table must begin on a separate page, double-spaced. The table number must be in Arabic numerals followed by a period and a brief informative title.
- Use same size type as in text.

- Supply a brief heading for each column.
- Indicate footnotes in tables by symbols in this order: *, †, ‡, §, ||, ¶, #, **.
- Do not use vertical lines in tables. Use horizontal lines above and below the column headings and at the bottom of the table only. Use extra space to delineate sections within the table.
- Do not duplicate data in figures and tables.
- Define acronyms and abbreviations in a separate listing.

(Please note that a table with 3 columns and 10 rows is approximately 100 words.)

9. Figures and Legends

- Figures may be black and white line drawings, graphs, color illustrations, or halftones (gel blots/stains).
- Authors are responsible for the cost of printing color illustrations.
- Flaws will not be corrected.
- Figure parts should be clearly labeled. Letters, symbols, arrows, etc must be uniform in size and style within each figure, and when possible between figures. We recommend that you use either 12 pt Arial Bold font or 14 pt Times New Roman Bold font.
- Avoid headings on the figure when possible. Heading information should appear in the figure legend.
- Line art should not contain very thin lines, which are hard to reproduce.
- Supply a scale bar with photomicrographs.
- Provide figure legends on a separate page, double-spaced.
- If there are abbreviations or symbols in the figures, they must be defined in the figure or the figure legend.
- Limit white space between all panels and between panels and panel labels.
- Electronic source files of figures may be submitted in a pdf format for initial submission of a manuscript. Electronic source files of figures for subsequent submissions must follow the guidelines set by the publishers.

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The use of digital media for image acquisition and processing introduces the potential for inadvertent distortion of data. To prevent such distortion, the following guiding principles should be used:

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 4. When submitting revised final figures upon conditional acceptance, authors may be asked to submit original, unprocessed images.
 5. All image acquisition tools and image processing software packages used should be listed. Deviations from the above, including nonlinear adjustments, must be indicated in the figure legend along with a description of the processing software used.

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(Please note that a single bar graph is approximately 150 words.)

10. Cover Figures

The editors encourage submission of color images for consideration as potential cover figures. These may be uploaded along with a figure legend as a supplemental file when a revised manuscript is submitted. Please make sure to clearly label this as a cover figure.

- Cover figures should illustrate a major finding or concept and be associated with the general topic of the article, or they may be altered/enhanced versions of an original figure within the manuscript.
- A photograph or diagram is appropriate, but complex flow charts are not suitable.
- A very brief caption should be included.
- Cover figure submissions must follow the same guidelines as original figure submissions attached to manuscripts (see "Figures and Legends").

11. Online Supplements

This optional section provides an opportunity for authors to present supporting materials to the manuscript. The manuscript appears both in the print version and online, whereas Online Supplements are independent from the manuscript and appear only online. Online Supplements undergo peer review and therefore must be submitted simultaneously with original submissions.

Online Supplements may consist of any of the following, in any combination: the expanded materials and methods; additional figures and supporting information; additional tables and supporting information; and, video files.

Material to be published as an online only supplement must be uploaded online or supplied on a separate diskette in an IBM PC-compatible format, preferably with either .jpg or .pdf file extensions. The Editorial Office is not responsible for converting files to a suitable format or for extracting data supplement material from the print manuscript disk. Please number items to be published in print using the Arabic system (1 to 5) and items to be published online only using the

Roman system (I to V). When referring to online-only material in the print version of the manuscript, use the phrase "please see <http://hyper.ahajournals.org>." Data Supplements appear only online and will not appear in reprints of the article.

If citations are made in the Online Supplement, the Online Supplement must contain its own independent Reference Section with references numbered sequentially, beginning with reference 1, even if some of these references duplicate those in the print version.

The Table of Contents of *Hypertension* highlights articles that contain Online Supplements by a paperclip icon and/or video camera icon, and lists the URL where supplements can be accessed.

12. Deposits of Manuscripts to Repositories such as PubMed Central

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- As of May 2, 2005, the NIH has requested that manuscripts funded in whole or part by NIH funds be deposited in PubMedCentral (PMC). The manuscript to be deposited is the "preprint" form of the manuscript. When authors deposit their manuscript on the PMC site, authors must designate when the manuscript will be available in the PMC repository. The American Heart Association permits, and requires, that when submitting the manuscript to PMC that authors designate a 6-month delay from the date of final publication by The American Heart Association.
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1. Authorship Responsibility, Criteria, and Contributions.

Each author should meet all criteria below (A, B, and C) and should indicate general and specific contributions by reading the criteria and checking the appropriate lines.

_____ A. I certify these **three** things:

- The manuscript represents valid work and neither it nor another one that that I have written with substantially similar content has been published or is being considered for publication elsewhere, except as described in an attachment.
- If asked, I will provide or fully cooperate in obtaining and providing the data on which the manuscript is based so the editors or their assignees can examine it.
- For papers with more than 1 author, I agree to allow the corresponding author to
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 - review the edited manuscript and proof, and
 - make decisions about releasing manuscript information to the media, federal agencies, or both.

If I am the only author, I will be the corresponding author and agree to handle these responsibilities.

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_____ Yes _____ No

C. I have, or a coauthor has, had sufficient access to the data to verify the manuscript’s scientific integrity.
_____ Yes _____ No

D. I have participated sufficiently in the manuscript to take public responsibility for (check only one)
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- _____ acquired the data
- _____ analyzed and interpreted the data
- _____ performed statistical analysis
- _____ handled funding and supervision
- _____ drafted the manuscript
- _____ made critical revision of the manuscript for important intellectual content
- _____ other (specify)

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