

## 《胃肠病学》投稿须知

为确保稿件质量和杂志编辑工作规范化,请作者在撰稿和投稿前,仔细阅读本投稿须知,并严格执行。所有文稿将由 2~3 位专家审稿。凡不符合要求者,一律退稿。本投稿须知可自《胃肠病学》网上投稿中心下载。

### 一、作者责任

在稿件递交之前,作者应了解和遵守生物医学杂志统一的要求([www.icmje.org](http://www.icmje.org)),主要为著作者、利益冲突、患者隐私权的保护、重复刊登、赞助、责任等。

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作者须对文中的方法部分加以陈述:研究计划的方案应被相应的学院伦理组成委员会核准,须符合世界医学协会 1995 年赫尔辛基宣言(2000 年在爱丁堡修订)(<http://www.wma.net/e/policy/b3.htm>);所有研究须获得受试人的书面同意;包括动物在内的任何实验应符合国家或学会有关研究中使用动物的指南。如不能满足上述要求,将可能被拒稿。

### 二、征稿范围

本刊开设的栏目有述评、特约文稿、临床实践、论著(基础与临床)、短篇论著、综述、讲座、会议纪要、共识与指南、病例分析与个案报道等,欢迎有关胃肠病学以及相关学科基础和临床研究的论著、短篇论著、综述、病例分析与个案报道、专题讲座、学术争鸣、国内外信息等稿件。

### 三、稿件要求和注意事项

1. 文稿:来稿须先经所在单位审核,并附单位正式推荐信。推荐信应对稿件的真实性、是否涉及保密、署名有无争议、是否侵权和有无一稿两投等事项加以说明。

来稿应具有科学性、真实性、逻辑性、实用性和创新性。重点突出,论点鲜明,层次清晰,数据可靠,论据充分,文字简练,语句通顺,标点正确,用字规范,避免文、图、表重复。日文字请勿与中文混淆,简化字以《新华字典》和《现代汉语词典》为准,切勿自造异字。

切勿一稿两投,如经发现,后果自负。采用网上(存盘方式为 Word)方式投稿时,所涉及的图片须使用原件,可采用 Winzip 对文件适当压缩。

来稿第 1 页须写明中文文题、作者姓名、单位、邮政编码、通信作者和联系方式。

本刊将优先发表获得省(部)、市级及以上的获奖课题论文(请注明基金名称和资助号),并优先发表国家、省(部)、市级科研基金资助课题论文(请注明基金名称、编号)以及在全国性学术会议上交流的论文,提供会议论文证书复印件。

2. 文题和作者署名:文题应简明、确切,反映文章的主题,以中文文题不超过 20 个汉字、英文文题不超过 10 个实

词为宜,尽可能不用代号和缩写,不用副题。

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英文文题、作者姓名、单位应与中文相对应(作者须全部列出,勿写 et al),实词部分,首字母须大写。

3. 摘要和关键词:基础、试验、临床和技术方法学类文稿(论著)须从第 2 页始书写中、英文摘要和关键词。

论著栏目摘要为报道性摘要,中文以 400 字左右为宜,按 5 段结构式撰写,分为背景、目的、方法、结果和结论。务必用第三人称,药品需附化学名。英文 500 个实词左右,分为 Background, Aims, Methods, Results, Conclusions,除背景和结论外,必须以第三人称过去式叙述。

关键词(Key words)3~8 个,至少 3 个,应从文题、摘要、正文中选取与本文研究或讨论的中心议题有关的词。关键词应尽量符合《医学主题词表》(使用 CMeSH 词汇)。中、英文关键词之间以“;”相隔。

英文摘要和关键词应与中文相对应,英文关键词实词部分,首字母须大写。

4. 医学名词和计量单位:论文中必须使用全国科学技术名词审定委员会公布的科技名词,并正确使用标点符号。

计量单位名称按《中华人民共和国法定计量单位》规定书写。重量应称质量( $m$ ),单位为 kg;比重应称相对密度( $d$  或  $\rho$ ),单位为“1”或  $\text{kg}/\text{cm}^3$ ;分子量应称相对分子质量( $M_r$ ),单位为“1”,常用  $u(1\ u \approx 1.660\ 540 \times 10^{-27}\ \text{kg})$ ;浓度单位为  $\text{mol}/\text{m}^3$ ,常用  $\text{mol}/\text{L}$ 、 $\text{mmol}/\text{L}$  和  $\mu\text{mol}/\text{L}$  等;ppm 为废弃使用单位,应写  $10^{-6}$ ;放射性活度( $A$ )的单位为 Bq,吸收剂量单位为 Gy。时间的表示法用国际符号,即 h(小时)、d(天)、min(分钟)和 s(秒)。月、周无统一国际符号,论文中应写汉字月、周。符号用正体书写,并注意字母的大小写,如 50 毫克/(千克·天)应写  $50\ \text{mg}/(\text{kg} \cdot \text{d})$ 。量符号必须用斜体字母(pH 例外),矢量、张量符号用黑斜体字母表示。

5. 数字和统计学符号:论文中数据应准确无误,必要时应用 SAS 或 SPSS 软件进行统计学分析。统计学术语、符号、数值修约和中英文缩略语,请按规定和标准书写,如样本的算术均数  $\bar{x}$ 、标准差  $s$ 、标准误  $s_x$ 、 $t$  检验  $t$ 、 $F$  检验  $F$ 、卡方检验  $\chi^2$ 、相关系数  $r$ 、自由度  $\nu$ 、概率  $P$  等均用斜体字母表示。 $P$  值前应给出具体检验值,如  $t$  值、 $\chi^2$  值等。

数字采用三位分节法,每 3 位空 1/4 汉字格,不用分节符号,如 5 000(不用 5,000);数值范围表示方法如下:4~6 kg,5.2%~11.3%, $4 \times 10^9 \sim 10 \times 10^9$ , $36^\circ \sim 42^\circ 18'$ , $(25.2 \pm 1.1)\ \text{mm}$ , $27\% \pm 2\%$ 。数值修约遵循“4 舍 6 入 5 看齐,奇进

偶不进”的原则,精确至小数点后 2 位。附有单位的数值相乘,按下列方式书写:4 cm×3 cm×5 cm,不应写成 4×3×5 cm<sup>3</sup>。公历世纪、年代、年、月、日、时刻和计数、计量均用阿拉伯数字。

6. 图表:图表宜少而精,设计正确,合理易懂。凡用文字已说明的问题,尽量不重复用图表。表格一律采用三线表(即顶线、栏目线和底线),如有纵向合计,可在底线上面加分界线。统计学分析结果如 *t* 值、*P* 值,可直接设计在表内或在表的底线下方注明。线条图高、宽之比为 5:7。图片大小以 12.5 cm×8.5 cm 为宜。统计图须按数据绘图。图表单列 1 页。只有一图、一表时,写图 1、表 1 即可(不写附图、附表)。一文有多图、多表时,应按其在正文中出现的次序连续编序号。

照片应清晰可辨、对比度好、层次分明,黑白、彩色照片均可。特殊情况下,也可提供黑白和彩色正片(X 线片、CT 片、幻灯片)或负片。人全脸照片需遮掩双眼,否则应提供被照者的书面同意。组织学图片应注明放大倍数和染色方法,大体标本和电子显微镜照片需标明长度标尺,如 1 cm 或 1 μm。

图表须有标题和说明(照片),另纸按序写明。照片后注明图号和上下方向,照片大小以 12.7 cm×17.8 cm 左右为宜。

7. 讨论:讨论应紧紧围绕该论文研究结果,重点在于该研究新的发现和得出的结论及观点,不要重复在结果中已叙述的内容。在讨论中可有重点、有针对性地引用前人的研究结果进行比较分析,勿作文献综述。结论要有依据,避免推测和过于笼统。

8. 缩略语:文题不使用缩略语。正文中使用缩略语应于首次出现处先叙述其全称,然后括号注出中文缩略语或英文全称及其缩略语。

9. 参考文献:参考文献限作者亲自阅读过的近期主要文献,篇数不限,以近 5 年国内外文献为主。英文参考文献应自 MEDLINE、EMBASE 和 Cochrane 图书馆检索,中文参考文献应自“中国期刊网”、“万方数据库”等检索,追寻、阅读全文后再引用其主要观点和数据。连续引用不得超过 300 字,否则需征得原作者的书面同意。勿引用内部资料、未发表观察资料和个人通信资料。已被采用但尚未刊出的稿件,可列入参考文献,但需在刊名后加方括号注明在印刷中(in press)。参考文献应按中华人民共和国国家标准 GB7714-87《文后参考文献著录规则》采用顺序编码制格式著录,文献角码依次放在文章相应部位右上角,顺序与文后参考文献表一致。参考文献表单列 1 页(Word 格式)。

西文期刊名按照 List of Journals Indexed in Index Medicus(1990)和《世界医学药学及化学期刊名称缩写手册》(中国医药科技出版社,1998)缩写。书写格式(尤请注意点号的用法)如下:

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示例:1 宋志强,柯美云,王智凤,等. 有和无重叠症状

的功能性消化不良患者中消化不良症状学和发病机制的比较研究[J]. 胃肠病学,2006,11(8):458-461.

2 Ciacci C, Sabbatini F, Cavallaro R, et al. *Helicobacter pylori* impairs iron absorption in infected individuals[J]. Dig Liver Dis, 2004, 36(7):455-460.

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示例:1 萧树东,蒯小玲. 干细胞—人类疾病治疗的新希望[M]//萧树东. 胃肠病学和肝病学—基础理论与临床进展. 上海:上海世界图书出版公司,2004:1-8.

2 Drossman DA, Corazzian E, Talley NJ, et al. Diagnostic criteria for functional gastrointestinal disorders[M]//Drossman DA, Corazzian E, Talley NJ, et al. Rome II: the functional gastrointestinal disorders: diagnosis, pathophysiology, and treatment: a multinational consensus. 2nd ed. Lawrence: Allen Press, 2000:659-668.

10. 其他类型来稿要求:短篇论著文稿需有 300 字左右的中、英文摘要和 3~8 个关键词,要求与论著相同。综述、讲座的摘要不分段,中英文各 200 字左右(为提示性摘要),关键词 3~8 个。英文要求与中文对应,包括英文文题,全部作者姓名、单位、邮编和关键词。述评和特约文稿为约稿,但接受一些高质量的自由来稿,需经他人审校后采用。病例分析与个案报道字数限 1 500 字左右。其余要求及书写格式同论著类文稿。

简讯与动态均免费发表(一般<1 000 字),可附 1~2 张图片。

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编辑部投稿系统接受稿件后,将自动产生编号并回复作者。稿件若不符合本投稿须知,将退回修改。根据《中华人民共和国著作权法》的有关规定并结合本刊实际情况,编辑部在收稿后最迟 3 个月,将通知作者是否录用或作修改。作者如欲另投他刊,请事先与编辑部联系。

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# Instructions for Authors by Chinese Journal of Gastroenterology

Chinese Journal of Gastroenterology (ISSN 1008-7125), founded in June, 1996, is a national academic journal being designed to present the latest basic scientific and clinical researches of gastroenterology in China. It is published monthly currently by the Editorial Board of Chinese Journal of Gastroenterology.

All manuscripts are peer reviewed by two or three independent expert reviewers. This journal has been included in EMBASE, CAJ-CD and SWIC currently.

To ensure the quality of articles and standardization of editing, please read these instructions carefully and abide by them strictly before writing and submitting manuscripts. All manuscripts that do not adhere to the requirements detailed in these instructions will be rejected.

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Authorship

Conflict of interest

Protection of patients' rights to privacy

Redundant or duplicate publication

Sponsorship, authorship and accountability

and provide a cover letter declaring that the content of the article has not been accepted or submitted for publication by any other journal. Authors should also declare there is not any financial interest or relationship that may pose a conflict of interest.

The cover letter must also contain an acknowledgement that all authors have contributed significantly, and that all authors are in agreement with the content of the manuscript.

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In keeping with the latest guidelines of the International Committee of Medical Journal Editors, each author's contribution to the paper is to be quantified.

The cover letter should be submitted with the manuscript.

Authors must also state within the Methods section of their article that:

the protocol for the research project has been approved by a suitably constituted Ethics Committee of the institution within which the work was undertaken and that it conforms to the provisions of the World Medical Association's Declaration of Helsinki in 1995 (as revised in Edinburgh 2000), available at <http://www.wma.net/e/policy/b3.htm>

Informed consent has been obtained for all investigations on human subjects

Any experiments involving animals conform to relevant national or institutional guidelines for animal usage in research

Failure to comply with these requirements may lead to automatic rejection of the submitted manuscript

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The columns of this journal includes editorial, commentaries, specially invited articles, clinical practice, original articles (basic and clinical science), short articles, review articles, lectures, conference summations, consensus and guidelines, case analysis and case reports.

The editorial office will acknowledge the receipt of all manuscripts. The following contributions will be welcomed for publication: original articles, short articles, review articles, case analysis and case reports, lectures on specific topics, discussions on academic controversies, news and information, etc.

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Before submitting, authors should confirm that similar article has not been published in this journal. Once accepted for review, the manuscript must not be submitted elsewhere, otherwise, the author will be responsible for any problems arising.

Every manuscript must be approved by the authors' departments or institutions by formal recommendation, which declares the authenticity of the manuscript, no secrecy, and no dispute about signatories, no breaking of copyrights, and no submission to other journals.

The work reported in the manuscripts should be scientifically sound, authentic, logical, practical and innovative. Manuscripts should have outstanding emphases, sharp-cut contentions, clear arrangements, reliable data, and sufficient evidences, and written with concise words, flowing sentences, correct punctuations and normal usage of words. Duplicates of information in the text, figures and tables should be avoided. Simplified characters must conform to Xinhua Dictionary and Modern Chinese Dictionary. Coined characters are forbidden. Do not confuse the Chinese characters in Japanese with those of the Chinese language.

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Studies funded by national and municipal grants will be published as a priority. The grant title and serial number should be provided.

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The authors should sign in a sequence according to their responsibilities and contributions to the study. Generally, no more than 6 authors may sign an article, and the others who have substantial contributions to the article may be acknowledged at the end of the article. If the article is the result of cooperation by different departments, please mark 1, 2 or 3 on top right corner of the authors' names and indicate the affiliation of each author. Authors who are taking advanced study in the institution should identify their original affiliations. The first author is required to offer his brief bibliography, including name, gender, birth date, professional title and final degree. The address of the author responsible for correspondence must be as elaborate as possible, including postal code, telephone number, fax number, E-mail address and other details. Authors' names should be spelled in Chinese spelling as follows: LI Shimin, OUYANG Xiu, separated by “,”.

For original articles (clinical and basic science researches, technical innovation), Chinese and English abstracts and keywords are required to be placed on the second page, and usage of the third person and the generic names of drugs are strongly urged. Chinese abstracts (approximately 400 Chinese characters) are structured into 5 sections with the following headings: Background, Aims, Methods, Results, Conclusions. English abstract (approximately 500 words) is required to be structured into Background, Aims, Methods, Results, Conclusions, narrated definitely in the third person and in the past tense.

Generally, keywords should be closely related to the main ideas of the study or discussion with 3 to 8 words, not fewer than 3 words, usually extracting from title, abstract and text. Ensure the keywords to be in accordance with CMeSH, and separated by “,”.

For English abstract, the title, authors' name, affiliations should match the Chinese ones exactly (all authors should be listed instead of et al). The initial letter of the substantives must be in capital letters.

Scientific and technical terms issued by the National Authorization Board for Scientific and Technical Terms, correct punctuations and legal units of measurement decreed by the State Department should be utilized.

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2 Ciacci C, Sabbatini F, Cavallaro R, et al. *Helicobacter pylori* impairs iron absorption in infected individuals[J]. *Dig Liver Dis*, 2004, 36 (7): 455-460.

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2 Drossman DA, Corazzian E, Talley NJ, et al. Diagnostic criteria for functional gastrointestinal disorders[M] // Drossman DA, Corazzian E, Talley NJ, et al. Rome II: the functional gastrointestinal disorders: diagnosis, pathophysiology, and treatment: a multinational consensus. 2nd ed. Lawrence: Allen Press, 2000: 659-668.

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