Instructions to authors

Aims and scope

Cardiovascular Prevention and Pharmacotherapy (CPP) is an open access, peer-reviewed, online-only journal. CPP is the official journal of the Korean Society of Cardiovascular Disease Prevention (KSCP) and the Korean Society of Cardiovascular Pharmacotherapy Korea Chapter (KSCVP). The journal is published four times a year (on the last day of January, April, July, and October).

CPP covers all clinical and basic research on cardiovascular, cerebrovascular, and metabolic diseases including epidemiology, pathophysiology, treatments, and preventive activity. CPP publishes original research articles, review articles, editorials, and letters to the editor in English. Educational content will be published in English or Korean in various formats.

Submission

All manuscript should be submitted electronically to https://submit.e-jcpp.org. Please first log in as an authorand follow the directions. Manuscripts should be submittedby the corresponding author. The corresponding author willbe the sole contact for all submission queries.

Contact information

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1. Editorial policy and ethical considerations

Editorial policy

The editorial staff assume that all authors agreed with the CPP policies of manuscript submission. Except for the preapproved secondary publication, all manuscripts submitted to the journal must be previously unpublished in all languages and not be under consideration for submission or publication in other journals. Any addition, deletion, or rearrangement of author names in the authorship list should be made 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: (1) the reason for requesting a change in the list of authors; and (2) written confirmation (by email or letter) from all authors stating that they agree with the addition, removal, or rearrangement. CPP has no responsibility for changes in authorship.

Research ethics

All manuscripts should be prepared based on strict observation of the research and publication ethics guidelines recommended by the Council of Science Editors (https://www.councilscienceeditors.org), International Committee of Medical Journal Editors (ICMJE; https://www.icmje.org), World Association of Medical Editors (WAME; https://www.wame.org), and the Korean Association of Medical Journal Editors (KAMJE; https://www.kamje.or.kr/en/main_en). Any studies involving human subject must comply with the principles of the World Medical Association Declaration of Helsinki (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/).

All clinical research must be approved by an institutional review board and include informed consent from patients. Personal information about patients must not be published in any form. If the inclusion of such information is deemed necessary, authors must obtain explicit consent from the patient or their legal guardian prior to publication. Animal studies should be performed in compliance with all relevant guidelines, observing the standards described in the *Guide for the Care and Use of Laboratory Animals* (https://www.ncbi.nlm.nih.gov/books/NBK54050/). Research investigators should obey the regulations of ethics committee of corresponding institutes. The editors of CPP could demand informed consent and permission of ethics committee of corresponding institute. The journal will follow the guidelines by the Committee on Publication Ethics (COPE; http://publicationethics.org/) for settlement of any misconduct.

Conflicts of interest

The corresponding author must disclose any potential conflicts of interest that may influence the interpretation of the data to the editor. The disclosure form should align with the ICMJE Disclosure of Interest (https://www.icmje.org/disclosure-of-interest/). All sources of funding for the study must be explicitly stated and included in the Acknowledgements section. Once a manuscript is accepted, the corresponding author is required to submit the Copyright Transfer Agreement form, which all authors must complete and sign.

Authorship

CPP follows the authorship criteria recommended by the ICMJE (https://www.icmje.org/recommendations/). Authors must meet all of the following criteria: (1) substantial contributions to the conception or design of the work, acquisition of data, or analysis and interpretation of data; (2) drafting the manuscript or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work, ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Those who do not meet all four criteria should be acknowledged as contributors in the Acknowledgments section rather than listed as authors. The corresponding author is primarily responsible for communication with the editor and audience. For studies conducted by large, multicenter groups, individual authors who accept responsibility for the manuscript should be identified prior to submission. When submitting a manuscript authored by a group, the corresponding author must specify the preferred citation, list all individual authors, and include the group name. Acquisition of funding, data collection, or general supervision of the research does not qualify as authorship and such individuals should not be listed as authors.

Redundant publication and plagiarism

Redundant or duplicate publication is strictly prohibited. Manuscripts submitted to the journal must not have been previously published or under consideration for publication elsewhere. No part of an accepted manuscript may be duplicated in any other scientific journal without the explicit permission of the Editorial Board. All submitted manuscripts are screened for plagiarism and duplicate publication. If plagiarism or duplicate publication is detected, the manuscript may be rejected, and the authors will be subject to penalties, including notification to their institutions and public disclosure in the journal. Authors must obtain permission for any previously published material used in their submission, including text, figures, and tables. It is the authors' responsibility to secure these permissions from the publisher.

Clinical trials obligation to register

All clinical trials must be registered with a primary registry before publication. CPP accepts registrations from any primary registries participating in the International Clinical Trials Portal (ICTRP; https://www.who.int/clinical-trials-registry-platform), ClinicalTrials.gov (https://www.clinicaltrials.gov), ISRCTN Registery (https://www.isrctn.com), or the Korean Clinical Research Information Service (CRIS; https://cris.nih.go.kr/cris/index/index.do). The clinical trial registration number should be included at the end of the abstract.

Data sharing statement

CPP follows the data sharing policy recommended by the ICMJE (https://www.icmje.org/recommendations/). All manuscripts reporting clinical trial results must include a data sharing statement in compliance with the ICMJE guidelines.

2. Article types

CPP publishes original articles, review articles, editorials, invited special articles (practice guidelines, lectures, etc.), and letters to the editor.

Article type	Abstract	Word count[a)]	References	Tables/ Figures
Editorial	Not required	≤2,000	≤50	≤6
Review article	Unstructured abstract ≤250 words	≤6,000	≤100	≤10
Original article	Structured abstract ≤250 words	≤4,500	≤50	≤6
Special article	Unstructured abstract ≤250 words	≤6,000	≤100	≤10
Letter to the editor	Not required	≤2,000	≤10	≤6

Exceptions may be granted with the editor's approval.
[a)]Including references and figure legends (title page, abstract, and tables not included).

3. Manuscript preparation

General guidelines

(1) Manuscripts should be prepared using Microsoft Word (doc or docx format). They should be formatted in A4 (21.0×29.7 cm) or US Letter (21.6×27.9 cm), with margins of at least 2.54 cm (1 inch) on all sides.
(2) Texts should be double-spaced with the same normal, plain font throughout, preferably in 11-point Times New Roman.
(3) The cover letter should confirm that neither the submitted material nor portions thereof have been published previously or are under consideration for publication elsewhere. It should also state any potential conflicts of interest that could influence the authors' interpretation of the data, such as financial support from or connections to pharmaceutical companies, political pressure from interest groups, or academically related issues.
(4) Neither authors' names nor their affiliations should appear on any of the manuscript pages.
(5) Manuscripts should be prepared in accordance with the ICMJE Recommendations (https://icmje.org/recommendations/). Authors should include sex- and/or race/ethnicity-specific data when describing study results. If no sex- or race/ethnicity-based differences were observed, this should be explicitly stated.
(6) Reporting guidelines for specific study types should be followed: the CONSORT statement for randomized controlled trials (https://www.equator-network.org/reporting-guidelines/consort/); the STROBE statement for observational studies (https://www.equator-network.org/reporting-guidelines/strobe/); and the PRISMA statement for systematic reviews and meta-analysis (https://www.equator-network.org/reporting-guidelines/prisma/). Recommended sources for other reporting guidelines include the EQUATOR Network (https://www.equator-network.org/) and the US National Library of Medicine (NLM; https://www.nlm.nih.gov/services/research_report_guide.html).
(7) Abbreviations should be spelled out at first use, the abbreviation following in parentheses, and should be used consistently thereafter. Use only standard abbreviations, as the use of nonstandard abbreviations can be confusing to readers. Avoid using abbreviations in the manuscript title.
(8) All measurements should be in conventional units, using International System of Units (SI units). A more conventionally used measurement may follow in parentheses. -
(9) For medications, biologics, and devices, the use of generic names rather than trademark names is recommended. When brand names are used, the name of the manufacturer should be given.
(10) References, tables, and figures should be cited in the text according to the order of appearance.

Title page

The title page should include the following:
(1) Title and running title: The article title should be concise and precise. The title should be written in sentence case, meaning the first letter of the first word and any proper nouns are capitalized, as in a typical sentence. Generic drug names should be used in the title, not brand names. The running title should not exceed 50 characters including spaces.
(2) Authors and affiliations: First, (middle), and last names should be included for each author. For authors with different affiliations, the authors should be indicated by superscripted Arabic numerals (e.g., 1, 2, 3, etc.) at the top-right-hand corner of the author's name and before the affiliation. If authors are affiliated with multiple departments and hospitals, affiliations should be arranged in the order of authors and separated with a number.

(3) ORCID (Open Researcher and Contributor ID): All authors are required to provide their ORCIDs. Registration is available at the ORCID website (https://orcid.org/).
(4) Corresponding author: The corresponding author's name, academic degree, affiliation, affiliation address (with postal code), and email address should be included.
(5) Author contributions: The contributions of all authors must be described using CRediT (Contributor Roles Taxonomy; https://credit.niso.org/).
(6) Ethics statement: All clinical research must be approved by an institutional review board and include informed consent from patients. An example is as shown in the following: "We conducted this study in compliance with the principles of the Declaration of Helsinki. The study's protocol was reviewed and approved by the Institutional Review Board of OO (No. OO). Written informed consents were obtained from the patients./The requirement for informed consent was waived." For animal subjects, research should adhere to the guidelines outlined in the National or Institutional Guide for the Care and Use of Laboratory Animals and must be performed with ethical consideration for all experimental animals.
(7) Conflicts of interest: Authors should disclose any potential conflict of interest. If there are no conflicts of interest to declare, authors should include the following sentence: "The authors have no conflicts of interest to declare."
(8) Funding: All sources of funding applicable to the study should be explicitly stated, including the name of the funding agency, the country, and, if available, the grant number provided by the funding agency.
(9) Acknowledgments: All persons who have made substantial contributions, but do not meet the criteria for authorship, should be acknowledged here.

Original articles

(1) Original articles should be arranged in the following order: Cover letter, Title page, Abstract and Keywords, Main text (Introduction, Methods, Results, Discussion), References, Tables, and Figure legends.
(2) Abstract and Keywords: The abstract should be concise, containing no more than 250 words, with the following headings: Background, Methods, Results, and Conclusions. All data in the abstract also must appear in the manu¬script text or tables. Do not cite references in the abstract and limit the use of acronyms and abbreviations. Up to 5 keywords should be listed at the bottom of the abstract to be used as index terms. The use of MeSH (Medical Subject Headings; https://meshb.nlm.nih.gov/) heading terms are recommended for keywords.
(3) Main text:
- Original articles should not exceed 4,500 words (including references and figure legends) and should be structured with the following headings: Introduction, Methods, Results, and Discussion.
- Subheadings can be used in each section.
- For human studies, indicate that the study was approved by an institutional review board and that the participants gave written informed consent (or that no informed consent was required). For animal studies, the species, strain, number used, and pertinent descriptive characteristics should be provided. When describing surgical proce¬dures, identify the preanesthetic and anesthetic agents used and the amounts, concentrations, routes, and fre¬quency of administration of each. Paralytic agents are not considered acceptable substitutes for anesthetics. For other invasive procedures on animals, report the analgesic or tranquilizing drugs used. If none were used, provide justification for exclusion.
- Unless inappropriate, report the sex or gender of study participants, animals, or cells. Describe the methods used to determine sex or gender. If the study was done involving an exclusive population, for exam¬ple in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer).
- Authors should define how they determined race or ethnicity and justify their relevance.
- Statistical methods should be detailed in the Methods section. When using sta¬tistical methods beyond t-tests, chi-square, and simple linear regression, specify the statistical package, version number, and the nondefault options used.

(4) References: The number of references should not ex-

ceed 50.
(5) Tables and Figures: The number of tables and figures combined should not exceed 6.

Review articles

(1) Review articles should be arranged in the following order: Cover letter, Title page, Abstract (unstructured) and Keywords, Main text, References, Tables, and Figure legends.
(2) Abstract and Keywords: The abstract should be concise, containing no more than 250 words. Do not cite references in the abstract and limit the use of acronyms and abbreviations. Up to 5 keywords should be listed at the bottom of the abstract to be used as index terms. The use of MeSH (Medical Subject Headings; https://meshb.nlm.nih.gov/) heading terms are recommended for keywords.
(3) Main text: Review articles should not exceed 6,000 words (including references and figure legends).
(4) References: The number of references should not exceed 100.
(5) Tables and Figures: The number of tables and figures combined should not exceed 10.
(6) Systematic reviews are considered as review articles but should follow the original article format, including a structured abstract (Background, Methods, Results, Conclusions) and a main text organized into Introduction, Methods, Results, and Discussion sections.

Special articles (practice guidelines, lectures, etc.)

(1) Special articles should be arranged in the following order: Cover letter, Title page, Abstract (unstructured) and Keywords, Main text, References, Tables, and Figure legends.
(2) Abstract and Keywords: The abstract should be concise, containing no more than 250 words. Do not cite references in the abstract and limit the use of acronyms and abbreviations. Up to 5 keywords should be listed at the bottom of the abstract to be used as index terms. The use of MeSH (Medical Subject Headings; https://meshb.nlm.nih.gov/) heading terms are recommended for keywords.
(3) Main text: Special articles should not exceed 6,000 words (including references and figure legends).
(4) References: The number of references should not exceed 100.
(5) Tables and Figures: The number of tables and figures combined should not exceed 10.
(6) Systematic reviews are considered as review articles but should follow the original article format, including a structured abstract (Background, Methods, Results, Conclusions) and a main text organized into Introduction, Methods, Results, and Discussion sections.

Letters to the editor

(1) Letters to the editor should be arranged in the following order: Cover letter, Title page, Main text, References, Tables, and Figure legends.
(2) Main text: Letters to the editor should not exceed 2,000 words (including references and figure legends).
(3) References: The number of references should not exceed 10.
(4) Tables and Figures: The number of tables and figures combined should not exceed 6.

References

(1) Authors are responsible for ensuring the accuracy of reference data. All references must be verified against original sources.
(2) The reference list should be double-spaced and appear on separate pages from the text.
(3) References should be numbered consecutively in the order that they are mentioned in the text.
(4) List all authors if there are six or fewer; for seven or more, list the first six followed by "et al."
(5) Journal names must be abbreviated according to the NLM Catalog (https://www.ncbi.nlm.nih.gov/nlmcatalog/journals/).
(6) EndNote output styles for CPP are available at the journal website (https://e-jcpp.org).
(7) Examples
- Journal articles: Ettehad D, Emdin CA, Kiran A, Anderson SG, Callender T, Emberson J, et al. Blood pressure lowering for prevention of cardiovascular disease and

death: a systematic review and meta-analysis. Lancet 2016;387:957–67.
- Ahead of print articles: Kim SJ, Ann SH, Kim YG, Park S. Left ventricular apical aneurysm: atypical feature of cardiac sarcoidosis diagnosed by multimodality imaging. Korean Circ J 2021 Dec 7 [Epub] https://doi.org/10.4070/kcj.2021.0305
- Chapter in a book: Hinohara T, Robertson CG, Simpson JB. Directional coronary atherectomy. In: Topol EJ, editor. Textbook of interventional cardiology. 2nd ed. W.B. Saunders Company; 1994. p. 645–57.
- Book: Cohn PF. Silent myocardial ischemia and infarction. 3rd ed. Marcel Dekker; 1993.

Tables

(1) Each table should begin on a separate page, double-spaced, and use the same font size as the main text. Tables prepared with Microsoft Excel are not accepted unless embedded in the main text document.
(2) Tables must include a title and should be numbered in the order of citation in the text (e.g., Table 1, Table 2).
(3) Tables should be self-explanatory and should not duplicate information presented in the text or figures.
(4) Abbreviations should be defined below the table in alphabetical order.
(5) Footnotes should be indicated by superscripted lowercase letters: a), b), c), etc.
(6) If previously published materials are used, authors must obtain and include the written permission to reproduce from the copyright owner with proper citation.

Figure legends

(1) Figure legends should be double-spaced on pages separate from the text.
(2) Each figure must have a number, title, and caption.
(3) Figures should be numbered sequentially (e.g., Fig. 1, Fig. 2, etc.) and cited in the text.
(4) Specify the stain used and magnification level for light microscopic images. Include an internal magnification scale maker for electron micrographs.
(5) All symbols or arrows used in the figure should be explained.
(6) All abbreviations should be defined in alphabetical order at the end of each legend.

Figures

(1) Figures include graphs and illustrations.
(2) Figures should be created with professional graphic programs and provided in GIF, TIFF, EPS, or JPG format. If there are more than five files, a single PowerPoint file is acceptable for the review process. Retain image layers (do not flatten).
(3) Figure formatting
- Figures should be at least 13×18 cm (5×7 inch) and should not be resized to fit the publication layout.
- Resolution requirements are as follows: color/gray scale images should be at least 300 DPI; line art (black and white or color) should be at least 1,200 DPI; and combination images (gray scale and line art) should be at least 600 DPI.
- Avoid hairlines in line art; headings should appear in the figure legend, not on the figure.
- Avoid patterns or textures in graphs; three-dimensional graphs are not recommended unless necessary.
- White space between panels and panel labels should be minimized.

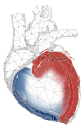
(4) Use scale bars for photomicrographs.
(5) If previously published materials are used, authors must obtain and include the written permission to reproduce from the copyright owner with proper citation.
(6) Figures may be resized or adjusted for publication, and there is no additional fee for the publication of color figures.

Videos

The inclusion of movies is at the discretion of the editors. Acceptable formats include AVI, WMV, MPEG, and QuickTime (.mov).

4. Peer-review process

All manuscripts are considered confidential during peer-review process by at least two anonymous reviewers designated by the editor. CPP employs a double-blind peer



review process, ensuring that the identities of both authors and reviewers remain anonymous to each other. An initial decision will normally be made within 4 weeks of receipt of a manuscript to the corresponding author by email. When submitting the revised manuscript, authors should include a Response Letter, which describes how the manuscript has been revised. A point-by-point response to the editor should be included with the revised manuscript. Authors who plan to resubmit but cannot meet this deadline should contact the Editorial Office. Manuscripts held for revision will be retained for a maximum of 30 days. The revised manuscript and the author's comments will be reviewed again. If a manuscript is completely acceptable, it is scheduled for publication in the next available issue. We neither guarantee the acceptance without review nor very short peer review times for unsolicited manuscripts. Commissioned manuscripts also are reviewed before publication. We adopt double-blind peer review in which case, not only authors but also reviewers do not know each other.

5. For accepted manuscripts

Article processing charges

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Conflict of interest disclosure

The final status of any conflicts of interest will be disclosed to readers on each article at the time of publication.