AIMS AND SCOPE

European Journal of Rheumatology (Eur J Rheumatol) is an international, open access peer reviewed journal committed to promoting the highest standards of scientific exchange and education. The journal is published quarterly on March, June, September and December.

The aim of the European Journal of Rheumatology is to cover various aspects of rheumatology for its readers, encompassing the spectrum of diseases with arthritis, musculoskeletal conditions, autoinflammatory diseases, connective tissue disorders, osteoporosis, translational research, the latest therapies and treatment programs. European Journal of Rheumatology publishes original articles, invited reviews, case reports, letters to the editor and images in rheumatology. The publication language of the journal is English.

The journal's target audience includes academicians, practitioners, specialists and students from all disciplines of rheumatology.

European Journal of Rheumatology adheres to the principles outlined by the guidelines of ICMJE, WAME, EASE and COPE.

European Journal of Rheumatology is currently indexed by CINAHL and EBSCO.

All published content of the European Journal of Rheumatology is available online at www.eurjrheumatol.org, free of charge.

Statements or opinions expressed in the manuscripts published in the European Journal of Rheumatology reflect the views of the author(s) and not the opinions of the editors, the editorial board and the publisher; the editors, the editorial board and the publisher disclaim any responsibility or liability for such materials.

The journal is printed on an acid-free paper.

Permission requests for reproduction of materials published, reprint requests and requests concerning advertising should be addressed to the publisher;

Address: Büyükdere Cad. 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
e-mail: info@avesyayincilik.com
www.avesyayincilik.com
INSTRUCTIONS TO AUTHORS

European Journal of Rheumatology (Eur J Rheumatol) is an international, open access, peer reviewed journal committed to promoting the highest standards of scientific exchange and education. The journal is published quarterly on March, June, September and December. The journal covers various aspects of rheumatology for its readers, encompassing the spectrum of diseases with arthritis, musculoskeletal conditions, autoinflammatory diseases, connective tissue disorders, osteoporosis, translational research, the latest therapies and treatment programs. European Journal of Rheumatology publishes original articles, invited reviews, case reports, letters to the editor and images in rheumatology. The publication language of the journal is English.

The members of reviewer board of the journal are selected from independent international authorities and experts. The editorial board requests the assistance of the reviewer board while selecting manuscripts for publication.

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND

2. Drafting the work or revising it critically for important intellectual content; AND

3. Final approval of the version to be published; AND

4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

In addition to being accountable for the parts of the work he or she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their coauthors.

All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged in the title page of the manuscript.

European Journal of Rheumatology requires corresponding authors to submit a signed and scanned version of the authorship contribution form (available for download through HYPERLINK “http://www.eurjrheumatol.org/www.eurjrheumatol.org”) during the initial submission process in order to act appropriately to authorship rights and prevent ghost or honorary authorship.

Any financial grants or other support received for the study from individuals or institutions should be disclosed to the Editorial Board and to disclose potential conflicts of interest ICMJE Potential Conflict of Interest Disclosure Form (available at HYPERLINK “http://www.icmje.org” www.icmje.org) should be filled in and submitted during the initial submission process. Cases of potential conflicts of interest of editors, authors and reviewers are resolved by the journal’s Editorial Board within the scope of COPE and ICME guidelines.

An “Author Contribution Form” is required with all submissions. A statement on absence of conflict of interests are required. (ICMJE Form for Disclosure of Potential Conflicts of Interest and Authorship Contributions form are available at www.eurjrheumatol.org).

The filled authorship contributions form must be submitted along with the manuscript. The journal’s rules on authorship contributions are in compliance with CSE (http://www.councilscienceeditors.org/i4a/pages/index.cfm?pageid=3376) and ICMJE (http://www.icmje.org/ethical_1auth.html) recommendations.

Original Investigations and Reviews should be presented according to the following guidelines: randomized study – CONSORT, observational study – STROBE, study on diagnostic accuracy – STARD, systematic reviews and meta-analysis PRISMA, animal experimental studies – ARRIVE, non-randomized behavioural and public health intervention studies - TREND.

Manuscript Preparation

Title Page

Each submission should be accompanied by a title page. The document should be submitted separately through the submission system and should include the title of the manuscript, running head, a full list of all contributing authors, full institution information of all contributing authors, an address for correspondence, contact information of the corresponding author (including the contact phone number, mobile phone number and the e-mail address), if the content of the manuscript has been presented before the time and place of the presentation and the acknowledgements if there are any. Acknowledgement to persons who significantly contributed to the study or assisted in preparing article should be done appropriately.

Abstract

The abstract should be limited to 400 words for original articles and review articles and should be limited to 250 words for case reports. Abstracts of original articles should be structured with the following subheadings: Objective, Material and Methods, Results and Conclusion.
European Journal of Rheumatology

Keywords
All submissions should be accompanied by 3 to 6 keywords concordant with NLM MeSH vocabulary terms (available at http://www.nlm.nih.gov/mesh/MBrowser.html)

Main Document
Main document should include the main text, reference list and the tables. It should be prepared using Microsoft Word software. Times New Roman font (size 12) should be used throughout the main document with 1.5 line spacing. The side margins of the main document should be set at 25 mm from all sides.

Main text
The main text should be structured depending on the type of the manuscript. The main text of original articles should be structured with Introduction, Material and Methods, Results and Discussion subheadings while the main text of case reports should be structured with Introduction, Case Presentation and Discussion subheadings. These sections can be divided into subsections and subtitles where appropriate. With original articles, the limitations of the study should be provided under the Discussion section, before the conclusion paragraph.

The main text of original articles should not exceed 3000 words and should be accompanied by necessary number of tables and figures. The number of references cited in an original article should be limited to 35.

With review articles, the main text should not exceed 5000 words and should be accompanied by necessary number of tables and figures. The number of references cited in an original article should be limited to 50.

Case reports should not be longer than 1200 words, and the number of references should be limited to 10.

Letters to the Editor and Images in Rheumatology should not be longer than 500 words. The number of references should be limited to 5 with these kind of manuscripts.

The main text of all manuscripts should be blind. Any information that may indicate an individual or institution should be excluded.

Information on informed consent of the patients and ethics committee approval should be provided under the Material and Methods section of the main text.

Statistical analysis should be performed in accordance with guidelines on reporting statistics in medical journals (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983; 7: 1489-93). Software used for analysis should be described. For parametric tests represent continuous variables as Means±Standard Deviation, while for nonparametric tests represent data as Median and range (Minimum-Maximum) or Median and interquartile range (25th and 75th percentiles). Whenever complex analyses are used support the relative risk, odds or hazard ratios values by providing confidence intervals and p values.

When a drug, product, hardware, or software mentioned within the main text product information, including the name of the product, producer of the product, city of the company and the country of the company should be provided in parenthesis in the following format: “Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)”

All references, tables and figures should be referred to within the main text. All acronyms and abbreviations should be defined at first use within the main text followed by the acronym or abbreviation in parenthesis.

References
References should be numbered in the order they are referred to within the main text. Authors are responsible for accuracy of references.

Reference Formatting
Standard journal article: Abbreviations of journal titles should be done in accordance with journal abbreviations used in Index Medicus (for journal abbreviations consult List of Journals indexed for MEDLINE published annually by NLM at http://www.nlm.nih.gov/tsd/serials/jnl.html). In case of six or less authors numbers list of all authors is required. If number of authors exceeds six, list first 6 authors followed by et al. A list of authors should be followed by the full title of the article, journal title, year, volume and page numbers.


Editor (s), compiler(s) as author: Norman JJ, Redfern SJ, editors. Mental Health Care for Elderly People. New York: Churchill Livingstone; 1996.


The rules for title page, references, figures and tables are applicable for all types of manuscripts.

European Journal of Rheumatology

Keywords
All submissions should be accompanied by 3 to 6 keywords concordant with NLM MeSH vocabulary terms (available at http://www.nlm.nih.gov/mesh/MBrowser.html)

Main Document
Main document should include the main text, reference list and the tables. It should be prepared using Microsoft Word software. Times New Roman font (size 12) should be used throughout the main document with 1.5 line spacing. The side margins of the main document should be set at 25 mm from all sides.

Main text
The main text should be structured depending on the type of the manuscript. The main text of original articles should be structured with Introduction, Material and Methods, Results and Discussion subheadings while the main text of case reports should be structured with Introduction, Case Presentation and Discussion subheadings. These sections can be divided into subsections and subtitles where appropriate. With original articles, the limitations of the study should be provided under the Discussion section, before the conclusion paragraph.

The main text of original articles should not exceed 3000 words and should be accompanied by necessary number of tables and figures. The number of references cited in an original article should be limited to 35.

With review articles, the main text should not exceed 5000 words and should be accompanied by necessary number of tables and figures. The number of references cited in an original article should be limited to 50.

Case reports should not be longer than 1200 words, and the number of references should be limited to 10.

Letters to the Editor and Images in Rheumatology should not be longer than 500 words. The number of references should be limited to 5 with these kind of manuscripts.

The main text of all manuscripts should be blind. Any information that may indicate an individual or institution should be excluded.

Information on informed consent of the patients and ethics committee approval should be provided under the Material and Methods section of the main text.

Statistical analysis should be performed in accordance with guidelines on reporting statistics in medical journals (Altman DG, Gore SM, Gardner MJ, Pocock SJ, Statistical guidelines for contributors to medical journals. Br Med J 1983; 7: 1489-93). Software used for analysis should be described. For parametric tests represent continuous variables as Means±Standard Deviation, while for nonparametric tests represent data as Median and range (Minimum-Maximum) or Median and interquartile range (25th and 75th percentiles). Whenever complex analyses are used support the relative risk, odds or hazard ratios values by providing confidence intervals and p values.

When a drug, product, hardware, or software mentioned within the main text product information, including the name of the product, producer of the product, city of the company and the country of the company should be provided in parenthesis in the following format: “Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)”

All references, tables and figures should be referred to within the main text. All acronyms and abbreviations should be defined at first use within the main text followed by the acronym or abbreviation in parenthesis.

References
References should be numbered in the order they are referred to within the main text. Authors are responsible for accuracy of references.

Reference Formatting
Standard journal article: Abbreviations of journal titles should be done in accordance with journal abbreviations used in Index Medicus (for journal abbreviations consult List of Journals indexed for MEDLINE published annually by NLM at http://www.nlm.nih.gov/tsd/serials/jnl.html). In case of six or less authors numbers list of all authors is required. If number of authors exceeds six, list first 6 authors followed by et al. A list of authors should be followed by the full title of the article, journal title, year, volume and page numbers.


Editor (s), compiler(s) as author: Norman JJ, Redfern SJ, editors. Mental Health Care for Elderly People. New York: Churchill Livingstone; 1996.


The rules for title page, references, figures and tables are applicable for all types of manuscripts.
Original Investigations

Potential protein targets of the peptidylarginine deiminase 2 and peptidylarginine deiminase 4 enzymes in rheumatoid synovial tissue and its possible meaning
Martha Adriana Badillo-Soto, Mayra Rodriguez-Rodriguez, Maria Elena Pérez-Pérez, Leonel Daza-Benitez, Juan José Bollain-y-Goytia, Miguel Angel Carrillo-Jiménez, Esperanza Avalos-Díaz, Rafael Herrera-Esparza

Low vitamin D status in systemic sclerosis and the impact on disease phenotype
Laura Groseanu, Violeta Bojinca, Tania Gudu, Ioana Saulescu, Denisa Predeteanu, Andrea Balanescu, Florian Berghlea, Daniela Opris, Andreea Borangiu, Cosmin Constantinescu, Magda Negru, Ruxandra Ionescu

Surgery for lumbar spinal stenosis in patients with rheumatoid arthritis: A multicenter observational study
Agnete Gulati, Tore Solberg, Charalampis Giannadakis, Mari Hoff, Glenn Haugeberg, Oystein Nygaard, Sasha Gulati

Relationship between endothelial dysfunction and microalbuminuria in familial Mediterranean fever
Hakan Güneş, Tank Kivrak, Mustafa Tatlısu, Hakki Kaya, Mehmet Birhan Yılmaz

Evaluating disease activity in patients with ankylosing spondylitis and rheumatoid arthritis using 99mTCglucosamine
Nicholas Manolios, Marina Ali, Bradley Camden, Elham Aflaky, Katrina Pavic, Andrew Markewycz, Robert De Costa, Socrates Angelides

Research Letter

Janus kinase 2 V617F mutation and thrombotic events in Behcet’s disease: The Alexandria experience
Fahd Adeeb, Manal Tayel, Dalal M El Kaffash, Khairunnisa Mohd Idris, Muhammad Fikri Abu Hassan, Alexander Duncan Fraser

Reviews

The clinical significance of antiphospholipid antibodies in systemic lupus erythematosus
Ozan Unlu, Stephane Zuily, Doruk Erkan

Case Reports

Kaposi’s sarcoma concurrent with granulomatosis polyangiitis
Diler İlaş Kılıç, Selma Karahmetoğlu Özkan, Başol Canbakan, Nesrin Dündar

Teriparatide for the rapid resolution of delayed healing of atypical fractures associated with long-term bisphosphonate use
Silvina R. Mastaglia, Gabriel Aguilar, Beatriz Oliveri

Hydroxychloroquine-induced agranulocytosis in a patient with long-term rheumatoid arthritis
Edward Sames, Heather Paterson, Charles Li

Image of Interest

Tuberculous sacroiliitis: A cause of bone marrow edema in magnetic resonance imaging
Servet Akar, Ismail Safa Satoglu, Berna Dirim Mete, Özgür Toun