Cancer Research and Treatment (Cancer Res Treat) is a peer-reviewed publication of the Korean Cancer Association, Korean Society of Medical Oncology, and Korean Association for Lung Cancer. Cancer Research and Treatment is published quarterly on the 15th January, April, July, and October. Cancer Research and Treatment accepts manuscripts for submission under a broad scope of topics relevant to experimental and clinical cancer research. Subjects include carcinogenesis, tumor biology, molecular oncology, cancer genetics, tumor immunology, epidemiology, predictive markers and cancer prevention, pathology, cancer diagnosis, screening, and therapies including chemotherapy, surgery, radiation therapy, immunotherapy, gene therapy, multimodality treatment, and palliative care. Physicians or researchers throughout the world can submit a manuscript if its scope is appropriate.

Manuscripts for submission to Cancer Research and Treatment should be prepared according to the following instructions. Cancer Research and Treatment follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (http://www.icmje.org/urm_main.html), commonly known as “Vancouver style” if not otherwise described below.

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The journal adheres to the ethical guidelines for research and publication by the International Committee of Medical Journal Editors (ICMJE).

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The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors’ interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

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All of the manuscripts should be prepared in strict observation of research and publication ethics guidelines recommended by International Committee of Medical Journal Editors (ICMJE, http://www.icmje.org/). Any study reporting the results of human subjects or human data must be conducted according to the principles expressed in the Declaration of Helsinki, and must be reviewed and approved by a responsible Institutional Review Board (IRB). The authors should describe the title and approval number of the IRB, and should describe about informed consents from the participants in “Ethical Statement” subsection. Copies of written informed consent and IRB approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval or study conduct. All studies involving animals must state that the guidelines for the use and care of laboratory animals of the authors’ institution, or any national law, were followed.

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Authorship credit should be based on 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; 2) drafting the article 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 in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Each author should meet these four conditions.
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2. MANUSCRIPT CATEGORIES

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Original Articles are the primary presentation mode of scientific communication in the journal. Acceptance of manuscripts is based on many factors, including the importance of the research to the field of oncology and the originality of the work. Authors are encouraged to focus on accuracy, clarity, and brevity in their presentations.

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Special Articles include those manuscripts for which content and style do not fall under the category of Original Articles or Review Articles; these may include, but are not limited to, guidelines, summaries of consensus meetings, and other scholarly communications.

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The Editors welcome any form of brief and short articles on general interests for cancer researchers. These include brief case reports, brief communications, comments on topics of interest, readers’ comments on articles published recently in the journal, and authors’ replies. It should not exceed 400 words, 5 references, 3 authors and 1 table or figure.
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- The manuscript should be written in 12-point font with double-line spacing on A4 size with standard margins.
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- The use of acronyms and abbreviations is discouraged and should be kept to a minimum. When used, they are to be defined where first used, followed by the acronym or abbreviation in parentheses.
- Drug and chemical names should be stated in standard chemical or generic nomenclature. Units of measure should be presented according to the International System (SI) of units.

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For the specific study design, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies and non-randomized studies, it is recommended that the authors follow the reporting guidelines listed in the following table.

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Type of study</th>
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<tr>
<td>CONSORT</td>
<td>Randomized controlled trials</td>
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<tr>
<td>STARD</td>
<td>Studies of diagnostic accuracy</td>
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<tr>
<td>PRISMA</td>
<td>Preferred reporting items of systematic reviews and meta-analyses</td>
</tr>
<tr>
<td>STROBE</td>
<td>Observational studies in epidemiology</td>
</tr>
<tr>
<td>MOOSE</td>
<td>Meta-analyses of observational studies in epidemiology</td>
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Manuscript format

Although there is no limitation on the length of these manuscripts, the Editorial Board may abridge excessive illustrations and large tables. The manuscript for an original article should be organized on a separate page in the following sequence: title page, abstract and keywords, text, author contributions, conflicts of interest, acknowledgments (if necessary), references, tables, and figure legends.

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The title page should carry the following information.
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The abstract should be no more than 250 words, and describe concisely, in a paragraph, the Purpose, Materials and Methods, Results, and Conclusion. Below the abstract, authors should provide 3 to 10 keywords or terms to be used as index terms. Terms from the Medical Subject Headings (MeSH) list (https://meshb.nlm.nih.gov/search) should be used; if suitable MeSH terms are not yet available, current terms may be used.

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The text should be structured and arranged in this order: Introduction, Materials and Methods, Results, and Discussion. Footnotes are to be used only for tables and figures. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), route(s) of administration, and city and country of manufacturer. Use only standard abbreviations. A subject that is to be abbreviated must be spelled in full for its first use in the text, followed by the abbreviation in parentheses.

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