Cancer Research and Treatment (Cancer Res Treat) is a peer-reviewed publication of the Korean Cancer Association. 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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It is recommended that any research dealing with a clinical trial be registered at an appropriate online public registry. Manuscript with non-registered interventional clinical trials will not be considered for publication.

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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 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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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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Review Articles and Editorials are usually solicited by the Editor-in-Chief. However, unsolicited Review Articles will also be considered for publication, in which case authors should submit their curriculum vitae in addition to the manuscript. Editorial should be no more than five pages in length.

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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.

**Case Reports**
Case Reports are not encouraged and are considered only if justified by their unique significance or depth of studies on the case. The abstract should be unstructured and its length should not exceed 150 words. There should be no more than five figures, including tables, and no more than 15 references.

**Correspondences**
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 acceptance criteria for all papers are based on the quality and originality of the research and its clinical and scientific sig-
nificance. An initial decision will normally be made within 4 weeks of receipt of a manuscript, and the reviewers’ comments are sent to the corresponding authors. Revised manuscripts must be submitted online by the corresponding author. The corresponding author must indicate the alterations that have been made in response to the referees’ comments item by item. Failure to resubmit the revised manuscript within 12 weeks of the editorial decision is regarded as a withdrawal.

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5. MANUSCRIPT PREPARATION

General Guidelines
Manuscripts must be written succinctly in clear, grammatical English. All manuscripts originating from non-English speaking countries must be revised by a professional linguistic reviewer, and it must be evident from the cover letter that this has been done. All manuscripts are subject to editorial peer review. The editors reserve the right to improve the style and, if necessary, return the manuscript to the author for revision. When a manuscript is received for consideration, the editors assume that no similar paper has been or will be submitted for publication elsewhere. The main document with manuscript text and tables should be prepared with MS Word file.

- The manuscript should be written in 12-point font with double-line spacing on A4 size with standard margins.
- All manuscript pages are to be consecutively numbered, beginning with the title page as page 1.
- 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.

Reporting Guidelines for Specific Study Designs
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.

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<thead>
<tr>
<th>Initiative</th>
<th>Type of study</th>
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<td>CONSORT</td>
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<td>STARD</td>
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<td>Preferred reporting items of systematic reviews and meta-analyses</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, 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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- A running title of fewer than 50 characters.
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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
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Tables should have a title, and be numbered with Arabic numerals in the order in which they are cited in the text. The title and contents of a table should be concise and clear, so that a reader can understand the table without referring to the text. Explanatory material should be placed in a note at the bottom of the table. Within a table, if a non-standard abbreviation is used or description may be necessary, then list them under annotation at the bottom. Use lowercase letters in superscripts a, b, c, … on the right side of the part that needs explanation; the annotation should be recorded according to the lowercase letters listed below the table. Statistical measures such as SD or SE should be identified. Vertical lines between entries should be omitted.

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