**How to submit your paper**

**Manuscript submission**

Manuscript submission to all Lancet journals is free. Payment of article processing fees is made after acceptance (see later). Manuscripts should be submitted online via the The Lancet Regional Health – Western Pacific’s online submission and peer review website (known as EM) at [https://www.editorialmanager.com/threwesternpacific/](https://www.editorialmanager.com/threwesternpacific/)

- Simply log on to EM and follow the on-screen instructions for all submissions
- If you have not used EM before, you will need to register first. In EM, the corresponding author is the person who enters the manuscript details and uploads the submission files
- Inclusion of illustrations (eg, photographs, graphs, diagrams) is a prerequisite for many publication types. Submission of original and editable artwork files is encouraged. Digital photography files should have a resolution of at least 300 dpi and be at least 107 mm wide. Before and after images should be taken with the same intensity, direction, and colour of light
- In almost all cases, if you have a finished manuscript, you should submit it, rather than contacting The Lancet Regional Health – Western Pacific to enquire whether an unseen manuscript is likely to be accepted. Unless you have been asked by the Editor to submit by email, you should use the online system for all types of submission
- If you have any technical problems or questions, please contact our dedicated customer support:
  - For the Americas: +1 888 8347287 (09:00 to 17:00 central standard time)
  - For Asia and Pacific: +81 3 55615032 (09:30 to 17:30 Japan standard time)
  - For Europe and rest of the world: +44 1865 843577 (08:30 to 17:00 GMT)
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  - Email: westernpacific@lancet.com

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**Covering letter**

- You should upload your covering letter at the “Enter Comments” stage of the online submission process
- Use the covering letter to explain why your paper should be published in The Lancet Regional Health – Western Pacific rather than elsewhere

**Statements, permissions, and signatures**

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- Designated authors should meet all four criteria for authorship in the ICMJE Recommendations
- All authors, and all contributors (including medical writers and editors), should specify their individual contributions at the end of the text
- We require that more than one author has verified the underlying data. The contributors statement should state who those authors are.
- We encourage collaboration and coauthorship with colleagues in the locations where the research is conducted
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- When choosing coauthors, we ask lead authors to be mindful of the benefits of diversity in authorship and to consider inviting
Information for Authors

coauthors who reflect diversity in every sense, including (but not limited to) background, career-stage, gender, geography, and race

- The Lancet Regional Health – Western Pacific will not publish any paper unless we have the signatures of all authors
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- Please include written consent of any cited individual(s) noted in acknowledgments or personal communications
- If a collaborator or study group has been used and they wish to be indexed on PubMed, please provide a separate word document including a table of first initials and surnames of all members

Forms and signatures
For Commentaries and Letters, we require you to upload your forms at submission. For original Research papers, we will request these forms after peer review. The following signed statements are required:

- Authors’ contributions
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- Acknowledgments—written consent of cited individual
- Personal communications—written consent of cited individual
- Use of copyright-protected material—signed permission statements from author and publisher

These statements can be scanned and submitted electronically with your submission. Please note that The Lancet journals will accept hand-signed and electronic (typewritten) signatures.

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- All authors are required to provide a Conflict of Interest Statement and should complete a standard form, which is available at https://www.thelancet.com/for-authors/forms?section=icmje-coi. The form has been modified by the ICMJE following consultation with authors and editors. Further information is available in a joint ICMJE statement published on July 1, 2010. For more information see Lancet 2009; 374: 1395–96.
- For Commentary, The Lancet Regional Health – Western Pacific will not publish if an author, within the past 3 years, and with a relevant company or competitor, has any stocks or shares, equity, a contract of employment, or a named position on a company board; or has been asked by any organisation other than The Lancet Regional Health – Western Pacific to write, be named on, or to submit the paper (see Lancet 2004; 363: 2–3)

Role of the funding source

- All sources of funding should be declared as an acknowledgment at the end of the text
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- If the funding source had no such involvement, the authors should state this
- All authors should confirm that they had full access to all the data in the study and accept responsibility to submit for publication

Role of medical writer or editor

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- This information should be added to the Acknowledgments or Contributors section
- We require signed statements from any medical writers or editors declaring that they have given permission to be named as an author, as a contributor, or in the Acknowledgments section

Patient and other consents

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- If consent, permission, or release is made subject to any conditions, The Lancet Regional Health – Western Pacific must be made aware in writing of all such conditions before publication.
- For more information about our policy, please visit https://www.elsevier.com/about/our-business/policies/patient-consent.

Types of article and manuscript requirements
Please ensure that anything you submit to The Lancet Regional Health – Western Pacific follows the guidelines provided for each article type. For instruction on how to format the text of your paper, including tables, figures, panels, and references, please see our Formatting guidelines.

Research papers
- The Lancet Regional Health – Western Pacific prioritises reports of original research that are likely to change practice or thinking.
- We invite submission of all trials, whether phase 1, 2, 3, or 4. For phase 1 trials, we consider those of a novel substance for a novel indication, if there is a strong or unexpected beneficial or adverse response, or a novel mechanism of action.
- We require the registration of all interventional trials, whether early or late phase, in a primary register that participates in WHO’s International Clinical Trial Registry Platform (see Lancet 2007; 369: 1909–11) or in ClinicalTrials.gov, in accord with ICMJE recommendations. We also encourage full public disclosure of the minimum 21-item trial registration dataset at the time of registration and before recruitment of the first participant (see Lancet 2006; 367: 1631–35). The registry must be independent of for-profit interest.
- Reports of trials must conform to CONSORT 2010 guidelines and should be submitted with their protocols.
- All reports of randomised trials should include a section entitled Randomisation and masking, within the Methods section. Please refer to The Lancet’s formatting guidelines for randomised trials.
- Cluster-randomised trials must be reported according to CONSORT extended guidelines.
- Randomised trials that report harms must be described according to extended CONSORT guidelines.
- Studies of diagnostic accuracy must be reported according to STARD guidelines.
- Observational studies (cohort, case-control, or cross-sectional designs) must be reported according to the STROBE statement, and should be submitted with their protocols.
- We encourage the registration of all observational studies on a WHO-compliant registry (see Lancet 2010; 375: 348).
- Genetic association studies must be reported according to STREGA guidelines.
- Systematic reviews and meta-analyses must be reported according to PRISMA guidelines. Please refer to The Lancet’s formatting guidelines for systematic reviews and meta-analyses.
- Reports of studies of global health estimates should be reported according to the GATHER statement (see Lancet 2016; 388: e19–23).
- Clinical trials that report interventions using artificial intelligence must be described according to the CONSORT-AI Extension guidelines and their protocols must be described according to the SPIRIT-AI Extension guidelines.
- To find reporting guidelines see: http://www.equator-network.org

All Research papers should, as relevant:
- Include an abstract (semistructured summary), with five paragraphs (Background, Methods, Findings, Interpretation, and Funding), not exceeding 250 words. Our electronic submission system will ask you to copy and paste this section at the “Submit Abstract” stage.
- For randomised trials, the abstract should adhere to CONSORT extensions: abstracts (see Lancet 2008; 371: 281–83).
- When reporting Kaplan-Meier survival data, at each timepoint, authors must include numbers at risk, and are encouraged to include the number of censored patients.
- For intervention studies, the abstract should include the primary outcome expressed as the difference between groups with a confidence interval on that difference (absolute differences are more useful than relative ones). Secondary outcomes can be included as long as they are clearly marked as secondary and all such outcomes are reported.
- Use the SI system of units and the recommended international non-proprietary name (INN) for drug names. Ensure that the dose, route, and frequency of administration of any drug you mention are correct.
- Use gene names approved by the Human Gene Organisation. Novel gene sequences should be deposited in a public database (GenBank, EMBL, or DDBJ), and the accession number provided. Authors of microarray papers should include in their submission the information recommended by the MIAME guidelines. Authors should also submit their experimental details to one of the publicly available databases: ArrayExpress or GEO.
- Include any necessary additional data as part of your EM submission.
- All accepted Articles should include a link to the full study protocol published on the authors’ institutional website (see Lancet 2009; 373: 992 and Lancet 2010; 375: 348).
- We encourage researchers to enrol women and ethnic groups into clinical trials of all phases, and to plan to analyse data by sex and by race.
- For all study types, we encourage correct use of the terms sex (when reporting biological factors) and gender (when reporting identity, psychosocial, or cultural factors). Where possible, report the sex and/or gender of study participants, and describe the methods used to determine sex and gender. Separate reporting of data by demographic variables, such as age and sex, facilitates pooling of data for subgroups across studies and should be routine, unless inappropriate. Discuss the influence or association of variables, such as sex and/or gender, on your findings, where appropriate, and the limitations of the data.

Putting research into context
- All research papers (including systematic reviews/meta-analyses) submitted to The Lancet Regional Health – Western Pacific must include a panel putting their research into context with previous research.
Research in context
Evidence before this study
This section should include a description of all the evidence that the authors considered before undertaking this study. Authors should briefly state: the sources (databases, journal or book reference lists, etc) searched; the criteria used to include or exclude studies (including the exact start and end dates of the search), which should not be limited to English language publications; the search terms used; the quality (risk of bias) of that evidence; and the pooled estimate derived from meta-analysis of the evidence, if appropriate.

Added value of this study
Authors should describe here how their findings add value to the existing evidence.

Implications of all the available evidence
Authors should state the implications for practice or policy and future research of their study combined with existing evidence.

Research in context panels should not contain references; key studies mentioned here should be referenced in the main text.

Data sharing
From September 21, 2020, all submitted research Articles must contain a data sharing statement, to be included at the end of the manuscript. Data sharing statements must include:

- Whether data collected for the study, including individual participant data and a data dictionary defining each field in the set, will be made available to others ("undecided" is not an acceptable answer);
- What data will be made available (deidentified participant data, participant data with identifiers, data dictionary, or other specified data set);
- Whether additional, related documents will be available (eg, study protocol, statistical analysis plan, informed consent form);
- When these data will be available (beginning and end date, or "with publication", as applicable);
- Where the data will be made available (including complete URLs or email addresses if relevant);
- By what access criteria data will be shared (including with whom, for what types of analyses, by what mechanism – eg, with or without investigator support, after approval of a proposal, with a signed data access agreement - or any additional restrictions).

See table for examples. Clinical trials that begin enrolling participants on or after Jan 1, 2019, must include a data sharing plan in the trial’s registration. If the data sharing plan changes after registration, this should be reflected in the statement submitted and published, and updated in the registry record. For reports of research other than clinical trials, data sharing statements are encouraged but not required. Mendeley Data is a secure online repository for research data, permitting archiving of any file type and assigning a permanent and unique digital object identifier (DOI) so that the files can be easily referenced. If authors wish to share their supporting data, and have not already made alternative arrangements, a Mendeley DOI can be referred to in the data sharing statement.

Abstract translation
The Lancet Regional Health – Western Pacific encourages the submission of translated summaries (abstracts) in languages that are relevant to the country where the research was done. Translated summaries are published unedited and unformatted, as a separate supplementary file. If your paper is accepted, we will offer you the opportunity to prepare a translation of the final edited summary. We do not require translated material at submission stage.

Editorial
Editorials are the voice of The Lancet Regional Health – Western Pacific, and are written in-house by the journal’s editorial-writing team and signed “The Lancet Regional Health – Western Pacific”

Commentaries
- This section contains Commentaries that accompany papers published in The Lancet Regional Health – Western Pacific, or to issues of wide-reaching concern in medical research and health policy. Most Commentaries are commissioned, but unsolicited Commentaries are also welcome. Commentaries may be peer reviewed
  - Commentaries should be no more than 750 words, 10 references, and one figure, panel, or small table
  - See Conflicts of Interest guidelines for comments

Letters
- Letters should be written in response to previous content published in The Lancet Regional Health – Western Pacific
  - Letters for publication must reach us within 4 weeks of publication of the original item and should be no longer than 250 words and 5 references
  - Letters of general interest, unlinked to items published in the journal, can be up to 400 words long
  - Letters are not usually peer reviewed, but we might invite replies from the authors of the original publication, or pass on letters to these authors
  - Only one table or figure is permitted, and there should be no more than five references and five authors
  - All accepted letters are edited. Proofs will be sent out to authors before publication

Corrections
- Any substantial error in any article published in The Lancet Regional Health – Western Pacific should be corrected as soon as possible. Blame is not apportioned; the important thing is to set the record straight.
  - The Lancet journals have a policy for types of errors that we do and do not correct. We will always correct any error affecting a
non-proprietary drug name, dose, or unit, any numerical error in the results, or any factual error in the interpretation of results.

**Reviews**

Most reviews are commissioned, but unsolicited short outlines (300–400 words) can be directed to the Editor. If you have already written the paper, please submit it for consideration via our [online system](http://webshop.elsevier.com/languageservices) to provide an English translation of their manuscript for submission.

**Title page**

- A brief title, author name(s), preferred degree (one only), affiliation(s), and full address(es) of the authors must be included. The name and address of the corresponding author should be separately and clearly indicated along with email and telephone details.

**Formatting of text**

- Type a single space at the end of each sentence.
- Do not use bold face for emphasis within text.
- Do not worry about type of font or point size.
- We use a comma before the final “and” or “or” in a list of items.
- Type decimal points midline (ie, 23.4, not 23 4). To create a midline decimal on a PC: hold down ALT key and type 0183 on the number pad, or on a Mac: ALT shift 9.
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables.
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph.
- Do not use the automated features of your software, such as hyphenation, endnotes, headers, or footers (especially for references). Please use page numbering.

**References**

- Cite references in the text sequentially in the Vancouver numbering style, as a superscripted number after any punctuation mark. For example: “...as reported by Saito and colleagues.”
- Two references are cited separated by a comma, with no punctuation mark. For example: “...as reported by Saito and colleagues.”
- Reference lists from journals or books) of the material covered, and the criteria used to include or exclude studies. Citations to papers published in non-peer-reviewed supplements are discouraged. Since these papers should be comprehensive, we encourage citation of publications in non-English languages. An example is shown below:

**Search strategy and selection criteria**

References for this Review were identified through searches of PubMed with the search terms “young onset”, “early onset”, “presenile”, and “dementia” from 1995 until April, 2019. Articles were also identified through searches of the authors’ own files. Only papers published in English were reviewed. The final reference list was generated on the basis of originality and relevance to the broad scope of this Review.

**Health Policies**

Health Policy papers should cover developments in regional health related to policy, guideline development, health systems, or economics. Manuscripts considered for this section are narrative reviews (not original research) and should follow the same guidelines as a Review. Please contact the Editor before submitting to ensure the proposed topic is suitable.

**Formatting guidelines**

**Language**

- Manuscripts should be submitted in English. Authors writing in Chinese, Portuguese, or Spanish may wish to use the Webshop (http://webshop.elsevier.com/languageservices) to provide an English translation of their manuscript for submission.

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Health Policy papers should cover developments in regional health related to policy, guideline development, health systems, or economics. Manuscripts considered for this section are narrative reviews (not original research) and should follow the same guidelines as a Review. Please contact the Editor before submitting to ensure the proposed topic is suitable.

**Formatting guidelines**

**Language**

- Manuscripts should be submitted in English. Authors writing
References

- Numbered in order of mention in appendix and numbered separately from references in the full paper

Figures

- All images must have a minimum resolution of 300 dpi, width 107 mm
- Main figure heading should be in 10 point Times New Roman font BOLD
- Legends should be in 10 point, single spaced
- Be consistent with the font size throughout.
- Use lowercase font (a, b, c…) to denote individual panels in a composite figure.
- Do not add box outline to graphs.
- Do not use titles in the graph or artwork. Titles should appear at the beginning of the figure legend.
- Nomenclature and abbreviations should be consistent with the text.
- All figure panels must be on a single page (one figure per page, please)

Audio/video material

- The paper to which the audio or video clip relates should be mentioned in the recording
- Audio clip and video files should be accompanied with brief text explaining the content of the audio, names of interviewers/ interviewees, date of recording, and place of recording if relevant
- Written consent from all parties must be obtained (see also the above section on Patient and other consents)

Audio

- Audio material submitted as an mp3 file, no larger than 50 Mb
- Your paper may be selected for a podcast. If so, the Web Editor will contact you to arrange a pre-recorded interview to discuss your paper. For more information, see Audio

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- Video material should be submitted in .mp4 format with aspect ratio of 16:9, and be no larger than 50 Mb
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- All video files can be submitted alongside your article in EM

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**How The Lancet Regional Health – Western Pacific handles your paper**

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- The Lancet Regional Health – Western Pacific operates a single blind review process.
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- Submissions that survive in-house and peer review might be referred back to authors for revision. This is an invitation to present the best possible paper for further scrutiny by the journal; it is not an acceptance.
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- Two copies of the revised version should be sent back, one of which should be highlighted to show where changes have been made. Detailed responses to reviewers’ comments, in a covering letter, are also necessary.

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want your paper entered into such a study, please let us know in your covering letter. Your decision to take part or not will have no effect on the editorial decision on your paper.

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