INSTRUCTIONS FOR AUTHORS

General Policy

IN VIVO (IV) is a multidisciplinary journal designed to bring together original high quality works and reviews on experimental and clinical biomedical research within the frames of human physiology, pathology and disease management. The topics of IN VIVO include: 1. Experimental development and application of new diagnostic and therapeutic procedures; 2. Pharmacological and toxicological evaluation of new drugs, drug combinations and drug delivery systems; 3. Clinical trials; 4. Development and characterization of models of biomedical research; 5. Cancer diagnosis and treatment; 6. Immunotherapy and vaccines; 7. Radiotherapy, Imaging; 8. Tissue engineering, Regenerative medicine; 9. Carcinogenesis; 10. Retrospective studies and case reports. 11. Abstracts and conference proceedings of scientific meetings, following consideration and approval by the Editorial Board. Each article should include a concrete conclusion constituting of a "new piece of knowledge" backed up by unambiguous and accurate scientific evidence. The principal aim of IN VIVO is to provide prompt online publication for accepted articles, generally within 1-2 months from final acceptance.

Manuscripts will be accepted on the understanding that they report original unpublished works that are not under consideration for publication by another journal, and that they will not be published again in the same form. All authors should sign a submission letter confirming the approval of their article contents. All material submitted to IN VIVO will be subject to peer-review, when appropriate, by two to three suitable referees. All manuscripts submitted to IN VIVO are urgently treated with absolute confidence, with access restricted to the Managing Editor, the journal’s secretary, the reviewers and the printers. The Editors reserve the right to improve manuscripts on grammar and style.

IV requires that all manuscripts be prepared in accordance with the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals” (https://www.icmje.org/icmje-recommendations.pdf) as published by the International Committee of Medical Journal Editors (ICMJE). We also support and adhere to the “Principles of Transparency and Best Practice in Scholarly Publishing” (https://publicationethics.org/resources/guidelines/principles-transparency-and-best-practice-scholarly-publishing) (a joint statement by COPE, DOAJ, WAME, and OASPA).

The Editors and Publishers of IN VIVO accept no responsibility for the contents and opinions expressed by the contributors. Authors should warrantee due diligence in the creation and issuance of their work.

IV appears bimonthly as an online-only open access journal through HighWire Press. All articles are published with gold open access, which means that the final published version is permanently and freely available to anyone. Our open access articles are distributed under the terms and conditions of the Creative Commons Attribution (CC BY-NC-ND) 4.0 international license (https://creativecommons.org/licenses/by-nc-nd/4.0). Upon acceptance, Authors will be asked to pay an online publication fee of USD 850.00 for articles up to 8 online pages (including figures and tables). Each additional excess page will be charged USD 60.00. Color will not be charged. Authors from developing countries may apply for a 25% discount after the acceptance of their paper.

Manuscript Format

Three types of papers may be submitted: (i) Full papers containing completed original work, (ii) review articles concerning fields of recognisable progress, and (iii) letters to the Editor. Papers should contain all essential data in order to make the presentation clear. Reasonable economy should be exercised with respect to the number of tables and illustrations used. Papers should be written in clear, concise American English.

Sections

All manuscripts should be divided into the following sections:

a. First page including (i) the title of the presented work [not exceeding fifteen (15) words], (ii) full names and affiliations of all authors (with a maximum of 20 authors), (iii) name of the corresponding author(s) (with a maximum of 2 corresponding authors) to whom proofs are to be sent (with affiliation, full postal address, telephone and e-mail), (iv) key words, (v) an abbreviated running title, (vi) an indication “review”, “clinical”, “epidemiological”, or “experimental” study, and (vii) the date of submission. Note: The order of the authors is not necessarily indicative of their contribution to the work. Authors may note their individual contribution(s) in the appropriate section(s) of the presented work. Affiliations should be indicated with a superscript number immediately after each author's name and in front of the appropriate address. Affiliations should not include street, box number or postal (zip) code.

b. Abstract not exceeding 250 words, organized according to the following headings: Background/Aim – Materials and Methods/Patients and Methods – Results – Conclusion. For Case Reports the structure should be as follows: Background/Aim – Case Report – Conclusion.

c. Introduction;

d. Materials and Methods/Patients and Methods/Case Report;

e. Results (not needed in a Case Report);

f. Discussion;

g. Conclusion;

h. Conflicts of Interest;

i. Authors’ Contributions;

j. Acknowledgements;

k. Funding;

l. References.
All pages must be numbered consecutively. Footnotes should be avoided. Review articles may follow a different style according to the subject matter and the author’s opinion.

**Headings and Subsections**
The article should be divided into clearly defined unnumbered sections. Main headings should be typed in bold on a separate line on the left of the page. The subheadings should be typed in bold italics at the left of the page on a separate line, and only the first word should begin with a capital letter. The sub-subheadings should be typed in italics on a new line, aligned full left. The text should start on the same line with subheadings and sub-subheadings.

**Figures**
All figures should appear at the end of the submitted document file and should be numbered with Arabic numerals (1, 2, 3, etc.) according to their sequence in the text. Once a manuscript is accepted all figures and graphs should be submitted separately in either jpg, tiff, or pdf format and at a minimum resolution of 300 dpi. Graphs must be submitted as pictures made from drawings and must not require any artwork, typesetting, or size modifications. Symbols, numbering, and lettering should be clearly legible. The number and top of each figure must be indicated.

**Tables**
All tables should appear at the end of the submitted document file and should be numbered with Latin numerals (I, II, III, etc.) according to their sequence in the text. Once a manuscript is accepted, each table should be submitted separately in an editable format, typed double-spaced. Tables should include a short title. Tables should not be divided into two or more parts, should not contain vertical rules, and the main body of the table should not contain horizontal rules.

**Numerals**
The authors should write numbers of 10 or more as numerals except at the beginning of a sentence. Numbers one to nine should be written in words, unless they precede units of measure or are used as designators. The authors should use decimal points (not decimal commas) and a comma for thousands (1,000 and above). Decimals should not be quoted with naked points, for example the authors should quote 0.01, not .01. p-Values for significant outcomes can be quoted as below a threshold significance value (e.g., p<0.05, 0.01, 0.001), but wherever possible should be quoted as an exact probability value. Departure from a significance threshold of 0.05 should be stated and justified in the Methods. Nonsignificant outcomes should be indicated with an exact probability value whenever possible, or as NS or p>0.05, as appropriate for the test.

**Supplementary Material**
The journal does not have provision for use of supplementary material (Tables, Figures, Videos, or other material). The authors may (i) include their supplementary Tables/Figures as standard material or (ii) provide their own http/ftp link and upload the material on a website maintained by the authors (in this case the links for the supplementary material are given at the end of the paper under the section “Supplementary Material”) or (iii) exclude the material from publication and provide it only for Reviewers’ attention.

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All authors will be asked to supply authors’ contributions and conflicts of interest information. We encourage authors to outline their individual contributions to the paper using the relevant CRediT roles: Conceptualization; Data curation; Formal analysis; Funding acquisition; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization; Roles/Writing - original draft; Writing - review & editing.

**References**
Authors must assume responsibility for the accuracy of the references used. Citations for the reference sections of submitted works should follow the form below and must be numbered consecutively. In the text, references should be cited by number in parenthesis, e.g., (1, 2). Examples:


**Nomenclature and Abbreviations**
nomenclature may be obtained from http://www.informatics.jax.org/. Standard abbreviations are preferable. The authors should define abbreviations that are not standard in this field at their first mention in the abstract, main text, Figures and Table legends, and should ensure consistency of abbreviations throughout the article.

Definitions
Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). In humans, a binary sex categorization (male/female) is usually designated at birth ('sex assigned at birth'), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviours and identities of women, men, and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. The terms 'sex' and 'gender' can be ambiguous; thus, it is important for authors of studies on human subjects to define the way they are used.

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Please follow the Instructions for Authors regarding the format of your manuscript and references. Manuscripts must be submitted only through our online submission system at: http://www.iiar-submissions.com/login.html
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If the Editor feels that the submitted manuscript is more suitable for an alternative journal, the authors might be asked to consider transferring the manuscript to such a journal. If they agree, the manuscript will be transferred, though the authors will have the opportunity to make changes to the manuscript before the submission is complete. The manuscript will be independently reviewed by the new journal.

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When the authors revise their paper, they need to prepare a detailed explanation of how they have dealt with the reviewers' comments and include their response in the first page of the revised manuscript file. In addition, the authors should use the reviewers’ edited manuscript file for their corrections (not the original submitted file) and submit online a highlighted version of their revised manuscript. For the highlighted version, the authors may use the Track Changes tool in MS Word or highlight their changes in yellow.

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3. Each manuscript submitted to IV is sent for peer-review (single-blind) in confidence to two-three suitable referees with the request to return the manuscript with their comments to the Editorial Office within 12 days from receipt. If reviewers need a longer time or wish to send the manuscript to another expert, the manuscript may be returned to the Editorial Office with a delay. All manuscripts submitted to IV, are treated in confidence, without access to any person other than the Managing Editor, the journal’s secretary, the reviewers, and the printers.
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   • The Instructions to Authors must be followed in every detail.
   • The presentation of the experimental methods should be clear and complete in every detail facilitating reproducibility by other scientists.
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   • Results given in figures should not be repeated in tables.
   • Figures (graphs or photographs) should be prepared at a width of 8 or 17 cm with legible numbers and lettering.
   • Photographs should be clear with high contrast, presenting the actual observation described in the legend and in the text. Each legend should provide a complete description, being self-explanatory, including technique of preparation, information about the specimen and magnification.
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Fidelity of the techniques and reproducibility of the results should be points of particular importance in the discussion section. Authors are advised to check the correctness of their methods and results carefully before writing an article. Probable or dubious explanations should be avoided.

Authors should not cite results submitted for publication in the reference section. Such results may be described briefly in the text with a note in parenthesis (submitted for publication by… authors, year).

References. Each article should address, list, and discuss the entire spectrum of current publications relevant to its field. All cited references must provide sufficient and valid peer-reviewed results leading to clear and reliable conclusions.

By following these instructions, Authors will facilitate a more rapid review and processing of their manuscripts and will provide the readers with concise and useful papers.

6. Following review and acceptance, a manuscript is examined in language and style, and galley proofs are rapidly prepared. Second proofs are not sent unless required.

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[Rejection rate (2022): 65%].

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10. Authors may inquire information about the status of their manuscript(s) by sending an e-mail to journals@iivar-anticancer.org

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This text is a combination of advice and suggestions contributed by Editors, Authors, Readers, and the Managing Editor of IV.
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General Policy
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Authors must adhere to ethical principles in the conduct of their research, including obtaining informed consent from human subjects, minimizing harm to subjects, and protecting their privacy and confidentiality.

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Animal research must follow ethical guidelines for the care and use of laboratory animals, including minimizing harm and discomfort to animals and using alternatives to animals whenever possible. The journal may require authors to provide evidence of compliance with ethical guidelines and may reject manuscripts that do not comply. Research involving animals must adhere to the “Guiding Principles in the Care and Use of Animals” (https://journals.physiology.org/doi/full/10.1152/ajpregu.00279.2002) approved by the Council of the American Physiological Society. The use of animals in biomedical research should be under the careful supervision of a person adequately trained in this field and the animals must be treated humanely at all times.

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All clinical trials submitted to IV have to be registered in a public registry prior to submission and the trial registry number must be included in the submitted article. Our journal is in accordance with the trials registration policy of the ICMJE (https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html). Acceptable registries must meet the following ICMJE requirements: be accessible to the public at no charge, be open to all prospective registrants, be managed by a not-for-profit organization, have a mechanism to ensure the validity of the registration data, and be electronically searchable. An acceptable registry must include the minimum 24-item trial registration data set (https://prsinfo.clinicaltrials.gov/trainTrainer/WHO-ICMJE-ClinTrialsgov-Cross-Ref.pdf) at the time of registration and before enrollment of the first participant. Examples of registries that meet these criteria include ClinicalTrials.gov, the Cochrane Ren Group Registry, the International Standard Randomized Controlled Trial Number Registry, and the European Clinical Trials Database. Randomised Controlled Trials (RCTs) must adhere to the CONSORT statement (https://www.equator-network.org/reporting-guidelines/consort/).

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Peer review is an essential part of the scholarly publishing process, helping to ensure the quality and integrity of published research. The primary purpose of peer review is to evaluate manuscripts for scientific validity, originality, and significance, and to provide constructive feedback to authors. There are different types of peer review, and IV uses the single-blind, where the reviewers' identities are concealed from the authors. Reviewers are typically selected based on their expertise and qualifications in the relevant field, and may include both academic researchers and professionals from industry or government. The journal may also consult with the authors, editors, or other experts in selecting reviewers. Reviewers are asked to evaluate manuscripts based on a set of criteria that may include scientific validity, originality, significance, methodology, and interpretation of results. They are also asked to provide feedback to the authors, including suggestions for improving the manuscript. Reviewers are expected to maintain confidentiality and avoid conflicts of interest when evaluating manuscripts. They should disclose any conflicts of interest or other potential biases that may affect their objectivity. Authors are expected to cooperate with the peer review process and respond constructively to feedback from reviewers. They may be asked to provide additional information or clarify aspects of the manuscript. The editor-in-chief or other editorial staff are responsible for making final decisions on manuscripts based on the feedback provided by reviewers. They may consult with additional experts or the authors as part of this process. Peer review is a valuable tool for evaluating the quality and validity of research, but it has limitations. It is not foolproof and may not catch all errors or ethical concerns. Additionally, the subjective nature of review criteria means that different reviewers may have different opinions on the same manuscript.

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Devitalization of Glioblastoma Cancer Cells by Non-invasive Physical Plasma: Modulation of Proliferative Signalling Cascades. S. LEHMANN, S. BIEN-MÖLLER, S. MARX, S. BEKESCHUS, H.W.S. SCHROEDER, A. MUSTEA, M.B. STOPE (Greifswald; Bonn, Germany; Boston, MA, USA)

Appraising Animal Models of Prostate Cancer for Translational Research: Future Directions. E. NASCIMENTO-GONCALVES, F. SEIXAS, R.M.G. DA COSTA, M.J. PIRES, M.J. NEUPARTH, D. MOREIRA-GONCALVES, M. FARDILHA, A.I. FAUSTINO-ROCHA, B. COLACO, R. FERREIRA, P.A. OLIVEIRA (Vila Real; Aveiro; Porto; Oporto; Portugal; São Luís, Brazil)

Effect of Antibiotic Treatment on Attenuated Salmonella typhimurium VNP20009 Mediated Schwannoma Growth Control. S.G. AHMED, G.J. BRENNER (Boston, MA, USA)


Measurable Residual Disease Assessment Using Next-Generation Flow in Patients With Relapsed and Refractory Multiple Myeloma Treated With a Combination of Carfilzomib, Lenalidomide, and Dexamethasone. T. YOROIDAKA, T. YAMASHITA, R. MURATA, K. YOSHIHARA, S. YOSHIHARA, M. UEDA, S. NAKAO, K. MATSUE, H. TAKAMATSU (Ishikawa; Hyogo; Chiba, Japan)


The Prognostic Value of Plasma Small Extracellular Vesicles’ Phenotype in Patients With Gastrointestinal Stomal Tumor. C.M. BRINCH, E. HOGDALL, P. DE HEER, L. PENNINGA, R. BEK, M.M. JORGENSEN, B.E. ENGELMANN, P.B. ROSEN, H.J. MORTENSEN, A. KRARUP-HANSEN, N. AGGERHOLM-PEDERSEN (Herlev; Copenhagen; Aalborg; Aarhus, Denmark)

Disparities in Time to Treatment for Breast Cancer. K. SUKNIAM, A.A. KASBI, M.A. ASHARY, K. POPP, K. ATTWOOD, A. GEORGE, E. GABRIEL (Siwanee, GA; Jacksonville, FL; Buffalo, NY, USA)

PTX Treatment of Colon Cancer: Mode of Action Based on Tumor Marker and Cytokine Kinetics. A. MEIROVITZ, L. BAIDER, T. PERETZ, S. STEPHANOS, V. BARAK (Jerusalem, Israel; Ulm, Germany)

Analysis of Clinical Factors in Olaparib-related Anemia Using Adverse Drug Event Reporting Databases. C. SHIRAISHI, T. HIRAI, T. OGURA, T. IWAMOTO (Tsu, Japan)
Selection of Recent Articles

Translational Research for Identifying Potential Early-stage Prostate Cancer Biomarkers. N. NAKAMURA, P. ROGERS, R. EGGERSON, S.R. POST, R. DAVIS (Jefferson; Little Rock, AR, USA)

Evaluating the Impacts of CYP3A4*1B and CYP3A5*3 Variations on Pharmacokinetic Behavior and Clinical Outcomes in Multiple Myeloma Patients With Autologous Stem Cell Transplant. J. LI, Y.K. CHO, D.W. SBOROV, M.A. PHELPS, C.C. HOFMEISTER, M.J. POI (Columbus, OH; Salt Lake City, UT; Atlanta, GA, USA)

Rab27b, a Regulator of Exosome Secretion, Is Associated With Peritoneal Metastases in Gastric Cancer. S. NAMBARA, T. MASUDA, K. HIROSE, Q. HU, T. TOBO, Y. OZATO, J. KURASHIGE, Y. HIRAKI, Y. HISAMATSU, T. IGUCHI, K. SUGIMACHI, E. OKI, T. YOSHIZUMI, K. MIMORI (Beppu; Fukoaka; Kumamoto, Japan)

Concurrent Reduced Expression of Contiguous PKD1, TSC2 and NTHL1 Leading to Kidney Diseases and Multiple Diverse Renal Cancers. S. MEGURO, K. TOMOYUKI, Y. HAKOZAKI, A. ONAGI, K. MATSUOKA, S. HOSHI, J. HATA, Y. SATO, H. AKAIHATA, M. KATAOKA, S. OGAWA, Y. KOJIMA (Fukushima, Japan)

Neoplasia-associated Chromosome Translocations Resulting in Gene Truncation. I. PANAGOPoulos, S. HEIM (Oslo, Norway)


Mapping Proteome Changes in Microsatellite Stable, Recurrent Colon Cancer Reveals a Significant Immune System Signature. M. BERLE, K.E. HESTETUN, H. VETHE, S. CHERA, J.A. PAULO, O. DAHL, M.P. MYKLEBUST (Bergen, Norway; Geneva, Switzerland; Boston, MA, USA)

Expression of DNA Mismatch Repair Proteins, PDL1 and PDL1 in Barrett’s Neoplasia. J.J. SALLER, L.B. MORA, A. NASIR, Z. MAYER, M. SHAHID, D. COPPOLA (Tampa; Bradenton; Gainesville, FL, USA)

Biomarker Expression Profiling in Cervix Carcinoma Biopsies Unravels WT1 as a Target of Artsunate. M.E.M. SAEED, C. CIVES-LOSADA, T. EFFERTH (Mainz, Germany; Salamanca, Spain)

Mutational Signatures Associate With Survival in Gastrointestinal Carcinomas. P. KARHTALA, K. PORVARI, O. KILPIVAARA (Helsinki; Oulu, Finland)

Long Non-coding RNAs With In Vitro and In Vivo Efficacy in Preclinical Models of Esophageal Squamous Cell Carcinoma Which Act by a Non-microRNA Sponging Mechanism. U.H. WEIDLE, F. BIRZELE (Penzberg, Germany; Basel, Switzerland)

Palmitylation of the Alternative Amino Terminus of the BTK-C Isoform Controls Subcellular Distribution and Signaling. M. KOKABEE, X. WANG, E. VOORAND, E. ALIN, L. KOKABEE, F. KHAN, S. DESROSiers, D.S. CONKLIN (Rensselaer, NY, USA)

Requirement of CLIC4 Expression in Human Colorectal Cancer Cells for Sensitivity to Growth Inhibition by Fucoxanthinol. R. YOKOYAMA, A. KUSHIBIKI, S. YAMADA, A. KUBOTA, H. KOJIMA, T. OHTA, J. HAMADA, H. MAEDA, M. MUTOH, M. TERASAKI (Hokkaido; Aomori; Tokyo, Japan)

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- **Selection of Recent Articles**

  - **KIFC1: A Reliable Prognostic Biomarker in Rb-positive Triple-negative Breast Cancer Patients Treated With Doxorubicin in Combination With Abemaciclib. B. FLEISHER, C. WERKMAN, B. JACOBS, J. VARKEY, K. TAHA, S. AIT-OUDHIA (Orlando, FL; Kenilworth, NJ, USA)**


  - Endometrial Cancer Incidence in Patients With Atypical Endometrial Hyperplasia According to Mode of Management. A. BARAKAT, A. ISMAIL, S. AIT-OUDHIA, Y. SAMHOURI (Pittsburgh, PA, USA)


  - CD103+ T Cells May Be a Useful Biomarker in Borrmann Type 4 Gastric Cancer. T. MORI, H. TANAKA, S. MIYAZAKI, M. YOSHI, T. TAMURA, T. TOYOKAWA, S. LEE, K. MUGURUMA, M. OHIRA (Osaka, Japan)

  - Appropriate Patient Status for Ra-223 Treatment in the Treatment Sequence for Castration-resistant Prostate Cancer. H. ITO, H. YAEGASHI, Y. OKADA, T. SHIMADA, T. YAMAOKA, K. OKUBO, T. SAKAMOTO, A. MIZOKAMI (Kyoto; Kanazawa, Japan)

  - Real-time IR700 Fluorescence Imaging During Near-infrared Photoimmunotherapy Using a Clinically-approved Camera for Indocyanine Green. S. OKUYAMA, D. FUJIMURA, F. INAGAKI, R. OKADA, Y. MARUOKA, H. WAKIYAMA, T. KATO, A. FURUSAWA, P.L. CHOYKE, H. KOBAYASHI (Kyoto; Japan; Bethesda, MD, USA)

  - Cannabidiol May Prolong Survival in Patients With Glioblastoma Multiforme. R. LIKAR, M. KOESTENBERGER, M. STUTSCHNING, G. NAHLER (Klagenfurt am Wörthersee; Graz; Vienna, Austria)
