Future meetings

- November 2–4, 2007
  Bournemouth, UK
  13th NPPG Conference
  www.nppg.org.uk

- June 4–7, 2008
  Rotterdam, The Netherlands
  11th Congress of the ESDP

- July 26–27, 2008
  Toronto, Canada
  6th International Workshop on Paediatric Clinical Trials
  Organised by the ACRP and PPDT
  www.acrpnet.org

- July 27–August 1, 2008
  Quebec, Canada
  9th World Congress on Clinical Pharmacology and Therapeutics
  www.cpt2008.org

- Summer 2009
  Paris, France
  12th Congress of the ESDP

- July 17–23, 2010
  Copenhagen, Denmark
  16th World Congress on Basic and Clinical Pharmacology
  www.worldpharma2010.org

Paediatric and Perinatal Drug Therapy

Instructions to Authors

1. All manuscripts should be in the English language. They should be submitted to Imti Choonara, Academic Division of Child Health, (University of Nottingham) The Medical School, Derbyshire Children's Hospital, Uttoxeter Road, Derby DE22 3DT, UK (Email: imti.choonara@nottingham.ac.uk). Manuscripts from North America should be submitted to Professor Michael Rieder, Department of Paediatrics, University of Western Ontario, Children's Hospital of Western Ontario, 800 Commisioners Road East, London, Canada N6C 2V5 (Email: mrieder@.uwo.ca). *Paediatric and Perinatal Drug Therapy* is published, produced and distributed by Informa Healthcare, Telephone House, 69–77 Paul Street, London EC2A 4LQ, UK. Tel: +44 (0) 20 7017 7665; Fax: +44 (0) 20 7017 7831.
2. Electronic submission of manuscripts facilitates rapid publication. Most common word-processor formats are acceptable, although Microsoft Word is preferred. If electronic submission is not possible, then a single copy of the manuscript with an accompanying disk is acceptable. The manuscript should be double-spaced and on one side of the paper only. Each paper should contain the following: (a) a short descriptive title, (b) the name(s) and initials of the author(s), (c) the Centre at which the work was carried out or the location of the author(s), (d) a summary or abstract of the main facts and results (e), an Introduction, (f) separate main sections, (g) a final Discussion or Conclusions section, (h) any acknowledgements and (i) full references to relevant material in the text. Authors are also requested to supply approximately six 'key words', in English, preferably from the Index Medicus Medical Subject Heading (MeSH) list.
3. All drugs and other compounds should be referred to by their internationally accepted generic names and not by individual company trade marks, unless it is essential for clarity, as in the case of combination products, or to avoid confusion, e.g. between different formulations. Specialised abbreviations and symbols should not be used unless first explained in the text. Dosages and measurements should be given in the units in which they were made, but non-metric units should be accompanied by metric (SI) equivalents.
4. Acknowledgement must be given by authors of grants, fellowships, or any commercial assistance received or of any affiliation which is relevant to the work reported.
5. All references should be individually numbered in Arabic numerals and cited where they appear in the text. At the end of the paper, references should be listed in strict numerical order. The names of all authors for each reference must be given (unless there are six or more, in which case the first three should be listed, followed by 'et al'.). They should be followed by: (a) the full title of the paper, (b) the abbreviated title of the journal (ANSI/BSI system), (c) the year of publication, and (d) the volume and page number(s). Reference to books must give the publisher, place and year of publication, name(s) of the editor(s) where authorship is multiple, and first page number of chapter referred to.
6. All tables and illustrations should be provided with short descriptive legends, numbered consecutively, and their relevant position in the text clearly indicated. Tables should have concise headings to all columns and be identified by Arabic numerals, e.g. Table 2. They should be supplied within the files on disk in cellular form rather than in simple tabbed form. Line diagrams should be supplied both as files on disk in either .TIF or .EPS format and in the format of the program used to produce them. If this is not possible, they should be supplied in a suitable finished form for reproduction and in proportion to the single-column width (80 mm) or double-column width (165 mm). Photographic illustrations will usually be accepted. Illustrations should also be identified by Arabic numerals, e.g. Figure 2.
7. Papers are published on the understanding that their copyright becomes the property of the Publishers once they are accepted for publication. Authors must state clearly if the paper is being actively considered for publication or has been published elsewhere in the world. If subject to copyright (and this includes illustrations), copyright clearance is the sole responsibility of the author and must be supplied in writing to the Publishers. Papers first published in *Paediatric and Perinatal Drug Therapy* must not be translated, abridged or reprinted in any form elsewhere in the world without the written consent of the Publishers.
8. Proofs in page form will be sent to the main author for checking provided that this will not result in delayed publication of any issue of the journal. If, because of postal delays, etc. time is limited, the Publishers reserve the right to have proofs checked against original manuscripts by their editorial staff and/or the editors. No major alterations to text will be accepted at proof stage.