## INSTRUCTIONS FOR CONTRIBUTORS

## SUBMISSION OF MANUSCRIPTS

Manuscripts should be submitted online via our manuscript submission and tracking site, http://www.editorialmanager.com/psm/. Full instructions for electronic submission are available directly from this site. To facilitate rapid reviewing, communications for peer review will be electronic and authors will need to supply a current e-mail address when registering to use the system.

Papers for publication from Europe (except those on genetic topics, irrespective of country), and all papers on imaging topics, should be submitted to the UK Office.

Papers from the Americas, Asia, Africa, Australasia and the Middle East (except those dealing with imaging topics), and all papers dealing with genetic topics, irrespective of country, should be sent to US Office.

Generally papers should not have text more than 4500 words in length (excluding these sections) and should not have more than a combined total of 5 tables and/or figures. Papers shorter than these limits are encouraged. For papers of unusual importance the editors may waive these requirements. A structured abstract of no more than 250 words should be given at the beginning of the article using the headings: Background; Methods; Results; Conclusions. The name of an author to whom correspondence should be sent must be indicated and a full postal address given in the footnote. Any acknowledgements should be placed at the end of the text (before the References section).

Declaration of Interest: A statement must be provided in the acknowledgements listing all financial support received for the work and, for all authors, any financial involvement (including employment, fees, share ownership) or affiliation with any organization whose financial interests may be affected by material in the manuscript, or which might potentially bias it. This applies to all papers including editorials and letters to the editor.

Contributors should also note the following:

- 1. S.I. units should be used throughout in text, figures and tables.
- 2. Authors should spell out in full any abbreviations used in their manuscripts.
- 3. Foreign quotations and phrases should be followed by a translation.
- 4. If necessary, guidelines for statistical presentation may be found in: **Altman DG, Gore SM, Gardner MJ & Pocock SJ** (1983). Statistical guidelines for contributors to medical journals. *British Medical Journal* 286, 1489–1493.

**REFERENCES** (1) The Harvard (author-date) system should be used in the text and a complete list of References cited given at the end of the article. In a text citation of a work by more than two authors cite the first author's name followed by et al. (but the names of all of the authors should be given in the References section). Where several references are cited together they should be listed in rising date order. (2) The References section should be supplied in alphabetical order (authors' names in **bold**, journal titles in full), following the text. Some examples follow:

Miller PM, Byrne M, Hodges A, Lawrie SM, Johnstone EC (2002). Childhood behaviour, psychotic symptoms and psychosis onset in young people at high risk of schizophrenia: early findings from the Edinburgh high risk study. *Psychological Medicine* 32, 173–179.

Cleckley HJ (1941). The Mask of Sanity, 2nd edn. Mosby: St. Louis, MO.

Brewer WJ, Wood SJ, DeLuca C, Pantelis C (2006). Models of olfaction for exploring neurodevelopment. In *Olfaction and the Brain* (ed. W. J. Brewer, D. Castle and C. Pantelis), pp. 97–121. Cambridge University Press: Cambridge.

(3) Online citations

doi (when published online prior to printed issue)

Lauritsen MB, Pedersen CB, Mortensen CB (2004). The incidence and prevalence of pervasive developmental disorders: a Danish population-based study. *Psychological Medicine*. Published online: 21 October 2004. doi:10.1017/S0033291704002387.

URL

World Bank (2003). Quantitative techniques for health equity analysis – Technical Notes (http://siteresources.worldbank. org/INTPAH/Resources/Publications/Quantitative-Techniques/health.eq tn07.pdf). Accessed 15 February 2006.

[Authors are requested to print-out and keep a copy of any online-only material, in case the URL changes or is no longer maintained.]

FIGURES AND TABLES Only essential figures and tables should be included. Further tables, figures, photographs and appendices, may be included with the online version on the journal website. To ensure that your figures are reproduced to the highest possible standards, Cambridge Journals recommends the following formats and resolutions for supplying electronic figures. Please ensure that your figures are saved at final publication size and are in our recommended file formats. Following these guidelines will result in high quality images being reproduced in both the print and the online versions of the journal. Line artwork: Format: tif or eps, Colour mode: black and white (also known as 1-bit), Resolution: 1200 dpi; Combination artwork (line/tone): Format: tif or eps, Colour mode: grayscale (also known as 8-bit), Resolution: 800 dpi; Black and white halftone artwork: Format: tif, Colour mode: grayscale (also known as 8-bit), Resolution: 300 dpi; Colour halftone artwork: Format: tif, Colour mode: CMYK colour, Resolution: 300 dpi. All photographs, graphs, and diagrams should be referred to as figures and should be numbered consecutively in Arabic numerals. Captions for figures should be typed double-spaced on separate sheets. Tables Tables should be typed above the table.

**PROOFS AND OFFPRINTS** Page proofs will be sent to the author designated to receive correspondence. corrections other than to printer's errors may be charged to the author. The corresponding author of each paper will receive a PDF file of their article and hard copy offprints may be purchased if they are ordered on the form supplied when the proof is returned.

## PSYCHOLOGICAL MEDICINE

## CONTENTS

EDITORIAL  The cumulative effect of reporting and citation biases on the apparent efficacy of treatments: the case of depression de Vries YA, Roest AM, de Jonge P, Cuijpers P, Munafò MR & Bastiaansen JA	2453	Moderation of prior exposure to trauma on the inverse relationship between callous-unemotional traits and amygdala responses to fearful expressions: an exploratory study  Meffert H, Thornton LC, Tyler PM, Botkin ML, Erway AK, Kolli V, Pope K, White SF & Blair RJR	2541
REVIEW ARTICLES Is self-guided internet-based cognitive behavioural therapy (iCBT) harmful? An individual participant data meta-analysis Karyotaki E, Kemmeren L, Riper H, Twisk J, Hoogendoorn A, Kleiboer A, Mira A, Mackinnon A, Meyer B, Botella C, Littlewood E, Andersson G, Christensen H, Klein JP, Schröder J, Bretón-López J, Scheider J, Griffiths K, Farrer L, Huibers MJH, Phillips R, Gilbody S, Moritz S, Berger T, Pop V, Spek V & Cuijpers P	2456	The role of sleep difficulties in the vasomotor menopausal symptoms and depressed mood relationships: an international pooled analysis of eight studies in the InterLACE consortium Chung H-F, Pandeya N, Dobson AJ, Kuh D, Brunner EJ, Crawford SL, Avis NE, Gold EB, Mitchell ES, Woods NF, Bromberger JT, Thurston RC, Joffe H, Yoshizawa T, Anderson D & Mishra GD	<b>al</b> 2550
Dissociation in victims of childhood abuse or neglect: a meta-analytic review  Vonderlin R, Kleindienst N, Alpers GW, Bohus M, Lyssenko L & Schmahl C  Social anxiety in the eating disorders: a systematic review and meta-analysis	2467	What life course theoretical models best explain the relationship between exposure to childhood adversity and psychopathology symptoms: recency, accumulation, or sensitive periods?  Dunn EC, Soare TW, Raffeld MR, Busso DS, Crawford KM, Davis KA, Fisher VA, Slopen N, Smith ADAC, Tiemeier H & Susser ES	2562
Kerr-Gaffney J, Harrison A & Tchanturia K  ORIGINAL ARTICLES Resting-state thalamic dysconnectivity in schizophrenia and relationships with symptoms  Ferri J, Ford JM, Roach BJ, Turner JA, van Erp TG, Voyvodic J, Preda A, Belger A, Bustillo J, O'Leary D, Mueller BA, Lim KO, McEwen SC, Calhoun VD, Diaz M, Glover G, Greve D, Wible CG,	2477	Psychological treatments delivered by community health workers in low-resource government health systems: effectiveness of group interpersonal psychotherapy for caregivers of children affected by nodding syndrome in Uganda  Mutamba BB, Kane JC, de Jong JTVM, Okello J, Musisi S & Kohrt BA	2573
Vaidya JG, Potkin SG & Mathalon DH  The gene–environmental architecture of the development of adolescent substance use  Vitaro F, Dickson DJ, Brendgen M, Laursen B, Dionne G & Boivin M	<ul><li>2492</li><li>2500</li></ul>	Targeting habits in anorexia nervosa: a proof-of-concept randomized trial Steinglass JE, Glasofer DR, Walsh E, Guzman G, Peterson CB, Walsh BT, Attia E & Wonderlich SA  Association between alcohol and substance use disorders	2584
Association between increased serum interleukin-6 levels and sustained attention deficits in patients with major depressive disorder  Ye G, Yin GZ, Tang Z, Fu JL, Chen J, Chen, S S, Li J, Fu T, Yu X, Xu DW, Yao JK & Hui L	2508	and psychiatric service use in patients with severe mental illness: a nationwide Danish register-based cohort study Jørgensen KB, Nordentoft M & Hjorthøj C  Associations of anabolic-androgenic steroid use with	2592
Children with ADHD symptoms show deficits in reactive but not proactive inhibition, irrespective of their formal diagnosis van Hulst BM, de Zeeuw P, Vlaskamp C, Rijks Y, Zandbelt BB & Durston S	2515	other behavioral disorders: an analysis using directed acyclic graphs Kanayama G, Pope HG Jr & Hudson JI  Cognition, psychosis risk and metabolic measures in two adolescent birth cohorts	2601
Day hospital mentalization-based treatment v. specialist treatment as usual in patients with borderline personality disorder: randomized controlled trial  Laurenssen EMP, Luyten P, Kikkert MJ, Westra D, Peen J, Soons MBJ, van Dam A-M, van Broekhuyzen AJ,	0500	Ramsay H, Barnett JH, Murray GK, Miettunen J, Mäki P, Järvelin M-R, Smith GD, Ala-Korpela M & Veijola J	2609 4, 2626 2628
Blankers M, Busschbach JJV & Dekker JJM  A haplotype of the dopamine transporter gene modulates regional homogeneity, gray matter volume, and visual memory in children with attention-deficit/hyperactivity disorder  Shang CY, Lin HY, Tseng WY & Gau SS	2522 2530		
<b>5</b> , , <b>5</b>			



MIX

