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### DESCRIPTION

*Tuberculosis* is a speciality journal focusing on basic experimental research on **tuberculosis**, notably on **bacteriological**, immunological and **pathogenesis** aspects of the disease. The journal publishes original research and reviews on the **host response** and **immunology** of tuberculosis and the molecular biology, genetics and physiology of the organism.

Areas covered include: Immunology **Immunogenetics Pathogenetics Microbiology Microbial physiology Pathogenesis Pathology Molecular epidemiology Diagnostics Vaccine development Drug resistance** The resurgence of interest in tuberculosis has accelerated the pace of relevant research and *Tuberculosis* has grown with it, as the only journal dedicated to experimental biomedical research in tuberculosis.

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### IMPACT FACTOR

2016: 2.873 © Clarivate Analytics Journal Citation Reports 2017

### ABSTRACTING AND INDEXING

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**Original Articles:** The form of these articles is discussed fully below under manuscript preparation; an abstract is required.

**Letters:** Headings should not be used in a letter; no abstract or keywords are required. The text should be no more than 800 words; there should be a maximum of 5 references and one table or figure may be included.

**Reviews:** An abstract and keywords are required. The text should be divided into sections by suitable headings. Tables and figures may be used as appropriate for the text.

**Comments:** Editorial comments are generally invited by the Tuberculosis Editorial team. They are 1,500 words in length with no abstract or keywords.

**Short Communications:** These should be no more than 2,500 words, with up to 15 references and a maximum of 3 figures or tables.

It is strongly advised that Authors provide a list of 4 or 5 potential reviewers (e-mail, phone and fax numbers) who are knowledgeable in the subject matter, have no conflict of interest, and are likely to agree to review the manuscript. When submitting your manuscript please specify under which of the following categories your paper should be included if accepted for publication. This will be of great assistance to the Editors with the review process:

Reviews

Comments

Molecular Aspects

Immunological Aspects

Mechanisms of Pathogenesis

Model Systems

Bovine Tuberculosis

Diagnostics

Drug Discovery and Resistance

Host Genetics of Susceptibility

Non-tuberculous Mycobacteria

This Journal does not accept Case Reports.

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Editorial correspondence should go to the Editors-in-Chief at one of the following addresses:

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All necessary files have been uploaded:

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- Include keywords
- All figures (include relevant captions)
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- A competing interests statement is provided, even if the authors have no competing interests to declare
- Journal policies detailed in this guide have been reviewed
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##### **Ethics in publishing**

Please see our information pages on [Ethics in publishing](#) and [Ethical guidelines for journal publication](#).

##### **Ethics**

Work on human beings that is submitted to Tuberculosis should comply with the principles laid down in the Declaration of Helsinki; Recommendations guiding physicians in biomedical research involving human subjects. Adopted by the 18th World Medical Assembly, Helsinki, Finland, June 1964, amended by the 29th World Medical Assembly, Tokyo, Japan, October 1975, the 35th World Medical Assembly, Venice, Italy, October 1983, and the 41st World Medical Assembly, Hong Kong, September 1989. The manuscript should contain a statement(s) that the work has been approved by the appropriate ethical committees related to the institution(s) in which it was performed and that subjects gave informed consent to the work. Studies involving experiments with animals must state that their care was in accordance with institution guidelines.

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All randomised controlled trials submitted for publication in Tuberculosis should include a completed Consolidated Standards of Reporting Trials (CONSORT) flow chart. Please refer to the CONSORT statement website at <http://www.consort-statement.org> for more information. Tuberculosis has adopted the proposal from the International Committee of Medical Journal Editors (ICMJE) which require, as a condition of consideration for publication of clinical trials, registration in a public trials registry. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. For this purpose, a clinical trial is defined as any research project that prospectively assigns human subjects to intervention or comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. Studies designed for other purposes, such as to study pharmacokinetics or major toxicity (e.g. phase I trials) would be exempt. Further information can be found at [www.icmje.org](http://www.icmje.org).

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All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or 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 submitted.

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Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with [International Committee of Medical Journal Editors](#) recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

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Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

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Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

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