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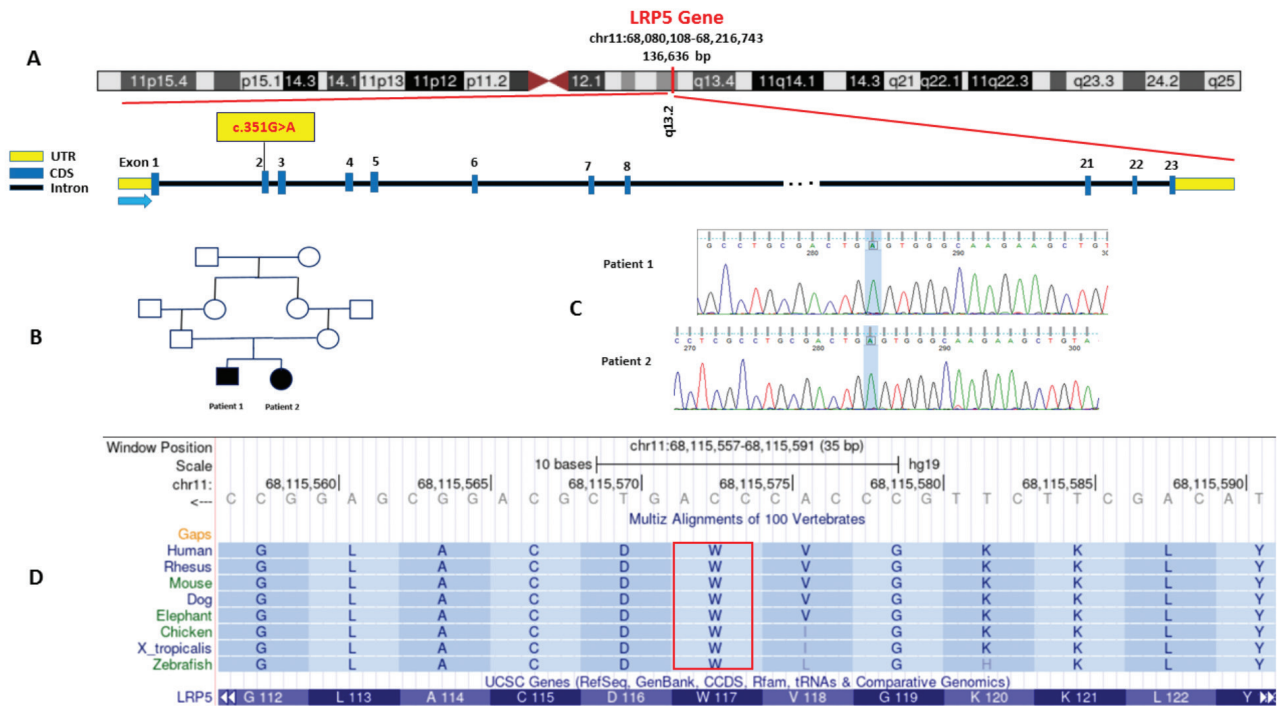
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Novel Homozygous Nonsense Mutation in the *LRP5* Gene in Two Siblings with Osteoporosis-pseudoglioma Syndrome

Heidari A et al.


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The Journal of Clinical Research in Pediatric Endocrinology (JCRPE) publishes original research articles, reviews, short communications, letters, case reports and other special features related to the field of pediatric endocrinology. JCRPE is published in English by the Turkish Society for Pediatric Endocrinology and Diabetes quarterly (March, June, September, December). The target audience is physicians, researchers and other healthcare professionals in all areas of pediatric endocrinology.

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Journal Editors (NEJM 1997; 336:309-315, updated 2001). Upon submission of the manuscript, authors are to indicate the type of trial/research and provide the checklist of the following guidelines when appropriate: Consort statement for randomized controlled trials (Moher D, Schultz KF, Altman D, for the CONSORT Group. The CONSORT statement revised recommendations for improving the quality of reports of parallel group randomized trials. JAMA 2001 ; 285 : 1987 - 91), the QUOROM statement for meta-analysis and systemic reviews of randomized controlled trials (Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF. Improving the quality of reports of meta-analyses of randomized controlled trials: the QUOROM statement. Quality of Reporting of Meta-Analyses. Lancet 1999; 354 : 1896 – 900) and the MOOSE guidelines for meta-analysis and systemic reviews of observational studies (Stroup DF, Berlin JA, Morton SC, et al. Meta-analysis of observational studies in epidemiology: a proposal for reporting Meta-analysis of observational studies in Epidemiology (MOOSE) group. JAMA 2000; 283: 2008 – 12). Keywords are included according to MeSH (Medical Subject Headings) National Library of Medicine.

Once the manuscript is accepted to be published in The Journal of Clinical Research in Pediatric Endocrinology, it receives a Digital Object Identifier (DOI) number. Uncorrected full text files can be reached online via PubMed and Ahead of Print section of the journal's website (<http://www.jcrpe.org/ahead-of-print>). All contents will be printed in black and white.

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All manuscripts must adhere to the limitations, as described below, for text only; the word count does not include the abstract, references, or figure/table legends. The word count must be noted on the title page, along with the number of figures and tables. Original Articles should be no longer than 4000 words and include no more than six figures and tables and 50 references.

Short Communications are short descriptions of focused studies with important, but very straightforward results. These manuscripts should be no longer than 2000 words, and include no more than two figures and tables and 20 references.

Brief Reports are discrete, highly significant findings reported in a shorter format. The abstract of the article should not exceed 150 words and the text/article length should not exceed 1200 words. References should be limited to 12, a maximum of 2 figures or tables.

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Case Reports are descriptions of a case or small number of cases revealing novel and important insights into a condition's pathogenesis, presentation, and/or management. These manuscripts should be 2500 words or less, with four or fewer figures and tables and 30 or fewer references.

Consensus Statements may be submitted by professional societies. All such submission will be subjected to peer review, must be modifiable in

response to criticisms, and will be published only if they meet the Journal's usual editorial standards. These manuscripts should typically be no longer than 4000 words and include no more than six figures and tables and 120 references.

Letters to the Editor may be submitted in response to work that has been published in the Journal. Letters should be short commentaries related to specific points of agreement or disagreement with the published work. Letters should be no longer than 500 words with no more than five complete references, and may not include any figures or tables.

Note on Prior Publication

The journal publishes original research and review material. Material previously published in whole or in part shall not be considered for publication. At the time of submission, authors must report that the manuscript has not been published elsewhere. Abstracts or posters displayed at scientific meetings need not be reported.

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- All tables and figures must be placed after the text and must be labeled.
- Each section (abstract, text, references, tables, figures) should start on a separate page.
- Manuscripts should be prepared as word document (*.doc) or rich text format (*.rtf).

Title Page

The title page should include the following:

- Full title
- Short title of not more than 40 characters for page headings
- Authors' names, and institutions, and e-mail addresses
- Corresponding author's e-mail and post address, telephone and fax numbers
- At least five and maximum eight keywords. Do not use abbreviations in the keywords
- Word count (excluding abstract, figure legends and references)
- Name and address of person to whom reprint requests should be addressed
- Any grants or fellowships supporting the writing of the paper
- The acknowledgements, if there are any
- If the content of the manuscript has been presented before, the time and place of the presentation
- The ORCID (Open Researcher and Contributor ID) number of the all authors should be provided while sending the manuscript. A free registration can be done at <http://orcid.org>.

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Original Articles should be submitted with structured abstracts of no more than 250 words. All information reported in the abstract must appear in the manuscript. The abstract should not include references. Please use complete sentences for all sections of the abstract. Structured abstract should include background, objective, methods, results and conclusion.

What is already known on this topic?

What this study adds?

These two items must be completed before submission. Each item should include at most 2-3 sentences and at most 50 words focusing on what is known and what this study adds.

Review papers do not need to include these boxes.

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The article should begin with a brief introduction stating why the study was undertaken within the context of previous reports.

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Experimental Animals

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humane animal care, according to the Declaration of Helsinki and Geneva Convention, should be included in the manuscript.

Materials and Methods

These should be described and referenced in sufficient detail for other investigators to repeat the work. Ethical consent should be included as stated above.

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Results

The Results section should briefly present the experimental data in text, tables, and/or figures. Do not compare your observations with that of others in the results section.

The raw results of weight, length/height, body mass index, and blood pressure measurements can not be compared among groups since they normally change with age and according to gender. Instead, standard deviation scores of those values should be reported and compared.

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Study Limitations

Limitations of the study should be detailed. In addition, an evaluation of the implications of the obtained findings/results for future research should be outlined.

Conclusion

The conclusion of the study should be highlighted.

Acknowledgments (Not Required for Submission)

An acknowledgment is given for contributors who may not be listed as authors, or for grant support of the research.

Authorship Contribution

The kind of contribution of each author should be stated.

References

References to the literature should be cited in numerical order (in parentheses) in the text and listed in the same numerical order at the end of the manuscript on a separate page or pages. The author is responsible for the accuracy of references.

Number of References: Case Report max 30 / Original Articles max 50

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Books: List all authors or editors.

Sample References

Papers Published in Periodical Journals: Gungor N, Saad R, Janosky J, Arslanian S. Validation of surrogate estimates of insulin sensitivity and insulin secretion in children and adolescents. *J Pediatr* 2004;144:47-55.

Papers Only Published with DOI Numbers: Knops NB, Sneeuw KC, Brand R, Hile ET, de Ouden AL, Wit JM, Verloove-Vanhorick SP. Catch-up growth up to ten years of age in children born very preterm or with very low birth weight. *BMC Pediatrics* 2005 doi: 10.1186/1471-2431-5-26.

Book Chapters: Darendeliler F. Growth Hormone Treatment in Rare Disorders: The KIGS Experience. In: Ranke MB, Price DA, Reiter EO (eds). *Growth Hormone Therapy in Pediatrics: 20 Years of KIGS*. Basel, Karger, 2007;213-239.

Books: *Practical Endocrinology and Diabetes in Children*. Raine JE, Donaldson MDC, Gregory JW, Savage MO. London, Blackwell Science, 2001;37-60.

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3. Where available, URLs for the references have been provided.
4. A completed Copyright ve Disclosure of Potential Conflicts of Interest Form must be uploaded with other files during the submission. The corresponding author must acquire all of the authors' completed forms and mail to info@galenos.com.tr / yayin@galenos.com.tr or submit to the Manuscript Manager.
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Reconsidered for acceptance after major changes
Rejected

5. Remarks to the author

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For further instructions about how to review, see Reviewing Manuscripts for Archives of Pediatrics & Adolescent Medicine by Peter Cummings, MD, MPH; Frederick P. Rivara, MD, MPH in Arch Pediatr Adolesc Med. 2002;156:11-13.

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