

Psychodynamic Psychiatry-Information for Authors

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Psychodynamic Psychiatry is the official journal of the American Academy of Psychodynamic Psychiatry and Psychoanalysis. The Journal is an indexed, peer-reviewed quarterly publication, available both online and in print.

Psychodynamic Psychiatry addresses clinical and biopsychosocial aspects of care in all psychiatric settings. The Journal is interested in advancing concepts related to the psychodynamic theory of the mind and publish manuscripts that report clinical applications of contemporary psychoanalytic theory. The Journal offers academic psychiatrists, psychoanalysts and other psychodynamically interested scholars a platform to disseminate state-of-the-art research. Each issue will consist of a variety of articles, balancing the number of published original research studies with clinical articles, reviews, case reports, brief communications, and manuscripts that describe psychodynamic and psychoanalytic educational strategies. Authors are able to submit a variety of manuscripts as described below.

Types of Articles.

Please submit your article specifying one of these categories, and follow instructions:

Editorials: By invitation only.

Perspectives: Up to 1500 words, including references There can be no more than 1 figure or table. No abstract. Description: *Brief communications of timely relevant topics in psychodynamic psychiatry discussed in an accessible style. The editors will also consider narratives about patient encounters, Narrative Medicine essays and autobiographical accounts.*

Clinical Articles: Up to 7500 words; including abstract but excluding references, tables and figures. Abstract: 250 words maximum, unstructured. Figures/tables: No maximum. References: No maximum. Description: *Clinical articles will address topics of clinical relevance to psychodynamic psychiatrists.* Manuscripts will be evaluated through double blind peer review following editorial review.

Case Reports: Up to 5000 words; including abstract but excluding references. Abstract: 250 words maximum, unstructured. Figures/tables: only if approved by the Editors. References: No maximum. Description: *Case reports are in depth psychodynamic descriptions of a single illustrative case or case series addressing aspects of clinical practice from a psychodynamic perspective.*

Research Articles: Up to 4000 words; including abstract but excluding references, tables and figures. Abstract: 250 words maximum, structured (sub-headers): Introduction, Methods,

Results, Discussion. References: No maximum. The text should be arranged as follows: Introduction, Methods, Results, Discussion, Acknowledgment, References, and when relevant, Grant Support Information). Description: *Full-length reports of current research in aspects psychodynamic theory and practice*. Manuscripts will be evaluated through double blind peer review following editorial review.

Review Articles: Up to 7500 words, including abstract but excluding references, tables, and figures. Abstract: 250 words maximum, unstructured. Figures/tables: No maximum. References: No maximum. Description: *Review articles will address topics of interest to psychodynamic psychiatrists and should be critical and integrative*. Manuscripts will be evaluated through double blind peer review following editorial review.

Letters to the Editor: Up to 1000 words, including no more than 2 references; no abstract.

Book Reviews: The length and format of book reviews will be at the discretion of the book review editor.

Copyright: U.S. Copyright law requires explicit transfer of copyright from author to publisher. A copy of the transfer agreement to be used for *Psychodynamic Psychiatry* is available from the Editorial Office. Upon acceptance of a manuscript for publication, the Journal office will forward a copy of that agreement, to be executed and signed by the author, and returned to the office.

Authors are responsible for all statements made in their manuscripts. Published articles do not necessarily reflect official views of The American Academy of Psychodynamic Psychiatry and Psychoanalysis.

Manuscript Form: Only electronic transmissions of manuscripts as Word documents will be accepted. Manuscripts should be submitted directly to Sara Elsdén, Editorial Coordinator: selsden@ssmgt.com. Paragraph format of text (12-point font), including references, should be double-spaced. Page format should be 8.5 x 11 in. with standard 1" margins. Authors should use gender-neutral language. Footnotes should be avoided.

Title Page: Each manuscript should include a cover page that includes **Date submitted; Title of manuscript; Authors' full names and degrees; Authors' academic affiliations; Authors' mailing address; Authors' email address**. Please identify with an asterisk the **Corresponding author**. Please include a **Disclosure Statement**: *Psychodynamic Psychiatry* requires that all authors disclose any potential sources of conflict of interest. Any interest or relationship, financial or otherwise that might be perceived as influencing an author's objectivity is considered a potential source of conflict of interest. Authors should include a statement in their manuscript detailing all conflicts of interest. Conflicts of interest are situations that could be perceived to exert an undue influence on an author's presentation of their work. They may include, but are not limited to, financial, professional, contractual or personal relationships or situations. Example wording for your disclosure statement is as follows: "*Disclosure Statement: The authors declare no conflicts of interest.*" Or you may state: "*Author A is employed at company B. Author C owns*

shares in company D, is on the Board of company E. Author F has received grants from (state name of grantor) to support the research described in this article.”

Tables should be submitted in Excel or formatted in Microsoft Word’s Table function. Tables should be clearly labeled and not duplicate material that appears in narrative form in the manuscript.

Figures must be submitted separately as black and white graphic files (in order of preference: tif, eps, jpg, bmp, gif; note that PowerPoint is not acceptable) in the highest possible resolution. Figure caption text should be included in the article’s Word file.

Permissions: Contributors are responsible for obtaining permission from copyright owners if they use an illustration, table, or lengthy quote (100+ words) that has been published elsewhere. Contributors should write both the publisher and author of such material, requesting nonexclusive world rights in all languages for use in the article and in all future editions of it.

References: Literature citations in this journal should conform to the following format. In text, refer to the author and year of the original publication: “Freud (1923) wrote...” or “In 1923, Freud wrote...” or “The formation of the ego (Freud, 1923) ...”

References should be listed alphabetically and not numbered. Authors should consult the publication manual of the American Psychological Association for rules on format and style. The author’s name should be followed by the year of the original publication of the article or book, the title, the name of the publication, volume number, and page range. The name of the publisher and city of publication are required for books. If the year of the original publication is different from the edition referred to (as with the Standard Edition), the year of publication of the edition referred to should be used.

Freud, A. (1966). *The ego and the mechanisms of defense*. New York: International Universities Press. (Original work published 1936)

Kernberg, O. (1968). The treatment of patients with borderline personality organization. *International Journal of Psychoanalysis*, 49, 600-619.

Stone, M. (2010). Sexual sadism: A portrait of evil. *Journal of the American Academy of Psychoanalysis and Dynamic Psychiatry*, 38(1), 133-157.

Publication Ethics

Psychodynamic Psychiatry follows the [ICMJE's Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#).

Specific Guidelines for Case Reports

Confidentiality: Identifying information should be avoided as much as possible when presenting patients' characteristics and personal history. Patients must provide informed consent for publication if detailed history is essential to the manuscript. If authors do not obtain consent, they should describe what steps were taken to safeguard patient confidentiality. It is the responsibility of the author to obtain written consent and retain a copy in their records. The journal does not require these forms to be submitted. However, the editors may request to see the forms as needed. If you need a consent form, please write to our editorial assistant and she will provide you with one.

Diagnoses: All clinical vignettes should include the descriptive diagnoses in the most recent edition of the Diagnostic and Statistical Manual of The American Psychiatric Association. Authors should supplement the descriptive approach of the DSM with psychodynamic understanding or formulation.

Psychotherapy and Medication: The frequency, type and duration of psychotherapy should be specified. If more than one clinician conducted treatment the specific modalities should be described. If psychotropic drugs were prescribed the generic name, dose level and duration of administration should be stated.

Family History: Family history should be presented even if "negative." (For example, "there is no known family history of depression or suicidal behavior.") In instances in which patients manifest behaviors known to cluster in families, it should be explicitly stated whether relevant behaviors were present among other family members. Should any family members have been hospitalized psychiatrically, this should be reported as well. The patient's place in her/his sibship order should also be specified.

Past History of Treatment: This should be briefly summarized describing psychotherapy and or medication treatments received in the past.

Relevant Developmental History: The earliest onset of the patient's symptoms and syndromes should be reported. Psychodynamic clinicians tend to work with patients who repeat maladaptive patterns of behavior that have been in place for many years; often since childhood and at times transgenerationally. Frequently clinicians uncover meaningful childhood events that appear to have influenced the etiology of the patient's symptoms and syndromes. Such life events and adversities as are deemed clinically significant should be noted in the developmental history. Authors should describe other important factors, if clinically relevant, such as the patient's cultural/ethnic background, immigration history, degree of acculturation and assimilation, religious practices and beliefs, marital status, parenting status. These should all be succinctly summarized in a clinical report.

Submissions

Submit manuscripts or queries to Sara Elsdén, Editorial Coordinator, at selsden@ssmgt.com.

Questions about the relevance of potential submissions should be directed to both Jennifer I. Downey, M.D., Editor at jid1@cumc.columbia.edu, and César A. Alfonso, M.D., Editor at caa2105@cumc.columbia.edu

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