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BMJ Open Diabetes & Research Care is an open access diabetes journal dedicated to publishing high-quality medical research from all disciplines and therapeutic areas of diabetes research, management and treatment. A continuous publication model facilitates rapid publication of basic and clinical research regarding type 1 and type 2 diabetes and associated symptoms, complications, and treatments. The online-only format allows for continuous updates and serves as an invaluable resource to the multidisciplinary community of endocrinology, public health/prevention and internal medicine. All submissions are subject to peer review. Articles should not be under review or under consideration by any other journal when submitted to *BMJ Open Diabetes and Research Care*.

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BMJ Open Diabetes Research & Care adheres to the highest standards concerning its editorial policies on publication ethics and scientific misconduct. The journal follows guidance produced by bodies that include the [Committee on Publication Ethics \(COPE\)](#), the [World Association of Medical Editors \(WAME\)](#), the [Council of Science Editors](#) and the [International Committee of Medical Journal Editors \(ICMJE\)](#). To view all BMJ Journal policies, please refer to the [BMJ Author Hub policies](#) page, including information about our [Editors' roles and responsibilities](#).

Authors are required to submit a statement that their study obtained ethics approval (or a statement that it was not required and why) and that participants gave informed consent. Our Editors will consider whether the work is morally acceptable as determined by the World Medical Association's Declaration of Helsinki. In addition to this, in line with General Medical Council guidelines, an article that contains personal medical information about an identifiable living individual requires patients explicit consent (in the format of a signed BMJ patient consent form) before we will publish it. Please find further details on

[BMJ research ethics policies](#) (human participants and animals) and [consent for publication](#); including a link to the downloadable consent form.

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Preprints are reports of work that have not been peer-reviewed; Preprints should therefore not be used to guide clinical practice, health-related behaviour or health policy. For more information, please refer to our [Preprint policy page](#).

Provenance and peer review

Submissions to *BMJ Open Diabetes Research & Care* are unsolicited. All articles submitted are subject to peer review. The journal operates single anonymised peer review whereby the names of the reviewers are hidden from the author; usually two external reviewer reports are obtained before an Original research or Review article is accepted for publication. Articles authored by a member of a journal's editorial team are independently peer reviewed; an editor will have no input or influence on the peer review process or publication decision for their own article. For more information on what to expect during the peer review process please refer to [BMJ Author Hub – the peer review process](#).

BMJ is committed to transparency. Every article we publish includes a description of its provenance (commissioned or not commissioned) and whether it was internally or externally peer reviewed.

BMJ requests that all reviewers adhere to a set of basic principles and standards during the peer-review process in research publication; these are based on the COPE Ethical Guidelines for Peer Reviewers. Please refer to our [peer review terms and conditions policy page](#).

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Authors who submit to the *BMJ Open Diabetes Research & Care* and are rejected will be offered the option of transferring to another [BMJ Journal](#), such as [BMJ Open](#).

Please note that the article transfer service does not guarantee acceptance but you should receive a quicker initial decision on your manuscript.

Contact the Transfer Editor at transfers@bmj.com

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BMJ journals offer waivers for the full Article Processing Charge (100% discount of the APC) where all authors are based in low-income countries. See full waiver list*.

Requests for waivers should be made before or during initial submission**. If an article reports funding from a funder with an open access mandate or policy that covers paying APCs, BMJ expects that the APC will be paid.

[Visit our author hub](#) to learn more about our waivers policy and how to request one.

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* These lists are based on the HINARI Core Offer Groups A and B, and the World Bank Country and Lending Groups, downloaded in July 2021. They will be updated annually.

***Please note that applications for waivers or discounts should be made during initial submission and not after an article has been accepted. Editors are not involved in this process and the ability to pay has no bearing on editorial decisions. Payment will not be required unless your article is accepted. Accepted articles will not be published until payment has been received. BMJ does not refund APCs once paid.*

Data sharing

BMJ Open Diabetes Research & Care adheres to BMJ's Tier 2 data policy. We strongly *encourage* that data generated by your research that supports your article be made available as soon as possible, wherever legally and ethically possible. We also *require* data from clinical trials to be made available upon reasonable request. To adhere to [ICMJE guidelines](#), we *require* that a data sharing plan must be included with trial registration for clinical trials that begin enrolling participants on or after 1st January 2019.

Changes to the plan must be noted in the Data Availability Statement and updated in the registry record. All research articles must contain a Data Availability Statement. For more information and FAQs, please see BMJ's full [Data Sharing Policy](#) page.

ORCID

BMJ Open Diabetes Research & Care mandates ORCID iDs for the submitting author at the time of article submission; co-authors and reviewers are strongly encouraged to also connect their ScholarOne accounts to ORCID. We strongly believe that the increased use and integration of ORCID iDs will be beneficial for the whole research community.

Please find more information about ORCID and BMJ's policy on our [Author Hub](#).

Rapid responses

A rapid response is a moderated but not peer reviewed online response to a published article in *BMJ Open Diabetes Research & Care*; it will not receive a DOI and will not be indexed. Find out more about responses and how to [submit a response](#).

Submission guidelines

Please review the below article type specifications including the required article lengths, illustrations, table limits and reference counts. The word count excludes the title page, abstract, tables, acknowledgements, contributions and references. Manuscripts should be as succinct as possible.

For further support when making your submission please refer to the resources available on the [BMJ Author Hub](#). Here you will find information on [writing and formatting](#) your research through to the [peer review process](#) and [promoting your paper](#). We encourage authors to ensure that research articles are written in accordance with the [relevant research reporting guideline](#).

You may also wish to use the [language editing and translation](#) services provided by [BMJ Author Services](#).

Specifications for Figures and Images

Figures should be submitted in TIFF, EPS, JPEG or PDF formats. In EPS files, text (if present) should be outlined. For non-vector files (eg TIFF, JPEG) a minimum resolution of 300 dpi is required, except for line art which should be 1200 dpi. Histograms should be presented in a simple, two-dimensional format, with no background grid.

For figures consisting of multiple images/parts, please ensure these are submitted as a single composite file for processing. We are unable to accept figures that are submitted as multiple files.

During submission, ensure that the figure files are labelled with the correct File Designation of “Mono Image” for black and white figures and “Colour Image” for colour figures.

Figures are checked using automated quality control and if they are below the minimum standard you will be alerted and asked to resupply them.

- [Original research](#)
- [Review](#)
- [Invited systematic review](#)
- [Editorial](#)
- [Letter](#)
- [Supplements](#)

Original research

Original research should contribute to the diabetes literature and patient care. Research reviews that systematically synthesise evidence (e.g. Systematic reviews, Meta-analysis, Scoping reviews, Mixed methods reviews, etc) should be submitted as Systematic reviews.

The abstract should include four sections:

- **Introduction** (the purpose or hypothesis of study)
- **Research Design and Methods** (the basic design, setting, animal model, cell line or number of participants and selection criteria, treatment or intervention, and methods of assessment)
- **Results** (significant data found)
- **Conclusions** (the validity, limitations and clinical applicability of the study and its results)

Please include the key messages of your article after your abstract using the following headings. This section should be no more than 3-5 sentences and should be distinct from the abstract; be succinct, specific and accurate.

- **What is already known on this topic** – *summarise the state of scientific knowledge on this subject before you did your study and why this study needed to be done*
- **What this study adds** – *summarise what we now know as a result of this study that we did not know before*
- **How this study might affect research, practice or policy** – *summarise the implications of this study*

This will be published as a summary box after the abstract in the final published article.

Word Count: up to 4,000 words

Abstract: up to 300 words and structured including the headings Introduction, Research design and methods, Results and Conclusions

Tables/Illustrations: up to five tables and/or figures

References: up to 50

Review

BMJ Open Diabetes & Research Care publishes review articles that are comprehensive, scientifically accurate summaries of topics in clinical or basic science dealing with areas of current clinical relevance, promising experimental therapies, or emerging scientific concepts.

Research reviews that systematically synthesise evidence (e.g. Systematic reviews, Meta-analysis, Scoping reviews, Mixed methods reviews, etc) are classified by the journal as Systematic reviews and must be submitted as such.

Review Articles should describe either basic and/or clinical investigations, discuss the physiological and clinical significance of the work and place it in the context of previously published information. Review articles are usually commissioned but the journal will consider unsolicited submissions.

Word Count: up to 5,000 words

Abstract: up to 250 words, unstructured

Tables/Illustrations: Maximum four tables and/or figures

References: up to 65

Invited systematic review

In addition to reviews, *BMJ Open Diabetes & Research Care* solicits systematic reviews on subjects that fall under the journal's scope. At this time, we are not considering suggestions for submissions.

Please include the key messages of your article after your abstract using the following headings. This section should be no more than 3-5 sentences and should be distinct from the abstract; be succinct, specific and accurate.

- **What is already known on this topic** – *summarise the state of scientific knowledge on this subject before you did your study and why this study needed to be done*
- **What this study adds** – *summarise what we now know as a result of this study that we did not know before*
- **How this study might affect research, practice or policy** – *summarise the implications of this study*

This will be published as a summary box after the abstract in the final published article.

Word Count: up to 5,000 words

Abstract: up to 250 words, unstructured

Tables/Illustrations: Maximum four tables and/or figures

References: up to 65

Editorial

Editorials are mostly commissioned pieces about an article that invites direct commentary because it concerns a particularly timely subject within the field or offers innovative or controversial findings. While the journal will accept unsolicited submissions, it will not consider them for publication unless they address an urgent or immediately relevant topic that directly pertains to the journal's scope.

Word Count: up to 1,200 words

Abstract: not required

Tables/Illustrations: Maximum one tables and/or figure

References: up to 10

Letter to the editor

Letters to the editor are generally commissioned, but unsolicited submissions are welcome.

Word Count: up to 600 words

Abstract: not required

Tables/Illustrations: Maximum one table and/or figure

References: up to 10

Supplements

The BMJ Publishing Group journals are willing to consider publishing supplements to regular issues.

Supplement proposals may be made at the request of:

- The journal editor, an editorial board member or a learned society may wish to organize a meeting. Sponsorship may be sought and the proceedings published as a supplement.
- The journal editor, editorial board member or learned society may wish to commission a supplement on a particular theme or topic. Again, sponsorship may be sought.
- The BMJPG itself may have proposals for supplements where sponsorship may be necessary.
- A sponsoring organisation, often a pharmaceutical company or a charitable foundation, that wishes to arrange a meeting, the proceedings of which will be published as a supplement.

In all cases, it is vital that the journal's integrity, independence and academic reputation is not compromised in any way.

For further information on criteria that must be fulfilled, download the [supplements guidelines](#).

When contacting us regarding a potential supplement, please include as much of the information below as possible.

- Journal in which you would like the supplement published
- Title of supplement and/or meeting on which it is based
- Date of meeting on which it is based
- Proposed table of contents with provisional article titles and proposed authors
- An indication of whether authors have agreed to participate