

Authors: Psychodynamic Psychiatry

Information for Contributors

Psychodynamic Psychiatry: The Official Journal of The American Academy of Psychodynamic Psychiatry and Psychoanalysis

Psychodynamic Psychiatry will publish research and clinical articles in the areas of psychodynamically informed assessment and treatment, including psychoanalysis. The journal will also publish critical reviews relevant to depth psychology.

Manuscripts submitted to *Psychodynamic Psychiatry* will be blindly peer-reviewed with the understanding that they are being contributed solely to this journal; those accepted for publication may not be published elsewhere without written permission. Manuscripts will be evaluated through a double blind peer review following editorial review.

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 publishing articles 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.

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 abstract but excluding references, tables and figures. Abstract: 150 words maximum, unstructured. No Figures or Tables; References: less than 10. Provide 5 Keywords.

Description: *Brief communications of timely and 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, figures. Abstract: 250 words maximum, unstructured. Figures/tables: no maximum. References: No maximum. Provide 5 Keywords.

Description: *Clinical articles will address topics of clinical relevance to psychodynamic*

psychiatrists. Manuscripts will be evaluated through a 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. Provide 5 Keywords.
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, excluding references, tables/figures. Abstract: 250 words, maximum, structured: introduction, Methods, Results, Discussion. References: No maximum. Provide 5 keywords.
The text should be arranged as follows: Introduction; Methods; Results; Discussion, Acknowledgments, References, [and when relevant Grant Support information].
Description: *Full-length reports of current research in aspects of psychodynamic theory and practice.* Manuscripts will be evaluated through a 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. (If the article is a “work made for hire,” the agreement must be signed by the employer.)

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 Elsden, Editorial Coordinator: selsden@ssmgt.com. Paragraph format of text (12-point font), including footnotes, references, and extracts, 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 with the following: **Date Submitted; Title of manuscript; Authors' full names and degrees; Authors' academic affiliations; Authors' mailing address; Author's email address.** Please identify with an asterisk* **the Corresponding Author.** The title page must include both a **disclosure statement** and a **funding statement.** See the Publication Ethics section below for instructions and format.

Tables should be submitted in Excel. Tables formatted in Microsoft Word's Table function are also acceptable. (Tables should not be submitted using tabs, returns, or spaces as formatting tools.)

Tables should be clearly labeled and not duplicate materials that appears in narrative forms in the manuscript.

Figures must be submitted separately as black and white graphic files (in order of preference: tiff, 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* (7th ed.) 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*. 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.

Submitting a manuscript

Submit manuscripts or queries to Sara Elsden, 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.

There are no fees or charges associated with publishing in the journal.

Authors may also view the [**Editorial Policy for Peer Review**](#).

Psychodynamic Psychiatry

The American Academy of Psychodynamic Psychiatry and Psychoanalysis
One Regency Drive
P.O. Box 30
Bloomfield, CT 06002
Phone: 888-691-8281; Fax: 860-286-0787
Editorial Coordinator: selsden@ssmgt.com

A Special Note about AI

At this time, the Journal does not allow the use of artificial intelligence (AI) to create article content. This includes, but is not limited to, figures, tables, images, and text. Authors are welcome to use AI to check grammar but should be aware of the terms and conditions; companies may use your work to train their models.

Publication ethics

Disclosure of conflicts of interest

Psychodynamic Psychiatry requires that authors disclose all potential conflicts of interest. Any interest or relationship, financial or otherwise, that might be perceived as influencing an author's objectivity or exerting an undue influence on the presentation of their work is considered a potential conflict of interest. These may include, but are not limited to financial, professional, contractual, or personal relationships or situations.

Authors should include a statement in the title page detailing all potential conflicts of interest. If the manuscript has multiple authors, all contributing authors must disclose conflicts of interest.

For additional guidance, see [**the recommendations of the International Committee of Medical Journal Editors \(ICMJE\)**](#).

Sample wording for your disclosure statement: "Author A is employed at company B. Author C owns shares in company D and is on the Board of Company E. Author F has received grants from [name of grantor] to support the research described in this article."

If no conflicts of interest exist, the declaration should state "The authors declare no conflicts of interest."

Funding statement

The manuscript must include a funding statement detailing all sources of financial support, including grant numbers if applicable.

Sample wording for your funding statement: "This research was supported by an award from the National Institute of Mental Health (grant number XXXX)."

Grants held by different authors should be identified as belonging to individual authors. For example: "This work was supported by the National Institutes of Health (Author A, grant number XXXX), (Author B, grant number YYYY)."

Where no specific funding has been provided for research, authors should state "The author(s) received no specific funding for this work."

Authorship

Psychodynamic Psychiatry follows the recommendations of the International Committee of Medical Journal Editors (ICMJE), which specify that authorship is based on four criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

For these criteria and further reading, see the [**ICMJE's recommendations on defining the role of authors and contributors**](#).

In keeping with ICMJE recommendations, contributors who meet fewer than four of these criteria should not be listed as authors but should be acknowledged in the article. The corresponding author must obtain written permission to be acknowledged from all individuals listed in the acknowledgments.

Any change in authorship (such as addition or removal of an author, changes to author order, or a change of corresponding author) after submission requires written agreement from all authors. Once an article has published, any authorship changes will be accompanied by a correction notice.

Psychodynamic Psychiatry will refer to the recommendations of the [**Committee on Publication Ethics \(COPE\)**](#) should issues related to authorship arise during the review or publication process or after publication.

Ethics statement

All authors are required to follow the [**ICMJE guidelines on the protection of research participants**](#). The planning, conduct, and reporting of research involving human subjects should have been conducted in accordance with the [**Helsinki Declaration as revised in 2013**](#) and with approval from an independent local, regional, or national review body (for example, and ethics committee or institutional review board).

Articles that report the results of research with human participants must include a statement that written informed consent was obtained from each participant (or the participant's representative, if they lack capacity) after full explanation of the study procedures. For research with children, authors should include information about whether the child's assent was obtained.

The manuscript must include an ethics statement in the following format:

This study was reviewed and approved by [full name and affiliation of ethics committee], and the procedures followed were in accordance with the Helsinki Declaration as revised in 2013. The patients/participants provided their written informed consent to participate in this study.

For additional guidance, see the [**ICMJE 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. Identifying data should be sufficiently disguised to maintain confidentiality. 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 for their records. The Journal does not require these forms to be submitted. However, the editors may request to see these forms as needed. If you need a consent form, please contact the Journal's editorial assistant to provide 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 formulations.

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.

Scientific or publishing misconduct

The *Psychodynamic Psychiatry* editors and Guilford will review the [**Committee on Publication Ethics \(COPE\) Flowcharts**](#) in the event of an allegation of scientific misconduct (including—but not limited to—fabrication or falsification of data, purposeful failure to disclose conflicts of interest or funding sources, and plagiarism); duplicate publication ([**which the ICMJE defines as**](#) “publication of a paper that overlaps substantially with one already published, without clear, visible reference to the previous publication”); or manipulation of the publishing or peer review process.

Corrections

Psychodynamic Psychiatry may publish a correction notice if a published article is found to contain a significant error or omission—for example, an omitted author name

or a misprinted figure. An erratum will be published in the next available issue of the journal and will be made freely available online.

Retractions

Psychodynamic Psychiatry will consider retractions in accordance with the [**Committee on Publication Ethics \(COPE\) Retraction Guidelines**](#).

Requests to retract an article will be investigated by the *PDPS* editors in consultation with Guilford. If a retraction is issued, the version of record will be watermarked online accordingly and a statement of retraction will be made freely available online.

Green Open Access and funder compliance

Green open access (also known as self-archiving) allows authors to make a version of their work freely accessible in an institutional or disciplinary repository. Guilford authors may deposit either the published PDF of their article or the final accepted version of the manuscript in a non-commercial repository, where it can be made freely available, six (6) months after publication in the journal. Deposited manuscripts must include full citation of the work along with a link to the product on Guilford's website (i.e., the DOI link).

Funder compliance

Authors should indicate their funding source at the manuscript-submission stage. Please notify your journal editor if the funder of a grant used in creating the work requires that a version of your article be deposited in a public database, with no embargo, upon final publication.

National Institutes of Health

Authors who are National Institutes of Health (NIH) grant-holders may post the **author accepted manuscript** of their journal article to PubMed Central upon acceptance by the journal with no embargo on that material. The author accepted manuscript is the version that incorporates all amendments made during peer review but without the publisher's copyediting and typesetting.

UK Research and Innovation (UKRI), Wellcome Trust, National Institute for Health and Care Research

Guilford complies with the open access requirements of [**UKRI**](#), [**Wellcome**](#), and [**NIHR**](#). Where required by their funder, authors retain the right to distribute their **author accepted manuscript (AAM)**, such as via an institutional and/or subject repository (e.g. EuropePMC), under a [**Creative Commons Attribution 4.0 International \(CC BY 4.0\)**](#) licence for release no later than the date of first online publication.

The author accepted manuscript is the version that incorporates all amendments made during peer review but without the publisher's copyediting and typesetting.

The funding acknowledgements and any cover letter accompanying the accepted manuscript must include the following statement: "For the purpose of open access, the author(s) has applied a Creative Commons Attribution (CC BY) license [or where permitted by UKRI/Wellcome/NIHR, 'Open Government Licence' or 'Creative Commons Attribution No-derivatives (CC BY-ND) licence'] to any Author Accepted Manuscript version arising from this submission."

Authors should consult their funder's website for additional requirements, such as guidance on data access statements and funding acknowledgments.

Content preservation

Periodicals published by The Guilford Press are deposited in the [**Portico**](#) archive to guarantee long-term digital preservation.