

AIMS AND SCOPE

Annals of Liver Transplantation (*Ann Liver Transplant, ALT*), the official publication of the Korean Liver Transplantation Society, is an international, peer-reviewed open access journal. The journal pursues its advancement through original articles, How-I-Do-It technical reports, case reports, review articles, letter to editor, and editorials. The journal is concerned with clinicians and scientists in liver transplantation and also with those in other fields who are interested in liver transplantation. The aim of the journal is to make contribution to saving lives of patients undergoing liver transplantation through active communication and exchange of study information on liver transplantation and provision of education and training on the diseases. *ALT* serves as a platform for debate and reassessment, a trigger of innovation, and a major pedestal for promoting understanding, improving outcomes, and advancing knowledge and technique in liver transplantation.

GENERAL INFORMATION

ALT is an international, peer-reviewed open access journal. Manuscripts should be submitted electronically (<https://www.e-alt.org/submission>). The journal is published in a printed and an electronic version only in English. Submissions are accepted only on the understanding that they have not been submitted elsewhere and have not been published elsewhere.

ALT was first published in May 2021 and is published twice a year on each of the last days of May and November every year. The journal performs double-blind peer review of all submitted papers by two accredited experts in the liver transplantation area. Its editorial policies are the responsibility of the Editor-in-Chief and the Editorial Board under the general authority of the Editorial Committee.

The Editorial Office Contact Information
Annals of Liver Transplantation
102-201, 9-14, Seocho-daero 62-gil, Seocho-gu, Seoul 06631, Korea
Tel: +82-2-6677-0538, Fax: +82-2-6677-0536
E-mail: journal@e-alt.org

All submitted papers are peer-reviewed before it is decided whether they should be accepted, rejected, or

returned for revision. The journal reserves the right to edit the language of papers accepted for publication for clarity and correctness, and to make formal changes to ensure compliance with this Journal. Proofs will be sent to the corresponding author for final approval. The accepted articles are published under a Creative Commons license and distributed under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/4.0>) which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

EDITORIAL POLICY

1. General ethical guidelines

The journal adheres to the guidelines and best practices published by professional organizations, including ICMJE Recommendations and the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by the Committee on Publication Ethics, COPE; the Directory of Open Access Journals; the World Association of Medical Editors; and Open Access Scholarly Publishers Association [<https://doaj.org/apply/transparency/>]). Furthermore, the full process of handling research and publication misconduct should follow the COPE flowchart (<https://publicationethics.org/guidance/Flowcharts>).

2. Authorship

All authors must have made a significant intellectual contribution to the manuscript according to the criteria formulated by the ICMJE. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship should be based on one of following contributions: (1) substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work, (2) drafting the work or reviewing it critically for important intellectual content, (3) final approval of the version to be published, (4) 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. Any persons who do not meet the 4 criteria above should be placed as contributors in ACKNOWLEDGMENTS section. General supervision of the research group is not sufficient for authorship. All authors must state they have

approved the final draft submitted. Authors submitting to this journal will be required to indicate the contribution, each has made to the manuscript. Any changes to the author list after submission, such as a change in the order of the authors, or the deletion or addition of authors, needs to be approved by a letter requesting the change signed by all the authors participating.

3. Conflicts of interest

The corresponding author of an article is asked to inform the Editor of the authors' potential conflicts of interest possibly influencing their interpretation of data. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. A potential conflict of interest should be disclosed in the manuscript even when the authors are confident that their judgments have not been influenced in preparing the manuscript. The disclosure form should be the same as the ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (http://www.icmje.org/coi_disclosure.pdf).

4. Copyright

The Korean Liver Transplantation Society has the copyright of the accepted articles for publication. Consequently, the Korean Liver Transplantation Society has the right to publish, distribute, and print the published article in the journal or other media.

In view of ALT's copyright policy, accepted papers must complete the assignment forms. The papers will not be published until the copyright is completed.

5. Informed consent

Human study must conform to ethical standards, and be approved by the appropriate Institutional Review Board (IRB). A statement concerning IRB approval and consent procedures must appear at the Methods section. Any systematic data gathering effort in patients or volunteers must be approved by an IRB or adhere to appropriate local/national regulations. Authors may be questioned about the details of consent forms or the consent process. On occasion, the Editor-in-Chief may request a copy of the approved IRB application from the author.

6. Statement of human and animal right

Clinical research studies must state that the work was done in accordance with the Ethical Principles for Medical Research Involving Human Subjects outlined in the Helsinki

Declaration in 1975 (revised in 2024). Clinical studies that do not meet the Helsinki Declaration will not be considered for publication. Human subjects must not be identifiable. Patients' name, initial, hospital number, date of birth, or other protected healthcare information must not be disclosed. Animal research studies must state that the work was performed according to National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals must be observed.

7. Originality and duplicate publication

All submitted manuscripts should be original and should not be considered by other scientific journals for publication at the same time. Manuscripts are only accepted for publication in journals if they have not been published elsewhere. No part of the accepted manuscript should be duplicated in another scientific journal without permission by Editorial Board. If duplicate publications related to the papers of this journal are detected, the publication of the papers can be disapproved in the journal based on the decision of the Editorial Board. If the authors wish to obtain a duplicate or secondary publication for various other reasons, such as for readers of a different language, they should obtain approval from the editors-in-chief of both the first and second journal.

8. Obligation to register clinical trial

Clinical trial defined as "any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome" should be registered to the primary registry to be prior publication. ALT accepts the registration in any of the primary registries that participate in the WHO International Clinical Trials Portal (<https://www.who.int/clinical-trials-registry-platform>) as well as <http://www.clinicaltrials.gov/>, <http://www.isrctn.org/>, www.umin.ac.jp/ctr/index/htm/, and <https://www.clinicaltrialsregister.eu/>. The clinical trial registration number shall be published at the end of the abstract. Reporting of randomized controlled trials should follow the guidelines of the CONSORT statement (<http://www.consort-statement.org>). A PRISMA statement (<http://www.prisma-statement.org/>) is required for systematic reviews and meta-analyses.

9. Data sharing statement to clinical trial

ALT accepts the ICMJE Recommendations for data sharing statement policy (<http://icmje.org/icmje-recom>

mendations.pdf). All manuscripts reporting clinical trial results should submit a data sharing statement following the ICMJE guidelines from 1 July 2018. Authors may refer to the editorial, "Data Sharing statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors," in *Journal of Korean Medical Science* Vol. 32, No. 7:1051-1053 (http://crossmark.crossref.org/dialog/?doi=10.3346/jkms.2017.32.7.1051&domain=pdf&date_stamp=2017-06-05).

10. Guideline for reviewers

Reviewers are requested to recommend the articles that are distinguished by their originality, scientific competence and validity, and articles which will have the greatest clinical, theoretical, and educational impact on the field of thoracic and cardiovascular surgery.

Reviewers are asked to consider the following:

- 1) Is the research original?
- 2) How important and interesting is the topic of the research?
- 3) Does the methods and experimental techniques reach the highest scientific standard?
- 4) Are the results reliable and presented clearly?
- 5) Are the conclusions justified by the results presented?
- 6) Is the discussion relevant and comprehensible?
- 7) Are the illustrations and references appropriate and necessary?
- 8) Is the paper well organized and with clear English writings?
- 9) Will the paper impact the specialty?

Based on the above criteria, reviewers are requested to recommend acceptance, major or minor revision, or rejection, together with the comments that support their decisions. Only papers with the potential to achieve a high priority will be accepted or returned to authors for revision.

The reviewer should keep in mind that his/her imperative is to assist the author in increasing the quality of the paper, and this should be done positively rather than negatively.

PREPRINT POLICY

A preprint can be defined as a version of a scholarly paper that precedes formal peer review and publication in a peer-reviewed scholarly journal. *ALT* allows authors to submit the preprint to the journal. It is not treated as duplicate submission or duplicate publication. *ALT* recommends authors to disclose it with DOI in the letter to the editor during the submission process. Otherwise, it may be

screened from the plagiarism check program—Similarity Check. Preprint submission will be processed through the same peer-review process with a usual submission. If the preprint is accepted for publication, authors are recommended to update the info at the preprint with a link to the published article in *ALT*, including DOI at *ALT*. It is strongly recommended that authors cite the article in *ALT* instead of the preprint at their next submission to journals.

SUBMISSION

Manuscript may be submitted via online through the website (<https://www.e-alt.org/submission>). *ALT* uses an online submission and review system. Please register with our online submission system or contact the Editorial Office if you are unable to submit via online.

Peer Review and Acceptance

All papers submitted to *ALT* are first reviewed by the editorial team without being sent out for external peer review on the grounds of priority, insufficient originality, scientific flaws, or the absence of a message that is important to the readers of the journal. The decision on these papers is usually taken within 2-3 weeks. The remaining articles are usually sent to two or three reviewers, and decisions will be available within two months. The journal utilizes anonymous peer-review in evaluating manuscripts for publication. With respect to the revision and resubmission of manuscripts, it is the journal's policy to allow a couple of resubmission only, which should be received within 3 months from the time of receipt of the initial review letter. In general, a manuscript requiring more than a couple of revision or returned beyond 3 months will be handled as a new submission. The final responsibility for the decision to accept or reject lies with the editors. In many cases, rejection may occur in spite of favorable reviews because of editorial policy or lack of space. The editor retains the right to determine priorities for publication and also to determine the style and if necessary to request shortening of material accepted for publication.

Appeals of an Editorial Decision

Any appeal against an editorial decision must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal against a decision should contact the Editor-in-Chief, explaining in detail the reasons for the appeal. All appeals will be discussed with at least two other reviewers. If consensus cannot be reached thereby, an

appeal will be discussed at a full editorial meeting. The process of handling complaints and appeals follows the guidelines of COPE available from (<https://publicationethics.org/appeals>).

Type of Manuscripts

Contributions may be submitted as original articles, How-I-Do-It technical reports, case reports, review articles, editorials, and letter to editor. How-I-Do-It technical reports cover the surgical techniques of major concerns on liver transplantation. Review articles and editorials are invited by the editorial board. However, authors who are interested in contributing reviews are requested to first contact the Editor-in-Chief with an outline of the proposed article.

Cover Letter

Cover letter should inform the editor that neither the submitted material nor portions have been published previously or are under consideration for publication elsewhere. When more than one related manuscript has been published or is under consideration for publication by this or other journals, authors are required to declare this in their letter and to enclose copies of those publications for an editorial perusal. Failure to do so may lead to automatic rejection of the submitted manuscript. The corresponding author should certify that all listed authors participated meaningfully in the study and that they have seen and approved the final manuscript. The cover letter must briefly explain each author's individual contributions.

Preparation of Manuscript

The manuscript must be written with double-line spacing and 3 cm margins on A4 sized format.

Original article must be arranged as follows: (1) Title page, (2) Abstract (300 words or less with a list of 5 or less key words), (3) Introduction, (4) Materials and Methods (or Patients and Methods), (5) Results, (6) Discussion, (7) Acknowledgements, (8) Conflict of interest statement, (9) References, (10) Tables, (11) Figure legends, and (12) Figures on separate pages.

How-I-Do-It technical reports consist of (1) Title page, (2) Abstract (300 words or less with a list of 5 or less key words), (3) Introduction, (4) Description of surgical techniques, (5) Discussion, (6) Acknowledgements, (7) Conflict of interest statement, (8) References, (9) Tables and Figure legends, and (10) Figures on separate pages.

Case reports consist of (1) Title page, (2) Abstract (300 words or less with a list of 5 or less key words), (3) Intro-

duction, (4) Case presentation (including IRB and informed consent or its exempt information), (5) Discussion, (6) Acknowledgements, (7) Conflict of interest statement, (8) References (30 or less), (9) Tables and Figure legends, and (10) Figures on separate pages.

Review articles consist of (1) Title page, (2) Abstract (300 words or less with a list of 5 or less key words), (3) Main text, (4) Conclusions, (5) Acknowledgements, (6) Conflict of interest statement, (7) References, (8) Tables and Figure legends, and (9) Figures on separate pages.

Letters to the editor should be useful to practitioners. Opinions from readers can be published at the discretion of the editors. If accepted, the "author reply" of the paper being discussed could be published at the same time as the letter.

1. Title page

Provide a concise title. List the full names of all authors and their institutional affiliation. In a multi-authored work involving more than a single institution, indicate individual affiliation by means of superscript Arabic numbers. Indicate a change of address in a similar fashion. List the footnotes to the title page. Provide the contact information for the corresponding author (name, address, telephone number, e-mail address, and ORCID), and running title. Information on the research funding sources should be provided.

2. Abstract

Abstract of original articles must contain 300 words or less and must be organized as follows: Background, Methods, Results, and Conclusion. Five or less key words from MeSH terms (<https://meshb.nlm.nih.gov/search>) should be provided at the end of the abstract.

Abstracts of How-I-Do-It technical reports and case reports must contain 300 words or less in unstructured form. Key words up to five words are provided according to the MeSH terminology (<http://www.nlm.nih.gov/mesh/mesh-home.html>) at the bottom of abstract.

3. Introduction

The rationale for the study should be summarized and pertinent background material outlined. The introduction should not contain either results or conclusions. Provide the minimum background information that will orient the general reader. Do not engage in a literature review.

4. Materials and Methods

Methods should be described in sufficient detail so that another investigator could repeat the work. Manufacturer name should be included. Statistical methods used should

be outlined. Ethical guidelines for human or animal study should be described and approval of institutional human research review committee or animal welfare committee should be cited. Describe in detail hazardous procedures or chemicals involved, including precautions observed. For methods that are used without significant modification, citation of the original work will suffice. Identify and provide references for all the statistical methods used.

Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance.

5. Results

Results should be presented in logical sequence in the text. Tables and illustrations and repetitive presentation of the same data in different forms should be avoided. The results should not include material appropriate to the discussion. Present the major findings of the study in graphical form if practicable. Do not illustrate minor details if their message is adequately conveyed by simple descriptive text. Mention all the tables and figures.

6. Discussion

Discussion should explain results in relation to any hypotheses advanced in the introduction. This may include an evaluation of the methodology and of the relationship of new information to the existing corpus of knowledge in that field. Data given in the results section should not be reiterated here. Concisely present the implications of the new findings for the field as a whole, minimizing any reiteration of the results and avoid repetition of material in the introduction; keeping a close focus on the specific topic of the paper.

7. Acknowledgements

A brief acknowledgement of persons who made a genuine contribution may be included.

8. Funding

All financial and material support for the research and the work should be stated here clearly explicitly.

9. Author's Contributions

Authors must include a statement to specify the con-

tributions of each co-author. The statement can be up to several sentences long, describing the specific contributions made by each author (list the authors' initials, e.g., ABC). The name of each author must appear at least once in any of the following categories; conception and design of study, acquisition of data, analysis and/or interpretation of data, drafting the manuscript, revising the manuscript critically for important intellectual content.

10. References

References should be numbered serially in the order of appearance in the text, with numbers in brackets []. List all authors if the number of authors is less than 7. List first six authors followed by et al if the number of authors is 7 or more. Journal titles are abbreviated in accordance with the style of Index Medicus. For more on references, refer to the National Library of Medicine (NLM) Style Guide for Authors, Editors, and Publishers (<http://www.nlm.nih.gov/citingmedicine>).

Articles in journals:

- References to an article with 6 or fewer authors:
Hwang S, Lee SG, Belghiti J. Liver transplantation for HCC: its role: Eastern and Western perspectives. *J Hepatobiliary Pancreat Sci* 2010;17:443-448.
- References to an article with more than 6 authors:
Miller CM, Quintini C, Dhawan A, Durand F, Heimbach JK, Kim-Schluger HL, et al. The international liver transplantation society living donor liver transplant recipient guideline. *Transplantation* 2017;101:938-944.

Book chapters:

Bruix J, Branco FS, Ayuso C. Hepatocellular carcinoma. In: Schiff ER, Sorrell MF, Maddrey WC, ed. *Schiff's diseases of the liver*. Vol I. 10th ed. Lippincott Williams & Wilkins, 2007:1253-1263.

Website:

World Health Organization (WHO). WHO fact sheets [Internet]. WHO, 2014 [cited 2014 Feb 1]. Available from: <https://www.who.int/news-room/fact-sheets>

11. Tables

Each table must be simple and typed on a separate page with its heading above it. Explanatory matter should be placed in footnotes below the tabular matter and should not be included in the heading. All non-standard abbreviations should be explained in the footnotes. Table footnotes should be indicated by superscript-lowercase alphabet.

Statistical measures such as SD or SEM should be identified. Vertical rules and horizontal rules between entries should be omitted. Each table should be referred in the text consecutively and numbered according in order of citation. Tables should also be typed double-spaced, including headings. Larger size sheets must not be utilized.

12. Figures legends

Figure legends should be typed double-spaced on a separate sheet. Symbols, arrows, and letters should be used to indicate parts of illustrations. Each figure should be referred in the text consecutively and should be numbered according in order of citation.

13. Figures

We encourage authors to use color figures when they will enhance the presentation of the data. Illustrations should be sharp and presented in the TIF, JPG or PPT format at the time of submission. Figures should be supplied in the TIF or JPG format at a final resolution of not less than 600 dpi. Do not use JPG format for clear printing, except for very large-sized images. Each figure should be less than 10 MB in size for electronic upload. Please contact to the Editorial Office when very large files are submitted. Microscopic pictures should be explained according to the staining method and scaled by the power of magnification (e.g., H&E stain, x 400). Color figures of electronic publication (PDF file) are free of charge, thus we strongly suggest submitting color figures.

14. Video clip

Video clip can be submitted with Original Articles, How-I-Do-It and Case Reports. We recommend to make the length of video clip less than 10 minutes. Please make the size of video clip file less than 500 MB. The supported video file types are avi, asf, flv, wmv, mp4, mkv, mov, mpg, and mpeg files.

15. Terminology

Medical terminology should be followed by the recent terminology book published by the Korean Medical Association (<http://term.kma.org/>) and MeSH Medical Subject Headings by National Library of Medicine (<https://meshb.nlm.nih.gov/search>).

16. Abbreviations

Abbreviations should not be use in the title. Expansion of all abbreviations is recommended at first mention in the text.

17. Units of measurement

Laboratory measurements should be used in SI units (International System of Units). The metric system is preferred for the expression of length, area, mass, and volume.

18. Permissions

Direct quotations, tables or illustrations taken from copy-righted material must be accompanied by written permission for their use from the publisher. The permission is presented as a footnote or addition to the legend and it must provide complete information as to the source. Photographs of identifiable persons must be accompanied by a signed release that indicates their informed consent.

19. Author's manuscript checklist

- The manuscript is not concurrently submitted to other journals.
- The manuscript is arranged in following order: Title page, Abstract, Introduction, Materials and Methods, Results, Discussion, Conclusion, Acknowledgement, Reference, Legends.
- Font of the main text is Times New Roman or Arial 11-point size.
- Pages are numbered consecutively from abstract to legends on the last page.
- Corresponding author name, address, e-mail, and ORCID in Title page.
- Information on the name(s) and affiliation(s) of the author(s) is not disclosed in the manuscript except the Title page.
- The running title should not exceed 10 words for English.
- The abstract should not exceed 300 words for English abstract, respectively.
- Key words (less than 5) are provided (should be inserted in the submission step).
- Tables, graphs, and drawings are brief and self-explanatory.
- Each title of the tables, graphs, and drawings is also self-explanatory.
- All figures are uploaded in a separated file.
- Figures are separated from figure legends.
- Figure resolutions are higher than 600 dpi.
- References are in the correct style.

MANUSCRIPTS ACCEPTED FOR PUBLICATION

Copyright Transfer

Copyright for all material published in ALT is vested in the Korean Liver Transplantation Society. In accordance with the ALT's copyright policy, all manuscripts must be

accompanied by a copyright transfer form signed by all authors and that follows ICMJE recommendation (<https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/copyright.html>). Statements and opinions expressed in the articles and communications in *ALT* are those of the authors and do not necessarily reflect the opinions of the Editor or publisher, and the Editor and publisher disclaim any responsibility or liability for such material.

Manuscript Corrections

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication format. The author(s) must respond within 48 hours when the manuscript editor contacts the corresponding author for revisions. If the response is delayed, the manuscript's publication may be postponed to the next issue.

Proofs and Reprints

The author(s) will receive the final version of the manu-

script as a PDF file. Upon receipt, the author(s) must notify the editorial office (or printing office) of any errors found in the file within 48 hours. Any errors found after this time are the responsibility of the author(s) and will have to be corrected as an erratum.

Errata and Corrigenda

To correct errors in published articles, the corresponding author should contact the journal's editorial office with a detailed description of the proposed correction. Corrections that profoundly affect the interpretation or conclusions of the article will be reviewed by the editors. Corrections will be published as corrigenda (corrections of the author's errors) or errata (corrections of the publisher's errors) in a later issue of the journal.

Article processing charges

There is no author's submission fee or other publication-related fees. *ALT* is fully supported by the Korean Liver Transplantation Society.