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Submissions from Eastern Europe should be sent to the Deputy Editors. Submissions from non European countries should be sent to any of the preceding editors.

Organisation of the manuscript. Manuscripts should be typewritten double-space with wide margins throughout. Title page, abstracts, tables, legends to figures and reference list should each be provided on separate sheets of paper. The title page should include: the title, the name(s) and affiliation (s) of the author(s), an address for correspondence, and telephone/fax numbers for editorial queries. All original and review articles should include an abstract (a single paragraph of no more than 150 words; and when appropriate should include an objective, methods, results and a conclusion) and 3-6 key words for abstracting and indexing purposes. Original and review articles should not exceed 5,000 words or the equivalent space including summary and references. The text should be ordered under the following headings: Introduction, Subjects and methods/Materials and methods, Results, Discussion (may be combined with Results), Conclusion, Acknowledgements (when appropriate), References. **Publication.** Upon acceptance of manuscripts, a **diskette** containing the final version of the article should be provided (following *Instructions for providing manuscripts on diskette*) to the corresponding receiving centre.

Short communications should not exceed 1,500 words or the equivalent space including figures and tables, with abstracts of no more than 50 words.

Rapid communications should not exceed 1,000 words or the equivalent space. The summary should consist of no more than 50 words. Only one table and one figure are accepted. Figures (glossy) should be submitted in a form suitable for direct reproduction. References should be limited to a maximum of 10 and are in addition to the 1,000 words. To ensure rapid publication, articles must meet a high standard, both in terms of scientific content and presentation. Following acceptance of an article in this category, nor further modifications by the author will be allowed. Rapid communications are considered to be articles comprising preliminary but consistent results and will be published within three months following acceptance.

Letters to the Editor (maximum 500 words) will be processed rapidly and therefore should be sent to the Deputy Editors. To ensure rapid publication, please adhere strictly to the general instructions on style and arrangement: provide only figures and tables suitable for direct reproduction.

Illustrations. Photographs should be presented as glossy prints with high contrast. Figures should be completely and consistently lettered, the size of the lettering being appropriate to that of the illustration, taking into account the necessary reduction in size. Illustrations should be designed to fit either a single column or the full text width. Each illustration should be clearly marked on the reverse side with

the name of the author(s), the number of the illustration and its orientation (top). Colour figures will be included subject to the author's agreement to defray part of the cost.

Tables. All tables must be cited in the text, have titles and be numbered consecutively with roman numerals. Only horizontal lines should be included, and kept to a minimum. Figures and tables should not exceed the equivalent of 2 journal pages.

References (Vancouver). Authors are responsible for the accuracy of the references. Only published articles and those in press (the journal should be stated) may be included; unpublished results and personal communications should be cited as such in the text. In the text, a reference should be cited by author and date; when there are more than two authors, state the first author's name followed by 'et al'. References should be arranged alphabetically at the end of the paper and include, in the following order: all authors (surname followed by initials), title of article, journal title (abbreviated according to the Serial Sources for the Biosis Data Base), year of publication, volume number, and inclusive page numbers.

Examples:

Journal article

Lêo H, Rein W, Souche A, Dufour H, Guelfi JD, Malka R, Olié JP. Psychopathological and socio-demographic characteristics of 1231 depressed patients with and without co-existing alcoholism. *Psychiatr & Psychobiol* 1990;5:249-56

Book

Takahashi R, Flor-Henry P, Gruzeliier J, Niwa SI. *Dynamics, Laterality and Psychopathology*. Amsterdam: Elsevier, 1987

Chapter in a book

Pinard G, Tetreault L. Concerning semantic problems in psychological evaluation. In: Pichot P, ed. *Psychological Measurements in Psychopharmacology. Modern Problems in Pharmacopsychiatry*. Basel: Karger, 1974;7:8-22

Nomenclature. Metric units must be used throughout, laboratory units must be followed by SI units. The generic name of a drug should be used unless the specific trade name of the drug is directly relevant to the discussion.

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ÉTATS DÉPRESSIFS MAJEURS



Le fil rouge pour sortir de la dépression

Composition - présentation : Boîte de 30 comprimés enrobés, dosés à 12,5 mg de tianeptine (sel de sodium).
Propriétés : Antidépresseur. Chez l'animal, la tianeptine augmente l'activité spontanée des cellules pyramidales de l'hippocampe et en accélère la récupération. Chez l'homme, Stablon se caractérise par une activité : - sur les troubles de l'humeur ; - sur les plaintes somatiques liées à l'anxiété et aux troubles de l'humeur ; - sur les troubles du comportement de l'éthylique en période de sevrage. Stablon est dépourvu d'effet : - sur le sommeil et la vigilance ; - sur le système cardiovasculaire ; - sur le système cholinergique (absence de manifestation anticholinergique). **Indications thérapeutiques :** Épisodes

dépressifs majeurs - c'est-à-dire caractérisés : Stablon est préconisé dans les états dépressifs d'intensité légère, modérée ou sévère. **Contre-indications :** Enfants de moins de 15 ans, IMAO, grossesse, allaitement. **Précautions d'emploi :** Par principe, surveillance attentive en début de traitement (risque suicidaire inhérent aux états dépressifs), précaution en cas d'anesthésie, information des conducteurs de machine d'un risque potentiel (cf. VIDAL), réduction progressive de la posologie à l'arrêt du traitement. **Interactions médicamenteuses :** IMAO. **Effets indésirables :** Rares, généralement bénins : - gastralgies, douleurs abdominales, bouche sèche, anorexie, nausées, vomissements, constipation, flatulences,

- insomnie, somnolence, cauchemars, asthénie, - tachycardie, extrasystoles, précordialgies, - vertiges, céphalées, lipothymies, tremblements, bouffées de chaleur - gêne respiratoire, boule dans la gorge, - myalgies lombalgies. **Posologie et mode d'administration :** 3 comprimés par jour, matin, midi et soir. Chez l'alcoolique, cirrhotique ou non, aucune modification posologique n'est nécessaire. Chez les sujets de plus de 70 ans et en cas d'insuffisance rénale, 2 comprimés par jour C.T.J. de 4,81 F à 7,22 F. Liste I. AMM : 329.339. Prix : 72,20 F. Remb. Séc. soc. 65%. Collect. Laboratoire ARDIX, 25, rue Eugène-Vignat, 45007 Orléans. Pour plus d'informations se reporter au Vidal