

# **THE EGYPTIAN JOURNAL OF HYPERTENSION AND CARDIOVASCULAR RISK**

**An official journal of the Egyptian Hypertension Society**

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# THE BIRTH OF A NEW MEDICAL JOURNAL

**By: M. Mohsen Ibrahim, MD, FACC**

*President of the Egyptian Hypertension Society*

Creating a medical journal in a developing country should not be a caprice or taken lightly. When the idea of a scientific journal for the Society was raised few years ago, I was skeptical. I thought it was premature for our young Society to have its independent journal and at that stage a quarterly newsletter is more than enough. Again when the subject was discussed at a recent EHS board of directors meeting, I hesitated realizing the burden and responsibility for this endeavor. I reflected upon a number of questions. Is our Society in need of a special journal? Will the scientific medical community in Egypt accommodate an additional periodical? Who will be interested among his busy practice to consider reading a local medical journal in addition to the well-known international periodicals such as the Lancet, the New England Journal of Medicine, the Circulation, etc.? Do we generate enough scientific material of good quality, which is worth publishing in a separate hypertension and cardiovascular risk journal? How will the Society cover the costs for editing, printing, publication and distribution? Finally, who will take the difficult responsibility of editing the journal? While reflecting more on previous questions, contrary to expectations, I became less hesitant and gradually started to feel positively for this new journal.

Our Society needs its special scientific periodical. This will possibly be its most visible regular activity. It fulfils the main goal of our group when we thought of establishing the Egyptian Hypertension Society, nine years ago, physician education. The medical scientific community in this country needs a respectable, responsible journal, which presents a serious literature, critically reviewed and achieving international standards. Unfortunately, most of the current medical journals in Egypt lag behind the international community and survive at the margin of world medical science. It is unrealistic and beyond our resources at this stage to compete with the highly respectable international journals, however, most of these journals are not within the reach of the majority of the Egyptian readers. In a recent survey among Egyptian physicians, we found that in this country physicians get their information not from medical journals, but mainly from representatives of drug industry. It is important that our new journal besides publishing original contributions will provide a space for educational material covering problem solving, review articles, current concepts, medical progress, editorials, clinical practice and special articles.

The generation of high quality scientific material is a major problem in the developing world and will be a source of difficulty for the new journal. Scientific research does not come high on the list of priorities in the medical community. On the other hand, the large number of scientific institutions in Egypt and other Arab

Countries in a population approaching 300 million should be an important source of scientific material. An ambitious goal for the new journal is to stimulate medical research through provision of a new venue for publication and opening a window for the international community to inspect serious activities in the developing world. Hypertension and other cardiovascular risk factors are emerging as major health problems in Egypt and many developing countries, a specialized journal covering these two areas can provide a new service to the medical profession in this part of the world.

The question Of costs for printing and publication though, seems an important issue in a developing country, suffering serious economic setbacks turned to be the least significant problem. When I contacted my friend, Dr. Ahmed Zaghoul, Director of Astra-Zeneca in Egypt, he immediately approved sponsoring all the necessary costs. The finance issue was solved over a phone call.

One factor, which helped changing my attitude, was the name of the first editor. Dr. Hussein Rizk, secretary general of our Society volunteered full of enthusiasm to take the difficult task of editing the new Journal. Dr. Hussein Rizk's, encyclopedic knowledge, seriousness, honesty and dedication among other virtues helped to booster my positive feelings for the new journal.

The Society, Dr. Rizk and my self are facing a serious challenge, the creation, birth and more importantly the survival of a new medical journal in our region. It is not a dream that the new journal will bring pride to our Society and to our country. It is not a dream that if successful, it will reach beyond the local Egyptian community to the Arab countries, Middle East, Mediterranean area and the whole world.

## INSTRUCTIONS FOR SUBMISSION

These guidelines are in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (originally published in N Engl J Med 1997; 336:309-15).

### MANUSCRIPTS

#### TITLES AND AUTHORS' NAMES

With the manuscript, provide a page giving the title of the paper; titles should be concise and descriptive. Also include a running head of fewer than 40 letter spaces; the name(s) of the author(s),

Including the first name(s) and no more than two degrees; the name of the department and institution

In Which the work was done; the institutional affiliation of each author; and the name and address of

The author to whom reprint requests should be addressed. Any grant support that requires acknowledgment should be mentioned on this page. Front page should include the following:

- Title
- Author's name(s)
- Institution(s)
- Grant support
- Authors correspondence (mailing address, telephone, fax, mobile, e-mail)
- Word count

#### ABSTRACTS

Provide on a separate page an abstract of not more than 250 words. This abstract should consist of five paragraphs, labeled Background, Aims, Methods, Results, and Conclusions. They should briefly describe the problem being addressed in the study, how the study was performed, the salient results, and what the authors conclude from the results.

#### KEY WORDS

Three to 10 key words or short phrases should be added to the bottom of the abstract page; these will help us index the article and may be published with the Abstract. We encourage the use of terms from the Medical Subject Headings from Index Medicus.

#### MATERIAL & METHODS

**MATERIAL:** Describe how the patient population is derived.

**METHODS:** Describe how the study procedures are performed. Give details of instruments, materials and procedures followed. If these are previously published, it is sufficient to cite the reference.

## **RESULTS**

Describe the main findings and the analytical methods used as well as the findings from data analysis. Data provided in text, tables and figures should be enough to support the conclusion.

## **DISCUSSION**

Authors may elaborate on context, implications and concordance or otherwise with previously published observations.

## **REFERENCES**

References must be numbered consecutively as they are cited. The style of references is that of Index Medicus. List all authors when there are six or fewer; when there are seven or more, list the first three, then "et al." The following is a sample reference:

1. Iahita R, Kluger J, Drayer DE, Koffler D, Reidenberg MM. Antibodies to nuclear antigens in patients treated with procainamide or acetylprocainamide. *N Engl J Med* 1979;301 :1382-5.

Numbered references to personal communications unpublished data, and manuscripts either "in preparation" or "submitted for publication" are unacceptable. If essential, such material may be incorporated in the appropriate place in the text.

## **TABLES**

Double-space tables and provide a title for each.

## **Illustrations**

Figures should be clear and legible. Diagrams are preferred in one or two colors. Glossy photographs are requested. Symbols, lettering, and numbering should be clear and large enough to remain legible after the figure has been reduced to fit in the space allocated to it.

The back of each figure should include the sequence number, the name of the author, and the proper orientation (e.g., "top"). Do not mount the figure on cardboard.

Photomicrographs and electron photomicrographs should have internal scale markers.

If photographs of patients are used, the subjects should not be identifiable.

Legends for illustrations should be double-spaced on a separate sheet and should not appear on the illustrations.

Color illustrations are accepted at a small additional cost. Send both transparencies (or negatives) and prints for this purpose.

## **ABBREVIATIONS**

Except for units of measurement, abbreviations are generally discouraged. The first time an abbreviation appears it should be preceded by the words for which it stands.

## **DRUG NAMES**

Generic names should generally be used. When proprietary brands are used in research, include the brand name in parentheses in the Methods section.

## **AUTHORSHIP AND CONTRIBUTORSHIP**

### **Contributor ship**

We list contributors in two ways. Firstly, we publish a list of authors' names at the beginning of the paper and, secondly, we list contributors at the end of the paper, giving details of who did what in planning, conducting, and reporting the work. One or more of these contributors are listed as guarantors of the paper. Guarantor status does mean That he or she is prepared to take public responsibility for the paper as a whole.

### **Authorship**

The uniform requirements for manuscripts submitted to medical journals state that authorship credit

Should be based only on substantial contribution to:

- conception and design, or analysis and interpretation of data
- drafting the article or revising it critically for important intellectual content

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Manuscripts are examined by the editorial staff and are usually sent to outside reviewers. We encourage authors to suggest the names of possible reviewers, but we reserve the right of final selection. Letters about potentially acceptable manuscripts will be sent after the review process is complete. For information about the status of a submitted manuscript, call telephone number (202) 794-7788, at least 3 weeks after date of submission.

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Authors of research articles should disclose at the time of submission any financial arrangement they may have with a company whose product is used prominently in the study or with a company making a competing product. Such information will be confidential and will not influence the editorial decision, but if the article is accepted for publication, such information is to be communicated to the reader.

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## **SIZE OF THE MANUSCRIPT**

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Letters to the Editor are considered for publication provided they do not contain material that has been submitted or published elsewhere.

Please note the following:

- Your letter must be type written and double-spaced.
- Its text, not including references, must not exceed 400 words (please provide word count).
- It must have no more than five references and one figure or table.
- It must not be signed by more than three authors.
- Please include your full address, telephone number, fax number, and e-mail address. .
- Financial associations or other possible conflicts of interest must be disclosed.

You may send us your letter by standard mail, fax or e-mail.

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If your article has been accepted for publication please also submit it (in its revised form, if revisions have been made) on disk.

Our preferred disk format is a file in Word (MS Windows 98/2000) on a 3.5" disk.

**Articles on disk should be prepared in the simplest form**

- Label your disk with:
- The number of the paper its title
- Name of the first author
- The word processing program and version used
- The filename(s) to be found on the disk.
- Number the pages of each hard copy by hand.
- Finally, check the final copy carefully; if there are differences between the hard copy and disk version we will use the disk version as the master.

**RELEASE OF MATERIAL TO THE MEDIA**

We do not want material that is published in the Egyptian Journal of Hypertension & Cardiovascular Risk appearing beforehand, in detail, in the mass media. We accept that reports may appear in the media after presentations at scientific meetings.

Those authors who wish us to publish their papers can clarify matters for journalists, but should not give the media any further information than was included in their scientific presentations.

**Types of Articles Considered for Publication by**  
***The Egyptian Journal of Hypertension & Cardiovascular Risk***

**ORIGINAL RESEARCH:**

- **Original Articles** are scientific reports of the results of original clinical research. They should be no longer than 5000 words including an abstract.
- **Special Articles** include data and generally focus on areas such as economics, ethics, law, or health care delivery. They are limited to the same word count as original articles.

**CLINICAL CASES:**

- **Brief Reports** usually describe one to three patients or a single family and should be no longer than 2000 words. They do not include an abstract.

**REVIEW ARTICLES:**

Review articles are usually solicited by the editors, but we are willing to consider unsolicited material. Please contact the editorial office before writing a review article for the journal. All review articles undergo the same peer-review and editorial process as original research reports. They should be written for the general physician, not specialists.

**Conflicts of Interest:** Because the essence of review articles and editorials is selection and interpretation of the literature, the journal expects that the authors of such articles will not have any financial associations with a company (or its competitors) that makes a product discussed in Article.

**Review articles also include:**

- **Current Concepts** articles focus on clinical topics, including those in specialty areas but of wide interest. The text is limited to 2000 words, with a maximum of four figures and tables plus up to 50 references.
- **Drug Therapy** articles detail the pharmacology and use of specific drugs or classes of drugs, or the various drugs used to treat particular diseases. There is a limit of 4000 words.
- **Issues in Clinical Practice** articles are evidence-based reviews of topics relevant to practicing physicians, both primary care providers and specialists. Articles in this series should

Be no longer than 2500 words and should include the following sections: clinical context, strategies and evidence, areas of uncertainty, guidelines from professional societies, and recommendations from author(s).

- **Mechanisms of Disease** articles discuss the cellular and molecular mechanisms of diseases Or categories of diseases. The text is limited to 4000 words.
- **Medical Progress** article provides comprehensive, overviews of important clinical subjects, with the principal focus on developments during the past few years. Each article details how the perception of a disease, diagnostic approach, or therapeutic intervention has evolved in recent years. The text is limited to 4000 words, with a maximum of six tables and figures.

**OTHER SUBMISSIONS:**

- **Clinical Implications of Basic Research** articles discuss papers from preclinical journals. The purpose is to explain the findings and comment on their possible clinical applications in fewer than 1000 words.
- **Occasional Notes** are accounts of personal experiences or descriptions of material from outside the usual areas of medical research and analysis.