GUIDING PRINCIPLES FOR
ALLHAT PUBLICATIONS AND PRESENTATIONS
June 24, 2013

Guideline #1 – Keep the paper focused

Stay within the scope and objectives of your approved manuscript proposal. If you want to modify the scope or objectives of the manuscript, you need to obtain approval of the EDC. Journals have limits on the number of words, references, tables, and figures. In general, journals limit paper length to either 3000 words (text only) or 6000 words (including title page, abstract, text, tables, figures, and references). Abstracts are always limited to 250 words. Please keep this in mind when writing. If you think that the material at hand merits more than one manuscript, discuss it with the writing committee and seek EDC advice and/or approval.

Guideline #2 – Consult ALLHAT protocols, procedure documents and referenced publications to avoid factual errors and factual omissions

Assuring accuracy of reporting is the responsibility of both authors and reviewers, especially reviewers from the Coordinating Center (CC) and the Project Office (PO). Authors should carefully review the ALLHAT protocol, previous ALLHAT publications, and all referenced publications to avoid factual errors and relevant omissions, as well as potential unintentional conflicts with previous ALLHAT reports. If a factual error or omission is brought to the Writing Committee attention, it should be corrected by the authors or brought to the attention of the EDC by the Director of the Coordinating Center. The ALLHAT Publications and Presentations policy safeguards against release of manuscripts with unintentional errors and omissions and promotes internal and external consistency of the ALLHAT publications. Disagreements, including interpretive comments discordant with prior ALLHAT publications should be referred for decision to the EDC and, if needed, to the Steering Committee.

Guideline #3 – Become familiar with the ALLHAT Publications and Presentations Policy

Submitting a paper

Before a paper is submitted to a journal, it is sent to the entire Steering Committee and the ALLHAT Project Office for internal review, with a 2 week turnaround time. Two Steering Committee members are assigned as reviewers; others are invited to comment. The ALLHAT Project Office submits manuscripts for NHLBI review when required or otherwise appropriate. The paper’s authors will consider these reviews. If the reviews are editorial in nature, the authors can revise and then submit. If the reviews are more substantial, then the authors should respond within two weeks to the reviewer(s) who made these substantial comments. If there is disagreement about the response, then the matter should go to the Editorial and Dissemination Committee (EDC) for resolution. If agreement has not been reached, then the EDC, the authors, or both may refer the issue(s) to the Steering Committee.

Re-submitting a paper after journal review
Before a paper is re-submitted to a journal, it is sent to the Writing Group, the EDC chair, and the Project Office, with a 2 week turnaround time. The paper’s authors will consider these reviews. If the reviews are editorial in nature, the authors may revise and then submit. If the reviews are more substantial, then the authors should respond within two weeks to the reviewer(s) who made these substantial comments. If there is disagreement about the response, then the matter should go the EDC for resolution. Once that has been decided, the authors will follow the advice of the EDC and re-submit the paper.

**Guideline #4 – Use of specific drug names**

Specific drug names should generally be used when referencing study drugs, both in ALLHAT and in other studies described in the paper. For example, use “the ACE-inhibitor lisinopril”, “the calcium-channel blocker amlodipine”, “the diuretic chlorthalidone” and “the alpha-1 antagonist doxazosin.”

**Guideline #5 – Results Summary and Interpretation**

Previously, the ALLHAT Steering Committee has agreed to a concluding results summary statement such as “the diuretic chlorthalidone is unsurpassed for the initial treatment of hypertension” or "neither the calcium channel blocker amlodipine, the ACE-inhibitor lisinopril, nor the alpha-1 blocker doxazosin were superior to the diuretic chlorthalidone in preventing CHD or any other major cardiovascular or renal outcome,” followed by “chlorthalidone was superior in preventing heart failure and stroke (for stroke, compared with doxazosin, and for blacks with lisinopril),” in the abstract and conclusions sections of manuscripts. When applicable and feasible, this results summary should be included in the abstract and in the conclusions section of the manuscript – unless the manuscript’s data do not support it and call for a change of direction. In this case, the Writing Committee should submit a written justification to the EDC for the change in the results summary or interpretation of the ALLHAT results. The final decision about change of direction will be referred to the ALLHAT Steering Committee.

In addition, writing groups are encouraged to include a clinical interpretation of results in the abstracts and conclusions sections of manuscripts. Previous ALLHAT publications have included statements such as: “Based on heart failure and stroke results, appropriately dosed thiazide-type diuretic (e.g. chlorthalidone 12.5-25 mg/day) should be preferred first-step treatment in most patients with hypertension.” or “These results provide further support for the original ALLHAT conclusion that chlorthalidone (12.5-25 mg/day) should be preferred first-step treatment in most patients with hypertension.” If applicable and supported by the data, consider including similar statements or provide justification for deviations in interpretation. In case of the latter, ALLHAT leadership should be given an opportunity to weigh in.