

# CALL FOR PAPERS

## *Journal of Developmental Origins of Health and Disease*

Themed Issue on

### ***Preterm birth***

#### **Important Dates**

Manuscript submission deadline: **To be confirmed**

Publication of themed issue: **To be confirmed**

Approximately 5 to 13% of all newborns are born preterm, before 37 weeks of gestation. Although preterm birth is common, it has until recent years received relatively little attention in Developmental Origins research. Creating animal models to study long-term effects of preterm birth has been challenging, and epidemiological studies have also been limited in number.

Most available evidence considers adults born at the more extreme end of the prematurity spectrum. They have increased risk factors for chronic adult disease including higher blood pressure, impaired glucose regulation and lower bone mineral density, and that they exercise less than their peers born at term. There is also emerging evidence suggesting that these risk factors may extend to people born moderately preterm and that there may be a “dose-response” relationship between the degree of prematurity and many of these late-life outcomes. However, the data are sparse, although those born moderately preterm constitute the majority of preterm infants.

At the same time, not all outcomes of preterm birth seem to be harmful. Findings as diverse as lower rates of atopic predisposition or less risk-taking behaviours are consistently found in children and adults born preterm. They highlight the importance of studying preterm birth in order to uncover potential protective effects.

#### **Scope**

The purpose of this themed issue is to strengthen the evidence base through a collection of papers addressing different aspects of the long-term outcome of preterm birth. Submitted papers could target, but are not limited to, the following types of topics:

#### ***Long-term follow-up studies***

Suitable studies could cover any outcome with relevance to health and disease and come from any birth cohort or similar design that includes information on length of gestation. Studies from all over the world are welcome, but as most existing data is based on high-income settings, the editors would in particular encourage submissions based on data from low- and middle income countries

#### ***Etiology of prematurity, mechanisms linking preterm birth with adult health and disease***

Preterm birth is heterogeneous by etiology and some of its “programming” effects could be due to diverse etiologies of preterm birth (such as pre-eclampsia/placental dysfunction) and some to conditions after preterm birth (including immaturity-associated illness, inadequate nutrition etc). Disentangling these effects is an important topic and an important step towards uncovering mechanisms that link preterm birth with adult health and disease.

#### ***Experimental models of preterm birth***

Creating experimental models to study preterm birth has been challenging. The editors encourage submission of manuscripts presenting discussing the validity of existing models as well as manuscripts describing original research using these models.

#### **Managing Editor**

**Eero Kajantie**

***National Institute for Health and Welfare, Department of Chronic Disease Prevention, Helsinki, Finland***

#### **Submission Guidelines**

Only original and unpublished high-quality research papers are considered and manuscripts must be in English. You must provide a cover letter to indicate that the submission is for **“Preterm birth themed issue”**. If this is not supplied, or if too many/insufficient papers are accepted for a particular theme, they will be published by the journal as regular submissions. All papers will be submitted to a rigorous peer-review process and the mere fact that they are part of a themed issue (solicited or not) does not guarantee acceptance

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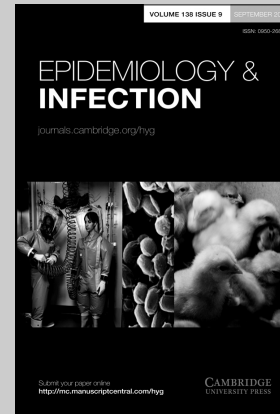
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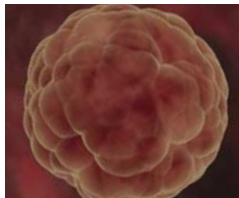
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