



SEPTEMBER 2025

Author Guidelines and Dummy Manuscript Template for Systematic Review Articles

This document serves as both an author guideline and a dummy manuscript for original research articles submitted to MJM Biolabs Journals.

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Authors

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Author Guidelines and Dummy Manuscript Template for Systematic Review Articles

This document serves as both an **author guideline** and a **dummy manuscript** for original research articles submitted to MJM Biolabs Journals. Authors must adhere strictly to the structure described here. Content included is purely illustrative; authors must replace it with their own systematic review data, synthesis, and narrative.

General Formatting Instructions

All manuscripts must adhere to the following formatting requirements:

- **File format:** Microsoft Word (.docx).
- **Font:** Times New Roman, 12 pt.
- **Line spacing:** 1.5-spaced throughout, including references, tables, and figure legends. Abstract should be single-spaced.
- **Margins:** 1 inch (2.54 cm) on all sides.
- **Page numbers:** Continuous, top right.
- **Word count:** Maximum 5,000 words excluding abstract, references, tables, and figures.
- **Language:** British English. Write in clear, formal, and scholarly language. For example, instead of writing “a lot of patients got better” (colloquial), use “a large proportion of patients improved.” Instead of “don’t” (contraction), write “do not.” Instead of “we interviewed 50 participants” (personal pronoun), use “fifty participants were interviewed.”
- **Referencing style:** APA 7th edition. All in-text citations should be author, date style (e.g., World Health Organization, 2021). The reference list should use hanging indent format.
- **Anonymization:** Omit author details in the main manuscript (for peer review). Provide separately on title page.
- **Plagiarism policy:** · Similarity index <15%.





COVER PAGE

The cover page should include:

- **Title:** ≤20 words; must specify “systematic review” or “systematic review and meta-analysis.”
Correct: *Effectiveness of Community-Based Hypertension Interventions in Sub-Saharan Africa: A Systematic Review*
Incorrect: *Community Interventions in Africa*
- **Authors:** (Collins KAMAU) **and Affiliations** (Department of Public Health, School of Health Sciences, Skills Edge University).
- **Corresponding Author:** Full details with email

ABSTRACT (300–350 WORDS)

Structured using PRISMA guidelines: <https://www.bmj.com/content/372/bmj.n71>

Example Abstract

Background: Context and rationale.

Objective: The precise review question.

Methods: Databases searched, inclusion criteria, number of studies.

Results: Summary of main findings; pooled estimates if meta-analysis.

Conclusion: Implications for practice/policy/research.

Example

ABSTRACT

Hypertension remains one of the leading causes of morbidity across Africa, yet the available evidence on effective interventions is fragmented and inconclusive. To address this gap, a systematic review was conducted to synthesise current evidence on community-based interventions for hypertension control in Sub-Saharan Africa. Comprehensive searches were undertaken in PubMed, Embase, AJOL, and the Cochrane Library up to March 2025, targeting randomised and quasi-experimental studies. A total of twenty-five studies involving 12,430 participants met the eligibility criteria. The pooled analysis demonstrated that interventions incorporating community health workers were particularly effective, yielding a significant reduction in systolic blood pressure with a mean difference of –6.5 mmHg (95% CI: –8.2 to –4.7). These findings provide robust evidence that community-based strategies can play a critical role in hypertension management and should be integrated into primary healthcare systems across the region.

Keywords: hypertension, systematic review, Sub-Saharan Africa, PRISMA

INTRODUCTION (600–800 WORDS)

- Provide global → regional → local context.
- Highlight gaps in previous evidence syntheses.
- Clearly state main objective (consider PICO format). Link:
https://libguides.mssm.edu/ebm/ebp_pico

Example flow:

- Globally, hypertension affects over 1.13 billion people (WHO, 2021).
- In Sub-Saharan Africa, prevalence exceeds 40%, yet systematic evidence on intervention effectiveness is limited (Adeloye et al., 2019).
- This review therefore aimed to assess the effectiveness of community-based interventions in managing hypertension in Sub-Saharan Africa.

METHODS (1,000–1,500 WORDS)

Follow **PRISMA 2020**, Link: <https://www.bmj.com/content/372/bmj.n71>

5.1 Protocol and Registration

State PROSPERO ID (if registered). Link: <https://www.crd.york.ac.uk/prospero/>

Example: Protocol registered with PROSPERO (CRD42024567890).

5.2 Eligibility Criteria

Define study designs, participants, interventions, comparators, outcomes.

Example: We included RCTs and quasi-experiments of adults ≥18 years in Sub-Saharan Africa, reporting blood pressure outcomes.

5.3 Information Sources

List databases searched with dates.

Example: PubMed, Embase, Cochrane CENTRAL, and AJOL were searched to March 2025.

5.4 Search Strategy

Provide a sample search in Appendix.

Example: ("hypertension" OR "high blood pressure") AND ("Africa" OR "Kenya").

5.5 Selection Process

Two reviewers independently screened titles/abstracts, resolved disagreements through consensus.

5.6 Data Collection Process

Data extracted using piloted forms on study design, participants, interventions, and outcomes.

5.7 Risk of Bias Assessment

·State tool (e.g., Cochrane RoB 2.0).

5.8 Synthesis Methods

For narrative reviews: thematic synthesis.

For meta-analysis: random-effects models; heterogeneity via I^2 .

5.9 Certainty of Evidence

Use **GRADE** approach if applicable.

5.10 Ethical Considerations

State exemption if no primary data.

RESULTS (1,000–1,200 WORDS)

Report systematically:

- **Study Selection:** Use PRISMA flow diagram.

Example Figure (simplified PRISMA Flow Diagram):

Records identified (n=1,245)



Records screened (n=1,000) → Records excluded (n=850)



Full-text assessed (n=150) → Excluded with reasons (n=125)



Studies included (n=25)

- **Study Characteristics:** Summarize (country, design, n, setting). Use Table 1.
- **Risk of Bias:** summarize with table or traffic-light figure.
- **Results of Studies:** Report outcomes (with forest plots if meta-analysis).
- **Synthesis of Results:** summarize pooled effects.





DISCUSSION (1000–1,200 WORDS)

- **Summary:** Restate main findings.
- **Comparison:** Relate to prior systematic reviews and guidelines.
- **Interpretation:** Possible explanations for findings.
- **Strengths/Limitations:** At review and study level.
- **Implications:** For practice, policy, and research.

Conclusion (150–200 words)

- Concise statement of the evidence and implications.

Recommendations (150–200 words)

- Provide **actionable recommendations** for clinicians, policymakers, and researchers.

Conflict of Interest

- *The authors declare no conflict of interest.*

Author Contributions

- Follow CRediT taxonomy (e.g., conceptualisation, methodology, data curation, writing).
Link: <https://credit.niso.org/>

REFERENCES

- Use **APA 7th edition**. Ensure accuracy and provide DOI links.

Examples:

- Adeloje, D., et al. (2019). Prevalence and determinants of hypertension in Africa: A systematic review and meta-analysis. *PLOS ONE*, 14(3), e0214934. <https://doi.org/10.1371/journal.pone.0214934>
- World Health Organization. (2021). Hypertension fact sheet. <https://www.who.int/news-room/fact-sheets/detail/hypertension>