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Workshop: Research writing and publication. Strategies for success

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EXERCISE 1: Titles and abstracts

Please write a title for each abstract. What specialty do you think the articles are from? What specialists need to read this article to improve their research or clinical care?

1. Title:

The aim of this study was to explore from the Middle-Eastern mothers' perspective, the experience of breastfeeding and their perceptions of attributes of the health care system, community and society on their feeding decisions after migration to Canada. New immigrant mothers from the Middle East (n = 22) were recruited from community agencies in Edmonton, Canada. Qualitative data were collected through four focus groups using an ethnographic approach to guide concurrent data collection and analysis. Survey data were collected on sociodemographic characteristics via pre-tested questionnaires. All mothers, but one who was medically exempt, breastfed their infants from birth and intended to continue for at least 2 years. Through constant comparison of data, five layers of influence emerged which described mothers' process of decision making: culture/society, community, health care system, family/friends and mother-infant dyad. Religious belief was an umbrella theme that was woven throughout all discussions and it was the strongest determining factor for choosing to breastfeed. However, cultural practices promoted pre-lacteal feeding and hence, jeopardising breastfeeding exclusivity. Although contradicted in Islamic tradition, most mothers practised fasting during breastfeeding because of misbeliefs about interpretations regarding these rules. Despite high rates of breastfeeding, there is a concern of lack of breastfeeding exclusivity among Middle-Eastern settlers in Canada. To promote successful breastfeeding in Muslim migrant communities, interventions must occur at different levels of influence and should consider religious beliefs to ensure cultural acceptability. Practitioners may support exclusive breastfeeding through cultural competency, and respectfully acknowledging Islamic beliefs and cultural practices.

2. Title:

BACKGROUND: The iron spot test (IST) is a simple qualitative technique for determining the presence of added iron in fortified flour. IST performance in bread has never been investigated. If found to perform well, the IST has the potential to provide a field-friendly method for testing bread and thus support the monitoring and evaluation of flour fortification programs.

OBJECTIVE: To assess the performance of the IST in Arabic bread made from white wheat flour.

METHODS: Bread samples were collected from 1,737 households during a national micronutrient survey in Jordan. A subsample of Arabic bread (n = 44) was systematically selected for testing by both the IST and spectrophotometry (criterion reference). Performance measures (sensitivity, specificity, and positive and negative predictive values) were calculated using five cutoffs to define the presence of added iron, including > or = 15.0 ppm (approximate level of natural iron in Arabic bread) and four additional cutoffs based on test performance.

RESULTS: The iron contents of samples testing negative by IST ranged from 10.4 to 18.4 ppm, with one outlier at 41.0 ppm, which was excluded from subsequent analyses. The iron contents of samples testing positive by IST ranged from 16.1 to 38.4 ppm. With the exception of negative predictive values for the two lowest cutoffs (> or = 15.0 and > or = 16.1 ppm), all performance measures exceeded 83.3%.

CONCLUSIONS: These results show promise for the IST as an inexpensive, field-friendly method for testing bread that could have a useful role in the monitoring and evaluation process for flour fortification programs.

3. Title:

Dietary components influencing zinc (Zn) bioavailability were implicated in the first cases of human Zn deficiency in the Middle East in the 1960s. It was not until the 1980s that isotope tracer studies in humans quantified the effects of the type and/or quantity of Zn, protein, iron, and phytate (myo-inositol hexaphosphate) on Zn absorption in humans and confirmed the dosedependent inhibitory effect of phytate on Zn absorption. This led to further analysis of the Zn and phytate content of foods. The use of phytate-to-Zn molar ratios as likely estimates of absorbable dietary Zn followed together with an assessment of their relationship with Zn biomarkers in lowincome countries (LIC). In the 1990s, increasing knowledge of factors governing Zn-absorption diets led to refinements of Zn requirements and algorithms to estimate dietary Zn bioavailability. Their use highlighted that inadequate Zn intake from plant-based diets were a major etiological factor in morbidity and stunting in LIC, prompting the need to identify indicators of the population's Zn status. Major advances in analyses of dietary data pioneered by Beaton in 1980s led to the endorsement in 2007 of a dietary Zn indicator based on the prevalence of the population with usual Zn intake below the estimated average requirement for Zn. Risk of Zn deficiency is a public health concern when the prevalence of inadequate Zn intake is >25%. Recent findings that Zn bioavailability from high-phytate, whole-day diets is lower than previous estimates suggest that revision of Zn estimated average requirement for LIC may be warranted.

Writing style and content

- 1. Never use –ing, especially "using".
- 2. Never use "respectively" especially with lists of numerical data.
- 3. Never use an abbreviation without defining it.
- 4. Never mix up USA spelling (e.g. center) and UK spelling (e.g. centre).
- 5. Never have differences in the aims, conclusions or data (including statistical results) between the abstract, main text and tables or figures.

Professional publication practice and strategy

- 1. Take time to choose the most appropriate journal. Consult Researchers / Advice for Authors / Choosing the journal at http://www.authoraidem.org/.
- 2. Always follow the journal's Instructions to Authors or Guidelines for Manuscript Preparation. Editors are offended by noncompliance with the journal's rules.
- 3. Check all references and quotations carefully. Avoid suspicions of plagiarism.
 - Spell all researchers' names correctly. Check the original publication.
 - Use "quotation marks" for literal (verbatim, word-for-word) quotations.
 - Provide the bibliographic reference for i) word-for-word quotations, ii) paraphrased quotations and iii) references to any information or ideas published before (even your own).
- 4. If there is something that you don't understand or that is not clear, ask the editor before you submit your manuscript.

EXERCISE 2: Clear writing

http://jn.nutrition.org/content/141/6/1140.full?sid=072fb672-3677-4654-a15f-b8f9ba6d5ef6
Schröder H, Fitó M, Estruch R, Martínez-González MA, Corella D, Salas-Salvadó J, Lamuela-Raventós R, Ros E, Salaverría I, Fiol M, Lapetra J, Vinyoles E, Gómez-Gracia E, Lahoz C, Serra-Majem L, Pintó X, Ruiz-Gutierrez V, Covas MI. A Short Screener Is Valid for Assessing Mediterranean Diet Adherence among Older Spanish Men and Women J. Nutr. 2011; 141(6): 1140-1145

Impact Factor (2010): 4.3

In the top 12% of all journals ranked by ISI in 2009

Ranked no. 3 among peer-reviewed research journals in ISI's Nutrition and Dietetic category

1. "Using" misused

Using Bland Altman's analysis, the average MEDAS Mediterranean diet score estimate was 105% of the FFQ PREDIMED score estimate.

According to Bland Altman's analysis, the average MEDAS Mediterranean diet score estimate was 105% of the FFQ PREDIMED score estimate.

2. CHD risk was estimated **using** the Registre Gironí del Cor function adapted from the original Framingham function and validated for the Spanish population (12).

CHD risk was estimated **with** the Registre Gironí del Cor function adapted from the original Framingham function and validated for the Spanish population (12).

The abbreviation as the first word of the sentence is not helpful to readers.

3. -ing forms

This screener might also be used to assess dietary compliance in large epidemiological settings **incorporating** a broad spectrum of measurements with limited resources.

Who - or what - incorporates what?

This screener, **which** incorporates a broad spectrum of measurements with limited resources, might also be used to assess dietary compliance in large epidemiological settings.

"measurements with limited resources"?

4. Participle (-ing form) as a noun

Of course, **evaluating** how well the new method measures what it is intended to measure is of paramount importance.

This is acceptable but there is a better alternative:

Of course, it is of paramount importance **to evaluate** how well the new method measures what it is intended to measure.

5. "Respectively"

Which of these five examples are hard to understand? Which are easy to understand?

- 5.1. Weight and height were measured with calibrated scales and a wall-mounted stadiometer, **respectively**.
- 5.2. Specifically, glucose, total cholesterol, and TG were analyzed by hexokinase, esterase-oxidase-peroxidase, and glicerol-phosphate oxidase-peroxidase methodology, **respectively**.
- 5.3. Poor (κ < 0.21), fair (κ = 0.21–0.40), moderate (κ = 0.41–0.60), good (κ = 0.61–0.80), and excellent (κ = 0.81–1.00) concordance was found for 21.4, 28.6, 28.6, 14.3, and 7.1% of the components of the PREDIMED score, **respectively**.

Alternative:

Concordance for the components of the PREDIMED score was poor (κ < 0.21) for 21.4%, fair (κ = 0.21–0.40) for 28.6%, moderate (κ = 0.41–0.60) for 28.6%, good (κ = 0.61–0.80) for 14.3% and excellent (κ = 0.81–1.00) for 7.1%.

5.4. The MEDAS significantly overestimated mean scoring for the PREDIMED score compared with the FFQ (8.68 ± 1.90 vs. 8.43 ± 1.73 , **respectively**).

What does this mean?

5.5. However, LOA expressed in percentages were within a reasonable range (24), showing that the MEDAS-derived PREDIMED score ratings were under- and overestimated by 43 and 53%, **respectively**, compared with the FFQ estimates.

What does this mean?

NOTE: 43 should be 43%.

6. Passive and active voice

6.1. Various indices of diet quality have been proposed (1-3) and there is a consistent body of scientific evidence indicating that increasing adherence to the Mediterranean diet is associated with favorable mental and physical health outcomes (4, 5).

Acceptable but NOTE: It is better to avoid too many -ing forms.

6.2. In epidemiological settings, a composite scale of food items considered characteristic of the Mediterranean diet has been created and a full-length FFQ is the most-used method of estimating an individual's adherence to this healthy eating pattern (6).

Passive voice not helpful to readers

Alternative:

Epidemiologists have created a composite scale of food items considered characteristic of the Mediterranean diet, and the method used most widely to estimate adherence to this healthy eating pattern is a full-length FFQ (6).

NOTE: FFQ not defined, not even in the list of abbreviations.

NOTE: "and" is used to join unrelated pieces of information. This is not helpful to readers.

Thank-you very much for your participation. Please send your feedback on this workshop to me at kshashok@authoraidem.org.