“Those who know do not speak, those who speak do not know.” Lao Tzu
How to get published

- Science is fascinating
- Research is exciting
- Medical advances are mind boggling
• BUT medical journals are boring

• Over 80% of the articles in international journals are flawed
Why are we in this mess?

- Doctors are not trained to do research.
- They are under pressure to publish.
- They do studies that are flawed.
- And have 30,000 journals to chose from.
- Most editors are not trained to be editors.
- Nor are most referees trained to be referees.
Mess?

- Many editors have little to choose from
- Bad papers get published
- Poor standards are set
- The wrong message goes out to prospective research workers
- More bad research is published
Why do you want to do publish?

- You belong to the publish or perish culture
- To justify your research grant
- To make your CV look good
- To do “something academic”
- You need an invitation to the next conference in Hawaii
- You have something worthwhile to say
- Others will benefit from your experience
Simple answer

- Do quality research first – the rest is easy
- Find the funds to do good quality research
- Identify the audience and hence the journal(s)
- Write up the research
Some tips

- Write paper first, do research later
- Ask an enemy to comment on the paper
- Ask a 14 year old to read the paper
- Try to win the Nobel prize for science, not for literature
- Learn from journalists
- Improve writing skills
- Keep it simple
What BMJ does not publish

- pure laboratory based research
- animal research
- case reports (unless presented as lesson of the week or drug point)
- case series with no (or inadequate) control group
- retrospective studies using case notes, charts, and other routinely collected records
- non-randomised comparisons
- intervention studies with no control group
What BMJ does not publish (contd)

- hypotheses
- papers describing interventions and initiatives without evaluating them
- simple prevalence or incidence studies
- cost of illness studies
- surveys of self-reported practice, rather than observed practice
- simple ("open loop") audits without intervention and reaudit
- clinical guidelines based on expert opinion rather than evidence
Consider writing something other than traditional research papers

- Editorials
- Education and Debate pieces
- Clinical reviews, lesson of the week
- Drug points
- Rapid responses (electronic letters)
- Back pages (reviews* obituaries)
Identify the audience and therefore the journal(s)

- Of relevance to patients in more than one country - International journal
- Of relevance to doctors in more than one specialty - General medical journal
- Of local interest - National journal
- Of no interest - Publish in your own journal, website
High quality articles

- Clearly written - “like a window pane”
- Have a take home message(s)
- Based on scholarship, wisdom
- Evidence based
- Are right (for the present)
- Originality (What’s new?)
- Relevant to our audience
- Never boring
- Never dishonest
“We are not in the "truth" business. Scientific truths are all provisional. Most of science falls away as new paradigms emerge… We may be wrong, as we are with many papers. That's science.”

Richard Smith, editor, BMJ
Why have a nice manuscript?

- Because good science may be rendered unintelligible if poorly presented
- Because it saves time for everybody
- If the science is bad no amount of writing skills will make it publishable
- If the science is good editors will help you dress it up
- Almost all papers are revised before publication
Covering letter

- Explain why you think the paper is suitable for the journal
- Rejected elsewhere?
- Delay between study and sending it to the journal
- “The longer the letter the weaker the science”
Good writers

- Know what they want to say before they start writing
- Read instructions to authors
- Go through similar articles in the journal
- Are right (at least for the present)
- Are consistent (style)
- Know what needs a reference
- Declare competing interests
Quality writers (2)

- Avoid jargon, clichés
- Deliver on time
- Stick to word limits
- Are open to suggestions, advice
- Don’t reverse all changes made by editors
- Are not rude, libellous, or petty
- Get invited to write again
“The history of epilepsy can be summarised as 4000 years of ignorance, superstition, and stigma followed by 100 years of knowledge, superstition, and stigma.”

BMJ 1997;315:2-3 (5 July)
"Young doctors should learn about Alzheimer's with the smell of urine from an incontinent patient in their nostrils. They should watch patients with Parkinsonism struggling to take off their trousers or bras, share a table in the canteen with a person with dyskinesia, or dance with a patient with Parkinsonism at a self help group dinner. Then they will know what the disorders mean."

"For neurologists Parkinsonism is all in the brain; for people with Parkinsonism it is mostly below the neck.”

-Mary Baker
Avoid jargon

“Give me an 8 bennie with a cookie, and if that doesn’t work jimmy an 8 1/2 charlie for the Up”

- “bennie” read B width
- “cookie” read arch support
- “jimmy” read felt pad
- “charlie” read C width
- “Up” read customer who should not leave without buying shoes
Why do doctors write badly?

Because they cannot think clearly
To look clever
Because all academic writing is "like that"

"(Language) becomes ugly and inaccurate because our thoughts are foolish."

Politics and the English Language, George Orwell, 1946
George Orwell's rules

1. Never use a metaphor, simile, or other figure of speech which you are used to seeing in print.
2. Never use a long word where a short one will do.
3. If it is possible to cut a word out, always cut it out.
4. Never use the passive where you can use the active.
5. Never use a foreign phrase, a scientific word, or a jargon word if you can think of an everyday English equivalent.
6. Break any of these rules sooner than say anything outright barbarous
...like an English professor of political science

“I am not, indeed, sure whether it is not true to say that the Milton who once seemed not unlike a seventeenth-century Shelley had not become, out of an experience ever more bitter in each year, more alien [sic] to the founder of that Jesuit sect which nothing could induce him to tolerate.”

Professor Harold Laski
Professor of Political Science at LSE
Essay in Freedom of Expression
"On the one side we have the free personality: by definition it is not neurotic, for it has neither conflict nor dream. Its desires, such as they are, are transparent, for they are just what institutional approval keeps in the forefront of consciousness; another institutional pattern would alter their number and intensity; there is little in them that is natural, irreducible, or culturally dangerous. But on the other side, the social bond itself is nothing but the mutual reflection of these self-secure integrities. Recall the definition of love. Is not this the very picture of a small academic? Where is there a place in this hall of mirrors for either personality or fraternity?"

- Essay on psychology in Politics (New York)
"The outstanding feature of Mr. X's work is its living quality,"

"The immediately striking thing about Mr. X's work is its peculiar deadness."
The solicitor stood up. "So you won't pay the outstanding council tax?"
"No." said the old man, standing calmly in the dock. "Why not? You think you're special?"
"No. But I don't see why I should have to pay for my wife, too."
The solicitor smiled, and leaned forward. "That's the way it works. Why shouldn't you pay like everyone else?"
The old man paused. "Because she died in 1974."
"Happy birthday, darling." The box was Tiffany blue. Trembling, she opened it. Three carats, utterly flawless. Perfect, like him. "More wine?"

The Lafitte had seemed off to her earlier. As he poured now, the label showed why. She stared, then looked again at the ring. Doubtlessly fake, like him. Such a stupid mistake - and a lucky escape for her. "Nice laser printing," she said, "But 1974 was a non-vintage year."
“China has successfully diagnosed, treated, and cured more cases of tuberculosis than any other DOTS programme to date.”

See Articles page 417
Write like your friend who sits with you in the canteen and tells you a story.

“When I was an intern in obstetrics I saw several cats in the department. Everyone called them fat cats, but I thought the cats were not fat. So I weighed the cats, and I found that the cats were not fat. Visual impressions can be wrong, you know.”
The best paper written so far

Introduction (why did you do what you did?)
When I was an intern in obstetrics I saw several cats in the department. Everyone called them fat cats. I thought the cats were not fat.

Method (what did you do?)
I weighed the cats.

Results (what did you find?)
I found that the cats were not fat.

Discussion (What does it mean?)
Visual impressions can be wrong.
Introduction

The prevalence of obesity in feline creatures remains as yet an unanswered query.\textsuperscript{[1-4]} There are innumerable reports in medical literature which have addressed this issue,\textsuperscript{[4-6]} albeit with contrasting methodology.\textsuperscript{[7]} In our experience, reports of feline obesity in the Indian literature are conspicuous by their absence. The presence of an appropriate number of felines in the Department of Obstetrics and Gynaecology, prompted the authors to estimate the magnitude of the problem in Indian cats. An ongoing prevailing notion was the untested belief that there was a high prevalence of obesity in cats in India. Informed consent...
Papers from India

- Wordy and repetitive
- Sometimes unintelligible
- Filled with abbreviations, jargon, clichés
- Too many case reports, case series
- Ethical considerations often ignored
- Poor concepts of study design
- Better English than many Europeans
Thank you