

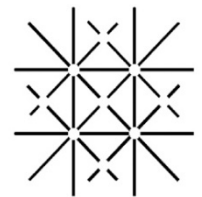
5th Paediatric Infectious Disease Training Course

Kantonsspital St. Gallen

November 25/26, 2016

Finding the right words: How to write a good PID paper ?

(An editor's point of view)



Uni Basel

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Agenda

- Requirements for writing a paper
- Challenges and traps
- Tricks and Solutions

Target audience is **junior staff**

Seniors: relax

Potential „Material“ for a Paper

- Interesting observation → **case report**
- Interesting observation, repeatedly
→ **case series**
- Interesting issue/clinical problem → **literature review** (systematic review) or **retrospective study** of available data (single/multiple centers)
- Really interesting issue → **prospective study**

Systematic Review

- = Transparent and complete reporting of evidence (*Meta-analysis* if statistics are applied)
- Challenging, as it requires structured approach and significant amount of time
- Topic has to be of significant relevance *and close to your heart*
- Provides chance to become an expert

You have a story to tell!

1) Define authors and have a plan

- who is your senior author?
- who are the co-authors, in which order?
- who contributes what?
- set timelines (roughly)

Authorship Rules

An “Author” is someone who has made substantive intellectual contributions.

Each author has to meet ALL of the following 3 criteria:

- 1) Substantial contribution(s) to conception and design, or acquisition of data, or analysis and interpretation of data
- 2) Drafting the article or revising it critically for important intellectual content
- 3) Final approval of the version to be submitted

Never submit a manuscript without approval of final version by all authors!

You have a story to tell!

1) Define authors and have a plan

- who is your senior author?
- who are the co-authors, in which order?
- who contributes what?
- set timelines (roughly)

2) Who is your target audience?

- identify adequate journal
- read author guidelines
- read author guidelines again - carefully

3) Search and read the literature on the topic!

Start writing

- 1) Draft an **outline** (ideas)
 - introduction, methods, results, discussion
- 2) **Keep it short** (sentences and text)
- 3) Think about **tables and figures** (≤ 5 in total)
- 4) **Do *not* repeat** content of tables or figures extensively in the text.

Rather:

- introduce each table and figure
- highlight specific interesting findings in text

Measles immunization levels in the study cohort were compared with survey-based estimates produced by the FOPH for the period 2005–2007.⁹ Our results for average proportions of children immunized with MCV1 and MCV2 by age 24 to 35 months broadly corresponded to officially reported immunization levels (Table 1). A basic sensitivity analysis to explore various proportions of MCV coverage for FOPH survey data were compared with unvaccinated

Timing of Measles Immunization and Effective Population Vaccine Coverage

AUTHORS: Julia A. Bielicki, MD, MPH,^{a,b} Rita Achermann, MSc,^{c,d} and Christoph Berger, MD^{a,b}

Pediatrics 2012;130:e600;

TABLE 1 Vaccine Coverage for 24- to 36-Month-Olds Comparing Data for the Study Cohort Insured With a Single Health Insurer Between 2006 and 2010 Versus Official Nationwide Postal Survey-Derived FOPH Data for 2005 to 2007^a

Data Source	Age	Vaccine Coverage, % (95% CI)	
		MCV1	MCV2
Helsana	13 mo ^b	62.6 (62.3–62.8)	—
	25 mo ^b	84.5 (84.3–84.7)	59.4 (59.1–59.6)
	24–35 mo ^c	85.7 (85.3–86.2)	66.7 (66.1–67.2)
FOPH ^c	24–35 mo	86.9 (NA)	70.8 (NA)

NA, not available.

^a Data from Lang et al.⁹

^b Cumulative proportion vaccinated at indicated age.

^c Calculated average proportion vaccinated in indicated age range.

Keep writing

1) Introduction

- What is known (brief)
- Give references (landmark papers)
- Finish by saying what you will report and why you do it

Keep writing

2) Methods

- Study design (incl. definitions)
- When and where
- Who: Patients (inclusion/exclusion)
- (Laboratory methods)
- (Statistics)
- Ethics (consent to publish pictures of patients)

Keep writing

2) Results

- General characteristics (Table)

Table 1 General characteristics of patients and central venous catheters

Characteristics	Total	Patient groups			
		Neonatal unit	Haemato-oncology unit	Surgical unit	Other units
Patients with CVC					
N (male/female)	152 (88/64)	57 (31/26)	52 (34/18)	19 (5/14)	24 (18/6)
% of total	100	38	34	13	16
Catheter types	N (% of total)	N (% of group)	N (% of group)	N (% of group)	N (% of group)
UVC	59 (28)	55 (66)	0 (0)	4 (10)	0 (0)
PAC	48 (23)	0 (0)	46 (74)	0 (0)	2 (8)
OC	38 (18)	2 (2)	5 (8)	12 (31)	19 (79)
BRO	34 (16)	3 (4)	11 (18)	17 (44)	3 (13)
SC	30 (14)	24 (29)	0 (0)	6 (15)	0 (0)
Total (% of total)	209 (100)	84 (40)	62 (30)	39 (19)	24 (11)
Age (months) at CVC insertion, median (IQR)	3 (0–56)	0 (0–0)	78 (42–153)	3 (0–8)	17 (7–66)
Duration (days) CVC remained in place during study period, median (IQR)	11 (4–76)	4 (2–10)	173 (75–359)	12 (7–29)	9 (6–16)
Total CVC days (% of total)	14752 (100)	659 (4.5)	11863 (80.4)	1282 (8.7)	948 (6.4)

BRO, Broviac; CVC, central vein catheter; OC, all other CVC (ie, placed into internal jugular, external jugular, subclavian or femoral vein); PAC, Port-a-Cath; SC, silastic percutaneous central venous catheter; UVC, umbilical vein catheter.

Keep writing

2) Results

- General characteristics (Table)
- Study flow (incl. drop outs – Figure)

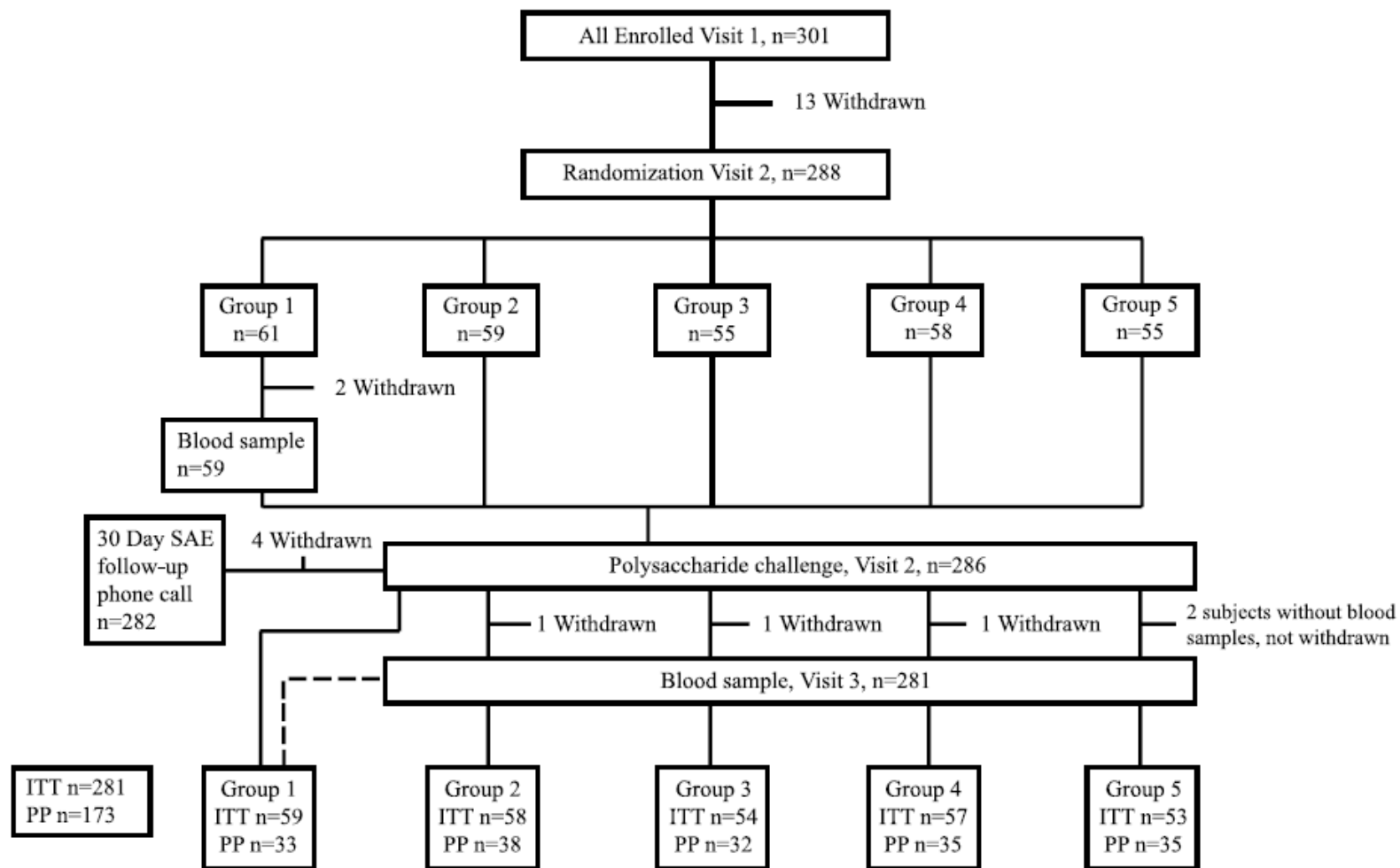


FIG. 1. Flow chart of study subjects by visit and group.

Keep writing

2) Results

- General characteristics (Table)
- Study flow (incl. drop outs – Figure)
- Be objective – **facts, no interpretations**
(avoid: «to our surprise...»; «unexpectedly...»)
- Report most relevant findings and order them logically (use subheadings)
- Summarize the rest in a few sentences
(«data not shown» «available on request from the authors»)

Keep writing

2) Results (continued)

- «More patients in group 1 (50%) than in group 2 (5%) recovered...»
- «Twenty-five (50%) of 50 patients in group 1 compared to 10 (5%) of 200 patients in group 2 ($p < 0.01$) recovered...»

N, % and p-values for comparisons

Keep writing

2) Discussion

- Start with a summarizing sentence (what is *most* important?)

DISCUSSION

By using health insurance data for a cohort of >40 000 Swiss children born between 2006 and 2008, we were able to demonstrate that 62.6% and 59.4% of our cohort were up-to-date for MCV1 and MCV2 at 13 and 25 months of age, respectively. Average coverage at 24 to 35 months of age was found to be broadly in the range of official estimates, with 85.7% and 66.7% for MCV1 and MCV2.

AUTHORS: Julia A. Bielicki, MD, MPH,^{a,b} Rita Achermann, MSc,^{c,d} and Christoph Berger, MD^{a,b}

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Keep writing

2) Discussion

- Start with a summarizing sentence (what is *most* important?)
- *Interprete* your results – speculate why
- *Compare* your results with others – what is supportive, what is different – speculate why
- Briefly describe other key papers when you first introduce them (who did what when and where)
- Strengths and limitations
- So what and what next? (conclusions(!) and outlook)

Keep writing

- Write **abstract** when everything is done
 - this is a **very important** piece of your work!
- **Keep all drafts** in a file and **make copies**
(e.g.: Funny twinkles after MMR vaccination_v1_161126.docx)

Before you submit

- Double check *guidelines for authors*
- Observe the rules (title page, abbreviations, style of references,...)
- Let someone not involved read the paper
- Check for „**Keep it short!**😊“
- Get approval from all authors (and those named under acknowledgement)
- Be ready to propose reviewers (go for experts - avoid close „friends“)

What Editors and Reviewers look at

- Authorship guidelines observed?
- Good and clear language?
- Is information given in the abstract self-explaining?
- Ethics?
- Other papers by same authors?
- Consistency?
(Methods-Results-Discussion-Conclusions)
- Self criticism (limitations; avoid exaggerations)

What is the best way to learn how to write a paper?

- Practise: do it!
- Practise: do it again!
- and again and again and again

Suggested reading

- **Author's guidelines**
<http://mulford.meduohio.edu/instr/>
- **SQUIRE Guidelines** (Standards for Quality Improvement Reporting Excellence)
www.squire-statement.org
- **PRISMA statement** (for systematic reviews and meta-analyses)
www.prisma-statement.org
- Standardized Methods for safety assessment
www.brightoncollaboration.org