

## The simpler the better: What non-native readers prefer?

Dear TWS,

I have noticed a tendency for contributors to *The Write Stuff* to use examples of such dreadfulness that starting again is really the only option. David Alexander (*TWS* 2009; 18(2): 96-7) gives excellent advice on making the sentence subject the same as the sentence topic, but his rewrite, while illustrating his point, still needs shredding.

*Congenital heart defects have a multifactorial aetiology, in which subtle genetic factors and periconceptual exposures interact. This aetiology may involve derangements in the homocysteine and detoxification pathways. An important role in both pathways is played by the recently identified nicotinamide M-methyl transferase (NNMT) gene and its substrate, nicotinamide.* (revision 1)

### Comment on 'Preventing errors becoming facts'

One possibility for online articles containing errors would be to replace them with a corrected 'second edition'. The corrected version could be placed where the original one was found, and thereby reduce the likelihood that people ignore the errata as occurs in the current situation. The only caveat is that it would also require editors to archive the original, uncorrected version in an accessible form. This would be effectively a reversal of the current situation, as the imperfect original would not link to an erratum explaining the change (and making the reader do the work) but rather a corrected version would be found in its place and link back to the imperfect original for the purpose of verification and interest (a trail only those with a special interest would follow). The record would be verifiably corrected but not erased. Obviously, this would require a complete shift from the way things are currently done. However, the current procedures are clearly based on a logic designed to suit hard-copy, paper-based journal publishing. Moreover this procedure has already been adopted for new editions of books in Wiley Online books, where the new version is posted 'in front' but the previous one is left there in some form for librarians who like the complete archive.

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Ignoring Tim Albert's suggestion that this is what medical journals want (*TWS* 2009; 18(2): 83-4) look at the markers here of bad style: "aetiology", "involve", "role... played by". Aetiology (which properly is the science of the causes of disease) is not synonymous with cause, and "multifactorial aetiology" (many causes) should be banished, along with "therapeutic armamentarium" (range of drugs). Now I've seen it, "periconceptual exposures" should probably join them. "Involve" is almost always an imprecise replacement for the correct verb. Role play is best left to social workers. I am not familiar with the science under discussion and so will ignore the confusion (to me) that nicotinamide is the substrate of the enzyme (NNMT) and not of its gene. So how about:

*Congenital heart defects are caused by a complex interaction of subtle genetic factors and exposures around the time of conception in which derangements in the homocysteine and detoxification pathways, particularly perhaps the recently identified nicotinamide M-methyl transferase gene and its substrate, nicotinamide, may be important.* (revision 2)

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### Author's reply

We applaud Dr Goodman for bringing a subject expert's eye to these passages and for showing how much more accessible scientific writing might become. The question now is whether he might have gone further. As we felt that his single-sentence solution might not be readable enough—especially for non-native speakers of English (NNSs)—we tested both revisions on 32 PhD students attending the 15-week course in English for biomedical communication we teach at Erasmus University Medical Centre, Rotterdam. All are NNSs: 27 Dutch, 2 German, and 1 each of Spanish, Turkish and Chinese. With the exception of two (one a data manager, the other a health-science researcher), all had backgrounds in medicine (in disciplines including paediatrics, oncology, psychiatry, and rheumatology).

At the end of class they filled in a short questionnaire that presented the original text and the 2 revisions: revision 1 (DA's) and revision 2 (NG's). They were asked to 1.) assign each revision a readability score (from 1 to 10, with 1 = poor); 2.) say whether they had had to read each text more than once, and, if so, how many times; 3.) give the

## Vital signs

- reasons for needing to reread; and 4.) to briefly state the characteristics of each revision.

They had seen the original text and revision 1 in class a few weeks previously. Now, when given the questionnaire, they were told merely that revision 2 had since been suggested, and that we were interested to know their reaction to it.

The responses confirmed our hunch that, despite the admirable demystification of its terminology, revision 2 is difficult to read. The mean readability scores were 4.3 for revision 2, against 7.4 for revision 1. Revision 2 scored 10 only once, but revision 1 was assigned this score 3 times. Over 90% of the respondents needed to read revision 2 more than once (on average, they read it 1.9 times); this compares with 50% who needed to reread revision 1 (on average, rereading 1.5 times).

As for *why* the revisions were reread, the most important reason for rereading revision 2 had to do with the sentence length. Twenty of the 29 respondents used the word ‘long’ in their reason; 3 referred to the sentence’s complexity. Sentence length was not mentioned as a reason to reread revision 1; here, the main reason (8 out of 16) was to check the meaning/compare the revision with the original. Only 4 of the 29 respondents who had reread revision 2 mentioned this reason.

When describing the characteristics of the revisions, the respondents used more negative terms for revision 2 than for revision 1. As well as its length (‘long’ was mentioned 19 times), it was “not easy to read”, “very unclear”, “woolly”, “complex”, “complicated” and “difficult to understand”. Four respondents, however, made positive comments: it had “clearer flow of thought”, was “easy to understand”, “very nice to follow”, “very successful when used for [sic] people with a little bit of background”. As for revision 1: half (16) of the respondents used the word ‘clear’ to describe it, and 4 mentioned ease of reading. One respondent pointed out the scientific incorrectness of the use of aetiology in revision 1, noting that revision 2 had corrected it.

Our quick and by no means flawless survey shows the importance of readability to NNS readers, especially those who are novice readers (and writers) of scientific English. It also demonstrates the complementarity of language professionals and subject experts in improving NNS texts (cf. [1]). Language professionals can improve style, but subject experts can more easily identify the core message of a text and cut out unnecessary jargon.

This is partly why we decided to leave the last word to the writer of the original passage—the only person, we felt, who could now advise us on its best formulation. Before this had been agreed, however, she made two interesting points.

The first concerned the definition of aetiology, which she had looked up (under its US spelling) in Merriam Webster’s Dictionary: “**1** : **CAUSE, ORIGIN**; *specifically*: the cause of a disease or abnormal condition”. Presumably, this dictionary was compiled by English native speakers. If this is the definition *they* give, who else should an NNS writer trust?

Her second point concerned verb constructions such as “involved in”, “associated with” and “play a role in”. Yes, they’re grossly overused—but as it’s not *always* possible to describe everything in concrete terms, there are times when they’re all you *can* use. We were nonetheless very pleased to add some very useful concreteness to her new formulation:

*Congenital heart defects are caused by a complex interaction between subtle genetic factors and exposures around the time of conception. This process is influenced by derangements in the homocysteine and detoxification pathways, which may themselves be influenced by mutations in the recently identified nicotamide M-methyl transferase (NNMT) gene, and by different concentrations of its substrate, nicotinamide.*

### Acknowledgement

With many thanks to Lydi van Driel.

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### Reference:

1. Benfield JR, Feak CB. How authors can cope with the burden of English as an international language *Chest* 2006;129:1728-1730

**Comment from Neville Goodman:** “Fascinating! Yes, the last rewriting is the best”.

## Team work in translation

### Dear TWS

It was at the Barcelona conference that I first learned about the team-based translation approach Iain and Greg describe in this issue of *TWS*. I admit that listening to their experience with the translation project left me a bit envious. Being a medical translator myself, I know that translating can be a very lonesome journey, particularly for those of us who are freelancers. I was fascinated to hear about translators who work in an autonomous, integrated and creative team. The approach offers each translator involved the possibility to both contribute his or her know-how to the team and benefit from the group's 'accumulated' expertise. In other words, you are given the chance to grow, both professionally and personally. This is certainly a very special working environment not commonly found, at least in Germany. While I appreciate the challenges faced by the team's coordinator(s) and every team member in terms of establishing a stable, reliable and trusted group of translators, implementing processes to manage the shared know-how and resources, and providing the necessary tutoring of new members to the group, I am still sure that the effort is worth-while. The approach is truly encouraging in a translation business that often does not leave much room for creativity.

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## Bony vs bone

### Dear TWS

Alistair Reeves poses an interesting question and, I think, goes a long way to answering it.

He points out that we have an adjective from bone, but no appropriate adjective from brain or liver. Since we have this adjective available, why not use it.

The reason why I prefer the adjective bony to the noun bone is that it points to the important clinical point that if a patient has cancer cells in the bones as a result of progression of, say, prostate cancer these are prostate cancer cells, not bone cancer, though they may be like bone. Treatment is for prostate cancer not bone cancer and so the distinction, though rather nice, may have some small value. I suppose that the term bone metastases could be used to describe secondary tumours arising from a primary bone tumour (except this is rare).

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## Different from: An explanation

### Dear TWS

In his article (Four letter words and others (6) *TWS* Vol. 18, No. 3, 174-5) Alistair Reeves says that he has no good explanation why it should be different from rather than different to. Can I suggest the origin of the word in Latin—*differens*, present participle of *differre* to differ—provides sufficient clue. I can't imagine anyone saying that their view differs to some else's, still less that they hold an opinion that differs than the norm.

Alistair is not alone in feeling uncomfortable with different than. My favourite dictionary (and I'm a native British English speaker) is a battered elderly copy of the American Heritage Dictionary of the English Language. It comments on the use of the word different: "*Different from* and *different than* are both widely used but the Usage Panel has a strong preference for *different from*. This is especially marked when *different from* can be used without inducing wordiness (when it is followed by a single noun or pronoun or by a short phrase or clause). *This illustration is different from that. This was different from what we expected.* In the first example only 11 per cent of the Panel consider the alternative *different than* acceptable; in the second only 17 per cent would accept *different than*."

The entry goes on to give reasons why, and circumstances when, *different than* is acceptable or even preferred. On this point I beg to differ than them.

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## Communication in quotes

"There are few human activities we value more, understand less, and perform worse, than person-to-person communication".

Robert M. Soucie 1979

The rules of writing by Thomas Jefferson "Don't use two words when one will do".

"The most important thing in communication is to hear what isn't being said".

Peter Drucker American (Austrian-born) management guru (1909-2005)

With thanks to **Joeyn Flauaus** (Joeyn-Flauaus@sano-fi-aventis.com) for providing the quotes.