



## In the Bookstores...

# The road to publication success

by Karen Shashok

*Elizabeth Wager. Getting research published. An A to Z of publication strategy. Oxford, Seattle: Radcliffe Publishing, 2005. ISBN 1 85775 687 8 (Paperback)*

If you work for corporations or institutions that aim to publish their research output efficiently for the widest possible impact, and if you are not already familiar with Wager's earlier writings and EMWA's own efforts to support good publication practices, you should buy this book and read it from start to finish. It condenses almost everything you'll need to know to develop successful publication strategies, bringing together Wager's vast knowledge and the most up-to-date documents that underpin good professional practice for medical writers and other research publication facilitators.

In the section titled "About this book" the author explains to readers how they can use the book to locate the information they seek. Wager is careful to point out the potential limitations of her advice and the pitfalls of taking everything in the book as the last word in publication strategy. Some areas in science publication—notably the responsibilities of authors in complying with document preparation requirements and ethical guidelines, and the roles of research sponsors in clarifying their motives for publishing their results—are evolving rapidly, so changes can be expected and readers will need to keep track of new developments.

The first part of the text proper, titled "Publication strategy—an overview," consists of a few concise chapters that summarize the approaches the author has developed and found useful in the course of her practice. Wager recommends reading this section first if you are new to publication. In-house managers who are thrown into the deep end of corporate publication will also find this section an invaluable guide to understanding what priorities and tasks are involved in developing an effective publication strategy. Another audience for this section is author's editors and other publications consultants who are already familiar with how science journals operate and are preparing to tackle project management and other tasks with broader organizational responsibilities than translating or editing manuscripts for submittal. For author's editors and translators, this section provides valuable guidance on how longer-term publication projects could be set up and run.

The second part of the text is an A-to-Z listing of terms used in research publication. Although many entries are for concepts associated with biomedical publication (e.g. "Big Five," "CONSORT" and "Trial identifier"), other entries can be read and considered in the context of journal publication in other areas of science and technology (e.g. "Anonymous reviewers," "Figures" and "Impact factors").

This coverage makes the book potentially useful to publications planners in areas other than biomedical research.

## Leading the way in ethics and good professional practice

In the chapter "Working with a medical writer" the author raises the possibility of conflict between the medical writer and the authors (or their superiors) when the latter find it hard to agree on the content. Wager says, "it is unreasonable to expect the writer to act as arbitrator," and "it is unfair to expect writers to act as mediators in disagreements between sponsors and investigators." It is of course the researchers themselves who must assume responsibility for the data and their interpretation, as the Vancouver (ICMJE) guidelines have made clear for many years. Similar lines of accountability are drawn in EMWA's own guidelines on the role of medical writers, and in the Good Publication Practice (GPP) guidelines for pharmaceutical companies—both conveniently reprinted in Appendix 3 of the book. But once the medical writer has become deeply involved in developing and managing a publication strategy for the client and in facilitating communication between all the players involved in writing, revising and publishing the material, it may be difficult to simply withdraw and let the authors and their sponsor resolve their differences in data interpretation. This makes it important for responsibilities and expectations to be defined at the onset of a project, so that the burden of conflict resolution—a process that may cause delays and missed deadlines—is not placed on the medical writer's shoulders.

## Influence of culture and language on publication strategy

For EMWA members who work with authors whose first language is not English, the book contains a few valuable pieces of practical guidance, although future editions could perhaps expand a bit on the increasingly international aspects of scientific-technical-medical communication. In the entry for "Acknowledgements," translators need to be added to the list of professionals who deserve to be named in this part of the publication. The entry for "Names" notes that "[m]ost English language journals are not particularly good at handling Spanish or Chinese names" (how true!), and cautions that particular care is needed with accents and "with multi-part names or those in which the family name appears before the individual name." The entry for "Redundant publication" notes that "[s]econdary analyses, follow-up studies and translations should be clearly labelled as such and should always include a reference to the original study." Unfortunately, there is no entry for sec-

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ondary publication (to make the information more widely accessible to readers in the authors' own language when English is not their first language), and thus there is a lingering (and no doubt unintentional) implication that translation is an ethically distasteful option only to be tolerated under special conditions. In fact, secondary publication is a perfectly legitimate practice as long as the primary publication is clearly referenced and the editors of the primary journal are advised of the authors' intention to publish the same study in another language.

In the entry for "Xenophobia" Wager points out that "[g]eographical bias definitely exists to some degree, and a good strategy therefore needs to take it into consideration." Strategies to offset this bias should probably involve a dispassionate look at what the target journal's readers expect to find in terms of scope, coverage and geographical or epidemiological relevance as well as a consideration of the medical and scientific topics the journal aims to cover. Something as simple as asking the editor before submittal whether the journal would publish a study on a specific problem investigated in a specific population may save time and avoid frustration if the answer is an honest "No." And in these times of declining standards in the use of English and the scarcity of proficient technical editing and copyediting, efforts to ensure that the manuscript as initially submitted is highly readable and meets the target readership's expectations for use of language will probably pay off in enhanced chances of publication.

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## What is a defining clause or the curse of the 'ing' form

For some time I have been asking myself whether the difference between 'that' and 'which' or rather the use of commas in relative clauses is taught in English lessons at Austrian schools. If not, which seems likely, then certainly the idea that the 'ing' form can come to the rescue has not escaped Austrian authors who write in English. Take just one example from the manuscript I edited today "A1PI belongs to the family of serpins inhibiting serine proteases." This hardly makes sense but saves worrying about whether it is just that family of serpins that inhibit serine proteases or whether it is all serpins, which inhibit serine proteases. I have also noticed 'what' being used recently as a sort of compromise between 'that' and 'which' as in "These interactions are important for the up-regulation of CD40L on activated T cells what is essential for the co-stimulatory interaction with B cells." I have seen 'what' used like this in manuscripts from American speakers too.

One of the clearest explanations of defining and non-defining clauses that I have read was written by Valerie A. Elliston. She has kindly granted TWS permission to reprint her article, which you can read in the box on this page.

## 'That' or 'Which'? Relative clauses

The choice between 'that' or 'which' depends upon the type of relative clause involved and is connected with the use of commas.

A relative clause is introduced by 'who', 'which', 'that'. There are two types: defining or non-defining. Do we know enough about the subject of the sentence or do we need to define it with a few more words?

1. The experiments that they reported were successful. (Some)
2. The experiments, which they reported, were successful. (All)

Example 1 implies that there are other experiments, unreported and unsuccessful. The words 'that they reported' form a defining relative clause. It is needed in order to define this particular group of experiments.

Example 2 implies simply that the experiments were successful. The words 'which they reported' placed between a pair of commas, form a non-defining relative clause. The experiments were all successful; the clause 'which they reported' is just extra information.

1. Do not give fluids that are diuretic. (Some)
2. Do not give fluids, which are diuretic. (All)

Example 1 permits administration of fluids but NOT those that are diuretic.

Example 2 forbids ALL fluids because they are ALL diuretic. In this sentence, only one comma is necessary.

Purists insist on the use of 'that' for defining relative clauses, and the use of 'which' as well as the comma or commas for non-defining relative clauses. The argument is that this distinction makes it easier to grasp the difference. However, it is now acceptable to use 'that' or 'which' for defining but always 'which' for non-defining.

Another point: 'which' can sometimes relate to a whole clause or sentence, not just to a single word. 'She tore up the letter that upset me.' = She tore up the letter and I was glad because that particular letter upset me. But, 'She tore up the letter, which upset me.' (Comma plus 'which') = The act of tearing up the letter upset me because I wanted to keep it. Therefore, the careless use of 'that' or 'which' and the comma or commas can actually reverse the meaning of a sentence.

Again, these are simple examples. It is not difficult to imagine more serious situations that need more care. In such cases, if the careful distinction between 'that' and 'which' helps to make things clearer, why not draw it?

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