

## CME Article

# Effective Medical Writing

Pointers to getting your article published

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## Writing an editorial

### ABSTRACT

**An editorial may be written by the editor or someone invited by the editor. It serves many other purposes, including critiques of original articles published in the same issue of the journal, concise reviews of topics that do not warrant a full-length invited review, and other topics on very recent developments that are deemed by the editor to be important to readers of the journal and the community. As there is typically a limited space in which to deliver its contents, the message contained in the editorial needs to be well thought out and concisely delivered. It should contain the correct sequence of the elements of critical argument, ideally supported by evidence, and end with a clear conclusion.**

**Keywords: commentary, editorial, medical writing, opinion, scientific paper**

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### INTRODUCTION

Editorials are a feature of most medical journals. The frequency and type of editorials published depend on the aims and mission of the journal, and to a certain extent, whether or not an editorial is published may be regarded as a prerogative of the editor. Some journals publish one or more editorials in every issue, while in other journals, they appear only occasionally. Editorials contribute to the character of a particular journal, and may be a means by which editors add their personal imprints onto a journal.

In the past, as indicated by the term editorial, the editorial message was written by the editor himself. Currently, in the majority of journals, editorials have evolved to serve many other purposes, including

critiques of original articles published in the same issue of the journal, concise reviews of topics that do not warrant a full-length invited review, and other topics on very recent developments that are deemed by the editor to be important to readers of the journal and the community. An invitation to write an editorial is considered a high honour, and most experts would readily accept it.

Most editorials are invited, although some editors may consider accepting proffered submissions. Unsolicited editorials are almost always sent for peer review, which are often more stringent than usual—given the influential nature of editorials—and are often reviewed by members of the editorial board or a distinguished expert. As with other categories of articles submitted, it is useful to carefully study the target journal's Instructions to Authors to understand the journal policy with regard to editorials, particularly non-commissioned editorials, as well as to take a look at recent issues of the journal to get an idea of the type, scope and style of published editorials.<sup>(1)</sup> For example, the Instructions to Authors for *The Lancet* clearly states that “editorials are the voice of *The Lancet*, and are written in-house by the journal's editorial-writing team”, i.e. there is no point in submitting unsolicited editorials.

#### Box 1. Purposes of an editorial:

- Personal message from the editor to journal readers.
- Commentary on a published article in the same issue.
- Concise review on a topic of current interest (not warranting a full invited review).
- Drawing readers' attention to very recent developments or innovations.
- Commentary on non-scientific topics, e.g. health policy, economics, law or ethics.

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## HOW TO WRITE AN EDITORIAL

Unlike original articles, editorials do not follow the IMRAD structure for manuscript organisation. There is usually no abstract, subheadings, or a formal conclusion section. Most editorials do not exceed two printed journal pages in length, so the challenge is to compress the author's message into a rather tight space, and yet present his ideas in a clear and logical sequence.

There is truth in Huth's contention that writing an editorial is more demanding than writing a research paper, and that there is indeed a format to an editorial. The task of composing an editorial is easier if the elements of critical argument are kept in mind. Considerations include the length of the editorial, the amount of evidence it examines, and the number of possible answers.<sup>(2)</sup>

### Box 2. Contents of an editorial [adapted from Huth<sup>(2)</sup>]:

- Raises an issue or poses a question.
- Suggests one or more possible answers.
- Provides available evidence supporting the possible answers.
- Assesses counter-evidence.
- Concludes with an answer.

When raising an issue or posing a question, the amount of background information to be included should be appropriately tailored to the target audience. In providing the evidence to support the possible answers, the evidence base for each key statement should be clear, and each statement should ideally be supported by citations to a limited number of published papers. The concluding paragraph or closing sentences should carry a clear answer to the question posed in the opening paragraph. If there is no clear answer, the editorialist may suggest possible avenues to better tackle the problem.

In some journals, editorials take the place of commentaries, opinions or perspectives. Their purpose is to put into perspective research findings that are particularly important, unexpected or difficult to understand. Although these editorials often include the author's personal opinions, they are meant primarily to interpret, explain and advise.<sup>(3)</sup> Editorials may also be in the form of a mini-review of a current hot topic, particularly if a full-length invited review is not warranted. In other journals, commentaries and related articles appear in separate article categories, either because these papers are too long or because the editor does not wish to appear to lend support by giving the editorial a cachet of approval.<sup>(2)</sup>

Kassirer and Angell of the *New England Journal of Medicine (NEJM)* addressed the issue of controversial

editorials and highlighted two points, namely: (1) Whose opinions do editorials represent? (2) Why do journals not regularly seek "balance" on controversial issues?<sup>(3)</sup> Among the "big five" general medical journals, only *The Lancet* has indicated that their editorials represent a consensus of the editors. In most other journals, editorials are usually signed by the individual authors, and they represent the opinions of the authors alone; they do not represent the official views of the journal itself or those of the journal's owner. Only when editors write about editorial policies do they speak for the journal itself. The distinction between editorials regarding general issues and those that announce or clarify editorial policy should therefore be readily apparent.<sup>(3)</sup>

On editorials that take strong positions on controversial issues, Kassirer and Angell opined that editors do not have the responsibility to seek an objective or balanced viewpoint in these editorials. They believed that publishing opposing views on every controversial issue discussed in *NEJM* would be unwise and tedious, and that to present, over time, as many well-reasoned perspectives as possible on important controversial issues should be the aim instead. The correspondence section is viewed as the best place to air disagreements about published articles, and should be kept interesting and critical.<sup>(3)</sup>

Editorials should have a short title that relates to the subject of the editorial, preferably a punchy one. In submitting a manuscript, all authors' names and their institutional affiliations should be included. Details of the corresponding author, such as full postal address, email, facsimile and telephone numbers, should be provided. Like other article submissions, items such as conflict-of-interest statements, declaration of individual author contributions and transfer of copyright forms, should be completed and submitted.

Editorials are expected to be short, precise and concise. There are prescribed limits to the number of words (typically 450–1,000), number of references (20 or fewer) and figures and/or tables (none or up to two). Most journals state that editorials are usually commissioned by the editor.

### Box 3. Examples of different journal requirements for editorials:

Journal	Word limit	References	Tables/ figures	Unsolicited submissions*
Ann Intern Med	1,000	≤ 20	≤ 1	Will consider
BMJ	800	≤ 12	Not stated	Will consider
Med J Aust	450	≤ 10	Not stated	Discuss with editor first
NEJM	900	≤ 10	≤ 1	Will consider

\*The majority are commissioned.

## SUMMARY

Although originally a means to deliver the editor's message, editorials have evolved to fulfil various purposes. As there is typically a limited space in which to deliver its contents, the message contained in the editorial needs to be well thought out and concisely delivered. It should contain the correct sequence of the elements of critical argument, ideally supported by evidence, with a clear conclusion.

## REFERENCES

1. Peh WCG, Ng KH. Basic structure and types of scientific papers. *Singapore Med J* 2008; 49:522-5.
2. Huth EJ, ed. The editorial. In: *How To Write and Publish Papers in*

### Box 4. Take-home points:

Editorials:

- Vary in purpose according to journal policy.
- Should be short and concise.
- Should have an objective, flow in a logical sequence and conclude with an answer.

the Medical Sciences. 2nd ed. Baltimore: Williams and Wilkins, 1982: 69-71.

3. Kassirer JP, Angell M. Controversial journal editorials. *NEJM* 1997; 337:1460-1.

**SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME**  
**Multiple Choice Questions (Code SMJ 201008A)**

	True	False
<b>Question 1.</b> The purpose of an editorial includes:		
(a) Commenting on an article published in the same issue of the journal.	<input type="checkbox"/>	<input type="checkbox"/>
(b) Announcement of editorial policy.	<input type="checkbox"/>	<input type="checkbox"/>
(c) Commenting on health policy.	<input type="checkbox"/>	<input type="checkbox"/>
(d) Reporting of an interesting case.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Question 2.</b> The contents of an editorial include:		
(a) A title.	<input type="checkbox"/>	<input type="checkbox"/>
(b) A structured abstract.	<input type="checkbox"/>	<input type="checkbox"/>
(c) A materials and methods section.	<input type="checkbox"/>	<input type="checkbox"/>
(d) References.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Question 3.</b> The following statements about editorials are true:		
(a) The vast majority of editorials are unsolicited.	<input type="checkbox"/>	<input type="checkbox"/>
(b) Most are written by authors submitting their first manuscripts.	<input type="checkbox"/>	<input type="checkbox"/>
(c) There is no need to complete a conflict-of-interest statement.	<input type="checkbox"/>	<input type="checkbox"/>
(d) They almost always represent the opinions of the journal and its owners.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Question 4.</b> The contents of an editorial include:		
(a) Highlighting an issue or problem.	<input type="checkbox"/>	<input type="checkbox"/>
(b) Presenting available evidence to support possible answers.	<input type="checkbox"/>	<input type="checkbox"/>
(c) Details of statistical analysis, including statistical methods.	<input type="checkbox"/>	<input type="checkbox"/>
(d) A conclusion with an answer.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Question 5.</b> The typical requirements for an editorial are:		
(a) The body of the text follows the IMRAD structure.	<input type="checkbox"/>	<input type="checkbox"/>
(b) There are usually 20 or fewer references.	<input type="checkbox"/>	<input type="checkbox"/>
(c) There is a maximum of one table or figure.	<input type="checkbox"/>	<input type="checkbox"/>
(d) There is no need for corresponding author details.	<input type="checkbox"/>	<input type="checkbox"/>

**Doctor's particulars:**

Name in full: \_\_\_\_\_

MCR number: \_\_\_\_\_ Specialty: \_\_\_\_\_

Email address: \_\_\_\_\_

**SUBMISSION INSTRUCTIONS:**

(1) Log on at the SMJ website: <http://www.sma.org.sg/cme/smj> and select the appropriate set of questions. (2) Select your answers and provide your name, email address and MCR number. Click on "Submit answers" to submit.

**RESULTS:**

(1) Answers will be published in the SMJ October 2010 issue. (2) The MCR numbers of successful candidates will be posted online at [www.sma.org.sg/cme/smj](http://www.sma.org.sg/cme/smj) by 22 October 2010. (3) All online submissions will receive an automatic email acknowledgment. (4) Passing mark is 60%. No mark will be deducted for incorrect answers. (5) The SMJ editorial office will submit the list of successful candidates to the Singapore Medical Council.

**Deadline for submission: (August 2010 SMJ 3B CME programme): 12 noon, 15 October 2010.**