Effectively Communicating Your Research – Day 1

INSP

25 February 2016

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Science Director

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About Daniel...

THE UNIVERSITY OF AUCKLAND
NEW ZEALAND
Te Whare Wānanga o Tāmaki Makaurau

Babraham Institute

UNIVERSITY OF CAMBRIDGE

MRC Medical Research Council

nature publishing group npg

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SOCIETY FOR NEUROSCIENCE

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Your goal is not only to be published, but also to be widely read/cited

Be an effective communicator

- ✓ Write effectively
- ✓ Choose the most appropriate journal
- ✓ Logically organize your ideas in your manuscript
- ✓ Write impressive cover letters to the journal editor
- ✓ Successfully navigate peer review
- ✓ Promote your work after publication

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Workshop outline

Day 1	Day 2
Ethics	Writing skills
Writing skills	Titles & Abstracts
Effective writing	Cover letters
Journal selection	Peer review
Methods & Results	Promoting your work
Introductions & Discussions	

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Workshop outline

Day 1	Day 2
Ethics	Writing skills
Writing skills	Titles & Abstracts
Effective writing	Cover letters
Journal selection	Peer review
Methods & Results	Promoting your work
Introductions & Discussions	

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Session 1

Publication ethics

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Publication ethics

Data manipulation

Never

- Fabricate data
- Move data on a graph
- Manipulate images
- Hide bad results

Publication ethics

Three criteria for authorship

1. **Significantly involved in study design, data collection/analysis**
2. **Writing and revising the manuscript**
3. **Approval of final version (responsible for the content)**

http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html

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Publication ethics

Gift/ghost authorship

Gift authorship

Making someone an author when they do not deserve it (friends, colleagues, etc.)

- Try to make paper more prestigious by adding a "big name"
- Adding the department head to every paper from their department
- Thanking someone for a contributed material

Ghost authorship

Not making someone an author when they *do* deserve it

- Hide conflict of interest (e.g., company employee)
- If someone did not conduct the study, but wrote the paper (e.g., "ghost writer")

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Publication ethics

Conflicts of interest

Financial or personal relationships that may bias your research

You are doing research on a new drug and…

- Your brother works at the drug company
- The drug company funded the research
- You own stock in the drug company
- You own stock in a competing drug company

Publication ethics

Conflict of interest form

ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) 2. Surname (Last Name) 3. Date

4. Are you the corresponding author? ☐ Yes ☐ No

5. Manuscript Title

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
Are there any relevant conflicts of interest? ☐ Yes ☐ No

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.
Are there any relevant conflicts of interest? ☐ Yes ☐ No

Section 4. Intellectual Property — Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☐ No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
☐ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Publication ethics

Multiple submissions

Submit to *one* journal at a time

Don't try to increase your chances of acceptance!

You can only submit to another journal if:

- ✓ You have been rejected by the first journal
- ✓ You have formally withdrawn the submission

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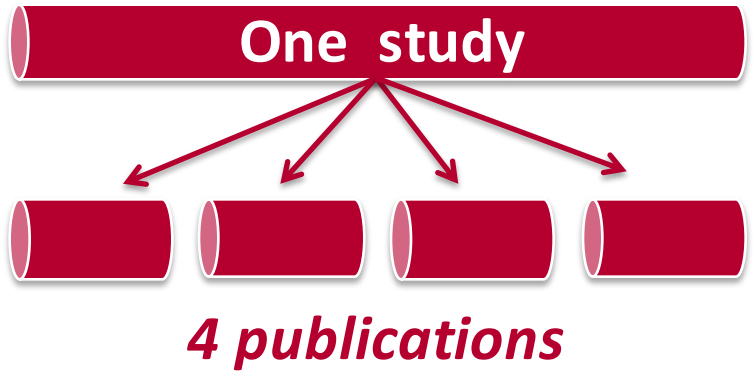
Publication ethics

Salami publishing

By André Karwath [CC BY-SA 2.5], via Wikimedia Commons

Don't slice your research to increase your publication output!



Why unethical?

Readers will not have access to all the relevant information to critically evaluate the study

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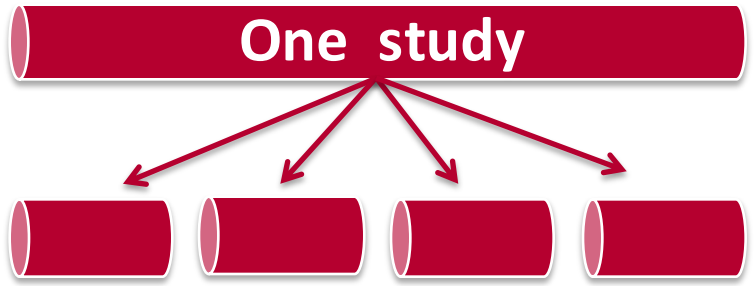
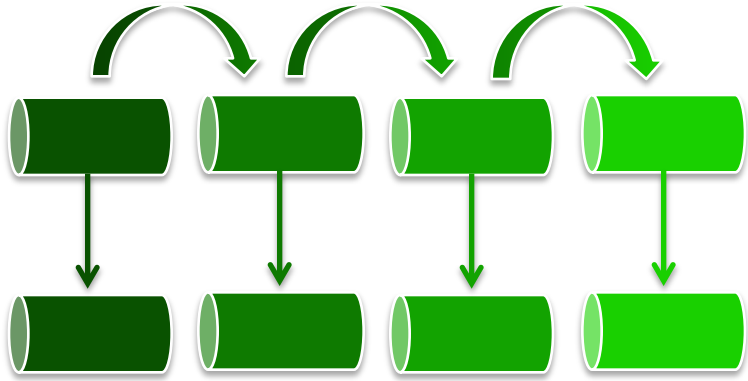
Publication ethics

Salami publishing



4 publications



- ✗ Same sample population
- ✗ Same controls
- ✗ Experiments concurrent
- ✗ *Dependent* results

- ✓ Distinct populations
- ✓ Different controls
- ✓ Experiments sequential
- ✓ *Independent* results

One larger paper will have more impact in the field and more citations!

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Publication ethics

Plagiarism

Makes readers think others' words or ideas are your own

Copying published text

Stating ideas of someone else without citing the source

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Publication ethics

Self-plagiarism

Copying text into your manuscript that you have written and published before

Violates copyright

Makes readers think you are presenting something *new*

Is plagiarism common?

Nature **conducted a survey across 9 scientific publishers and found that 6–23% of submitted papers were rejected because of plagiarism!**

Butler D. Nature. 2010; 466: 167.

Paraphrasing

Expressing published ideas using different words

Tips on paraphrasing:

- **Write the text first in Spanish, and then later translate back into English**
- **Verbally explain ideas to a colleague**
- **Summarize in a flowchart (e.g., methods)**
- **Cite published methods**

Publication ethics

Good paraphrasing

"This trial shows that sorafenib improves overall survival by nearly 3 months in patients with advanced hepatocellular carcinoma."

Sorafenib improves survival by almost 3 months in patients with advanced hepatocellular carcinoma.[24]

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24. Llovet at al. N Engl J Med. 2008; 359: 378 –390.

Publication ethics

Good paraphrasing

"This trial shows that sorafenib improves overall survival by nearly 3 months in patients with advanced hepatocellular carcinoma."

✗ Sorafenib improves survival by almost 3 months in patients with advanced hepatocellular carcinoma.[24]

○ Sorafenib has been shown to improve the survival of hepatocellular carcinoma patients. [24]

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24. Llovet at al. N Engl J Med. 2008; 359: 378 –390.

Publication ethics

Transparent reporting

***Transparency:** It needs to be very clear how your study was conducted*

PERSPECTIVE

nature

doi:10.1038/nature11556

A call for transparent reporting to optimize the predictive value of preclinical research

Story C. Landis[1], Susan G. Amara[2], Khusru Asadullah[3], Chris P. Austin[4], Robi Blumenstein[5], Eileen W. Bradley[6], Ronald G. Crystal[7], Robert B. Darnell[8], Robert J. Ferrante[9], Howard Fillit[10], Robert Finkelstein[1], Marc Fisher[11], Howard E. Gendelman[12], Robert M. Golub[13], John L. Goudreau[14], Robert A. Gross[15], Amelie K. Gubitz[1], Sharon E. Hesterlee[16], David W. Howells[17], John Huguenard[18], Katrina Kelner[19], Walter Koroshetz[1], Dimitri Krainc[20], Stanley E. Lazic[21], Michael S. Levine[22], Malcolm R. Macleod[23], John M. McCall[24], Richard T. Moxley III[25], Kalyani Narasimhan[26], Linda J. Noble[27], Steve Perrin[28], John D. Porter[1], Oswald Steward[29], Ellis Unger[30], Ursula Utz[1] & Shai D. Silberberg[1]

UK Parliamentary Office of Science & Technology

POSTNOTE

Number 461 March 2014

Transparency of Clinical Trial Data

BMJ

BMJ 2013;347:f4796 doi: 10.1136/bmj.f4796 (Published 7 August 2013)

EDITORIALS

Declaration of transparency for each research article

An antidote to inadequate reporting of research

Douglas G Altman *director*[1], David Moher *senior scientist*[2]

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Publication ethics

Transparent reporting

It needs to be very clear how your study was conducted

Patients

- **How patients were enrolled**
- **Inclusion and exclusion criteria**
- **How patients were randomized into treatment groups**
- **Used *intention-to-treat* (all enrolled patients analyzed) or *per-protocol analysis* (only patients that complete the study analyzed)**

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Publication ethics

Transparent reporting

It needs to be very clear how your study was conducted

Data

- **Unclear data** (blue *vs.* blue-ish)
- **Uninterpretable data** (glucose levels in patients who did not fast overnight)
- **Missing data**
  - **Why missing?** E.g., outliers or lost to follow-up?
  - **Imputed methods** (e.g., last observation carried forward, multiple imputation methods, sensitivity analyses)

Publication ethics

Transparent reporting

It needs to be very clear how your study was conducted

Data

- **How you analyzed your data (levels of measurement)?**
  - ***Continuous*** **(e.g., systolic pressure in mmHg)**
  - ***Nominal categories*** **(unranked: e.g., normal *vs.* abnormal blood pressure)**
  - ***Ordinal categories*** **(ranked; e.g., hypotensive, normal, and hypertensive)**

Publication ethics

Transparent reporting

It needs to be very clear how your study was conducted

Data

- **How you categorized continuous data**
  - ***Continuous*: height of your patients in cm**
  - ***Subjective ranking*: short <150 cm, normal 151–175 cm, tall >176 cm**
  - ***Logical ranking*: short <1 SD of the mean, normal ±1 SD of the mean, tall >1 SD of the mean**

Publication ethics

Treatment of participants

Informed consent

Participants in a study need to be informed of the:

- **Study objectives**
- **Potential benefits or risks involved**
- **Confidentiality**

This is usually written informed consent

Templates: http://www.who.int/rpc/research_ethics/informed_consent/en/

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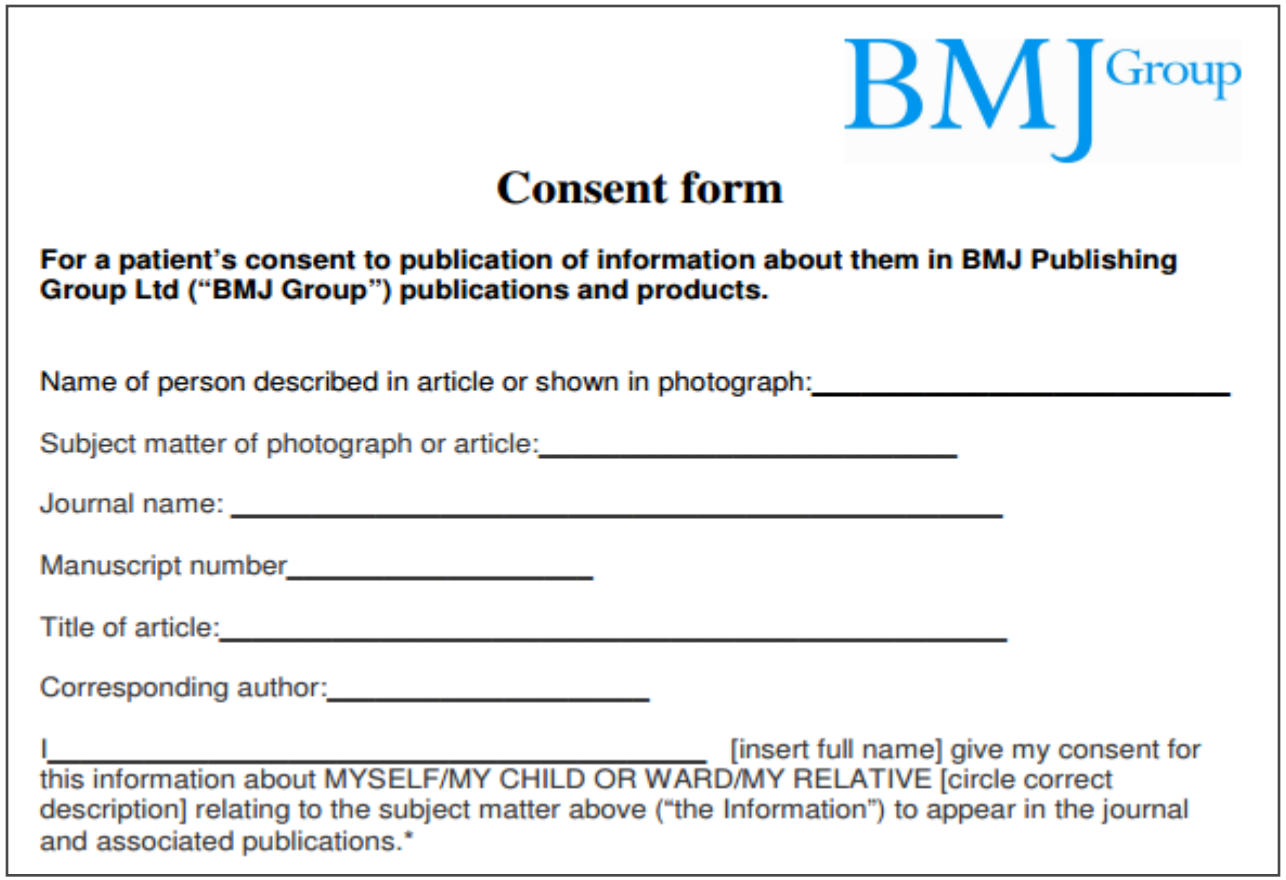
Publication ethics

Informed consent



BMJ Group

Consent form

For a patient's consent to publication of information about them in BMJ Publishing Group Ltd ("BMJ Group") publications and products.

Name of person described in article or shown in photograph:_____

Subject matter of photograph or article:_____

Journal name: _____

Manuscript number_____

Title of article:_____

Corresponding author:_____

I_____ [insert full name] give my consent for this information about MYSELF/MY CHILD OR WARD/MY RELATIVE [circle correct description] relating to the subject matter above ("the Information") to appear in the journal and associated publications.*

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Publication ethics

Informed consent

I have seen and read the material to be submitted to the journal

I understand the following:

(1) The Information will be published without my name attached and BMJ Group will make every attempt to ensure my anonymity. I understand, however, that complete anonymity cannot be guaranteed. It is possible that somebody somewhere - perhaps, for example, somebody who looked after me if I was in hospital or a relative - may identify me.

(2) The text of the article will be edited for style, grammar, consistency, and length

(3) The Information may be published in the journal, which is distributed worldwide. The journal goes mainly to doctors but is seen by many non-doctors, including journalists.

(4) The Information will also be placed on the journal website, http://group.bmj.com/products

(5) *The Information may also be used in full or in part in other publications and products published by the BMJ Group or by other publishers to whom the BMJ Group licenses its content. This includes publication in English and in translation, in print, in electronic formats, and in any other formats that may be used by the BMJ Group or its licensees now and in the future. In particular the Information may appear in local editions of the journal or other journals and publications published overseas.

(6) The BMJ Group will not allow the Information to be used for advertising or packaging or to be used out of context.

(7) I can revoke my consent at any time before publication, but once the Information has been committed to publication ("gone to press") it will not be possible to revoke the consent.

Signed:_____ Date: _____

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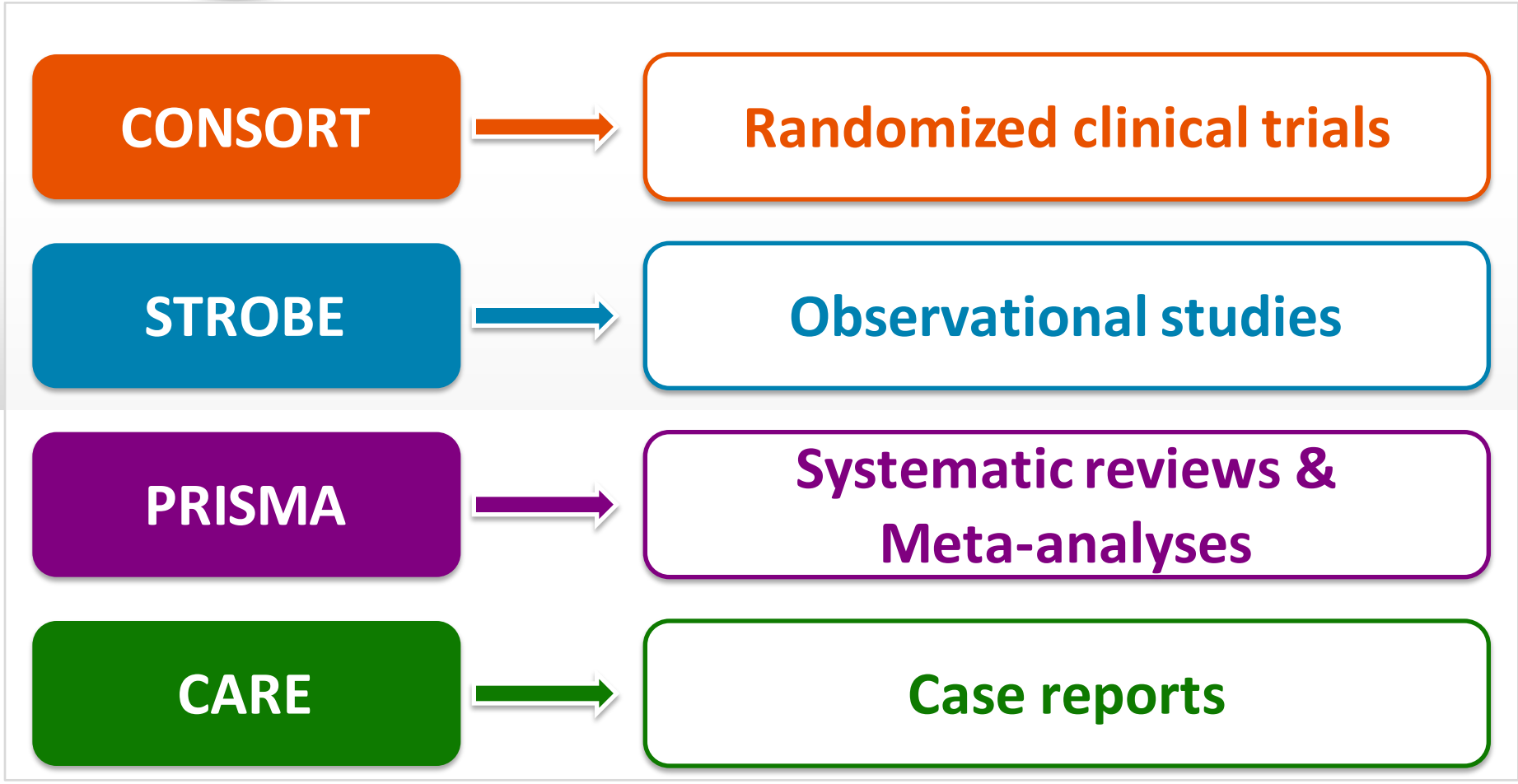
Publication ethics

Reporting guidelines



http://www.equator-network.org/

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Publication ethics

Clinical trial registration

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Primary Registries in the WHO Registry Network

Primary Registries in the WHO Registry Network meet specific criteria for content, quality and validity, accessibility, unique identification, technical capacity and administration. Primary Registries meet the requirements of the ICMJE.

The registries that currently meet these criteria are:

Australian New Zealand Clinical Trials Registry (ANZCTR)	Profile	Website
Brazilian Clinical Trials Registry (ReBec)	Profile	Website
Chinese Clinical Trial Registry (ChiCTR)	Profile	Website
Clinical Research Information Service (CRiS), Republic of Korea	Profile	Website
Clinical Trials Registry - India (CTRI)	Profile	Website
Cuban Public Registry of Clinical Trials(RPCEC)	Profile	Website
EU Clinical Trials Register (EU-CTR)	Profile	Website
German Clinical Trials Register (DRKS)	Profile	Website
Iranian Registry of Clinical Trials (IRCT)	Profile	Website
ISRCTN.org	Profile	Website
Japan Primary Registries Network (JPRN)	Profile	Website(in Japanese)
		Network members: UMIN CTR Website JapicCTI Website JMACCT CTR Website
Thai Clinical Trials Registry (TCTR)	Profile	Website
The Netherlands National Trial Register (NTR)	Profile	Website
Pan African Clinical Trial Registry (PACTR)	Profile	Website
Sri Lanka Clinical Trials Registry (SLCTR)	Profile	Website

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Publication ethics

Clinical trial registration

Public registration not enough, need to publish!

RESEARCH ARTICLE

Extent of Non-Publication in Cohorts of Studies Approved by Research Ethics Committees or Included in Trial Registries

Only *54.2%* of 12,660 trials were published

Mean publication times

- **Positive: 62.4 months**
- **Inconclusive: 78.0 mo**
- **Negative: 82.2 mo**

Schmucker, et al. PLoS ONE. 2014; 9: e114023.

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Professional writing skills

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Writing skills

Use your figures to structure your manuscript

Where to start?

- Your ***findings*** are why you want to publish your work
- Form the basis of your manuscript
- First step, is to logically organize your findings

Figure 1

Table 1

Figure 2

?

Figure 3

Logical presentation

Is anything missing?

Additional analyses?

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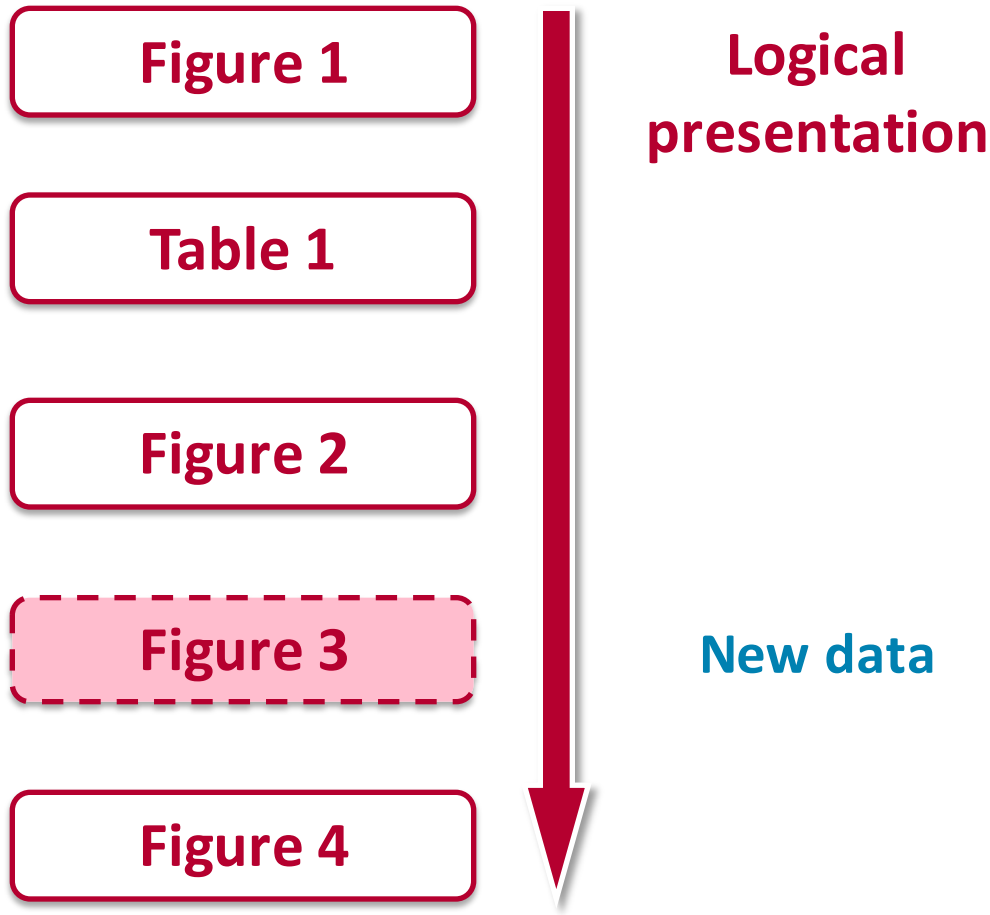
Writing skills

Use your figures to structure your manuscript

Where to start?

- Your ***findings*** are why you want to publish your work
- Form the basis of your manuscript
- First step, is to logically organize your findings



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Outlines

2 factors to consider when writing a manuscript

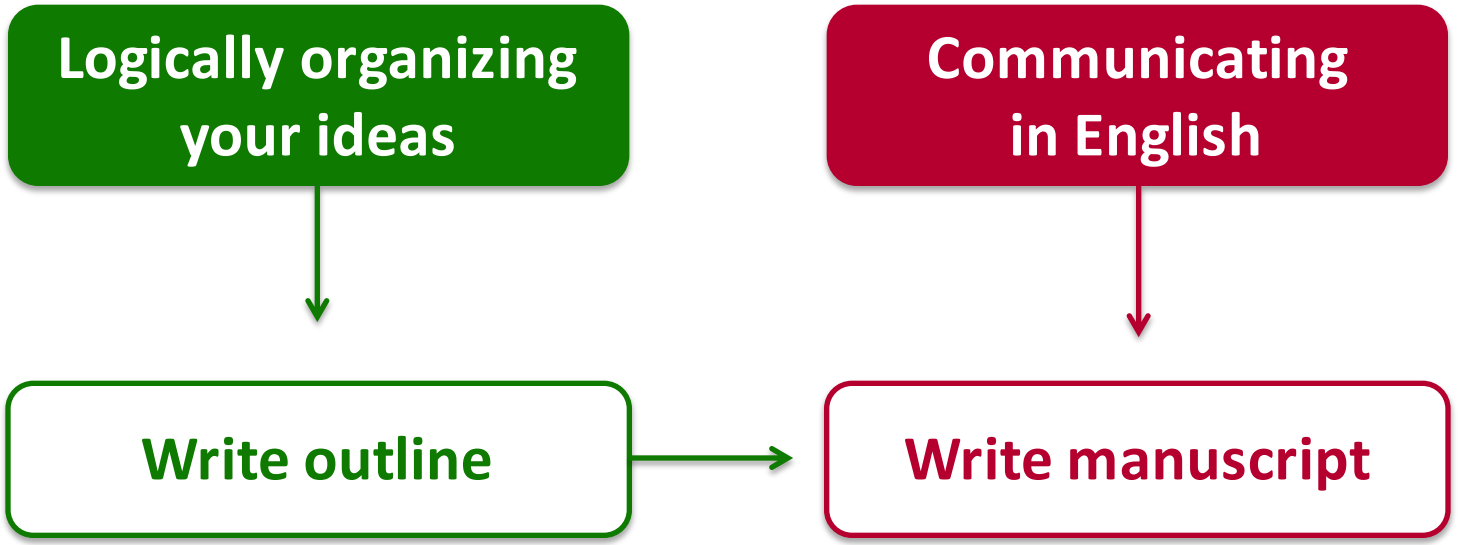
Logically organizing your ideas

Communicating in English

http://epilepsyu.com/wp-content/uploads/2014/11/Stress-7508650.jpg

Outlines

2 factors to consider when writing a manuscript



Focus your outline

Concisely describe your *research question*

- Why is it important
- Not only what is unknown, but could be a limitation or a controversy

State your *aims* to address question

How does it address the question

State your main *conclusion*

- How does it answer the question
- How does it advance the field

Prepare an outline

- **I. Introduction**
  - A. General background
  - B. Related studies
  - C. Problems in the field
  - D. Aims
- **II. Methods**
  - A. Subjects/Samples/Materials
  - B. General methods
  - C. Specific methods
  - D. Statistical analyses
- **III. Results**
  - A. Key points about Figure 1
  - B. Key points about Table 1
  - C. Key points about Figure 2
  - D. Key points about Figure 3
  - E. Key points about Figure 4
- **IV. Discussion**
  - A. Major conclusion
  - B. Key findings that support conclusion
  - C. Relevance to published studies
  - D. Unexpected/negative findings
  - E. Limitations
  - F. Implications
  - G. Future directions

Use a *reporting checklist* when preparing your outline

Prepare an outline

I. **Introduction**
   - A. General background
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   - D. Aims

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   - F. Implications
   - G. Future directions

Introduction

What background information you will introduce

Prepare an outline

I. **Introduction**
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   - C. Problems in the field
   - D. Aims

II. **Methods**
   - A. Subjects/Samples/Materials
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   - F. Implications
   - G. Future directions

Introduction

What background information you will introduce

Methods

What analyses you will describe

Prepare an outline

I. **Introduction**
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   - B. Related studies
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   - F. Implications
   - G. Future directions

Introduction

What background information you will introduce

Methods

What analyses you will describe

Results

What findings you will present

Prepare an outline

- **I. Introduction**
  - A. General background
  - B. Related studies
  - C. Problems in the field
  - D. Aims
- **II. Methods**
  - A. Subjects/Samples/Materials
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  - E. Limitations
  - F. Implications
  - G. Future directions

Introduction

What background information you will introduce

Methods

What analyses you will describe

Results

What findings you will present

Discussion

What interpretations, limitations, and implications you will discuss

Support services

Preparing an outline

I. **Introduction**
   - A. General background
   - B. Related studies
   - C. Problems in the field
   - D. Aims

II. **Methods**
   - A. Subjects/Samples/Materials
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   - C. Specific methods
   - D. Statistical analyses

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   - A. Key points about Figure 1
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   - A. Major conclusion
   - B. Key findings that support conclusion
   - C. Relevance to published studies
   - D. Limitations
   - E. Unexpected results
   - F. Implications
   - G. Future directions

- **Knowing what you need to discuss, write down the key ideas**
- **Use short bullet points to list ideas**
- **Don't let "writing correct English sentences" get in the way of outlining your ideas**

List important information from your reading in the appropriate section with citations

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Getting feedback

- After completing outline, discuss with colleagues
- Make the necessary changes ***before*** you begin writing
- Write your manuscript ***section-by-section***
  - Less stressful
  - Get feedback after each section
  - Easier for your colleagues to review
- Set ***deadlines*** for each section

The ‘write’ order

Manuscript sections

- Title
- Abstract
- Introduction
- Methods
- Results
- Discussion

Writing order

- Methods
- Results
- Discussion
- Introduction
- Abstract
- Title

The ‘write’ order

Methods

- Write as you are doing experiments
- Include any changes you’ve made

Results

- Based on prepared figures
- Subsections based on each figure

Discussion

- Conclusions based on presented data
- Discuss relevant studies

The ‘write’ order

Introduction

- Narrow/broad & international/regional
- Introduce ideas necessary for understanding the Results/Discussion

Abstract

- Concisely summarize manuscript
- According to *author guidelines*

Title

- Concisely summarize key finding
- Include keywords

After the first draft....

Update references

- 75% from the last 5 years
- Avoid too many self-citations
- Include international citations

Introduction

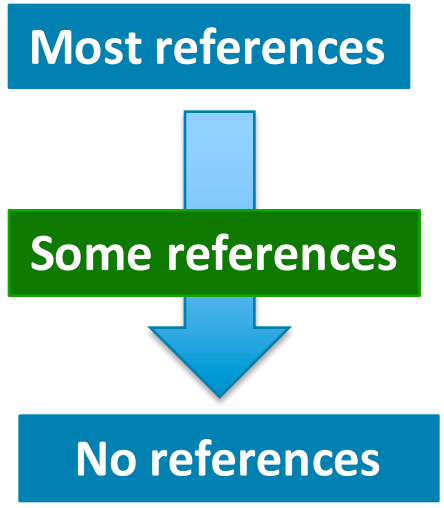
Methods

Discussion

Results

Conclusion

Abstract



After the first draft....

Format manuscript

- Journal template
- Re-check word limits
- Reference formatting

Revise manuscript

- Proofread (read aloud)
- Input from colleagues
- Reduce by 15%
- Clear Figures/Tables
- Logical flow

Effective writing

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Improving readability

Use short sentences

Limit your sentences to 15–20 words

One idea per sentence

Use active voice

More simple, direct, and easier to read

"*Nature* journals prefer authors to write in the ***active voice***"

(http://www.nature.com/authors/author_resources/how_write.html)

Effective writing

Use strong verbs

Avoid nominalizations

Converting a verb into a noun

Estimate → ***Estimation***

Decide → ***Decision***

Confirm → ***Confirmation***

Assess → ***Assessment***

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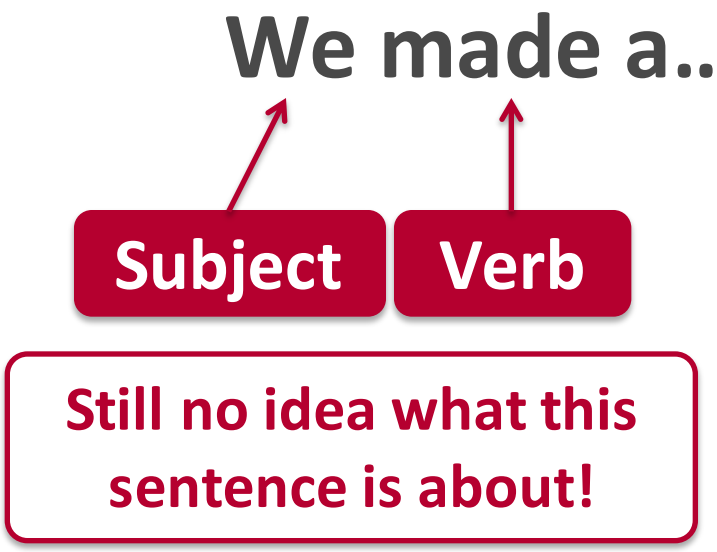
Use strong verbs



…decision

…confirmation

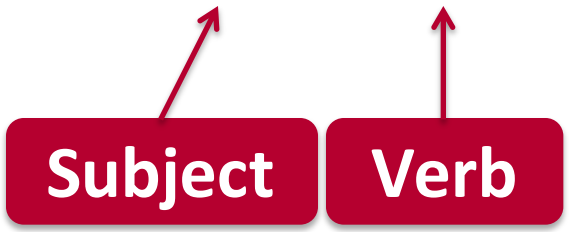
…estimation

…cake?

Effective writing

Use strong verbs

~~We made a…~~



Still no idea what this sentence is about!

We decided…

We confirmed…

We estimated…

Clear and direct

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Use strong verbs

The phosphorylation of the receptor by Src results in the recruitment of Grb2 and the activation of Ras.

Effective writing

Use strong verbs

18 words

The **phosphorylation** of the receptor by Src results in the **recruitment** of Grb2 and the **activation** of Ras.

11 words

Src phosphorylates the receptor, which then recruits Grb2 and activates Ras.

Effective writing

Use strong verbs

Haywood R. Photochem Photobiol. 2006; 82: 1123–1131.

"These findings imply that the rates of ascorbate radical production and its recycling via dehydroascorbate reductase to replenish the ascorbate pool are equivalent at the lower irradiance, but not equivalent at higher irradiance with the rate of ascorbate radical production exceeding its recycling back to ascorbate."

Effective writing

Use strong verbs

Haywood R. Photochem Photobiol. 2006; 82: 1123–1131.

"These findings imply that the rates of ascorbate radical production and its recycling via dehydroascorbate reductase to replenish the ascorbate pool are equivalent at the lower irradiance, but not equivalent at higher irradiance with the rate of ascorbate radical production exceeding its recycling back to ascorbate."

46 words

These findings imply that at low irradiation, ascorbate radicals are produced and recycled–by dehydroascorbate reductase–at the same rate, but at higher irradiation, they are produced faster than they can be recycled back to ascorbate.

36 words

These findings imply that at low irradiation, ascorbate radicals are produced and recycled–by dehydroascorbate reductase–at the same rate. However, at higher irradiation, these radicals are produced faster than they can be recycled back to ascorbate.

20 & 17 words

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Effective writing

Academic English writing style

Which sentence suggests that you *will* get a raise?

1. Although you deserve a raise, the budget is tight.

Stress position

2. Although the budget is tight, you deserve a raise.

Readers focus at the end of the sentence to determine what is important.

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http://writingcenter.unc.edu/handouts/flow/

Effective writing

Academic English writing style

The stress position also introduces the topic of the next sentence

Although the budget is tight, you deserve a raise. Your salary will increase at the beginning of next year.

Stress position

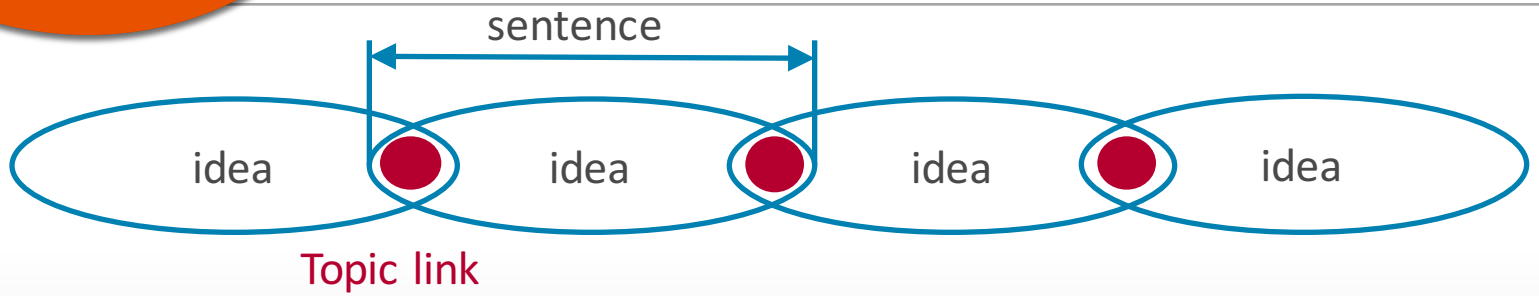
Topic position

The topic position introduces the idea of the current sentence

http://writingcenter.unc.edu/handouts/flow/

Effective writing

Academic English writing style



The patient went to the hospital to see a ***gastroenterologist***. ***The doctor*** then performed a series of ***diagnostic tests***. ***The results*** showed the patient suffered from a ***bacterial infection***. ***Antibiotics*** were prescribed to treat the infection before the patient developed an ***ulcer***.

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Effective writing

Academic English writing style

Topic sentence

Lung cancer is the leading cause of cancer mortality for men and women. Despite smoking prevention and cessation programs and advances in early detection, the 5-year survival rate for lung cancer is only 16% with current therapies. Although lung cancer incidence rates have recently declined in the United States, more lung cancer is now diagnosed when considered together in former- and never-smokers than in current smokers. Thus, even if all of the national anti-smoking campaign goals are met, lung cancer will remain a major public health problem for decades. New ways to treat or prevent lung cancer are therefore needed.

Support

Stress sentence

One potential therapeutic target for lung cancer is the Wnt signaling pathway. The canonical Wnt signaling pathway in mammals consists of a family of secreted lipid-modified Wnt protein ligands that bind to a family of 7-pass transmembrane Frizzled (Fzd) receptors, as reviewed…

Topic sentence

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Busch et al. BMC Cancer. 2012; 13: 211.

Effective writing

Academic English writing style

Contrasting ideas

Readers use sentence structure to determine *emphasis*

- Stress position
- Main clause *vs*. subordinate clause
- Clause length

Useful in the Discussion

Vary emphasis of your interpretations

Effective writing

Contrasting ideas

Main vs. subordinate clause

Subordinate | **Main**

Although the budget is tight, you deserve a raise.

Linking word

- However
- Despite
- In spite of
- But
- Even though

Tells the reader 2 things:

- **Idea may not be important**
- **There is another contrasting idea**

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Contrasting ideas

Examples

Main + stress

Although your study has an important application, the methodology is flawed.

Subordinate + stress

Your study has an important application, but the methodology is flawed.

Main + stress

Although the methodology is flawed, your study has an important application.

Subordinate + stress

The methodology is flawed, but your study has an important application.

Contrasting ideas

Varying clause length

Subordinate + stress

Your study has an important application, but the methodology is flawed.

Your study will facilitate our understanding of stem cell differentiation and promote the development of new therapeutics, but the methodology is flawed.

http://www.jenningswire.com/wp-content/uploads/2013/08/bigstock-Successful-business-people-wit-42882634.jpg

Contrasting ideas

Varying clause length

Subordinate + stress

Your study has an important application, but the methodology is flawed.

Your study has an important application, but it has a poor study design, improper controls, and inappropriate techniques that are out-of-date.

http://epilepsyu.com/wp-content/uploads/2014/11/Stress-7508650.jpg

Effective writing

Discussing limitations

✕ **Short subordinate clause *not* in the stress position**

Although our results demonstrate that this may be a useful therapy, it was limited by its small sample size.

○ **Long main clause in the stress position**

Although this study was limited by its small sample size, our results demonstrate that this novel therapy will likely be useful in treating patients with persistent MRSA infections.

Common mistakes

Effective writing

Data is plural

Data **is the plural form of** ***datum***

The data ***was*** analyzed…
This data ***suggests***…

The data ***were*** analyzed…
These data ***suggest***…

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Comparisons

- ***Compared with*** is for comparing similar things
- ***Compared to*** is for comparing different things

The toxicity of the new scaffold was reduced compared ***to*** the previous scaffold.

The toxicity of the new scaffold was reduced compared ***with*** the previous scaffold.

Effective writing

Comparisons

The toxicity of the new scaffold was reduced compared with the previous scaffold.

Comparing toxicity with *the scaffold*?

Parallel structure:

A of B compared with A′ of B′.

The toxicity of the new scaffold was reduced compared with ***the toxicity of*** the previous scaffold.

The toxicity of the new scaffold was reduced compared with ***that of*** the previous scaffold.

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Effective writing

Comparisons

Parallel structure

"The tumor growth was faster in untreated patients as compared to patients that were treated."

"The tumor growth was faster in untreated patients when compared with the tumor growth in treated patients."

"The tumor growth was faster in untreated patients when compared with that in treated patients."

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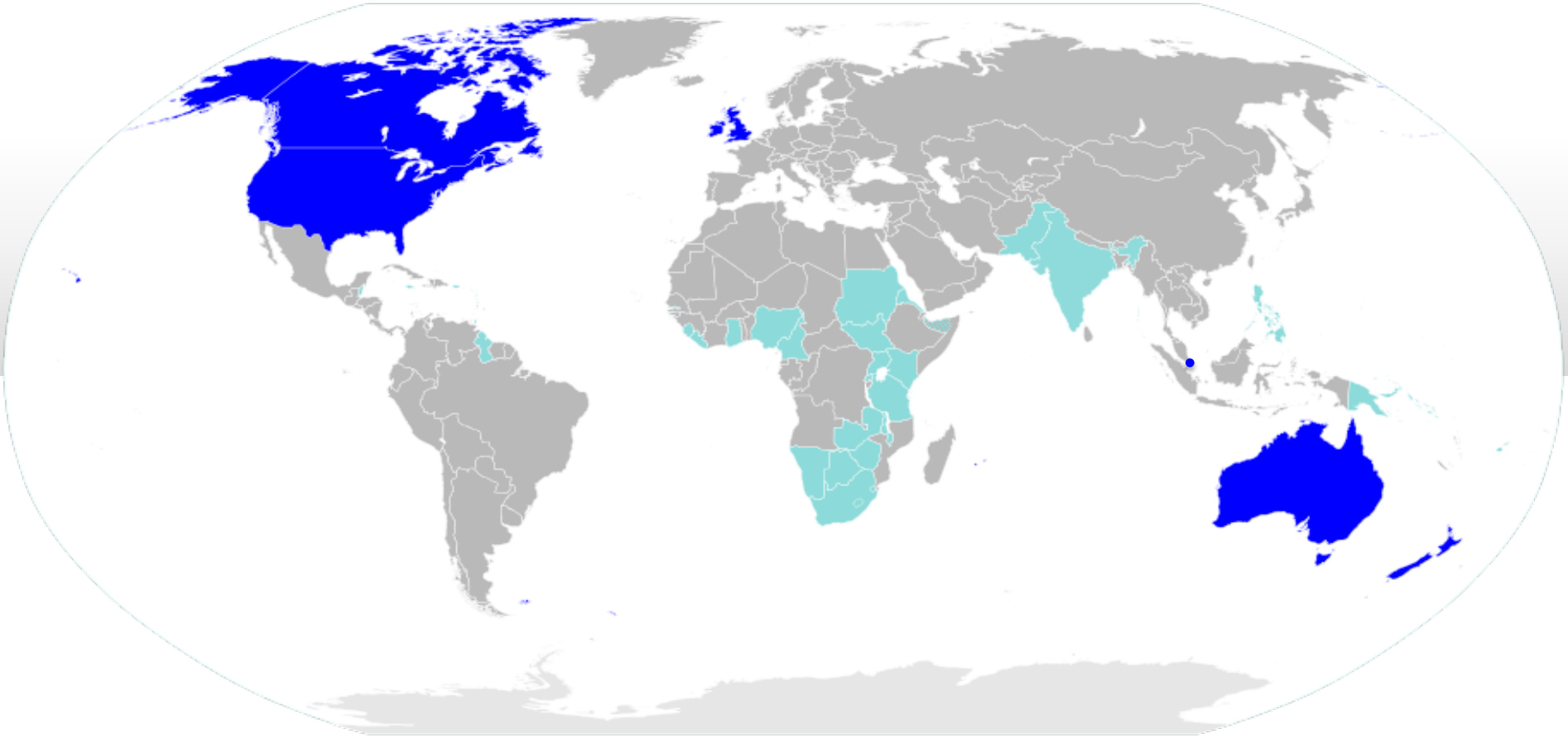
Unnecessary words

- "~~It is well known that~~ most of the intense diffraction peaks…"
- "~~As a matter of fact, such a~~ **This** low-temperature reaction…"
- "~~A number of studies have shown that~~ the charged group…"
- "~~That is another reason why~~ **Therefore**, we believe…"
- "…as described **previously** ~~in our previous study~~."
- "~~The study of~~ **Studying** multilayer graphene is also important…"
- "…at ~~a flow rate of~~ 1.0 mL/min."

Unnecessary words

Avoid	*Preferred*
At a concentration of 2 g/L	At 2 g/L
At a temperature of 37°C	At 37°C
At a wavelength of 340 nm	At 340 nm
In order to	To
In the first place	First
Four in number	Four
Green color	Green
Subsequent to	After
Prior to	Before

What does this map represent?



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http://en.wikipedia.org/wiki/English_language

"I should use complex words to make my writing more impressive."

Nature's guide to authors:

Nature **is an international journal covering all the sciences. Contributions should therefore be written *clearly and simply* so that they are accessible to readers in other disciplines and to readers for whom English is not their first language.**

www.nature.com/nature/authors/gta/index.html#a4

Complex words

To ascertain the efficaciousness of the program, we interrogated the participants upon completion.

Complex words

To ascertain the efficaciousness of the program, we interrogated the participants upon completion.

To determine the success of the program, we questioned the participants upon completion.

Simple words

Avoid	*Preferred*
Adequate	Enough
Apparent	Clear
Ascertain	Determine
Endeavor	Try
Magnitude	Size
Retain	Keep
Sufficient	Enough
Terminate	End
Utilization	Use

When should you choose a journal?

1. ***After*** **you have written your manuscript?**

2. ***Before*** **you write your manuscript?**

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Journal selection

Choose your journal first!

Author guidelines

- Manuscript structure
- Word limits
- Reference style

Aims and scope

- Topics
- Readership
- Be sure to *emphasize*

Relevant references

Writing style

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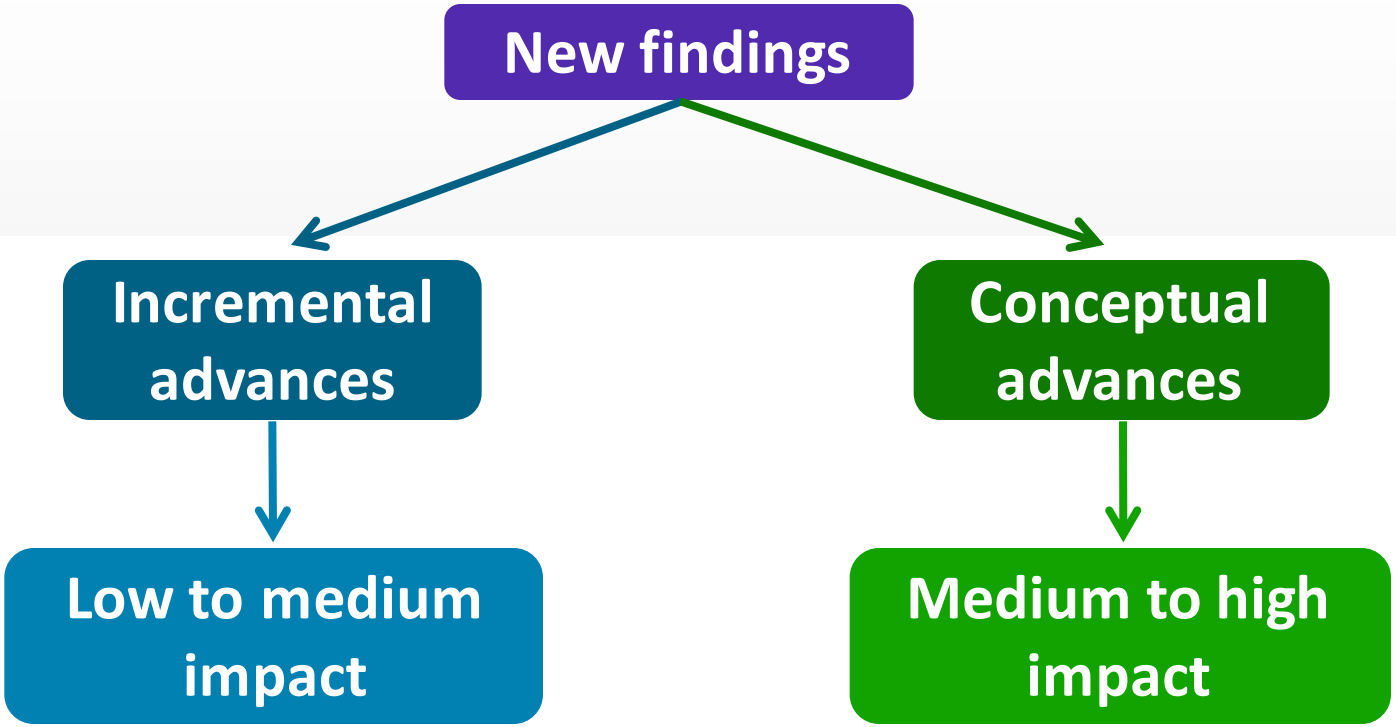
Journal selection

Evaluating significance: Novelty

How new are my results compared with those already published?



Journal selection

Evaluating significance: Relevance

How broadly relevant is your work?

Biology	**Specific to cell-type or organism? Relevant to human condition?**
Medicine	**Population specific? Restricted geographical location? Disease prevalence/incidence?**
Engineering	**How broadly applicable is the design? Is it cost-effective?**

International or regional journal?

Broad- or narrow-focused journal?

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Journal selection

Evaluating significance: Importance

Area of popular appeal	**Stem cells, tissue engineering, global warming, artificial intelligence**
Important real-world applications	**Rice resistant to high salt conditions, shrimp resistant to viral infections**

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Journal selection

Broad vs. narrow focus

Aims and scope

Broad focus → Make sure your findings will be of ***broad*** interest

Narrow focus → Make sure your findings will be of interest to ***specific*** area(s)

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Journal selection

General or specialized

PLOS ONE

Aims and scope

PLOS ONE is an international, peer-reviewed, open-access, online publication. *PLOS ONE* welcomes reports on primary research from any scientific discipline.

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Journal selection

General or specialized

BMC Cardiovascular Disorders

Aims and scope

BMC Cardiovascular Disorders is an open access, peer-reviewed journal that considers articles on all aspects of the prevention, diagnosis and management of disorders of the heart and circulatory system, as well as related molecular and cell biology, genetics, pathophysiology, epidemiology, and controlled trials.

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Journal selection

General or specialized – writing the introduction

PLOS ONE:
'atherosclerosis and pollution'

Cardiovascular disease (CVD) is the most important cause of morbidity and mortality in the developed world, and atherosclerosis is the central underlying pathology. Atherogenesis is a life-long process involving a range of mechanisms including lipid peroxidation and inflammation affecting the vascular wall. The clinically most relevant results of this pathology are myocardial infarction and stroke. Evidence for acute cardiovascular effects of air pollution has substantially increased in recent years…

Künzli et al. PLoS ONE 2010; 5: e9096.

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Journal selection

General or specialized – writing the introduction

BMC Cardiovascular Disorders: 'atherosclerosis and pollution'

Atherosclerosis is an inflammatory disease that accounts for nearly 50% of deaths in western societies. Initiation of atherosclerotic plaque formation is a complex process. It involves secretion of chemokines such as the Monocyte Chemoattractant Protein–1 (MCP-1) and expression of adhesion molecules on the surface of monocytes and endothelial cells. Circulating monocytes are recruited to sites of injured endothelial cells, adhere to them, and migrate into the subendothelial space. Monocytes in the arterial wall differentiate into activated macrophages…

Adar et al. PLoS Med. 2013; 10: e1001430..

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Journal selection

International/regional – writing the introduction

BMC Family Practice: Worldwide relevance

Health workforce shortages may be felt most keenly by developing nations, but are a concern for all. Developed nations are particularly worried about the number of general practitioners (GPs) available to service their ageing populations.

Dwan et al. BMC Fam Prac. 2014; 15: 154.

Journal selection

International/regional – writing the introduction

Asia-Pacific Family Medicine: Geographically restricted

All citizens in Japan are covered by a national health insurance system in which there are no official "gatekeepers". Patients can freely choose between attending a local physician's office (clinic) or a hospital and Japanese physicians can freely practice internal medicine. But recently, Japan has faced the problems of a rapidly aging population…

Tsukamoto et al. Asia Pac Fam Med. 2014; 13: 9.

Journal selection

Factors to consider when choosing a journal

Aims & scope

Readership

Indexing

Open access

Impact factor

Varies by field

Which factor is most important to you?

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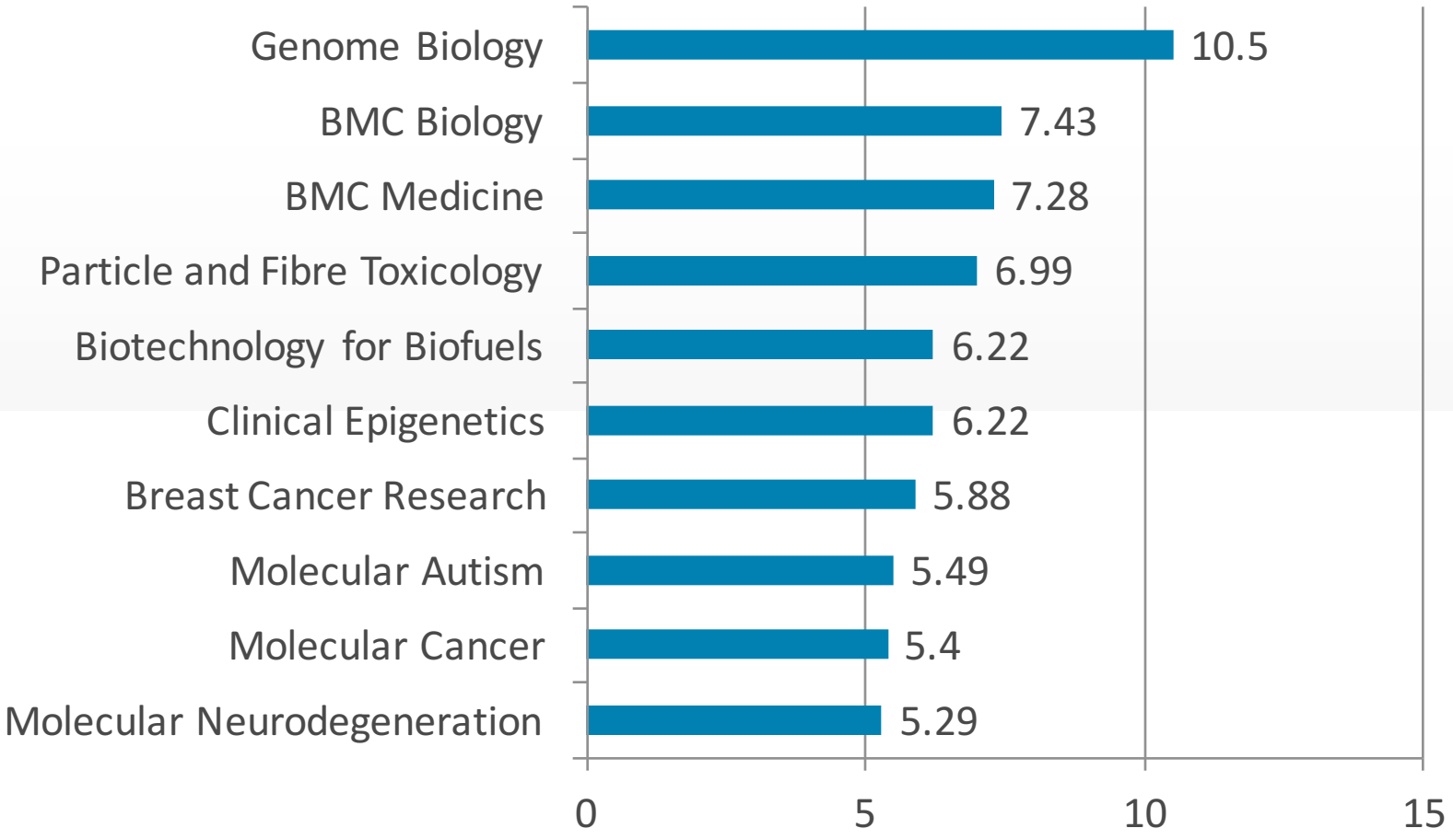
Open access myths

The quality of OA journals is not good

- OA journals have the same peer review process as subscription-based journals
- IFs are lower partly because they are newer
  - Less visibility in the field
  - Fewer citations

Journal selection

164 BMC journals have a 2013 IF



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Journal selection

Predatory journals

Some OA journals are not good

Easy way to get money from authors

- Promise quick and easy publication
- Often ask for a 'submission/handling' fee

If you are ever unsure, please check the *Beall's List of Predatory Publishers*

http://scholarlyoa.com/2012/12/06/bealls-list-of-predatory-publishers-2013/

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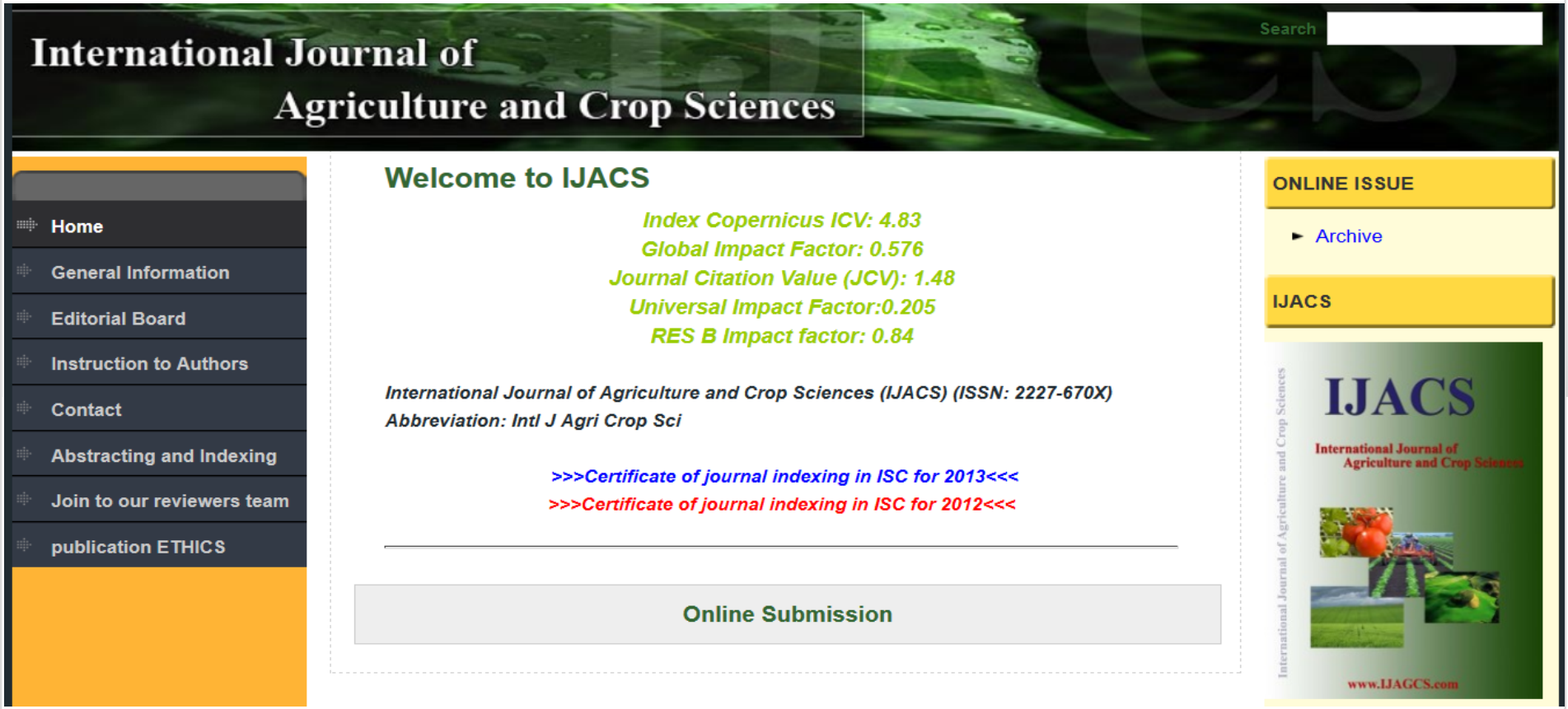
Journal selection

Predatory journals



http://ijagcs.com/

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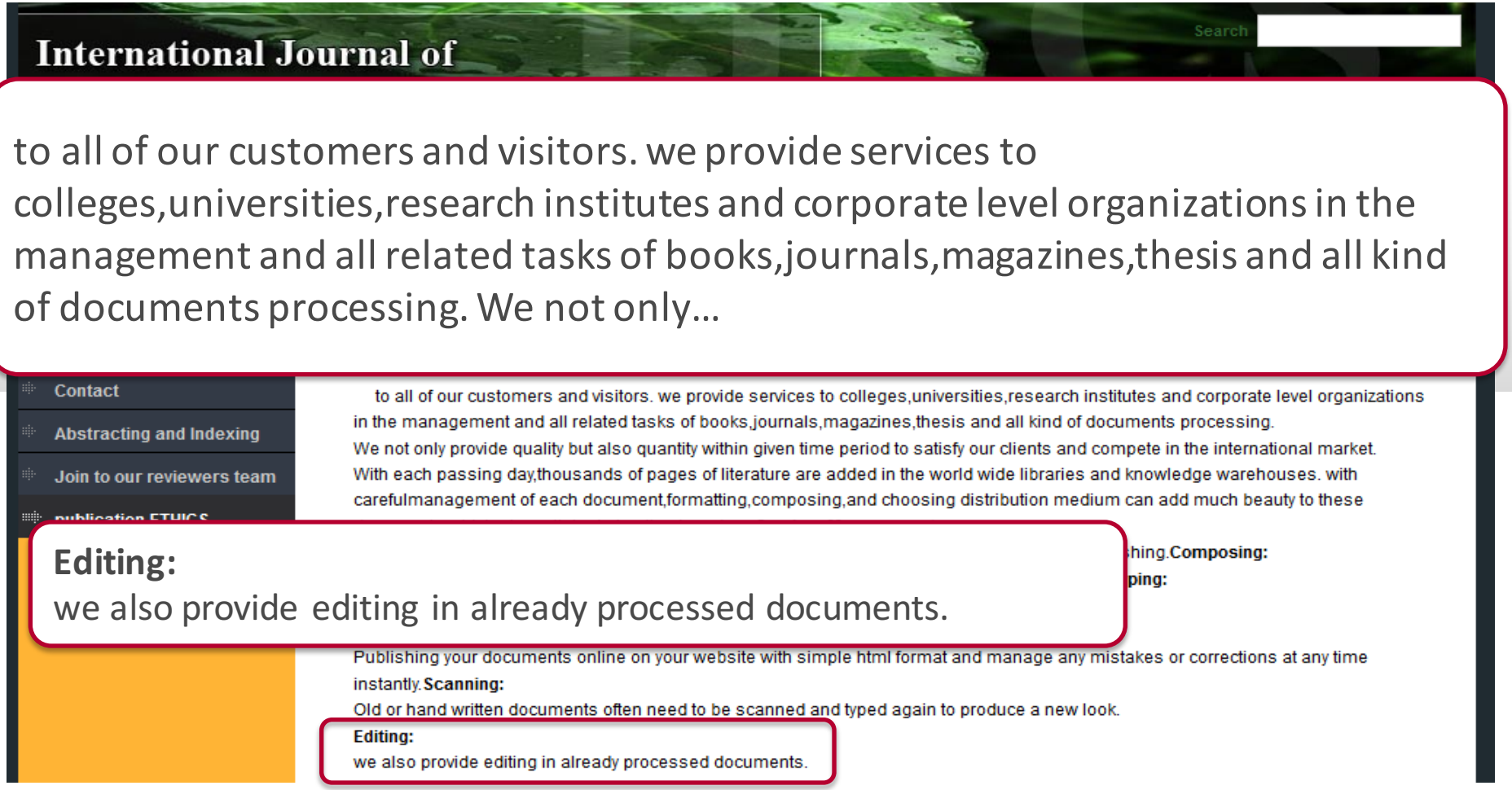
Journal selection

Predatory journals



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http://ijagcs.com/

Journal selection

Trustworthy journals

Reputable publisher	Springer, Elsevier, Wiley, PLoS, etc.
Editorial board	International and familiar
Indexed	Indexed by common databases
Authors	Do you recognize the authors?
Fees	Only paid *after* acceptance

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Journal selection

How many journals are there?

How many journals are indexed by ISI (have impact factors)?

Science Citation Index	8693
Social Science Citation Index	3168
Arts and Humanities Citation Index	1747

13,608*

*Jan 2015

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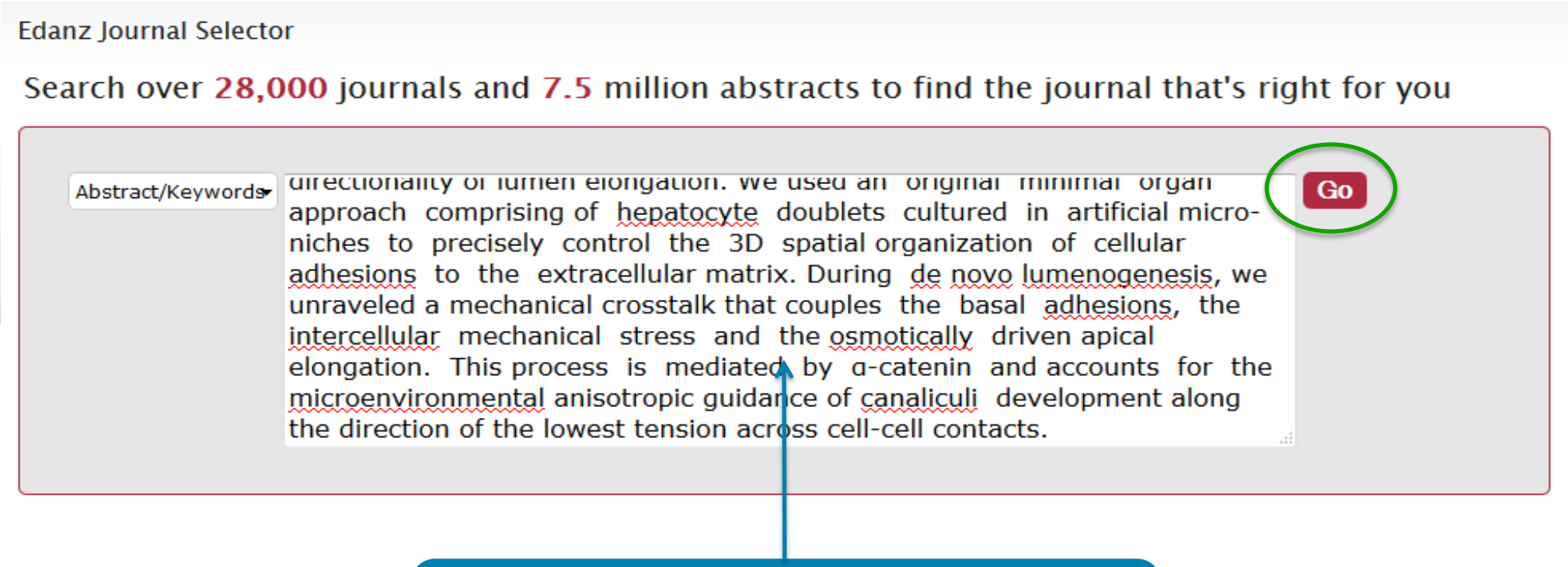
http://ip-science.thomsonreuters.com/mjl/

Journal selection

Journal Selector

www.edanzediting.com/journal_selector



Insert your proposed abstract or keywords

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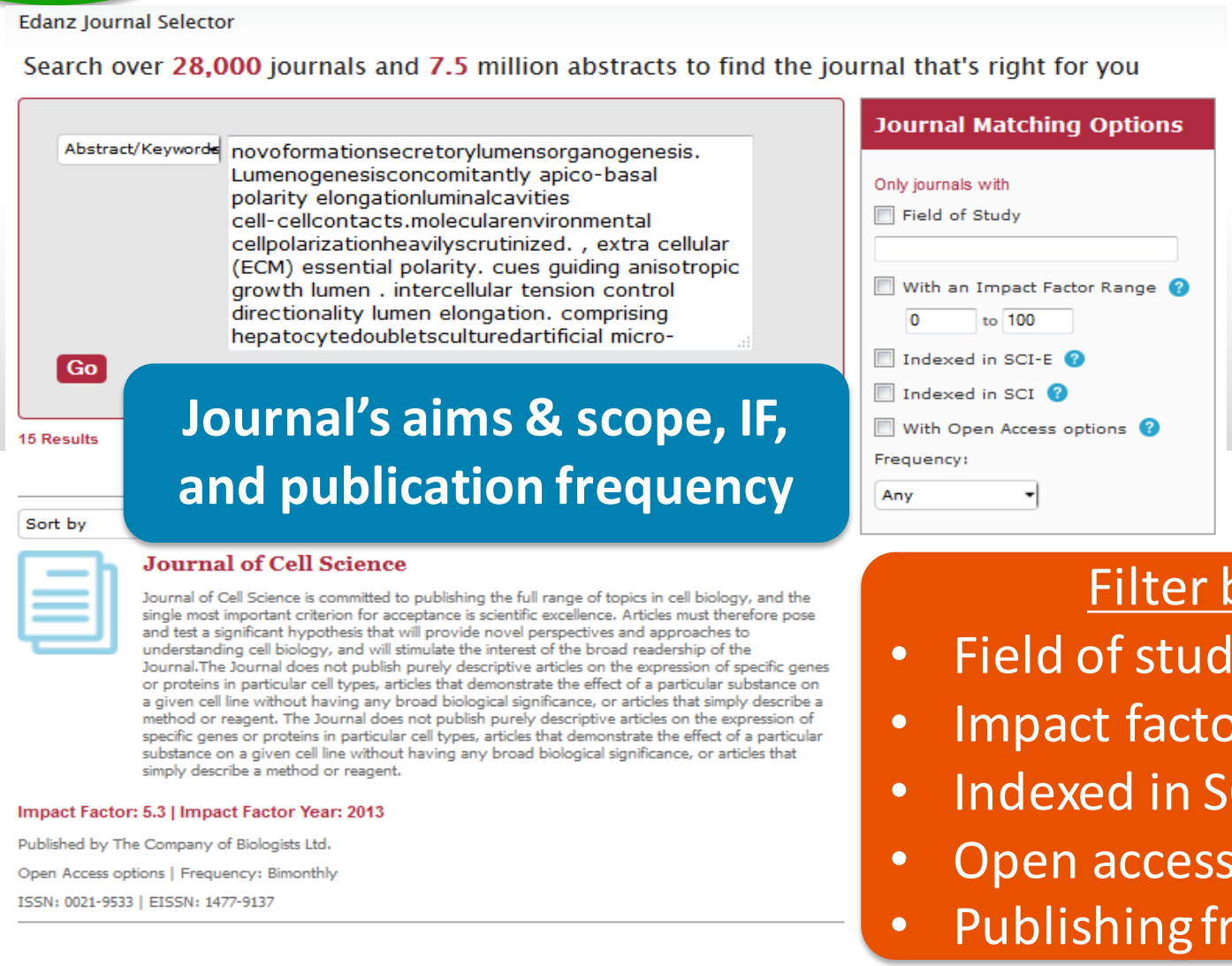
Journal selection

Journal Selector

www.edanzediting.com/journal_selector



Journal's aims & scope, IF, and publication frequency

Filter by:

- Field of study
- Impact factor
- Indexed in SCI
- Open access
- Publishing frequency

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Journal selection

Journal Selector

www.edanzediting.com/journal_selector

Sort by:

- Relevance
- Impact Factor
- Frequency

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Journal selection

Journal Selector

www.edanzediting.com/journal_selector

- **Author guidelines**
- **Journal website**

Author submission URL >

Submission platform URL >

Society name and URL Currently Not Available

Similar published articles

- ✓ Are they ***currently*** publishing similar articles?
- ✓ Have you ***cited*** any of these articles?

Similar articles from this journal

[-] **Blood vessel tubulogenesis requires Rasip1 regulation of GTPase signaling.**

Published 2011 - Apr

Cardiovascular function depends on patent blood vessel formation by endothelial cells (ECs). However, the mechanisms underlying vascular "tubulogenesis" are only beginning to be unraveled. We show that endothelial tubulogenesis requires the Ras interacting protein 1, Rasip1, and its binding partner, the RhoGAP Arhgap29. Mice lacking Rasip1 fail to form patent lumens in all blood vessels, including the early endocardial tube. Rasipl null angioblasts fail to properly localize the polarity determinant Par3 and display defective cell polarity, resulting in mislocalized junctional complexes and loss of adhesion to extracellular matrix (ECM). Similarly, depletion of either Rasip1 or Arhgap29 in cultured ECs blocks in vitro lumen formation, fundamentally alters the cytoskeleton, and reduces integrin-dependent adhesion to ECM. These defects result from increased RhoA/ROCK/myosin II activity and blockade of Cdc42 and Rac1 signaling. This study identifies Rasip1 as a unique, endothelial-specific regulator of Rho GTPase signaling, which is essential for blood vessel morphogenesis.

[+] **A mechanoresponsive cadherin-keratin complex directs polarized protrusive behavior and collective cell migration.**

Published 2012 - Jan

[+] **Canonical Wnt signaling and its antagonist regulate anterior-posterior axis polarization by guiding cell migration in mouse visceral endoderm.**

Published 2005 - Nov

[+] **Cadherin adhesion, tissue tension, and noncanonical Wnt signaling regulate fibronectin matrix organization.**

Published 2009 - Mar

[+] **Beta1 integrin establishes endothelial cell polarity and arteriolar lumen formation via a Par3-dependent mechanism.**

Published 2010 - Jan

[+] **Planar cell polarity planes the inconveniences of cell division into a smooth morphogenetic process.**

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Journal selection

Tips to identify the most suitable journal

Identify the interests of the *journal editor*

- **Editorials**
- **Review articles**
- **Special issues**

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Journal selection

Tips to identify the most suitable journal

Journal editor's interests

Journal A	Journal B	Journal C
• Editorials • Review articles • Special issues	• Editorials • Review articles • Special issues	• Editorials • Review articles • Special issues

Manuscript

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Journal selection

Tips to identify the most suitable journal

Identify the interests of the *journal editor*

- Editorials
- Review articles
- Special issues

Identify the interests of the *readers*

- Most viewed
- Most cited

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Journal selection

Tips to identify the most suitable journal

Reader's interests

Journal A	Journal B	Journal C
• Most viewed • Most cited	• Most viewed • Most cited	• Most viewed • Most cited

Manuscript

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Journal selection

Advancing your career

Publishing in the same journal

Peer reviewer

Guest Editor

- **Publishing 2–3 manuscripts in the same journal**
- **Meet journal editors at conferences**
- **Write good peer review reports**
- **Member of the editorial board**

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Methods, Results, and Figures

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Methods, Results & Figures

Methods

Study design

Corresponding Author Name: _____

Manuscript Number: _____

Reporting Checklist For Life Sciences Articles

This checklist is used to ensure good reporting standards and to improve the reproducibility of published results. For more information, please read Reporting Life Sciences Research.

Figure legends

☐ Check here to confirm that the following information is available in all relevant figure legends (or Methods section if too long):

- the **exact sample size (*n*)** for each experimental group/condition, given as a number, not a range;
- a **description of the sample collection** allowing the reader to understand whether the samples represent **technical or biological replicates** (including how many animals, litters, culture, etc.);
- a **statement of how many times the experiment shown was replicated in the laboratory**;
- **definitions of statistical methods and measures**: (For small sample sizes (n<5) descriptive statistics are not appropriate, instead plot individual data points)
  - very common tests, such as *t*-test, simple χ^2 tests, Wilcoxon and Mann-Whitney tests, can be unambiguously identified by name only, but more complex techniques should be described in the methods section;

outcomes) and how

11b Similarity of interventions – If relevant, description of the similarity of i

12a Statistical methods – Statistical methods used to compare groups for primary and secondary outcomes

12b Additional analyses – Methods for additional analyses, such as subgroup analyses and adjusted analyses

npg nature publishing group | reporting checklist

http://www.nature.com/authors/policies/checklist.pdf

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Methods, Results & Figures

Methods

Study design

What/who was used	**Samples or participants** **Materials**
How it was done	**General methods** **Specific techniques** **(discuss controls)**
How it was analyzed	**Quantification methods** **Statistical tests**

Statistical problems

Surveyed 25 editors from high impact medical journals

"…respondents expressed concern over researchers' choice of statistical tests. Specifically, frequent problems exist in the appropriateness of statistical tests …"

When in doubt, consult a statistician

Fernandes-Taylor et al. BMC Res Notes. 2011; 4: 304.

Methods, Results & Figures

Resources for statistics

Statistics notes

Latest from The BMJ

Research Methods & Reporting
Uncertainty and sampling error
Published 25 November 2014

Research Methods & Reporting
Uncertainty beyond sampling error
Published 25 November 2014

Research Methods & Reporting
Statistics Notes: Missing outcomes in randomised trials
Published 06 June 2013

Research Methods
Brackets (parenthese
Published 11 August

Research Methods & Reporting
How to obtain the P value from a confidence interval
Published 08 August 2011

Research Methods
How to obtain the cor
Published 08 August

1 2 3 4 5 6 7 8 9 ... next

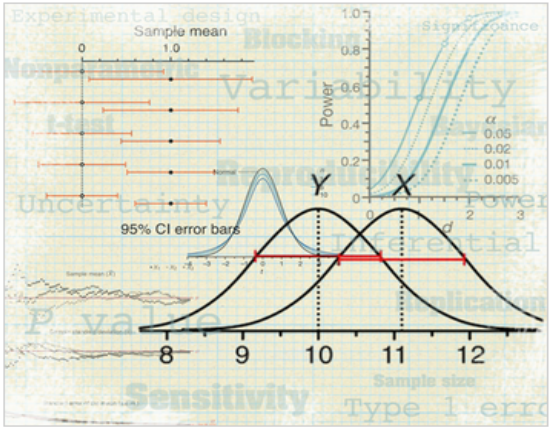
http://www.bmj.com/specialties/statistics-notes

http://www.nature.com/collections/qghhqm

WEB COLLECTION

Statistics for biologists

Home | Practical guides | Statistics in biology | Points of Significance | Other resources



There is no disputing the importance of statistical analysis in biological research, but too often it is considered only after an experiment is completed, when it may be too late.

This collection highlights important statistical issues that biologists should be aware of and provides practical advice to help them improve the rigor of their work.

Nature Methods' **Points of Significance** column on statistics explains many key statistical and experimental design concepts. **Other resources** include an online plotting tool and links to statistics guides from other publishers.

Image Credit: Erin DeWalt

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Methods, Results & Figures

Common statistical problems: normality

Distribution of data affects analysis and presentation

- Parametric tests (e.g., t-test and ANOVA) can only be used with normally distributed data
- The mean ± SD only for normally distributed data

Simple guide:

- **If SD is ≥ mean, most likely not normally distributed**
- **If SD is > 0.5 × mean, may not be normally distributed**

Use Shapiro-Wilk's W test for normality

Methods, Results & Figures

Statistical tests

2 categorical endpoints

Paired (within sample)	Unpaired (between sample)
McNemar	Fisher's exact test 2 treatment groups
	Chi-square test* 2+ treatment groups

*for sample sizes > 60

du Prel et al. Dtsch Arztebl Int 2010; 107: 343–8.

Methods, Results & Figures

Statistical tests

Continuous endpoints

Parametric		Nonparametric	
Paired	Unpaired	Paired	Unpaired
2 groups: Paired t-test	2 groups: Unpaired t-test	2 groups: Wilcoxon rank sum test	2 groups: Mann–Whitney U test
>2 groups: ANOVA	>2 groups: ANOVA	>2 groups: Friedman test	>2 groups: Kruskal–Wallis test

du Prel et al. Dtsch Arztebl Int 2010; 107: 343–8.

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Methods, Results & Figures

Common statistical problems: *P*-values

Statistical significance does not equal biological significance!

"When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as *confidence intervals*)."

"Avoid relying solely on statistical hypothesis testing, such as *P values*, which fail to convey important information about effect size and precision of estimates."

http://www.icmje.org/recommendations/browse/manuscript-preparation/preparing-for-submission.html

Methods, Results & Figures

Common statistical problems: *P*-values

Statistical significance does <u>not</u> equal biological significance!

"Drug A significantly reduced LDL cholesterol by 28% ($p<0.05$). Therefore, Drug A is effective in reducing cholesterol levels…"

- **How much is 28%? Is this a clinically relevant reduction?**
- **How does this effect generalize to the population? What is the 95% CI?**

Methods, Results & Figures

Common statistical problems: *P*-values

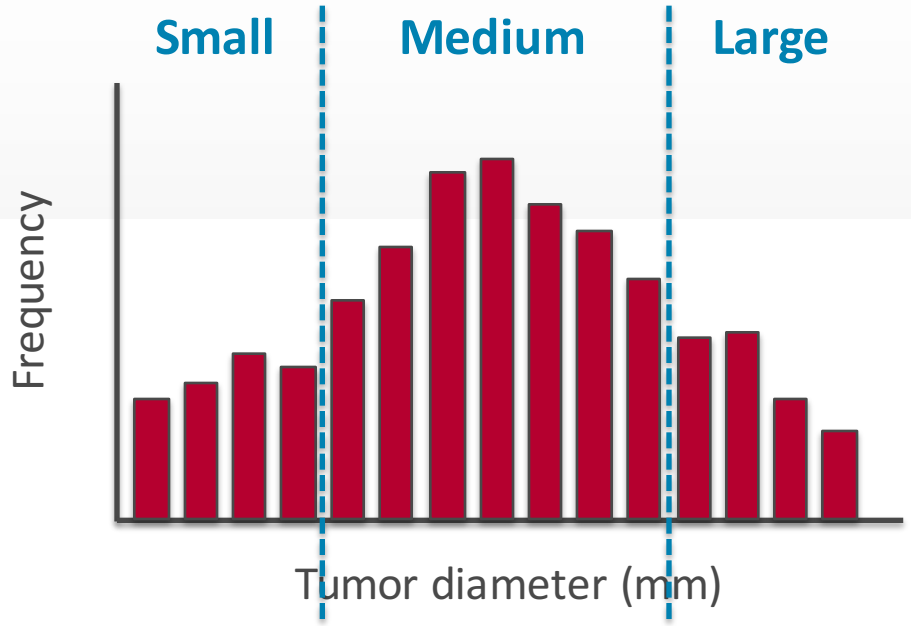
"Drug A significantly reduced LDL cholesterol levels from 4.7±0.3 mmol/L to 3.2±0.6 mmol/L (p=0.02, 95% CI: 0.8–2.2). Because a minimal reduction of 1.4 mmol/L is required to be clinically effective, the efficacy of Drug A is still unclear."

- **Use absolute values**
- **State exact *P*-values**
- **State 95% CI and minimal clinically relevant difference**

Methods, Results & Figures

Categorizing continuous data

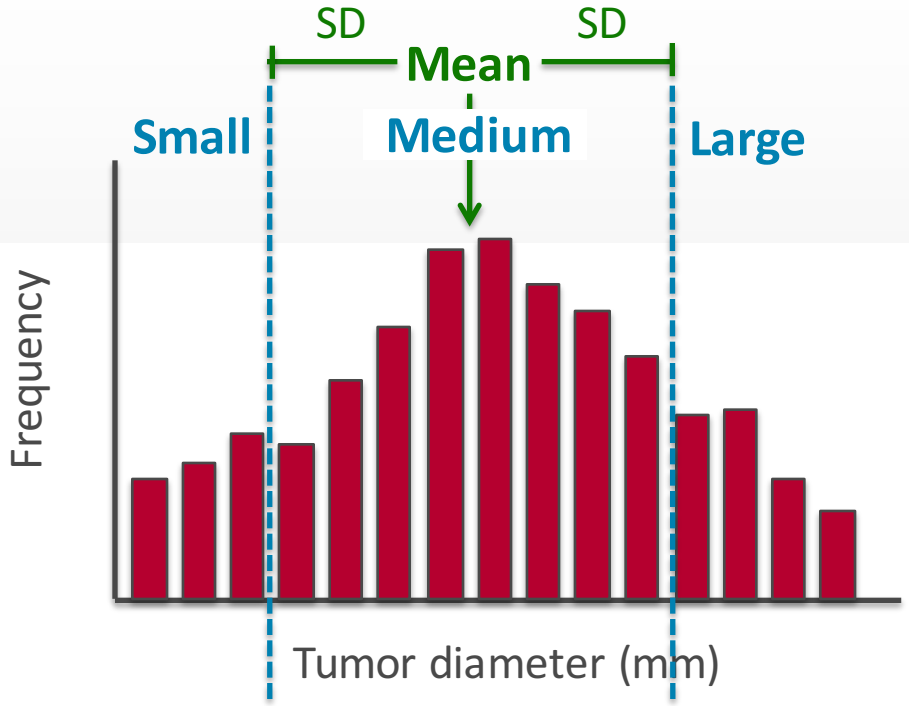
Need to justify why and how continuous data was categorized



Methods, Results & Figures

Categorizing continuous data

Need to justify why and how continuous data was categorized



Methods, Results & Figures

Results

Logical presentation

1. **Novel observation**
2. **Characterization**
3. **Application**

Example:

1. **New gene expressed in the heart**
2. **Regulation of gene expression, when it is expressed, function of the produced protein**
3. **Role of the gene in heart development**

Methods, Results & Figures

Results

Logical presentation

1. Novel observation
2. Characterization
3. Application

Subsections

Each subsection corresponds to *one* figure

Factual description

What you found, *not* what it means

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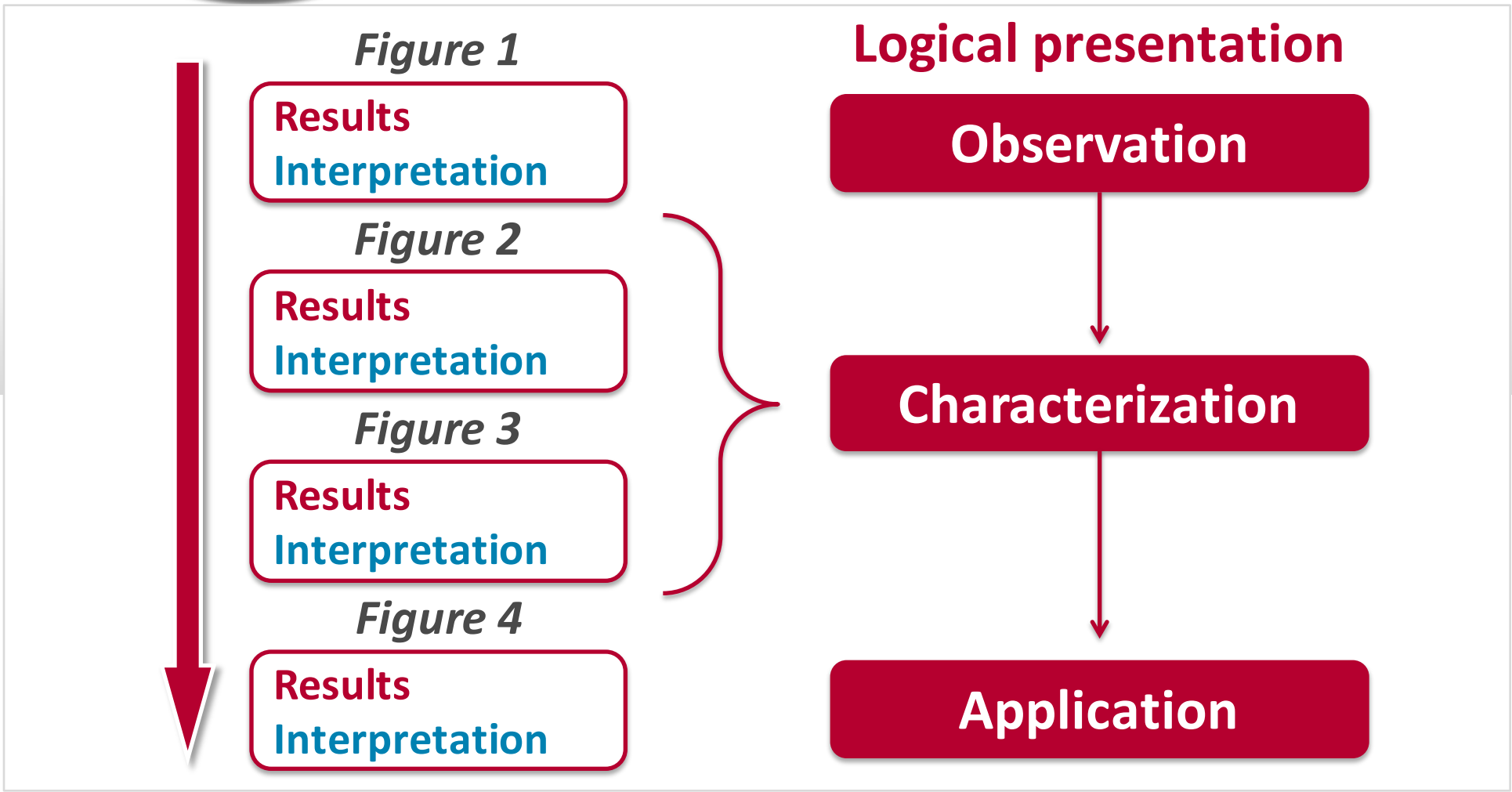
Methods, Results & Figures

Combined Results and Discussion



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Methods, Results & Figures

Results

Which of these statements should be used in the Results section?

Interpretation

1. Drug A is more effective in treating liver cancer as we observed a 32.7% decrease in tumor size compared with only a 22.1% decrease after Drug B treatment.

2. The efficacy of Drug A was higher than that for Drug B, with decreased tumor sizes of 32.7% and 22.1%, respectively.

Methods, Results & Figures

Describe relationships among your results

Drug A reduced tumor volume by 32.7%, increased blood pressure by 12.3%, and increased the patient's weight by 7.3 kg.

Drug B reduced tumor volume by 22.3%, increased blood pressure by 15.6%, and increased the patient's weight by 2.4 kg.

Drug C reduced tumor volume by 38.1%, increased blood pressure by 6.9%, and increased the patient's weight by 9.2 kg.

Methods, Results & Figures

Describe relationships among your results

Drug A reduced **tumor volume** by 32.7%, increased **blood pressure** by 12.3%, and increased the **patient's weight** by 7.3 kg.

Drug B reduced **tumor volume** by 22.3%, increased **blood pressure** by 15.6%, and increased the **patient's weight** by 2.4 kg.

Drug C reduced **tumor volume** by 38.1%, increased **blood pressure** by 6.9%, and increased the **patient's weight** by 9.2 kg.

Methods, Results & Figures

Describe relationships among your results

Patients treated with Drug C showed the *greatest reduction* in tumor volume (28.1%) compared with those treated with Drug A (32.7%) or Drug B (22.3%).

Drug C also had the *lowest increase* in blood pressure (6.9%) compared with that seen after treatment with Drug A (12.3%) or Drug B (15.65).

***However*, patients treated with Drug C had the *highest* weight gain among the three groups (Drug A, 7.3 kg; Drug B, 2.4 kg; Drug C, 9.2 kg).**

Methods, Results & Figures

Present large amount of data *quickly* and *efficiently*

Usually the *first* thing readers will look at

Figures, graphs & tables

Keep it *simple*: use separate panels if necessary

Must be able to *stand alone*: clear labels and figure legends

Methods, Results & Figures

Is this a clear figure?

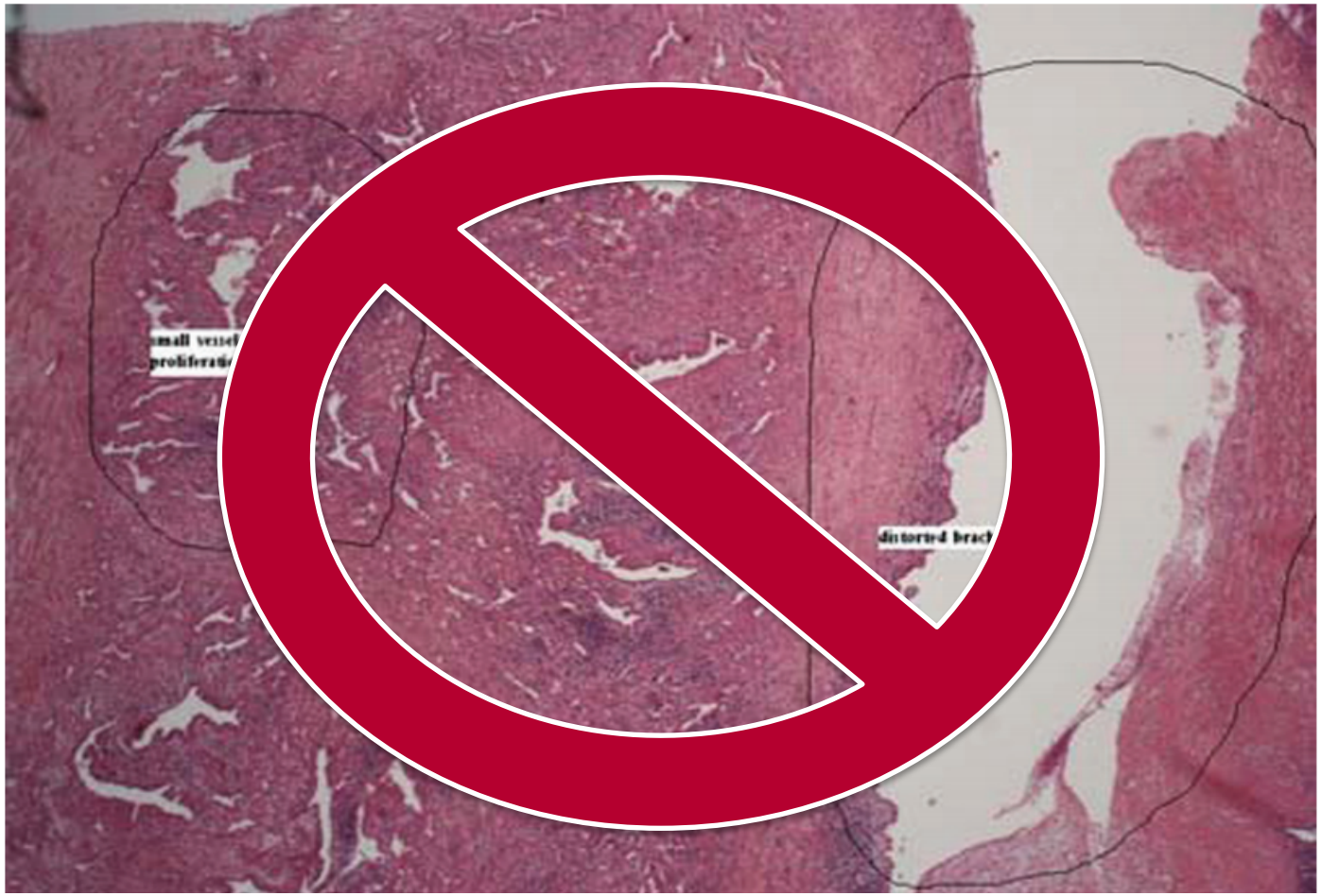

Figure 1 AHLE demonstrating distorted brachial artery and classical small vessel proliferation.

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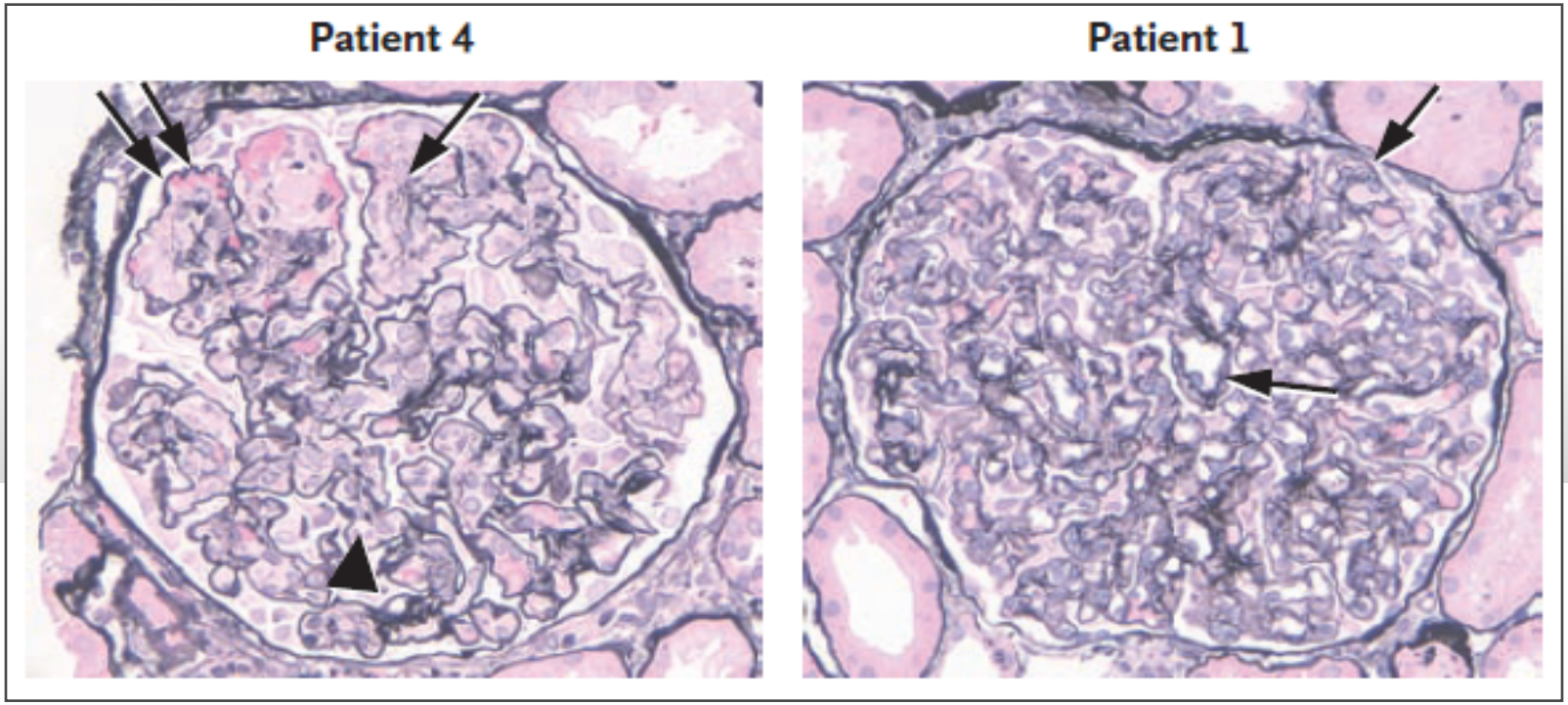
Kukreja et al. BMJ Case Rep. 2011; doi: 10.1136/bcr.02.2011.3836.

Methods, Results & Figures

Is this a clear figure?



"Panel B shows silver staining of two representative glomeruli in biopsy specimens from patients. In Patient 4 (***left***), mesangiolysis (***single arrow***), prominent endothelial swelling (***arrowhead***), red-cell fragments (***double arrows***), and thrombi are visible in some capillary loops. In a specimen from Patient 1 (***right***), the double contours of capillary basement membranes (***arrows***) can be seen. "

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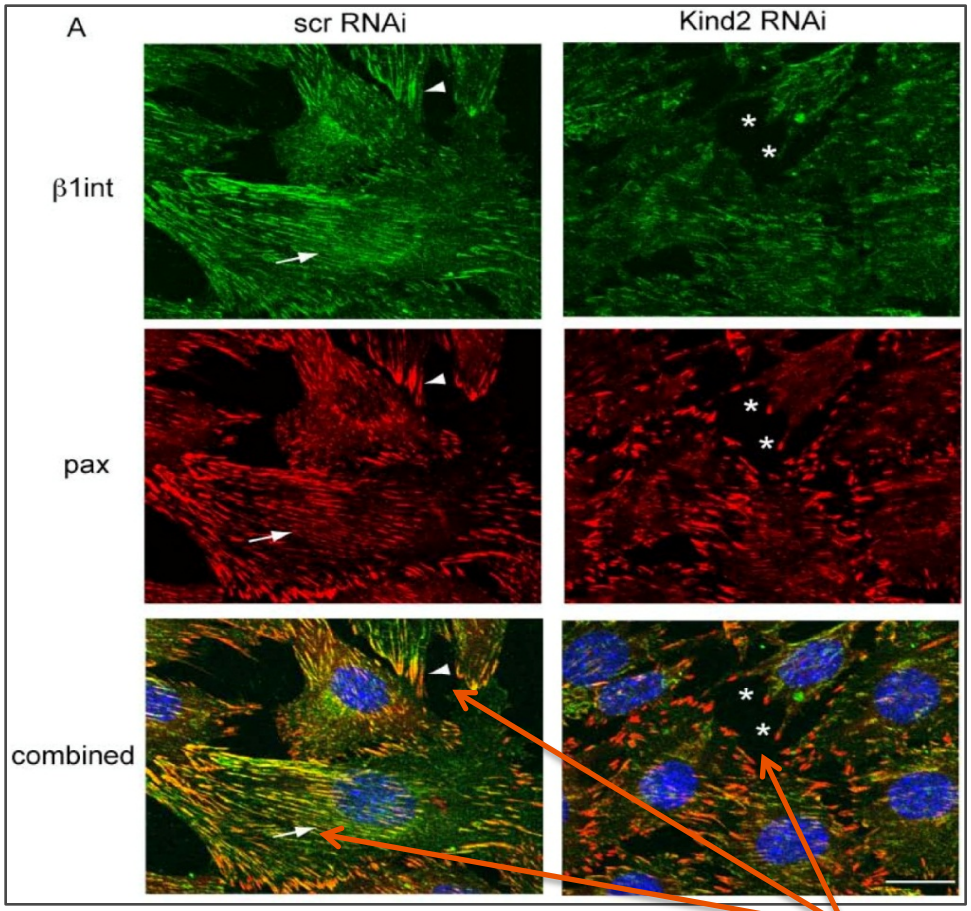
Eremina et al. New Engl J Med. 2008; 358: 1129–1136.

Methods, Results & Figures

Figures

Clear figure legend



Kindlin-2 knockdown and focal adhesion localization. Confocal immunofluorescent microscopy with anti-β1 integrin and anti-paxillin on C2C12 cells transfected with RNAi and then changed to differentiation media for 2 days. Control cells show linear staining consistent with localization to costameres (arrows), as well as punctate focal contact staining (arrowheads). Focal contact proteins in the kindlin-2 RNAi cells fail to form linear structures and instead are concentrated in unusual appearing puncta (*). (Scale bar = 20 µM).

Title of the experiment

Brief methodology

Key findings

Clear indicators

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Dowling et al. BMC Cell Biol. 2008; 9: 36.

Methods, Results & Figures

Table formatting

Clear and concise table caption

Dependent variable

Independent variable

Abbreviations defined

Table 3. Risk of Squamous-Cell Cervical Cancer Associated with the Presence of Human Papillomavirus (HPV) DNA.*

Country	Patients		Controls		Odds Ratio (95% CI)†
	no.	*% HPV-positive*	*no.*	*% HPV-positive*	
Brazil	169	97.0	196	17.3	177.0 (65.5–478.3)
Mali	65	96.9	12	33.3	109.2 (10.6–1119.0)
Morocco	175	97.1	176	21.6	113.7 (42.3–305.3)
Paraguay	106	98.1	91	19.8	208.1 (46.4–932.8)
Philippines	331	96.4	381	9.2	276.8 (139.7–548.3)
Thailand	339	96.5	261	15.7	163.5 (82.0–325.9)
Peru	171	95.3	175	17.7	115.9 (48.6–276.4)
Total‡	1356	96.6	1292	15.6	158.2 (113.4–220.6)
Spain	316	77.8	329	5.2	63.4 (36.4–110.6)
Invasive	159	82.4	136	5.9	75.7 (32.9–174.2)
In situ	157	73.2	193	4.7	58.9 (27.4–126.7)
Colombia	246	74.4	307	13.4	19.1 (12.3–29.6)
Invasive	111	78.4	126	17.5	17.7 (9.1–34.3)
In situ	135	71.1	181	10.5	21.1 (11.5–38.8)

* Testing was performed with the GP5+/6+ primers, except in Spain and Colombia, where the MY09/MY11 primers were used. For all countries except Spain and Colombia, only invasive cancer was studied.
† The odds ratios have been adjusted for age. CI denotes confidence interval.
‡ The odds ratio has been adjusted for age and center.

Muñoz et al. New Engl J Med. 2003; 348: 518–527.

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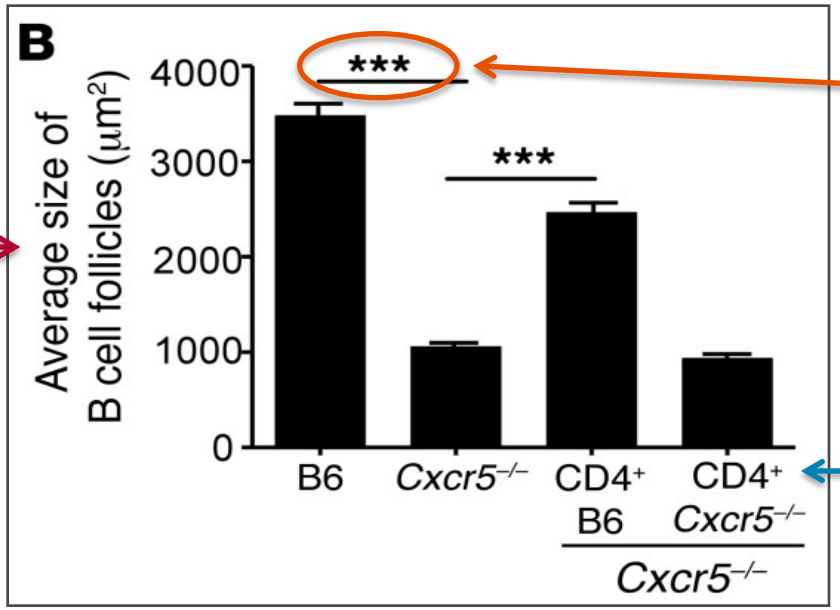
Methods, Results & Figures

Bar graphs

CXCR5⁺ T helper cells mediate protective immunity against tuberculosis



Statistical significance

Dependent variable

Independent variable

Figure 7 Adoptive transfer of B6 but not *Cxcr5*$^{-/-}$ CD4⁺ T cells rescues T cell localization and protection in *Cxcr5*$^{-/-}$ *Mtb*-infected mice... (**B**) The average size of B cell lymphoid follicles in FFPE lung sections on day 50 using the morphometric tool of the Zeiss Axioplan microscope... *** $P = 0.0005$.

Slight et al. J Clin Invest. 2013; doi: 10.1172/JCI65728.

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Methods, Results & Figures

When *not* to use bar graphs

Bar graphs

Mean ± SD
Normally distributed data

What if you don't have normally distributed data?

Should present median and interquartile range (IQR)

Box plots

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Methods, Results & Figures

Box plots

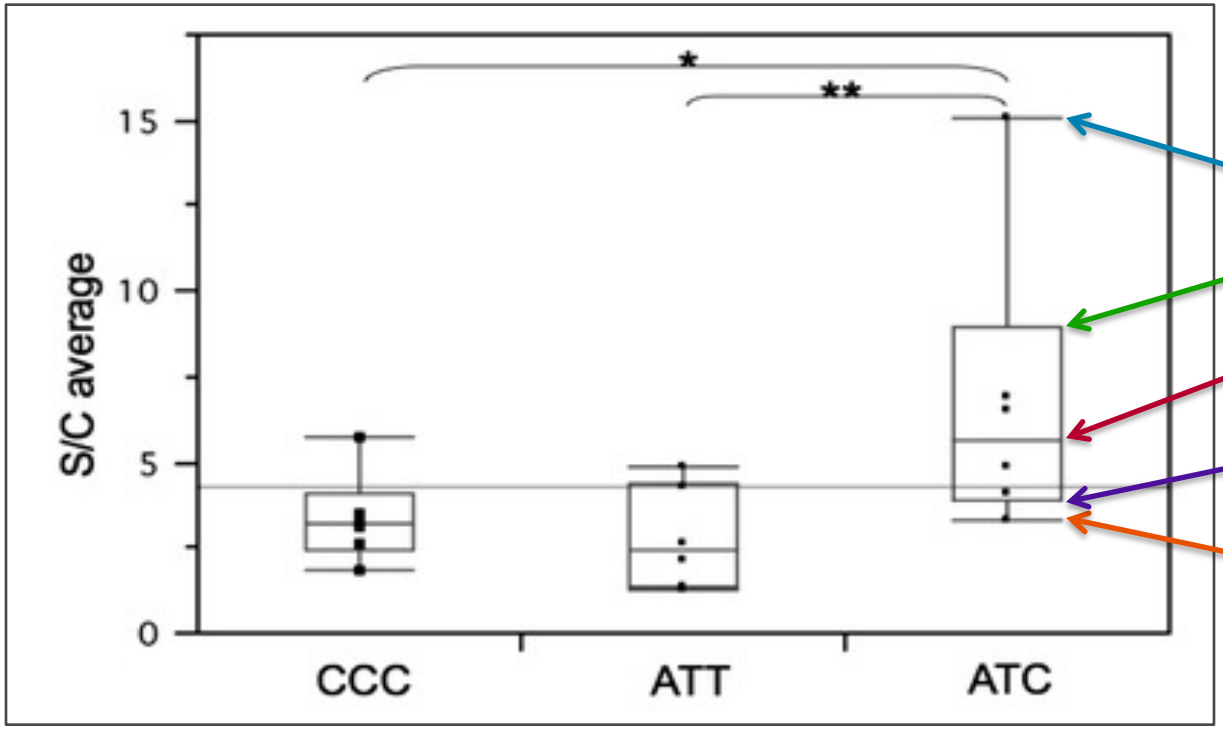

Figure 2 Dual luciferase reporter assays. The ratios of Firefly luciferase activity (signal S) to Renilla luciferase (control C) are displayed using *box and whisker plots*...

Hijikata et al. Hum Genetics. 2012; 131: 675–682.

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Methods, Results & Figures

Additional figures/data

What to do with additional figures or related data?

Supplementary information
- Integrated into article
- Not discoverable

Data repositories
- May be linked to article
- Discoverable/citable

Data journals
- May be linked to article
- Discoverable/citable
- Peer-reviewed

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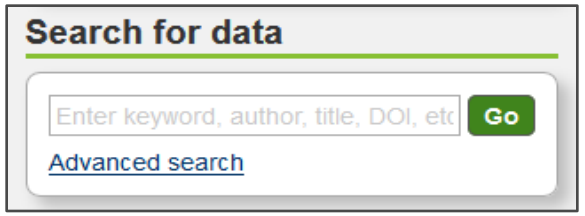
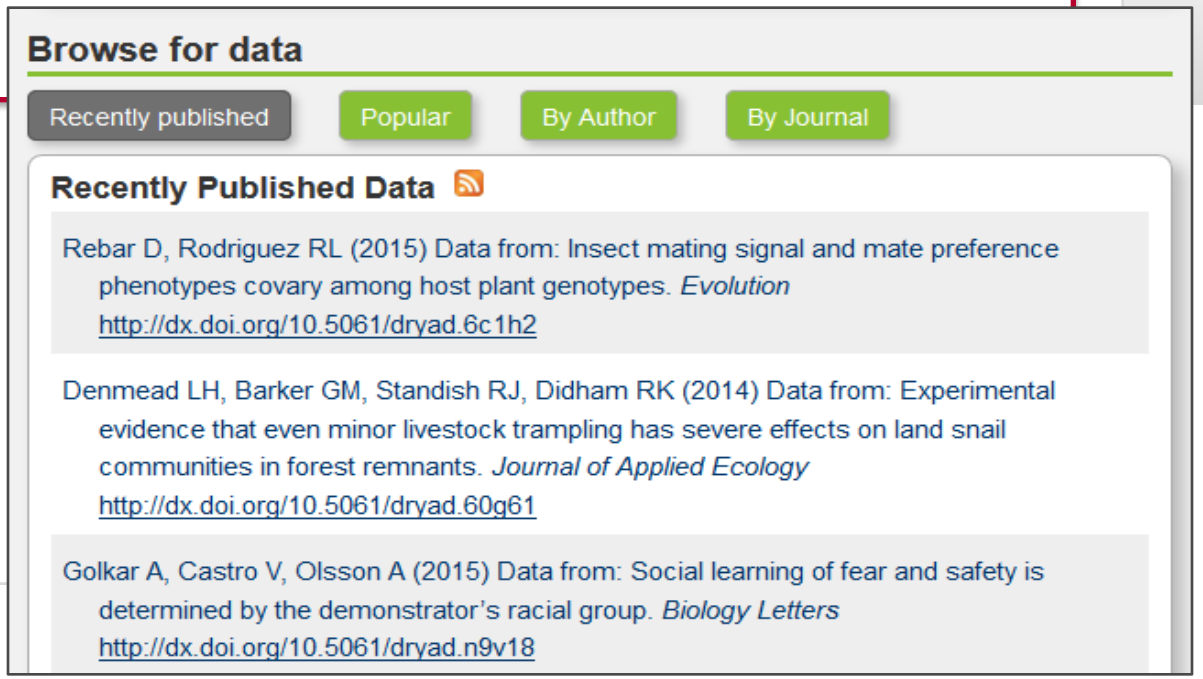
Methods, Results & Figures

Data repositories – Dryad

- Only data associated with published article
- Discoverable independent of article
- Receives DOI/citable
- Curated/monitored
- Updatable





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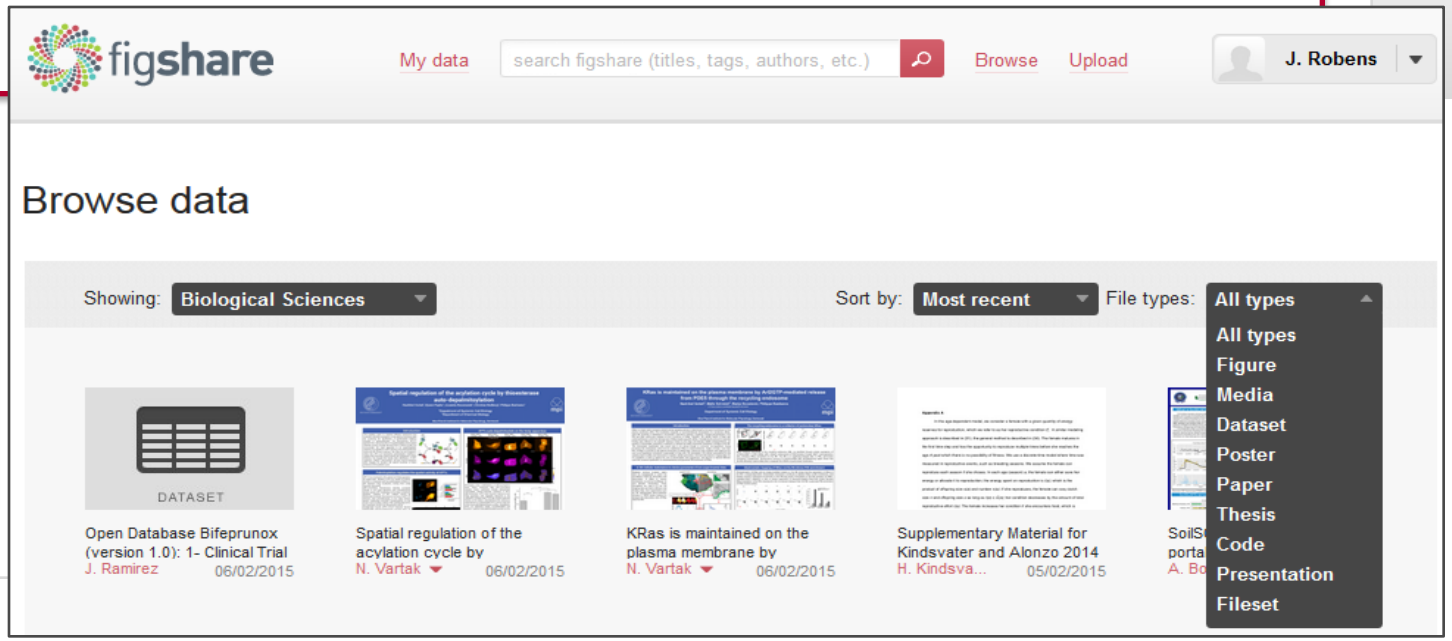
Methods, Results & Figures

Data repositories – Figshare

- All data is acceptable (e.g., negative results)
- Increase cooperativity and reduce research waste
- Can share presentations and posters
- Receives DOI/citable
- Updatable

Private space:
1 GB

Public space:
Unlimited



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Methods, Results & Figures

Data repositories – Figshare

- All dat
- Increa
- Can sh
- Receiv
- Updat

Private sp
1 GB

Public sp
Unlimit

PRISMA 2009 Checklist

Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	3
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known.	4,5
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	5
METHODS			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	5,6,7
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	6
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	6
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	6
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	6
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	6,7
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	6,7
Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	7
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	7,8
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I^2) for each meta-analysis.	7,8

Page 1 of 2

Section/topic	#	Checklist item	Reported on page #

figshare 3 / 3 download

PRISMA checklist. Schmucker, et al. PLoS ONE. 2014; 9: e114023.

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Upload J. Robens

File types: All types

All types
Figure
Media
Dataset
Poster
Paper
Thesis
Code
Presentation
Fileset

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Methods, Results & Figures

Data journals

Scientific Data

- Published by Nature Publishing Group
- Does not host data

Data in Brief

- Published by Elsevier
- Hosts data < 10 GB

Peer reviewed

- Clear data descriptions
- Clear protocols
- Utility explained
- Reusable data format

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Introduction and Discussion

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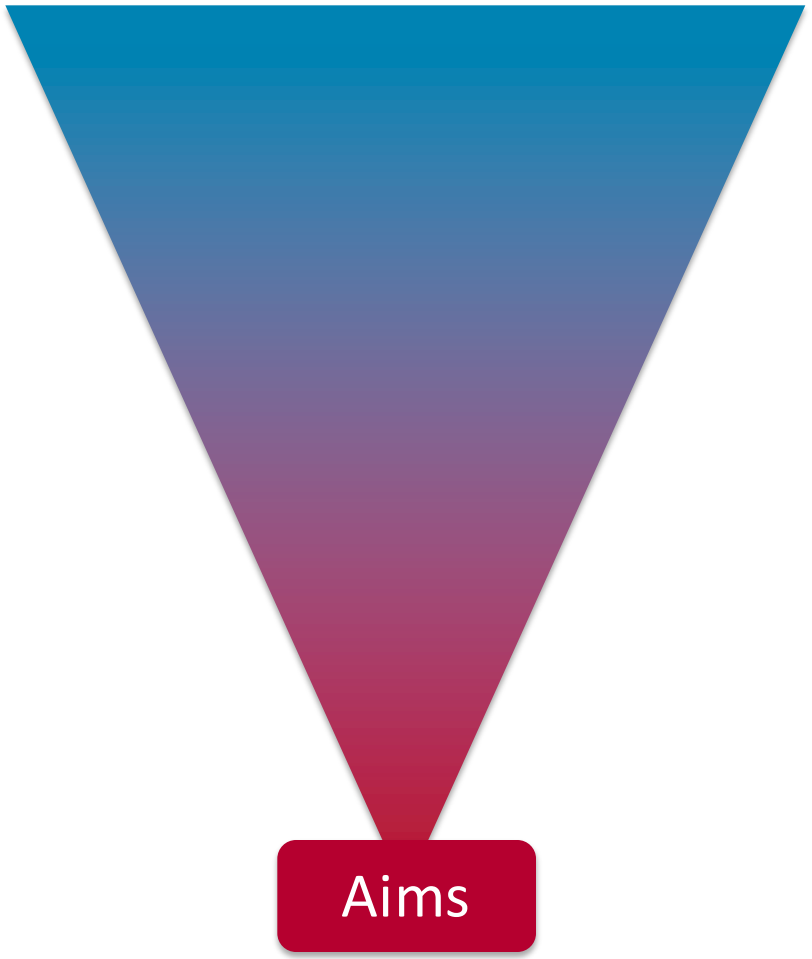
Introductions & Discussions

Introduction



General introduction

Current state of the field

Problem in the field

Specific aims

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Introductions & Discussions

Writing the Introduction

Modify the beginning of the introduction for your target journal

Background — Familiar to the reader

↓

Logically guide from known to unknown

Aims — Why study is necessary

Introductions & Discussions

Writing the Introduction

Beginning should demonstrate relevance/interest

Interest

Lung cancer is the leading cause of cancer mortality for men and women. Despite smoking prevention and cessation programs and advances in early detection, the 5-year survival rate for lung cancer is only 16% with current therapies. Although lung cancer incidence rates have recently declined in the United States, more lung cancer is now diagnosed when considered together in former- and never-smokers than in current smokers. Thus, even if all of the national anti-smoking campaign goals are met, lung cancer will remain a major public health problem for decades. New ways to treat or prevent lung cancer are therefore needed.

Identified problem is directly related to the Aims and scope

Busch et al. BMC Cancer. 2012; 13: 211.

Introductions & Discussions

Aims and scope

BMC Cancer

BMC Cancer is an open access, peer-reviewed journal that considers articles on all aspects of cancer research, including the pathophysiology, prevention, diagnosis and treatment of cancers. The journal welcomes submissions concerning molecular and cellular biology, genetics, epidemiology, and clinical trials.

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Introductions & Discussions

Broad to specific

Broad introduction

Lung cancer is the leading cause of cancer mortality for men and women. Despite smoking prevention and cessation programs and advances in early detection, the 5-year survival rate for lung cancer is only 16% with current therapies. Although lung cancer incidence rates have recently declined in the United States, more lung cancer is now diagnosed when considered together in former- and never-smokers than in current smokers. Thus, even if all of the national anti-smoking campaign goals are met, lung cancer will remain a major public health problem for decades. New ways to treat or prevent lung cancer are therefore needed.

Stress sentence

One potential therapeutic target for lung cancer is the Wnt signaling pathway. The canonical Wnt signaling pathway in mammals consists of a family of secreted lipid-

Specific introduction

that bind to a family of 7-pass transmembrane Frizzled (Fzd) receptors, as reviewed…

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Busch et al. BMC Cancer. 2012; 13: 211.

Introductions & Discussions

Broad to specific

Link with previous information

Effective pharmacological inhibitors of the Wnt pathway have only recently become available. Screens for small-molecule antagonists of the Wnt pathway found two enzymes to be key mediators of Wnt signaling. These are poly-ADP-ribose polymerase (PARP) enzymes, tan **More specific introduction** ttach poly-ADP-ribose (PAR) onto substrate proteins. Their roles in regulating telomerase function and mitotic spindle formation are known, but their role in PARsylating axin so as to maintain the optimal level for canonical Wnt signaling has only recently been recognized. PARP inhibition is a tractable pharmacological target *in vivo*, as antagonists of other PARP homologs exert antineoplastic responses in breast and ovari

Stress sentence

This study explored the hypothesis that inhibition of TNKS by pharmacological or genetic means would inhibit lung cancer growth *in vitro* and *in vivo*...

Study objectives

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Busch et al. BMC Cancer. 2012; 13: 211.

Introductions & Discussions

Broad to specific

Lung cancer is the leading cause of cancer mortality for men and women. Despite smoking prevention and cessation programs and advances in early detection, the 5-year survival rate for lung cancer is only 16% with current th[illegible] declined in the United States, more lung cancer is now diagnosed when considered together in former- and n[illegible] national anti-smoking campaign goals are met, lung cancer will remain a major public health problem for decades. New ways to treat or prevent lung cancer are therefore needed.

General introduction

One potential therapeutic target for lung cancer is the Wnt signaling pathway. The canonical Wnt signaling pathway in mammals consists of a family of secreted lipid-modified Wnt protein ligands that bind to a family of 7-pass transmembrane Frizzled (Fzd) receptors. In brief, in the absence of ligand, glycogen synthase kinase-3 (GSK3), in complex with axin and adenomatous polyposis coli (APC), constitutively phosphorylates β-catenin, the primary Wnt signaling effector, targeting it for ubiquitination and proteasomal destruction. Ligand binding engages a pathway involving Dishevelled (Dvl) that inhibits GSK3, allowing β-catenin to accumulate in a hypophosphorylated form. This stabilized form of β-catenin can translocate to the nucleus, where it activates target gene transcription by complexing with T cell factor (TCF) and lymphoid enhancer-binding factor (LEF). In addition to key mediators of embryonic development, these target genes include critical growth-regulators such as *myc* and *cyclin D1*.

Introduce WNT

Aberrant Wnt signaling due to mutations in *β-catenin* or *APC* d[illegible] non-hereditary colorectal cancers. However, non-small cell lung cancers (NSCLC), the most common type of lung cancer, ra[illegible]er, aberrant Wnt activity in lung cancer is linked to increased expression of upstream Wnt signaling effectors such as Dvl or decreased expression of Wnt antagonists such as Wnt-inhibitory factor 1 (Wif-1).

Effective pharmacological inhibitors of the Wnt pathway have only recently become available. Screens for small-molecule antagonists of the Wnt pathway found two enzymes to be key mediators of Wnt signaling. These are poly-ADP-ribose polymerase (PARP) enzymes, tankyrase (TNKS) 1 and TNKS2, which attach poly-ADP-ribose (PAR) onto substrate proteins. Their roles in regulating telomerase function and mitotic spindle formation are known, but their role in PARsylating axin so as to maintain the optimal level for canonical Wnt signaling has only recently been recognized. The compounds identified in these screens, XAV939, IWR-1 exo, and IWR-1 endo, act by specifically inhibiting the PARP activity of TNKS1 and TNKS2. IWR-exo is a stereoisomer of IWR-1 endo with ~14-fold lower EC_{50}. PARP inhibition is a tractable pharmacological target *in vivo*, as antagonists of other PARP hom[illegible]st and ovarian cancer.

Introduce TNKS

This study explored the hypothesis that inhibition of TNKS by ph[illegible]it lung cancer growth *in vitro* and *in vivo* in clinically-relevant transgenic mouse models of lung cancer that were previously developed. Using comprehensive microarray analyses, we found that TNKS were overexpressed in murine lung cancers relative to adjacent normal lung tissues. These results were confirmed by semi-quantitative real-time polymerase chain reaction (qPCR) assays. Individual treatments of a well-characterized panel of human and murine lung cancer cell lines with the TNKS inhibitors XAV939 or IWR-1 inhibited cell growth, reduced the activation of a Wnt-responsive lentiviral luciferase construct, and stabilized protein levels of axin and both TNKS. Genetic inhibition of TNKS was independently achieved by use of siRNA or shRNA-mediated knockdown in lung cancer cells. This resulted in axin stabilization, marked growth inhibition, and repressed lung cancer formation in murine xenograft and transgenic syngeneic lung cancer models. Taken together, the findings presented here uncover TNKS as new antineoplastic lung cancer targets.

Objectives

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Busch et al. BMC Cancer. 2012; 13: 211.

Introductions & Discussions

Relevance of the aims

- Identify an important problem
- State aims that directly address this problem

Problem

Currently, the standard procedure used to evaluate hepatic steatosis is the histopathological examination of cross-liver sections…
…this is an ***invasive practice*** that presents inherent ***risks***…
Therefore, it is essential to establish new non-invasive approaches to accurately determine hepatic fat concentration…

Aims

The purpose of our prospective study…was to evaluate the potential of multi-echo MRI to quantitate the hepatic triglyceride concentration.

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Introductions & Discussions

Discussing other studies

Problem in the field

However, conventional thin-film materials limit the use of such thin-film transistors in flexible backplane-circuitry because of their fragility and relatively low mobility.

Published work to address problem

Two-dimensional layered semiconducting chalcogenides (such as MoS_2) have attracted attention because of their having an intrinsically high carrier mobility, mechanical flexibility, and a finite bandgap.

However, improvements for MoS_2 transistors have been hampered by the presence of a Schottky barrier…

Current problem

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Modified from: Lee et al. J Korean Phys Soc 2014; 64: L945–L948.

Introductions & Discussions

Aims to address the problem

…hampered by the presence of a Schottky barrier…

Aims

In this research, we investigated the high-temperature electrical behavior of a MoS_2 transistor with a high Schottky barrier…
High temperature leads to a larger thermionic emission that transports electrons over the energy barrier.

Propose a solution to the current problem

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Lee et al. J Korean Phys Soc 2014; 64: L945–L948.

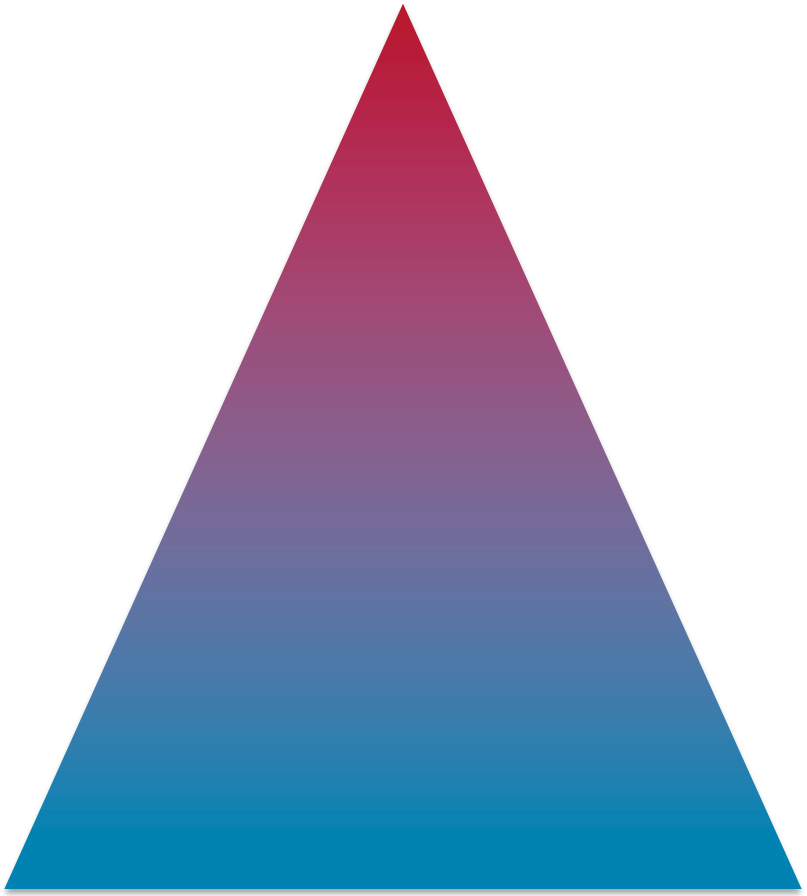
Introductions & Discussions

Common mistakes in the Introduction

- Ideas are not logically organized — **Why study needs to be done?**
- Introduce topics that are not discussed later (Results/Discussion) — **Keep focused**
- Not introduce important topics that are discussed later (topics introduced in the Discussion) — **Write last**
- Cited studies are not up-to-date — **<5 years**
- Cited studies are geographically biased — **International**

Introductions & Discussions

Discussion



Summary of findings

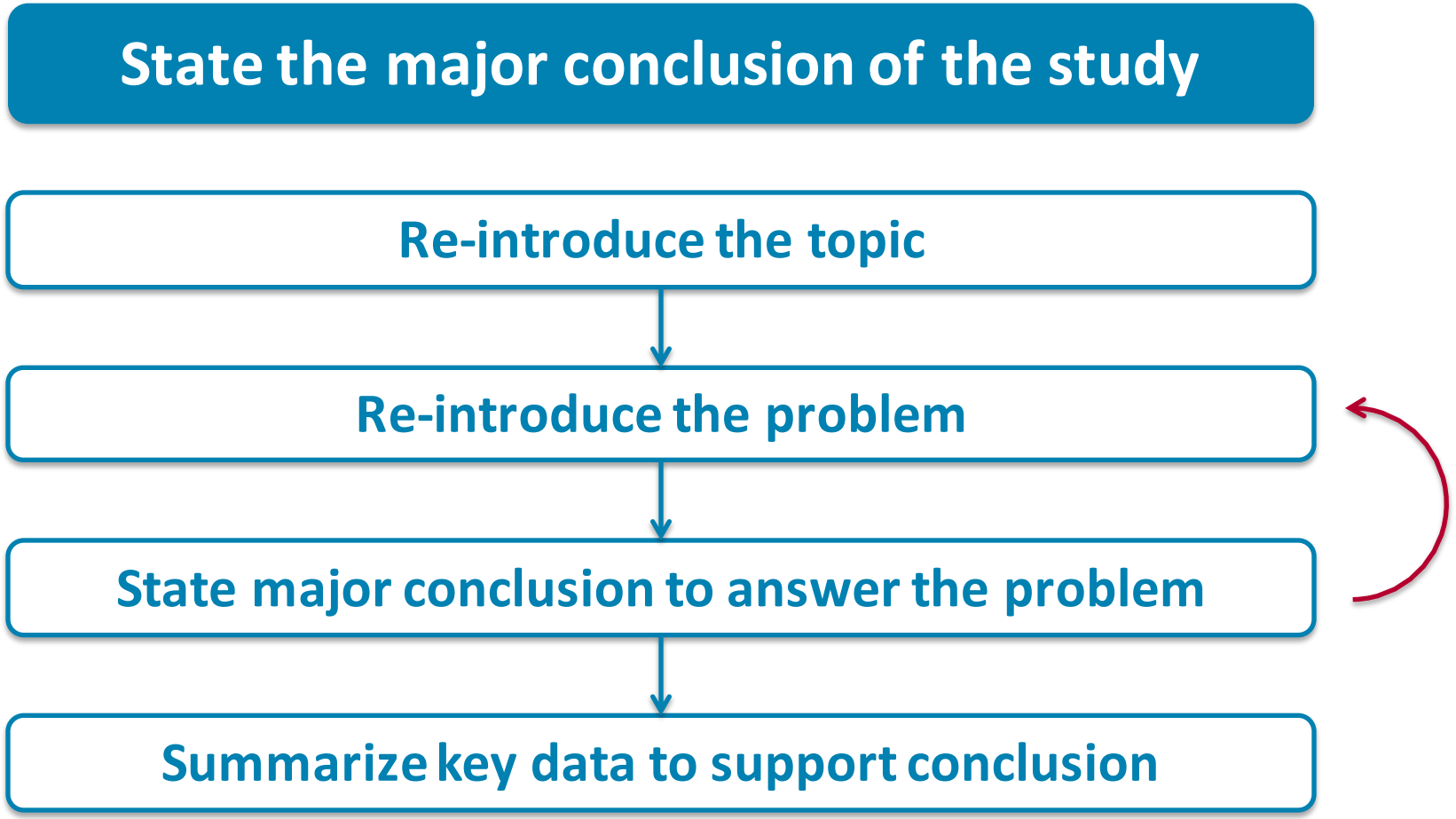
Relevance of findings

- Similarities/differences
- Unexpected results
- Negative results
- Limitations

Implications for the field

Introductions & Discussions

Discussion – Beginning



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Introductions & Discussions

Writing the beginning of your Discussion

State the *major conclusion* of the study

Re-introduction

GPER is an E_2 binding, G-protein coupled membrane receptor that was reported to be overexpressed in breast, endometrial, ovarian and thyroid cancers. However, it is currently unclear if different types of lung cancers including adenocarcinomas, squamous cel **Problem** large cell carcinomas express higher GPER than normal lung tissue. Here, we demonstrate for the first time that GPER is overexpressed in lung tumors and lung adenocarcinoma cell lines relative to normal lung and immortalized normal lung cell lines, although the expression of GPER transcript in HPL1D cells is higher than HBECs.

Conclusion

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Modified from: Rao Jala et al. BMC Cancer 2012; 12: 624.

Introductions & Discussions

Writing the middle of your Discussion

Compare your findings with those published by others

GPER has been postulated to be involved in E_2-activation of EGFR. Filardo's group showed a link between GPER expression and tumor progression and increased tumor size in breast cancer patients. Recently, GPER overexpression was reported to be independent of ERα expression in breast cancer patient samples, indicating the importance of GPER in ERα negative tumors. GPER and EGFR expression were correlated in endometrial adenocarcinoma. Further, overexpression of GPER in advanced stage endometrial adenocarcinoma correlated with poor survival. Other studies also suggest increased GPER in breast, ovarian and endometrial cancers correlates with disease severity and reduced survival. These results are in agreement with studies demonstrating association of GPER overexpression in other cancers, although the scoring patterns and correlation of expression levels to disease state may vary among these studies.

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Rao Jala et al. BMC Cancer 2012; 12: 624.

Introductions & Discussions

Writing the middle of your Discussion

Describe any *unexpected/negative* results

In western blots, rather than rely on one GPER antibody in our study, we used 3 different commercial antibodies to determine the correlation between mRNA and protein levels. It is indeed evident from our western blot data that GPER appears to have different MW forms, likely due to glycosylation, dimerization, and interaction with other membrane proteins, and levels in the lung adenocarcinoma cell lines. More trivial explanations for the different staining patterns of GPER in western blots may be due to differential purity/affinity of the three GPER antibodies as well as their capacity to bind to secondary antibodies. It will be important to determine the nature of these forms by proteomic analysis and gene sequencing to evaluate their biological significance.

Unexpected results

Suggest future directions

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Rao Jala et al. BMC Cancer 2012; 12: 624.

Introductions & Discussions

Writing the middle of your Discussion

Describe any *negative* results

Why?

Reporting transparency

- Allows complete evaluation of your study
- Prevents others from repeating those experiments
- Allows others to modify those experiments
- Prevents funding agencies from wasting money

Data repositories

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Introductions & Discussions

Writing the middle of your Discussion

Describe your *limitations*

A limitation of our study is that the average GPER staining scores among different lung cancer grades (I (10 cases), II (30 cases), III (16 cases)) were not significantly different. One other limitation of the current study is that we cannot conclude at this time whether GPER overexpression is cause or consequence of cancer. It is also possible that overexpression of GPER in lung cancers may reflect a defense mechanism to counteract excessive proliferation. Indeed, a rec… that loss of GPER in ERα-positive endometrial canc…s. Another study showed that the GPER agonist G-1 …l cell proliferation in mice by repressing MAPK activa… tissue specific. Because our studies were performed on commercial TMAs, the results cannot be extrapolated to correlate GPER expression levels to disease outcomes. Clearly, this is a next logical step in light of the novel findings.

Limitations related to:

- Study design
- Data analysis

Future directions

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Rao Jala et al. BMC Cancer 2012; 12: 624.

Introductions & Discussions

Writing your limitations

Identify limitations

Important limitations of our study include an inadequate sample size and duration to detect differences in the incidence of diabetes complications, **Address limitations** tion, stroke, or death. The protocol specifies further follow-up at 5 years for all patients, which should allow additional assessment o **Sentence structure** acy and safety. Despite these limitations, we conclude that bariatric surgery represents a potentially useful strategy for the management of type 2 diabetes, allowing many patients to reach and maintain therapeutic targets of glycemic control that otherwise would not be achievable with intensive medical therapy alone.

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Modified from: Schauer et al. New Engl J Med. 2014; 370: 2002–2013.

Introductions & Discussions

Writing your limitations

Identify limitations

Important limitations of our study include an inadequate sample size and duration to detect differences in the incidence of diabetes complications,

Address limitations

tion, stroke, or death. The protocol specifies further follow-up at 5 years for all patients, which should allow additional assessment o

Sentence structure

acy and safety. Despite these limitations, we conclude that bariatric surgery represents a potentially useful strategy for the management of type 2 diabetes, allowing many patients to reach and maintain therapeutic targets of glycemic control that otherwise would not be achievable with intensive medical therapy alone.

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Modified from: Schauer et al. New Engl J Med. 2014; 370: 2002–2013.

Introductions & Discussions

Discussion – End

State the major conclusion of the study

Re-state your major conclusion

↓

Describe the key implications

↓

Recommend future research

Introductions & Discussions

Writing a strong conclusion paragraph

Why your study is important

In conclusion, we found an independent, graded association between lower levels of the estimated GFR and the risks of death, cardiovascular events, and hospitalization. These risks were evident at an estimated GFR of less than 60 ml per minute per 1.73 m^2 and substantially increased with an estimated GFR of less than 45 ml per minute per 1.73 m^2. Our findings support the validity of the National Kidney Foundation staging system for chronic kidney disease but suggest that the system could be further refined, since all persons with stage 3 chronic kidney disease (GFR, 30 to 59 ml per minute per 1.73 m^2) may not be at equal risk for each outcome. Our findings highlight the clinical and public health importance of chronic kidney disease that does not necessitate dialysis.

Conclusion

Key finding

Implications

Future directions

Clinical importance

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Go et al. N Engl J Med. 2004; 351: 1296–1305.

Introductions & Discussions

Marketing your conclusions

Journal of Cardiovascular Magnetic Resonance

…publishes articles on all aspects of basic and clinical research on the design, development, manufacture, and evaluation of magnetic resonance methods applied to the cardiovascular system.

Topical areas include, but are not limited to:

- **New applications of magnetic resonance to *improve diagnostic strategies* and the characterization of diseases affecting the cardiovascular system.**

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Introductions & Discussions

Marketing your conclusions

For *narrow-focused* journals, be sure to market your conclusions towards the aims of the journal

Improve diagnostic strategies

Atrial dimensions vary mainly by body surface area, with lesser effects of gender and age. Identification particularly of early abnormality requires reference ranges which normalize for all 3 variables. These ranges are supplied with this report in both tabular and graphical form and are of significant clinical and research utility for the interpretation of cardiovascular magnetic resonance studies. Also, best predictors of left atrial enlargement are provided.

Interesting to readership

Maceira et al. J Cardiovasc Magn Reson. 2010; 12: 65.

Introductions & Discussions

Common mistakes

Do not restate your results

We showed that tumor volumes in Groups A, B, and C were 34.6, 74.2, and 53.9 mm^3, respectively, after a 4-month drug treatment, reflecting only a 8.6% decrease. However, after a 12-month drug treatment, the tumor volumes in Groups A, B, and C were 16.3, 18.7, and 16.9 mm^3, respectively, which reflects a 45.2% decrease ($p<0.05$). This demonstrates that a 12-month treatment is necessary for the drug to effectively reduce tumor size among the three groups.

The results presented in this study demonstrate that Drug X more effectively reduces tumor size after 12 months of treatment (45.2% reduction) than it does after 4 months (8.6% reduction).

Introductions & Discussions

Common mistakes

Do not overgeneralize your findings

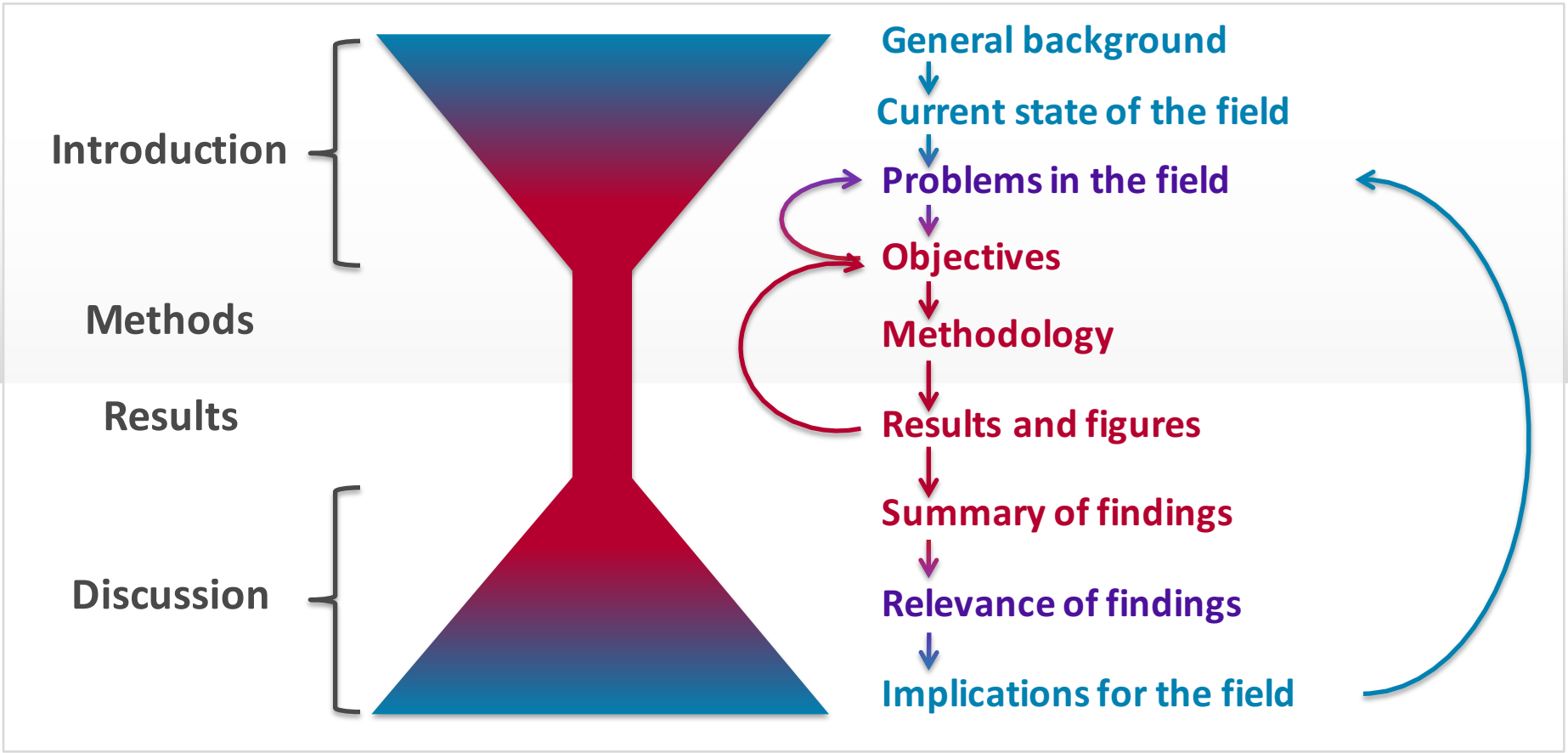
Result: Drug A reduced breast cancer cell growth *in vitro*

In this study, we demonstrated that Drug A effectively reduced tumor growth. Therefore, this drug should have therapeutic applications in breast cancer treatment.

In this study, we demonstrated that Drug A effectively reduced the growth of various breast cancer cell lines. This ***suggests*** that this drug ***may*** have therapeutic applications in breast cancer treatment.

Introductions & Discussions

Linking your ideas in your manuscript



Logically link your ideas throughout your manuscript

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Introductions & Discussions

Linking your ideas

Introduction

New ways to treat or prevent lung cancer are therefore needed.

Problem

This study explored the hypothesis that inhibition of TNKS…would inhibit lung cancer growth…

Objectives

Discussion

Pharmacological or genetic inhibition of TNKS1 and TNKS2…reduces lung cancer proliferation…

Conclusion

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Busch et al. BMC Cancer. 2012;13:211.

Introductions & Discussions

Writing effective conclusions

Your conclusion is a summary of your findings

*Your conclusion should be the **answer** to your research problem that is **supported** by your findings*

Emphasizes how your study will help advance the field

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Any questions?

Thank you!

Daniel McGowan: dmcgowan@edanzgroup.com

edanzediting.com/insp2016
Download and further reading

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Effectively Communicating Your Research – Day 2

INSP

25 February 2016

Daniel McGowan, PhD
Science Director

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Workshop outline

Day 1	Day 2
Ethics	Writing skills
Writing skills	Titles & Abstracts
Effective writing	Cover letters
Journal selection	Peer review
Methods & Results	Promoting your work
Introductions & Discussions	

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Workshop outline

Day 1	Day 2
Ethics	Writing skills
Writing skills	Titles & Abstracts
Effective writing	Cover letters
Journal selection	Peer review
Methods & Results	Promoting your work
Introductions & Discussions	

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Section 7

Titles and abstracts

Titles and Abstracts

Effective titles

Important points

- ✓ Summarize key finding
- ✓ Contains keywords
- ✓ Less than 20 words

Avoid

- X Questions
- X Describing methods
- X Abbreviations
- X “New” or “novel”

Your title should be a concise summary of your most important finding

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Titles and Abstracts

Effective titles

Articles with short titles describing the results are cited more often

Paiva et al. Clinics 2012; 67: 509–513.

Analyzed 423 research articles published in Oct 2008 and analyzed the citations in Dec 2011

Higher citations	Lower citations
✓ Short titles	✗ Questions
✓ Described results	✗ Geographically restricted

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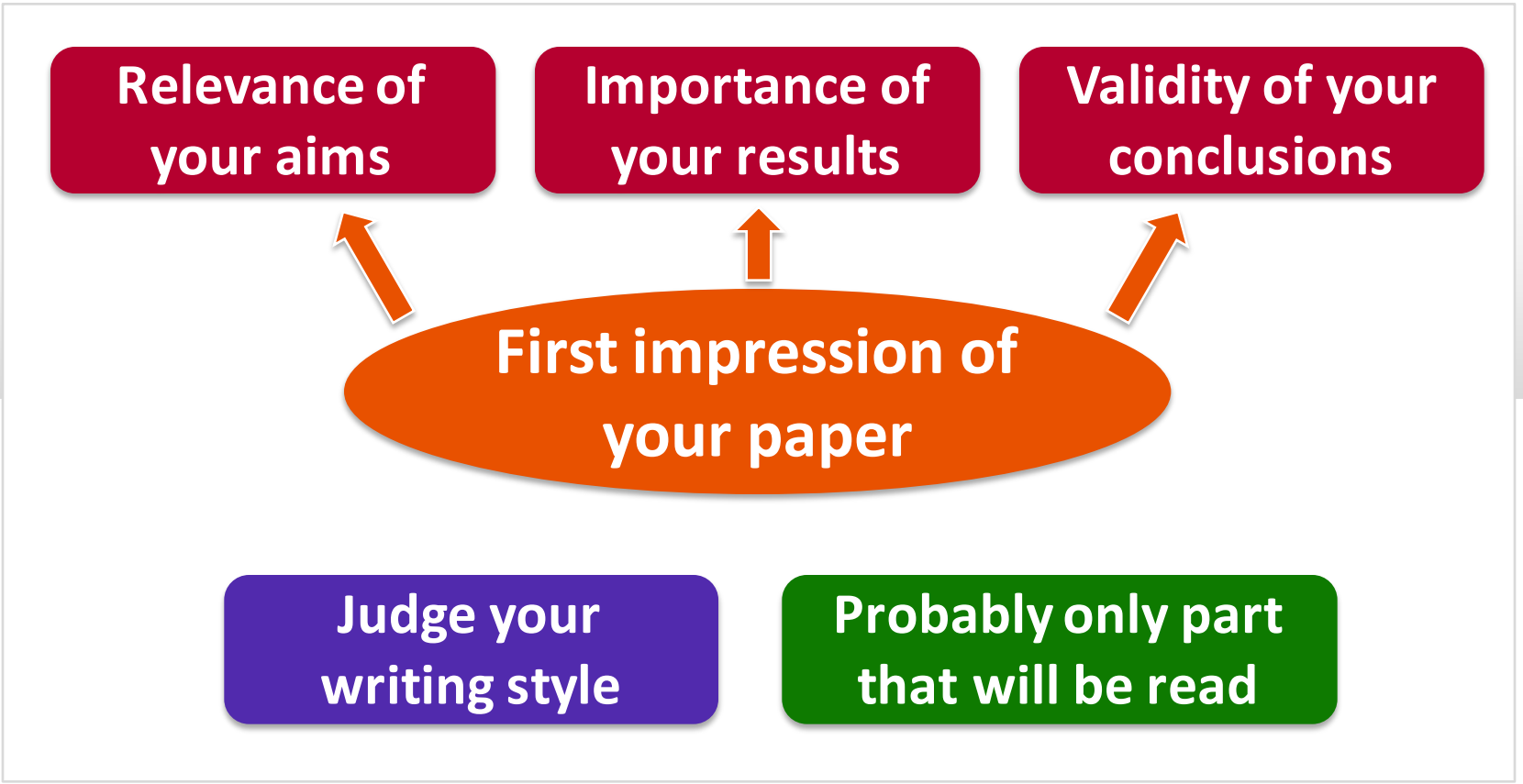
Titles and Abstracts

SEO

Search Engine Optimization

- Identify 7–8 keywords (include synonyms)
- Use 2 in your title, 5–6 in the keyword list
- Use 3 keywords 3–4 times in your abstract
- Use keywords in headings when appropriate
- Be consistent throughout your paper
- Cite your previous publications when relevant
  - *Google Scholar ranks results by citations*

Abstract


Relevance of your aims
Importance of your results
Validity of your conclusions
First impression of your paper
Judge your writing style
Probably only part that will be read

Titles and Abstracts

Sections of an abstract

Concise summary of your research

Background	→	**Why the study was done**
Aims	→	**Your hypothesis**
Methods	→	**Techniques**
Results	→	**Most important findings**
Conclusion	→	**Conclusion/implications**

Unstructured abstract

Our understanding of the mechanisms by which ducts and lobules develop is derived from model organisms and three-dimensional (3D) cell culture models wherein mammalian epithelial cells undergo morphogenesis to form multicellular spheres with a hollow central lumen. However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood. We performed multidimensional live-cell imaging analysis to track the morphogenetic process starting from a single cell to the development of a multicellular, spherical structure composed of polarized epithelial cells surrounding a hollow lumen. We report that in addition to actively maintaining apicobasal polarity, the structures underwent rotational motions at rates of 15–20 μm/h and the structures rotated 360° every 4 h during the early phase of morphogenesis. Rotational motion was independent of the cell cycle, but was blocked by loss of the epithelial polarity proteins Scribble or Pard3, or by inhibition of dynein-based microtubule motors. Interestingly, none of the structures derived from human cancer underwent rotational motion. We found a direct relationship between rotational motion and assembly of endogenous basement membrane matrix around the 3D structures, and that structures that failed to rotate were defective in weaving exogenous laminin matrix. Dissolution of basement membrane around mature, nonrotating acini restored rotational movement and the ability to assemble exogenous laminin. Thus, coordinated rotational movement is a unique mechanophysical process observed during normal 3D morphogenesis that regulates laminin matrix assembly and is lost in cancer-derived epithelial cells.

Wang et al. PNAS. 2013; 110: 163–168.

Titles and Abstracts

Unstructured abstract

Background

Our understanding of the mechanisms by which ducts and lobules develop is derived from model organisms and three-dimensional (3D) cell culture models wherein mammalian epithelial cells undergo morphogenesis to form multicellular spheres with a hollow central lumen. However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood.

Methods

We performed multidimensional live-cell imaging analysis to track the morphogenetic process starting from a single cell to the development of a multicellular, spherical structure composed of polarized epithelial cells surrounding a hollow lumen.

Results

We report that in addition to actively maintaining apicobasal polarity, the structures underwent rotational motions at rates of 15–20 μm/h and the structures rotated 360° every 4 h during the early phase of morphogenesis. Rotational motion was independent of the cell cycle, but was blocked by loss of the epithelial polarity proteins Scribble or Pard3, or by inhibition of dynein-based microtubule motors. Interestingly, none of the structures derived from human cancer underwent rotational motion. We found a direct relationship between rotational motion and assembly of endogenous basement membrane matrix around the 3D structures, and that structures that failed to rotate were defective in weaving exogenous laminin matrix. Dissolution of basement membrane around mature, nonrotating acini restored rotational movement and the ability to assemble exogenous laminin.

Conclusion

Thus, coordinated rotational movement is a unique mechanophysical process observed during normal 3D morphogenesis that regulates laminin matrix assembly and is lost in cancer-derived epithelial cells.

Wang et al. PNAS. 2013; 110: 163–168.

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Titles and Abstracts

Writing your abstract

Write the results section first

- ✓ **Key findings that directly support your aims**
- ✓ **Will be interesting to the readers**

We report that in addition to actively maintaining apicobasal polarity, the structures underwent rotational motions at rates of 15–20 μm/h and the structures rotated 360° every 4 h during the early phase of morphogenesis. Rotational motion was independent of the cell cycle, but was blocked by loss of the epithelial polarity proteins Scribble or Pard3, or by inhibition of dynein-based microtubule motors. Interestingly, none of the structures derived from human cancer underwent rotational motion. We found a direct relationship between rotational motion and assembly of endogenous basement membrane matrix around the 3D structures, and that structures that failed to rotate were defective in weaving exogenous laminin matrix. Dissolution of basement membrane around mature, nonrotating acini restored rotational movement and the ability to assemble exogenous laminin.

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Wang et al. PNAS. 2013; 110: 163–168.

Titles and Abstracts

Writing your abstract

Write the background section second

✓ **Explain *why* this study needed to be done**

Our understanding of the mechanisms by which ducts and lobules develop is derived from model organisms and three-dimensional (3D) cell culture models wherein mammalian epithelial cells undergo morphogenesis to form multicellular spheres with a hollow central lumen. However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood.

Problem

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Wang et al. PNAS. 2013; 110: 163–168.

Writing your abstract

Write the methods section third

✓ **General techniques used to obtain the *presented* results**

We performed multidimensional live-cell imaging analysis to track the morphogenetic process starting from a single cell to the development of a multicellular, spherical structure composed of polarized epithelial cells surrounding a hollow lumen.

Wang et al. PNAS. 2013; 110: 163–168.

Titles and Abstracts

Writing your abstract

Write the conclusion section last

- ✓ Major conclusion that answers the problem
- ✓ Implications for the readers

However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood.

Conclusion

Thus, coordinated rotational movement is a unique mechanophysical process observed during normal 3D morphogenesis that regulates laminin matrix assembly and is lost in cancer-derived epithelial cells.

Implications

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Wang et al. PNAS. 2013; 110: 163–168.

Titles and Abstracts

Writing your abstract

Our understanding of the mechanisms by which ducts and lobules develop is derived from model organisms and three-dimensional (3D) cell culture models wherein mammalian epithelial cells undergo morphogenesis to form multicellular spheres with a hollow central lumen. However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood. We performed multidimensional live-cell imaging analysis to track the morphogenetic process starting from a single cell to the development of a multicellular, spherical structure composed of polarized epithelial cells surrounding a hollow lumen. We report that in addition to actively maintaining apicobasal polarity, the structures underwent rotational motions at rates of 15–20 μm/h and the structures rotated 360° every 4 h during the early phase of morphogenesis. Rotational motion was independent of the cell cycle, but was blocked by loss of the epithelial polarity proteins Scribble or Pard3, or by inhibition of dynein-based microtubule motors. Interestingly, none of the structures derived from human cancer underwent rotational motion. We found a direct relationship between rotational motion and assembly of endogenous basement membrane matrix around the 3D structures, and that structures that failed to rotate were defective in weaving exogenous laminin matrix. Dissolution of basement membrane around mature, nonrotating acini restored rotational movement and the ability to assemble exogenous laminin. Thus, coordinated rotational movement is a unique mechanophysical process observed during normal 3D morphogenesis that regulates laminin matrix assembly and is lost in cancer-derived epithelial cells.

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Wang et al. PNAS. 2013; 110: 163–168.

Titles and Abstracts

Writing your abstract

Our understanding of the mechanisms by which ducts and lobules develop is derived from model organisms and three-dimensional (3D) ce[Why needed to be done]cells undergo morphogenesis to form multicellular spheres with a hollow central lumen. However, the mechanophysical properties associated with epithelial morphogenesis are poorly understood. We performed multidimensional live-cell imaging analysis to track the morphogenetic process starting from a single cell to the development of a multicellular, spherical structure com[What you did]ls surrounding a hollow lumen. We report that in addition to actively maintaining apicobasal polarity, the structures underwent rotational motions at rates of 15–20 μm/h and the structures rotated 360° every 4 h during the early phase of morphogenesis. Rotational motion was independent of the cell cycle, but was blocked by loss of the epithelial polarity proteins Scribble or Pard3, or by inhibition of dynein-based microtubule motors. Interestingly, none of the structures d[What you found]went rotational motion. We found a direct relationship between rotational motion and assembly of endogenous basement membrane matrix around the 3D structures, and that structures that failed to rotate were defective in weaving exogenous laminin matrix. Dissolution of basement membrane around mature, nonrotating acini restored rotational movement and the ability to assemble exogenous laminin. Thus, coordinated rotational movement is a unique mechanophysical process observed during normal 3D morphogenesis that regulates laminin matrix assembly and is lost in cancer-[How advances the field]

Wang et al. PNAS. 2013; 110: 163–168.

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Titles and Abstracts

Don't include…

- References
- Abbreviations
- Jargon
- Non-essential numbers & statistics

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Titles and Abstracts

Do not include a lot of numbers and statistics

The effect of high vacuum on the mechanical properties and bioactivity of collagen fibril matrices

Results

The cell area histogram and mean cell areas for the HV-treated fibril matrices (2030 $\mu m^2 \pm 137\ \mu m^2$) are comparable to the cell areas of untreated fibril matrices measured here (2165 $\mu m^2 \pm 206\ \mu m^2$) and elsewhere... Cells on LV-treated fibril matrices have larger average surface areas (3450 $\mu m^2 \pm 175\ \mu m^2$) than the control untreated matrices, and their spread areas are more similar to that of cells plated on dehydrated fibrils (average cell area of 4348 $\mu m^2 \pm 287\ \mu m^2$).

The modulus results ...tically significant ($p <$ 0.0001), increase in ...Pa ± 2.2 kPa and HV-treated matrices had ...tely a factor of three more compliant than ...ond analysis (Table 2) indicate that LV-treat... dehydrated matrices (36.4 kPa ± 4.2 kPa), ...n this experiment.

Summarize and simplify your results

Abstract

We find that HV exposure has an unappreciable affect on the cell spreading response and mechanical properties of these collagen fibril matrices. Conversely, low vacuum environments cause fibrils to become mechanically rigid as indicated by force microscopy, resulting in greater cell spreading.

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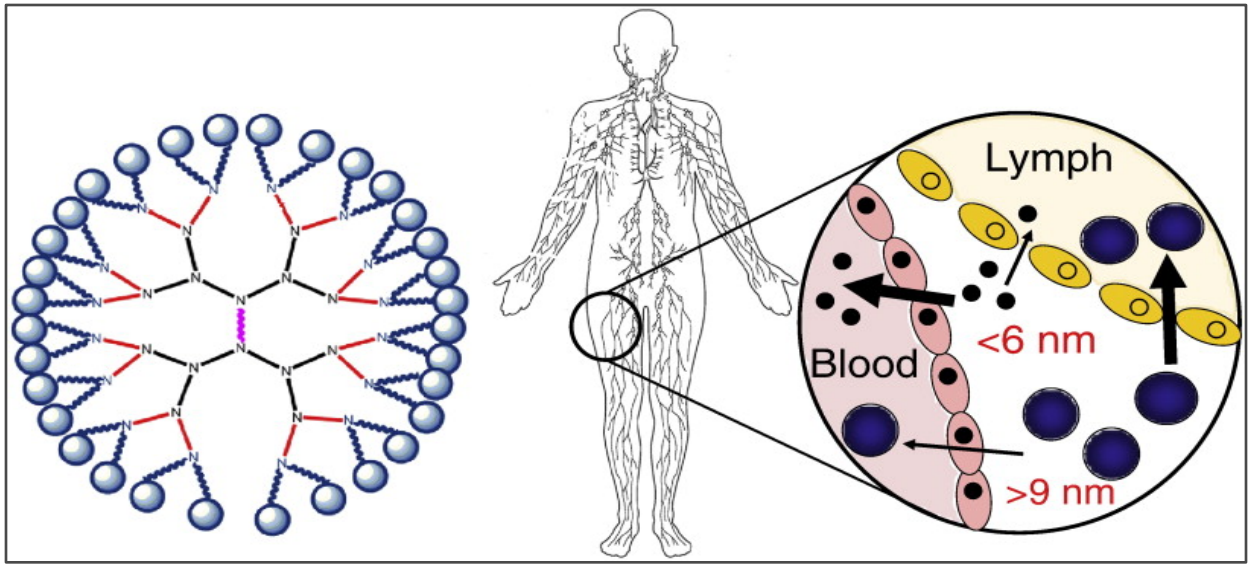
Anderton et al. Biointerfaces. 2013; 8: 2.

Graphical abstracts

http://www.elsevier.com/journal-authors/graphical-abstract

- ✓ Visually demonstrate key features of the study
- ✓ Help readers quickly identify suitable articles

Targeting the lymphatics using dendritic polymers



Kaminskas and Porter. Adv Drug Delivery Rev. 2011; 63: 890–900.

- ☑ *Appropriate journal*
- ☑ *Logically organized manuscript*
- ☑ *Clear English*

Ready to submit!

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Journal editors are busy!

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Section 8

Cover letters

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Cover letters

Significance
Relevance

→ **Why your work is important!**

Cover letter:
First impression for journal editors

Interesting to their readers?

Level of English

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Cover letters

Building your cover letter

Journal editor's name

Marc Lippman, MD
Editor-in-Chief
Breast Cancer Research and Treatment

- **Did you read the aims and scope?**
- **Did you read the author guidelines?**

3 September 2013

Dear Dr Lippman,

Manuscript title

Please find enclosed our manuscript entitled "Evaluation of the Glasgow prognostic score in patients undergoing curative resection for breast cancer liver metastases," which we would like to submit for publication as a Original Article in *Breast Cancer Research and Treatment*.

Article type

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Cover letters

Building your cover letter

Second paragraph:

- ✓ ***Current*** state of the field
- ✓ ***Problem*** researchers are facing

The Glasgow prognostic score (GPS) is of value for a variety of tumours. Several studies have inve **Introduction** value of the GPS in patients with metastatic breast cancer, but few studies have performed such an investigation for patients undergoing liver resection for liver metastases. Furthermore, **Problem** no studies that have examined the prognostic value of the modified GPS (mGPS) in these patients. The present study evaluated the mGPS in terms of its prognostic value for postoperative de **Objectives** oing liver resection for breast cancer liver metastases.

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Cover letters

Building your cover letter

Third paragraph:

- ✓ ***Briefly*** describe your methodology
- ✓ ***Summarize*** your key findings

A total of 318 patients with breast cancer liver metastases who underwent hepatectomy over a 15-year period were included in this study. The mGPS was calculated based on protein and albumin, and the disease-free survival and cancer-specific survival rates were evaluated in relation to the mGPS. Overall, the results showed a significant association between cancer-specific survival and the mGPS and carcinoembryonic antig PS was associated with increased aggressiveness of liver recurrence and poorer survival in these patients.

Methods

Key results

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Cover letters

Building your cover letter

Fourth paragraph:

✓ Why ***interesting*** to the journal's readership

This study is the first to demonstrate that the preoperative mGPS, a simple clinical tool, is a us **Conclusion** postoperative survival in breast cancer patients undergoing curative resection for liver metastases. This information is immediately clinically applicable for surgeons and medical oncologists treating such patients. As a premier journal covering breast ca **Relevance** eve that *Breast Cancer Research and Treatment* is the perfect platform from which to share our results with all those concerned with breast cancer.

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Building your cover letter

Fourth paragraph:

✓ Why ***interesting*** to the journal's readership

This study is the first to demonstrate that the preoperative mGPS, a simple clinical tool, is a useful prognostic factor for postoperative survival in breast cancer patients undergoing curative resection for liver metastases. This information is immediately clinically applicable for surgeons and medical oncologists treating such patients. As a premier journal covering breast cancer treatment, we believe that *Breast Cancer Research and Treatment* is the perfect platform from which to share our results with all those concerned with breast cancer.

Target your journal – keywords from the aims and scope

Cover letters

Building your cover letter

Last paragraph:

- ✓ Disclaimers related to ***publication ethics***
- ✓ Source of ***funding***
- ✓ ***Conflicts of interest***

We confirm that this manuscript has not been published elsewhere and is not under consideration [illegible] authors have approved the manuscript and agree with submission to the *Breast Cancer Research and Treatment*. This study was funded by the Japanese Ministry of Health, Labour and Welfare. The authors have no conflicts of interest to declare.

Ethics

Funding

Conflicts of interest

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Cover letters

Building your cover letter

Other important information:

- ✓ Recommended reviewers
- ✓ Author's contact information

We would like to recommend the following reviewers to evaluate our manuscript:

Reviewers

1. Reviewer 1 and contact information
2. Reviewer 2 and contact information
3. Reviewer 3 and contact information
4. Reviewer 4 and contact information

Please address all correspondence to:

Contact information

edanz

Cover letters

A good cover letter

Manuscript information

Marc Lippman, MD
Editor-in-Chief
Breast Cancer Research and Treatment

3 September 2013

Dear Dr Lippman,

Background

Please find enclosed our manuscript entitled "Evaluation of the Glasgow prognostic score in patients undergoing curative resection for breast cancer liver metastases," which we would like to submit for publication as an Original Article in *Breast Cancer Research and Treatment*. .

Key findings

The Glasgow prognostic score (GPS) is of value for a variety of tumours [illegible] metastatic breast cancer, but few studies have performed such an investigation for patients undergoing liver resection for liver metastases [illegible] of the modified GPS (mGPS) in these patients. The present study evaluated the mGPS in terms of its prognostic value for postoperative death in patients undergoing liver resection for breast cancer liver metastases.

Relevance

A total of 318 patients with breast cancer liver metastases who underwen [illegible] ted based on the levels of C-reactive protein and albumin, and the disease-free survival and cancer-specific survival rates were evaluated in [illegible] and multivariate analyses. Overall, the results showed a significant association between cancer-specific survival and the mGPS and carcinoembryonic antigen level. Furthermore, we demonstrated that a higher mGPS was associated with increased aggressiveness of liver recurrence and poorer survival in these patients.

Disclaimers

This study is the first to demonstrate that the preoperative mGPS, a sim [illegible] r patients undergoing curative resection for liver metastases. This information is immediately clinically applicable for surgeons and medical oncologists treating such patients. As a premier journal covering breast cancer treatment, we believe that *Breast Cancer Research and Treatment* is the perfect platform from which to share our results with all those concerned with breast cancer.

We confirm that this manuscript has not been published elsewhere an [illegible] script and agree with submission to *Breast Cancer Research and Treatment*. This study was funded by the Japanese Ministry of Health, La

Recommended reviewers

We would like to recommend the following reviewers to evaluate our manuscript:

Reviewer 1 and contact information
Reviewer 2 and contact information
Reviewer 3 and contact information
Reviewer 4 and contact information

Please address all correspondence to:

We look forward to hearing from you at your earliest convenience.

Yours sincerely,

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Cover letters

Additional points

Highlight recent issues in the media

"Given the considerable attention climate change has received worldwide, it will be important to…"

Highlight recent policy changes

"Recently, the Mexican government has implemented new incentives to promote entrepreneurship …"

Highlight recently published articles in their journal

"It has recently been shown that PMS2 mutations cause Lynch Syndrome (ten Broeke et al. J Clin Oncol. 2015;33:319). However, it still remains unclear…"

Highlight current controversies

"Currently, there is disagreement on the effect of substrate rigidity on stem cell differentiation. Our study aims to address this controversy with a novel…"

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Specific cover letter styles

nature

5. Cover Letter

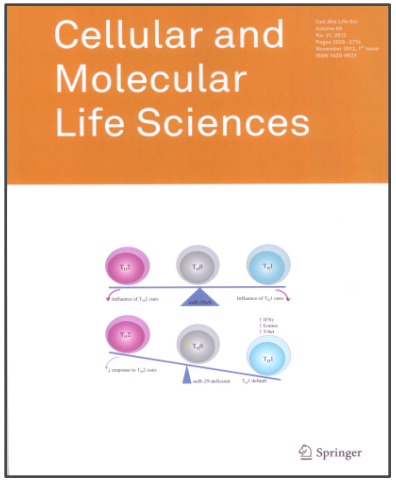
Submissions should be accompanied by a brief covering letter from the corresponding author including full postal address, telephone number and e-mail address. This letter should contain two (100-word or shorter) summaries a concise paragraph to the editor indicating the scientific grounds why the paper should be considered for a topical, interdisciplinary journal rather than for a single-discipline or archival journal; and a separate, 100-word summary of the paper's appeal to a popular (non-scientific) audience.

The cover letter should state clearly what is included as the submission, including number of words in the text and number of display items (figures, tables, boxes) in the print version of the paper; number of additional words in the text (full Methods and Extended Data legends) and number of Extended Data figures and tables for the online-only version; any Supplementary Information (specifying number of items and format); number of supporting manuscripts.

http://www.nature.com/nature/authors/submissions/subs/#a6

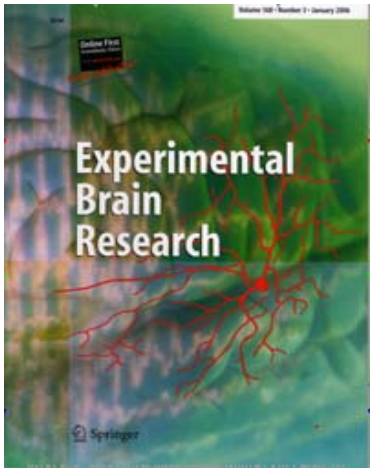
Cover letters

Recommending reviewers



"Authors are requested to provide the names and full addresses (including e-mail address) of up to four potential referees…"

"When submitting your paper, you must provide the names, affiliations, and valid e-mail addresses of five (5) reviewers. If you do not do so, your paper will be returned, unreviewed."



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Cover letters

Recommending reviewers – PNAS

Editorial Policies

Submission Guidelines

Direct Submission.

The standard mode of transmitting manuscripts is Direct Submission. Authors must recommend three appropriate Editorial Board members, three NAS members who are expert in the paper's scientific area, and five qualified reviewers. The Board may choose someone who is or is not on that list or may reject the paper without further review. Authors are encouraged to indicate why their suggested editors are qualified to handle the paper. A directory of PNAS member editors and their research interests is available at pnas.nas.edu/pnas_search. The editor

http://www.pnas.org/site/authors/editorialpolicies.xhtml

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Cover letters

Recommending reviewers

Where to find them? → From your reading/references, networking at conferences

How senior? → Aim for mid-level researchers

Who to avoid? → Collaborators (past 5 years), researchers from INSP

International list:

1 or 2 from Asia, 1 or 2 from Europe, and 1 or 2 from North America

Have they published in your target journal?

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Cover letters

Why recommend reviewers?

Reviewers recommended by authors are usually more favorable

1. Scharschimidt et al. *J Clin Invest*. 1994; 93: 1877–1880.
2. Earnshaw & Farndon. *Ann R Coll Surg Engl*. 2000; 82: 133–135.
3. Grimm. *Science* 2005; 309: 1974.
4. Wager et al. *BMC Med*. 2006; 4: 13.
5. Schroter et al. JAMA 2006; 295: 314–317.
6. Rivara et al. *J Pediatr*. 2007; 151: 202–205.
7. Bornmann & Daniel. *Res Eval*. 2009; 18: 262–272.
8. Bornmann & Daniel. *PLoS One* 2010; 5: e13345.

Cover letters

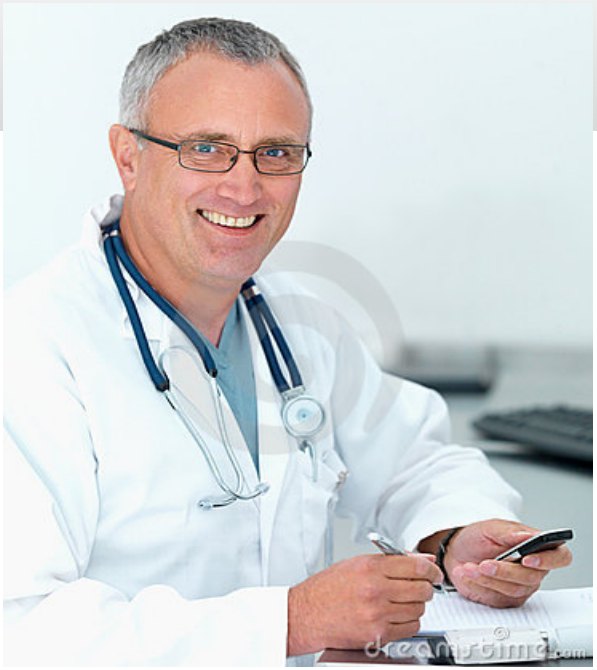
Why recommend reviewers?

Reviewers recommended by authors are usually more favorable

	Accept		Reject	
	Author	Editor	Author	Editor
JAMA (*n*=329)	56.9%	46.0%	12.9%	23.6%
BMC Med (*n*=200)	47.0%	35.0%	10.0%	23.0%
J Pediatr (*n*=280)	63.6%	42.9%	14.3%	25.0%

Section 9

Peer review & revisions



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Peer review

What reviewers are looking for

The science

- ✓ Relevant hypothesis
- ✓ Good experimental design
- ✓ Appropriate methodology
- ✓ Good data analysis
- ✓ Valid conclusions

The manuscript

- ✓ Logical flow of information
- ✓ Manuscript structure and formatting
- ✓ Appropriate references
- ✓ High readability

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Peer review

Unclear decision letter

30 August 2014

Dear Dr. McGowan,

Manuscript ID NRL-11-7839: “Gene regulatory networks in living cells”

Decision

Your manuscript has been reviewed, and we regret to inform you that based on our Expert reviewers’ comments, it is not possible to further consider your manuscript in its current form for publication in *Neurogenetics*.

Reason

Although the reviews are not entirely negative, it is evident from the extensive comments and concerns that the manuscript, in its current form, does not meet the criteria expected of papers in *Neurogenetics*. The results appear to be too preliminary and incomplete for publication at the present time.

Comments

The reviewer comments are included at the bottom of this letter. I hope the information provided by the reviewers will be helpful in future. Thank you for your interest in the journal and I regret that the outcome has not been favorable at this time.

Peer review

Editor *may* be interested in your work

- ✓ **The Reviewer comments are not entirely negative.**
- ✓ **It is not possible to consider your manuscript in its current form.**
- ✓ **I hope the information provided will be helpful when you revise your manuscript.**
- ✓ **I regret that the outcome has not been favorable at this time.**

Peer review

Editor is *not* interested in your work

- X We cannot publish your manuscript
- X Your study does not contain novel results that merit publication in our journal.
- X We appreciate your interest in our journal. However, we will not further consider your manuscript for publication.
- X We wish you luck in publishing your results elsewhere.

Peer review

Why send an unclear decision letter?

Publication time

Statistics about publishing with BMJ

We endeavour to process your papers as quickly as possible and have some of the best lead times for peer review and publication. We support you by publishing your research quickly, efficiently and painlessly.

Long revisions = long publication times

Editors hope you fully revise and then resubmit as a new submission

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Peer review

Clear decision letter

10 November 2015

Manuscript ID number

Dear Dr. Robens,

Manuscript ID 10.1007/s10850-556: "Prediction of nonlinear seismic responses of asymmetric structures under stress"

Decision

Your manuscript has been reviewed, and we believe that after revision your manuscript may become suitable for publication in *Journal of Seismology*. The reviewer concerns are included at the bottom of this letter.

You can submit a revised manuscript that takes into consideration these comments. You will also need to include a detailed commentary of the changes made. Please note that resubmitting your manuscript does not guarantee eventual acceptance, and that your resubmission may be subject to re-review by the reviewers before a decision is made.

To revise your manuscript, log into https://www.editorialmanager.com/JSeis/ and enter your Author Center, where you will find your manuscript title listed under "Manuscripts with Decisions." Under "Actions," click on "Create a Revision." Your manuscript number has been appended to denote a revision.

How to re-submit

...

Peer review

Clear decision letter

…You will be unable to make your revisions on the originally submitted version of the manuscript. Instead, revise your manuscript using a word processing program and save it on your computer. Please also highlight the changes to your manuscript within the document by using bold or colored text. Once the revised manuscript is prepared, you can upload it and submit it through your Author Center.

How to respond

When submitting your revised manuscript, you will be able to respond to the comments made by the reviewer(s) in the space provided. You can use this space to document any changes you make to the original manuscript. In order to expedite the processing of the revised manuscript, please be as specific as possible in your response to the reviewer(s).

IMPORTANT: Your original files are available to you when you upload your revised manuscript. Please delete any redundant files before completing the submission.

Due date for resubmission

Because we are trying to facilitate timely publication of manuscripts submitted to *BBE*, your revised manuscript should be uploaded by 10 December. If it is not possible for you to submit your revision in a reasonable amount of time, we may have to consider your paper as a new submission.

Once again, thank you for submitting your manuscript to *Journal of Seismology* and I look forward to receiving your revised manuscript.

Peer review

Resubmission

Should you resubmit to the same journal?

Can I answer all the reviewer comments and fully revise my manuscript before the deadline?

Yes

Resubmit to the same journal

- Fully revise manuscript
- Point-by-point responses

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Peer review

Resubmission

Should you resubmit to the same journal?

Can I answer all the reviewer comments and fully revise my manuscript before the deadline?

No

Submit to a <u>different</u> journal

- Revise manuscript as much as possible
- Reformat manuscript

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Peer review

Organize the reviewers' comments

Group similar comments together

Experimental | **References** | **Writing**

Reviewer 1: "Re-analyze the data in Figure 3 using a Mann–Whitney U test."

Reviewer 3: "Repeat the experiments in Figure 3 with additional controls."

Note: the comments of one reviewer may affect the comments of another

- Mann–Whitney U test: 2 groups
- Kruskal–Wallis test: >2 groups

Peer review

Writing response letters

Read by the journal editor, not the reviewers

Respond to *every* reviewer comment

***Easy* to see changes**

- Refer to line and page numbers
- Use a different color font
- Highlight the text
- ~~Strikethrough font for deletions~~

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Peer review

Writing response letters

Marc Lippman, MD
Editor-in-Chief
Breast Cancer Research and Treatment

Address editor personally

3 September 2013

Dear Dr Lippman,

Manuscript ID number

Re: Resubmission of manuscript reference No. WJS-07-5739

Thank reviewers

Please find attached a revised version of our manuscript originally entitled "Evaluation of the Glasgow prognostic score in patients undergoing curative resection for breast cancer liver metastases," which we would like to resubmit for consideration for publication in the *Breast Cancer Research and Treatment.*

The reviewer's comments were highly insightful and enabled us to greatly improve the quality of our manuscript. In the following pages are our point-by-point responses to each of the comments.

Revisions in the manuscript are shown as underlined text. In accordance with the first comment, the title has been revised and the entire manuscript has undergone substantial English editing.

We hope that the revisions in the manuscript and our accompanying responses will be sufficient to make our manuscript suitable for publication in the *Breast Cancer Research and Treatment*.

Highlight major changes

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Peer review

Agreeing with reviewers

Reviewer Comment: *In your analysis of the data you have chosen to use a somewhat obscure fitting function (regression). In my opinion, a simple Gaussian function would have sufficed. Moreover, the results would be more instructive and easier to compare to previous results.*

Response: We agree with the reviewer's assessment of the analysis.

Agreement

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Agreeing with reviewers

Reviewer Comment: *In your analysis of the data you have chosen to use a somewhat obscure fitting function (regression). In my opinion, a simple Gaussian function would have sufficed. Moreover, the results would be more instructive and easier to compare to pr*

Agreement

Response: We agree with the reviewer's assessment of the analysis. Our tailored function, in its current form, makes it difficult to tell that this measurement constitutes a significant improvement over previously reported values. We describe our new analysis using a Gaussian fitting function in our revised Results section (Page 6, Lines 12–18).

Why you agree **Location** **Revisions**

Peer review

Disagreeing with reviewers

Reviewer Comment: *In your analysis of the data you have chosen to use a somewhat obscure fitting function (regression). In my opinion, a simple Gaussian function would have sufficed. Moreover, the results would be more instructive and easier to compare to previous results.*

Response: It is clear that this reviewer is not familiar with the current analytical methods in the field. I recommend that you identify a more suitable reviewer for my manuscript.

Peer review

Disagreeing with reviewers

Reviewer Comment: *In your analysis of the data you have chosen to use a somewhat obscure fitting function (regression). In my opinion, a simple Gaussian function would have sufficed. Moreover, the results would be more instructive and easier to compare to previous results.*

Response: Although a simple Gaussian fit would facilitate comparison with the results of other studies, our tailored function allows for the analysis of the data in terms of the Smith model [Smith et al., 1998]. We have now explained the use of this function and the Smith model in our revised Discussion section (Page 12, Lines 2–6).

Location **Revisions** **Evidence**

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Peer review

"Hidden" questions

***Reviewer comment**: The authors looked for polymorphisms in the promoter region of the gene; however, they didn't evaluate the untranslated regions. That is one of my concerns about this methodology.*

Is this a question?

If you are unsure about a reviewer's comment, ask a colleague

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Peer review

"Hidden" questions

***Reviewer comment**: The authors looked for polymorphisms in the promoter region of the gene; however, they didn't evaluate the untranslated regions. That is one of my concerns about this methodology.*

***Rephrased question**: Why didn't the authors evaluate polymorphisms in the untranslated regions of the gene?*

Peer review

“Hidden” questions

Reviewer comment: *The authors looked for polymorphisms in the promoter region of the gene; however, they didn't evaluate the untranslated regions. That is one of my concerns about this methodology.*

Evidence **Revisions**

Response: In this study, we decided to focus on the promoter region of this gene because previous studies [Yajima et al., 2010; Jackson et al., 2011] have shown that its transcription was particularly affected. This has now been clarified in the Discussion section of our manuscript (Page 16, Line 24–28).

Location

Peer review

"Unfair" reviewer comments

***Reviewer comment**: Currently, the authors' conclusion that this gene is involved in heart development is not completely validated by their in vitro analyses. They should do additional in vivo experiments using a genetic mouse model to show that heart development is regulated by this gene.*

Reasons why reviewers might make these comments

- **Current results are not appropriate for the scope or impact factor of the journal**
- **Reviewer is being "unfair"**

"Unfair" reviewer comments

What you should do

First, contact the journal editor if you feel reviewer is being unfair

- **Do the experiments, revise, and resubmit**
- **Withdraw submission and resubmit current manuscript to a journal with a different scope or lower impact factor**

Peer review

If rejected, what should you do?

Option 1: New submission to the *same* journal

- Fully revise manuscript
- Prepare point-by-point responses
- Include the original manuscript ID number

Option 2: New submission to a *different* journal

- Revise manuscript
- Reformat according to the author guidelines

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Peer review

Can you appeal a rejection?

差出人: journals <journals@faseb.org>
件名: FW: REMINDER-FW: FASEB Journal - Manuscript Decision
日時: 2014年8月22日 0:45:57 JST

Dear Dr. Kido,

The FASEB Journal • Research Communication

The thermosensitive TRPV3 channel contributes to rapid wound healing in oral epithelia

Reona Aijima,*,†,‡ Bing Wang,* Tomoka Takao,* Hiroshi Mihara,§ Makiko Kashio,§ Yasuyoshi Ohsaki,* Jing-Qi Zhang,* Atsuko Mizuno,¶ Makoto Suzuki,¶ Yoshio Yamashita,† Sadahiko Masuko,‡ Masaaki Goto,† Makoto Tominaga,§ and Mizuho A. Kido*,1

Please revise the manuscript according to the attached sub-edited PDF--in which I have indicated text and figures to be deleted as well as text that should be revised to account for the absence of the immunofluorescence data. The journal will invite you to resubmit a revision and I will do my best to get you a decision quickly thereafter.

[redacted]

Associate Editor

The FASEB Journal

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Next steps

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Promote your work

Present your work at conferences

Allows you to discuss your work personally with your peers

Get feedback about your work and future directions

Networking and collaborations

Next steps

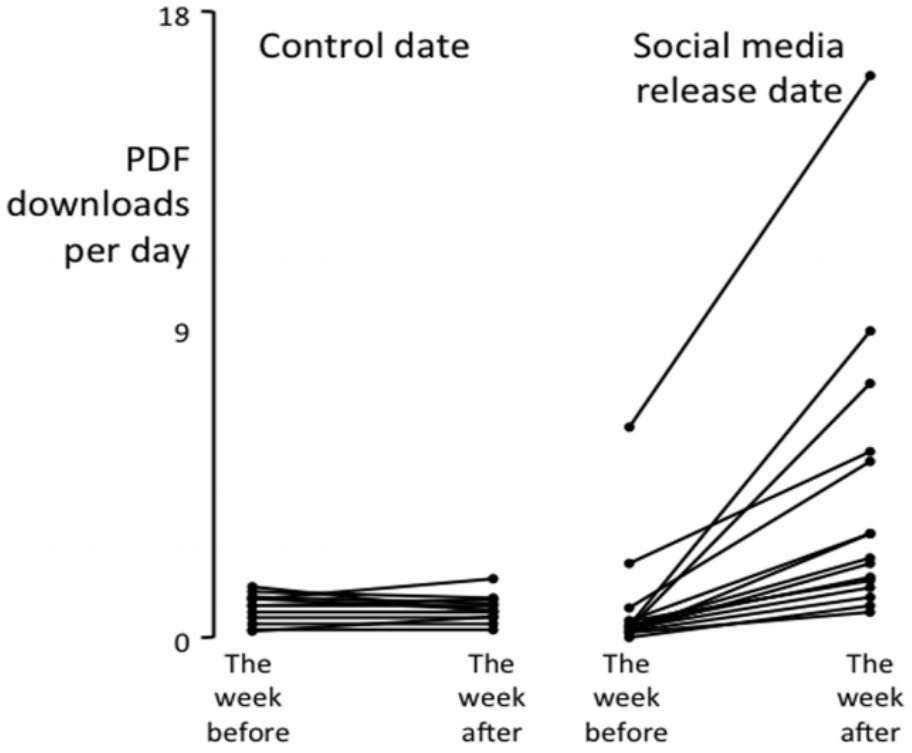
Promote your work

Promote your work on social networks

- **16 *PLOS ONE* articles were promoted on social networks on one randomly chosen date**
- **16 *PLOS ONE* articles were not**

	Views*	Downloads*
Promoted	18±18	4±4
Not promoted	6±3	1±1

*per day



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Allen et al. PLoS ONE 2013; 8: e68914.

Next steps

Altmetrics

Estimating the returns to UK publicly funded cancer-related research in terms of the net value of improved health outcomes.

News | Blogs | Twitter | Reddit | Score | Demographics | Help

Score in context

Article is amongst the highest ever scored in this journal (ranked #14 of 789)

show more...

Mentioned by

- **8** news outlets
- **5** blogs
- **80** tweeters
- **2** Redditors

Readers on

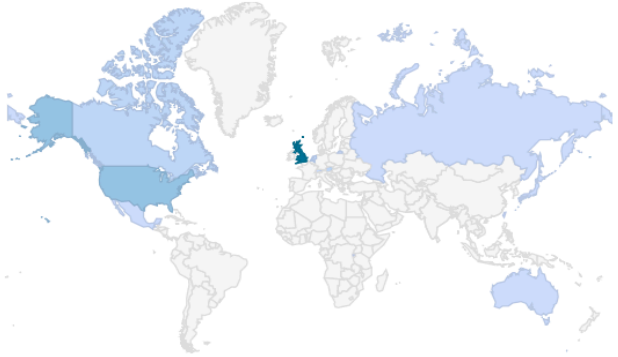
- **8** Mendeley
- **0** CiteULike

Track this article

- Get email updates when this article is shared

Geographical breakdown

The data shown in this map were compiled from user activity on Twitter.



#	Country	As %
1	GB	41%
2	US	11%
3	AT	3%
3	CA	3%
5	NL	2%
6	CH	1%
6	JP	1%
6	AU	1%
6	RU	1%
–	Other	32%

Tweeter demographics

Type	Count	As %
Members of the public	51	63%
Scientists	11	13%
Practitioners (doctors, other healthcare professionals)	12	15%
Science communicators (journalists, bloggers, editors)	6	7%

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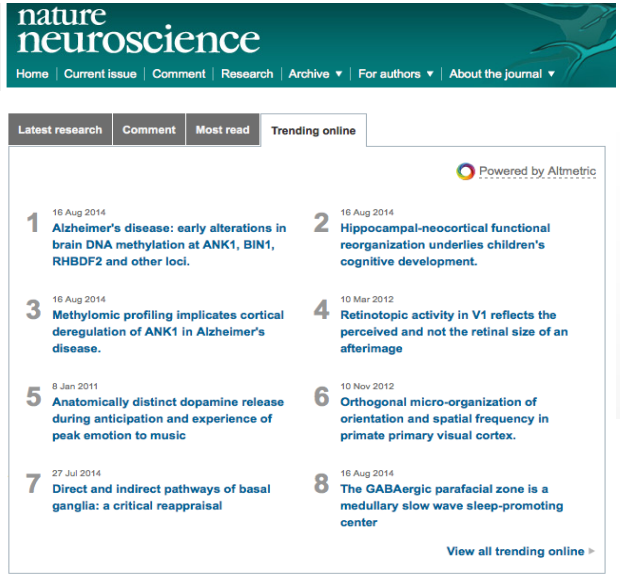
Next steps

Altmetrics



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Next steps

Promote your work

Respond to post-publication comments

RESEARCH

Severe bereavement stress during the prenatal and childhood periods and risk of psychosis in later life: population based cohort study

BMJ 2014; 348 doi: http://dx.doi.org/10.1136/bmj.f7679 (Published 21 January 2014)
Cite this as: *BMJ* 2014;348:f7679

Psychotic disorders (incl schizophrenia) Child and adolescent psychiatry

More topics

Article | Related content | **Read responses (5)** | Article metrics

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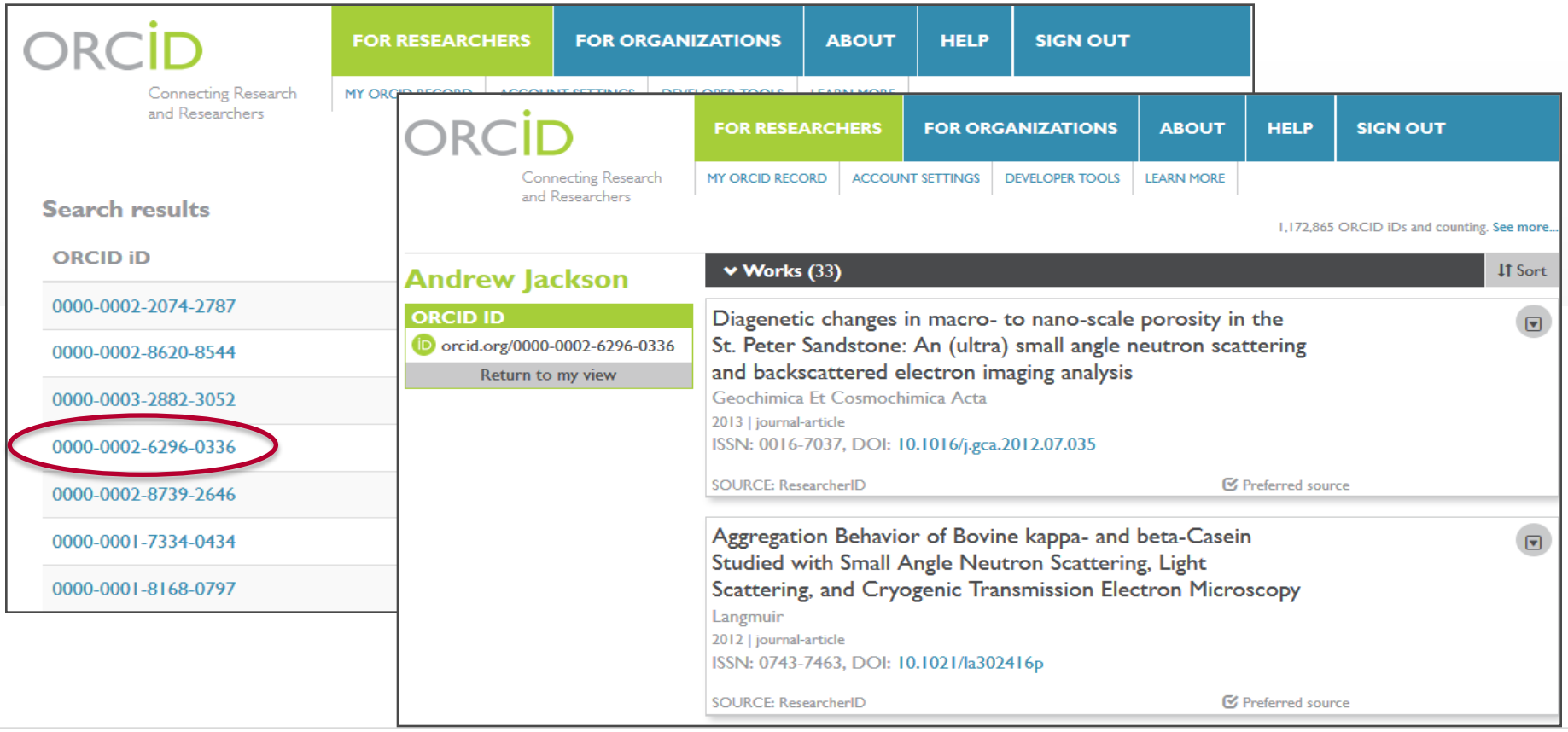
Next steps

Identify yourself

ORCID



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Next steps

Identify yourself

ORCID

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Next steps

ORCID

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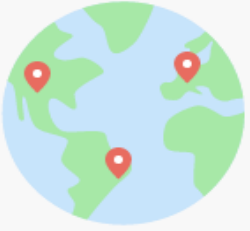
Next steps

Follow your work on ResearchGate

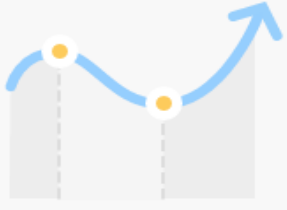
Access and discuss publications

Read publications for free and join open discussions with the authors and other experts.



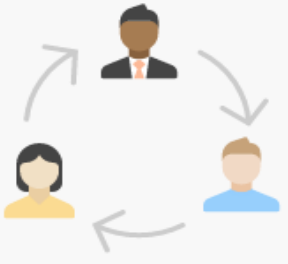
Create exposure for your work

Share your work from any stage of the research cycle to gain visibility and citations.



Get stats on your research

See in-depth stats on who's been reading your work and keep track of your citations.



Connect with your colleagues

Connect and collaborate with researchers from around the world in all scientific disciplines.

Any questions?

Thank you!

Daniel McGowan: dmcgowan@edanzgroup.com

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