

제목 및 초록 다듬기



건국대학교병원 소화기내과 이 선 영

제목과 초록이 중요한 이유



- **논문 전체를 읽을지 여부를 결정하게 하는 요약본**
- 원저 - 네 단락으로 구성
 1. BACKGROUND/AIMS
 2. METHODS
 3. RESULTS
 4. **CONCLUSIONS**
- 종설, 증례 - **한 문단으로 구성**

좋은 제목



- 중요한 정보를 제공

1. **흥미 유발**: 예) 연구 유형이나 환자군에 대해서 언급
2. **가설 응용** (질문형)

Can endoscopic resection be applied for early stage ampulla of Vater cancer? (CME)

3. **결론 언급** (답변형)

Microsatellite Alterations at Selected Tetranucleotide Repeats Are Associated With Morphologies of Colorectal Neoplasias

1. 연구 유형을 언급한 예



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Dig Liver Dis. 2011 Jan;43(1):23-7. doi: 10.1016/j.dld.2010.04.006. Epub 2010 May 21.

The origin of non-H. pylori-related positive Giemsa staining in human gastric biopsy specimens: A prospective study.

Seo TH, Lee SY, Uchida T, Fujioka T, Jin CJ, Hwang TS, Han HS.
Department of Internal Medicine, Konkuk University School of Medicine, Seoul, South Korea.

Study design

Abstract
BACKGROUND: Upper gastrointestinal endoscopically biopsied specimens are usually sent for the diagnosis of Helicobacter pylori infection. The study aimed to determine the relationship between the origin of positive Giemsa staining and the grade of gastritis based on the updated Sydney system.
METHODS: Gastric biopsy specimens taken at the lesser curvature and greater curvature sides of the corpus and greater curvature side of the antrum were stained with H&E, Giemsa, anti-East Asian-specific antibody and anti-H. pylori antibody stains. Pyrosequencing analysis was performed in cases that showed discrepancy between the Giemsa and anti-H. pylori antibody staining.
RESULTS: Seventy-two out of 150 cases (48%) stained positive for anti-H. pylori antibody, of which 68 (94.4%) stained positive for anti-East Asian-specific antibody stain. Twelve of the 20 cases with discrepant results for Giemsa and anti-H. pylori antibody stains exhibited Campylobacter hyointestinalis infection. The grades of neutrophil activity ($p < 0.001$) and chronic inflammation ($p < 0.001$) were lower for Campylobacter infection than for East Asian CagA H. pylori-related infection.
CONCLUSION: C. hyointestinalis is the most common cause of non-H. pylori-related Giemsa positive infection, and is associated with lower grades of neutrophil activity and chronic inflammation than East Asian CagA H. pylori-related infection.

2. 질문형



J Gastroenterol Hepatol. 2010 Feb;25(2):270-6. doi: 10.1111/j.1440-1746.2009.06029.x. Epub 2009 Nov 24.

Does a small biopsied gastric specimen limit the usage of two directional transnasal esophagogastroduodenoscopy?

Question

Rhee KH, Han HS, Lee SY, Seo TH, Ko SY, Kim BK, Sung IK, Jin CJ, Min YI.

Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

BACKGROUND AND AIMS: It is difficult to approach certain gastric regions due to the limited bending ability of transnasal esophagogastroduodenoscopy (TN-EGD). We analyzed the TN-EGD biopsied specimens according to where they were obtained inside the stomach.

METHODS: Two hundred and eighty-nine gastric biopsy specimens were obtained during diagnostic TN-EGD. The gastric biopsied specimens were quantified according to their diameter and depth in micrometers, and depth in layers (superficial mucosa, deep mucosa, muscularis mucosa and submucosa). The quality was measured by the degrees of anatomical orientation (good, intermediate and poor), presence of crush artifact (none to minimal, mild and moderate) and overall diagnostic adequacy (adequate, suboptimal and inadequate).

RESULTS: Poor orientation, presence of crush and overall diagnostic inadequacy were present in 33 (11.4%), 26 (9.0%) and 37 (12.8%) of the 289 specimens, respectively. Deep mucosa was present in 211 specimens (73.0%), while muscularis mucosa was present in only 75 specimens (26.0%). Specimens taken from the posterior aspect of the cardia exhibited the shallowest depth ($P = 0.011$), poorest orientation ($P < 0.001$) and poorest diagnostic adequacy ($P < 0.001$). Fluoroscopic findings demonstrated that the posterior aspect of the cardia was difficult to approach closely and perpendicularly because of the anatomical configuration of the stomach in nature.

CONCLUSION: TN-EGD biopsied specimens obtained from the posterior aspect of the cardia exhibit limitations in both quality and quantity. When performing a biopsy using two directional TN-EGD, special attention should be paid to gastric lesions located on the posterior aspect of the cardia.

3. 답안형



Gastric Cancer. 2012 Jun 13. [Epub ahead of print]

Gastric cancers with microsatellite instability exhibit high fluorodeoxyglucose uptake on positron emission tomography.

Answer

Chung HW, Lee SY, Han HS, Park HS, Yang JH, Lee HH, So Y.

Department of Nuclear Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

BACKGROUND: Gastric cancers exhibit various degrees of (18)F-fluorodeoxyglucose (FDG) uptakes on positron emission tomography/computed tomography (PET/CT) imaging. The aim of this study was to evaluate whether FDG uptake in gastric cancer varies according to the microsatellite instability (MSI) status.

METHODS: Consecutive gastric cancer patients who underwent PET/CT imaging and MSI analysis were included in the study. The maximum standardized uptake value (SUVmax) of gastric cancer was assessed using PET/CT imaging.

RESULTS: Of 131 gastric cancers, 16 exhibited a high incidence of MSI (MSI-H) and 3 exhibited a low incidence of MSI (MSI-L). In 29 subjects who showed no uptake on PET/CT imaging the gastric cancers were all microsatellite stable (MSS). Gastric cancers with MSI were related to age older than 60 years ($p = 0.002$), cancer volume larger than 10 cm³ ($p = 0.015$), and the presence of FDG uptake on PET/CT imaging ($p = 0.001$). A higher SUVmax of gastric cancer was linked to the presence of MSI ($p < 0.001$).

CONCLUSION: The presence of MSI is related to FDG uptake in gastric cancer. Care should be taken with MSS gastric cancers, because they show lower SUVmax on PET/CT imaging than MSI gastric cancers.

Comment in

How can research fields be integrated with PET imaging? [*Gastric Cancer*. 2013]

PMID: 22692466 [PubMed - in process]

[Related citations](#)



나쁜 제목



- 오자나 영문법 오류
- 혼동을 일으키는 애매한 용어
- 웃긴 용어
- 약어 사용
- 15 단어 이상의 긴 제목

거부감을 유발하는 용어:

- A study of, A case of, Analysis of, etc
- Investigation, study, Novel, Facile, etc

제목 후보 만들기



주제 (issue)

- Just one clear, sharp idea
- Well defined, short



문제 (problem)

- State the problem
- Say why it's an interesting problem



답안 (answer)

- Say what your solution achieves
- Say what follows from your solution

원저의 초록 형식



- **Background (현재형) / Aims (과거형)** – what is already known and why you did it
- **Methods** – how you did it
- **Results** – what you found
- **Conclusions** – what it means (일부 저널은 과거형 인정)

흔한 네 단락의 예



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Disq Dis Sci. 2012 Jan;57(1):72-8. doi: 10.1007/s10620-011-1825-5. Epub 2011 Jul 20.

Microsatellite instability, EMAST, and morphology associations with T cell infiltration in colorectal neoplasia.

Lee SY, Miyai K, Han HS, Hwang DY, Seong MK, Chung H, Jung BH, Devaraj B, McGuire KL, Carethers JM.

Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

BACKGROUND AND OBJECTIVE: Colorectal tumors are often observed with tumor infiltrating lymphocytes, presumably as a host-immune response, and patterns may segregate by types of genomic instability. Microsatellite unstable (MSI) colorectal cancers contain a pronounced lymphocyte reaction that can pathologically identify these tumors. Colorectal tumors with elevated microsatellite alterations at selected tetranucleotide repeats (EMAST) have not been examined for lymphocyte patterns.

METHODS: We evaluated a 108-person cohort with 24 adenomas and 84 colorectal cancers for MSI and EMAST. Immunohistochemical detection of CD4+ and CD8+ T cell infiltration were performed. Prognostic relevance was assessed by survival analysis.

RESULTS: CD8+ T cell infiltration in the tumor cell nest ($p = 0.013$) and tumor stroma ($p = 0.004$) were more prominent in moderately and poorly differentiated adenocarcinoma than in adenoma and well-differentiated adenocarcinoma. CD8+ T cells in the tumor cell nest ($p = 0.002$) and tumor stroma ($p = 0.009$) were at higher density in tumors with ulcerating features compared to tumors with a sessile or polypoid appearance. MSI-H tumors showed a higher density of CD8+ T cell infiltrations in tumor cell nests ($p = 0.003$) and tumor stroma ($p = 0.001$). EMAST-positive tumors showed a higher density of CD8+ T cell infiltrations than EMAST-negative tumors both in tumor cell nest ($p = 0.027$) and in tumor stroma ($p = 0.003$). These changes were not observed with CD4+ T lymphocytes. There was no difference in cancer patient survival based on density of CD8+ cells.

CONCLUSIONS: CD8+ T lymphocytes, but not CD4+ cells, were increased in tumor cell nests and the tumor stroma in both MSI and EMAST tumors, and showed higher infiltration in ulcerated tumors. CD8+ T lymphocyte infiltration is associated with both EMAST and MSI patterns, and increases with histological advancement.

배경이 생략된 예



J Dig Dis. 2012 Oct;13(10):510-6. doi: 10.1111/j.1751-2980.2012.00620.x.

Change of mucosal color in early gastric cancer.

Lee HH, Lee SY, Yoon HY, Hong SN, Kim JH, Sung IK, Park HS, Shim CS, Han HS.

Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

OBJECTIVE: To investigate the association between mucosal color change and the characteristics of early gastric cancer (EGC).

METHODS: Data of consecutive patients with EGC resected between August 2005 and October 2010 at Konkuk University Medical Center were analyzed retrospectively. The characteristics of EGC relative to mucosal color change were analyzed.

RESULTS: Whitish discoloration of the cancer was linked to female to male gender ratio ($P = 0.009$), large tumor size ($P < 0.001$), deep invasion ($P = 0.046$) and depressed contours ($P < 0.001$) compared with EGC without discoloration or with hyperemic change. In addition, a whitish discoloration was also related to signet ring cell carcinoma ($P < 0.001$) and diffuse type carcinoma based on Lauren's classification ($P < 0.001$). On multiple linear regression analysis, diffuse type based on Lauren's classification ($P = 0.017$) and depth of invasion ($P = 0.003$) were significant independent factors for whitish discoloration.

CONCLUSIONS: Mucosal color change is an important clue in the diagnosis of EGC. EGC with whitish discoloration needs more attention due to its link with the diffuse type of Lauren's classification.

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PMID: 22988924 [PubMed - indexed for MEDLINE]

[Related citations](#)



한 단락으로 연결된 예



J Korean Med Sci. 2007 Oct;22(5):851-4.

Irritable bowel syndrome is more common in women regardless of the menstrual phase: a Rome II-based survey.

Lee SY, Kim JH, Sung IK, Park HS, Jin CJ, Choe WH, Kwon SY, Lee CH, Choi KW.

Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea.

Abstract

↓ Background

↓ Aim

Functional gastrointestinal disorders are more common in women in relation to the fluctuations of female sex hormones. We tried to know the gender-related differences in the prevalence of irritable bowel syndrome and gastrointestinal symptoms according to the menstrual phase. A total of 253 women before menopause and 252 men below age 50 were examined by a gastroenterologist after completing the questionnaire. **↑ Methods** Endoscopic procedures, and imaging studies were done, if needed. **↓ Results** They were classified into three groups according to their menstruation period; menstrual phase, proliferative phase, and secretory phase. Finally, 179 men and 193 women were analyzed. Irritable bowel syndrome was more frequently noticed in women than in men ($p=0.01$). The diarrhea-dominant type was more common in men, while constipation-dominant or alternating types were more common in women ($p<0.001$). Of 193 women, there was no significant difference in their gastrointestinal symptoms according to their menstrual phase. Regardless of the menstrual phase, gastrointestinal symptoms are more frequent in women. Physicians should consider different symptomatic management and women should be considered when evaluating functional gastrointestinal disorders. **↑ Conclusion**

초록의 연구 배경/목적



- 2-3문장
- 기존에 알려진 내용을 연구배경으로 먼저 언급
- 어떤 궁금증을 해결하려고 하는지를 연구목적으로 언급
- 정말로 중요한 내용만 언급

유의사항:

- 다른 논문에서 그대로 인용
- 제목을 그대로 반복
- 다들 아는 상식을 기술
- 용어를 자세히 설명

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초록의 방법



- 3-4개 문장
- 어떤 주요 기법을 사용하는지를 설명
- 기존 논문 그대로 베끼지 않기
- 새로운 기술이 있으면 강조

유의사항:

- 잘 알려진 실험기법에 대한 자세한 내용은 생략
- IRB, 통계는 언급하지 말 것

초록의 결과



- 3-4개 문장
- 주요 결과를 구체적인 숫자와 p -value로 나열

유의사항:

- 애매한 용어는 금기 - very, little, etc
- 표와 그림은 본문에서만 언급

초록의 결론

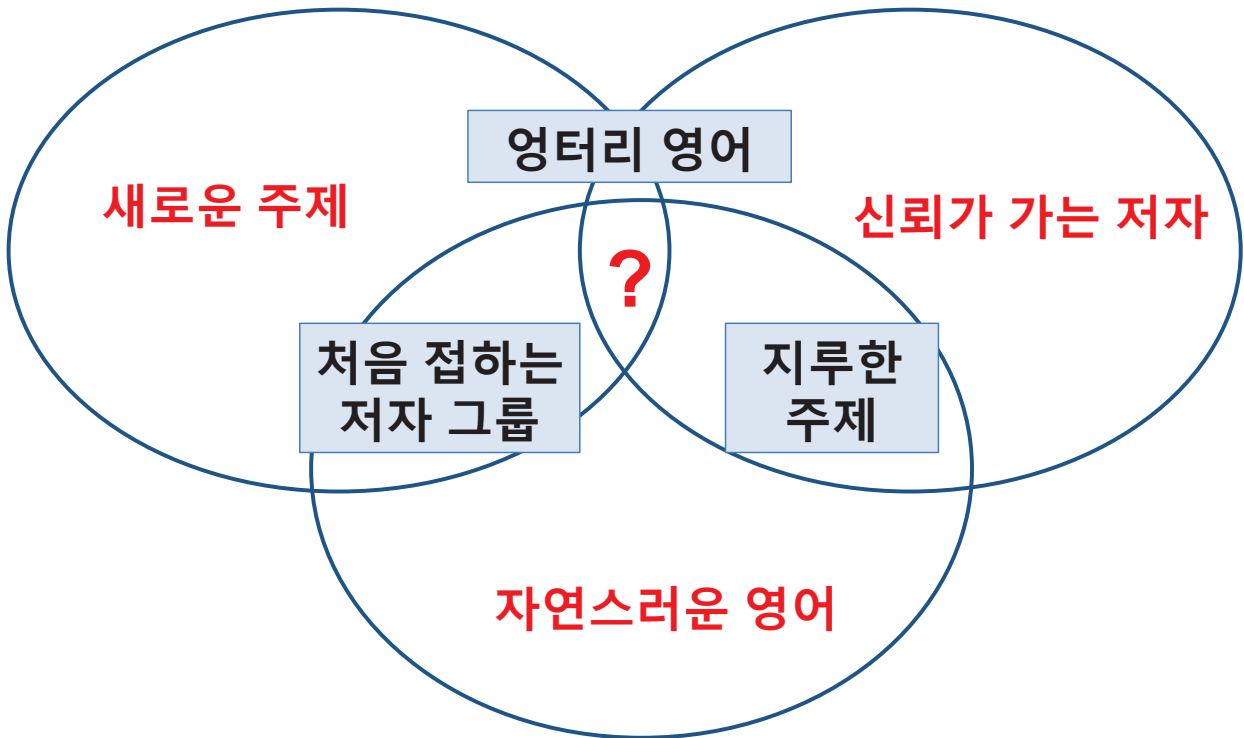


- 1-3개의 문장
- 가장 영향력이 있는 결과를 강조
- 가장 많이 읽히는 부분이므로, 간결하게 설명
- 제한점이 있다면 'might', 'seem', 'could' 등을 사용

유의사항:

- 결과와 무관한 내용은 금기
- 다른 논문은 언급하지 말 것

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기본 사항

- 단위가 없으면 10 미만의 수는 글로 풀어서 쓴다.

In group two there were **seven** students.

- 10이 넘으면 글이 아닌 숫자로 쓴다.

In group two there were **11** students.

- 숫자가 문장 처음에 나오면 글로 풀어서 쓴다.

Twenty students participated in the activity.

- "Data"는 항상 복수로 취급한다.

The data **were** collected.

- **게재된 논문에도 틀린 것이 많으니, 원칙을 알고 지킨다.**

논문에 쓰면 안 되는 것

- 요약체 - **didn't, haven't, I'm**
- 느낌표 !
- **And, But, Also** 로 시작하는 문장
- **Never ever**
- **"works", "received", "predict", "extract"**

In these theoretical **works** → **papers**

We **received** → obtained

(received = 남이 의도적으로 주지 않은 이상 금기)

“A” 와 “The”



A	The
Indefinite	Definite (know which one)
A chemical was used.	The chemical was used.

- For CH₂, structure is → For CH₂, **a** structure is
- According to experiment → According to **the** experiment
- Oscillation barrier is → **The** oscillation barrier is

미국식 영어	영국식 영어
Color	Colour
Center, Titer...	Centre, Titre...
Organization, Recognize, Analyze	Organisation, Recognise, Analyse...
Defence	Defense
Dialog	Dialogue
Traveling	Travelling
A,B, and (or) C	A,B and (or) C
Learned, burned, dreamed, kneeled, leaned, leaped, spelled, spilled, spoiled...	Learnt, burnt, dreamt, kneelt, leant, leapt, spelt, spilt, spoilt...

- Unstructured (only one phrase)
- Explain why the topic is important
- Usually 200-250 word counts
- **Background (summary) + conclusion**

Future candidates for indications of *Helicobacter pylori* eradication: Do the indications need to be revised?

Sun-Young Lee

Department of Internal Medicine, Konkuk University School of Medicine, Seoul, Korea

Key words

consensus, eradication, guideline, *Helicobacter pylori*, indication.

Accepted for publication 6 October 2011.

Correspondence

Professor Sun-Young Lee, Department of Internal Medicine, Konkuk University School of Medicine, 4-12 Hwayang-dong, Gwangjin-gu, Seoul 143-729, South Korea. Email: sunyoung@kuh.ac.kr

Presented in part as a lecture "Extended indication for *H. pylori* eradication—present and future" during the 8th Japan–Korea Joint Symposium on *Helicobacter* infection on 28 May 2011.

This work was supported by Konkuk University.

Conclusion

Abstract

Since the discovery of *Helicobacter pylori* in 1982, the development of several treatment guidelines has allowed a consensus on the indications for *H. pylori* eradication. Beyond these currently accepted indications, including various upper gastrointestinal disorders and extragastric diseases, a significant amount of new information regarding *H. pylori* eradication is emerging. Certain types of acute gastritis, such as nodular gastritis, hypertrophic gastritis, Ménétrier's disease, hemorrhagic gastritis, and granulomatous gastritis are reversible after *H. pylori* eradication. Further, for chronic gastritis, closed-type atrophic gastritis and complete-type intestinal metaplasia appear to be more reversible after *H. pylori* eradication than open-type atrophic gastritis and incomplete-type intestinal metaplasia. Eradication can also be considered in subjects younger than 40 years who have a family history of gastric cancer and in subjects with long-term medications that might lead to bleeding (antiplatelet agents) or atrophy (proton pump inhibitors). Emerging evidence indicates that *H. pylori* eradication could be an effective treatment for some extragastric diseases that are unresponsive to conventional therapy. In such conditions, routine screening for eradication of *H. pylori* has not previously been recommended; a "test-and-treat" approach is suggested in the aforementioned situations. Given that *H. pylori* eradication is effective when the gastritis is reversible, future indications should be expanded to include acute gastric lesions that show marked improvement upon *H. pylori* eradication rather than just focusing on chronic gastric lesions. Future indications for *H. pylori* eradication should focus more on reversible lesions before preneoplastic conditions develop.

Background

- Unstructured (only one phrase)
- Lower word counts (100-150 words)
- Should contain what is **unique**
- Extract the lesson from the case
- **Background + case description**

Torus Hyperplasia of the Pyloric Antrum

Background

Primary or idiopathic hypertrophy of the pyloric muscle in adult, so called torus hyperplasia, is an infrequent but an established entity. It is caused by a circular muscle hypertrophy affecting the lesser curvature near the pylorus. Since most of the lesions are difficult to differentiate from tumor, distal gastrectomy is usually preformed to rule out most causes of pyloric lesions including neoplastic ones through a pathological study. A 56-yr-old man with a family history of gastric cancer presented with abdominal discomfort of 1 month duration. Upper gastrointestinal endoscopy showed a 1.0 cm sized irregular submucosal lesion proximal to the pylorus to the distal antrum on the lesser curvature. On colonoscopy examination, a 1.5 cm sized protruding mass was noticed on the appendiceal orifice. Gastrectomy and cecectomy were done, and histological section revealed marked hypertrophy of the distal circular pyloric musculature and an appendiceal mucocele. To the best of our knowledge, this is the first case of torus hyperplasia with appendiceal mucocele which is found incidentally.

Key Words : Hyperplasia; Antrum, Pyloric; Appendix; Mucocele

Case

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Accepted : 18 July 2008

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심사 없이 rejection하는 경우



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 - 희귀한 경우가 아닌 증례
 - 연구 업적이 적은 저자의 종설
 - 인용될 가능성이 적은 원저

$$\text{Impact Factor} = \frac{\text{Number of citations (source + non-source items) *}}{\text{Total number of source items published *}}$$

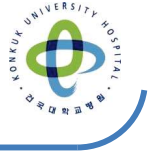
종설, 원저, 증례

한국 논문들의 취약점- 내용면



1. 초록이 논문에 비해서 부실하다.
2. 참고문헌 순서까지 그대로 베끼는 경우가 있다.
3. 독창적인 주제가 적고, 외국 논문을 보고 한국인에게 그대로 응용한 'me too' 원저가 많다.
4. 후향적 연구가 전향적 연구에 비해서 많고, 증례보고집 처럼 대량의 임상자료를 단순 분석한 것이 많다.
5. 궁금증을 풀기 위한 체계적인 과정을 거친 논문이 적다.

한국 논문들의 취약점- 형식면



1. 한 논문에 저자가 너무 많다.
2. 참고문헌이 너무 많다.
3. 임상연구 등록번호 및 IRB 승인번호가 누락된 경우가 흔하다.
4. 전향적 연구에서 샘플 수 계산이 누락된 경우가 많다.
5. 편지에 다른 편집장 이름이나 저널명이 써있는 경우가 있다.
6. 교신저자의 이메일을 주저자가 사용하고 있거나, 처음부터 교신저자 대신 주저자 이메일이 적힌 경우도 있다.

참고문헌 인용시 주의사항



- 외국 검색창에서 검색되지 않는 논문은 인용하지 않는다.
- 영문초록조차 없는 논문은 인용하지 않는다.
- 중요하지 않은 논문은 인용하지 않는다.
- 오래된 논문은 가능한 인용하지 않는다.
- 다른 사람의 이야기라면 모두 참고문헌을 달아야 한다.
- 유명인사가 아닌 이상 일일이 이름을 적지 않는다.

Marx et al found this to be common in Hispanics.

→ This finding is common in Hispanics (Reference).

심사위원 지정시 주의사항



- 가능한 외국 의사 중에서 전문가를 골라서 지정
- 본인이 참고한 문헌의 교신저자 중에서 선정
- 잘 아는 사람 (같은 근무처, 공동연구, 동기동창 등) **금지**
- 해당 분야에 대해서 교신저자 논문이 없는 사람은 **금지**

J Gastroenterol Hepatol. 2012 Feb;27(2):200-11. doi: 10.1111/j.1440-1746.2011.06961.x.

Future candidates for indications of Helicobacter pylori eradication: do the indications need to be revised?

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Pubmed

Abstract

Since the discovery of Helicobacter pylori in 1982, the development of several treatment guidelines has allowed a consensus on the indications for H. pylori eradication. Beyond these currently accepted indications, including various upper gastrointestinal disorders and extragastric diseases, a significant amount of new information

요약 - 원저의 제목과 초록



제목	<ul style="list-style-type: none">• 흥미 유발 주제, 연구 유형에 대해서 언급• 가설의 질문형• 결론의 답변형
배경/ 목적	<ul style="list-style-type: none">• 기존에 알려진 내용을 먼저 언급• 해결하고자 하는 궁금증을 나중에 언급
방법	<ul style="list-style-type: none">• 주요 기법만 설명• 새로운 기술이 있으면 강조
결과	<ul style="list-style-type: none">• 주요 결과를 구체적인 숫자와 p-value로 나열
결론	<ul style="list-style-type: none">• 가장 영향력이 있는 부분만 강조• 가장 많이 읽히는 부분이므로, 간결하게 설명