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TEN Keeps of Writing Medical Articles

Sung-Tae Hong, MD

Editor, Journal of Korean Medical Science

Seoul National University, Korea

Why TEN Keeps?

- To prepare the better manuscript and be published for **Authors**
- To review manuscripts easier for **Reviewers**
- To select and edit manuscripts efficiently for **Editors**

Purpose of Publication

- Scientific communication among professionals
- Transition of private new knowledge to public known knowledge
- Public offer to agree and cite publications
- Academic benefits

➢Write manuscripts based on the purpose of publication: **Easy to read and to understand → TEN Keeps → More Cites**

TEN Keeps 1

❖**Keep Design of Articles:**

Design article contents and structure before writing

- Scientific contents: Tables and Figures
- Conclusion
- Target journal: factors considered
  - Scope, JIF, Publication feasibility, Expense
- Authors in order and Contributors
- References

TEN Keeps 2

❖Keep Uniform of Target Journal to Prepare the Manuscript

- Keep journal's format in details as possible
- Uniforms
  - NLM style (Vancouver style)
  - APA style (Harvard style)
  - Mixed style

REPORT OF AN UNUSUAL CASE OF PERSISTENT BACTEREMIA BY *BARTONELLA BACILLIFORMIS* IN A SPLENECTOMIZED PATIENT

CÉSAR HENRÍQUEZ, JUAN CARLOS HINOJOSA, PALMIRA VENTOSILLA, BERONICA INFANTE, JENNY MERELLO, VANIA MALLQUI, MANUELA VERASTEGUI, AND CIRO MAGUIÑA

Instituto de Medicina Tropical Alexander von Humboldt, Lima, Peru; Departamento de Patología y Departamento de Microbiología, Universidad Peruana Cayetano Heredia, Lima, Peru; Departamento de Enfermedades Transmisibles y Dermatológicas, Hospital Nacional Cayetano Heredia, Lima, Peru

Abstract. We report a case of a 56-year-old man with a history of splenectomy for idiopathic thrombocytopenic purpura who developed persistent bacteremia in the acute phase of human bartonellosis. This patient did not develop hemolytic anemia. Only after several courses of antibiotic treatment was the infection eradicated. This is an unusual case of overwhelming post-splenectomy infection by *Bartonella bacilliformis*, which provides clinical evidence that the spleen is a critical effector organ of clearance of this infection as well as the effector organ of bartonellosis-associated hemolytic anemia.

Columbia, and Ecuador.[1]

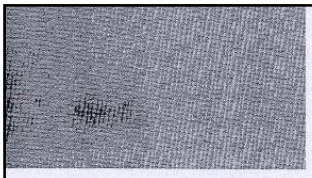
INTRODUCTION

Carrion's disease (bartonellosis) is an infectious disease that is endemic in some regions of Peru, Colombia, and Ecuador.[1] The etiologic agent is *Bartonella bacilliformis.* There are two clinical phases of the infection: an acute phase known as Oroya fever, which is characterized by bacteremia, fever, severe hemolytic anemia, and transient immunosuppression, and an eruptive phase known as Verruga Peruana or Peruvian wart. In endemic areas, the incidence of infection is estimated to be 12.7/100 person-years.[2] Limited information on the immunologic response to *Bartonella* infection exists, but it is widely accepted that antibodies are responsible for acquired long-term, protective immunity. However, the presence of chronic asymptomatic carriers in endemic areas and the appearance of the chronic phase contribute to the speculation that innate immunity and humoral immunity may not be com-

and malaise. He had not been vaccinated against *Streptococcus pneumoniae* or *Haemophilus influenzae.*

On admission, he had a temperature of 39°C, a pulse rate of 120/minute, a respiratory rate of 30/minute, and a blood pressure of 110/50 mm of Hg. On physical examination, his abdomen had a scar in the middle line. The skin was warm and moist. The results of the rest of the physical examination were normal.

Results of laboratory tests performed are shown in Table 1. Results of urinalysis and a chest radiograph were normal. A Giemsa-stained blood smear showed bacilli infecting more than 90% of his red blood cells (Figure 1). A polymerase chain reaction test for *B. bacilliformis* in whole blood was positive using primers for the 16S and 23S rRNA ITS region and for the citrate synthase gene (Figure 2).[4] An immunoblot serum test result for IgG was also positive.[5] After two weeks, colonies morphologically consistent with *B. bacilliformis* were



chain reaction analysis of the blood of the
infecting organism as *Bartonella bacilliformis*
DNA ladder; lane 2, positive control using
23S ribosomal RNA (rRNA) intergenic
3, DNA from the patient and primers for
ITS region; lane 4, positive control using
thase gene; lane 5, DNA from the patient
e synthase gene; lane 6, negative control.

common infecting organisms in poten-
e *S. pneumoniae, H. influenzae* type b,
and *Capnocytophaga* spp.[1]. Although
on in splenectomized patients, most of
receive adequate advice or interven-
k of OPSI.[12] Preventive measures in
ling to endemic areas for *Bartonella*,
can be effective to avoid underlying

egarding OPSI by *B. bacilliformis* in
xperimental studies using splenecto-
ys infected with *Bartonella* reproduced
h fluctuant bacteremia, followed by

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LEPOMIS CYANELLUS AND *L. MACROCHIRUS* FROM CHARLIE'S POND, NORTH CAROLINA: HOST SIZE AND SPECIES AS DETERMINANTS OF COMMUNITY STRUCTURE

K. J. Fellis and G. W. Esch

Department of Biology, Wake Forest University, Winston-Salem, North Carolina 27109. *e-mail: fellk01g@wfu.edu*

ABSTRACT: The community structure and seasonal dynamics of 16 helminth species infecting green (*Lepomis cyanellus*) and bluegill (*L. macrochirus*) sunfishes in Charlie's Pond, North Carolina, was examined. One hundred and fifty-four fishes including 90 green sunfish and 64 bluegill sunfish were collected between March and November 2000 and examined for the presence of helminth parasites. Five of these species underwent significant changes in abundance in green sunfish infracommunities, 3 of which also displayed seasonal changes in prevalence. Three of the 16 species fluctuated seasonally in bluegill infrapopulations; 2 also underwent changes in prevalence. Species richness and diversity varied across the 9-mo period for both host species, whereas total helminth abundance remained constant. Analysis of component communities revealed differences in community structure for the 2 host species. Bluegills were found to harbor larger and more diverse communities. Bluegills also contained larger infrapopulations of 5 species, whereas green sunfish had greater abundance of 2 species. Interpretation of these data suggests that host species and size are strongly associated with the predictability of community structure.

(Dogiel et al., 1961; Price and Clancy, 1983)

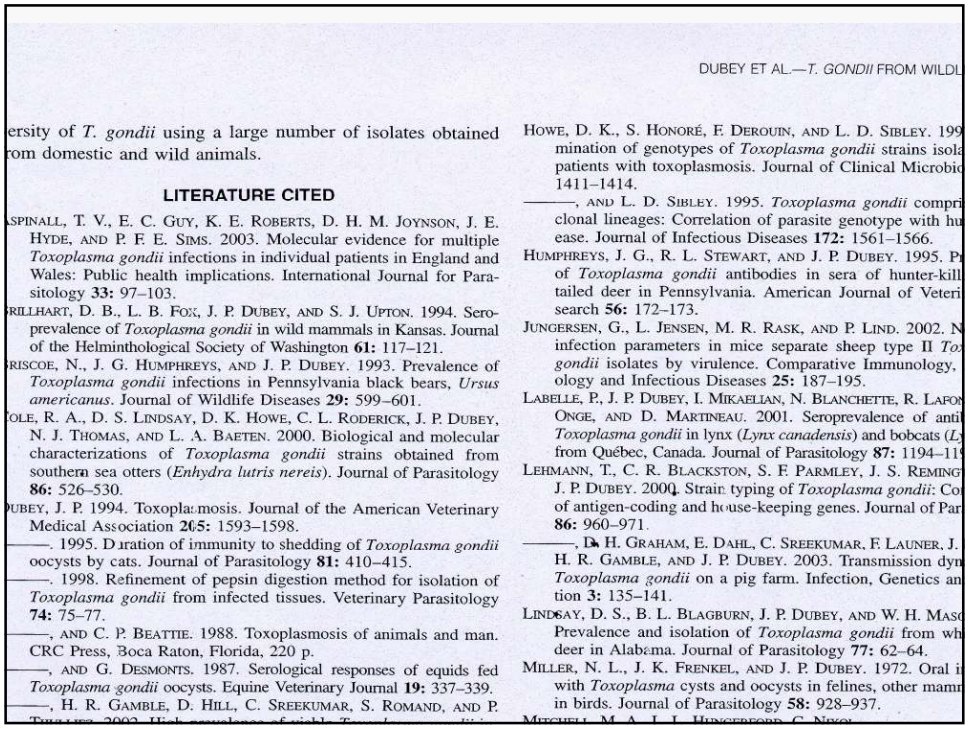
The structuring of freshwater fish parasite communities has received a great deal of attention and has been the source of considerable analysis for several decades (Dogiel et al., 1961; Price and Clancy, 1983; McDowell et al., 1992). More than 10 yr ago, Kennedy (1990) posed the question whether helminth communities in freshwater fishes represent structured communities or stochastic assemblages. Despite the long-standing presence of this question, the issue has not been thoroughly resolved and will likely continue; however, there is a growing body of evidence that many fish–parasite systems are in fact nonrandom. Barger and Esch (2001) recently noted a wide array of studies on freshwater fish parasites, varying from random associations to structured communities influenced by various biotic and abiotic factors. Several mechanisms have been reported to influence the structuring of fish parasite communities, including host factors such as size and age (Guégan and Hugueny, 1994; Zelmer and Arai, 1998; Fiorillo and Font, 1999), species (Fiorillo and Font, 1996), behavior (Wilson et al., 1996), and habitat (Wilson et al.,

fishes from Charlie's Pond, North Carolina. Community structure was investigated at both the infra- and component community level, and patterns of predictability associated with host size and species were examined. Fluctuations in parasite abundance, prevalence, species richness, and diversity were also examined for each host species.

MATERIALS AND METHODS

Charlie's Pond is a 1-ha impoundment, approximately 27 km northeast of Winston-Salem in Stokes County, North Carolina (36°17′N, 80°89′W). The impoundment is spring fed and maintains a relatively constant depth by the 1-directional flow of water into Belews Lake through an underground outlet. Charlie's Pond is eutrophic and contains large populations of mosquito fish (*Gambusia affinis*), crappie (*Pomoxis* spp.), green sunfish, and bluegill sunfish.

One hundred and fifty-four fishes (90 green and 64 bluegill sunfishes) were collected by hook and line between March and November 2000. These fishes were transported to the laboratory in aerated buckets of water, where they were maintained in 100-L aquaria and fed a daily diet of crickets and earthworms. All fishes were processed within 2 wk, most (>90%) within 1 wk. Standard lengths and weights were recorded



ersity of *T. gondii* using a large number of isolates obtained rom domestic and wild animals.

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MITCHELL, M. A., J. L. HUNGERFORD, C. NYKO

INTRODUCTION

Invasive aspergillosis (IA) is an increasingly common infection among hematological cancer patients receiving cytotoxic chemotherapy (7, 34). Steroid-treated allogenic bone marrow transplant recipients are particularly at risk (10, 19). The crude mortality rate of IA is very high despite appropriate antifungal treatment, since the difficulty in obtaining an early diagnosis results in a delay in establishing treatment (15). The diagnosis of IA is frequently established postmortem. Prompt initiation of antifungal therapy in patients with IA is critical in improving the outcome of this disease (37). Conventional diagnostic methods are insensitive, and the "gold standard" diagnostic procedures (histological examination and cultures of deep tissues) require an aggressive approach which often precludes their use due to profound thrombocytopenia, hypoxemia, and the critical condition of these patients (1).

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TEN Keeps 3

❖ **Keep Consistency**:

Keep ONE flow in the same order of concepts and words throughout the manuscript!

- Title
- Abstract
- Text
- Key words

TEN Keeps 4

❖ **Keep Rapid Drafting and Slow Cooking**:

Drafting as soon as possible and cook it slowly and repeatedly

- **Rapid drafting:** correct & no lost items
- **Slow cooking:** TEN Keeps

TEN Keeps 5

❖ **KESS! Keep Sentences Sexy**: Make sentences short within 30 words in a sentence!

- Short sentences for better readability
- The shorter, the better!
- The longer, the worse readable!

TEN Keeps 5: Example

In unadjusted and multivariable-adjusted logistic regres sion analyses, after adjusting for BMI, diastolic BP, LD L-cholesterol, triglyceride, ALT, HOMA-IR, log(hsCR P) and alcohol intake, apoB was found to be independe ntly related to the risk of CHD using FRS in healthy Ko rean men, and the link between apoB and the risk of C HD was found to be dose-response relationship, and in addition, apoB with a high risk showed a tendency to in crease risk of developing CHD.

TEN Keeps 5: Example

The apoB was found to be independently related to the risk of CHD using FRS in healthy Korean men by unadjusted and multivariable-adjusted logistic regression analyses, after adjusting for BMI, diastolic BP, LDL-cholesterol, triglyceride, ALT, HOMA-IR, log (hsCRP) and alcohol intake. The relation between apoB and the risk of CHD was in dose-response relationship. In addition, apoB with a high risk showed a tendency to increase risk of developing CHD.

TEN Keeps 6

Keep Scientific Confidence:

Authors should be confident for their results and make clear conclusions based on the confidence!

- All authors are responsible for data!
- Author's confidence can produce scientific value!
- Scientific confidence is the core of an article!

Confidence on Conclusion: Example

Our results indicate that combination of [^{18}F]-FDG-PET/CT and [^{124}I]-PET/CT affords a valuable diagnostic method that can be used to make therapeutic decisions in terms of whether further surgery is required or whether radioactive-iodine treatment is appropriate in patients with DTC who are tumor-free on conventional imaging studies but who have high Tg levels. However, continuing and cooperative study are still necessary, due to existence of a considerable number of patients who could not be localize d tumor recurrence by these diagnostic modalities.

TEN Keeps 7

❖ **Keep Rule of TEN 1:** Only 10% of title readers read abstract after screening articles by title.

- Meeting point with readers
- Attractive titles invite readers.

Rule of TEN 1

- Titles must be attractive to readers: Professional
- Simple, Clear, Specific → **SEXY!**
- Combination of key words
- Important one first
- Informative enough
- Web DB friendly

Principles of Title Writing

- Title form
  - Phrase
  - Sentence
  - Title and subtitle
- Within 12-15 words, 100 spaces
- 'A' (Stimulating, Inhibitory) Effects of 'B' (Drugs, Materials, Methods) on 'C' (Diseases, Patients, Diagnosis, Findings, …) in 'D' (Area, Time, Population…)
- Follow any instruction of target journal

Writing Tips for Titles 1

- Clear expression
- Avoid
  - Serial number
  - Abbreviations
  - Commercial brand names
- Inadequate expression to avoid: The, A -, Of, On, Results, Study (Studies), Notes on, An approach to, A study of, Some aspects of, Investigation of, Observation on, A novel method for, The effect of ….

Title Example 1

- 2004년 서울에서 발생한 비정형성 폐염 67례의 보고
- Report of 67 cases of atypical pneumonia in Seoul, 2004
- Epidemic atypical pneumonia: Sixty-seven cases in Seoul in 2004
- Epidemic atypical pneumonia in Seoul: 67 cases experienced in 2004

Title Example 2

- Clinical analysis of 67 atypical pneumonia cases in an epidemic occurrence in Seoul in 2004
- Epidemiological aspects of atypical pneumonia in Seoul, 2004
- Epidemic occurrence of atypical pneumonia in Seoul in 2004
- Sixty-seven cases of atypical pneumonia of epidemic occurrence in Seoul in 2004

Principles of Sentence Title

- **Strong confidence**
- **Present tense**
- **Ordinary sentence: question? negative?**
- **Same as 'Conclusion'**

TEN Keeps 8

❖ **Keep Rule of TEN 2:** Only 10% of abstract readers read the text. Finally only 1% of title readers read the text.

- **Attractive title and informative abstract** may call citation. We should try to raise the readers' proportion over the 1%.

Rule of TEN 2

Writing Good Abstract

- Structured or Unstructured abstract
- Clear and understandable, essential core contents
- Length limit: 250 words
- Abstract swims alone through the web: informative
- Most readers read abstract only with Tables or Figures and decide citation

Abstract Writing Tip 1

- **Writing Flow**: Question to Answer
  - Background or Purpose
  - How? Materials and Methods
  - What? Results
  - So what? Conclusion
- Avoid reviewing, reference citing
- Follow guidelines if any

Abstract Writing Tip 2

- Describe core results in detail with numeric data.
- Avoid numbering of results
- Sentences from the text
- Explain abbreviations
- Conclusion is essential and same with in the text.

TEN Keeps 9

❖**Keep Rule of First and Last**: Organize text structure by **Topic at the first** and **Conclusion at the last**.

- Topic Paragraph & Conclusion Paragraph.
- Topic Sentence & Conclusion Sentence

Scheme of Text Structure 1 Introduction

- IMRAD Text
- Paragraph Scheme of Introduction
  - 2-3 Paragraphs
  - First: Topic paragraph
  - Middle: Extension paragraph
  - Last: Conclusion paragraph

Structure of Introduction

Topic Paragraph: Introduce audience to the article by explaining known facts

Extension Paragraph: Connect known to unknown

Conclusion Paragraph: Summarize what is done

Sentence Structure

- Sentences in a Paragraph
  - More than 2 sentences in a paragraph
  - First: Topic sentence
  - Middle: Extension sentence
  - Last: Conclusion sentence

Scheme of Discussion Structure

- Paragraph Scheme of Discussion
  - 4-6 Paragraphs
  - First: Topic paragraph
  - Middle: Extension paragraphs, One paragraph for one item
  - End of extension: Limitations of the study
  - Last: Conclusion paragraph

Structure of Discussion

Topic Paragraph: Summarize core results

Extension Paragraphs: Explain core results one by one with literature review. Concentrate supporting data for conclusion.

Limitation Paragraph: Describe limitations

Conclusion Paragraph: Describe scientific conclusion in present tense by summarizing conclusion sentences of each paragraph.

Sentence Structure of Discussion

- Sentences in Paragraphs
  - More than 2 sentences in a paragraph
  - First: Topic sentence
  - Middle: Extension sentences
  - Last: Conclusion sentence

Sentence Structure of Paragraph

Topic Sentence: Introduce findings one by one of individual items briefly

Extension Sentences: Explain the finding with literature review. Supportive or contradictive for conclusion.

Conclusion Sentence: Describe scientific conclusive meaning of the item.

TEN Keeps 10

❖ **Keep Connecting Words:** Connect sentences by repeating common words within a paragraph. That keeps fluent flow of reading and easy understanding.

Topic Paragraph
& Connecting Words

Praziquantel has been used comprehensively in both clinics and field as a broad-spectrum anthelmintic for the treatment of trematode or cestode infections. Though it is regarded as safe generally, the comprehensive use of praziquantel inevitably induces several common adverse reactions, such as, abdominal pain, diarrhea, dizziness, sleepiness, and headache.[1] Most of these adverse reactions are transient and rapidly subside without specific treatment. In addition to these common adverse reactions an anaphylactic reaction may occur, but it is very rare and neglected usually. A search of the literature revealed that two cases of anaphylactic shock have been attributed to praziquantel.[2-3]

Slow Cooking

- **Slow Cooking of Manuscripts**: Internal & external review and revision
- Trim manuscripts more attractive following TEN Keeps!
  - KESS
  - Rule of TEN 1
  - Rule of TEN 2
  - Rule of First and Last
  - Connecting Words

Recommended Writing Order

- Tables & Figures
- Abstract
- Results
- Materials and Methods
- Introduction
- Discussion

Additional Tips

- Prepare manuscript using MS word, double space, 11 point, times new Roman font
- Prepare the manuscript reader friendly
- Prepare the manuscript journal friendly
- Language review by an original speaker
- Back up the file
- Keep research and publication ethics through all procedure