CONTENTS

February, 1959.

ORIGINAL ARTICLES

Fluid & Electrolyte Balance in Relation to Surgery I. M. Hallack 51
The Fleming Letters (Part II) 55
Intramuscular Lignocaine a Supplement to General Anaesthesia
Incurable Blindness in the African
Malaria in Infancy
Ocular Complications of Diabetes
The Writing of Medical Papers
In Lighter Vein

EDITORIALS

Pulmonary Ascariasis
Temporal-Lobe Epilepsy
Doctors Discuss Smoking Habit

The Consultation 78
Matabeleland Medical Library 78
Salvation Army Hospital 78
Gwelo African Isolation Hospital 81
Address Given by Rt. Hon. the Viscount Malvern 82
A Rhodesian Reaches the Age of 100 83

Impressions of an American Tour 85
Cardio-Thoracic Society of Matabeleland 88
Correspondence 90
Book Review 91
The Journal Library — Fourth Annual Report 91
Latest Pharmaceutical Preparations 93

PUBLISHED MONTHLY, ANNUAL SUBSCRIPTION £2 2s. 0d.
Registered at the General Post Office as a Newspaper.
The Writing of Medical Papers

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III.—Presentation and Style

Scientists, and medical men are scientists, have been attacked for the poor quality of their writing, and yet, as Professor Kapp (1950) remarked at a meeting of the British Association a few years ago, during the past half century talk and paper have acquired for the scientist a significance greater than they ever had before; they are now among the more important tools with which he must work. Scientists should "attempt deliberately and systematically to raise the standards of exposition, study the technique in all its aspects, and try to perfect and teach it."

Quiller-Couch (1933) quotes Barrie: "The man of science appears to be the only man who has something to say just now—and the only man who does not know how to say it." and Agnes Arber (1954), in a penetrating study of scientific enquiry, makes two comments which are very relevant:

"Scientific workers have a way... of failing to realise that to acquire command of writing demands a more exacting mental discipline than to become expert in the most refined laboratory technique," and "chaotic language reflects upon thinking and reduces it, also, to chaos."

Moreover, the work itself would often benefit from careful and intelligent exposition; Arber (ibid.) quotes a translation of a remark of Descartes—"Things which seemed true when I began to conceive them often appear false when I put them on paper." Bacon is terse and to the point—"Reading maketh a full man, conference a ready man and writing an exact man."

Careful writing, therefore, is good for the writer, but, of course, the writer must also think of the reader and attempt to put across his information or opinion with the greatest possible effect, and to do this he should study style. Editors can correct mistakes reasonably easily on the technical points raised in the first sections of this paper, but they cannot, without rewriting, give style to a badly written paper, and style is important. I would even say that writers should pay as much attention to style as to the numerous points of presentation raised above in the sections on plan and preparation of type-script. They may therefore legitimately ask "what is style?" but the answer is difficult. Gowers (1948) quotes Matthew Arnold: "Have something to say and say it as clearly as you can. That is the only secret of style." But Quiller-Couch (ibid.) is more subtle—and style is a subtle quality—he says, "Style in writing is much the same thing as good manners in other human intercourse." And again, "it is the power to touch with ease, grace, precision, any note in the gamut of human thought or emotion."

Agnes Arber (ibid.) puts it well. "If the thought is shaped with delicate economy, and has become strong, clear-cut and supple, and if the words materialise it with absolute precision, so that matter and manner are indissolubly fused, the elusive quality called style is won without wooing; but this recipe is as difficult to follow as it is easy to enunciate."

Style in writing may be a very strong reflection of the character and ability, and therefore the individuality, of the writer. There are exceptions to this, however, in that some excellent scientists are unable to express themselves well, either as a result of inherent incapacity or because they have not been taught to do so. Others express themselves badly because they do not trouble to write well, though they have the capacity, and this may indeed be a reflection of their scientific quality.

Style is the expression of individuality, but it is also related to the general literary conventions of the time. The leisureed medical writing of the seventeenth and eighteenth centuries differs from the more homely but more exact writing of the nineteenth century, which itself has given place to the more condensed and detailed, but often less lucid, writing of the present time. Our own standards need improvement, but it would, I am sure, be a mistake to take as models the writers of earlier centuries except in so far as they displayed the basic virtues of order and clarity. We can create our own fashions without losing either lucidity or grace, remembering, however, that to follow too closely any fashion in writing is to run the risk of losing individuality and therefore interest. The balance between excessive reticence and excessive intrusion of personality in writing is difficult but important; it is the test of artistry.

There must, of course, be accuracy of fact and wording, the writing must be clear and persuasive, and the language must be appropriate to the theme and attractive to the reader.
In this way the reader will be led willingly to read, but if the language is turgid or obscure, he will be repelled or wearied. In the obituary to the late Egbert Morland, formerly editor of The Lancet, the remark is made that “He held the view that the only purpose of writing was to be read. If this failed, then the whole thing became a sterile intellectual exercise” (Lancet, 1955). This seems obvious, but there are still too many papers, otherwise accurate and worthy, which, lacking the essential spark of interest, are dreary and dull—and unread.

Persuasive writing is stimulating and refreshing; it is read without strain, and the reader is barely conscious of any language barrier between the author and himself. It is at its best when the author has thought carefully about his subject, arranged his ideas in logical order, and then sought to express them with freshness and force, in language which is his own. Quality is enhanced if the author, in allowing his personality more expression than is now usual, varies the texture and emphasis of his language in conformity with the tale he tells.

It is important for the writer to express his thoughts naturally, but that does not mean that he should set them down exactly as he would speak them in conversation, for the two styles are not the same. In conversation, or in a lecture, it is possible by inflexions of the voice, or by pauses or repetition, to emphasise selected parts of the theme, but these effects are lost in a printed version. If an author dictates his paper into a recording machine he commonly realises, when he reads the transcript, that he could have done better by the slower process of writing in longhand.

But even writing in longhand is not merely a matter of setting down words as they occur to the mind. The essential features of good scientific writing are clarity and persuasiveness, and clarity depends on the choice of appropriate words and their arrangement in suitable order. In this the scientific writer becomes an artist, and like other artists who are perfectionists, he will have difficulty in choosing words, and he should seriously study his technique.

At this point a few homilies might be appropriate; they are mostly warnings about what not to do, and although such negative advice is depressing, it is necessary.

Do not labour the obvious. If you are writing on housing and wish to make the point that poverty and overcrowding are the main factors in the spread of disease, by all means say so, but do not announce it as a new discovery. One candidate for a prize wrote an essay in which he argued at great length, with much quotation from standard textbooks but little original work, that houseflies carry disease. His writing was pretentious and his ideas unoriginal, and, of course, he did not win the prize; one’s inclination was to say, with Gertrude (to Polonius), “More matter, with less art” (Shakespeare), except that what she meant by “art” was garrulity. We need both the matter and the art, but we do not need pompous writing. Yet there is sometimes a tendency to pomposity: “One of the creaking linchpins in the structure of industry is the mental health of the workers and the atmosphere of the working environment.” “The experience of medicine moulded in the crucible of war has changed the face of psychological thought.”

This is not the intelligent and incisive writing we want from medical authors, and yet the facts are true enough. The clichés of public speech have here seriously detracted from the effect the author wished to make. Clichés are indeed uninteresting and often turgid—“a wealth of clinical material” means “a lot of cases,” poverty need not be “grinding poverty,” and labour is not always “arduous labour”; animals killed for experimental purposes need not always be “sacrificed,” and, if the writing is in French, the paper should not invariably be “consecrated” to its subject.

Irony and sarcasm, and a breezy heartiness, are out of place in serious medical writing; satire may be permissible in general papers or lectures, where an amused attitude may be effective, but in the straightforward record of a piece of work or speculation these tendencies, and a tendency to levity, are to be discouraged. It is painful to read one’s own writing years later if its tone is out of keeping with its subject, and the tone tends to ring false very quickly. Medical writing can preserve its dignity and at the same time remain crisp and stimulating. Again it seems to be analogous to good manners in conversation.

It is always a mistake to write down to your readers, to treat them as children by adopting a cozy style. This fault is perhaps chiefly seen in articles written for mothers on the care of their babies.

The best prose has literary qualities which are above the technicalities of words, and are concerned with rhythm, contrast, climax and the aesthetic effect of vowels and consonants. Writers differ in their abilities, and a writer
without much innate feeling for rhythm and power would probably be unable to acquire it by study, though close and critical attention can certainly improve a style. Ability to write effective prose is a virtue, but the most effective prose is probably that which does not come easily—the glib writer, even if he has a sense of rhythm and the rest, is rarely the best. A wise and practised writer, himself a research worker and teacher of long experience, once complained to me that a colleague of his "wrote too well"—the sentences came (in large numbers) too easily, and the content did not match the presentation. Gibbon, I believe, walked about his room trying out his sentences aloud until he was satisfied, before putting them on paper. The result was immortal prose, in which matter and manner were equally great.

I do not suggest that medical writers should go as far as this, but the point is that even a genius like Gibbon would not trust his first spontaneous expressions.

Sheridan has an appropriate couplet:

"You write with ease, to show your breeding,
But easy writing's vile hard reading."

I should end this paper by repeating what I have already indicated, namely, that the best medical writing arises from a profound study of an important subject by a writer (or team) who takes the care of an artist in seeking perfection in presentation, to make his story clear, strong and lively, even though the work itself may be inconclusive. Medicine is a human activity, linked with the investigation of natural phenomena, and however apparently trivial the details of the work to be recorded may seem, they are part of a discipline which calls for greatness in those who practise and study it, and in their presentation of it.

**SUMMARY**

Advice is given on the planning and writing of medical papers, and on the preparation of typescript for the editors of the journals to which they are to be sent. Special stress is laid on orderliness in presentation of the material, and on the style of the writing, which should be lucid and appropriate to the theme.

Brevity is commended, though not at the expense of clarity, and a special point is made that the paper should be interesting, partly because the subject matter should be stimulating, and partly because the presentation should be attractive. Good work can be spoiled by bad presentation, but good presentation cannot make up for poor material.

Authors are urged to study exposition as an art, and some examples are given of faults to be avoided.

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