Medical writing and medical translation – two crossing paths

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Abstract
Transitioning from medical writing into medical translation and vice versa is one of the many opportunities professional writers and translators may encounter in their career path. In this article, we present two personal experiences in doing so. We also present some data retrieved from a short survey conducted among professionals working in both fields.

It is not rare to find medical writers who also do translations, and, likewise, medical translators who are also skilled writers. That is the case with the two of us: Laura C. Collada Ali is a medical translator as well as a writer, while Monica Milani is a medical writer who is branching into translations. We realised that we would be perfect real-life examples of this sort of career mingling and decided to share our experiences in the form of interviews with each other.

An interview with Laura C. Collada Ali

My job gives me the opportunity to learn new things every day.

What is your background, and how did you become interested in medical writing?
I've always loved languages. I love how each language is strictly linked to a particular culture, and I appreciate the beauty of their nuances. However, I don't have a favourite language. Therefore, I've ended up studying several! I graduated in Translation and Interpreting at the University of Alicante (Spain); being a Spanish native speaker, I learned English, French, Arabic, Italian, and Catalan. Translators use languages as their main working tool, yet they need to get familiar with the field they want to work in. For me, it was medicine.

I also like very much working as a freelancer, as it allows me to be flexible with my schedule. I may go skiing for a couple of hours when the sun shines and then work late at night.

I was in charge of liaising with international experts involved in the revision process of clinical research protocols. I loved that role and learned so much; the languages I had studied were a great toolkit. After a couple of years, I ended up being the administrator of the Protocol Review Committee and of the New Drugs Development Committee and contributing to the collaborative protocol writing process. This is how “writing” started for me…

How did you get your first project in medical writing?
My first medical writing project consisted of preparing the reports of the EORTC Protocol Review Committee meetings. These meetings took place every 3 months and were aimed at reviewing and approving the development plans for new clinical trials in oncology. At the beginning, it was a rather challenging task as I needed to get acquainted with the oncology
field to properly understand and report the discussions. With time, I improved my confidence, felt at ease at writing these texts, and actually enjoyed a lot those high-level discussions. Over the years, I have covered many different types of scientific and board meetings as a medical writer.

**Do you have any tips for medical translators who would like to branch into medical writing?**

Always keep an eye on new regulations coming out at a worldwide level. When translating, it is often enough to know the regulations related to the source and target languages. However, when you switch into writing, you need to broaden your vision of the regulatory world.

Networking with medical writing colleagues and investing in professional medical writing training are extremely important. Thus, joining EMWA is a must!

**What kind of documents do you translate or write?**

I mostly translate regulatory documents and sporadically marketing material.

I write both regulatory and medical communication documents. It seems that writers eventually specialise either in one type of document or the other. I enjoy being challenged, so I do welcome opportunities to work on different documents. However, I might refuse to write documents on topics I’m not familiar with. When I don’t have enough knowledge of the topic, I don’t feel confident writing about it.

**Has your work evolved over time and what are the causes of this evolution?**

It has evolved a lot. I spent the first 10 years of my career working for non-profit research organisations. At that time, I did not know there was something called “medical writing”.

When I decided to become a freelancer, I realised that what I had been doing in the non-profit setting was, indeed, medical writing! I immediately joined EMWA. As a freelancer, my portfolio of clients grew to also include pharma and medical device companies. Now I have a comprehensive understanding of different approaches to clinical trials, and I have become experienced in the preparation of different kinds of documents.

**Do you think that formal training is necessary to become a medical translator?**

The best translators I know of in the field of medicine do not have a university degree in translation. Translation university studies became a reality only in the ’90s. Therefore, there is a generation of very experienced translators out there who do not have formal training and a degree in translation. That said, of course these professionals were passionate about languages and keen readers. I would say that reading in the target language about the field you are translating about is a must.

**What do you like the most in your job?**

My job gives me the opportunity to learn new things every day. Languages are my main working tool, and I very often need to do lots of research on the topic I’m writing or translating at the moment, which is something I really enjoy. I also like very much working as a freelancer, as it allows me to be flexible with my schedule. I may go skiing for a couple of hours when the sun shines and then work late at night.

**What do you like to do in your free time?**

I love reading and mountain sports, particularly, cross-country skiing and hiking.

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**An interview with Monica Milani**

**How did you become a medical writer and what is your background in the field?**

I became a medical writer somewhat by chance. I didn’t even know that this profession existed!

In my previous career, I was a researcher working in the immunology and oncology fields. While I liked my job at the time, what I enjoyed most was the communication of science. I found that more than generating data I liked presenting them – whether in manuscripts, posters, grant proposals, or so on. Driven by this interest, I started searching for jobs on the web using keywords such as “writer”, “science”, “communication” – that’s when the medical writer profession popped up. Not only did I then realise that this profession existed, but that it was in high demand.

Career changes are always daunting. Though I had a background in science, I felt it wasn’t enough and decided to get a degree in technical/scientific communication. In retrospect, I think the degree programme was useful, but not essential. More than anything else, it served to improve my confidence while exposing me to potential employers. Eventually, and with no small struggle, I landed the dream job – a junior position in a medical writing consultancy in the South of France. Voilà!

**Why have you decided to also offer medical translation services?**

After some years spent at a medical writing consultancy and a pharma company, I decided to transition into freelancing. This change prompted me to think about additional services I could offer to potential clients apart from writing. Translating is something I very much enjoy, and it allows me to utilise my skills in a different way. Therefore, I decided to offer medical translation services.

**What do you think about the evolution of the field of medical writing?**

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from medical writing. Since I speak three languages, translation naturally came to mind. I grew up in Italy, lived in the US for a decade, and I've now lived in France for more than 7 years. While I consider English as my "second native" language, I cannot say the same for French. Therefore, I am confident translating between Italian and English, and from French to English, but not vice versa. Perhaps that will come with time. Bottom line, I thought – why not take advantage of these skills and offer translation services as well? I don't think medical translations will be a big portion of my workload, but I would enjoy doing some occasionally.

**What specific skills are needed to branch into medical translation?**

Obviously, language skills are essential. I don't think it matters whether they were acquired at school or through life experience. Knowledge of technical terms is also essential.

Scientific texts have the value of being written in a relatively simple manner. The sentences are short and to the point. I believe this facilitates the work of a translator. I'm not saying that translating scientific texts is easy, but it's definitely easier than translating something literary. Overall, I think that if you master a set of languages, have a scientific background and enjoy the challenge of faithfully and accurately translating, you are set to go.

**Would you focus on any specific type of document or would you rather adopt a client-oriented approach?**

Right now, I take any opportunity within reason. I've just started as a freelancer, so I don't have the luxury of picking and choosing. I am flexible and happy to adapt to the client's needs. In the future, perhaps I'll find a niche and specialise in a few types of documents. For the moment, it is just too early to say.

**What's your opinion of medical translators who branch into medical writing? Are they well-enough prepared? Would they be capable of working on any type of documents?**

I think it is possible for medical translators to become medical writers if they have a scientific background by training or if they have worked long enough in the scientific/medical field. An analytical mind, attention to detail, and strong writing skills might be sufficient for transitioning into medical writing.

Once one understands the basics of scientific writing, they can write any kind of documents. I think this is especially true for regulatory documents, which are rigidly structured. It is less true for medical communication documents, which could be more challenging since they require a more creative or strategic approach.

**What advice would you offer to someone seeking to include medical translation in their services?**

I would say, if you feel secure in your language skills and enjoy translating, give it a try. A small dose of confidence doesn't hurt. We all go through some sort of "natural selection" for everything we do in life, including work. If medical translation is not your path, it will soon become evident.

**So, besides writing and translating, what other things you enjoy in life?**

I love to travel, hike, do yoga, read, cook, and take photos.

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**Results of a mini survey**

The authors conducted a mini-survey to discover more about the interconnection between the medical writing and medical translation professions. The survey was aimed at medical writers who had branched into medical translation, as well as medical translators who had branched into medical writing, and it was distributed both through social media and to medical writing and translation associations across Europe. The purpose of the survey was to gain a general understanding of the responders' educational background, the time spent on their activities, and the motivation behind their desire to branch out. The data we are presenting come from a sample of 16 responders; thus, they may not be representative of a larger population.

Of the 16 respondents, the majority ($n=10$) were translators who had branched into medical writing. While adding medical writing to their repertoire of services, the majority of translators (8 of 10) are still spending at least half their time on medical translations. The same is true for medical writers: 5 out of 6 indicated that they spent at least 80% of their time on medical writing tasks. In this small survey, translators started offering medical writing services after an average of 10.2 years (ranging from 1 to 32 years) of experience in the translation field. Conversely, medical writers started offering translation services much earlier, on average within 2 years of starting their careers (ranging from 0 to 5 years).

Of the 10 medical translators, half have a university degree in the translation field; 2 have no formal training, 2 attended workshops, and 1 earned a certification at a translation institute. Importantly, 9 out of 10 have a scientific background. Of the 6 medical writers, the majority ($n=4$) have no training in translation, while they all have a scientific background.

Medical translators seem to branch into writing primarily due to personal interest, job opportunity, better pay, and job security. On the other hand, medical writers seem to branch into the medical translation field following a client’s request or to increase their income. Results of this survey also illustrated that translations are in demand for e-learning, audio-visual, marketing material, patents, drug leaflets, and declarations of conformity for medical devices, in addition to more traditional applications such as regulatory and medical communication documentation.

**Conflicts of interest**

The authors declare no conflicts of interest.

**Author information**

Monica Milani has been a medical writer since 2011 and has recently started her own company, Apropos Science. She has experience in a wide range of regulatory and medical communication documents covering various therapeutic areas.

Laura Carolina Collada Ali is a medical writer and translator with more than 15 years of experience in delivering multilingual authoring and translation services for leading independent research organisations, pharmaceutical and medical device companies.

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Elise Langdon-Neuner’s story

I miss nothing from my working life. I worked beyond retirement age and resigned when an organisational change in the company would have landed me with a new boss, someone I was not prepared to work with. To be able to walk away in these circumstances was good fortune. Rumours that a medical writer had time on her hands soon spread. I was asked to contribute to a book on medical writing, participate in a study on plagiarism… and to write this article about what happens when work stops.

Well, it didn’t completely. Contacts at the Medical University in Vienna immediately approached me to edit their manuscripts. Ever since, I have had a regular contract with two departments. It’s enough to provide a steady flow of work and supplement my pension. I can pamper myself with what otherwise would be guilty little treats.

Planning for retirement never entered my mind. Neither were there any dreams to be fulfilled when time allowed. My husband and I love travelling but had managed to squeeze in treks and expeditions to far flung places whilst working. These have continued. The difference is we are older – the downside of the utopia – and need to do more to keep fit. But if the forecast is good, there’s the luxury of being able to spontaneously go off to the mountains and stay overnight at a hut. In the last 3 weeks alone, we have walked up eight mountains. To experience the sun rising and setting over the peaks and see the wildlife is pure joy. This year I have been able to photograph snow hens, wild turkey, marmots, chamois and ibex.

One change that is often absent from rosy-eyed retirement concepts is the constant presence of a partner who makes new demands on your time, for example, who might be prone to ask when lunch will be served. Some adjustments need to be worked out to give each other space, but with time this seems to have worked out well for us, meaning lunch is not always served on time and the realisation that when desperate one can get lunch for one’s self has sunken in.

Learning has become more of a pleasure than ever since giving up work. Before, I learnt to pursue a career, which then involved continually gathering more knowledge. Now I am free to investigate whichever academic avenue I please – nature, geography, social history, photography – except everything as it always did invariably comes back to writing. What I learn I’m compelled to write. Currently, my main pursuit is family history, but there is a problem. I cannot forgive medical writing for its sameness – same words, same sentence structures – and the damage this has done to my writing style.

When I left home for university, I started a weekly exchange of letters with my father and certainly from his side, these letters were a poetic narrative of everyday life spiced with wit. The correspondence continued for over 30 years until he died. In the meantime, I had become a medical editor bent on no frills or thrills writing. All those years of editing and writing for clarity have wrought their revenge. Richard Smith, when he was editor of the BMJ, warned me as much. He told me academic writing would kill my creative writing. Thus, ironically, I am taking writing courses and reading books such as 500 words you should know to expand my vocabulary.

In sum, my retirement is happy and fulfilling. Crucial to this is the freedom to choose the challenges I set myself. My still-working colleagues can be encouraged in their own future enterprise because those I have known are not of the ilk that aggrandise or define themselves by work. Retirement holds no fears for medical writers, who have diverse interests to indulge in when the punishing pressure of deadlines is lifted.

Elise Langdon-Neuner