

Medical writing in Italy in 2024:

Results of the first Italian business and compensation survey

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Abstract

In Italy, little is known about the roles, activities, and compensation of medical writers and scientific communicators. A survey, tailored to local aspects and regulations, was conducted to capture a contemporary snapshot of the medical writing profession in Italy. Most of the 68 respondents were female (84%), with the most common age category being 40–49 years (38%). Both Italian (78%) and English (78%) were commonly used for work. Despite gross annual salaries (mean €45,860) being lower than those of European colleagues, overall professional satisfaction was high (72% reported being satisfied or very satisfied with their work). Medical writing certification was uncommon (16%), but 37% of respondents were affiliated with the European Medical Writers Association (EMWA). The results highlight the need for local efforts to address professional recognition and training needs, with the crucial support of EMWA.

Introduction

Medical writing and scientific communications have been growing globally for years and it is estimated they will grow by 10% annually until 2030.¹ This growth is driven by several key factors, including European requirements to report results for authorised clinical trials registered in the European Union Drug Regulating Authorities Clinical Trials Database (EudraCT), the advent of medical device regulations, increased public awareness of health information needs post-COVID pandemic, and the growing demand for training and information about personalised therapies and new biotechnological molecules.² Italy is no exception.

Most professionals working in medical writing in Italy operate in isolation, so the first meeting of Italian medical writers and scientific communicators in March 2023, under the aegis of the European Medical Writers Association (EMWA), was a welcome development. Participants discussed the results of the most recent EMWA salary survey,¹ which highlighted many peculiarities of the medical writing environment in Italy. Participants agreed to create a local network. Both a LinkedIn group³ and an Italian Local EMWA Group (LEG) were established. LEG members developed a document to define the activities of Italian medical writers.³ Later, during the virtual EMWA congress in November 2023, the Italian LEG decided that an evaluation of the Italian environment and compensation trends was also necessary.

Several surveys have been performed by the American Medical Writers Association (AMWA) in America⁴ and in Italy by employment companies.^{5,6} While the surveys conducted by AMWA have a systematic and well-defined methodology, surveys conducted in Italy by employment companies did not define their methodology and only included results about employed professionals.

EMWA has performed periodic surveys to understand the activities of medical writers and their compensation since 2003,^{1,7–10} using an increasing level of accuracy to understand the evolving scenario of both employed and freelance

professionals, and assessing which factors influence satisfaction and compensation in individual European countries. The participation of Italian medical writers has always been poor, hindering any meaningful elaboration of country-specific data.

Therefore, an *ad hoc* questionnaire, based on the most recent EMWA surveys,^{1,8} was developed by the core group of the Italian LEG to investigate the environment and compensation of both freelance and employee Italian medical writers.

Methods

Study design

In January 2023, the core group of the Italian LEG (including the authors of this article) met to define the clusters of interest and related questions to be submitted to Italian medical writers. The survey was disseminated through EMWA's information channels and by the Italian LEG through direct e-mails to Italian EMWA members, social media posts, and word of mouth. A link to the online survey was included in all correspondence.

All medical writers living in Italy or Italian medical writers living overseas were invited to participate in the survey, regardless of professional level. Three types of participants were identified: employees or professionals working according to a hybrid model (offering both partial contractual and occasional services; with individual taxation [VAT] registration), freelancers (with VAT registration or single-person companies), and agencies (>1 employee or working partner). The survey was available online from February 1, 2024, to February 29, 2024, and data were collected anonymously, under the General Data Protection Regulation.^{11,12} Voluntary participation was considered consent for research inclusion.

Survey

The online survey was conducted in Italian and was distributed via a platform created by the technology partner Officine Telematiche,¹¹ which ensured secure and anonymous data collection. Clusters of questions included demographic data

(gender, age group, geographic area, mother tongue), education, medical writing experience, types of employment, work performed, compensation, and associated satisfaction levels. The survey was divided into four sections with specific questions for each employment type:

1. Demographics, education, and basic professional characteristics
2. Employee/hybrid responsibilities and salary
3. Freelance taxation, clients, outsourcing, income, payment, and services
4. Agency taxation, employee/freelance/client and income, payment, and services

Most questions were fixed (with single or multiple-answer solutions). When necessary, free text was enabled (i.e., salary-related questions). Fixed responses were common categories (sex, age, region of residency, mother tongue, work location, academic title and specialty, experience, hours worked, main work activity, main difficulties, employer, responsibilities, ways of finding new clients, clients, time to payment, and useful services), Likert scales (satisfaction), and free-text (taxation code, annual salary/income, and number of employees/freelancers used).

Data analysis

The answers were automatically collected through the platform technology solution, and a software procedure exported the data into a Microsoft Excel spreadsheet. In the free-text fields, some automatic corrections to the values were performed, including the systematic presentation of values; where values were null (e.g., 0000) or inappropriate (e.g., xxxxx), data were rated as null and were not considered for analysis. Analyses were performed using Microsoft Power BI to calculate medians (min, max), averages, and percentages and to prepare graphics. No inferential analyses were carried out.

Results

Demographic and educational characteristics

Most of the 68 medical writers who responded to the survey were female (84%). About three-quarters (74%) of respondents were between 30 years and 49 years of age, and 22% were older than 50 years (Table 1). There was an equal distribution among respondents in terms of employment type: 32 employees (47%) and 34 freelancers (50%); 2 respondents (3%) were owners of medical writing agencies. As this last subset was too small, it was reported in the Total, but not analysed in subgroups. Most respondents declared Italian as their first language ($n=64$,

Table 1. Demographic and educational characteristics, by occupational status

Respondent characteristics	Occupational status*					
	Total (N=68)		Employee (n=32)		Freelance (n=34)	
Gender						
Female	57	84%	25	78%	30	88%
Male	11	16%	7	22%	4	12%
Age groups, years						
<29	3	4%	2	6%	1	3%
30–39	24	35%	9	28%	14	41%
40–49	26	38%	11	34%	14	41%
50–59	9	13%	3	9%	6	18%
≥60	6	9%	2	6%	4	12%
First language						
Italian	64	94%	31	97%	31	91%
Other ^o	4	6%	1	3%	3	9%
Italian region of residency						
North	36	53%	20	63%	15	44%
Central	15	22%	4	13%	11	32%
South and Islands	13	19%	6	19%	6	18%
Non-Italian state	4	6%	2	6%	2	6%
Prevalent languages used at work						
English	53	78%	23	72%	28	82%
Italian	53	78%	22	69%	29	85%
EMWA affiliation						
Yes	25	37%	13	41%	10	29%
No	43	63%	19	59%	24	71%
Medical writing certification						
Yes	11	16%	4	13%	7	21%
No	57	84%	28	88%	27	79%
Academic title						
Advanced [^]	41	60%	17	53%	22	65%
Master's degree	20	29%	10	31%	10	29%
Bachelor's degree	3	4%	3	9%	0	0%
Other [§]	4	6%	2	6%	2	6%

Percentages were calculated by occupational status per column.

* 2 respondents are small business owners; their responses are included in the Total columns.

^o English ($n=2$), Spanish ($n=1$), French ($n=1$) [^] MD, PhD, MBA, or equivalent [§] Master's or equivalent

94%), but more than three-quarters reported that their prevalent languages at work were English ($n=53$, 78%) and Italian ($n=53$, 78%). Only 11 respondents (16%) had obtained professional medical writing certification, though more than half had advanced academic titles ($n=41$, 60%; Table 1).

The distribution of gender, age groups, and academic titles was similar among both employees and freelancers. Employees were primarily located in Northern Italy ($n=20$, 63%), whereas freelancers were more commonly found in either the Northern ($n=15$, 44%) or Central regions ($n=11$, 32%). A higher percentage of

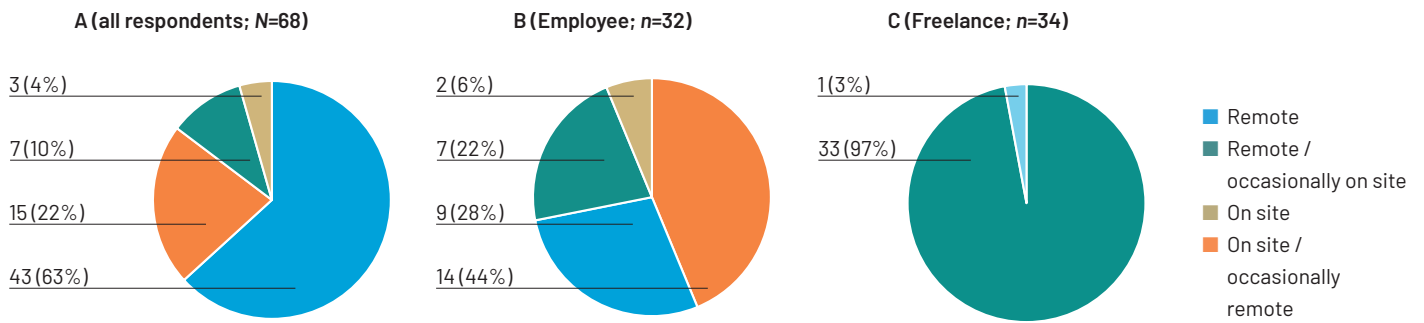


Figure 1. Work location

employees were members of EMWA ($n=13$, 41%) compared to freelancers ($n=10$, 29%), though employees were less likely to hold medical writing certification (4 employees [13%] vs. 7 freelancers [21%]; Table 1).

Professional characteristics

More than half of the respondents reported <10 years of medical writing experience ($n=40$, 59%); Table 2. The primary activity most frequently reported was medical communications ($n=20$, 29%). Freelancers were more likely to translate (0 employees [0%]; 4 freelancers [12%]) and

moderate advisory boards (1 employee [3%]; 4 freelancers [12%]) as their principal activity, while employees were more likely to write regulatory documents (8 employees [25%]; 1 freelancer [3%]) and promotional material (9 employees [28%]; 7 freelancers [21%]).

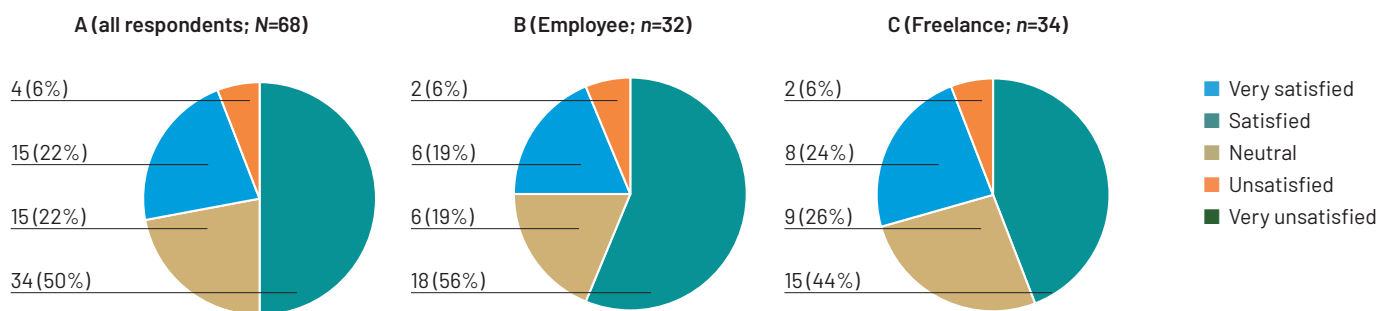
Most respondents worked 31-40 hours per week ($n=30$, 44%); only 4 (6%) reported working more than 50 hours per week. Half of the employees ($n=16$, 50%) worked 31-40 hours per week while more than half of the freelancers ($n=19$, 56%) worked 30 hours per week or less (Table 2).

Most respondents ($n=43$, 63%) worked exclusively from remote locations (Figure 1A). Fourteen employees (44%) worked predominantly on site and remotely on occasion, and nine employees (28%) only worked remotely (Figure 1B). Almost all freelancers ($n=33$ 97%) only worked remotely (Figure 1C).

Work and salary satisfaction, location, and workload

Nearly three quarters of respondents ($n=49$, 72%) reported being satisfied or very satisfied with their work, with no difference between

Work satisfaction



Salary satisfaction

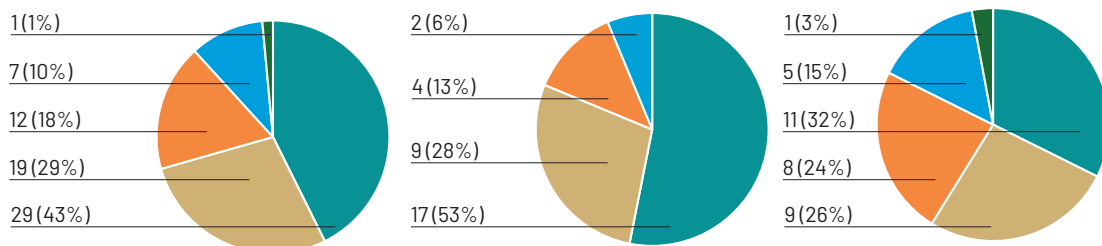


Figure 2. Satisfaction with work and compensation

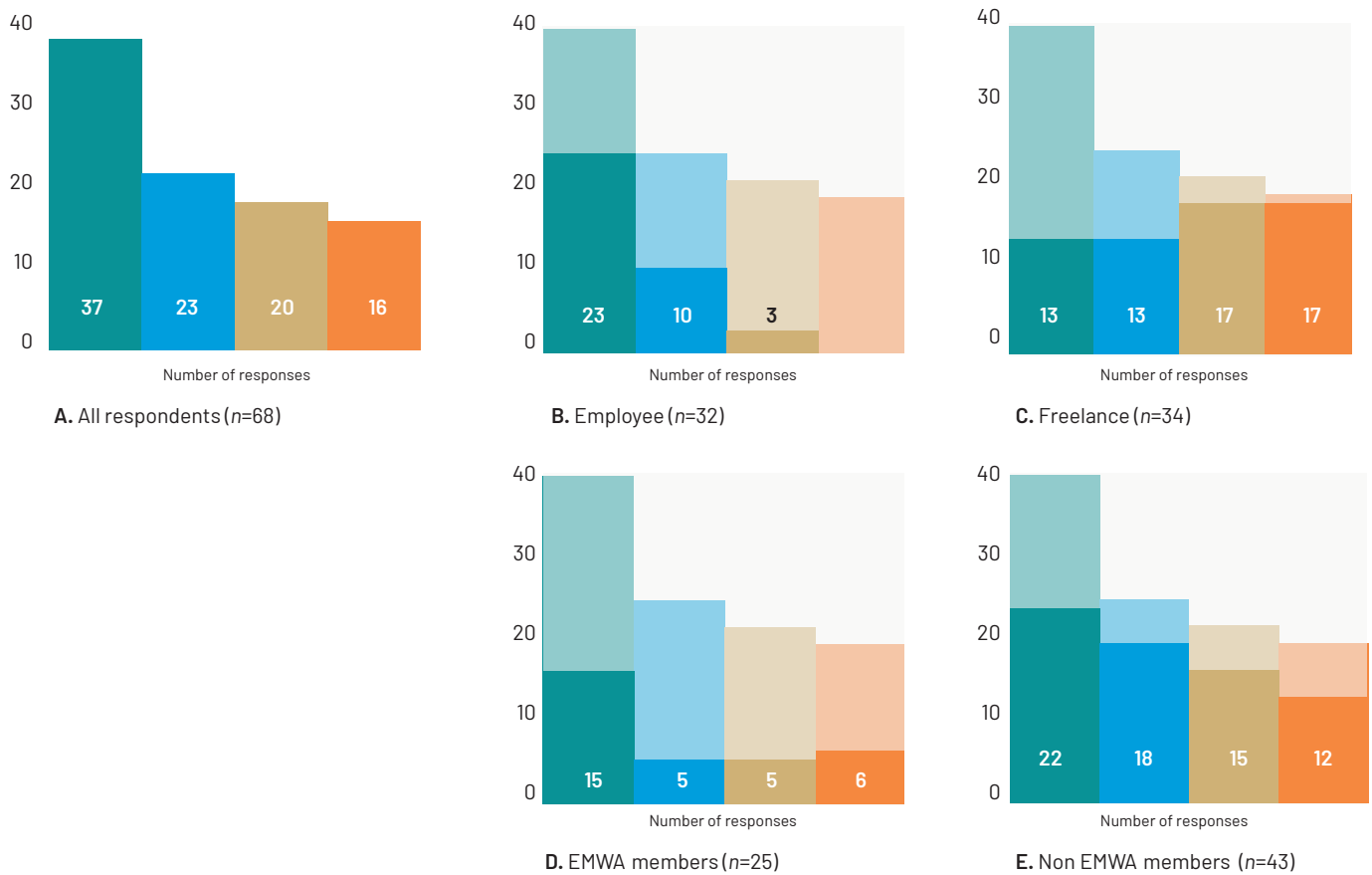


Figure 3. Major difficulties encountered at work

All respondents: (A) and subanalysis according to different status: employee (B), freelance (C), EMWA member (D), and non-EMWA member (E). The colours, from left to right, refer to: ■ Deadlines ■ Professional education and courses ■ Finding new customers ■ Delayed payments

employees and freelancers. More than half of respondents ($n=36$, 53%) reported being satisfied or very satisfied with their salary, more often for employees ($n=21$, 59%) than freelancers ($n=16$, 47%). Freelancers were more likely to be unsatisfied or very unsatisfied with their compensation ($n=9$, 27%) than employees ($n=4$, 13%; Figure 2).

Difficulties encountered at work

The main reported source of difficulties at work included deadlines ($n=37$, 54%), followed by professional education and courses ($n=23$, 34%; Figure 3A).

While strict deadlines were the main issue for most employees ($n=23$, 72%; Figure 3B), finding new clients ($n=17$, 50%) and delayed payments ($n=17$, 50%) were the most frequently reported issues by freelancers (Figure 3C).

Professional education was of concern for both employees and freelance medical writers, but less for EMWA members ($n=5$, 20%; Figure

3D) than for non-EMWA members ($n=18$, 42%; Figure 3E). Finding new clients was also reported to be an issue for a higher proportion of non-EMWA members ($n=15$, 35%) than for EMWA members ($n=5$, 20%).

For most freelancers (19 of 34 respondents), the mean time from invoice to payment is 60 days. For five freelancers, the mean time to payment was 90 days or more (Figure 4).

Mean time to payment, days from invoice

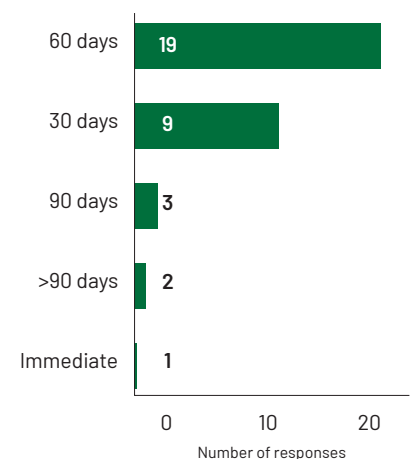


Figure 4. Time from invoice to payment for freelancers (n=34)

Gross annual salary of employees

Almost half of employees worked for a communication/promotional agency (n=15, 47%; Figure 5A) The median annual full-time gross income of Italian employees was €40,000 (€14,000-€110,000; mean €45,860; Figure 5B).

Relationship between employee salary and responsibilities

Median annual salaries were highest (€45,000 [mean €50,210]; Figure 5C) among employees with mentoring responsibilities (n=27, 84%), followed by those with team management responsibilities (€41,000 [mean €48,530]; n=26, 81%; Figure 5D) and those with project management responsibilities (€40,000 [mean €45,730]; n=31, 97%; Figure 5E).

Freelance clients

About two-thirds (n=22, 65%) of Italian freelance medical writers have communication/promotional agencies as their main clients (Figure 6A). Freelancers mainly find new customers via their professional or social networks and clients or colleagues (n=23, 67%; Figure 6B). Many freelancers (n=14, 41%) outsourced their activities to colleagues (Figure 6C).

Freelance annual income and hourly rates

The median annual income for Italian freelance medical writers was €32,000 and the mean annual income was €41,900 (Figure 7). The overall median hourly rate was €50 per hour and the overall mean hourly rate was €62 per hour.

Relationship between salary and experience

Median annual salary was similar (about €40,000/year) for the 24 (77%) employees with up to 15 years of experience. The median annual salary of the seven (23%) employees with more than 15 years' experience was €70,000 (mean €68,000; Table 3). Both annual income and

Table 2. Professional characteristics, by occupational status

Respondent characteristics	Occupational status*					
	Total (N=68)		Employee (n=32)		Freelance (n=34)	
Medical writing experience range, years						
≤2	7	10%	2	6%	5	15%
2-5	19	28%	11	34%	8	24%
5-10	14	21%	6	19%	8	24%
10-15	15	22%	6	19%	7	21%
>15	13	19%	7	22%	6	18%
Main medical writing activity performed						
Medical communication [^]	20	29%	10	31%	10	29%
Promotional materials [°]	18	26%	9	28%	7	21%
Regulatory documents [§]	9	13%	8	25%	1	3%
Advisory board moderation	5	7%	1	3%	4	12%
Web communication	4	6%	1	3%	3	9%
Translation	4	6%	0	0%	4	12%
Lay communication	3	4%	1	3%	2	6%
Editing/copywriting/proofreading	2	3%	1	3%	1	3%
Medical education	2	3%	1	3%	1	3%
Other (bioethics communication)	1	1%	0	0%	1	3%
Working week, hours						
1-10	1	1%	0	0%	1	3%
11-20	8	12%	2	6%	6	18%
21-30	13	19%	1	3%	12	35%
31-40	30	44%	16	50%	13	38%
41-50	12	18%	11	34%	0	0%
>50	4	6%	2	6%	2	6%

Percentages were calculated by occupational status per column.

* 2 respondents are small business owners; their responses are included in the Total columns.

[^] Journal papers, abstracts, congress materials, etc. [°] Leaflets, visual, carrier, newsletter, etc.

[§] Study protocol, clinical study reports, dossiers, etc.

hourly rates for freelancers increased with medical writing experience, especially for those who had worked as a medical writer for more than 15 years (Table 3). For the same level of experience, median annual compensation for Italian freelancers was less than that for Italian

employees with up to 10 years' experience. Once freelancers had more than 10 years' experience, their median annual compensation exceeded the median annual salaries of employees with the same level of experience (Table 3).

Table 3. Salary and compensation according to medical writing experience and occupational status

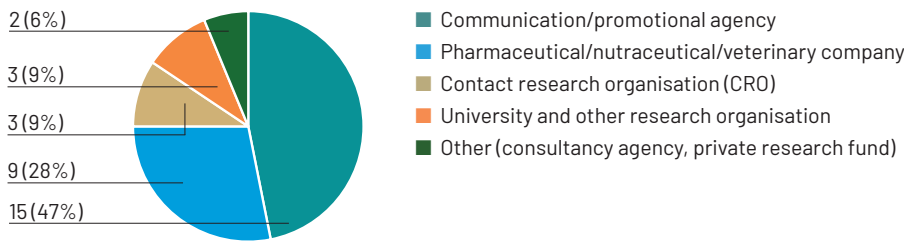
Experience [°] N=66	Employee	Freelance	
	Median annual salary (mean, min-max, n)	Median annual compensation (mean, min-max, n)	Median hourly rate (mean, min-max)
<2 years (n=7)	€40 K (n=1)*	€22 K (25.0, 15-40, n=5)	€40/h (41.0, 30-55)
2-5 years (n=19)	€37 K (37.5, 14-70, n=11)	€23 K (22.1, 8-37, n=8)	€50/h (43.1, 10-75)
5-10 years (n=14)	€39 K (42.2, 30-62, n=6)	€30K (33.9, 12-87, n=7)*	€50/h (53.6, 30-85)
10-15 years (n=13)	€38 K (40.1, 30-55, n=6)	€48 K (54.0, 20-100, n=5)**	€50/h (56.0, 35-90)
>15 years (n=13)	€70 K (68.0, 47-110, n=7)	€82 K (81.7, 36-150, n=6)	€90/h (121.7, 60-300)

Percentages were calculated by occupational status per column. * 1 missing value ** 2 missing values

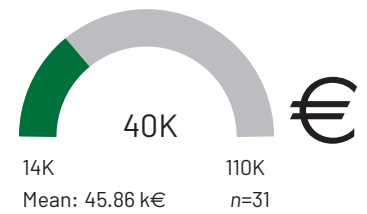
[°] The median annual salary according to seniority was evaluated only for employees and freelancers.

The two agency owners reported a seniority of 10-15 years but were not included in the salary survey results

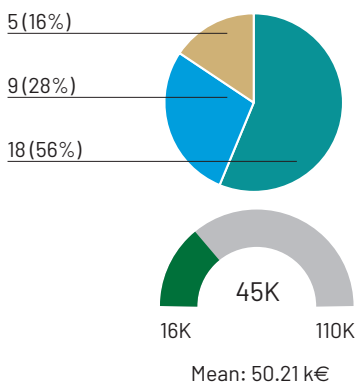
A. Type of employers (n=32)



B. Median annual salary

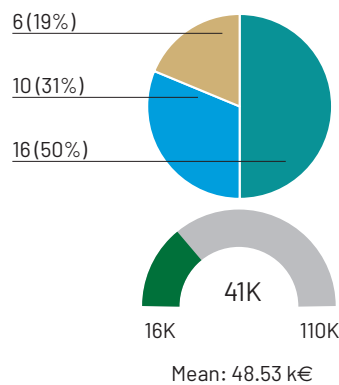


C. Mentor responsibility (n=32)



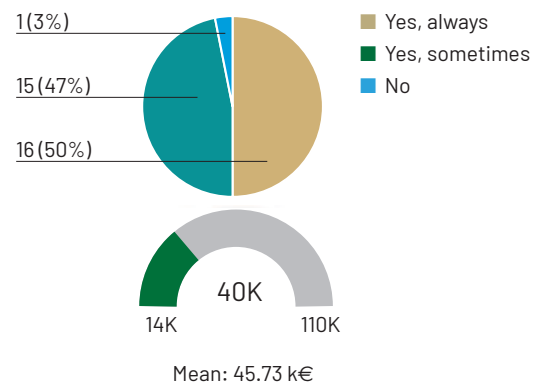
Median annual salary for employees with mentoring responsibilities (yes sometimes/always) (n=31)

D. Team management responsibility



Median annual salary for employees with team management responsibilities (yes sometimes/always) (n=31)

E. Project management responsibility

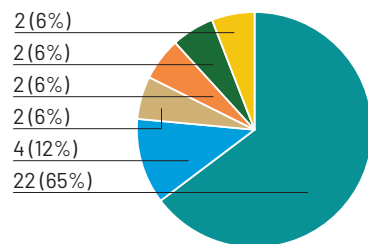


Median annual salary for employees with project management responsibilities (yes sometimes/always) (n=31)

Figure 5. Employers, annual salaries, and responsibilities of employee medical writers

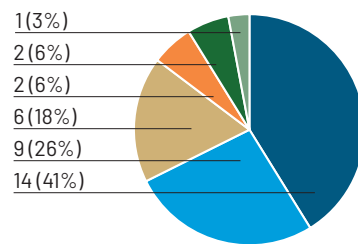
Employment type (A) and gross annual income (B) of employees, and income by mentoring (C), team management (D), and project management (E) responsibility

A. Prevalent clients (n=34)



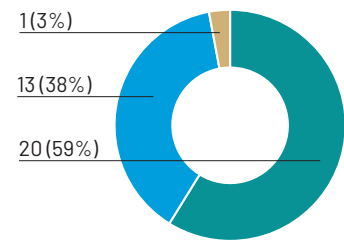
- Pharmaceutical/nutraceutical/veterinary company
- Communication/promotional agency
- Translation agency, health authority
- Publishers
- Contract research organisation (CRO)
- University and other research organisation

B. Prevalent ways to find new clients (n=34)



- Professional network/social network
- Contact from colleagues/clients
- Consolidated clients
- Other (direct email contact)
- Freelance directories
- Personal website

C. Outsourcing to other freelancers (n=34)



- Yes sometimes
- No
- Yes

Figure 6. Freelance customer and business characteristics

Services used by freelancers

The survey asked freelancers for their “economic activity classification” (classificazione delle attività economiche - ATECO) code, a code used in Italy to identify economic activities for tax and statistical purposes. Italian freelance medical writers are currently registered with at least 10 different ATECO codes (Table 4). Freelancers were asked which services they most needed. Accountancy was the most requested service (n=27, 79%). Education (n=18, 53%) and IT support (n=14, 41%) were also widely required (Figure 8).

Discussion

Medical writing is a female-dominated profession, and the results of this survey confirm that this is also the case in Italy, with a similar percentage of female respondents as those reported in the most recently published EMWA surveys.^{1,8} The observed population is mostly aged between 30–50 years old, with 83% of respondents working remotely or remotely with some days in the office. According to the 2023 data from the official Italian Institute of Statistics (ISTAT), 73.9% of Italian women aged between 25 and 49 years without children are employed. This percentage drops to 53.9% for women with at least one child under the age of 6 years.¹³ Caring for young children or dependent relatives at the same time as working entails devoting time to family. Women with family responsibilities are unable to participate in the labour market to the same degree as women without these responsibilities.¹⁴ This makes the flexibility of medical writing, especially part-time freelance work, particularly attractive to professional women.

The mean salary for employed medical writers in Europe grew from €54,924 in 2006 to €67,205

Median annual compensation and hourly rate

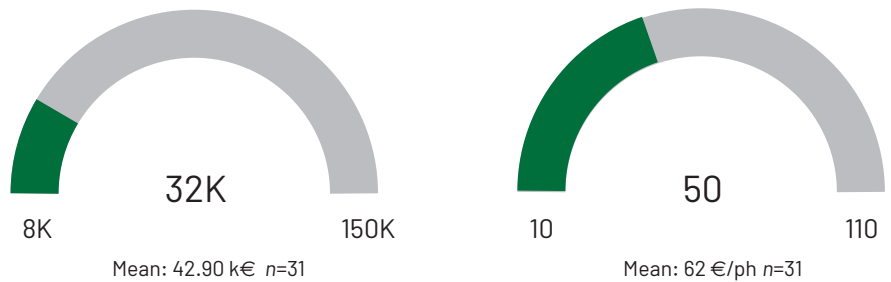


Figure 7. Freelance annual income and hourly rates

in 2021.¹ The 2023 results from the Italian survey highlight that Italian colleagues have a lower mean salary of €45,860 (the median Italian annual wage in 2022 was €30,284).¹⁵ Despite difficulties in drawing direct comparisons to data from previous EMWA surveys, the average annual income declared in Italy in 2023 is lower than that recorded in Europe almost 20 years ago; this value is confirmed to be lower than in other countries also considering that the mean annual salaries in Italy in 2021 were close to the European mean.¹⁶ Furthermore, most Italian medical writers and scientific communicators reported having mentoring, team management, and project management responsibilities, which seems to be unrelated to a higher salary in Italy, unlike in Europe.¹

Similarly, the overall mean hourly rate of Italian freelancers was €62 per hour, far lower than the mean rates of €82.20 per hour in the EMWA 2023 freelance survey,⁸ €78 per hour in the 2021 EMWA salary survey,¹ and €81 per hour in 2017.¹ In line with previous EMWA surveys, the median hourly rate did not increase steadily

with increasing medical writer or communicator experience, though rates were similar among European professionals with more than 15 years of experience (€82 vs €80).¹ This value is difficult to justify in the local market considering that mean hourly rates in Italy are practically identical to the European mean.¹⁷

Our survey also explored, for the first time, the average annual income of freelancers. Considering that the Italian cohort included a high proportion of freelancers working less than 30 hours per week, the mean annual income identified in this survey (€41,900) is comparable with that of European employee medical writers working up to 20 hours per week (€39,500).¹ However, the average annual income for freelancers is far below European levels.^{1,8}

The majority of Italian medical writers and scientific communicators report being satisfied or very satisfied with their job, which is consistent with satisfaction outcomes from previous EMWA surveys.¹ The percentage of Italian freelancers unsatisfied or very unsatisfied with their compensation was higher than that reported by European freelancers (19% vs 6%).¹ Considering the lack of relationship between compensation and medical writing experience or responsibility and the high workload declared by most of the participants, this sentiment is not surprising. Moreover, medical writers face many different challenges. Time constraints often stem from clients’ lack of awareness about the time required for content production or the difficulties in scheduling various production phases. While resolving time constraints can be challenging, the need for training could be more easily addressed. This is not only because of the widespread availability of private training organisations, but also EMWA’s expanding training programme. The reduced need for education observed among

Table 4. Economic activity classification (“classificazione delle attività economiche – ATECO”) codes used by freelancers

ATECO taxation code	N	%
74.90.99	10	29%
74.30.00	4	12%
72.11.00	3	9%
90.03.09	3	9%
70.22.09	2	6%
56.45.45	1	3%
58.11.00	1	3%
70.21.00	1	3%
72.19	1	3%
Unspecified	8	24%



Figure 8. Services used by freelancers

EMWA members who responded to this survey confirms this trend. Similarly, EMWA members demonstrated less need for networking opportunities with colleagues and simpler access to potential customers.

In Italy, medical writers have access to a broad ecosystem of specialised services, such as accountancy, IT, and statistical support (Figure 8). These services provide significant support to medical writers, highlighting the economic spin-off that medical writing generates. Trade associations can play a critical role in not only offering contracted services, but also fostering a network of professionals who can support the medical writer with customised solutions, such as technology partners.

Surprisingly, to date, there is no uniformity in the identification of the medical writing profession in Italy. The authors suggest that the creation of a specific ATECO code for medical writing and scientific communication activities should be the starting point for proper professional recognition in Italy.

The sample of Italian responders to this survey ($n=68$) was far higher than those in previous EMWA surveys, where no more than eight Italians responded.^{1,10} This high response rate was

achieved thanks to continuous engagement by the Italian LEG, the personal involvement of the members of the Italian Medical Communicators LinkedIn Group, and the support of the EMWA Executive Committee. The variability of responses is high, and results are certainly influenced by the heterogeneity of types of services, levels of experience, and geographical origins of the respondents. However, the sample was too small for reliable and meaningful sub-analyses.

This questionnaire was created by IT professionals *ad hoc* to ensure standardised data collection; some questions were designed specifically according to occupational status, and the platform streamlined their presentation accordingly. Previous EMWA surveys have used commercially available surveys without this functionality.^{1,7,8}

The results of this survey should be interpreted with caution. Despite achieving a higher participation rate among Italian medical writers and scientific communicators compared to other surveys promoted by EMWA, the number of participants was still relatively small. Additionally, since the survey was completed voluntarily and respondents remained anonymous, the data cannot be validated. Consequently, these findings cannot be generalised to the broader

global or even the local Italian medical writing community.

Conclusion

This first Italian survey provides a panoramic overview of the Italian medical writing profession. The survey reveals the heterogeneity of services offered and the various opportunities available, paving the way for future in-depth studies. Key aspects of the Italian medical writing landscape include the lack of standardisation in professional recognition at both sector and taxation levels and comparatively low compensation rates. Italian medical writers are underpaid compared to European colleagues. This survey also underlines the need to raise awareness about the training and networking opportunities offered by EMWA, with targeted strategic development at local levels.

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Disclaimers

The opinions expressed in this article are the authors' own and not necessarily shared by employers or EMWA.

Disclosures and conflicts of interest

The authors declare no conflicts of interest.

Data availability statement

For enquiries about data and other supplemental information, please contact the corresponding author.

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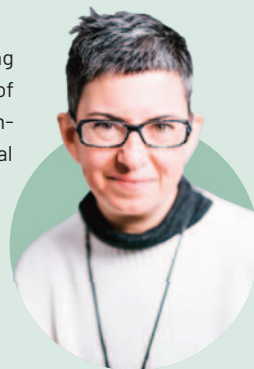
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