was our medicine cabinet and especially the antimalarials.

MEW: What advice can you give someone who would like to do something similar?

JC: If you are interested in promoting good scientific writing among a wider community, you might want to register with AuthorAid (*http://www.authoraid.info/en/*). The exchange with researchers from developing countries can be helpful to both parties. Often by answering questions you are forced to think about a topic more thoroughly.

In general, being abroad is an experience that will teach you many lessons, especially about the lesser known disadvantages of developing countries. Make sure to go with an open heart and mind, and prepare to be surprised in many ways.

Conclusion

Julie shared her adventure with us. We can learn from her experience in many different ways. I have seen many medical writers who are not aware of their strength, only recognizing what they do not know instead of focusing on what they know. The role of a medical writer offers many opportunities, we just need to go out there and dare to do something different. If you are new to the profession and have a specific knowledge – try creating your own niche. You then should start to prepare for a new role by building upon existing knowledge (regardless how big or small it might be) and focus on your strengths. Whether you are travelling to a different country or taking on a new job – start with an open mind, set your expectations realistically, and prepare for the unexpected.

We hope that Julie's example encourages you to dare engage in new endeavours. If she managed to take on a new job in Africa with three young kids, you will be able to achieve your dreams too!

Julie Chaccour can be contacted at jchaccour@googlemail.com

Letter to the Editor

Dear Editor,

EMWA and other organisations (eg, AMWA, ISMPP) support the principles of Good Publication Practice (GPP). As a co-author of the recent GPP3 guideline1 and leader of the professional medical writer section, I was concerned by a recent article[2] in the latest edition of EMWA's Medical Writing journal. In their article, Prashant Auti, Rishabh Pandey, and Vatsal Shah (SIRO Clinpharm Pvt Ltd, Thane, India) include a section in which they "…review the important steps in the drafting of a manuscript."[2] At best, their process description is ambiguous. At worst, their process description is clear, but any of your readers who follow it could risk noncompliance with GPP3.

As per GPP3, the writer "…must receive direction from the authors at the earliest possible stage (for example before the outline is prepared)."[1] Auti and colleagues do not stress, nor even mention, this critical first step in the process. Indeed, Auti and colleagues do not bring the author into their process until the writer has had a content outline approved by the client (see p 38), has written a shell draft that includes "…bulleted text for the introduction and discussion and text paragraphs for the methods and results section." (see p 40), and has had the shell draft approved (they don't say by who, but I fear it is not the author).[2] Even if this omission of early author direction and input is inadvertent, it is not acceptable. In addition, Auti and colleagues never explicitly state that it is the authors who must give final approval of the manuscript. Auti and colleagues don't even include authors in their list of "approvers".

I respectfully ask that, consistent with COPE guidelines, you ask the authors to revise the article and publish a correction.

Sincerely,

Professor Karen L. Woolley, PhD CMPP

References

1. Battisti WP, Wager E, Baltzer L, Bridges D, Cairns A, Carswell CI, et al. Good publication practice for communicating company-sponsored medical research: GPP3. Ann Intern Med. 2015;163(6):461-4.
2. Auti P, Pandey R, Shah V. Project management in medical publication writing: A less explored avenue in pharmaceutical companies and clinical research organisations. Medical Writing. 2016;25(1):36-44.

Author Response

Dear Editor,

We thank Dr Woolley, co-author of GPP3, for providing her insights on our manuscript.

We have critically evaluated the comments from Dr. Woolley. As professional medical publication writers, we understand the importance of every stakeholder in the publication process and did not intend to undermine the role of authors. We have already mentioned the importance of authors throughout the manuscript. Our article proposes a project management process for publication writing projects with special emphasis on work in agencies. Our article in no way should be interpreted, analyzed or considered an extension of publication writing guidelines as it specifically focus on business aspects, process and day-to-day activities of CROs or agencies.

In Table 3 (page 41) of the manuscript, we discussed the potential risks that can arise during publication writing process and their possible resolution/action plan. In the second row from the bottom, we discussed the risk of availability of minimal data sources, which usually occurs during pre-drafting phase (preparatory activity). The action plan proposed for this is a kick-off meeting with the authors to get the credible data sources and to decide future directions and flow of the manuscript. This in turn highlights the importance of receiving the direction from the authors in the publication process at the earliest possible stage.

We would like to explain here that the word 'client' is used as collective term for the ease of mentioning stakeholders in the light of agency work. We have clearly mentioned in the initiation section (page 38, column 2) that the scope should be discussed in great detail with the client so that the expectations of both parties are aligned thereby indicating the early involvement of stakeholders including authors.

Also, Dr. Wooley mentioned that we did not include authors in the final approval of the manuscript. We would like to clarify that certain stakeholders (researchers, statistics head, and the clinical team head) mentioned in the final approval of manuscript (page 40, column 2) are indeed potential authors.

Since a few terms like authors, researchers, clients and approvers are used interchangeably from the CRO standpoint, this may have led to the confusion and misinterpretation. However, we agree with editor's suggestion to make minor changes in our paper to address Dr. Woolley's concerns.

Prashant Auti

Editor's Response

We agree with the comments from Dr. Woolley, and we appreciate the authors' response. The original pdf of the Auti et al. article on the journal website (journal.emwa.org) will be replaced by a revised version that addresses our and Dr. Woolley's concerns.