The Geoff Hall Scholarships (GHSs) are given in honour of a former President of EMWA. Geoff was a very special person, an extremely valued member of EMWA, and a very good friend to many EMWA members. He firmly believed that the future of EMWA lies in our new and potential members, and so it’s a very fitting legacy that we have the scholarship awards in his memory.

The scholarships are awarded annually on the basis of an essay competition, and the title of this year’s essay was “Good Medical Writing Saves Lives”. There were even more entries than last year, and it was not an easy task to choose just two winning entries. However, two were eventually chosen, and the very worthy winners were Sophia Whitman and Cirsten Verleger.

Sophia Whitman obtained degrees in immunology and psychology, and then went on to coordinate studies in the field of health psychology, which gave her an appreciation of the importance of robust research. She then left this career to follow her dream to become a doctor. The reality was very different and she began to look for a career where she could still make a difference to patients’ lives without sacrificing the quality of her own life. Following the birth of her son, she took part time work as an intern medical writer with Stgilesmedical. She gained a wide range of medical writing experience and was offered a permanent position after 6 months. Sophia tells me, “entering the competition for the GHS was not so much an essay writing exercise, but more like a personal mission to justify the incredibly hard decision I took to leave medicine. I also found the process of writing the essay had crystallised what I enjoyed most about medical writing and facilitated my decision to take the next step along my career path”.

Cirsten Verleger trained as a doctor in Germany, and then went to the UK and France to work as a junior doctor. She had been in love with foreign languages since her adolescence, and working in the UK and France brought this love to full blossom and led her to change careers to become a translator for medical and pharmaceutical texts with a degree in business translation. Cirsten explains, “Since I experience the importance of good medical writing on a daily basis during my work as a translator, I couldn’t agree more with the title of this year’s GHS Award: Good Medical Writing Saves Lives. I know first-hand how easily a message can become ambiguous by grammatical carelessness and I am passionate about well-structured texts that help the reader to follow the narrative in the best possible way. Being one of the two winners of this year’s award is first of all a great honour for me. It is also very encouraging and a wonderful jump-start into my new career as a medical writer. I am very much looking forward to regularly attending the EMWA conferences and to engaging fully in EMWA’s rich training programme in the upcoming years.”

Sophia’s and Cirsten’s winning essays are presented overleaf, and we wish them the very best at the start of their very promising medical writing careers. For those of you inspired by their achievements, this year’s essay title is “Creative Medical Writing: An Oxymoron?”

I hope to read your essays soon! Bestest.

Lisa
Making the decision to leave medicine was the hardest of my life. What if all those years of study, thousands of pounds of debt and sacrifices I made were not wasted but instead prepared me for my most gallant career yet – medical writing? Believing the statement “good medical writing saves lives” is how I sleep at night. The objective of this essay is to substantiate this claim with evidence, so I can obtain some solace that the decision I made 3 years ago was justified.

Some of the first examples of how good medical writing saves lives come from the great physicians such as Hippocrates and Galen, who were the first to chronicle their medical findings and methods. This historic medical writing allowed the emerging knowledge to be perpetuated and developed into what we know as modern medicine. It served as the progenitor for all medical teaching and the number of lives it has saved is unquantifiable.

Medical writers today are tasked with translating the increasingly complex scientific research for myriad audiences. If this writing is of good quality, examples of how it can save lives may include effective drugs reaching patients quicker, more health care professionals learning about current research that affects their patients, and patients themselves becoming equipped with the knowledge to recognise the signs of life-threatening disease earlier.

Taking the first example above, what difference does good medical writing make to the availability of new drugs? To have a New Drug Application approved by the US Food and Drug Administration, a drug sponsor must submit a vast array of documentation about the drug’s pharmacology, the results of multiple animal and patients in a timely manner. Promising new immunotherapies and gene-targeted drugs are in the pipeline and medical writers are optimising the development process at each stage: from preparing the regulatory documents for the US Food and Drug Administration, to assisting with the efficient publication of the research. Once approved, medical writers become involved in the delivery of a salient message to educate health care professionals involved in the treatment of melanoma patients. In addition, writing the patient education materials, including the potentially serious side effects of the drugs, empower patients to make informed decisions about their treatment. Once the drug is post-marketing, medical writers continue to play an important role in the surveillance of the drug’s safety and feeding this back to the relevant regulating bodies.

What happens when medical writing is of poor quality? Just as how good medical writing saves lives, poor medical writing can lead to the loss of lives. One of the most infamous examples being the measles, mumps and rubella (MMR) vaccine scare, engendered by the publication of erroneously interpreted data and this message being propagated by the media. In 1998 an article was published in the Lancet claiming that the MMR vaccine was responsible for the development of autism. These were picked up by reporters who sensationalised the message, while at the same time neglecting to report the more robust research published that completely disproved the link. Since this controversy, which peaked in media coverage in 2002, the fall in uptake of the MMR vaccine has correlated with the many outbreaks of measles and mumps, with the most severe being in Swansea where 800 people contracted measles and one person died.

The work of good medical writers described in this essay alone will save hundreds of lives per year. Compare this to the estimate that a general practitioner will save approximately 4.71 lives per year and suddenly the medical writing profession draws gravitas and the size of the responsibility they bear swells. As the discontent of doctors in the NHS intensifies, perhaps more will choose to apply their knowledge by becoming medical writers; a profession reported to have a high level of satisfaction. This essay has described some of the ways in which good medical writing saves lives: I may have traded my stethoscope for a keyboard but my passion and commitment to bring real benefit to patients has never been stronger and the responsibility I bear has never been greater.

Sophia Whitman
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References
Good medical writing saves lives – and even a little comma can make a difference

Hello, I am a comma, and I dedicate this essay to the medical writer who gave my life a new meaning and direction. He might even have saved me. I was in quite a depressed state because people did not seem to care about me anymore. Then this guy came along and offered me a completely new perspective. Let me proudly add that I helped save the lives of many patients during the adventure I am going to tell you about.

The first day – a non-defining relative clause
I was hired by the medical writer because he needed to insert a comma in a text he was editing. The text was about HLA-compatibility testing in people considering bone marrow donation for patients with leukaemia. Before I came in, the text said that “especially first-degree relatives who have a higher probability of being HLA-compatible will be tested”.

Having read this, I wondered how many first-degree relatives might be put off getting tested since they would not know if they fulfilled this criterion and would not know how to find out. Of course, the sentence meant to say that any first-degree relative would fall in the category of priority testing. Fortunately, together with a befriended comma, I was able to fix the sentence; it then read: “especially first-degree relatives who have a higher probability of being HLA-compatible will be tested”. This sounded much more encouraging for first-degree relatives to undergo testing, I would say.

Luckily, the text had not yet been published, translated, or copied by other writers, and the mistake had not been propagated and got out of control.

The second day – a clear and concise manuscript
While I was sitting in my text on compatibility testing, I was able to watch the medical writer work on a manuscript about a promising new therapy for some rare metabolic disease leading to premature death. Apparently, the therapy had the potential to turn the so far life-threatening disease into a chronic, non–life-threatening one. Obviously, the researchers who had identified the new therapy were eager to make their discovery available through a renowned medical journal as quickly as possible.

My noble medical writer, though being considerably pressed for time, did not rush, but carefully drafted each paragraph to make the important point stand out. He equally carefully met any editorial requirements. This was clever since writing the draft properly would only take two days longer and was likely to save the manuscript from being subjected to a revision cycle. Anybody knows that submitting a revised version can easily cost months – and thereby the lives of many patients, if you think about it. Additionally, a clear message is more likely to be taken up by fellow researchers, who might then take the research a step further.

I decided that I wanted to help make this important information available to other researchers, doctors, and patients as soon as possible. Unfortunately, it took some time to find a comma willing to replace me in the compatibility-testing text, and so I was late and did not manage to get into the manuscript.

A couple of weeks – catching public attention
But luck was on my side: I saw this other text lying on the desk; it was entitled Take a moment for life and started with “You could save the lives of your loved ones just by reading two pages”. Who would not want to be in that text? It was not easy to get in, because my medical writer friend never missed any mandatory comma; however, I did find a spot where I could sneak in.

This was such a beautifully drafted text. Subheadings led the reader dutifully through it, and the rhythm created a smooth flow. It did not take long before the text was published – and wow! – I never had so many people visit me. Anybody who read the title wanted to read the text, and anybody who started to read the text read it through to the end. Thousands of readers learned the important message of what to do in the event of somebody suddenly collapsing.

Obviously, medical journalists were happy to draw on this resource, and translators loved it because it was unambiguously written. Thereby, the message was spread even more: in only a couple of weeks, there was nobody on the planet who had not become an expert in this aspect of first-aid.

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The climax – arriving at the forefront of research
But the best part of my adventure was still to come. Believe it or not, I made it into a research project worth a few billion dollars. I have to omit the details on how I got there; of course, my dear medical writer played a part in it.

The story is remarkable since one of the main reasons for getting the grant was the good reputation the researchers had gained for their clear and concise publications and for the accurate and reliable reports of their results. It did also help that their research papers were indeed read as important information resources and not merely subjected to data-extraction tools.

I would make the bold claim that the investigation of the relevant therapy might never have received funding – and the patients might never have received this life-saving remedy – if it was not for the fact that some medical writer did a really good job.

Not the end – the future
You probably noticed that I have become a big fan of my medical writer friend. He is a lovely person altogether and seems distinctly happier with his job than were the writers I had been working with before. I hope my essay helps to spread the message: good medical writing does save lives – those of patients, mine, and maybe yours.

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