

Tweeting publications...

A short DIY guide to Twitter copywriting for medical writers

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Abstract

The reach and impact of social media have made this communication channel the latest in a number of multidimensional communication tools to be employed in health research. Social media has become a communication tool to reach various audiences, recruit patients, develop engagement, and disseminate research. Currently, publication medical writers are being increasingly faced with producing research-based copy for social media. Luckily, as highly knowledgeable and flexible professionals, medical writers are well placed to support this challenge.

This article is about the five main lessons learned from having to write a Twitter post about a clinical study, for a peer-reviewed journal, in the eleventh hour.

It all started one gloomy afternoon in late winter as I was submitting a manuscript. Having entered the many author details and uploaded the manuscript, figures, and tables, I scrolled down the web page looking for the **next** button that would lead me to the final submission page and tea time. This is when I saw it. An empty, square box. A new, empty, square box, accompanied by a polite suggestion to “add an optional Twitter post text”. An *optional* Twitter post text? Of course, I didn’t want to add an *optional* Twitter post, I wanted to finish submitting my article and call it a day. Staring out the window, watching the last of the daylight fade, I had to admit that it was a good idea. It was an opportunity for more people to read about the research, another step towards making a difference, getting the message across. So, reluctantly, I reached for my phone, texted the lead author, secretly hoping he’d respond “not



necessary – submit now”. But he didn’t. Instead, he replied, “Great idea, Amy! thanks +++”. Oh. Thus started an adventure into the world of social media that I’d managed to circumnavigate until now. Being a publications writer, I thought that writing for social media was the realm of health science writers. Welcome back to Earth. This article is about five lessons learned with the guiding hand of a strategic communications consultant, Sabine Roziers, and that I hope to remember for the next time.

Lesson #1: Social media has gained unprecedented reach and impact in medical science

The reach and impact of the tentacular beast we know as social or, more precisely, information media has made this communication channel the latest in a number of multidimensional communication tools to be employed in health research. In health research, social media has become a communication tool to recruit patients, collect data, develop engagement, and disseminate research.¹ This is particularly true with health and medical science researchers who are concerned about demonstrating the impact of their work, although it is still not yet clear if social media posts increase citations.² Nevertheless, social media is important when the data has public health implications, may influence policy-making processes, improve

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health systems, or have a health-related socioeconomic impact.³ Interestingly, with the amount and spread of misinformation during the COVID-19 pandemic, social media platforms such as Facebook and YouTube have become acutely aware of the problems associated with social media as a communication channel for health research. To address this problem, Kang-Xing Jin, head of health at Facebook suggests “the long-term solution is to connect people to accessible, trusted information”. Equally, Garth Graham, MD, director and global head of healthcare and public health at YouTube suggests “plucking the weeds of misinformation and replacing it with good, engaging kinds of information.”⁴

So, it would seem the writing is on the wall, and medical writers are likely to be increasingly faced with producing research-based copy for social media. Luckily, as highly knowledgeable and flexible science communicators, medical writers are well placed to support this change! The tools that we use to turn a clinical study report into an article are those needed to write a Twitter post.

Lesson #2: A tweet is a very short story

A tweet, as the name implies, was originally coined to describe a product that delivered “a short burst of inconsequential information, kin

to ‘chirps from birds’ within only 140 characters” (Figure 1).⁵ That seems ironic now considering the power Twitter has gained in science communication. Nowadays, a tweet contains a luxurious 280 characters. So here’s a thing. How does one squeeze a 250-word abstract down to 280 characters? Simply, write very, very concisely and precisely. This means simple sentences and stick to the structure. Just as a publication has an established structure, so does a Twitter post.

The first line in a Twitter post is the catchphrase or title (Figure 2). This is the place to capture the reader’s attention. This usually appears on notification pop-ups on smartphones and computers.

The text that follows is a concise storyline that summarises the study conclusion and perhaps provides a bit more information with either a fact, some supporting data, or information presented in decreasing order of importance. The sole aim of this text is to engage with the reader by enticing them to click on the link, read more, or share your key data with someone else.

As each character counts, readable, concise, and precise writing is paramount. In short, the five useful (familiar?) writing tips are:

1. Choose active verbs.
2. Put the most important verb idea early in the phrase.
3. Ensure the vocabulary reflects the context, methods, and data accurately.
4. Consider presenting study design using PICO (population, intervention, comparator, and outcome).
5. Place key result data (with significance)
 - Superlatives such as: superior, better, but also improves, increases, decreases, faster, slower, etc. need to be associated with comparative data with appropriate significance.

Some good ways to capture Twitter readers’ attention in the first line are:

- Ask a question.
- State a fact.
- State the context.
- State the general problem in the domain the study addresses.
- Highlight the problem the study addresses.
- Place a key, attractive, alarming, or eye-catching figure.

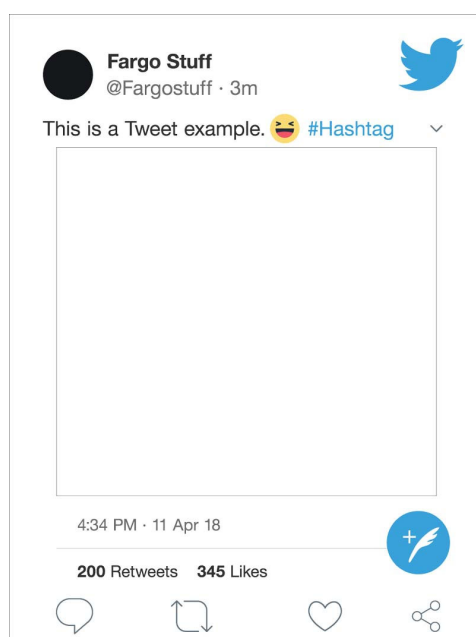


Figure 1: A 280-character tweet looks like this example



Lesson #3: Hashtags and tags engage readers to read, share, and comment on the content

Hashtags and tags come right at the end of the text. However, hashtags are usually placed at the end of the text, and are therefore included in the 280-character word count. Tags can be included in the legend of the central illustration. So, extra word count!

Hashtags are keywords that enable specific communities, who may be interested in or related to the research domain, to engage with your

content. For instance, #Alzheimers may be followed by anyone interested in Alzheimer's disease, its management, and treatment.

Tags are aimed at specific Twitter accounts (@specific person) that target specific individuals and organisations to engage with the content and retweet or comment on your content (@Alzheimer's France). Tags are also a useful technique to engage a first, corresponding author or another expert who supports the publication. By engaging these experts, they provide additional information, opinions or support for your research. However, if you are unsure about

the position or reaction an expert may have, you can start a private conversation with them (@specific person) on a Direct Message (DM) – this gives the expert the opportunity to retweet or engage without being public.⁶

Most often, a hashtag or tag will already exist. This means that someone has already coined a hashtag and used it to create a following. The only value in creating a new hashtag is if the subject is really new (e.g., COVID-19 in 2019) or if there is a reason to attract a specific audience (e.g., #maladie d'alzheimer for use in France). Both hashtags and tags for a given topic can be found simply by searching your research theme on Twitter (e.g., Alzheimer's) or using specific software tools like (Tweetdeck or Google). Also, organisations and companies usually publish their hashtag on their websites – so scout around and see what comes up most often.

Lesson #4: A central illustration completes the story

After the text, there is space to add a central illustration. This illustration is not counted in the 280-character count. It's bonus text! The objective of the illustration is to support the



Figure 2: The catchphrase or title is the first line in a Twitter post

affirmation made in the tweet with complementary information that summarises or highlights the research data. Get creative! This can be anything from an image, a figure, a graph, a link to a webpage or PDF. It is also a good spot to add additional tags to authors, organisations, or associations concerned with the problem.

Lesson 5: Tweets can be planned!

Although journals request authors to provide a single tweet to promote their work, some organisations, patient associations, or authors will happily tweet a thread of posts. This is called Twitter planning. A plan of tweets covers the full content of the manuscript from background to discussion. A Twitter plan usually consists of up to 10 posts, each *chirp* about a part of the research story, which can be taken from any part of the manuscript. Of particular value are tweets about the discussion elements. Tweeting these discussion points can engage other experts to discuss the data or its implications with followers. As a medical writer, providing Twitter planning could be an additional service that you offer to your clients.

Conclusion

In summary, it would seem that social media has gained unprecedented reach and impact in medical science. Publication writers will be increasingly involved in promoting research data beyond the realm of the journal. As the last link between the author, who knows the data intimately and the reader who will discover it, it's up to the publication writer to carry their job a bit further and promote the value of the research at hand.

Acknowledgements

The author would like to thank Sabine Roziers, a strategic communications consultant with over 20 years of experience in agency communication for her advice, patience, and valuable knowledge.

Conflicts of interest

The author declares no conflicts of interest.

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Author information

Amanda Whereat has been writing publications since 2005 and leads workshops on medical writing throughout France.

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special interest groups!

