

English Grammar and Style

Good Writing Practice

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Lost causes (2)

In the September issue of MEW, Stephen Gilliver said that he couldn't tell us 'the number of times I have read the word *evidences* used as a plural noun, in manuscripts written by non-native English speakers. While grammatically incorrect ... does it impede comprehension? No.'. As further examples, I will add *toxicities* and *surgeries* to this (and there are many more). *Toxicity* and *surgery* (when used to mean a surgical operation; when used to mean physician's office practice, it can, of course, be used in the plural), like *evidence*, are abstract or uncountable nouns and therefore, from a strict grammatical point of view, should never be construed as plurals. If they are, they sound (and are) wrong. This often doesn't apply to one group of abstract nouns: those ending in '-(t/s)ion', because they are often used as countable nouns, such as *injection*, *medication*, and *revision*. As so often in English, it is difficult to give guidance on this because of inconsistent usage, especially as there are some US/British English differences. For example, *accommodations* is never pluralised in British English.

In terms of pluralisation of abstract nouns that are generally not used in the plural, there are some definite lost causes and there are some battles still worth fighting. As with any lost cause, however, you should never give up lightly, but always gracefully. I have to admit to having given in on *toxicities*. When I started work on oncology texts about 10 years ago, I vigorously defended the abstract noun *toxicity*, declaring that there is no plural (nouns ending in '-ity' are particularly resistant to pluralisation). After several years, I had to admit that the terms *dose-limiting toxicities* and *Grade 3 and 4 toxicities* have become perfectly normal in oncological texts, and that it is now silly to insist on *toxicity* because this is wasting your time and everyone else's.

I have not, however, given in on *surgeries*, and never will. *The patient had five surgeries in her medical history*. This is just too far away from what sounds correct to be acceptable. Unlike *toxicities*, I think I can still say that *surgery* is never used in the plural when it means, as in this example, *had undergone surgery five times* or *had undergone five*

(surgical) operations. And I don't think it will ever make the transition to *surgeries* with this meaning. I think it is likely that this is something that will remain wrong.

Whether things sound wrong or right is often a matter of personal taste or what we are used to hearing or reading. But some things just remain incorrect. I will never give up on deleting that incorrect 's' on the end of *informations* and *bleedings* (a patient can have *bleeds* but not *bleedings*). And *evidences* is also definitely 'not on'.

Moving away from abstract nouns in the plural, in the spirit of Stephen Gilliver's '... does it impede comprehension?', I confess that I now permit the following in oncological texts: ... *a study in patients with metastatic carcinoma of the colon who failed (on) <regimen> or failed treatment with....* Throw up your hands in horror if you wish. I know, of course, that, in our grammatical tradition, *fail* can only be used transitively (i.e. with an object) if it means *fail a test* or *an examination*. In our context you would normally have to say *failed to respond to (regimen)*. However, after having countless publications from peer-review journals held under my nose and explanatory fingers pointing to just these formulations in articles in journals, including the *BMJ*, *Lancet*, and *JAMA*, all I could say is: 'OK. I give up'. The meaning of *fail* has been extended in this context. Most cancer patients first of all respond to treatment and then, because of disease progression, no longer respond and the disease worsens. Everyone working in this field knows this, and that when *fail* is used in this way, this is what it encompasses. Understanding this is also part of accepting the use of the term in this way. I suppose that this may sometime extend to the use of *fail* with all treatments, but at present it is obviously only in this field that it has gained the currency to become acceptable. I still cannot imagine saying that a sepsis patient *failed antibiotic treatment* and don't read it in journals, even rarely.

(contributed by Alistair Reeves, a.reeves@ascribe.de)

References

1. Gilliver S. English: should being understandable be enough? MEW 2012;3:??.

Points of view

Medical writing: where many talents meet – the activity seen from a scientific point of view

It all started with a friendly discussion with a colleague on giving specific pieces of advice to medical students in a course designed to help improve their writing. In a telephone conversation, I had brought up the clear difference – in *my* mind – between ‘seems’ and ‘appears’. My colleague, who had a background in English and history, said that she did not see much difference and that she had not really thought about it. I tried to explain that to me as a one-time scientist, ‘seems’ has a subjective ring to it whereas ‘appears’ has a more evidence-based slant. What I had really wanted was to tell the students to avoid the word ‘seems’ altogether in a scientific context. Certainly, ‘seems’ can occasionally creep into the discussion part of a paper but by and large it has no place in the introduction, methods, or results sections – and certainly not in the abstract.

This set me wondering about people’s perceptions in medical writing. I asked my brother, also a scientist, if he saw any difference between ‘seems’ and ‘appears’ and he replied with what I had hoped and expected to hear. ‘Seems’ describes a perceived state (thus suggesting subjectivity) whereas ‘appears’ describes an observable state (thus suggesting objectivity). He had happened to discuss it with his wife who has an academic background in English, and she had not seen any difference. This led me to wonder whether people in medical writing with different backgrounds might have different attitudes to using certain words and phrases.

It stands to reason that anyone who has *learned* medical research will not write in quite the same

way as a person who has *done* medical research. Not in the beginning in any case. In order to write as if you had *done* science requires years of experience and, above all, an open and careful mind about the world around you. Knowledge of scientific method is not enough. Knowledge of language is not enough. The two must be combined in subtle ways that assure the reader that the authors of the article (or other document) are in full control. If you write in English but it is not your first language, learning these subtleties will take even longer.

Handling even simple statistics in your daily writing work is bedevilled with pitfalls. To have a reasonable amount of knowledge of the subject is the only way to succeed, even if you have a humanities background. Otherwise there are just too many ways in which you can give the impression in your writing that you are not in control. Even when the authors have done everything right – the correct statistical considerations at every stage and the correct statistical tests – if you do not know exactly what you are writing, you can undo their good work. To write ‘the mean values did not differ’ with a *P* value is a crime against the (other) authors, when it would have been just as easy to write (correctly) ‘there was no significant difference between the means’ plus *P* value. This is a very simple example, and if we also consider the concept of relationships, i.e. associations and correlations, there is a potential minefield of ways in which the uninformed medical writer can go wrong in writing about statistics.

My bottom line is that no matter what your background may be, never stop educating yourself to think and write like a scientist.

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We received the above article from Alistair Kidd, a medical editor from Umeå in Sweden. Alistair puts forward some interesting – and controversial – ideas about medical writing that we’d like to explore in further issues, so we would be pleased to receive any comments on his article. Alistair’s

considerations about ‘seem’ and ‘appear’ prompted us to poll a few experienced writer, editor, and translator colleagues in Europe and the USA on what they think about these two verbs in scientific writing.

I summarise the responses and comments in the table below.

Name	Background	Comments
No difference		
Ingrid Edsman	Scientist	From my non-native English-speaking perspective, I don't see any difference between the meaning of 'seem' and 'appear'
Susanne Geercken	Linguist	'Seem' and 'appear' are hedging devices and have the same meaning in Alistair's example
There is a difference, but too subtle for most		
James Visanji	Scientist + Linguist	It's worth cautioning professional writers against expecting too much awareness of linguistic subtlety in other scientists. I don't think the majority of scientific writers will intentionally use one over the other to indicate a different degree of certainty
Chris Priestley	Linguist	I felt that the distinction being made contains a degree of subtlety that will be lost on most people. Whether the writer uses 'appear' or 'seem', perhaps the main thing that will be clear to the reader is that there is a (large or small) element of uncertainty or speculation involved
There is a difference and it should be preserved		
Lisa Chamberlain-James	Scientist	I totally agree that 'seems' has no place in scientific writing. At best it suggests that the author is unsure, at worst that they are hedging their bets! I'm not a massive fan of 'appears' in scientific writing either, but will concede that it does have a place if used appropriately
Laura Collada	Linguist	I do feel 'seems' is more subjective than 'appears', even if both verbs, to me, have a hint of 'not-evidence based' results. When translating these verbs, I do pay attention to this
Neil Fisher	Scientist	I would always use 'appears'. To my mind, 'seems' is in a lower register than 'appears', and 'seems' does have a subjective ring about it
Helen Frampton	Scientist	'Seems' is more subjective and gives the impression that whatever you are saying is not evidence-based. It may express a greater level of uncertainty than 'appears' and even add a negative connotation to what you are expressing
Wendy Kingdom	Scientist	I'm with the group who had never thought about it and, if asked, would not have thought there was a difference. Having read Alistair's article, I can see that there is'
Michael Schnier	Scientist	In 20+ years of teaching research writing, the distinction has never surfaced – probably due to infrequent usage. I agree with Alistair about the subjective meaning of 'seems' and the more evidence-based meaning of 'appears' which conveys a visual aspect and is generally more formal. I also concur that 'seems' – especially in the present tense – could be excluded from most sections of the journal article except for an inference in the discussion section
There is a difference but it is a matter of usage		
Gabi Berghammer	Linguist	English generally has a Latin/French-derived term and an Anglo-Saxon/Germanic term for the same concept. The difference is in register rather than in semantics. Etymologically, 'seem' derives from the old Norwegian or Germanic 'same', whereas 'appear' derives from the French 'apparoir'. French-derived terms are sometimes considered 'more learned', but using the often simpler and more straightforward Anglo-Saxon term in English generally conveys the same meaning and sometimes sounds more direct. (See also: http://en.wikipedia.org/wiki/List_of_English_words_with_dual_French_and_Anglo-Saxon_variations)
Alistair Reeves	Linguist	I have never thought about this, so it is a welcome opportunity to do so. I don't think I have differentiated in the past – and I don't think I will be doing so in the future. I don't think they convey different messages. Like Gabi, I think this is much more a matter of usage and collocation. I see no difference between 'Our findings show that X appears to be involved in this enzymatic reaction' and 'Our findings show that X seems to be involved in this enzymatic reaction'.
Not sure, have never thought about a difference		
Stephen Gilliver	Scientist	I would not use the word 'seems' in the abstract if writing a scientific manuscript, but I can't claim to be certain as to the difference in meaning between 'seems' and 'appears'

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Now let's see what Alistair has to say in response.

“Thank you for the opportunity to reply. The fact that James, Neil, Lisa, Helen, Laura, Michael, and to some extent Stephen and Wendy – several of whom have a scientific background – tended to agree with me is very encouraging indeed. Five people with a linguistic background and one with a medical background did not, but the numbers are small and no

serious conclusions can be drawn. What a pity that a scientific study with adequate statistical power will never be done!

We must not forget that many languages have only one word for ‘to seem’ and ‘to appear’ – Swedish, for example (*att verka*). Any subtlety in the difference in meaning is therefore more likely to be lost.”

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Just in case . . .

‘In case’ seems to be used inappropriately with increasing frequency. EMWA members who attended the autumn conference in Andel’s Hotel in Berlin will have seen ‘Do not use elevator in case of fire’. This instruction was engraved on elegant signs beside the elevator call buttons on every floor. This use of ‘in case’ is also becoming more common in study documentation. For example, the instruction, ‘In case of special patient groups (children, patients with dementia, etc.) describe the procedure for obtaining informed consent’. In these examples, ‘in case’ has been used as short hand for ‘if it is the case that’. However, this short hand is not correct English and can be misleading.

‘In case’ implies that a contingency plan is being made. For example, ‘I will take an umbrella with me in case it rains’ or ‘We will drive on the main road in case there is flooding on the minor roads’.

So, ‘Do not use elevator in case of fire’ implies that you should not use the elevator in case you get in it and find that there is a fire inside, or that your presence in the elevator might cause a fire. It would be more fluent to say ‘If there is a fire, do not use the elevator. Or better, ‘If there is a fire, use the stairs’. For the second example, it would be more fluent to write ‘If the study population is a special patient group...’.

Unfortunately, the use of ‘In case of fire...’ posted on hotel lifts may be a lost cause. It is far too common for it ever to be corrected. But it is still worth paying attention to this in our documentation, and an ‘If ...’ sentence often offers the best solution. This may be slightly longer, but the shortest solution is not always the best, even though we should always strive for brevity.

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