

So, you want to be a medical journalist?

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Abstract

What are the differences between medical journalism and medical writing? To find out, the authors reviewed several health-related publications and online resources, and interviewed two senior medical journalists. We learned that medical journalism demands an investigative nature, the ability to critically evaluate evidence, and the ability to rapidly produce engaging pieces of wide interest. It is a stimulating, sometimes fast-moving world, although often not well-paid. Print media is becoming less common, and most journalistic pieces are now published online or through social media. For those interested in a new career, excellent writing skills and an ability to learn quickly are probably more important attributes than journalistic qualifications. Would-be medical journalists should keep in mind that with this power to influence comes responsibility.

Introduction

Many medical writers look over the fence at the world of medical journalism and wonder what it is like and how some have reached prominent positions in leading publications or on TV. In this article, we explore the differences between medical journalism and medical writing and what attributes are important for someone interested in becoming a medical journalist.

Medical journalism is the same but different

Headlines such as “Antibiotic resistance now a global threat”,¹ “Can burnt toast and roasted potatoes cause cancer?”² and “Coffee: The science behind the health claims”³ appear in the media daily. These articles are designed to engage, inform, or potentially shock a reader. Former editor of *New Scientist*, Michael Kenward, explains:

*Science writing is about explaining complex ideas that nobody wants to keep secret; science journalism is about explaining things that everyone can understand but that some might prefer to keep buried.*⁴

But what differentiates medical journalism from medical writing? Essential features are subject matter research and delivering understandable, impactful contents. Whereas medical writers produce text on topics defined by the client or institution that is primarily informative or intended for regulatory bodies, the priority for medical journalists is to narrate stories that will engage and maintain interest until the last paragraph. This involves delving into the context of what is being reported, seeking comments, speaking to independent experts, and highlighting both positive and negative aspects of the story.⁵ According to Sonya Collins, the secret is to hook readers “with the stories of the real people affected by the science and painting verbal pictures of hard-to-grasp concept”.⁶ This requires a high-level understanding of the science behind each piece. Her experiences as an independent journalist soon refuted her preconceptions that medical journalism “was dry, heartless and devoid of storytelling and poetry”.⁶

Target audiences are different: For medical journalists, it can range from healthcare professionals, providers, governing bodies to newspaper readers and television audiences. Thus, targeting the narrative is important. Some scientists and healthcare professions may not feel comfortable with such a popular approach or using

metaphors like describing the parts of a cell as resembling a fried egg. Sonya Collins defends this by quoting Professor Patricia Thomas, Programme Chair of the University of Georgia’s Master’s in Health and Medical Journalism course: “A good health story makes readers feel smart.”⁶

Both medical writers and journalists work under time pressure, but this can be particularly intense in the newspaper or broadcasting world. Here you may be asked to produce a story with just a few hours’ notice.⁷ The temptation for the media is just to accept material already written by a press officer working on behalf of industry, government, or a lobbying group. Also, you are unlikely to become rich. While many are employed as editors or staff reporters by a media organisation, the competition is intense and companies are cutting back. Unless they have established work streams, freelancers often struggle to get published and face competition from unpaid amateurs.⁸

What medical journalists say about their field: An interview with two senior journalists

To find out more about medical journalism, we interviewed two senior journalists with wide experience in medical journalism: Nigel Praities, editor at *Pulse* magazine, and Jacqui Wise, a freelance journalist who regularly writes for *The BMJ*. Between them, they have more than 35 years’ experience in medical journalism.

How does medical journalism differ from medical writing?

Nigel: Medical journalism is more fast-paced. We must react to stories emerging minute-by-minute. There is a greater range of content too; as well as news, we also produce blogs, opinion pieces,

webinars, advice articles, and opportunities for continued professional development.

Jacqui: I would probably use the terms “medical journalism” and “medical writing” interchangeably. I suppose medical journalism would involve getting



comments from experts, analysing information, or uncovering a new story. Medical writing is more summarising or exploring a topic.

What are the usual channels through which medical journalism is disseminated today?

Nigel: Through print, online, social media, word of mouth. There has been a revolution in recent years towards online and social – a very different model of communicating with your audience.

Jacqui: Newspapers, consumer magazines, scientific or professional journals, online journals, websites, and publications from public relations or pharmaceutical companies. There has been a shift towards more online content. A lot of magazines aimed at doctors no longer exist or only exist online, such as *GP* and *Doctor*.

How do media channels differ?

Nigel: I enjoy them all. There is nothing like holding a printed journal in your hands, but I also really enjoy the instant reaction and two-way conversations you can have online and through social media. I learn so much through interacting with readers – this is probably the area I enjoy the most.

Jacqui: I started work as a news reporter on *MIMS Magazine Weekly* – a clinical magazine for general practitioners (GPs) owned by Haymarket that closed down some years ago, I then moved to *Doctor* – a larger weekly newspaper for GPs that covered clinical and political news. I was first clinical editor and then news editor. This was enjoyable, as there was a large team of reporters and there was the pressure of daily deadlines. We had to compete with *GP* and *Pulse* to get the good stories and the best coverage of issues such as pay deals, the ARM (the British Medical Association's annual meeting), health reforms, and so on. *Doctor*, which was owned by Reed, has also since closed. I then moved to *The BMJ* as news editor. This was enjoyable in a different way – it was a more relaxed working environment in-house for the British Medical Association, and it was interesting working with doctors. At the time, there were no in-house journalists and so I commissioned freelance journalists from around the world to write most of the news stories. I left to have my first child and moved to South Africa for 6 years.

When I returned to the UK, I freelanced – working from home. I have written for many publications including *The Guardian*, *Bella*, *Top Sante*, *The BMJ*, *Lancet Infectious Diseases*, *WHO Bulletin*, and *Pharmaceutical Journal*, plus reports etc. for public relations companies.

How does one find a story and validate its accuracy?

Nigel: Depends on the story – if there is a source, we can go to and confirm, then this is easily done. Other times it is more complicated. You need multiple sources and to consider whether something is robust enough to put into the public domain.

Jacqui: Sometimes a news or features editor asks me to write on a subject and gives me a brief. Sometimes I come up with an idea and contact them. Nowadays, I mainly write for *The BMJ* for the news or features sections. The story will usually be based on a piece of new research, report, or event. I would only cover something that came from a reputable peer reviewed journal or established body. I would contact experts to check the validity of the story.

Is there a demand for medical stories?

Nigel: There is a huge interest in medical stories as it has an impact on everyone. A good story is one that gets picked up by the national media or TV news – this happens more often than you think.

Jacqui: I think demand is definitely decreasing.

What are your most exciting pieces of work to date?

Nigel: Very hard to choose, but we have campaigned for a number of years for additional support for struggling GPs and practices that are about to close. This lobbying has helped lead to a major support package from the National Health Service, and we have been praised for putting this on the national agenda.

Jacqui: I had a number of features published in *The Guardian* in the late 1990s and that was a thrill to see my name in a national newspaper. Sadly, their health section then

shrank, and I stopped writing for them.

I enjoyed writing a feature for *The BMJ* on a medical research scandal involving a German anaesthesiologist named Joachim Boldt. Almost 90 fraudulent studies of his were withdrawn after it was found he fabricated study data. It was a fascinating story to write. I also enjoyed interviewing the cancer patient and journalist Steve Hewlett for a *BMJ* "Medicine and the Media" feature. He was a lovely man who sadly died only weeks after talking to me.

What advice would you give on starting a career in medical journalism?

Nigel: My advice would be start writing and get it published – it does not matter what it is or where. I started out freelancing for *The Guardian*, simply pitching ideas to one of their editors. There are no fixed qualifications, although a journalism qualification is always helpful.

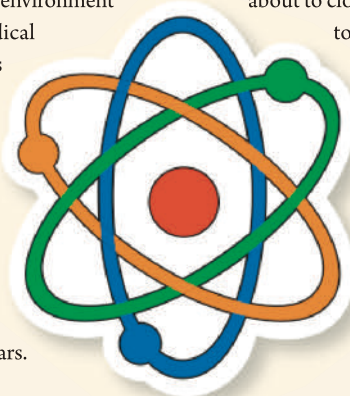
We run internship programmes here for new journalists, although competition is fierce.

Jacqui: You need a scientific background but not necessarily medicine – I have a biology degree. You also need to be able to write, obviously! You also need some sort of journalistic training. It's harder nowadays to get training on the job – the big newsrooms that used to exist for *Doctor*, *Pulse*, *GP*, and other publications are no longer there. This is a great shame as this was where most people learnt a lot.

What about remuneration and other incentives?

Nigel: No one does journalism for the money. There are lots of freelance opportunities, as many publications are understaffed, and this area is so complex.

Jacqui: No, I don't think it is that well paid. But it is flexible, and you can work from home a lot of the time. Payment depends on where it is published, the length, etc.: Roughly £120-£200 for a news story, £250-£500 for a feature. I travelled a bit while on *Doctor* to cover scientific conferences abroad, but that was when pharmaceutical companies would pay your costs. Some freelancers I know still get taken to conferences by pharmaceutical companies to write stories or conference reports. It can be stressful if you need to rely on journalism to pay your bills and you don't have a regular outlet for your work.



What are the exciting and interesting aspects of medical journalism?

Nigel: You can make people laugh, cry, or feel angry, and perhaps occasionally, change their view of the world. That is an incredible power – but also a responsibility.

Jacqui: I enjoy working to deadlines; without one I would never get anything done. The work can be interesting – although it can be very boring at times. Getting your head around a complex topic and putting it across clearly can be very satisfying. Features involve a lot more work but are ultimately more satisfying than news. However, the good thing about writing a news story is that it can be “done and dusted” quickly, and then you can forget about it. I like the flexibility of working as a freelance journalist – great if you have kids and want to work from home.

Making the transition from medical writing to medical journalism

If you are a medical writer looking to transition to medical journalism, your understanding of scientific writing will help, but you will need to be able to investigate and critically analyse and not only summarize or describe. While it is possible to be both a medical writer and a medical journalist, some may find switching between the different styles of writing challenging.⁵

As discussed, most commercial medical writing involves presenting data in the interests of companies and organisations, medical journalism requires the evaluation of numerous sources to deliver what should be a balanced and unbiased story. Unfortunately, articles such as the one on burnt toast seem more intent on worrying rather than informing the reader. In a 2005 article,⁹ EMWA member Jo Whelan offers sensible advice on “true” journalism rather than uncritically accepting press releases or reproducing the work of others, a process nicknamed “churnalism” (Box 1).

Different sources tend to offer the same advice for budding medical journalists: Simply start writing, keep going, and reach out to a wide range of potential outlets. Researching the published content of journals, websites, and



Box 1. Journalistic tips for investigating a story

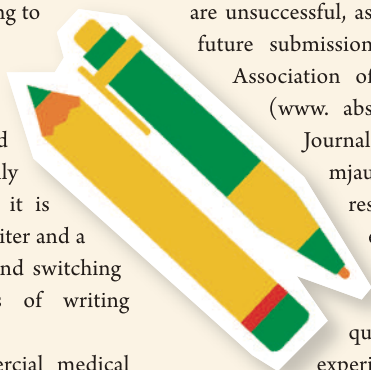
In a 2005 article published in the *The Write Stuff*,⁹ Jo Whelan gives the following tips for investigating a story:

1. Never take press releases, corporate publications, or newspaper/magazine articles at face value.
2. Get the background on your story.
3. Ask searching questions when you interview people.
4. Always get an independent expert to comment.
5. Be aware of people's motivations, agendas, conflicting interests, and possible prejudices.
6. Don't report statements as fact. Use qualifying phrases like “according to Kuritech”, or “says Dr X”.

magazines is a good way of seeking inspiration. Approach companies using freelance writers, and submit original pieces or suggest new ideas. If you are unsuccessful, ask for feedback to improve future submissions. The websites for the Association of British Science Writers (www.absw.org.uk) and the Medical Journalists Association (www.mjauk.org) are excellent resources and are used by editors to source freelance journalists.⁵

Formal journalism qualifications and in-depth experience are an asset, but what matters more than anything is a good writing style, a desire to disseminate scientific stories, and the ability to learn quickly.¹⁰ You must love words. Catherine Murray writes

“I love using words to reveal the pictures emerging from the fog of my sensations and I don't feel satisfied until I find the exact words which give shape to those pictures. And the more I am able to create a whole picture reflecting the complexity of reality, the happier I feel.”¹¹



Conclusion

Medical journalism demands an investigative nature, the ability to critically evaluate evidence and the ability to rapidly produce engaging pieces of wide interest. It is a stimulating, sometime fast-moving career, although often not a well-paid one. For those interested in medical journalism as a career, excellent writing skills and an ability to learn quickly are probably more important attributes than journalistic qualifications or deep knowledge.

We end by paraphrasing our two contributors:

Medical journalism has the potential to change somebody's outlook on the world – with this opportunity comes great responsibility.

Acknowledgements

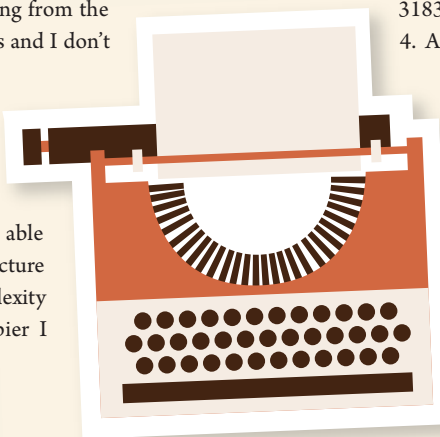
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Conflicts of interest

The authors declare no conflicts of interest related to this article.

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