Suggestions to authors

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Competition for the limited space in **Neurology** is intense, and well-written papers have the best chance of being accepted. Be certain your words express your ideas and message. Write simply and concisely. In short, adhere to Billings' rules¹: "(1) Have something to say; (2) Say it; (3) Stop as soon as you have said it." Otherwise, the scientific value of your manuscript may be obscured.

Manuscript Preparation

1. Adhere strictly to the format of **Neurology** as described in the Information for Authors of a current issue. Incorrect style irritates reviewers and editors, and the wrong reference style suggests that another journal previously rejected the manuscript.

2. Edit your paper carefully and eliminate spelling, punctuation, and grammatical errors. After you type the final draft (and especially if someone else types it for you), force yourself to edit it once more.

3. Check the accuracy of your references with the original, not secondary sources. Incorrect citations are a burden to the publisher and a disservice to the reader.

- The editor's office and publisher will not rewrite poorly written manuscripts. Those who have difficulty writing scientific English should obtain assistance from a colleague or seek out a professional author's editor who does this for a fee.

Manuscript Organization

4. The Abstract should be substantive and brief. Do not tease; thus, avoid sentences such as, "The implications are summarized." Instead, state the implications.

5. Organize your paper to answer the four main questions the reviewers and readers want answered:

- What did you set out to do and why? *Introduction*
- How did you do it? *Methods*
- What did you find? *Results*
- How does it relate to current knowledge? *Discussion*

It is easy to mix fact and opinion; keep the Results and Discussion separate. The Discussion should be clearly reasoned, tightly written, and focused on the implications of the Results.

6. Avoid repetition.

- Do not disclose your Results in the Introduction.
- Do not repeat the Introduction in the Discussion.
- In the text, do not repeat figure legends, table titles, or the contents of tables.

7. Use tables sparingly. Presentation of a few facts takes up less space in the text than in a table. In particular, do not use a table for presenting simple word lists.

- Lengthy, complex tables can be filed with the National Auxiliary Publications Services (NAPS). They will assign a file number to be footnoted in the paper and provide the table upon request to any interested reader for a slight fee. Their address is ASIS/NAPS, c/o Microfiche Publications, P.O. Box 3513, Grand Central Station, New York, NY 10163-3513; their telephone number is (516) 481-2300.

8. Abbreviations and definitions that appear in the figures and tables should be explained in figure legends and table footnotes. Do not refer the reader back to the text for this information.

Style

9. Use the active voice in the Abstract, Introduction, and Discussion; it is shorter, clearer, and more emphatic. The passive voice is appropriate in the Methods and Results, but otherwise is boring, suggests lack of conviction, requires more words, extends reading time, and may be ambiguous.²

10. For verb tenses, follow Day's rules³:

A. Use the present tense:

- When describing established knowledge or previously published results (ie, "Lesions of the internal capsule cause . . .").
- For "presentation" (ie, "Figure 1 shows that . . .").

B. Use the past tense:

- When describing methods and results in your current paper (ie, "we used . . ."; "we found. . .").
- For "attribution" (ie, "Smith reported . . .").

Try to avoid the present perfect tense (ie, "Smith has reported . . .") when the simple past tense suffices.

11. Don't overuse italics for emphasis. A page peppered with different type styles interrupts smooth reading.

12. Avoid sentence constructions using "respectively," which force the reader to stop and re-read the sentence. Example: "The mean values for men

and women were x and y, respectively." Substitute, "The mean value for men was x, and for women, y." This version is direct and permits the reader to proceed.

13. "The cause(s) of bad writing are many"; this popular construction stops the reader abruptly for the sake of supposed precision. Use either the singular or plural, but not both.

14. The skin color or ethnic origin of a patient is usually superfluous and should appear in a case history only if later mentioned in the Discussion or if potentially useful for future studies, such as the skin color in a hypertensive population. Use "black" and "white," and not "Negro" and "Caucasian."

15. Do not use the phrase "in man"; "human" is the appropriate alternative.

16. Most editors dislike "and/or." Your meaning is usually conveyed by "or" alone. If important, you can add "or both" at the end of the phrase ("Subarachnoid hemorrhage can cause headache or stiff neck, or both.").

17. The awkward "he/she" construction usually can be avoided by making the subject plural. For instance, instead of "A physician should do a lumbar puncture whenever he/she suspects meningitis," use "Physicians should . . . whenever *they* suspect . . ."

18. We restrict usage of the word "parameter" to its original mathematical definition (see **Neurology** 1984;34:1591); use the more specific "range," "measurement," or "variable" instead. MRI or radiographic measurement factors (constants) are "parameters" and can be described as such. "Practice parameters" (clinical practice guidelines) is an allowable exception.

19. "Incidence" and "prevalence" should have population denominators; otherwise, the correct terms, all synonymous, are "relative frequency," "frequency," "ratio," or "percentage." "Mortality rates" also requires a population denominator and a time interval; deaths among a series of patients would provide a "case fatality ratio" and not a "mortality rate."

20. "CNS" should refer to brain *and* spinal cord. It is not a synonym for "brain" or "cerebral."

21. "Deficit" should describe only neurologic *signs* and not symptoms. The specific nature of the "deficit" must be obvious from preceding information.

22. We are accused of dehumanizing patients. Consider the following:

instead of

case
male or female
male or female children
pediatric population

use

patient
man or woman
boys or girls
children

23. "It . . . that" phrases should be deleted on sight:

it is a fact that
it is apparent that
it is known that
it is of interest that

it is believed that
it is emphasized that
it is possible that
(use "may")

it is of interest to note that
it is often the case
that (use "often")

it is recognized that
it is shown that
it should be noted that

24. Sample substitute phrases:

instead of

a considerable amount of
a great number of times
a majority of
a number of
a small number of
accounted for by the fact that
along the lines of
appears to be
are of the same opinion
as to whether
ask the question
at this point in time
based on the fact that
chose to use
control groups
despite the fact that
disease process
due to the fact that
for the purpose of
greater number of
has the capability of
higher in comparison to
in order to
in the absence of
in the event that
in view of the fact that
interval of time
lacked the ability to
large number of
on a daily basis
period of time
point in time
provided a means of
red in color
reduced by x% compared with

reported in the literature
round in shape
serves the function of being
small number of
surgical intervention
take into consideration
the fact that
the question as to whether
the reason is because
the reason why
three-month period
through the use of
was found to be
was of the opinion that
was variable
with a view to

use

many, much
often
most
some or many
a few
because
like
seems
agree
whether
ask
now
because
used
controls
although
disease
because
for
more
can
higher than
to
without
if
because
interval
could not
many
daily
period
point
enabled
red
x% lower than
or x% less than
reported
round
is
few
surgery, operation
consider
that
whether
because
the reason
three months
by
was
believed
varied
to

Robert A. Day³ provides additional substitute phraseology in his excellent general guide to scientific writing.

References

1. Billings JS. An address on our medical literature. *BMJ* 1881;Aug13:262-268.
2. Christy NP. Use of the passive voice. *JAMA* 1985;253:201.
3. Day RA. Scientific English: a guide for scientists and other professionals. Phoenix, AZ: Oryx Press, 1992.

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