HIV Medicine workshop: Improving your publication success rate

Professor Caroline Sabin, University College London, UK
Dr Laura Waters, Mortimer Marker Centre, London, UK
Professor Jürgen Rockstroh, University Hospital Bonn, Germany
Improving your publication success rate: advice from the journal editors

Caroline A. Sabin
Editor-in-Chief, *HIV Medicine*
Increasing your publication success

• Journals receive far more manuscripts than they can publish – to maintain a high standard, they have to reject a large proportion of these.

• Journals generally accept 20-30% of submitted manuscripts.

• However, by following conventions and applying some common sense, you can increase your chances of your paper making it past the winning post.
What happens to your paper when you submit it?

Paper submitted to journal

Informal triage by editor
Does it look relevant to journal?
Are findings clinically important?

Yes

Sent out for peer-review
Usually reviewed by 2-3 peers
Each can recommend to reject,
Accept without changes, or to require major/minor revisions

Editorial decision

Reject
Accept, no changes
Accept subject to minor revisions
Resubmission, major revisions

No
Immediate reject without review
Choosing the right journal

• Have a strategy for journal selection
  – A high impact journal or one that is specifically targeted at your speciality?

• What type of audience are you interested in reaching?
  – Familiarise yourself with the key journals – do they publish papers similar to the one that you want to write and for the same type of audience?

• Open-access options? (increasingly important but can be costly)

• Aim high but be prepared for rejection
What happens to your paper when you submit it?

Paper submitted to journal

Informal triage by editor
- Does it look relevant to journal?
- Are findings clinically important?

Yes

Sent out for peer-review
- Usually reviewed by 2-3 peers
- Each can recommend to reject, accept without changes, or to require major/minor revisions

Editorial decision

Reject
Accept, no changes
Accept subject to minor revisions
Resubmission, major revisions

No
Immediate reject without review
Why are manuscripts rejected?

1. Title oversells importance of study findings
2. Literature review country-centric and/or fails to include key publications on topic
3. Study aim/objective unclear/not stated
4. Study design unclear
5. Statistical methods are not described in sufficient detail
Why are manuscripts rejected (cont.)?

6. Results section doesn’t include basic demographic details of study sample and/or descriptive (univariate) analyses

7. Study is clearly under-powered (wide confidence intervals) and authors have over-interpreted findings

8. Authors have performed too many analyses with no consideration of multiple testing

9. Tables are too long and don’t summarise findings

10. Figures are inappropriately chosen or don’t present findings effectively
General tips

• READ THE INSTRUCTIONS!

• Check the ‘rules’ for each journal, particularly around word length, abstract and reference format

• Identify the main message that you want to get across?

• Think of your audience – pitch it at the right level and avoid using unnecessary jargon

• Decide on authorship at an early stage, and give your co-authors plenty of opportunities to be involved
Appropriate use of language

- *HIV Medicine* endorses the People First Charter (peoplefirstcharter.org)
- Reviewers asked to comment specifically on the use of language
- See guidance on website for examples of appropriate language

### People First Charter: recommended terminology for research and publications related to HIV

<table>
<thead>
<tr>
<th>Please avoid</th>
<th>Alternatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS patient</td>
<td>Person with complications of advanced HIV, person with an AIDS-defining illness</td>
</tr>
<tr>
<td>AIDS test</td>
<td>HIV test</td>
</tr>
<tr>
<td>AIDS virus</td>
<td>HIV</td>
</tr>
<tr>
<td>Catch HIV</td>
<td>Acquire HIV</td>
</tr>
<tr>
<td>Compliant</td>
<td>Taking medication as recommended, adherent, concordant</td>
</tr>
<tr>
<td>Contagious/infectious</td>
<td>Person with transmittable HIV or detectable viral load</td>
</tr>
<tr>
<td>Dirty or clean in the context of people or injecting equipment</td>
<td>Just don’t use! Shared needles, injecting equipment or drug paraphernalia acceptable</td>
</tr>
<tr>
<td>HIV-infected person, people, individual(s), populations</td>
<td>Person/people living with HIV, HIV-positive individual(s) or populations</td>
</tr>
<tr>
<td>Prostitute, prostitution</td>
<td>Sex worker, transactional sex</td>
</tr>
<tr>
<td>Sex trade</td>
<td></td>
</tr>
</tbody>
</table>
Structuring your paper

1. What is the problem?
2. How have you addressed it?
3. What data did you collect?
4. What did you find?
5. Why are your results important?
6. How do your results compare to those of others?
7. Are there limitations that readers should be aware of?
Structuring your paper

1. What is the problem?
2. How have you addressed it?
3. What data did you collect?
4. What did you find?
5. Why are your results important?
6. How do your results compare to those of others?
7. Are there limitations that readers should be aware of?
Writing a paper – the abstract

• A **brief summary** of the research in the paper (should be an accurate reflection of what is in the paper)

• **Sales-pitch** to readers to explain why your paper is worth reading
  - Novelty?
  - Important confirmatory findings?
  - Major clinical implications?

• Should be number-heavy…

• Key words to facilitate searches
Writing a paper - the Introduction

• Only needs to be a few paragraphs
  – Para 1 – General background to area and the major research advances
  – Para 2 – Identify gaps in knowledge and explain their importance (to patients, the public, healthcare providers…)
  – Para 3 – State intention to fill those knowledge gaps

• Final paragraph ends with a statement like ‘The objective of our study is to xxxx’

• By the end of the introduction, readers should know exactly what you are doing and why
Writing a paper – the Methods

• Workshop manual for anyone who wants to replicate your study

• Describe the following:
  – population, location and dates of study
  – important assessments and method used
  – description of any lab methods
  – definitions of endpoints/outcomes
  – Stats methods
Writing a paper – the Results

• Describe the study sample and provide important population demographics
• Describe primary and secondary analyses, and any sensitivity analyses performed
• Careful and intelligent use of figures and tables
• Consider providing supplementary online material
Writing a paper – the Discussion

• Concisely state the principal finding and novelty value
  – ‘This is the first study to…”
• Place study findings in context of major works in the field
• Discuss results in a wider context and speculate on possible mechanisms
• Discuss benefits of your study but also be open about any limitations or biases (if you don’t the reviewer will…)
• Concluding paragraph – reiterate main finding and what should be done next
Responding to reviewers

Most scientists regarded the new streamlined peer-review process as ‘quite an improvement.’
Responding to reviewers

• Aim of peer-review is to improve the quality of published research – if a reviewer raises (valid) flaws with your manuscript then you must address them, even if you then submit elsewhere

• Respond to all points in a polite/respectful way, even if just to agree

• Don’t accuse the reviewer of ‘misunderstanding’ the study

• Meet the journal deadline or request an extension (rarely refused)
Your chance to ask questions

Prof Jürgen Rockstroh, Professor of Medicine and Head of the HIV Outpatient Clinic, University of Bonn

Dr Laura Waters, GU/HIV consultant/HIV lead, Mortimer Market Centre, London, and Chair of BHIVA
BHIVA
British HIV Association

2022 Spring Conference

Wed 20th - Fri 22nd April
Manchester Central, Manchester