
Why did you do it?

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If the introduction to an article does not tell readers why you conducted the study, they are unlikely to read any further.



Photo: Einar Nilsen

Imagine you are taking a friend on a road trip. What is she thinking about once she has settled into her seat? Probably something like this: Where are we going, and why? At least that's what the author of the article 'Introduction sections: where are we going and why should I care' (1) thinks. I like the analogy: When you write, think of the reader as a curious colleague who is not familiar with your travel habits or where you like to go, but who is listening intently to hear about the trip you are about to take together.

As editors of the Journal of the Norwegian Medical Association, we constantly put ourselves in the passenger seat in order to decide whether our readers would like to join us on the journey. We receive a large number of manuscripts, but only some of them are sent for peer review. We (and, in the next round, the reviewers) therefore need to be convinced that a manuscript is worth using. How can those of you who would like to publish your work with us help us make the selection? The answer is by telling us why you carried out the study and why it is of interest to our readers.

Why did you conduct the study? This point belongs in the first part of the manuscript, often referred to as the introduction. There are numerous ways this can be conveyed, all of which involve you quickly introducing the reader to your field, and then explaining that there is a knowledge gap, a problem or a challenge. Finally, you need to demonstrate that your study can help shed light on this problem (2, 3). Randy Olson, a marine biology professor turned filmmaker, refers to this as the ABT (and, but and therefore) method (4).

«If your study is solely about women, there is no need to mention the great uncertainty surrounding differences between the sexes in the field»

In the introduction, you must first introduce the reader to the field you are writing about. You serve up information – facts that can be linked using the word *and*. Start with a broad description, but not too broad. Try to refer to some key literature reviews, and continue with the most important ones in the field you are going to cover. Do not be tempted to set the table with crockery that will not be used. For example, if your study is solely about women, there is no need to mention the great uncertainty surrounding differences between the sexes in the field. Any such information belongs in the discussion section, where you describe the limitations of your study.

Then comes a twist. *But* is used to reveal the knowledge gap that your study will help to elucidate. The word creates contrast or conflict, and it generates interest. Are there significant flaws in earlier studies, and can your study redress any of these? Is there a need to confirm previous findings, but in a different patient population? Is it a condition that is treated in a number of hospitals in the country, and for which there is little knowledge on patient outcomes? Okay, good. Then you are suddenly at *therefore*, and explaining what you have done.

The words *and*, *but* and *therefore* can be replaced by other words, or omitted, as long as they are implicit. Take for example Watson and Crick's descriptions of the DNA structure in *Nature* in 1953, one of the world's most important

research articles (4, 5). Without any trace of these three magic words, the reader understands after three short paragraphs that the authors' opinion differs from that of other scientists, and that they therefore carried out an experiment to explore an alternative structure. Likewise, there is no mention of *therefore* in this quote from a recently published article in the Journal, but it is easy to read between the lines: 'Despite there being an extensive body of research literature on assessment, no overview exists of which forms of assessment are used in the four undergraduate medical education programmes in Norway, or analyses of Norwegian assessment practices from a research-based perspective. In this study, we have [therefore] collected information on types of exams used in medical education in Norway...' (6).

So what about what works for our readers? This takes us back to the passenger. The Journal's primary target audience is doctors working in Norway. We aim to publish articles that interest and engage as many of them as possible, and which give them the opportunity to keep abreast of developments outside their own specialist field. This does not mean that the topics in all articles need to be relevant to *everyone*. However, everyone should be able to understand the issue at hand from the introduction. When you write, you should therefore have in mind colleagues who are not in the same field as yourself. When they understand where you are going and why, they can decide for themselves how far they want to go. That's what being a good driver is all about.

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