

Writing an original article for publication in Dental Traumatology

REVIEW ARTICLE

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Abstract – The aim of this article is to give an overview of the art of writing a good manuscript for original articles specifically for the scientific journal *Dental Traumatology*. Selection of journal, style and language, structure of the original article and important aspects of content and online submission are presented. The authors share their experience in this field from the perspectives of the researcher, editor and publisher.

The research field of dental traumatology is undergoing rapid development. Much good research is carried out, the number of submissions has increased and there has also been a shift towards receiving more manuscripts from countries outside the traditional research countries of dental traumatology in North America and Europe. In two previous articles, aspects of design and reporting of epidemiological, clinical and experimental studies in the field of dental traumatology have been given (1, 2). Although many submissions are from good-quality research projects, the scientific writing is often a cause for revision and sometimes even rejection of potentially good manuscripts. There is a need for improvement of good-quality scientific writing (3–5). The aim of this article is to give an overview of important considerations when writing a manuscript for original articles, with emphasis on writing for publication in *Dental Traumatology*. Selection of journal, style and language, structure of the original article and important aspects of the content and online submission are presented.

Original articles in traumatology

Selection of journal

After your research is completed, you want to publish your results. The aim of publication is to disseminate the research findings to as many researchers and clinicians as possible in the world active in the same field. A way to measure a journal's impact is to look at the impact factor. That is a way to measure how much articles in a journal have been cited in previous years. The higher the

impact factor, the more citations in relation to the number of articles in the journal (<http://isiwebofknowledge.com>). This is of course also related to the level of activity in the research field. Some biomedical journals in large research fields have for this reason very high impact factors, which is not possible for many research fields in dentistry. If you want to reach out to many in the international field, it is also important to choose a journal that is included in the world science databases. In biomedical sciences and life sciences, Medline indexing is the common standard. A journal can only reach such a status after it has shown that it has reached a high scientific standard based on peer review, and that its articles are frequently cited (6). Journals are not immediately included in Medline, but have to be selected on recommendation by a selection committee. The journals, scope and quality are assessed before being included in Medline. It is therefore important to choose carefully. If you want to publish in a high-quality journal and reach out to as many as possible you should choose a Medline-indexed journal, e.g. *Dental Traumatology*. Medline is freely available on the Internet and is searchable via PubMed (<http://www.ncbi.nlm.nih.gov/pubmed>).

You really want your results to be published without too much delay. Choosing a journal with a short publication time is important. There are journals which have publication times of several years from acceptance to when an article is published. Check this by obtaining a recent copy of the journal and look at the acceptance dates of the articles to assess the journal's publication time. When writing this, *Dental Traumatology* has a

publication time of less than 6 months for most articles after they have been accepted.

Make sure that the journal is published online. Some journals are still relying on distribution of only printed copies. Most people nowadays prefer to download the articles from Internet.

To reach out to the specialists, it may be advantageous to choose a journal that is included in a membership of an international organization with special interest in the scientific field. *Dental Traumatology* reaches out to members of the International Association of Dental Traumatology (IADT) and the international Academy for Sports Dentistry (ASD). This is a guarantee that the research results will reach out to many researchers and clinicians interested in traumatology around the world and not only to libraries.

Be sure that your manuscript fits the scope of the journal you intend to publish in. Articles published in *Dental Traumatology* are directed at researchers and clinicians in the scientific and clinical field of dental traumatology. In other words, the manuscript must be related to trauma and be of interest to the international reader. In an international scientific journal like *Dental Traumatology*, there is also a requirement of originality and that the article will contribute something new and of value to the international literature. If your results are not new to the literature e.g. similar results have been described many times before, your manuscript may be rejected. Also, in situations when your findings are more interesting to local than international readers, it may be better to send your manuscript directly to a local journal instead.

Style and language

A scientific article should not be a showcase of sophisticated language. Make the article interesting through content and not elegant language. Try to simplify whenever possible. Use straightforward, simple language. For example, do not write sentences like 'in two teeth a gray colour was seen'. 'Two teeth were gray' is more straightforward. Another example: 'it is worth to mention that in the case of several observations there is a risk for considerable doubt concerning the dates they were made'. Instead, write 'the dates of several observations are in doubt'. Moreover, do not write 'we have insufficient knowledge'. Instead, write 'we do not know'. And instead of 'it has been reported by Andreasen', it is shorter to write 'Andreasen reported'.

Other examples are the overuse of 'being present', for example, 'bleeding was present in the patient'. Instead, it is recommended to write 'the patient was bleeding'. Let them read what you have written to see whether they can understand what you want to express and that the message is clear. Many reviewers and editors reject manuscripts that are not clearly written.

Many articles are rejected because the language is poor. The language of *Dental Traumatology* is English. If English is not the first language of the authors, the manuscript must be edited by a professional language editor or a native English speaker before submission. A list of independent suppliers of editing services can be

Table 1. Basic structure of the original article

Title
Abstract
Introduction
Materials and methods
Results
Discussion
Acknowledgement
References

found at http://authorservices.wiley.com/bauthor/english_language.asp. All services are paid for and arranged by the author, and use of these services does not guarantee acceptance or preference for publication. However, a well-written manuscript increases the chances of acceptance considerably.

Original scientific articles follow a common basic structure (Table 1). However, instructions to authors may vary somewhat between scientific journals. It is therefore very important to carefully read the instructions for authors, which can be found on the journal's web page (wileyonlinelibrary.com/journal/dt) under 'Author Guidelines'.

Title

The title is essential for catching the readers' attention. Today, a vast majority of readers browse articles online and titles are the first thing they notice. Your article title is the first, and maybe only, part of your article to be read. Like the abstract, this is what will be in the indexing services on the Internet. Readers of search, indexing and abstracting services depend on the accuracy and recognition of your title. Use key words from the Medical Subject Headings (MeSH) via Pubmed (<http://www.ncbi.nlm.nih.gov/pubmed>). Wrong words can lead to wrong readers. Therefore, it is advisable to use words that make immediate sense to readers when they search the topic of your study. The title should in the briefest possible way describe the study. A good thumb rule is no more than 10–12 words. Indicate if possible the final result in the title e.g. *Experimental study on root resorption on monkey incisors stored dry and subjected to Emdogain* can be replaced by *Emdogain does not prevent root resorption in replanted monkey teeth*. The title usually includes the species studied to facilitate the title browser, who is not interested in monkeys, to move on to the next article. Make the title catchy and concise so it describes your study in an essential, descriptive way. Avoid metaphors, slang and abbreviations unless these are commonly known e.g. DNA, AIDS and the like.

The title page is written on a separate page and submitted as a separate file when submitting the article online. The reason for this is to ensure that the manuscript can be reviewed without names of the authors being known to the reviewer. Names of authors and their institutional affiliations should be indicated here. Follow the Author Guidelines when creating the title page. A running title, which appears at the top of all pages of your published article, should be chosen. It has to be limited to maximum 60 characters. Include institutional affiliation (address, email) also in the title page.

Finally, on the title page, 3–6 key words are chosen. These are the words that will be included in the databases. It is very important to select the right key words, otherwise there is a risk that the article is 'lost' in databases such as MEDLINE, EMBASE and Cochrane. Use key words from the Medical Subject Headings (MeSH) via Pubmed (<http://www.ncbi.nlm.nih.gov/pubmed>) if suitable key words are not yet available for recently introduced terms, a suitable presently used term may be used. The online submission site provides a list of key words to guide authors to submit within the Aim and Scope of the journal and to direct editors to suitable referees in appropriate areas of expertise. Strive to use key words that are descriptive of your study. Add additional key words if they are meaningful of your study.

Authors should only be included if they have made substantial intellectual contributions to the study such as conception and design, acquisition of data, or analysis and interpretation of data, drafting the article or revising it critically for important intellectual content, and given final approval of the version to be published (International committee of medical journal editors) <http://www.icmje.org> (7).

Abstract

This is perhaps the most important part of the article, and although the article starts with it, the abstract is the last thing to be written, just before submission. The abstract is a brief summary of the article and a mini version of it. It is usually what is made available of the article through the databases on the Internet and should therefore reflect the content of the article clearly and accurately, and the abstract should therefore be able to stand alone. Many readers quickly browse through abstracts rather than read full articles so you must catch their attention. For this reason, you should express your findings clearly and in a structured way. Avoid unnecessary details and always end with a conclusion. Describe what was done in the study, how it was done and what is the result. As most online indexing services like MEDLINE/PubMed (NLM) and Journal Citation Reports/Science Edition (Thomson ISI) displays only 250 words of an abstract it is advisable to keep the abstract within that limit. The abstract should be structured according to the following: Background, indicating why the study is important, the aim, materials (subjects) and methods (keep it short), results (the most important findings) and the conclusion.

Introduction

The aim of the introduction is to provide the reader with the lack of information that you as author possibly have resolved by publishing the article. It should provide a literature background and the purpose of the study. *Dental Traumatology* is a journal devoted entirely to dental trauma so lengthy introductions to the field of trauma should be avoided. Instead, the introduction should supply the reader with background to understand the purpose of the study and to be able to evaluate the

results of the study. Be brief and do not write a complete literature review. Try to convince the reader the importance of your research but do not overdo it. Know your audience and for whom you are writing. If there has been a recent review published, refer to this instead of doing the literature review again. If a treatment concept is challenged, it is important to state the hypothesis and the alternative and to state the biological basis for the hypothesis. The background should lead to the purpose or aim of the study, which must be clearly stated. The introduction should close with the explicit statement of the specific aims of the investigation or hypothesis tested.

Material (subjects) and methods

The word 'Material' in the heading may be replaced by 'Subjects' when dealing with human beings. The aim of this section is to make the reader understand what was done and how it was done so the reader can determine whether the study can adequately answer the question. As a principle, all relevant information that is taken out of the analysis should be in the results section except number of subjects. Methods should be described in detail so the study can be repeated by the reader. The species studied should be carefully described by number, age and sex. The study population and sampling should be carefully described. All procedures must be described in detail so that the experiments can be repeated. The protocol should be described in logical sequence. Important methodological issues with regard to design of studies in dental traumatology have been described in previous articles (1, 2). Finally, the statistical methods should be reported as well as the level of significance and confidence interval. Vendors of materials should be named by company, city and country.

Ethical considerations should be discussed and ethical approval from human and/or animal ethical committees should be clearly stated. Experiments involving human subjects should be subjected to approval by ethical committee before the experiments can start. Today, manuscripts to a journal will only be published if such research has been conducted in full accordance with ethical principles of the World Medical Association in the Helsinki declaration (version 2008 <http://www.wma.net/en/30publications/10policies/b3/index.html>). If there are additional requirements by the country where the research has been carried out, these must be reported. All authors submitting manuscripts to *Dental Traumatology* online must answer in the affirmative to a statement confirming that all research has been carried out in accordance with legal requirements of the study country such as approval of ethical committees for human and/or animal research or other legislation where applicable. Today, Editors reserve the right to reject articles if there are doubts as to whether appropriate procedures have been used.

Clinical trials should be reported using the CONSORT guidelines available at <http://www.consort-statement.org> prior to the start of the study. All manuscripts to scientific journals reporting results from a clinical trial must indicate that the trial was fully registered at a readily accessible website, e.g. <http://www.clinicaltrials.gov>.

Results

The aim when writing this section is to organize and present the data to lead the reader to the conclusions of the study. The results should be presented without any valuation or reference to earlier literature. Both supportive and conflicting data must be presented. Present your result in a logical sequence and avoid repeating presentations in graphs and tables. Tables and figures are the most effective ways for comparison of groups. Tables are better than graphs for statistical comparison, but graphs offer a visual comparison that tables cannot. Tables should be able to stand alone without explanatory text. The text should only present the general relationship and the tables and graphs should provide the details. For example, do not write 'The results for determination of root resorption as a function of extra-oral time is presented in Table 1', which makes no sense. Write instead 'Root resorption increased when extra-oral time was extended (Table 1)'. Do not comment on the results in the Result section. This should be done in the Discussion section.

Discussion

This section should start with a few sentences explaining the main finding of the results and how this supported/rejected the hypothesis that was the reason for doing the study. Secondly, methodology should be discussed, such as strengths and weaknesses of the study. Address possibilities of errors. Thirdly, the results are discussed and related to what other studies have shown in the literature. Especially, differences call for explanations but also discuss in accordance with similar studies. Consider also other explanations. You may also state that 'we cannot find any explanation for this'. Give credit to other researchers who made previous discoveries important for your study. Note that results of your study may confirm results of previous studies and not the opposite. Hereafter, describe the scientific implications of your findings, e.g. to the clinical situation. Do not speculate too much and make it clear when you are speculating. Suggest what should be investigated in the same research area but avoid platitudes like 'further research is needed', which goes without saying. The discussion should end with a conclusion or alternatively, especially if there are many conclusions, summarized under a special conclusion heading.

Acknowledgement

This section leaves room to acknowledge persons who helped with the study, but did not contributed to the writing itself. This can be colleagues, technicians, statisticians, nurses and more. Remember to obtain approval from these people before you mention them in your acknowledgements. Do not mention colleagues just to honour or flatter them. Only people who have added real value to your study should be acknowledged. For most articles, the journal editors and reviewers add tremendously value to your article by

suggesting revisions to improve the article. Unfortunately, it is not appropriate to acknowledge this work. A second but no less important purpose of the acknowledgements is transparency regarding *funding bodies* and *conflict of interest*; it should be stated clearly in the acknowledgements (and in the submission process) if there were any funding for the research or if any of the authors have conflicting interest. Funding and commercial linking must be listed. If you have any doubt of what can be a potential conflict or commercial interest, please list everything in the acknowledgements and let the Editor decide the correlation.

References

The references need to be organized at the end of the writing process. Use the most current research articles as references and do not leave out reference to paragraphs or sentences or ideas that are copied in the text. Read the Author Guidelines carefully (wileyonlinelibrary.com/journal/dt) to adhere to the reference style. Articles with an incorrect reference style will not be approved for peer review so make sure it is correct when you submit to the journal.

The references should be kept to the pertinent minimum. As the journal follows the Vancouver system for biomedical manuscripts, the author is referred to the publication of the *International Committee of Medical Journal Editors: Uniform requirements for manuscripts submitted to biomedical journals*. Ann Int Med 1997;126:36–47.

Number the references consecutively in the order in which they are first mentioned in the text. Identify references in texts, tables and legends by Arabic numerals (in parentheses). Use the style of the examples below, which are based on the format used by the US National Library of Medicine in Index Medicus. Do not use abstracts as references. Include manuscripts accepted but not yet published; designate the abbreviated title of the journal followed by '(in press)'. Information from manuscripts not yet accepted should be cited in the text as '(unpublished)'. The references must be verified by the author(s) against the original documents. For articles published online but not allocated page numbers refer to the DOI of the article. Titles should be abbreviated in accordance with the style used in Index Medicus. It is recommend to use reference tools such as EndNote or Reference Manager for reference management and formatting.

Reference to a journal article

Flores MT, Andersson L, Andersson JO, Bakland L, Malmgren B, Barnett F et al. Guidelines for the management of traumatic dental injuries. I Fractures and luxation injuries. Dental Traumatol 2007;23:66–71.

Reference to an online only article

Choi SC, Park JH, Choi YC, Kim G-T. Sublingual traumatic ulceration (a Riga-Fede disease): report of two cases 2009; (pages e48–e50) | DOI: 10.1111/j.1600-9657.2009.00773.x

Reference to a book

Glendor U, Andersson L, Andreasen JO. Economic aspects of traumatic dental injuries. In: Andreasen JO, Andreasen FM, Andersson L, editors. *Textbook and color atlas of traumatic injuries to the teeth*. Oxford, UK: Blackwell Publishing; 2007. p. 861–68.

Graphs and illustrations

Graphs

Remember to clearly indicate the denominator for the x and y axes and the units of measurement.

Illustrations/photographs

It is in most cases of importance to reduce the illustrations to a proper size. First, consider whether the width of the illustration should be one or two columns (ie. 7 or 18 cm). Then, select the area of a photograph, which show the area of interest and resize the illustration in that area. Finally, resize so that horizontal and vertical dimensions are properly followed (Fig. 1).

Radiographs

Like the photographs, radiographs need in most cases to be reduced to a proper size that helps significantly to illustrate consecutive changes in healing over time such as fracture healing, progression of root resorption and pulp canal obliteration phenomenon (Fig. 2).

The journal web page <http://wileyonlinelibrary.com/journal/dt> offers a portal to a major resource database for authors – Wiley Author Services (authorservices.wiley.com) Here you will find the ‘Electronic Guidelines’ that specifies the technicalities of your images. Please read the author guidelines and the electronic guidelines before submission of your article.

1. Check that your artwork conforms to the style and layout required by the journal.

2. Save line art such as charts, graphs and illustrations in EPS or PDF format. Most programs have a ‘Save as...’ or ‘Export...’ feature to allow you to do this.
3. Save photographic images in TIFF format. These should be at a resolution of at least 300 dpi at final size. High-resolution jpeg may also be acceptable.
4. Save figures containing a combination of photographic images and text (e.g. annotated photographic images with text labels) as EPS or PDF. Any photographic images embedded within these should be at least 300 dpi.
5. Perform a visual check of the quality of the generated image. You should be able to zoom in to about 300% without the image becoming noticeably blurred or pixelated.

Online submission of your manuscript

All submissions to *Dental Traumatology* have to be electronic and through the journal submission site mc.manuscriptcentral.com/dt. Go to the site and create an account. The more detailed you are in fulfilling the account, the easier the submission process. Remember your login details as you will use this again. Duplicate accounts leads to loss of submitted manuscripts and reviewer reports. When you have completed the account creation, you are ready to submit your article.

Log in and select ‘Author Centre’. Please read the instruction on the seven submission stages. Reading the instructions actually saves you a lot of time as your article cannot be submitted before everything is correct. Enter data and answer questions as appropriate. You may copy and paste directly from your manuscript and you may upload your pre-prepared cover letter. Click the ‘Next’ button on each screen to save your work and advance to the next screen.

You are required to upload your files separately, but it is fine to also include the images in the main text.



Fig. 1. Resizing photographs and radiographs at time of injury adds to a better overview of the trauma. Upper row: original photographs and radiograph. Below: Resized pictures and radiographs.

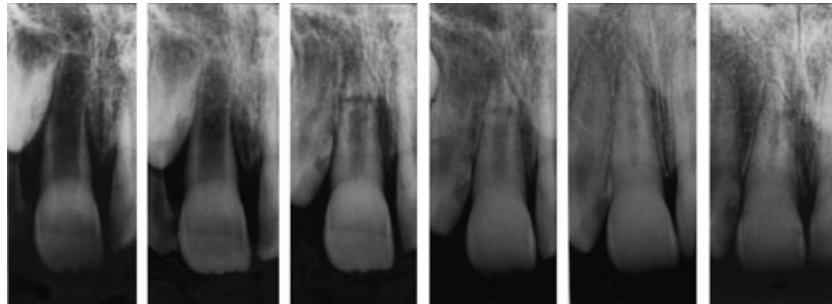


Fig. 2. Standardized radiographic taking and resizing of radiographs adds to the consecutive overview of post-trauma healing events. Postoperative healing events are shown for a replanted central incisor over a long period of time.

A *Copyright Transfer Agreement* has to accompany your article before it can be published. The form can be found in the Author Guidelines and on the submission site. Please sign the form, scan it and upload it with your manuscript files. You can also, send or fax it to the Wiley-Blackwell production office. (See Author Guidelines).

Manuscripts should be uploaded as Word (.doc) or Rich Text Format (.rft) files (not write-protected) plus separate figure files. The files will be automatically converted to HTML and PDF upon uploading and will be used for the review process. The text file must contain the entire manuscript including title page, abstract, text, references, tables and figure legends. Figure tags should be included in the file.

Please note that any manuscripts uploaded as Word 2007 (.docx) will be automatically converted into a .doc file and thus there may be a loss of format.

Review your submission (in HTML and PDF format) before submitting it to the journal. Click the 'Submit' button when you are finished reviewing. You may suspend a submission at any phase before clicking the 'Submit' button and save it for submission later.

After submission, you will receive a confirmation e-mail. The co-authors (if any) will also receive a confirmation of the submission so make sure your co-authors' e-mail addresses is correct. If not, the Editorial office will be notified and your article will be un-submitted. You can also access *Dental Traumatology* submission system at any time to check the status of your manuscript. The journal will inform you via e-mail once a decision has been made.

After your manuscript has been submitted the editorial office, the manuscript is checked to ensure the submission process is complete. Sometimes, the editorial office may ask for supplementary material or, if the submission is incomplete, the manuscript may be un-submitted and sent back to the author. The editorial office corresponds only with the corresponding author. The editorial office prepares the manuscript for blind review, which means that the author names are taken out of the manuscript so the reviewers cannot see who were the authors.

Peer review is the critical assessments of manuscripts submitted to journals. The reviewer are experts in the field and not part of the editorial staff (6). Authors may suggest a reviewer, but the final decision of reviewer selection is carried out by the editor-in-chief or the associate editors. For a manuscript of an original article, two or three reviewers are usually selected.

The reviewers filter out studies of low quality, check that research has been carried out well without flaws in the design and methodology, ensure that it is reported correctly and with acknowledgement to previous work, select the articles that will have the greatest interest to the readers, provide editors with evidence to make the decision if the article should be accepted, rejected or undergo revision. Reviewers advise and make recommendations and associate editors make recommendations for decision. The editor-in-chief then makes the final decision based on these recommendations (6).

The final decisions can be acceptance, rejection, minor revision or major revision. Comments from the reviewers are enclosed or attached as separate files to the corresponding author.

Revised manuscripts must be uploaded to *Dental Traumatology* within 2 months of authors being notified of conditional acceptance pending satisfactory revision. It is possible to extend this deadline by contacting the editorial office directly.

Reviewers evaluate the articles, the editors decide on acceptance, changes or rejection. No changes will be made without the approval of the author.

All manuscripts submitted to *Dental Traumatology* will be reviewed by two experts in the field. *Dental Traumatology* uses single-blinded review. The names of the reviewers will thus not be disclosed to the author submitting a article.

References

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