Editors of this journal have the privilege of reading scores of research reports and other manuscripts every year. A few of the submissions are based on carefully collected and clearly reported data, analyzed with well-chosen methods, and written in flawless English. At the other end of the scale, editors struggle to find the actual study question or are appalled by lack of structure. Despite detailed guidelines for authors, surprisingly many disregard even basic technical requirements. Most submissions stand somewhere in between these extremes. An interesting topic approached inadequately is a problem; question and methods do not always match. Summarizing a full HTA report into a journal article of 4,000 words is rarely feasible, so authors should instead choose to submit a part that really merits separate publication. Writers would do well to remember that our audience is both international and multiprofessional.

The most common problems are sloppiness presentation and poor language. Our reviewers frequently point out flaws in tables and graphs, gaps in description of methods, or mistakes in presented results. Authors whose first language is not English have an extra hurdle. In the editorial process we support authors, of course, in many of these areas. A well-written manuscript just has a better chance of getting published. There are many excellent tools to help authors write well, and now they are accessible through one Web site.

New Web Site Supports Medical Writers

The EQUATOR Network is “an international initiative that seeks to enhance reliability and value of medical research literature by promoting transparent and accurate reporting of research studies” (1). The acronym reflects the aim to Enhance the QUAlity and Transparency Of health Research. EQUATOR provides resources for both writing and reviewing papers. There are examples of good reporting and even a link to an Academic Phrasebank developed in Manchester.

The network assists in the development of reporting guidelines and provides a selection of established tools. These include CONSORT for reporting trials, STARD for diagnostic studies, STROBE for observational studies (cohort, case-control, and cross-sectional studies), and PRISMA for systematic reviews and meta-analyses. Economic analyses, ethical issues, and qualitative research have their own references. The form for reporting possible conflicts of interest, developed by the International Committee of Medical Journal Editors (ICMJE) is included. It is used by IJTAHC, too. In addition, there is even a guide that helps in responding to reviewers (2).

The EQUATOR group plans to monitor the quality of reporting across health research literature, too. They have conducted a systematic review of reporting
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guidelines developed in consensus, and are currently survey- ing journals’ instructions for reviewers. Most importantly, the EQUATOR group supports transparent and accurate re- porting which increases research impact (3). The Web site is funded by UK and Canadian health research institutes and the Pan American Health Organization.

This important initiative already has collected many tools that support good scientific writing. Several reporting guidelines are under development, such as those for reporting the impact of patient and public involvement in research. However, there are still white areas and discrepancies. The INAHTA checklist for HTA reports (4) is not yet available. A guideline for evaluating a single rare disease is included, although the Web site aims to “select useful resources, not create exhaustive pages.”

IJTAHC encourages both authors and peer reviewers to get acquainted with and use the resources available through the EQUATOR Web site. These tools are useful in keeping your mind sharp and your writing clear. To be honest, if au- thors would observe the available advice before submitting, the manuscripts would be better, our editorial work faster, and readers would enjoy higher quality papers. Clarity saves time for all.

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