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Continued overleaf

#### Peripatetic editorial notes

### Writing well (6)

#### Wordiness, alias verbosity

Wordiness is the bane of much writing and speech. Sir Ernest Gowers has given this advice on avoiding superfluous words (1):

“Use no more words than necessary to express your meaning, for if you use more you are likely to obscure it and to tire reader. In particular do not use superfluous adjectives and adverbs and do not use roundabout phrases where single words would serve”.

In addition to carrying the twin hazards of obscuring the meaning and tiring readers superfluous words take up valuable space in books and journals, and try editors' souls. It would be useful to see whether the following sentences are saddled with verbosity.

- 59 Cultivate the habit of reserving adjectives and adverbs to make your meaning more precise, and suspect those that you find yourself using to make it more emphatic (1).
- 60 Use adjectives to denote kind rather than degree. By all means say an *economic crisis* or a *military disaster*, but think well before saying an *acute crisis* or a *terrible disaster* (1).
- 61 Circumstances alter cases.
- 62 The susceptibility to this particular disease varies in relation to the age of the child.
- 63 Fever in association with chills and rigors is a characteristic feature.
- 64 Intravenous cefuroxime should be used in order to achieve effective blood levels rapidly.
- 65 It is of importance to bear in mind the following considerations prior to prescribing digoxin.
- 66 It should be noted that patients who are allergic to amoxicillin are likely to exhibit similar reactions to all penicillins.
- 67 Therapeutic strategies which favourably impact upon clinical outcomes in chronic heart failure include optimization of non-pharmacological therapy (salt restriction, exercise and weight loss) (2).

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68 Substantial rises in serum creatinine may necessitate reduction in dose or cessation of the ACE inhibitor (2).

69 This finding was, however, unable to be replicated in a much larger study adequately powered for mortality (2).

70 A careful examination of the anus should always be made to look for oedematous anal tags, fissures or perianal abscesses (3).

71 With increasing time on treatment, adequacy may be impaired owing to alterations in the efficiency of the peritoneal membrane in transporting waste products, fluid and electrolytes (3).

Sentences 59, 60 and 61 are unexceptionable. It's true that 59 could be shortened to resemble 60. Both proffer advice on writing. But they are consecutive sentences from the same source, and when read together show how variation in sentence construction achieves style. 61 is a well known aphorism, and a model of brevity and clarity. In 62 *particular* contributes nothing to the sense and *with* would do perfectly well what *in relation to* is supposed to do. *In association* in 63, and *in order* in 64, are superfluous and the two sentences read much better without them. *It is of importance to* in 65 and *It should be noted that* in 66 are quintessential examples of pompous verbosity (ie. attempts to sound grand using superfluous words) in sentences that only contain mundane ideas. Perhaps they are misguided attempts to give emphasis. *Prior to* is a monstrous phrase that should be banished.

One may also ask what exactly is meant by *considerations* in 65, and what sort of patients habitually *exhibit* (66) signs of disease to others, except those who are asked to do so for physical examination or for teaching students. When relieved of verbosity these two sentences (72 and 73) are more effective and elegant.

72 Bear in mind the following adverse effects (or hazards, or risks) before prescribing digoxin.

73 Patients who are allergic to amoxicillin are likely to be allergic to all penicillins.

Articles in the *Australian Prescriber* are usually written in crisp and concise prose, but not always, as you will observe from sentences 67, 68 and 69, all from the pen of one author (2). They are full of fashionable jargon (eg *favourably impact, clinical outcomes, therapeutic strategies*), one hopelessly contorted construction (*unable to be replicated*), and a rather pompously intrusive *upon*. Compare them, please, with 74, 75 and 76.

74 Non-pharmacological interventions (eg. salt restriction, appropriate exercise and weight reduction) benefit patients with chronic heart failure.

75 Substantial rises in serum creatinine may require dose reduction or withdrawal of the ACE inhibitor.

76 However, this finding was not confirmed by (or not supported by) a much larger study adequately powered for mortality.

Standard textbooks are by no means innocent of verbosity or bad writing: 70 and 71 are just two of the many transgressions I have noted in one textbook. Sentence 70 will benefit from deletion of *careful* and the superfluous words *to look*, and by avoiding the passive construction (77).

77 Always examine the anus for oedematous anal tags, fissures or perianal abscesses.

78 With time, adequacy of dialysis may be impaired owing to a reduction in the efficiency of the peritoneal membrane in transporting fluid and solutes.

I think 78 is an improvement on 71 because the word *dialysis* at once clears the woolliness of *treatment*, *reduction* is more precise than *alteration*, and *solutes* is more precise than *waste products* and *electrolytes*, for some waste products

(eg  $\text{NH}_4^+$ ) are electrolytes and some are not (eg urea). Solutes includes them all, and *solutes* is what is really meant, as all dialysable solutes are transported during dialysis.

#### References

1. Gowers, Sir E (Ed). The complete plain words. Her Majesty's Stationery Office, London, 1986.
2. Krum H. Dilemmas in the drug treatment of heart failure. *Australian Prescriber* 2000; 23: 118-20.
3. Kumar P, Clark M (Eds). Clinical medicine. London: W B Saunders, 1998, pp 263, 585.

Colvin Goonaratna, Joint Editor, *CMJ*

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