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投稿寫作經驗分享

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 2023/3/10

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計量 開啟儀表板

個人檔案摘要

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26 已驗證的同行評審	0 已驗證的編輯者記錄

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<p>5,206 被引用次數總和 5206/153 = 34.0</p>	<p>4,253 引用文獻</p>

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Original Investigation **Impact Factor: 25.936, Rank: 3/155**
Subject Categories: PSYCHIATRY Cite This Permissions

March 2018

More ▾

Association of *DSM-5* Betel-Quid Use Disorder With Oral Potentially Malignant Disorder in 6 Betel-Quid Endemic Asian Populations

Chien-Hung Lee, PhD^{1,2,3}; Albert Min-Shan Ko, MD, PhD⁴; Frances M. Yang, PhD⁵; Chung-Chieh Hung, MD, MS⁶; Saman Warnakulasuriya, PhD⁷; Salah Osman Ibrahim, PhD⁸; Rosnah Binti Zain, BSc, MS^{9,10}; Ying-Chin Ko, MD, PhD¹¹

[Author Affiliations](#)

JAMA Psychiatry. 2018; 75(3): 261-269. doi:10.1001/jamapsychiatry.2017.4307

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You May Also Like

Comment & Response
 Mitochondrial Etiology of Psychiatric Disorders
 March 14, 2018

Correction
 Omission of Author in Byline
 March 14, 2018

論文形成的過程

- 研究議題（新穎、重要、對公眾有實質助益）
- 研究設計（問題探討、可行的最佳方案，研究規模）
- 研究對象（**selection bias**）
- 資料收集與測量（**information bias**）
- 資料分析（陳示結果的邏輯思考）
- 論文撰寫
- 論文投稿與修改

論文寫作的要點

- 經問題背景探討後，依研究方法與結果，如實地，系統邏輯的，以實證數據的方式，重點簡要地，經多面向多意見（或理論）充分討論後，總結結論並引申意義的連串程序。

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論文的結構

- 背景/目的（Background/Purpose）
- 研究方法（Materials and Methods）
 - 研究設計（Study design）
 - 參與者（Participants）
 - 暴露/結果/干擾因子測量（Measurements）
 - 統計分析（Statistical analysis）
- 結果（Results）
- 討論（Discussion）
- 結論（Conclusion）

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我的方法

- 先寫**結果**→**結論**→**方法**→**前言+討論**→**摘要**
- 提一個好問題（**站立在不同的角度**提問問題），良好的自問自答
- 摘要要有**數值/事證證據**，尤其是結果的部份
- **結論必須來自論文的實證證據**
- 全文前後**閱讀3次**，**字詞用語**須一致
- 詞句內容須清楚，自己已沉浸於論文情境太久，常有理所當然的狀況，**7天後**以**第3者**角度閱讀論文的本文
- 詞句要有**主詞**，**there is ...**不是一個好起頭

7

寫作的重點 1

- **投稿：**
 - 題材的研究規模，新穎度，重要性→決定投稿期刊的質量
- **內容的文字長度的安排**（**3500字**: 500,1200,600,1200）
- **中文比英文重要**（**精準陳述內容**最重要）
- **前言：**
 - 對問題內容的理解程度→文獻回顧、整理與探討→數據背景→科學理論基礎的依據為何？
 - 依研究結果的前後順序，排列背景內容的順序
- **方法：**
 - 檢視研究結果的變數是否均於測量方法中清楚陳示
 - 以合適的統計方法，邏輯地安排表格與圖解的內容
 - 如何控制干擾因子

8

寫作的重點 2

- 結果簡要，著重重點
- 討論：
 - 說明研究結果在理論/實證基礎的合理性
 - 以分析衍出討論
 - 陳列研究限制
- 結論：研究結論不超越研究結果的內容
- 摘要：內容飽滿聚焦，以數據強調結果，並支持結論
- 審查者：Peer reviewers是我們的外部指導者

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STROBE要點

STROBE Statement

STrengthening the **R**eporting of **OB**servational studies in **E**pidemiology

- **Checklist of items** that should be included in reports of observational studies

(<https://www.strobe-statement.org/>)

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	Item No	Recommendation
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract (b) Provide in the abstract an informative and balanced summary of what was done and what was found
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported
Objectives	3	State specific objectives, including any prespecified hypotheses
Methods		
Study design	4	Present key elements of study design early in the paper
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection
Participants	6	(a) <i>Cohort study</i> —Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up <i>Case-control study</i> —Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls <i>Cross-sectional study</i> —Give the eligibility criteria, and the sources and methods of selection of participants (b) <i>Cohort study</i> —For matched studies, give matching criteria and number of exposed and unexposed <i>Case-control study</i> —For matched studies, give matching criteria and the number of controls per case

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Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group
Bias	9	Describe any efforts to address potential sources of bias
Study size	10	Explain how the study size was arrived at
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding (b) Describe any methods used to examine subgroups and interactions (c) Explain how missing data were addressed (d) <i>Cohort study</i> —If applicable, explain how loss to follow-up was addressed <i>Case-control study</i> —If applicable, explain how matching of cases and controls was addressed <i>Cross-sectional study</i> —If applicable, describe analytical methods taking account of sampling strategy (e) Describe any sensitivity analyses

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Results

Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed (b) Give reasons for non-participation at each stage (c) Consider use of a flow diagram
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders (b) Indicate number of participants with missing data for each variable of interest (c) <i>Cohort study</i> —Summarise follow-up time (eg, average and total amount)
Outcome data	15*	<i>Cohort study</i> —Report numbers of outcome events or summary measures over time <i>Case-control study</i> —Report numbers in each exposure category, or summary measures of exposure <i>Cross-sectional study</i> —Report numbers of outcome events or summary measures
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included (b) Report category boundaries when continuous variables were categorized (c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses

13

Discussion

Key results	18	Summarise key results with reference to study objectives
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence
Generalisability	21	Discuss the generalisability (external validity) of the study results
Other information		
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based

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Betel-quist and its ingredients

Drug and Alcohol Dependence 179 (2017) 187-197

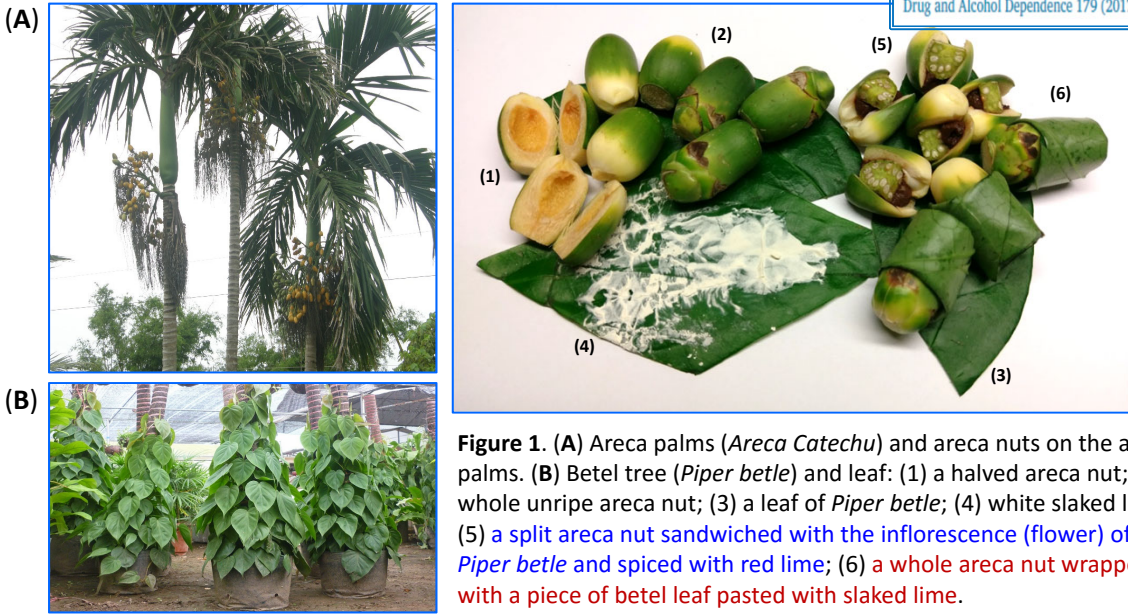
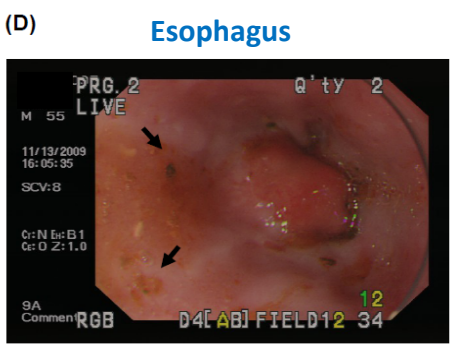
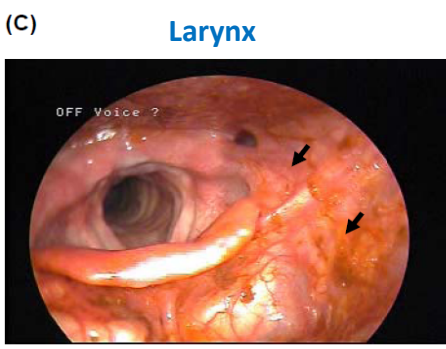
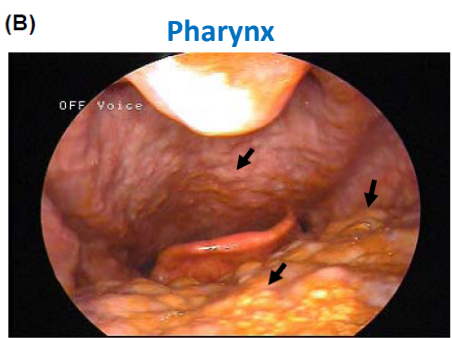
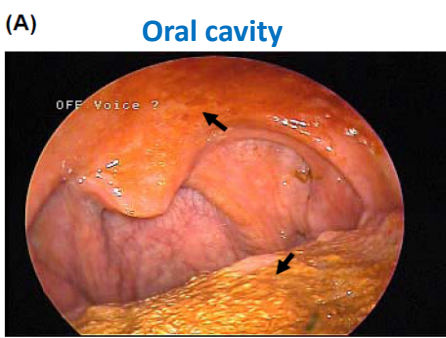


Figure 1. (A) Areca palms (*Areca Catechu*) and areca nuts on the areca palms. (B) Betel tree (*Piper betle*) and leaf: (1) a halved areca nut; (2) a whole unripe areca nut; (3) a leaf of *Piper betle*; (4) white slaked lime; (5) a split areca nut sandwiched with the inflorescence (flower) of *Piper betle* and spiced with red lime; (6) a whole areca nut wrapped with a piece of betel leaf pasted with slaked lime.

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研究方法：the types of BQ use in study countries

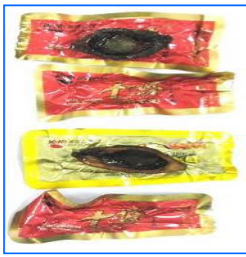
Int. J. Cancer: 129, 1741-1751 (2011) © 2010 UICC

BQ used in Taiwan



17

BQ used in Hunan, Mainland China



18

BQ used in Malaysia



BQ used in Indonesia



BQ used in Nepal



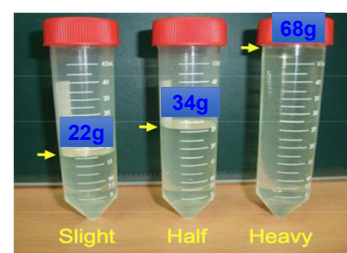
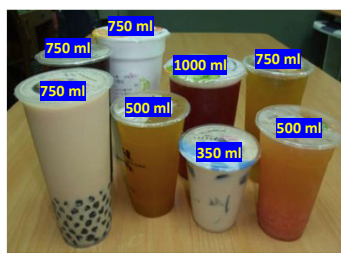
BQ used in Sri Lanka



研究方法：SSB assessment

International Journal of Obesity (2013) 37, 532-539

- **SSB consumer**: adolescents ingesting at least one serving of SSB per week over the prior month.
- **Total daily SSB intake**: calculated based on the total serving size, e.g., 350, 500, 580, 750 and 1000 ml commonly used in Taiwan.
- **HFCS-containing level**: **HSS drinks** were classified into **slight**, **half** and **heavy** HFCS beverages.



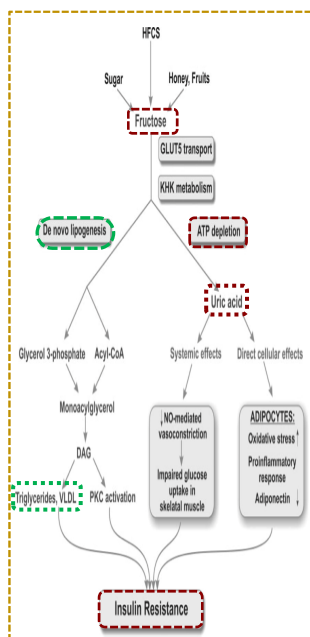
23

結果分析的重點：SSB and TG

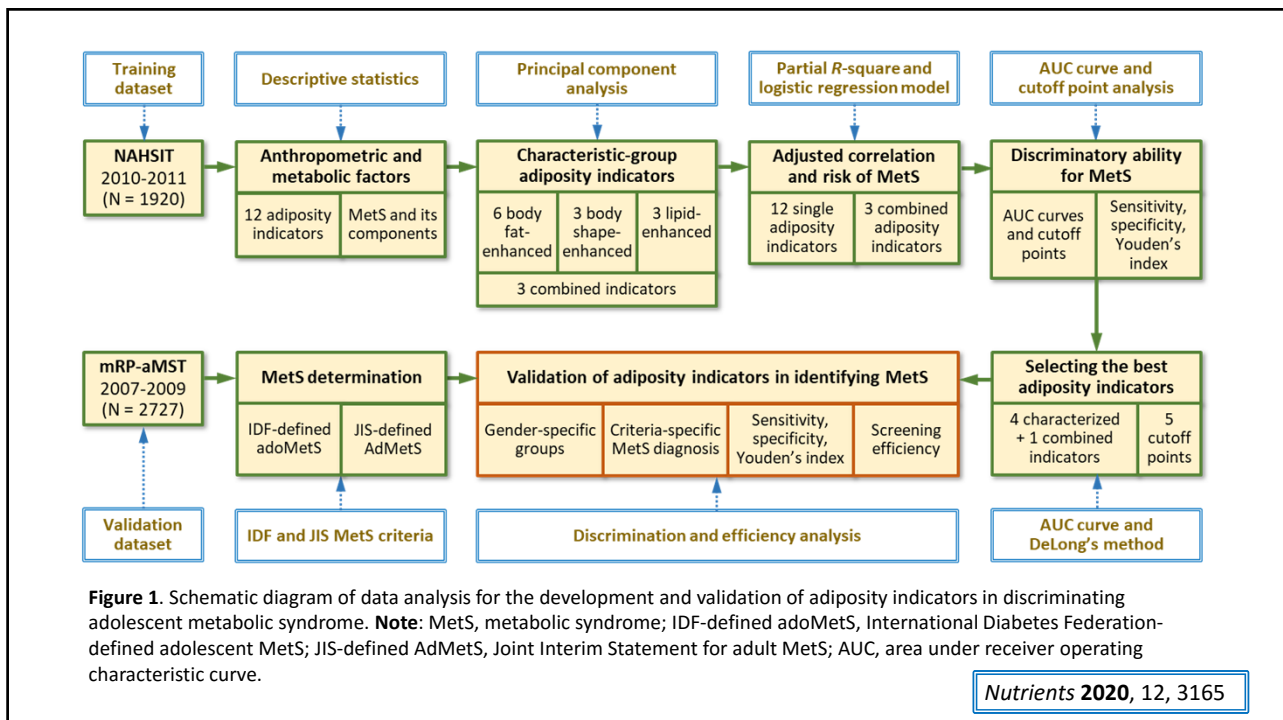
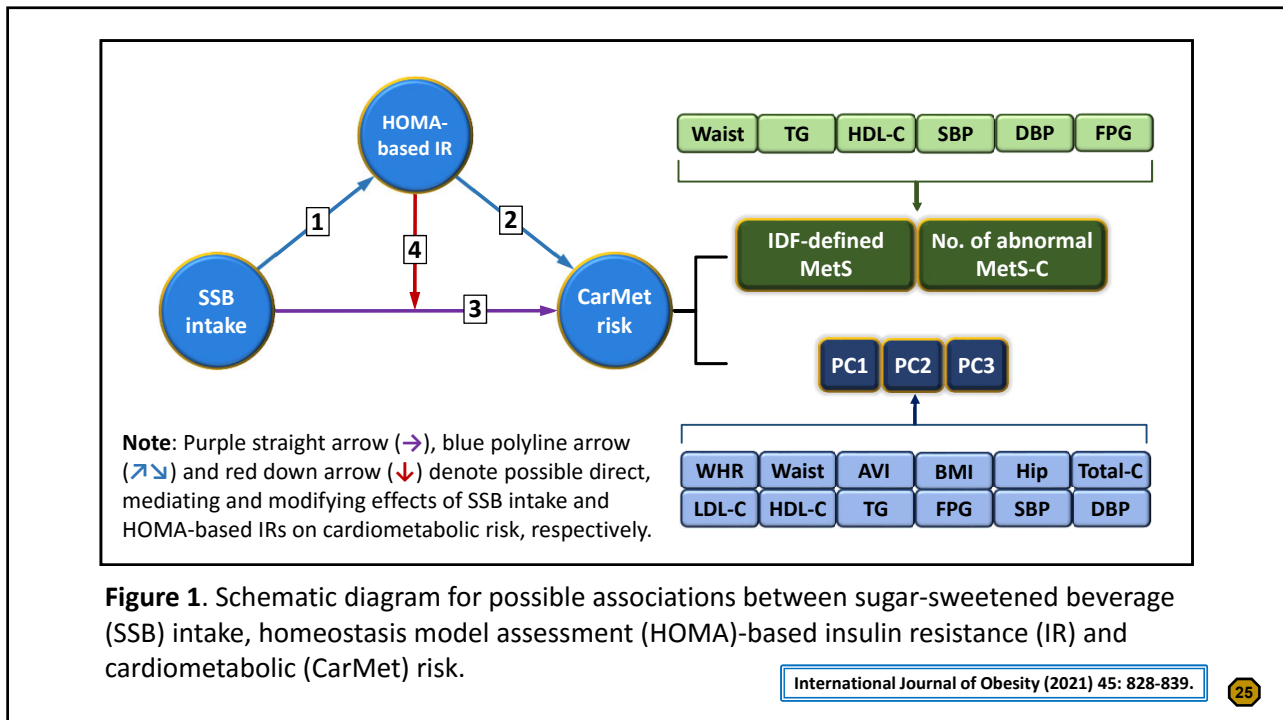
Table 3. Multivariate-adjusted differences in triglyceride and RBP4 associated with the type of SSB consumed by adolescents

Factors	Model I ^a	Model II ^b	Model III ^b
	aDiff. (95% CI)	aDiff. (95% CI)	aDiff. (95% CI)
Triglyceride (mg/dl)			
Non-intake	Ref.	Ref.	Ref.
HFCS HSD			
Slightly	13.51 (-8.07, 35.08)	13.02 (-8.23, 34.26)	9.75 (-11.10, 30.59)
Half-to-heavily	19.19* (2.51, 35.88)	19.46* (3.03, 35.90)	14.88 (-1.42, 31.17)
Mixed sugar BSD	2.34 (-15.07, 19.75)	0.76 (-16.43, 17.95)	-4.35 (-21.42, 12.73)
RBP4 (ng/ml)			
Non-intake	Ref.	Ref.	Ref.
HFCS HSD			
Slightly	12.49* (8.62, 16.36)	12.34* (8.66, 16.03)	11.96* (8.29, 15.63)
Half-to-heavily	12.79* (9.79, 15.78)	12.87* (10.02, 15.72)	12.33* (9.46, 15.20)
Mixed-sugar BSD	13.67* (10.54, 16.79)	13.19* (10.21, 16.18)	12.59* (9.58, 15.60)

^aModel I was adjusted for age, gender, study area, physical activity, total calories, drinking and smoking. ^bModel II: Model I was adjusted for BMI. Model III: Model II was adjusted for uric acid.



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- 論文共投稿11次，第11次直接接受，完全不用修改。

The use of tobacco-free betel-quin in conjunction with alcohol/tobacco impacts early-onset age and carcinoma distribution for upper aerodigestive tract cancer

J Oral Pathol Med (2011) 40: 684-692
© 2011 John Wiley & Sons A/S · All rights reserved

名稱	修改日期
CTA-JOP-1022	2011/3/1 下午 04:05
JOP_1022_ Revised ePage Proof	2011/3/1 下午 04:04
jop_1022	2011/2/14 下午 04:20
jop_1022-Page proof	2011/2/14 下午 04:17
Table S2	2011/2/14 下午 03:56
JOPM-ABCAGE-All Supplementary materials	2011/2/14 下午 03:53
Report-Cancer Onset Age	2011/1/16 下午 09:25
JOPM-Decision letter	2011/1/11 下午 05:08
JOPM-ABCAGE-Manuscript	2010/12/5 下午 09:46
JOPM-11-10-OA-1455	2010/11/22 下午 11:44
JOPM-ABCAGE-Figure	2010/11/22 下午 11:37
JOPM-Cover-letter	2010/11/22 下午 11:24
JOPM-Author guideline	2010/11/22 下午 10:47
Figure 1	2010/11/22 下午 10:13
JOPM-ABCAGE-Tables	2010/11/22 下午 10:13
Supplementary Figure S1	2010/11/22 下午 10:13
Supplementary Figure S2	2010/11/22 下午 10:13

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- 論文共投稿8次，第8次接受修改2次後刊登。

Risk evaluation for the development of cervical intraepithelial neoplasia: Development and validation of risk-scoring schemes

Int. J. Cancer: 136, 340-349 (2015) © 2014 IUCC

名稱	修改日期
IJC-Data	2019/11/5 上午 08:42
R1	2019/11/5 上午 08:42
R2	2019/11/5 上午 08:42
Texts	2013/11/17 上午 10:56
IJC-RECIN-Figures	2013/11/17 下午 06:00
IJC-RECIN-Tables	2013/11/21 下午 07:42
IJC-RECIN-Supplementary data	2013/11/21 下午 07:43
IJC-RECIN-Covering letter	2013/11/27 上午 11:46
IJC-Author Guidelines	2013/11/27 上午 11:47
IJC-13-3230	2014/3/9 下午 09:30
IJC-RECIN-Manuscript	2014/3/22 上午 10:43

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Journal Data Filtered By: Selected Categories: NUTRITION & DIETETICS Selected Editions: SCIE Selected JCR Year: 2021					
Rank	Journal name	2021 JIF	2021 JCI	Citable Items	
1	PROGRESS IN LIPID RESEARCH	14.673	1.51	37	
2	Advances in Nutrition	11.567	1.48	180	
3	CRITICAL REVIEWS IN FOOD SCIENCE AND NUTRITION	11.208	1.19	554	
4	Annual Review of Nutrition	9.323	1	22	
5	Obesity	9.298	1.62	211	
6	FOOD CHEMISTRY	9.231	1.89	3,823	
7	International Journal of Behavioral Nutrition and Physical Activity	8.915	1.63	162	
8	AMERICAN JOURNAL OF CLINICAL NUTRITION	8.472	1.59	381	
9	Hepatobiliary Surgery and Nutrition	8.265	1.04	60	
10	NUTRITION RESEARCH REVIEWS	8.146	0.96	21	
11	Current Obesity Reports	8.023	1.53	43	
12	Food Science and Human Wellness	8.022	1.29	62	
13	CLINICAL NUTRITION	7.643	1.59	633	
14	NUTRITION REVIEWS	6.846	0.78	123	
15	Nutrients	6.706	1.09	4,430	
16	Frontiers in Nutrition	6.59	0.97	1,117	
17	PROCEEDINGS OF THE NUTRITION SOCIETY	6.391	1.42	56	
18	JOURNAL OF NUTRITIONAL BIOCHEMISTRY	6.117	1.22	196	
19	FOOD POLICY	6.08	1.69	168	
20	FOOD REVIEWS INTERNATIONAL	6.043	0.6	212	
21	ANNALS OF NUTRITION AND METABOLISM	5.923	0.69	83	
22	INTERNATIONAL JOURNAL OF EATING DISORDERS	5.791	1.28	174	
23	INTERNATIONAL JOURNAL OF OBESITY	5.551	1.2	282	
24	Current Nutrition Reports	5.537	1.05	39	
25	Journal of Nutrition Health & Aging	5.285	1.03	116	
26	Journal of the Academy of Nutrition and Dietetics	5.234	1	167	
27	Journal of Functional Foods	5.223	1.09	469	
28	Obesity Research & Clinical Practice	5.214	0.76	85	
29	Beneficial Microbes	5.05	0.87	47	
30	APPETITE	5.016	1.19	534	
31	Journal of the International Society of Sports Nutrition	4.948	1.22	71	
32	Journal of Eating Disorders	4.916	0.92	157	
33	NUTRITION	4.893	0.94	369	
34	EUROPEAN JOURNAL OF CLINICAL NUTRITION	4.884	0.91	198	
35	EUROPEAN JOURNAL OF NUTRITION	4.865	1.16	279	
36	Obesity Facts	4.807	0.81	77	
37	Nutrition & Diabetes	4.725	1.01	34	
38	JOURNAL OF NUTRITION	4.687	1.06	417	
39	NUTRITION METABOLISM AND CARDIOVASCULAR DISEASES	4.666	0.95	406	
40	Nutrition & Metabolism	4.654	0.89	102	
41	INTERNATIONAL JOURNAL OF SPORT NUTRITION AND EXERCISE ME	4.619	1.17	56	
42	PUBLIC HEALTH NUTRITION	4.539	1.04	721	
43	INTERNATIONAL JOURNAL OF FOOD SCIENCES AND NUTRITION	4.444	0.76	81	
44	Genes and Nutrition	4.423	0.8	19	
45	JOURNAL OF RENAL NUTRITION	4.354	1.1	83	

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Journal Data Filtered By: Selected Categories: PEDIATRICS Selected Editions: SCIE Selected JCR Year: 2021					
Rank	Journal name	2021 JIF	2021 JCI	Citable Items	
1	Lancet Child & Adolescent Health	37.746	7.31	65	
2	JAMA Pediatrics	26.796	5.83	112	
3	JOURNAL OF THE AMERICAN ACADEMY OF CHILD AND ADOLESCENT	13.113	2.77	93	
4	PEDIATRICS	9.703	3.25	577	
5	World Journal of Pediatrics	9.186	2.13	68	
6	JOURNAL OF ADOLESCENT HEALTH	7.83	1.91	345	
7	Child and Adolescent Psychiatry and Mental Health	7.494	1.29	78	
8	Archives of Disease in Childhood-Fetal and Neonatal Edition	6.643	2.38	185	
9	JOURNAL OF PEDIATRICS	6.314	1.93	463	
10	Paediatric Respiratory Reviews	5.526	1.04	49	
11	PEDIATRIC ALLERGY AND IMMUNOLOGY	5.464	1.24	164	
12	EUROPEAN CHILD & ADOLESCENT PSYCHIATRY	5.349	1.33	206	
13	INDIAN JOURNAL OF PEDIATRICS	5.319	1.21	157	
14	Journal of the Pediatric Infectious Diseases Society	5.235	1.27	207	
15	Neonatology	5.106	1.61	124	
16	ARCHIVES OF DISEASE IN CHILDHOOD	4.92	1.34	289	
17	DEVELOPMENTAL MEDICINE AND CHILD NEUROLOGY	4.864	1.44	187	
18	Hormone Research in Paediatrics	4.275	0.83	59	
19	PEDIATRIC NEUROLOGY	4.21	0.96	135	
20	Child and Adolescent Mental Health	4.111	0.71	38	
21	PEDIATRIC PULMONOLOGY	4.09	1.06	450	

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論文寫作

論文寫作會隨著研究精進與同儕討論而成長，是身為研究者的必經之路。與其避而遠之，不知找出自己的寫作模式，並享受過程。

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*Thank you
for Listening!*

**Keep dat
Health** 