



HOW TO WRITE



A good **ABSTRACT**

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The **shortest part** of your manuscript,
but probably **the most important**.

The **only** part of the paper :

- ⌚ Published in conference proceeding
- ⌚ See by a potential referee when he is invited to review a manuscript
- ⌚ See by readers when they search through electronic databases such as PubMed.

ABSTRACT



A stand-alone text, approximately 200-300 words, that provides a snapshot of the article.

A concise summary of a research paper.



Purpose: to outline briefly all parts of the paper

WHY SHOULD WRITE AN ABSTRACT?



Abstracts are important for both **selection** and **indexing** purposes.

Selection: Abstracts allow readers who may be interested in the paper to quickly decide whether it is relevant to their purposes and whether they need to read the whole paper.

Indexing: Most academic journal databases accessed through the library enable you to search abstracts. This allows for quick retrieval by users. Abstracts must incorporate the key terms that a potential researcher would use to search.

WHEN SHOULD WRITE AN ABSTRACT?



Abstracts are usually required for:

- submission of articles to journals
- application for research grants
- completion and submission of theses
- submission of proposals for conference papers

CHARACTERISTICS OF GOOD ABSTRACTS



1. Following word limit (200-300 words) and stipulated format
2. Brief and succinctly summarize content of article.
3. Clear paragraph layout (example : indented, single spaced)
4. Should include :
 - a. Background/introduction
 - b. (Objectives/aims)
 - c. Methods
 - d. Results/findings
 - e. Conclusions
 - f. (Limitations)

CHARACTERISTICS OF GOOD ABSTRACTS



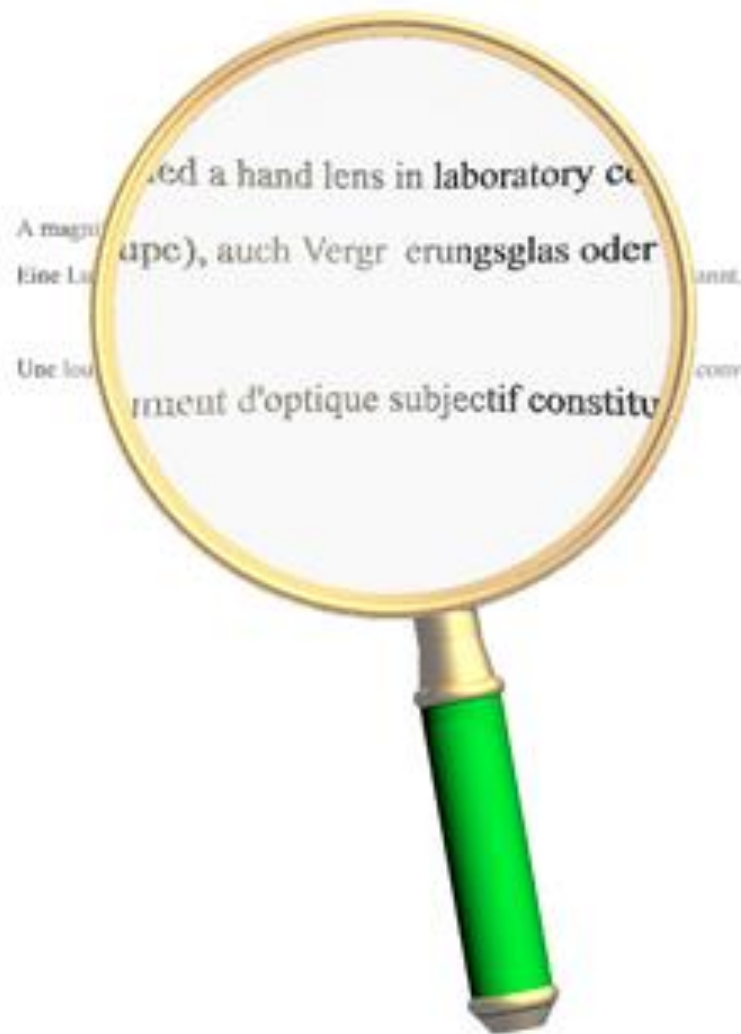
General qualities of a good abstract

The abstract is a condensed and concentrated version of the full text of the research manuscript. It should be sufficiently representative of the paper if read as a standalone document.

The abstract must be as detailed as possible within the word count limits specified by the journal to which the paper is intended to be submitted. This will require good precis writing skills, as well as a fine judgment about what information is necessary and what is not.

The abstract must contain as much information as possible on the analyses related to the primary and secondary outcome measures.

The abstract should not present a biased picture, such as only favorable outcomes with the study drug, or findings that support the authors' hypotheses; important nonsignificant and adverse findings should also receive mention. Thus, to the extent possible, the reader should be able to independently evaluate the authors' conclusions.



DISSECTION OF ABSTRACTS

BACKGROUND/INTRODUCTION



- ④ The **shortest** part in abstract (1-3 sentences)
- ④ Purpose : provide readers with a background
- ④ What is **already known** about the subject
- ④ What is **not known** about the subject

BACKGROUND/INTRODUCTION



Examples of the background section of an abstract

The antidepressant efficacy of desvenlafaxine (DV) has been established in 8-week, randomized controlled trials. The present study examined the continued efficacy of DV across 6 months of maintenance treatment.

The healing powers of prayer have been examined in randomized, double-blind, appropriately controlled trials. However, no study has considered the philosophical pitfalls inherent in such studies.

METHODS



- @ The **second longest section**
- @ Purpose : to give information about **what was done and how**



METHODS



Questions regarding which information should ideally be available in the methods section of an abstract

What was the research design?

What was the clinical diagnosis of the patients recruited?

What was the setting of the study (if relevant)?

How were the patients sampled?

What was the sample size in the whole sample and/or in the different groups?

What treatments did patients in different groups receive, and at what doses?

What was the duration of the study?

On what research instruments were patients rated?

What was the primary outcome measure and how was it defined?



Examples of the methods section of an abstract

Consecutive consenting male inpatients in moderately severe, uncomplicated alcohol withdrawal at screening were randomized to receive either lorazepam (8 mg/day; $n=50$) or chlordiazepoxide (80 mg/day; $n=50$) with dosing down-titrated to zero in a fixed-dose schedule across 8 treatment days. Double-blind assessments of withdrawal symptom severity and impairing adverse events were obtained during treatment and for 4 further days using the Clinical Institute Withdrawal Assessment for Alcohol revised scale (CIWA-Ar) and other instruments. The primary outcome was the trajectory of improvement in CIWA-Ar ratings.

METHODS



Consenting adults ($n=20$) with severe, chronic, CBT- and antidepressant-refractory posttraumatic stress disorder (PTSD) were prospectively treated with a fixed course of 6 bilateral, twice-weekly, ambulatory ECT. The primary outcome measure was improvement on the Clinician-Administered Posttraumatic Stress Disorder Scale (CAPS). Response to ECT was defined as at least 30% attenuation of CAPS ratings, and remission as an endpoint CAPS score of 20 or less.

RESULTS



- ☉ The **most important** part of the abstract
- ☉ The **longest part**
- ☉ Should contain **as much detail** as journal word counts permit

Example :

Response rate differed significantly between diabetic and nondiabetic patients.

Response rate was higher in nondiabetic than diabetic patients (49% vs 30%, respectively; $P < 0.01$)

RESULTS



Information that the results section of the abstract should ideally present

The number of patients who completed the study; drop out rates in the different groups in the study; in treatment studies, drop out rates specifically related to adverse events in each treatment arm.

The results of the analysis of the primary objectives, expressed in words along with *P* values in parentheses.

The results of the analysis of the more important secondary objectives, expressed in words along with *P* values in parentheses.

Numerical information about the above analyses, such as in terms of means and standard deviations, and response and remission rates. Wherever possible, effect sizes, relative risks, numbers needed to treat, and similar statistics should be provided along with confidence intervals for each.

Important negative findings, if any, should also be presented; that is, findings that fail to support the authors' hypotheses

Data on important adverse events should be included in addition to the data on efficacy

RESULTS



Three patients withdrew consent during week 1; all the rest completed the 6-ECT course. An intent-to-treat analysis ($n=20$) showed a significant fall in Clinician-Administered Posttraumatic Stress Disorder Scale (CAPS) and HAM-D scores by a mean of 34.4% and 51.1%, respectively. Most of the improvement developed by the third ECT (day 10). The CAPS improvement was independent of the HAM-D improvement; and improvement in CAPS did not differ significantly between patients with less vs more severe baseline depression. The CAPS response rate was 70%; no patient remitted. In the complete analysis ($n=17$), mean improvements were 40% and 57% on CAPS and HAM-D, respectively, and the response rate was 82%. Treatment gains were maintained at a 6-month follow-up. No unexpected adverse effects were associated with treatment.

RESULTS



At the 7-year follow-up, 52,500 (74.9%) mother–child pairs were re-examined. attention-deficit hyperactivity disorder (ADHD) was identified in 945 (1.8%) children. Maternal [odds ratio (OR), 5.2; 95% confidence interval (CI), 3.4–9.1] and paternal (OR, 3.3; 95% CI, 2.0–5.8) ADHD were each associated with increased risk of ADHD in the offspring. ADHD was more common in male than in female children (OR, 4.8; 95% CI, 2.6–8.5). Maternal age, prematurity, low birth weight, fetal distress, and neonatal asphyxia were not associated with an increased 7-year risk of ADHD. After adjusting for maternal ADHD, intranatal exposure to psychotropic medication did not predict the 7-year risk of ADHD (OR, 1.2; 95% CI, 0.6–2.8).

CONCLUSIONS



- ④ Should contain the **principle take-home message** of the study
- ④ Findings highlighted in conclusion relates to **primary outcome**; however other **important/unexpected findings** should also be mentioned.
- ④ Should mention **theoretical/practical implication/importance** of the findings for the field.
- ④ Should be **scrupulously honest**; should not claim more than their data demonstrate.



Desvenlafaxine (100–200 mg/day) is effective and well-tolerated in the attenuation of the number and severity of hot flashes in menopausal women; benefits are apparent within the first week of therapy and are maintained for at least 6 months of treatment.

In contrast with previous research, our study found that lorazepam was as effective as diazepam on all outcome measures in patients with uncomplicated alcohol withdrawal. A likely explanation is that we used higher doses of lorazepam, and a longer treatment duration with a slower taper. We conclude that lorazepam can and should be preferred over diazepam in alcoholics with known or suspected liver disease.



Examples of unnecessary content in a abstract

Bibliographic references

Details about the laboratory and other assessments conducted as part of safety assessments (this is because such tests are routinely performed in clinical studies), unless there is a specific reason why these details are necessary in the abstract.

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Object name is IJPsy-53-172-g008.jpg

Details about the statistical methods employed and the software used, unless there is a specific reason why these details are necessary in the abstract.

Sociodemographic details, unless these are necessary for the proper interpretation or generalization of the findings.

Details about the value of the statistical criterion for a test and its degrees of freedom (eg, Chi-square=7.49, df=1, $P<0.001$); it is sufficient to merely indicate significance in the sentence or state the P value in parentheses after describing the finding.



THANK YOU

References :

How to write a good abstract for a scientific paper or conference presentation

[Chittaranjan Andrade](#)

[Indian J Psychiatry](#). 2011 Apr-Jun; 53(2): 172–175.

doi: [10.4103/0019-5545.82558](#)

Writing an abstract

Understanding and developing abstracts

