Another Classic Gets Refreshed


The eagerly anticipated ninth edition of the American Medical Association (AMA) style manual is a huge (660 pages in the body of the book, compared with 377 pages in the eighth edition, published in 1989) and impressive volume with a wealth of information “designed for authors, editors, and readers . . . to make a published manuscript clear and readable and, not least, reliable and authoritative” (pv).

Both editions were prepared by an AMA committee of 9 or 10 persons, who not only describe AMA style, but set the policy. Cheryl Iverson, director of the AMA Editorial Processing Division, chaired the committee for the eighth and ninth editions; 3 of the 10 members of the new committee are also repeats. Each chapter has at least one committee member acknowledged as the principal author, and 54 experts in different fields are acknowledged by name for their advice and comments. More than 70 editors and other critics reviewed parts of the manual in preparation.

What things are similar in the 2 editions? They are divided into the same 5 major sections: (1) Preparing an Article for Publication, (2) Style, (3) Terminology, (4) Measurement and Quantitation, and (5) Technical Information. Each section in the new edition has numbered chapters that have basically the same titles as in the eighth edition. Each chapter contains numbered subsections for easy reference, but these are not listed in the table of contents in this edition; instead, each chapter opens with a list of its subsections, which is more helpful to the reader. Another departure is that references are listed at the end of each chapter or at the end of extensive subsections within chapters instead of at the end of the book.

So what else is new in the ninth edition? A lot.

The subsection on manuscript preparation has many more examples and a particularly good discussion of structured abstracts, in addition to expanded explanations of the parts of various kinds of manuscripts, including references, tables, and many kinds of illustrations and their most appropriate uses.

The subsection on ethical and legal considerations has grown from 9 to 86 pages and includes details on copyright and intellectual property, authorship, and the rights and responsibilities of authors, editors, and reviewers. The subsections on scientific misconduct, conflict of interest, and dealing with the news media (with a new concept for me, “advertorials”) are enlightening.

The subsection on statistics now features information on study design and a coordinated glossary of statistical terms, their definitions, and preferred presentation, including notes on common errors.

A completely updated subsection on nomenclature contains extensive details on genetics, bacteria, and viruses, but surprisingly omits any mention of parasitic and autoimmune diseases.

There are new policies for eponym and number style, each explained with a rationale and examples. Eponymic names will no longer be possessive, a recommendation in an earlier AMA style manual (later rescinded) and in the latest edition of the CBE style manual, Scientific Style and Format. Cardinal numbers 2 through 9 (and multidigit numbers) except at the beginning of a heading, a sentence, and so on, are now to be stated in arabic numerals; “one”, whether used as a count or as a pronoun, is to be spelled out (except in a series containing larger numbers); this is also now CBE style. The ordinals “first” through “ninth” are to be spelled out in AMA publications instead of using 1st, 2nd, and so on; this was not the CBE style but has subsequently been revised (CBE Views, Vol 21, Nr 1 [Jan], 1998, pp 14-16) so that it now agrees with AMA style. It is ironic that the edition number on the cover of each style manual is not in the style recommended in the text: this is, AMA’s “9th” edition and CBE’s “sixth” edition. Cover designers don’t necessarily read the text.

“One” and “first” are the numbers that pose problems for most people; someday perhaps we will except or accept those and state the rest in arabic numerals; some changes take getting used to.

A larger reference-style subsection features new examples and includes recommendations for citing electronic “publications”, even e-mail. The “Vancouver” style and the National Library of Medicine style are cited but not followed precisely.

An expanded discussion of “inclusive” language recommends terms to describe race and ethnicity, disabilities and the people with them, sex versus gender, and sexual orientation.

A new subsection on typography contains a glossary of publishing terms that is helpful but mixes some electronic and traditional typographic definitions of terms—such as type families, faces, and fonts—and confuses forms with signatures. There is no mention of “coated stock” even though “enamel” is included, and “sewn binding” is omitted in favor of “perfect” and “saddle-stitched”.

(Incidentally, AMA still puts closing quotation marks outside periods and commas.)

There is great new additional information on electronic publishing, including copyright issues and a description of changes in manuscript processing, from copyediting through printing.

The index seems particularly thorough and easy to use, topically and typographically.

This is a must-own volume for anyone involved in scientific and especially medical writing, editing, and publishing.

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