

◆ Plenary Presentation: *From Data to Headline: How Science Is Reported in the Newspaper*

Speaker:

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Reporter:

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Susan Okie, national staff writer on medicine for the *Washington Post*, presented three case studies from her own reporting experience and offered journal editors advice for interacting with newspaper reporters.

Okie said that the *Post's* medical and science reporters are deluged with press releases and advance contents listings from journals, and she described the *Post's* strategy for triage of potential stories. First, the science editor reviews the press releases and contents listings, requests advance hard copies of interesting papers, and makes the first cut. Papers that make this cut are distributed to reporters, who do preliminary reporting to determine each paper's worthiness.

Okie described her experiences in reporting on three studies. One was touted in a press release as the first to prove that adjuvant therapy is effective in treating melanoma. Okie's initial reporting revealed that the study had been designed to test a melanoma vaccine, not to evaluate an adjuvant therapy, and that the vaccine was not effective. And the adjuvant therapy described as new had actually been approved as standard therapy since 1995. Okie considered writing a story about the negative findings on the vaccine. However, further reporting revealed that this particular vaccine was only one of four

under study; Okie filed her notes for later reference.

Another study was announced in a press release claiming that investigators had discovered the first "schizophrenia gene". From her initial reporting, Okie learned that the subtype of "schizophrenia" under study is not classified as schizophrenia in the United States, that the mutation identified was found in seven family members with schizophrenia but also in participants without symptoms, and that the mutation was not present in three other families with the same disease. The press release did not mention the most interesting finding of the study—that the gene of interest might be important in brain function. Because that finding would be of interest mainly to other researchers in the field, Okie did not write a story.

The third case was a large prospective study that found that hormone-replacement therapy (HRT) increased the risk of ovarian cancer. The study was not able to answer whether risk was increased equally by estrogen-only HRT and combination estrogen-progesterone HRT. One of the experts Okie interviewed for her story had data that shed light on this question, but he was prevented from sharing his findings because they were embargoed until a scientific meeting 4 days later. Thus, the important information appeared in a follow-up story several days later rather than in Okie's original front-page story.

Okie's first piece of guidance for journal editors was a description of what makes news: firsts and superlatives, new information about prevalence and risk, definitive proof, findings that overturn old assumptions, and hot topics, such as stem cells, genetic engineering, and obesity.

Next, noting that she thinks "science editors and science reporters have become

increasingly sophisticated and skeptical", Okie offered advice for writing successful press releases: Keep it brief, accurately reflect the study's purpose and findings, don't use words like "breakthrough" or "landmark" unless you can back them up, make it easy for reporters to get the paper, and provide ways for reporters to reach the study authors. Okie advised journal editors to keep press releases to a single paragraph of six or seven lines, and she described the e-mail press releases from *Science* and *Nature* as particularly effective.

Okie advised editors to release papers long enough before publication to permit good reporting—about a week. She said that *Post* reporters appreciate embargoes because they give reporters time to report stories carefully without worrying about being scooped. She advised journal editors to have a "plan B" in place in case an embargo is broken and the journal is deluged with calls from reporters. Okie noted that first editions of some newspapers are published at 10:30 on the night before, so that the common embargo time of midnight on the day of expected publication could actually prevent news from appearing in early editions.

Okie ended her presentation with suggestions for helping reporters to move "beyond the findings". First, journal editors can suggest experts not connected with the study who might be able to provide context and commentary. Second, if the study authors have any conflicts of interest, editors should disclose them up front. Third, in the case of clinical studies, editors might be able to help reporters arrange interviews with study participants. Finally, any relevant graphics or background material editors can provide will help reporters write a better story. 