



Universidad Nacional de Córdoba

Facultad de Lenguas

Maestría en Inglés con Orientación en Lingüística Aplicada

Tesis de Maestría

LOS ARTÍCULOS DE REVISIÓN EN INGLÉS EN EL ÁMBITO DE LAS CIENCIAS DE LA SALUD: UN ESQUEMA RETÓRICO EJEMPLAR

María Belén Gallardo

Directora: Mgtr. Daniela Moyetta (UNC)

Córdoba, 2016



Acknowledgements

I owe deep gratitude to many people for assisting me in this project.

First and foremost, I am sincerily grateful to my thesis director and friend, Daniela Moyetta, who has supported me throughout my thesis with her patience, generosity and expert guidance. Thank you for showing me the way!

I owe immense gratitude to Susana Liruso, who first introduced me to the ESP studies and has encouraged me to go on.

I would like to thank Fabián Negrelli, Cecilia Ferreras, and Cecilia Chiappero for their encouragement, generosity, and valuable comments.

I am deeply indebted to my raters, who carried out the task of analyzing part of the present corpus with professionalism.

Also, my sisters and my brother deserve my warmest thanks for their encouragement and cheers.

I would like to show my eternal gratitude to my parents, Alicia and Luis, for supporting me throughout all my studies at University and for always believing in me.

Finally, I would like to thank Fernando, my partner and better half, and Martina and Sophia, my beloved daughters, for always being by my side throughout these years and for providing words of support and hugs at times when the project seemed impossible to complete.

Without your support, this thesis would not have been possible... Thank you all!

Abstract

Since the appearance of Swales' (1981, 1990) CARS model of analysis, there has been a great interest in untangling the way in which information is organized in research-process papers. In the latest years, a great number of researchers have been concerned with analyzing the rhetorical structure and the linguistic features of the canonical sections of the research article. However, little attention has been paid to analyzing the rhetorical structure of other emerging genres, as it is the case of the review article. The present study, thus, examines the rhetorical organization of information in the different sections of medical review articles written in English and proposes a template of move analysis for the three sections identified: *Introduction, Development* and *Conclusion*.

The analysis was based on a corpus of thirty medical review articles published in a prestigious online journal, following conventional sampling procedures. Then, a move analysis was conducted applying the method proposed by Morales (2010).

Finally, a template consisting of thirteen moves is suggested for the analysis of medical review articles written in English. The results of this study have pedagogical implications for ESP students, novice researchers, and ESP teachers.

Table of Contents

Acknowledgements

A	ha	twa	_4
\mathbf{A}	ne	tra	СI

1.Introduction1
1.2. Motivation for research
1.3. Research question
1.4. Objectives
1.5. Thesis outline4
2. Review of the literature5
2.1. Introduction5
2.2. Studies which analyze the overall rhetorical organization of the research
article5
2.3. Studies which focus on linguistic devices and the rhetorical organization of the
review article7
2.4. Summary of the Chapter9
3. Theoretical framework
3.1. Introduction
3.2. Genre in three research traditions
3.2.1. The New Rhetoric approach to genre
3.2.2. The Systemic-Functional approach to genre
3.2.3. The ESP Approach to Genre
3.2.4. Similarities and differences of genre-based pedagogy12
3.3. Genre from the ESP perspective
3.4. The field of medicine: a discourse community15
3.5. The review article as an emerging genre16
3.5.1. The review article as a research-process genre
3.5.2. The review article: an overview of its rhetorical structure
3.6. Move analysis
3.6.1. Swales' models of move analysis
3.6.2. Moves identified in the rhetorical structure of research articles22
3.6.3. Moves identified in the rhetorical structure of review articles25
3.6.4. Moves used in the present study25
3.7. Summary of the chapter

4. Materials and Methods	28
4.1. Introduction	28
4.2. Data collection procedure and corpus design procedure	28
4.3. Data analysis procedure	30
4.3.1. Move classification taxonomy for the study and sentence analysi	s30
4.3.2. Sentence analysis and move classification.	31
4.3.3. Frequency analysis	31
4.3.4. Validation.	32
4.4. Summary of the chapter	32
5. Results.	33
5.1. Introduction.	33
5.2. Inter-rater reliability	33
5.3. Article length	34
5.4. Constitutive elements of review articles	35
5.5. Predominant textual sequences in review articles	36
5.6. Sections of the RA	37
5.7. Rhetorical structure of the RA	38
5.8. Rhetorical moves found in the <i>Introduction</i> section	41
5.8.1. Move 1: Presenting the topic	42
5.8.2. Move 2: Justifying the topic	
5.8.3. Move 3: Establishing the objective	44
5.8.4. Move 4: Presenting the article development structure	44
5.8.5. Move 5: Making recommendations for the reader	45
5.9. Rhetorical moves found in the <i>Development</i> section	45
5.9.1. Move 6: Presenting the information	46
5.9.2. Move 7: Elaborating /expanding the information	47
5.9.3. Move 8: Stating the author's opinion/point of view	48
5.9.4. Move 9: Summarizing	48
5.10. Rhetorical moves found in the <i>Conclusion</i> section	
5.10.1. Move 10: Summarizing the main findings	50
5.10.2. Move 11: Making recommendations for future research or practic	e51
5.10.3. Move 12: Indicating implications	
5.10.4. Move 13: Making predictions	
5.11. Summary of the chapter	53

6. Discussion.	54
6.1. Introduction	54
6.2. Discussion	54
6.3. Proposed template	58
6.4. Limitations of the study	59
6.5. Implications of the study	60
References	61
Appendices	
Appendix A	67
Appendix B	72
Appendix C.	,123
Appendix D	125
Tables	
Table 1: Swales' 1981 model	20
Table 2: Swales' 1990 model	21
Table 3: Swales' 2004 revised model	21
Table 4: Nwogu's 1997 eleven-move schema	22
Table 5: Kanoksilapatham's 2005 fifteen-move schema	23
Table 6: Morales' 2010 ten-move schema	25
Table 7: Inter-reliability coefficient researcher- rater 1	33
Table 8: Inter-reliability coefficient researcher- rater 2	33
Table 9: Units of analysis in the corpus	34
Table 10: Average number of sentences and words per article according to the s	ub-
discipline	35
Table 11: Constitutive elements of RAs	35
Table 12: Distribution of moves per text in the corpus	40
Table 13: Rhetorical move combinations found in the <i>Introduction</i> section	41
Table 14: Rhetorical move combinations found in the <i>Development</i> section	46
Table 15: Rhetorical move combinations found in the <i>Conclusion</i> section	50
Table 16: Rhetorical moves of medical RAs	53

Abbreviations and Acronyms

CARS Create a Research Space

CC Current Concepts

EAP English for Academic Purposes

EFL English as a Foreign Language

EPC English for Professional Communication

ESP English for Specific Purposes

GH Global Health

GM Genomic Medicine

IMRD Introduction Method Result Discussion

NR New Rhetoric

RA Review Article

SFL Systemic Functional Linguistics

Chapter I: Introduction

1.1. Introduction

Since the early 80's, linguists and teachers of English for Specific Purposes have shown a great interest in genre studies for the analysis of oral and written discourse. According to Holmes (1997), this interest has mainly had pedagogical motivations, since adequate models and descriptions need to be proposed in order to facilitate the comprehension and production of academic and scientific texts for both students whose native language is English and students of English as a Foreign Language (EFL).

Among the most frequently used genres in the field of medicine is the review article (RA). Some authors consider it as research work carried out in a library instead of a laboratory and whose originality lies in its unit of analysis (Cué Brugueras, Díaz Alonso, Díaz & Valdés Abreu, 1996). For this reason, it is interesting and innovating to focus on the analysis of the rhetorical structure of the RA, as there are very few studies which have provided a detailed description of this emerging genre.

The Medical Sciences have a vast tradition in the publishing of research papers and do not seem to offer great structural flexibility. As regards the RA, most authors are familiarized with the established format for the presentation of information; however, they may not be aware of the internal order of the information included in the different sections of the RA. This lack of awareness can partially explain the difficulty most inexperienced authors face when writing RAs (Morales *et al.*, 2007; Morales, 2010).

In the last few years, this emerging genre has been widely used in the field of Medicine; it is expected that other fields adopt it as a means to consolidate scientific and technical knowledge. It is worth mentioning that RAs are generally written by specialists in the field. Nevertheless, competent authors of RAs not only need to have vast experience and knowledge of a certain topic but also be familiarized with the most effective methods of information collection; they should be able to write a paper following the conventions of the genre (Cué Brugueras, Díaz Alonso, Díaz & Valdés Abreu, 1996).

It is well known that English has established itself as the international language of science and technology (Grabe & Kaplan, 1996). Hence, native and non-native

researchers who want to actively participate in the creation of knowledge must be able to read and write RAs in English, among other genres. Scientists are expected to share their research work with other members of the community in various forms. Probably, one of the most demanding of these forms is the RA published in a scientific journal. Such review has high standards of quality; therefore, it constitutes a valuable, lasting reference for other scientists. In fact, writing high-quality scientific RAs requires knowing the generic conventions and only members of the discourse community can publish them.

As the published literature proliferates, the RA is becoming more and more important, since the genre provides the writer with an opportunity to give a synoptic vision of an area of expertise, contributing, thus, to an understanding of that area and how its achievements might relate to those in other areas. Despite its major role in the construction of scientific knowledge, disentangling the rhetorical structure of the RA has received less attention on the part of the linguists.

Therefore, the present study was designed to examine the rhetorical structure of medical RAs written in English. It constitutes a descriptive-exploratory study aimed at offering orientations in the pedagogical practice of ESP courses.

1.2. Motivation for Research

In order to identify the rhetorical characteristics of a genre, a number of studies have focused on the analysis of the rhetorical structure and discursive functions of the genres most commonly used by the academic-scientific community (Flowerdew & Dudley-Evans, 2002: 463). Most of these studies, however, have analyzed the overall rhetorical structure of the research article or some of its sections. The RA constitutes an emerging genre which is becoming more and more common in the field of Medicine. Hence, the main motivation for the present research has come from a pedagogically driven concern: raising medical researchers' consciousness of the importance of mastering the ways of processing and producing specialized discourse, as it is the case of the RA, to be accepted by the international scientific discourse community. In addition, being communicatively competent in this genre may empower non-native researchers who

need to do both: a) read and understand what is happening in the text in terms of discourse, and b) write RAs conforming to the conventions of the scientific community with whom they intend to establish a dialogue.

As an ESP teacher at the Autonomous Popular University of the State of Puebla, Mexico, I have noticed that although RAs written in English are usually part of the students' reading materials in different courses, the socio-rhetorical conventions underlying the genre are not explicitly presented to the students. However, such situation can be reverted if discipline specific and genre-specific rhetorical patterns are presented in the language classroom. By making students aware of the conventionalized disciplinary practices, they can become more proficient readers and more efficient writers. Therefore, the template proposed in this study can aid readers and writers at recognizing, understanding and using the conventions that govern the rhetorical patterns preferred by scholars who publish in English in the field of Medicine.

1.3. Research Question

The following research question is addressed in the present study:

What is the rhetorical structure of medical RAs written in English?

1.4. Objectives

1.4.1. General Objective

1. To describe the rhetorical structure of medical RAs written in English in order to inform the pedagogical practice in ESP courses.

1.4.2. Specific Objectives

- 2. To analyze the rhetorical structure of medical RAs written in English and published in the years 2010, 2011, 2012, and 2013.
- 3. To identify the communicative functions of the different sections of the medical RAs written in English as reflected in their rhetorical moves.

4. To propose a rhetorical schema for the complete medical RAs written in English.

1.5. Thesis Outline

The present study is organized as follows: Chapter I presents the reasons why the review article has been selected as the object of study as well as the research question and the objectives set out for the present study. Chapter II reviews studies which have focused on the organization of information in the review article and studies which have explored the different sections of this genre in different disciplines. Chapter III presents the theoretical foundation of this study; i.e. genre theory. The chapter also provides a recount of the review article as an emerging genre; it also introduces the most salient frameworks of move identification of the different sections of the review article. Finally, it describes the categories of analysis used in the present study regarding move identification in the different sections of the genre herein analyzed. Chapter IV gives an account of the materials and method selected for this research. It further specifies the data collection procedure. Chapter V presents the results obtained from the data analysis. Lastly, Chapter VI interprets and discusses the findings in relation to the research question and existing knowledge. The chapter finishes by indicating the limitations and the implications of the present study.

Chapter II: Review of the Literature

2.1. Introduction

Vast research has been done to identify the rhetorical structure that characterizes different established genres. Most of this research has focused on the research article, one of the most studied established genres. In this section, it is interesting to compare some of these studies to see if their outcomes could be applied to the review article, object of the present study. Doing so might be useful for this thesis due to the fact that only a few studies have made attempts at discovering the rhetorical organization of information in emerging genres, such as the review article. Therefore, there is an overview of studies which have focused on the rhetorical organization of research papers in different disciplines followed by a recount of the studies which have analyzed the rhetorical organization of information in the review article.

2.2. Studies which Analyze the Overall Rhetorical Organization of the Research Article

A number of authors have shown their concern for the overall macrostructure of the research article in different disciplines taking Swales' (1990) CARS model as a point of departure. His three-move schema for the Introduction section shows the recurrent moves and steps writers make use of for different purposes.

Nwogu (1997) examined fifteen research articles from five high quality journals using Swales' (1990) model of analysis to account for the schematic structure of information in all sections of the medical research article. Like Swales' work, his investigation adopted functional labels to characterize moves and their constituent elements in each section; this resulted in an eleven-move pattern, eight of which were found to be "normally required" (reviewing related research, presenting new research, describing data collection procedure, describing experimental procedure, indicating consistent observations, highlighting overall research outcome, explaining specific research outcomes, and stating research conclusions) and three "optional" (presenting background information, describing data-analysis procedure, and indicating non-

consistent observations). This study portrays the way in which discourse is organized in medical research papers.

Posteguillo (1998) analyzed forty research articles from three academic journals to describe the schematic organization of the research article in the field of computer science using Swales' (1990) CARS model for the *Introduction*, Brett's (1994) model for the *Results* section and Swales' (1990) list of moves for the *Discussion/Conclusion* section. The organizational pattern Posteguillo (1998) proposes deviates from Swales' (1990) in both the *Introduction* and *Discussion* sections. As regards the *Introduction* section, relevant variations from the CARS model have been detected, which can be attributed to the fact that computer science is a discipline without well-established conventions because of its relative youth. As regards the *Discussion/Conclusion* section, Posteguillo depicts it as having eight moves, two of which are the most salient ones: *statement of results* and *recommendation for further research*, the latter of which conforms an independent section at the end of the research article due to the absence of explicit conventions in academic journals in this field. There are also some variations from Brett's patterns in the *Results* section, which can be explained by the lack of a specific *Methods* section in computing research papers.

Li and Ge (2009) analyzed the structural evolution of medical research articles written in English using the eleven-move scheme proposed by Nwogu (1997). They had two corpora, representing two different time periods. The results obtained were compared by means of Chi-square test or Mann-Whitney U test. Their findings showed statistically significant differences between the frequency of occurrence of moves 1, 6 and 9 (presenting background information, describing data-analysis procedure, and highlighting overall research outcome). Moves 1 and 6 have changed from "optional" to "obligatory", indicating that today's medical writers tend to provide more background information and are more aware of describing data-analysis procedures in reporting their research. On the other hand, move 9 has changed from "obligatory" to "optional", indicating that present-day medical writers tend to adopt a more direct approach to presenting their results. Their study suggests that genre has an evolutionary nature.

Kanoksilapatham (2005) examined sixty biochemistry research articles from five core journals to identify the complete rhetorical organization of the texts using Swales' (1990) model of analysis. Her model departs from the CARS schema for the

Introduction section, since she detected different moves from the ones Swales found in his analysis. The schema this author proposed consists of three moves for the *Introduction: announcing the importance of the field, preparing for the present study*, and *introducing the present study*; four moves for the *Methods: describing materials*, *describing experimental procedures*, *detailing equipment*, and *detailing statistical procedures*; four moves for the *Results: stating procedures*, *justifying procedures or methodology, stating results*, and *stating comments on the results*, and four moves for the *Discussion: contextualizing the study, consolidating results, stating limitations of the study*, and *suggesting further research*. This model gives support to the existence of disciplinary variation, since it demonstrates that the CARS model cannot account for all the occurrences in all disciplines.

So far in this section, I have referred to studies which describe the overall rhetorical organization of the research article. In the following section, some studies focusing on linguistic devices as well as the rhetorical organization of information in the review article are discussed.

2.3. Studies which Focus on Linguistic Devices and the Rhetorical Organization of the Review Article

According to Swales (2004: 208), "discursive studies of review articles are rare". In a similar vein, Noguchi (2006) claims that there are few studies which focus on the rhetorical organization of information of the review article (RA) from a discourse analysis perspective.

Murlow (1987) analyzed 50 RAs published in four major American medical journals between 1985 and 1986, taking into account 8 criteria adapted from published guidelines for information syntheses. Of the 50 articles, 17 satisfied three of the eight criteria; 32 satisfied four or five criteria; and 1 satisfied six criteria. Most reviews had clearly specified purposes and conclusions. Only one had clearly specified methods of identifying, selecting, and validating included information. Qualitative synthesis was often used to integrate information included in the review; quantitative synthesis was rarely used. Future research directives were mentioned in 21 samples. His results showed that medical reviews do not routinely use scientific methods to identify, assess,

and synthesize information. He proposed the methods used in his study to improve the quality of future RAs.

Myers (1991) analyzed the rhetorical features of two RAs of Molecular Biology and attempted to describe their rhetorical structure. He found out that the narrative sequence is a distinctive feature of this genre.

McAlister *et al.* (1999) analyzed 158 RAs published in six general medical journals in 1996, taking into account 10 methodological criteria. Their aim was to determine the methodological quality of published medical reviews. Of the total number of samples, only 2 satisfied all 10 methodological criteria; less than a quarter of the articles described how evidence was identified, evaluated or integrated; 34% addressed a focused clinical question; 39% identified gaps in existing knowledge; and 111 samples included treatment recommendations. The authors concluded that the methodological quality of clinical RAs is highly variable, and many of these articles do not specify systematic methods.

Pérez-Llantada (2003) analyzed 10 RAs in English published in a specialized journal of Computing. She focused on both the rhetorical moves of the *Introduction* section and discourse markers signaling rhetorical moves and author's stance, among other features, in both the *Introduction* and the *Conclusion* sections. Her results showed that the rhetorical structure of the *Introduction* coincides with Swales' CARS model for the research article and the *Conclusion* section has the most ideological load, signaled by the use of attenuation, persuasion and argumentation strategies.

Ruiying and Allison (2004) analyzed two corpora of research articles and review articles. As regards the rhetorical structure of the RA, their study showed that it follows the *introduction–argumentation–conclusion* pattern. Moreover, differences in communicative functions of each section were pointed out.

Morales (2010) analyzed the rhetorical structure of 40 RAs written in Spanish published in prestigious journals in the field of Dentistry. His study showed that most of the RAs follow the *introduction-development-conclusion* pattern typical of traditional narrative RAs. He proposes the following 10-move schema for analyzing the different sections of the RA:

Introduction	Move 1	Topic Definition
	Move 2	Review Justification
	Move 3	Objectives
	Move 4	Methodology (optional)
	Move 5	Article Development Structure (optional)
Development	Move 6	Information Presentation
	Move 7	Information Elaboration/Expansion
	Move 8	Summary
Conclusion	Move 9	Summary of Main Findings
	Move 10	Recommendations for Future Research or Practice

To conclude, the studies reviewed in this section have thrown light on how information in the different sections of the RA is organized. Moreover, some of these studies have contributed to the characterization of the RA as a whole. The importance of these studies may lie in the fact that they represent attempts at understanding the schematic structure of an emerging genre.

2.4. Summary of the Chapter

In this chapter, I have examined a number of influential contributions to move analysis. Some studies have contributed to identifying the rhetorical conventions that govern the macrostructure of the research article, and to a lesser extent, some other studies have made an attempt at describing the rhetorical organization of review articles. To summarize, the studies reviewed here provide insights which form the basis for the following chapters. Next, I present and describe the theoretical framework in which this study is grounded.

Chapter III: Theoretical Framework

3.1. Introduction

The present study focuses on the rhetorical organization of medical review articles written in English and Genre Theory is the theoretical construct that gives support to it. In order to have a comprehensive overview of how this scholarly tradition gives support to the present research, I examine the major concepts and developments in three linguistic approaches that have shaped the way in which genre is understood: New Rhetoric (NR), Systemic Functional Linguistics (SFL), and English for Specific Purposes (ESP). Then, I concentrate on the usefulness and appropriateness of the ESP genre perspective for the present study. I also make reference to Swales' (1990) influential work and to some relevant notions in his genre analytical method, pertinent to this study. Finally, I describe the review article (RA) as an emerging genre and provide a short account of its rhetorical overview.

3.2. Genre in Three Research Traditions

Within the last four decades, genre has been considered a tool for developing L1 and L2 instruction. However, there have been differences in the way both genre and genre-based pedagogy have been conceived of by different scholars and in different parts of the world. As reviewed by Hyon (1996), a close examination of the approaches to genre in three research traditions — North American New Rhetoric studies, Australian Systemic Functional Linguistics, and English for Specific Purposes (ESP) — is needed in order to understand these differences and their implications for L1 and L2 teaching.

3.2.1. The New Rhetoric Approach to Genre

As reviewed by Hyon (1996: 696), "New Rhetoric research describes a body of North American scholarship from a variety of disciplines concerned with L1 teaching,

including rhetoric, composition studies, and professional writing". Scholars in this tradition have focused on the situational contexts in which genres occur and have emphasized the social purposes, or actions, that these genres fulfill within these situations (Bazerman, 1988, 1994; Coe, 1994; Miller, 1984, 1994; as cited in Hyon, 1996). In order to offer descriptions of academic and professional contexts and the actions texts perform in such contexts, a number of New Rhetoricians have used ethnographic methods for analyzing texts (Bazerman, 1988; Devitt, 1991; Schryer, 1993, 1994; Smart, 1992, 1993; as cited in Hyon, 1996).

3.2.2. The Systemic-Functional Approach to Genre

SFL describes "language in use" rather than "a set of generalized rules detached from any particular context of use" (Thompson, 1994: 1). This tradition draws heavily on Halliday's work. Scholars in this tradition consider that key features of the surrounding social context - *field* (the activity going on), *tenor* (the relationships between participants) and *mode* (the channel of communication) - shape the forms of language (Halliday, 1978; Halliday and Hasan, 1989; Hammond, Burns, Joyce, Brosnan, and Gerot, 1992; as cited in Hyon, 1996). These three elements, in turn, determine the *register* of language (Halliday, 1978; Halliday and Hasan, 1989; as cited in Hyon 1996). Within a systemic functional framework, Martin and his colleagues have developed theories of genre and consider this construct as "a staged, goal-oriented social process" (Martin, 1992: 505). In other words, genres are seen as structural forms that cultures use in certain contexts to achieve various purposes (Hyon, 1996). The motivation behind SFL has been the desire to empower learners and disadvantaged citizens with linguistic tools for social success (Hyon, 1996; Swales, 2009); therefore, the focus of this tradition is mainly pedagogical.

3.2.3. The ESP Approach to Genre

In this tradition, which draws heavily on Swales' work (1990, 2004), genre is conceived of "as a tool for analyzing and teaching the spoken and written language required by non-native speakers in academic and professional settings" (Hyon, 1996: 695). Oral and written text types are defined by both their formal properties and their communicative purposes within social contexts. ESP scholars consider that genre analysis provides useful information for novice writers by exposing them to the conventions of a particular genre and also the reasons assumed to underlie such conventions in the social practice of a community (Bathia, 1997). With this awareness of genre practices, novice writers, in turn, should be able to explore and produce more complex genres independently and creatively.

3.2.4. Similarities and Differences of Genre-based Pedagogy

Although the focus of genre-based pedagogy has been to help students become successful readers and writers of the texts, they need to master in their academic and work environments (Hyon, 1996; Hyland, 2002), the focus of interest and the audience vary among the three traditions. New Rhetoricians have directed their efforts to assisting university students and novice professionals understand the social functions of genres and the contexts in which these genres are used. Systemic Functional Linguists, in contrast, have been concerned with helping primary and secondary students, and adult migrants understand school genres such as reports, procedures, expositions, and explanations. ESP scholars, in turn, have been committed to assisting non-native speakers of English master the functions and linguistic conventions of texts that they need to read and write in English for Academic Purposes (EAP) and English for Professional Communication (EPC) classrooms. Thus, they focus on those genres which members of the scientific community recognize as their means of communication. For this reason, the ESP framework of research seems appropriate for the present study. From this perspective, then, the next section explores the central aspects of Genre Theory within the ESP tradition.

3.3. Genre from the ESP Perspective

Scholars in the ESP tradition are mainly concerned with describing and determining syntactic and lexical choices which help realize rhetorical structures within specific genres. Swales (1990:58), one of the most influential proponents of Genre Theory, defines "genre" as

(...) a class of communicative events, the members of which share some communicative purposes. These purposes are recognized by the expert members of the parent discourse community and thereby constitute a rationale for the genre. This rationale shapes the schematic structure of the discourse and influences and constrains choice of content and style. Communicative purpose is both a privileged criterion and one that operates to keep the scope of a genre as here conceived narrowly focused on comparable rhetorical action. In addition to purpose, exemplars of a genre exhibit various patterns of similarity in terms of structure, style, content and intended audience. If all high probability expectations are realized, the exemplar will be viewed as prototypical by the parent discourse community. The genre names inherited and produced by discourse communities and imported by others constitute valuable ethnographic communication, but typically need further validation.

This definition comprises the core aspects of genre: communicative event, communicative purposes, prototypicality, conventions and discourse community's nomenclature. First, a genre is a class of communicative events in which the use of verbal language and paralanguage plays a significant and an indispensable role. It comprises "not only the discourse itself and its participants, but also the role of that discourse, and the environment of its production and reception, including its historical and cultural associations" (Swales, 1990: 46). Second, a shared set of communicative purposes is what turns a collection of communicative events into a genre. In other words, genres are communicative vehicles to achieve goals. Third, exemplars of genre vary in their prototypicality. Properties such as form, structure and audience expectations work together to identify the extent to which an exemplar is prototypical of a particular genre. Fourth, recognizing purposes provides the rationale which creates constraining conventions in terms of content, positioning and form. As Bhatia (1993: 14) puts it "although the writer has a lot of freedom to use linguistic resources in any way s/he likes, s/he must conform to certain standard practices within the boundaries of a particular genre". That is, in order to determine the rhetorical structure of a genre and restrict the choices at the lexical and syntactical level it is essential to know the underlying logic behind a communicative event. In turn, this knowledge makes the

reception and the production of a particular genre easier. Finally, a discourse community's nomenclature created by those who have great genre-specific expertise is an important source of insight since these members give genre names to classes of communicative events which, in turn, are adopted by novice members.

Although Bathia (1993: 13) draws on Swales' definition of genre, he elaborates further on some aspects of Swales' definition and adds the psychological factors, which have a significant role in the concept of genre as a dynamic social process. He defines genre as

...a recognizable communicative event characterized by a set of communicative purpose(s) identified and understood by the members of a professional or academic community in which it regularly occurs. Most often it is highly structured and conventionalized with constrains on allowable contributions in terms of their intend, positioning, form and functional value.

Finally, Holmes (1997: 322) defines genre as "a class of texts characterized by a specific communicative function that tends to produce distinctive structural patterns". As it can be seen in these definitions, communicative purpose is central for the definition of genre in the ESP school.

Not only does communicative purpose play an essential role in determining genre categories but also discourse community needs to be paid special attention. In fact, Swales (1990) points out that genre belongs to discourse communities, not to individuals. The author addresses this notion as sociorhetorical networks that are formed in order to work towards sets of common goals, whose members are familiar with the genres used to achieve communicative purposes. In sociorhetorical networks, the primary determinants of linguistic behavior are functional. This means that the communicative needs of the goals tend to be determinant in the development and maintenance of its discoursal characteristics. In order for a group of individuals to become a discourse community, some characteristics need to be present (Swales, 1990). First, there should be a broadly agreed set of common, public goals, which may be formally inscribed in documents or tacit. Moreover, what is criterial is commonality of goal, not shared object of study. Second, mechanisms of intercommunication among its members should be present. These mechanisms vary according to the community. Third, participatory mechanisms to provide information and feedback should be used.

Belonging to a discourse community implies uptake of the informational opportunities. Moreover, communities use written discourses that enable members to keep in touch with each other, carry on discussions, explore controversies, and advance their aims; the genres are their vehicles for communication (Johns, 1997). Fourth, utilization and possession of one or more genres to communicate aims is also necessary. Discourse communities develop discoursal expectations which are created by the genres that articulate the operations of the discourse community. Fifth, some specific lexis should be used; that is, for communication to be efficiently exchanged, discipline-related terms, such as the development of community-specific abbreviations and acronyms should be incorporated. Finally, a threshold level of expertise with a suitable degree of relevant content and discoursal expertise is necessary. Discourse communities have changing memberships, but the survival of these communities depend on a sustainable balance between novices and experts. As it can be inferred, the notion of discourse community highlights the social nature of genre and, consequently, the significance of the relationship between its members.

3.4. The Field of Medicine: a Discourse Community

Professionals in the field focus of the present study can be said to constitute a discourse community, since they share both: disciplinary information and discoursal resources, necessary to interact with peers and to advance scientific knowledge. Moreover, Hyland (1997: 19) considers that

Texts are written to be understood within certain cultural conte21xts and so reveal shared group values and beliefs through their routine rhetorical operations. In academic contexts these beliefs embody basic assumptions concerning the nature of the discipline and its subject matter, the professional conduct of its members, the promotion of its political interests and the character of the academic enterprise itself. Analysis of features in key genres can therefore provide insights into what is implicit in academic cultures and indicate how social structures are reproduced through language.

Thus, Hyland (2002) highly recommends analyzing the genres that are produced in the different disciplines, specially the emerging ones, in order to identify the features that characterize a particular community.

Taking into consideration Swales' discourse community conceptualization, we believe the discipline of Medicine constitutes an independent discourse community for the following reasons:

- It is organized in academic entities, and it offers graduate and postgraduate studies to give its members academic formation;
- It has academic and scientific organizations;
- It has its own mechanisms of intercommunication among its members (meetings, newsletters, journals, congresses);
- It owns genres such as research articles, case studies, and review articles;
- It uses highly specialized terminology;
- Its members have different degrees of content and discoursal expertise.

Since Medicine constitutes a discourse community, those who are interested in joining this scientific discourse community have to get acquainted with the conventions that regulate the production and publication of academic and scientific texts within this discipline.

3.5. The Review Article as an Emerging Genre

According to Swales (2004), the review article has become an "increasingly common phenomenon" which derives from increasing specialization, the chronological lengthening of various research strands in the field, the proliferation of publishing outlets, the pressure to publish, and the increasing numbers of active participants in the discourse community.

This genre has been named with variable terminology (Noguchi, 2006). Some of the common names that have been used are "review", "review article", "review essay", "general article", "report article", and "state of the art survey". Morales *et al.* (2007) agree to say that although there are different types of reviews, the journals interested in publishing this genre do not prescribe different rhetorical structures.

In general terms, the RA not only examines and analyzes previously published bibliography on a specific topic but also includes the author's perspective (Day, 1990). Myers (1991: 45) considers that RAs "collect, select, order, and interpret the huge outpouring of scientific reports, putting relevant findings and generalizations in a form useful to researchers outside the immediate group working on a problem"; that is, these texts are to be read by an audience broader than that of research articles. Myers (1991: 45) regards that the originality of the RA "lies in the discriminating selection of material for comment and in the author's assessment of the current state of research on the topic under review". This implies a certain degree of expertise on the part of authors since their point of view, their perspectives, and their experience are equally important to decide what to include in a RA. This is why these texts are usually solicited from prominent experts.

Summing up, Noguchi (2006) considers the RA a "bridge" genre, introducing medical students to work that might not otherwise have been considered as relevant. As the published literature proliferates, the RA is becoming more and more important since the genre provides the writer with an opportunity to give a synoptic vision of an area of expertise, contributing, thus, to an understanding of that area and how its achievements might relate to those in other areas.

3.5.1. The Review Article as a Research-Process Genre

According to Mungra (2006) and Piqué and Posteguillo (2006), RAs can be classified into three categories: systematic reviews, meta-analytic reviews, and non-systematic reviews. To begin with, systematic reviews make use of explicit methods to summarize the information related to a topic or health condition. Systematic methods are used, and the criteria for selection and evaluation of articles are highlighted. Meta-analytical reviews, on the other hand, are studies based on the systematic integration of the information obtained from different clinical studies, on a particular health condition. These reviews consist in systematically identifying, selecting, examining and processing controlled studies on a health condition in order to provide a synthetic and quantitative estimation of the results. Finally, non-systematic reviews (traditional narratives) include narrative RAs which are not subject to previous criteria for the selection of documents.

Noguchi (2006), who analyzed 25 science RAs, divided them into four categories: history, status quo, theory/model, and issue. First, in the history category authors present a historical view of a facet of the field. Second, in the status quo category authors describe the current situation in a field. Third, in the theory/model category authors propose a theory or model to resolve some issue in the field; and last, in the issue category authors call attention to some issue in the field. Swales (2004: 209) considers that Noguchi's four-way categorization tends to reflect a primary focus and considers it "a flexible frame whereby any given RA would draw to a greater or lesser extent on each of the four focal quadrants".

3.5.2. The Review Article: an Overview of its Rhetorical Structure

In this section we proceed to describe the rhetorical structure of the three types of RAs proposed by Mungra (2006), and Piqué and Posteguillo (2006).

- a) Traditional narrative RAs are considered to have no standard conventional format (Huth, 1987). Similarly, Day (1990) believes that there is not an established format for this genre. In fact, traditional narrative RAs do not seem to follow the IMRD pattern (Swales, 2004). The expository format is usually identified; this includes three parts: the *introduction*, the *development*, and the *conclusion* (Murlow, 1995; Petticrew, 2001; Gisbert and Bonfill, 2004; and Noguchi, 2006):
 - *Introduction*: this section includes the thematic delimitation of the study. It also includes the purpose, justification and relevance of the review, and the development structure. Some authors consider that some relevant data about the methodology should also be included such as the consulted periods, data bases, specialized journals, and web search engines to give the review more reliability.
 - Development: this section expands on the topic of the review. It includes the
 author's point of view, which is realized through the analysis and discussion of
 the cited references. It is usually subdivided into parts whose sub-headings are
 content-based.
 - *Conclusion*: this section summarizes the results of the review, its implications and recommendations for future research or practice.

b) Both **systematic reviews** and **meta-analytic reviews** generally follow the IMRD pattern typical of the research article (Gisbert & Bonfill, 2004; Mungra, 2006).

3.6. Move Analysis

Most of the studies using genre analysis are based on Swales' (1981) work on research article introductions. This approach to genre analysis has been revised and expanded by several ESP researchers, including Swales himself (1990, 2004). The schematic structure of a genre is characterized by rhetorical moves, the unit of analysis used to describe the rhetorical structure of the different sections of research-process texts and of other genres.

To Swales (2004: 228), "a move in genre analysis is a discoursal or rhetorical unit that performs a coherent communicative function in a written or spoken discourse". He recommends seeing it as flexible as regards its linguistic realization. This means that a move can sometimes be realized by a clause or by several sentences since it is a functional unit, not a formal one. In some cases, grammatical features as well as lexical signals can indicate the type of move. In other cases, the placement of a discourse chunk can be used to interpret its status.

According to Nwogu (1997: 114), a move is "a text segment made up of a bundle of linguistic features (lexical meanings, propositional meanings, illocutionary forces, etc.) which give the segment a uniform orientation and signal the content of discourse in it". He considers that a text section can indicate a move if there is association between a function and the linguistic clues that realize it.

To conclude, moves can vary in length and in frequency of occurrence; certain moves are considered obligatory whereas some others are regarded as optional (Connor & Mauranen, 1999; Kanoksilapatham, 2007). Each move, then, constitutes a text section with a specific communicative function; this communicative function, in turn, contributes to the general purpose of the genre. As Parodi (2010: 146) puts it, "the unique organization of the moves of a specific genre is what provides its identity and

distinguishes it from the other genres". This organization comes to light when rhetorical moves are identified.

3.6.1. Swales' Models of Move Analysis

Swales' (1981) earliest model for the analysis of introductions, presented in Table 1, was a "4-move" model. The original aim of this work was to describe the rhetorical organization of research article introductions in order to assist advanced non-native English students when reading and writing scientific papers, as well as, non-native English professionals to publish their research production in English (Kanoksilapatham, 2007).

Table 1: Swales' 1981 Model

Move 1: Establishing the Field

A- Showing centrality

i- by interest

ii- by importance

iii- by topic-prominence

iv- by standard procedure

B- Stating current knowledge

C- Ascribing key characteristics

Move 2: Summarizing Previous Research

A- Strong Author-Orientations

B- Weak Author-Orientations

C- Subject Orientations

Move 3: Preparing for Present Research

A- Indicating a Gap

B- Question Raising

C- Extending a Finding

Move 4: Introducing Present Research

A- Giving the Purpose

B- Describing Present Research

i- by this/the present research

ii- by Move 3 take up

iii- by switching to the first person pronoun

Although the "4-move" model offered a detailed account of research article introductions several analysts found it difficult to separate Move 1 and Move 2. In the light of criticisms received, Swales (1990) revised his Create a Research Space (CARS) model and developed a three-move schema for research article introductions (shown in Table 2).

Table 2: Swales' 1990 Model

Move 1	Establishing a territory		
Step 1	Claiming centrality		
	and/or		
Step 2	Making topic generalizations		
-	and/or		
Step 3	Reviewing items of previous research		
Move 2	Establishing a niche		
Step 1A	Counter-claiming		
•	or		
Step 1B	Indicating a gap		
-	or		
Step 1C	Question raising		
•	or		
Step 1D	Continuing a tradition		
Move 3	Occupying the niche		
Step 1A	Outlining purposes		
-	or		
Step 1B	Announcing present research		
Step 2	Announcing principal findings		
Step 3	Indicating research article structure		

Although this model has been widely used by other authors in subsequent research into the different sections of the research article in varied disciplines (Kanoksilapatham, 2005; Lim, 2006; Nwogu, 1997; Ozturk, 2007; Posteguillo, 1998; Samraj, 2002), among others), it has been challenged, mainly due to disciplinary variation. So, Swales (2004) proposes revising the model and introduces certain changes.

Table 3: Swales' 2004 Revised Model

Move 1	Establishing a territory (citations required)
	via
	Topic generalizations of increasing specificity
Move 2	Establishing a niche (citations possible)
	via
Step 1A	Indicating a gap
	or
Step 1B	Adding to what is known
Step 2	Presenting positive justification (optional)
Move 3	Presenting the present work (citations possible)
	Via
Step 1	Announcing present research descriptively and/or purposively (obligatory)
Step 2	Presenting research questions or hypotheses (optional)
Step 3	Definitional clarifications (optional)
Step 4	Summarizing methods (optional)
Step 5	Announcing principal outcomes (possible in some fields, but unlikely in others)
Step 6	Stating the value of the present research (possible in some fields, but unlikely in
others)	
Step 7	Outlining the structure of the paper (possible in some fields, but unlikely in others)

This approach to genre analysis —from identifying purpose to examining rhetorical moves and how these moves are realized linguistically— has contributed significantly to our knowledge of how different disciplines organize the information in research-process genres. In fact, as reviewed in the previous chapter, a number of move-based studies have specifically focused on the different canonical sections of scientific papers; and only a few studies have explored the different sections of the review article in particular disciplines.

3.6.2. Moves Identified in the Rhetorical Structure of Research Articles

The following studies are included in this section, since they have been relevant to determine the model that has been used in the present study to analyze the rhetorical structure of RAs.

Nwogu (1997) studied the structure of information in all the sections of the medical research paper using Swales' (1981, 1990) CARS model for the Introduction section as point of departure. He proposes an eleven-move schema, eight of which were found to be "normally required" and three "optional" (see Table 4).

Table 4: Nwogu's 1997 Eleven-Move Schema

Introduction	
Move 1	Presenting Background Information: (optional)
by	(1) Reference to established knowledge in the field.
	(2) Reference to main research problems.
Move 2	Reviewing Related Research: (normally required)
by	(1) Reference to previous research.
	(2) Reference to limitations of previous research.
Move 3	Presenting New Research: (normally required)
by	(1) Reference to research purpose.
	(2) Reference to main research procedure.
Methods	
Move 4	Describing Data-Collection Procedure: (normally required)
by	(1) Indicating source of data.
	(2) Indicating data size.
Move 5	Describing Experimental Procedures: (normally required)
by	(1) Identification of main research apparatus.
	(2) Recounting experimental process.
	(3) Indicating criteria for success.
Move 6	Describing Data-Analysis Procedures: (optional)
by	(1) Defining terminologies.
	(2) Indicating process of data classification.

	(3) Identifying analytical instrument/procedure.
	(4) Indicating modification to instrument/procedure.
Results	•
Move 7	Indicating Consistent Observation: (normally required)
by	(1) Highlighting overall observation.
	(2) Indicating specific observations.
	(3) Accounting for observations made.
Move 8	Indicating Non-Consistent Observations: (optional)
Discussion	
Move 9	Highlighting Overall Research Outcome: (normally required)
Move 10	Explaining Specific Research Outcomes: (normally required)
by	(1) Stating a specific outcome.
	(2) Interpreting the outcome.
	(3) Indicating significance of the outcome.
	(4) Contrasting present and previous outcomes.
	(5) Indicating limitations of outcomes.
Move 11	Stating Research Conclusions: (normally required)
by	(1) Indicating research implications.
	(2) Promoting further research.

Kanoksilapatham (2005) analyzed the structure of biochemistry research articles and proposes the following two-level rhetorical structure (moves and steps). This structure consists of 15 distinct moves, twelve of which were found to be "obligatory" and three "optional" (See Table 5).

Table 5: Kanoksilapatham's 2005 Fifteen-Move Schema

Introduction

Move 1: Announcing the importance of the field By Step 1: Claiming the centrality of the topic By Step 2: Making topic generalizations By Step 3: Reviewing previous research Move 2: Preparing for the present study By Step 1: Indicating a gap By Step 2: Raising a question Move 3: Introducing the present study By Step 1: Stating purpose(s) By Step 2: Describing procedures By Step 3: Presenting findings Methods Move 4: Describing materials By Step 1: Listing materials By Step 2: Detailing the source of the materials By Step 3: Providing the background of the materials Move 5: Describing experimental procedures By Step 1: Documenting established procedures By Step 2: Detailing procedures By Step 3: Providing the background of the procedures

Move 6: Detailing equipment (optional)

Move 7: Describing statistical procedures (optional)

Results

Move 8: Stating procedures

By Step 1: Describing aims and purposes

By Step 2: Stating research questions

By Step 3: Making hypotheses

By Step 4: Listing procedures or methodological techniques

Move 9: Justifying procedures or methodology

By Step 1: Citing established knowledge of the procedure

By Step 2: Referring to previous research

Move 10: Stating results

By Step 1: Substantiating results

By Step 2: Invalidating results

Move 11: Stating comments on the results

By Step 1: Explaining the results

By Step 2: Making generalizations or interpretations of the results

By Step 3: Evaluating the current findings

By Step 4: Stating limitations

By Step 5: Summarizing

Discussion

Move 12: Contextualizing the study

By Step 1: Describing established knowledge

By Step 2: Presenting generalizations, claims, deductions, or research gaps

Move 13: Consolidating results

By Step 1: Restating methodology (purposes, research questions, hypotheses restated, and procedures)

By Step 2: Stating selected findings

By Step 3: Referring to previous literature

By Step 4: Explaining differences in findings

By Step 5: Making overt claims or generalizations

By Step 6: Exemplifying

Move 14: Stating limitations of the study

By Step 1: Limitations about the findings

By Step 2: Limitations about the methodology

By Step 3: Limitations about the claims made

Move 15: Suggesting further research (optional)

These templates seem useful particularly to native and non-native scientists because these schemata not only allow scientists to better understand published research papers but also facilitate the process of writing research articles for publication.

3.6.3. Moves Identified in the Rhetorical Structure of Review Articles

Morales (2010) analyzed the rhetorical structure of RAs written in Spanish in the field of Dentistry. He proposes the following schema of ten moves for analyzing the different sections of RAs, eight of which were found to be "obligatory" whereas two were considered "optional" (See Table 6).

Table 6: Morales' 2010 Ten-Move Schema

Introduction	Move 1	Topic Definition
	Move 2	Review Justification
	Move 3	Objectives
	Move 4	Methodology (optional)
	Move 5	Article Development Structure (optional)
Development	Move 6	Information Presentation
	Move 7	Information Elaboration/Expansion
	Move 8	Summary
Conclusion	Move 9	Summary of Main Findings
	Move 10	Recommendations for Future Research or Practice

According to Morales (2010) each move, each selection has a purpose and tries to manifest the author's intentions. For this reason, it seems very useful to name the moves with functional labels in accordance with the function they fulfill in the text.

3.6.4. Moves Used in the Present Study

For the present study, a classification based on Nwogu's (1997), Kanoksilapatham's (2005), and Morales' (2010) models was built. This new taxonomy includes not only most of the moves proposed by Morales but also other moves from the previously mentioned models in order to best suit the purpose of this research. The selected moves and their corresponding definitions are described as follows:

Introduction Section

Move 1: Presenting the Topic: This move is used to present a brief definition of the topic, and to limit the area of study, highlighting theoretical information. According to Morales (2010), this may coincide with Swales' (1990) "establishing the territory".

Move 2: Justifying the Topic: This move is used to justify the importance of the present research study. Sometimes, authors make reference to the need of further research in the area as well (Morales, 2010).

Move 3: Establishing the Objective(s): Some writers choose to include this move to explicitly state what they plan to do in the review. This move is characterized by a statement of purspose(s) of the study (Kanoksilapatham, 2005).

Move 4: Presenting the Article Development Structure: This move is used to anticipate the contents of the *Development* section. According to Morales (2010), this move may coincide with one of the steps found in Swales' occupying the niche.

Move 5: Making Recommendations for the Reader: Writers make use of this move to make the text reader-friendly.

Development Section

Move 6: Presenting the Information: This move is used to present the topic which will be elaborated in the following move. It works as an introductory move which is characterized by impersonal constructions (Morales, 2010).

Move 7: Elaborating/ Expanding the Information: Writers use this move to give details of the topic being developed. Relevant studies are mentioned here by using citations. Descriptions, explanations, exemplifications, and recommendations are used in this move (Morales, 2010).

Move 8: Stating the Author's Opinion/ Point of View: Writers make use of this move to analyze the topic under discussion from their own perspective. This move presents the scientists' subjective comments, which are not absolutely established by the data (Kanoksilapatham, 2005).

Move 9: Summarizing: This move is used to highlight relevant findings before a new topic is introduced or before the *Conclusion* section (Morales, 2010).

Conclusion Section

Move 10: Summarizing the Main Findings: In this move, writers recapitulate the salient findings of the research (Morales, 2010).

Move 11: Making Recommendations for Future Research or Practice: Writers make suggestions for future lines of research in the topic (Dudley-Evans, 1994) and/or recommendations for changes in future practice.

Move 12: Indicating Implications: In this move, writers summarize their views on the contributions which their study has made to the field (Nwogu, 1997) or to raise themes and questions for future research.

Move 13: Making Predictions: Writers make use of this move to anticipate possible results in the future in relation to the topic under discussion. This move allows the scientists to go beyond the results (Kanoksilapatham, 2005).

3.7. Summary of the Chapter

This chapter has analyzed the theoretical construct that provides the rationale for the present research: Genre Analysis. This section has also presented an overview of the underpinning concepts underlying this theory and, in doing so, it has given theoretical support to the methodological choices in the study. Next, I present and describe the materials and methods of the present research.

Chapter IV: Materials and Methods

4.1. Introduction

This section describes the materials and research method chosen for the present study.

The chapter begins by including specifications about the data collection method

employed. It presents a description of the research design in terms of the phases

implemented as well.

4.2. Data Collection Procedure and Corpus Design Procedure

The present descriptive-exploratory study focused on a corpus made up of thirty

medical review articles written in English published in a prestigious journal: the New

England Journal of Medicine. We have chosen this journal because it is considered the

most widely read, cited, and influential general medical periodical in the world. It also

employs a highly rigorous peer-review and editing process to evaluate manuscripts for

scientific accuracy, novelty, and importance. Moreover, according to the

ScienceWatch's annual survey of the most-cited research papers, the New England

Journal of Medicine published the greatest number of highly cited papers. Among the

51 individual research papers receiving the highest number of citations in 2012, 13 were

published in this journal, the highest number of papers among all journals tracked in the

report.

To control for possible sub-discipline variation, texts belonging to three representative

sub-disciplines were collected: Global Health, Genomic Medicine, and Current

Concepts. These sub-disciplines were chosen because they represent different scenarios

_

¹ By "prestigious journals" it is meant those included and ranked in the indexes compiled by the Journal Citations Report, a database which offers an objective means to critically evaluate leading journals, with quantifiable, statistical information (Retrieved April 5, 2015, from

 $http://thomson reuters.com/products_services/science_science_products/a-z/journal_citation_reports/).$

28

that may shed light on the challenges physicians have to face throughout their professional career. Global Health addresses the challenges to population health around the world. Genomic Medicine was considered to be the primary field of study in 2012 according to the ScienceWatch's annual survey of the most-cited research papers. Current Concepts addresses challenges that are relevant for physicians at a particular time. The texts were selected following conventional sampling procedures: representativeness (the chosen texts are considered to be a representative sample of the language of the members of the medical profession; Leech, 1991), reputation (the esteem with which members of an assumed readership hold for a particular publication; Nwogu, 1997), and accessibility (the ease with which texts that constitute the corpus can be obtained; Nwogu, 1997).

Leech (1991: 27) maintains that a corpus is representative if "findings can be generalized to a larger hypothetical corpus". In other words, a corpus can be considered representative when findings obtained from its analysis yield insights into the whole population it claims to represent. Central aspects need to be considered when designing a maximally representative corpus and these are sample, population and size. Biber (1993), as a first step in corpus sampling, emphasizes the need to clearly define the limits of the population to be studied. In addition to defining population, the hierarchical structure of the population needs to be determined; that is, the genres and channels it is made up of should be established. Once population has been defined, the size of the sample needs to be determined in terms of length and number of texts to be included in the corpus. Thus, to ensure a representative sample in the corpus of the present study, the texts had to have been produced by authors working in English speaking universities. This also ensured that the exemplars fulfilled the standards of academic English language. Native speaker status was not taken as a variable. In the present study, the size of the sample was 30 RAs with a total of 99,114 words. So as to control for rapid changes within the discipline, the period of selection of the texts was restricted to three years (only RAs from 2010 to 2013 were selected).

Finally, to qualify as accessible for selection, the texts had to appear online and had to be of free access, which guaranteed that the articles were readily available.

The articles in the corpus were coded for ease of identification (Appendix A). Each RA was identified by a number, as shown in the example:

RA 1: Ezzati, M. and Riboli E. (2013). Behavioral and dietary risk factors for noncommunicable diseases. The *New England Journal of Medicine*, 369 (10), 954-964.

4.3. Data Analysis Procedure

The following research question was addressed in the present study:

What is the rhetorical structure of medical RAs written in English?

The method used to answer this question involved applying the procedures proposed by Dudley-Evans (1994) and Holmes (1997): (a) identify the sections of the RA, (b) identify the moves in each section of the RA using a combination of linguistic evidence and text comprehension, (c) analyze each sentence of each section, (d) assign the sentences to a move, (e) analyze the frequency of appearance of each move, (f) determine the possible occurrence of categories not found in previous studies and (g) validate the classification by testing inter-rater agreement. In other words, the analysis was restricted to the organization of moves. In most cases, the sentence as a unit of coding was successful. Following Ozturk (2007), in a very limited number of cases in which a sentence contained two moves, it was assigned to the move that appeared to be salient. To minimize the risk of arbitrariness, a subset of seven RAs was analyzed by two raters.

4.3.1. Move Classification Taxonomy for the Study and Sentence Analysis

For this study, a taxonomy of moves was created *ad hoc* based on the model discussed in the theoretical framework. Following Noguchi's (2006) and Morales' (2010) findings, in the first phase, two randomly chosen RAs were examined to identify the sections of the RA. Then, a more thorough analysis was carried out using the rhetorical taxonomy proposed by Morales (2010) in previous research.

In order to show what the authors were trying to do with the discourse, -ing phrases were used to name the *moves* (Yang & Allison, 2003). That is, the researcher's purpose in using -ing forms was to highlight the function of the discourse segment.

4.3.2. Sentence Analysis and Move Classification

The sentence was the unit of analysis for the three sections of the RA – *Introduction*, *Development* and *Conclusion*. Each of the sentences was assigned to one of the *moves* in the taxonomy created *ad hoc*. In the *introduction* section, the following moves were considered: 1) Presenting the topic, 2) Justifying the topic, 3) Establishing the objectives, 4) Presenting the article development structure, and 5) Making recommendations for the reader. In the *development* section, the following moves were considered: 6) Presenting the information, 7) Elaborating or expanding the information, 8) Stating the author's opinion/ point of view, and 9) Summarizing. In the *conclusion* section, the following moves were considered: 10) Summarizing the main findings, 11) Making recommendations for future research or practice, 12) Indicating implications, and 13) Making predictions.

4.3.3. Frequency Analysis

The frequency of the moves in each section of the RA was recorded. The objective was to determine if a particular move occurred frequently enough to be considered conventional. Following Nwogu (1997) and Li and Ge (2009), the cut-off frequency of 50% of occurrence was established as a measure of move stability (or regularity). If the *move* occurred in 50% of the texts in the corpus, it was considered as "conventional". If the frequency of the *move* was below 50%, it was considered "optional". Within the "conventional" moves, a sub-categorization was established: "obligatory" and "quasi-obligatory". Those occurring in every single text in each corpus (100%) were classified as "obligatory", and those with a frequency of occurrence between 51% and 99% were classified as "quasi-obligatory".

4.3.4. Validation

In order to validate the preliminary findings, an inter-coder reliability analysis was conducted. To ensure that the coders had an understanding of genre analysis, and more specifically, of move identification, two well-versed colleagues, who are acquainted with move-based studies, were asked to code one quarter of the corpus (Crookes, 1986) following the thirteen-move structure adopted for analysis. A statistical analyst recorded and then compared the results obtained by the raters and the ones obtained by the researcher. To assess inter-rater reliability of move classification, the Kappa coefficient was used. The κ value obtained from the inter-coder analysis is shown in the following chapter.

4.4. Summary of the Chapter

This chapter contextualized the study by describing the data collection, the corpus design and the data analysis procedure. The next chapter contains the results obtained from the analysis of the data.

Chapter V: Results

5.1. Introduction

This chapter presents and describes the data obtained from the rhetorical move analysis

of medical RAs in English. The findings are organized in different sections. First, I

present the results of the inter-rater reliability tests. Second, I compare the length of the

RAs under study and make reference to the constitutive elements of medical RAs. Next,

I refer to the predominant textual sequences which characterize this genre. Finally, I

present the results regarding the moves found in the different sections of the RAs. These

results are discussed in the following chapter.

5.2. Inter-Rater Reliability

There is often some degree of subjectivity when analyzing pieces of writing.

Consequently, researchers should attend to inter-observer agreement to ensure reliable

and valid measurement. Cohen's Kappa has been proposed as statistically sound to

calculate the degree and significance of agreement between observers in their

assignment of objects to nominal categories (Watkins and Pacheco, 2000). In this study,

the reliability index for inter-rater (see tables below) was found to be around .75.

Table 7: Inter-Reliability Coefficient Researcher- Rater 1

Kappa .759

Table 8: Inter-Reliability Coefficient Researcher- Rater 2

Kappa .763

Taking into consideration that Kappa values of less than .40 show poor agreement,

values of .40 to .60 suggest fair agreement, values of .60 to .75 represent good

agreement, and values greater than .75 indicate excellent agreement (Watkins and

Pacheco, 2000), the results for the inter-rater test can be judged as reliable.

33

5.3. Article Length

A first look at Table 9 reveals that the 30 RAs selected for this study related to three different topics – Global Health (GH), Genomic Medicine (GM), and Current Concepts (CC). More specifically, 12 RAs related to GH, 13 RAs related to GM, and 5 RAs related to CC. The idea was to include general topics as well as specialized ones to be able to make generalizations concerning the rhetorical organization of information of the RA, independently of the speciality or topic addressed.

Table 9: Units of Analysis in the Corpus

Corpus	Topic	Number of Sentences	Number of Words
RA 1	GH	97	3,011
RA 2	GH	131	3,115
RA 3	GH	100	3,398
RA 4	GH	105	3,063
RA 5	GH	90	2,375
RA 6	GH	106	3,277
RA 7	GH	90	3,100
RA 8	GH	92	3,039
RA 9	GH	119	3,474
RA 10	GH	101	3,018
RA 11	GH	114	3,202
RA 12	GH	107	3,042
RA 13	GM	140	3,698
RA 14	GM	158	3,975
RA 15	GM	121	3,267
RA 16	GM	122	3,357
RA 17	GM	131	3,318
RA 18	GM	105	3,223
RA 19	GM	118	3,495
RA 20	GM	117	3,346
RA 21	GM	137	4,051
RA 22	GM	135	3,614
RA 23	GM	149	3,770
RA 24	GM	125	3,504
RA 25	GM	116	3,861
RA 26	CC	117	3,278
RA 27	CC	127	3,450
RA 28	CC	85	2,588
RA 29	CC	137	3,265
RA 30	CC	119	2,940

Table 10 shows that although the RAs vary in the number of sentences (the unit of analysis) and in the number of words, there is little difference as regards the average number of both. These are important variables to control, which will allow us to propose a general rhetorical model for the analysis of the medical RA.

Table 10: Average Number of Sentences and Words per Article According to the Sub-discipline

Topic	Average Number of Sentences	Average Number of Words
•		
Global Health	117	3,304
Genomic Medicine	120	3,575
Current Concepts	117	3,104

5.4. Constitutive Elements of Review Articles

As it is observed in Table 11, all the RAs follow the same format as regards the title, author, profession, contact address and institutional affiliation. None of them include an abstract and/ or keywords. This suggests a regulation of the journal to standardize the presentation of RAs.

Table 11: Constitutive Elements of RAs

Section	Element	Frequency %
	Title	100
Introduction	Author, profession and institutional affiliation	100
	Contact address	100
	Introduction	100
	Development	100
	Figures	80
Development	Diagrams	76.6
	Tables	80
	Glossary	46.6
	Conclusion	96.6
Conclusion	Acknowledgements	26.6
	References	100

As it can be seen, most RAs include non-verbal information, mainly figures, tables and diagrams. This may respond to editorial policies of the *New England Journal of*

*Medicine*², which are committed to presenting the information in an understandable and clinically useful format. Furthermore, this journal is aimed at general physicians, which may be the reason why glossaries are included when the featured topic is too specific as it is the case of Genomic Medicine.

A few RAs include acknowledgements. This may be explained by the fact that RAs, in general, are not part of research projects. Those authors that do include acknowledgements may be driven by the fact that acknowledgements are considered a universal feature of academic writing (Hyland, 2003; 2004).

5.5. Predominant Textual Sequences in Review Articles

According to Swales (2004) and Noguchi (2006), RAs are not considered a homogeneous genre from the discursive point of view. Different textual sequences work together throughout the text. Such sequences can be classified into expository, narrative and descriptive.

To begin with, expository sequences include three components —introduction, development and conclusion (Noguchi, 2006). These components have been associated with the rhetorical structure of the RA (Myers, 1991; Noguchi, 2006, Morales *et al.*, 2007; Petticrew, 2001). Moreover, narrative and descriptive sequences have been used in different rhetorical sections of the RA. This has been mentioned by Atkinson (1999), Huth (1999) and Horton-Salway (2002). In their view, biomedical reasoning is characterized by narrations and descriptions. In other words, patients' observations and clinical records are fundamental components of biomedical knowledge.

On the one hand, narrative sequences are mainly used to present antecedents and previous studies related to the object of study, as the following examples show:

(1) Vaccines are among the most effective interventions in modern medicine. Ever since Edward Jenner's first use of a vaccine against smallpox in 1796 (see text box), the use of vaccines has become indispensable to the eradication of disease. In the 20th century alone, smallpox claimed an estimated 375 million lives, but since 1978, after the completion of a

_

² Retrieved from http://www.nejm.org/page/about-nejm/history-and-mission

successful eradication campaign, not a single person has died from smallpox. Today, more than 70 vaccines have been licensed for use against approximately 30 microbes, sparing countless lives (Fig. 1A and 1B).1,2 Diseases including poliomyelitis, measles, mumps, rubella, and others caused an estimated 39 million infections in the 20th century in the United States, but vaccines have since rendered them uncommon. (RA 2)

(2) The pace of technical advancement in microbial genomics has been breathtaking. Since 1995, when the first complete genome sequence of a free-living organism, Haemophilus influenzae, was published, 1554 complete bacterial genome sequences (the majority of which are from pathogens) and 112 complete archaeal genome sequences have been determined, and more than 4800 and 90, respectively, are in progress. A total of 41 complete eukaryotic genome sequences have been determined (19 from fungi), and more than 1100 are in progress. Complete reference genome sequences are available for 2675 viral species, and for some of these species, a large number of strains have been completely sequenced. (RA 13)

Descriptive sequences, on the other hand, are mainly used to define and characterize pathologies, therapies, diagnosis, medical procedures, as the following examples show:

- (3) Several mendelian disorders directly illustrate the importance of these mechanisms. For example, mutations affecting the transcription factor autoimmune regulator lead to a relaxing of selection against self-reactivity by T cells in the thymus, giving rise to a rare, aggressive autoimmune disease, autoimmune polyendocrine syndrome 1.30 The autoimmune regulator controls the ectopic expression of self-antigens within the thymus31 and thus is critical to the negative selection of T cells reactive with these antigens. (RA 15)
- (4) Gene chips consist of a highly ordered microscopic matrix of sequence-specific oligonucleotides tethered to a solid surface, known as a microarray (Fig. 3). To perform a genomewide SNP scan such as the type purchased by Cathy, DNA is isolated from a sample obtained from a patient, cut into small fragments, labeled with a fluorescent dye, and then incubated with the silicon chip. The fragments bind to the tethered oligonucleotides in a sequence-specific manner, and sophisticated scanning hardware and signal-processing software analyze the pattern and intensity of the fluorescence signal to determine the sequences present in the sample. (RA 17)

5.6. Sections of the RA

All the RAs analyzed but one (RA 29) present the following structure: *Introduction*, *Development*, *Conclusion*, and *References*. This coincides with Huth (1999), Myers (1991), Morales *et al.* (2007), and Noguchi (2006). According to Petticrew (2001) and Gisbert and Bonfill (2004), this pattern corresponds to the traditional narrative structure

of the RA. It is called so because the narrative structure does not follow the IMRD pattern (Swales, 1990), as it is case of systematic revisions and meta-analyses.

Of the four sections of the RA, only the *Conclusion* and the *References* were signaled by sub-headings. It is worth mentioning that different sub-headings were used to signal the *Conclusion* section. Some authors used *Conclusion* (RA 25) or *Conclusions* (RA 2), others used *Summary* (RA 20), while a few preferred headings such as *Challenges* (RA 5), *Challenges and the Way Ahead* (RA 3), *Implications* (RA 4), *The Way Forward* (RA 7), *Future Development* (RA 9), *Future Directions* (RA 13), or *The Urgent Need for Action* (RA 27). These sub-headings seem to provide a summary of the content of the paragraphs that follow.

5.7. Rhetorical Structure of the RA

Following Morales (2010), we consider that the rhetorical structure of medical RAs can be explored using the following model of analysis:

RHETORICAL MOVES OF REVIEW ARTICLES: MODEL OF ANALYSIS

A. INTRODUCTION

- 1. Topic presentation
- 2. Topic justification
- 3. Objectives
- 4. Article development structure
- 5. Recommendations for the reader

B. DEVELOPMENT

- 6. Information presentation
- 7. Information expansion/elaboration
- 8. Author's opinion/point of view
- 9. Summary

C. CONCLUSION

- 10. Summary of main findings
- 11. Recommendations
- 12. Implications
- 13. Predictions

D. REFERENCES

In order to answer the research question posed for this study (what is the rhetorical structure of medical RAs in English?), the frequency of occurrence of each individual move in the corpus was recorded. The purpose was to determine whether the moves in the taxonomy were present in the texts and whether the ones present occurred frequently enough to be considered "conventional" or "obligatory" (Nwogu, 1997).

In general, the thirteen moves were found to occur with varying degrees of regularity in the corpus (see Table 12). This allowed us to classify them as "obligatory", "quasi-obligatory" or "optional" (see Materials and Methods Section). As it can be seen in Table 12, the frequency of occurrence of three of the thirteen moves (moves 1, 6, and 7) was 100%; therefore, they were classified as "obligatory". The frequencies of occurrence of moves 2, 10, 8 and 11 were 96.66%, 63.33%, 93.33% and 56.66% respectively; consequently, these four moves were classified as "quasi-obligatory". As for moves 3 and 9, their frequencies of occurrence were 40% and 33.33% respectively; moves 4 and 5 occurred in 3.33% of the texts whereas moves 8 and 11 had a frequency of occurrence of 46.66%; therefore, these six moves were classified as "optional".

As regards the sections of the RA, one "obligatory" (**presenting the topic**) and one "quasi-obligatory" move (**justifying the topic**) belong to the *introduction*, two "obligatory" moves (**presenting the information**, and **expanding the information**) and "one quasi-obligatory" move (**giving the author's opinion**) belong to the *development*, and two "quasi-obligatory" moves (**summarizing the main findings**, and **recommending**) belong to the *conclusion*.

Table 12: Distribution of Moves per Text in the Corpus

	Move	Move	Move	Move	Move	Move	Move	Move	Move	Move	Move	Move	Move	
	1	2	3	4	5	6	7	8	9	10	11	12	13	TOTAL
RA 1	+	+	+	-	-	+	+	-	+	+	+	-	-	8
RA 2	+	+	-	-	-	+	+	+	-	+	-	-	-	6
RA 3	+	+	-	-	-	+	+	+	-	+	+	-	-	7
RA 4	+	+	+	-	-	+	+	+	-	+	+	+	+	10
RA 5	+	+	-	-	-	+	+	-	-	+	+	+	_	7
RA 6	+	+	+	-	-	+	+	-	-	-	-	+	+	7
RA 7	+	+	-	-	-	+	+	+	+	+	+	+	+	10
RA 8	+	+	-	-	-	+	+	+	-	+	-	-	_	6
RA 9	+	+	-	-	-	+	+	-	-	+	+	-	+	7
RA 10	+	+	-	+	-	+	+	-	_	+	+	_	+	8
RA 11	+	+	-	-	-	+	+	+	+	+	-	+	_	8
RA 12	+	+	-	-	-	+	+	+	_	+	+	+	_	8
RA 13	+	+	-	-	-	+	+	+	+	+	+	_	+	9
RA 14	+	+	+	-	-	+	+	+	_	+	-	_	_	7
RA 15	+	+	-	-	-	+	+	+	+	+	-	+	+	9
RA 16	+	+	+	-	-	+	+	-	+	+	+	+	_	9
RA 17	+	+	+	-	+	+	+	+	_	+	+	+	+	11
RA 18	+	+	-	-	-	+	+	+	_	+	+	+	_	8
RA 19	+	-	-	-	-	+	+	-	_	+	-	-	+	5
RA 20	+	+	+	-	-	+	+	+	-	+	+	-	+	9
RA 21	+	+	+	-	-	+	+	+	_	+	+	_	+	9
RA 22	+	+	-	-	-	+	+	+	+	+	+	_	_	8
RA 23	+	+	+	-	-	+	+	-	+	+	-	_	_	7
RA 24	+	+	+	-	-	+	+	-	+	+	+	-	+	9
RA 25	+	+	+	-	-	+	+	+	-	+	-	+	+	9
RA 26	+	+	-	-	-	+	+	+	-	+	+	+	-	8
RA 27	+	+	+	-	-	+	+	-	+	+	-	+	-	8
RA 28	+	+	-	-	-	+	+	-	-	+	-	+	-	6
RA 29	+	+	1	-	-	+	+	+	-	-	-	_	-	5
RA 30	+	+	-	-	-	+	+	-	_	+	-	_	+	6
									-					
TOTAL	30	29	12	1	1	30	30	19	10	28	17	14	14	
%	100%	96.66%	40%	3.33%	3.33%	100%	100%	63.33%	33.33%	93.33%	56.66%	46.66%	46.66%	

In general terms, the overall analysis of the texts in the corpus reveals that authors of RAs in English are likely to:

- 1- Present the topic
- 2- Justify the topic
- 3- Present information related to the topic

- 4- Elaborate and expand the information
- 5- State their opinion about the topic
- 6- Summarize the main findings
- 7- Recommend

5.8. Rhetorical Moves found in the *Introduction* Section

As it can be seen in the rhetorical analyses of the texts, all the RAs have an *Introduction* section. This coincides with Kwan (1996), Day (1990), and Caldeiro *et al.* (1993), who suggest that all RAs should have an introduction. Following Swales (1990), the introduction does not contain sub-headings; therefore, we focused on the section between the title and the first sub-heading. Five moves have been identified in this section: **presenting the topic**, **justifying the topic**, **establishing the objectives**, **presenting the article development structure**, **and making recommendations for the reader**. Table 13 summarizes the combination of rhetorical moves found in this section.

Table 13: Rhetorical Move Combinations Found in the Introduction Section

INTRODUCTION				
Rhetorical Structure	Number of Instances/ Number of Texts	Frequency of Occurrence		
Topic presentation	16	53.33%		
Topic justification				
Topic presentation	11	36.66%		
Topic justification				
Objectives				
Topic presentation	1	3.33%		
Topic justification				
Objectives				
Recommendations for the reader				
Topic presentation	1	3.33%		
Topic justification				
Article development structure				
Topic presentation	1	3.33%		

Table 13 shows the most common combination of moves in the *introductions* of our corpus: **topic presentation** and **article justification**. In eleven instances, we identified the combination of three moves: **topic presentation**, **article justification** and **objectives**. In one instance (RA 17), the previous combination included a different move – **recommendations for the reader**. In only one instance, (RA 10) we identified the following sequence: **topic presentation**, **article justification**, and **article development structure**; and one text (RA 19) did not include any combinations of moves; we found only one move – **topic presentation**.

Each of the moves found in the *Introduction* section was analyzed from the point of view of the function they fulfill in the text, taking into account specific linguistic cues.

5.8.1. Move 1: Presenting the Topic

This move is present in all the texts analyzed, which makes it "obligatory". It seems to be used to present a brief definition of the topic, and to limit the area of study, highlighting theoretical information. According to Morales (2010), this may coincide with Swales' (1990) "establishing the territory". This move is usually signaled by the use of copulative verbs, impersonal constructions and generalizations.

- (5) Vaccines <u>are</u> among the most effective interventions in modern medicine. Ever since Edward Jenner's first use of a vaccine against smallpox in 1796 (see text box), the use of vaccines <u>has become</u> indispensable to the eradication of disease. (RA 2)
- (6) <u>It is difficult to deliver</u> effective and high-quality care to patients without knowing their diagnoses; likewise, for health systems to be effective, <u>it is necessary to understand</u> the key challenges in efforts to improve population health and how these challenges are changing. Before the early 1990s, <u>there was</u> no comprehensive and internally consistent source of information on the global burden of diseases, injuries, and risk factors. (RA 9)

5.8.2. Move 2: Justifying the Topic

All the texts but one (RA 19) contain this move, which makes it "quasi-obligatory". This move is to be used to justify the importance of the research. The realization of this

move is exemplified below; its most salient linguistic features, which are usually explicit lexical items, are highlighted.

- (7) <u>As a result of genomic discoveries, increasing numbers of clinical guidelines now suggest incorporating genomic tests or therapeutics into routine care. In some cases, the rapidity of translation has sparked debate regarding the level of evidence of clinical benefit needed to introduce new, and potentially costly, medical technologies. ^{5,6} (...) Regardless of where medicine is practiced, genomics is inexorably changing our understanding of the biology of nearly all medical conditions. How can any clinician understand the diagnosis and treatment of breast cancer, much less explain it to a patient such as Cathy, without a rudimentary understanding of genomic medicine? (RA 17)</u>
- (8) Pharmacogenomics facilitates the identification of biomarkers that <u>can help</u> physicians <u>optimize</u> drug selection, dose, and treatment duration and avert adverse drug reactions. In addition, pharmacogenomics <u>can provide new insights</u> into mechanisms of drug action and as a result <u>can contribute to</u> the development of new therapeutic agents. (RA 24)

Some authors choose to include the need for further research in this area of study as well.

- (9) <u>Despite this progress</u>, mechanisms that underlie individual differences in the presentation and pathophysiological features of cardiovascular disease are <u>poorly understood</u>. (RA 16)
- (10) <u>However</u>, the mechanisms that underlie individual differences in the predisposition to obesity <u>remain obscure</u>. <u>Failure to understand</u> the pathophysiology of diseases such as type 2 diabetes and obesity <u>frustrates efforts</u> to develop improved therapeutic and preventive strategies. (RA 20)

Narration sequences have been identified in this move to refer to what has been relevant to the research.

(11) Whereas staging laparotomy was once used to define the extent of the disease in patients with earlystage (i.e., stage I or stage II) Hodgkin's lymphoma, currently available imaging techniques and effective systemic therapies have relegated staging laparotomy to a historical footnote.

Studies of the use of mechlorethamine in the 1940s showed that the rate of response to systemically administered anticancer agents in patients with Hodgkin's lymphoma could be high. After the discovery of several other active agents, investigators at the National Cancer Institute combined four of these drugs for use in the initial treatment of patients with disseminated Hodgkin's lymphoma. The resulting report, released in 1970, made it clear that a cure was possible with chemotherapy alone. Studies of chemotherapy administered as adjuvant treatment after radiotherapy in patients with high-risk, early-stage disease

showed a reduction in the risk of relapse ⁶; subsequent studies investigated the effects of the initial use of chemotherapy followed by the application of adjuvant radiotherapy to smaller treatment fields.^{7,8} (RA 26)

As it has been mentioned in Morales (2010), none of the RAs include Swales' (1990) "establishing the niche". This is congruent with the idea that the RA consists mainly in an analytical revision of previous research. In other words, authors of RAs do not pretend to "occupy the niche" by making reference to new findings; they try to organize, evaluate, and select relevant research to keep the audience informed of a selected topic.

5.8.3. Move 3: Establishing the Objective

Only 36.66% of the analyzed texts included this move; that is why it is considered "optional". The realization of this move is illustrated in the examples that follow; its most salient features (explicit lexemes, only) are highlighted.

- (12) In this article, we <u>summarize</u> the available data on trends in selected behavioral and dietary risk factors for noncommunicable diseases and <u>examine</u> the effects they have had, or may have in the future, on the health of populations around the world. (RA 1)
- (13) In this article, we <u>define and discuss</u> the importance of good global governance for health, <u>outline</u> major challenges to such governance, and <u>describe</u> the necessary functions of a global health system. (RA 4)
- (14) We <u>review</u> the burden of noncommunicable diseases and issues in prevention, detection, and treatment that must be addressed in order to meet this goal. (RA 6)

5.8.4. Move 4: Presenting the Article Development Structure

This move was identified in only one instance, which makes it "optional". It is used to anticipate what will be discussed in the *Development* section. The realization of this move, signaled by explicit lexical items, is illustrated in the examples below.

(15) A brief review of five diseases selected for eradication or elimination will illustrate the potential benefits of such efforts and some of the challenges they pose (see the interactive graphic, available with the full text of this article at NEJM.org). Although dracunculiasis and poliomyelitis are now the only officially sanctioned targets of eradication campaigns, the WHO has designated the campaign against lymphatic filariasis as the Global Program to Eliminate Lymphatic Filariasis. These three programs represent different levels of international commitment to disease eradication. The program to eliminate onchocerciasis (river blindness) from the Americas is an example of a highly successful regional initiative, whereas the effort to eliminate malaria and lymphatic filariasis from Hispaniola is an example of a compelling, binational initiative that might suggest the feasibility of a global eradication effort. (RA 10)

5.8.5. Move 5: Making Recommendations for the Reader

This move was found in one text (RA 17); therefore, we consider it "optional". It seems to be used to make the text reader-friendly and to meet the reader's needs. The realization of this move and its most typical linguistic features can be observed in the following example:

(16) <u>Readers who wish to review</u> core principles of genetics and genomics are encouraged to revisit that first primer. A glossary of key terms appears in this article and will be updated throughout the course of the Genomic Medicine series. (RA 17)

5.9. Rhetorical Moves found in the *Development* Section

As it can be seen in our corpus, all the texts have a *Development* section. At first sight, it can be said it is the longest section of the RA. All the section is divided by subheadings, all of which relate to the topic under discussion. This coincides with Huth (1999), who argues that sub-headings aid comprehension. Moreover, it is in the *development* where tables, diagrams, figures, and glossaries can be found.

As regards the rhetorical structure of this section, four moves have been identified: **presenting the information**, **elaborating or expanding the information**, **stating the author's opinion**/ **point of view**, and **summarizing**. Most of the moves coincide with Morales' (2010) findings.

Table 14 summarizes the combination of rhetorical moves found in this section.

Table 14: Rhetorical Move Combinations Found in the Development Section

DEVELOPMENT				
Rhetorical Structure	Number of Instances/ Number of Texts	Frequency of Occurrence		
Info presentation	347	86.50%		
Info elaboration/ expansion				
Info presentation				
Info elaboration/ expansion	11	2.70%		
Summary				
Info presentation				
Info elaboration/ expansion	43	10.70%		
Author's opinion				

As it can be seen in Table 14, the most common combination of moves in the *Development* section of our corpus is **info presentation** and **info elaboration/expansion**. Moreover, this predominant move pattern was identified in cycles. In forty-three instances, we identified these two moves in combination with a different move – **stating the author's opinion/ point of view**. In eleven instances, the sequence **info presentation – info elaboration/ expansion** was followed by the move **summarizing**.

Each of the moves found in the *Development* section was analyzed from the point of view of the function they fulfill in the text, taking into account specific linguistic cues.

5.9.1. Move 6: Presenting the Information

This move is present in all the texts analyzed, which makes it "obligatory". It is used to present the topic, which will be elaborated in the following move. In most of the cases, it comprises one or two sentences. The realization of this move is exemplified below; its most salient linguistic features, which are usually impersonal constructions, the use of passive voice, and the use of present forms are highlighted.

⁽¹⁷⁾ In addition to shifting patterns of smoking prevalence, there have been changes in the type of cigarettes available, including the introduction of "low-tar" and "light" cigarettes. (RA 1)

- (18) <u>It has long been recognized</u> that nucleated fetal cells reach the maternal circulation, but attempts to isolate these rare cells from maternal blood (which typically number 1 to 6 cells per milliliter of maternal blood) and use them for genetic testing have been disappointing because of low sensitivity. Cellfree fetal RNA and DNA, released from apoptotic placental trophoblast cells (and not from the fetus per se), hold greater promise for genetic testing as a result of advances in DNA sequencing methods and informatics (Table 2).^{33,34} (RA 22)
- (19) A copy-number change <u>is defined as</u> a deletion or duplication of a stretch of DNA as compared with the reference human genome. (RA 23)
- (20) The hazardous effects of smoking on mortality from cancers and cardiovascular and respiratory diseases <u>have been known</u> for decades. (RA 1)

5.9.2. Move 7: Elaborating / Expanding the Information

This move is also present in all the RAs of our corpus; therefore, it is considered "obligatory" in our taxonomy. It is used to give details of the topic being developed. Relevant studies related to the topic are mentioned here. Descriptions, examples, and recommendations have also been identified in this move. The realization of this move is exemplified below.

- (21) Lozano et al.³ compared the rates of decline from 1990 through 2000 with the rates of decline from 2000 through 2011 and found that the majority of countries (106 of 193 countries) had accelerated declines in child mortality in the period from 2000 through 2011. Much of the decline was related to a reduction in postneonatal mortality, whereas the reduction in neonatal mortality was much lower. Lozano et al. also reported an estimated decline in maternal mortality, from 409,100 deaths worldwide in 1990 (uncertainty range, 382,900 to 437,900) to 273,500 deaths in 2011 (uncertainty range, 256,300 to 291,700), which was broadly consistent with the estimate calculated by a United Nations interagency group.⁵ (RA 3)
- (22) The life cycle of the parasite Dracunculus medinensis is shown in Figure 1A. When exposed to water, the adult worms discharge thousands of larvae, which are ingested by tiny crustaceans (cyclops). About a year after a person has drunk water from ponds or open wells contaminated with these crustaceans, adult worms measuring about 1 m in length slowly begin to emerge through the infected person's skin. (RA 10)
- (23) Traditional phenotypic testing (measuring the ability of the virus to replicate in the presence of the antiviral drug) <u>is still recommended</u> for patients in whom viruses are suspected of having complex drug-resistance mutation patterns. (RA 13)
- (24) <u>For example</u>, analysis of the HIV-1 envelope has revealed at least four discrete sites that represent potential targets for the designs of immunogens (i.e., agents capable of inducing an immune response). These include the CD4-binding site, a glycosylated site in

variable regions 1 and 2 (V1V2), glycans on the outer domain, and the membrane proximal external region. $(RA\ 2)$

5.9.3. Move 8: Stating the Author's Opinion/Point of View

This move is present in 19 RAs of our corpus; therefore, it is considered "quasiobligatory". The realization of this move is exemplified below; its most salient linguistic features, which are usually explicit lexical items, are highlighted.

- (25) <u>Yet</u> all these factors <u>can be undermined</u> when mechanisms for accountability are <u>weak</u> or when sovereign states put <u>narrowly conceived self-interests</u> before global health. (RA 4)
- (26) This <u>may be the most difficult barrier to quantify</u> and <u>yet the most important to address</u>. (RA 8)

5.9.4. Move 9: Summarizing

This is the last move identified in the *Development* section. It is present in 10 RAs of our corpus; therefore, it is considered "optional". This move is mainly used to present a summary of relevant findings before a new topic is presented or before the *conclusion* section. The realization of this move is illustrated in the following examples.

- (27) Thus far, the epidemiologic transition has been viewed as a process through which the share of noncommunicable diseases as causes of death increases with declining mortality and rising longevity. As population-based data on medical causes of death and, more recently, on risk factors have become available, a more complete picture of the epidemiologic transition is emerging one in which the interplay among risk factors and medical care leads to distinct disease patterns in different populations, with variations even among noncommunicable diseases. Despite this diversity, an increasingly salient feature of risk-factor transitions is that any behavioral and dietary risks, and their metabolic and physiological mediators, that have been prominent in high-income countries are now at the same or higher levels in low- and middle-income countries. This pattern parallels the higher prevalence of most risk factors and higher mortality from noncommunicable diseases in lower socioeconomic groups than in higher socioeconomic groups within highincome countries. (RA1)
- (28) <u>Meanwhile</u>, an important research task is to identify ongoing changes in health risks and outcomes that can be reasonably attributed to recent climate change. Given the multivariate causation of most human health outcomes, attribution is rarely simple.⁴⁵

Nevertheless, over the past decade, observed changes in some health outcomes, viewed collectively, suggest a climate signal (Table 2). 18,38,46 (RA 11)

5.10. Rhetorical Moves found in the Conclusion Section

The analysis of our corpus suggest that all the texts but one (RA 29) have a *Conclusion* section. This coincides with Huth (1999), Myers (1991), and Murlow (1994), who suggest that this type of texts should necessarily have a section with the conclusions of the review. At first sight, it can be said this section is mainly labeled by a sub-heading that anticipates the content of the paragraphs that follow.

As regards the rhetorical structure of this section, four moves have been identified: summarizing the main findings, making recommendations for future research or practice, indicating implications, and making predictions. The first two moves coincide with Morales' (2010) findings.

Table 15 summarizes the combination of rhetorical moves found in this section. As it can be seen, the most common combination of moves in the *Conclusion* sections of our corpus is **summary of main findings** and **recommendations for future research or practice**. In six instances, we identified these two moves in combination with a different move –**indicating implications**. In other six instances, the sequence **summary of main findings - recommendations** was followed by the move **making predictions**. In four instances, we found only one move –**summary**. In two instances, the four moves were seen in combination.

Table 15: Rhetorical Move Combinations Found in the Conclusion Section

CONCLUSION				
Rhetorical Structure	Number of Instances/ Number of Texts	Frequency of Occurrence		
Summary	4	13.80%		
Summary	3	10.34%		
Recommendations				
Summary	3	10.34%		
Implications				
Summary	2	6.90%		
Predictions				
Implications	1	3.45%		
Predictions				
Summary	6	20.69%		
Recommendations				
Implications				
Summary	6	20.69%		
Recommendations				
Predictions				
Summary	2	6.90%		
Implications				
Predictions				
Summary	2	6.90%		
Recommendations				
Implications				
Predictions				

Each of the moves found in the *Conclusion* section was analyzed from the point of view of the function they fulfill in the text, taking into account specific linguistic cues.

5.10.1. Move 10: Summarizing the Main Findings

Twenty eight RAs in our corpus include this move, which makes it "quasi-obligatory". This move is used to summarize salient results of the research. The realization of this move is illustrated in the following examples.

(29) Traditional vaccines have shown unprecedented success in preventing human infectious diseases and preserving public health by alleviating death and suffering from numerous microbial threats. The success of such therapies has heralded the arrival of a new era for vaccines. Increased understanding of human immunity and microbes has catalyzed unprecedented advances that can be adopted to improve public health. Despite continuing challenges, the collective effort of governments and nonprofit organizations to expand the

utilization of effective vaccines throughout the world has grown. Scientific, medical, and biotechnologic advances promise to improve the utilization of existing vaccines and expand the horizons for tomorrow's vaccines. (RA 2)

(30) Rapid globalization has brought new, large-scale influences to bear on patterns of human health. Various global-scale changes — economic, social, demographic, and environmental (particularly climatic) — are linked, for example, to the increased prevalence of obesity, changes in regional food yields, the emergence of infectious diseases, the spread of cigarette smoking, and the persistence of health disparities. Undertaking primary prevention at the source to reduce health risks resulting from these global influences is a formidable challenge. It requires conceptual insights beyond the conventional understanding of causation and prevention, as well as political will, trust, and resources. The complexities of policies to mitigate human-induced climate change are clear. (RA 11)

5.10.2. Move 11: Making Recommendations for Future Research or Practice

In this move the importance of the results stated in the RA is highlighted by mentioning what needs to be done in the future. The quantitative analysis showed that this move is "quasi-obligatory". The realization of this move is illustrated below; it most typical linguistic exponents, which in most cases are explicit lexical items, are highlighted.

- (31) Successful policies, such as tobacco and alcohol taxes and restrictions, <u>should be replicated</u> in all populations. <u>There is also a need for bold and creative policies that address harmful alcohol consumption, improve diet, and increase physical activity. (RA 1)</u>
- (32) Although the focus during the past decade has been on the saving of lives, <u>it is also</u> important to look beyond survival to issues of reducing morbidity and disability and improving longterm outcomes of relevance to human development. (RA 3)

5.10.3. Move 12: Indicating Implications

This text segment may be used to summarize the writer's views on the contributions which the study has made to the field (Nwogu, 1997) or to raise themes and questions for future research. The analysis of the data showed that this move is "optional". The realization of this move is illustrated in the examples that follow; its most salient linguistic features are highlighted.

- (33) Strengthening the global health system will require managing persistent governance challenges to ensure that key functions are performed. It will also require increased clarity regarding which actors should carry out which functions to avoid a situation in which there is inefficient overlap on some functions while others are overlooked. Consensus regarding the core functions of each major actor should determine institutional arrangements: form should follow function. This endeavor has become even more urgent given the slowdown in funding for global health. In current debates about WHO reform, attention should be paid to the functions this institution performs within the larger global health system and the governance challenges that must be addressed for it to perform them successfully. (RA 4)
- (34) Attempts to use data from genomewide association studies to determine drug response also have so far been disappointing.⁷⁵ Thus, it <u>is likely that genetic data will need to be combined</u> with other biomarkers to identify clinically meaningful subgroups of patients to guide the treatment of patients. Such an approach <u>may be particularly useful</u> for early detection of persons at risk for autoimmune disease, because serologic autoimmunity may be present for many years, ⁷⁶ even though overt clinical disease develops in only a subgroup of such persons. (RA 15)

5.10.4. Move 13: Making Predictions

This move may be used to state the author's predictions for the future in relation to the topic under discussion. This move was identified in 14 RAs, which makes it "optional". The realization of this move is illustrated in the examples below.

- (35) Noncommunicable diseases <u>will be</u> the predominant global public health challenge of the 21st century. Prevention of premature deaths due to noncommunicable diseases and reduction of related health care costs <u>will be</u> the main goals of health policy. Improving the detection and treatment of noncommunicable diseases and preventing complications and catastrophic events <u>will be</u> the major goals of clinical medicine. A multilevel approach that integrates policy actions, regulations, health education, and efficient health systems to achieve these goals <u>will be</u> the mission of public health. (RA 6)
- (36) With each revision, the entire time series from 1990 forward will be reassessed so that meaningful comparisons over time will be possible. Everyone consumers, health professionals, researchers, and decision makers will have access to assessments based on the latest available evidence. Continuous revisions will also facilitate the incorporation of scientific feedback on how to improve the estimation for any particular disease, injury, or risk factor in countries. With time, we hope that the definitions, methods, and estimation techniques from the GBD study effort will also be widely used to understand patterns of health within countries that are differentiated according to geographic region, social class, or race or ethnic group. (RA 9)

5.11. Summary of the Chapter

This chapter presented the main results obtained from the analysis of the corpus. The quantitative analysis enabled us to demonstrate that the rhetorical structure of medical RAs in English consists of three "obligatory" moves, four "quasi-obligatory" moves, and six "optional" ones (see Table 16). The following chapter discusses the significance of these outcomes.

Table 16: Rhetorical Moves of Medical RAs

Section	Rhetorical Moves		
	Topic presentation (obligatory)		
	Topic justication (quasi-obligatory)		
Introduction	Objectives (optional)		
	Article development structure (optional)		
	Recommendations for the reader (optional)		
	Info presentation (obligatory)		
Development Info elaboration/ expansion (obligatory)			
	Author's opinion/ point of view (quasi-obligatory)		
	Summary (optional)		
	Summary of main findings (quasi-obligatory)		
Conclusion	Recommendations for future research or practice (quasi-obligatory)		
	Implications (optional)		
	Predictions (optional)		

Chapter VI: Discussion

6.1. Introduction

This study sought to examine the different sections of the medical RA written in English in terms of its rhetorical structure and its move frequency. The analysis of the corpus was carried out following the move approach initiated by Swales (1981, 1990). Based on the findings, a descriptive analysis of the rhetorical structure of the different sections of the RA is first discussed and a thirteen-move template is proposed. The chapter concludes by setting out the limitations and implications of the present research.

6.2. Discussion

The RA is one of the emerging genres in the field of Medicine, among others. In fact, Swales (2004: 208) refers to it as "an increasingly common phenomenon" which derives from increasing specialization, the chronological lengthening of various research strands in the field, the proliferation of publishing outlets, the pressure to publish, and the increasing numbers of active participants in the discourse community.

It can be said that the characteristics of the RA, its communicative function in the field of Medicine, and the authors' position in the discourse community shape and condition this genre. Moreover, each section and each rhetorical move seem to reveal the authors' intentions.

Swales (2004) and Noguchi (2006) coincide in their views of the RA as not being a homogeneous genre from the discursive point of view. Different textual sequences work together throughout the text -expository, narrative and descriptive (Noguchi, 2006). In this study, expository sequences (introduction, development, and conclusion) have been associated with the rhetorical sections of the RA. This coincides with Noguchi, 2006, and Morales *et al.*, 2007. Moreover, narrative and descriptive sequences have been used in different rhetorical sections of the RA. Narrative sequences are mainly used to present antecedents and previous studies related to the object of study whereas descriptive sequences are mainly used to define and characterize pathologies, therapies, diagnosis, and medical procedures. This coincides with Atkinson (1999), Huth (1999),

and Horton-Salway (2002), who consider that patients' observations and clinical records are fundamental components of biomedical knowledge.

Although argumentative sequences do not predominate in RAs, some instances were also found in this analysis. They seem to be included to signal the author's stance in relation to the topic under discussion. Samples of argumentative sequences were found in both the *Development* and the *Conclusion* section. Such sequences might be used to relate the present RA with the successive studies by indicating an analytic, evaluative and projective vision, which is the result of the actual revision.

In this study, samples of the traditional review article predominate. In other words, the narrative structure does not follow the IMRD pattern (Swales, 1990) as it is case of systematic revisions and meta-analyses. Although specialized journals do not prescribe a particular format for the organization of the RA, as it is case of the research article, traditional narrative RAs have three sections: introduction, development, and conclusion.

The results obtained in this study suggest that, within this macro-structure, RAs in the field of Medicine consist of thirteen moves, namely: presenting the topic, justifying the topic, establishing the objectives, presenting the article development structure, and making recommendations for the reader in the Introduction section; presenting the information, elaborating or expanding the information, stating the author's opinion/point of view, and summarizing in the Development section; and summarizing the main findings, making recommendations for future research or practice, indicating implications, and making predictions in the Conclusion section. Even when most of these moves are present in the corpus, they show variability in their frequency of appearance.

Of the five moves identified in the *Introduction* section – (1) *presenting the topic*, (2) *justifying the topic*, (3) *establishing the objectives*, (4) *presenting the article development structure*, and (5) *making recommendations for the reader* – move 1 was found to be "obligatory" whereas move 2 is considered "quasi-obligatory". Moves 3, 4, and 5 are "optional" ones.

It seems that all the authors are likely to present the topic by giving a brief definition of the topic, and limiting the area of study, highlighting theoretical information. According to Morales (2010), this may coincide with Swales' (1990) "establishing the territory". Moreover, in most of the texts analyzed, authors are likely to justify the topic by highlighting the importance of the research. In this move, some authors choose to include the need for further research in this area of study as well. It is worth mentioning that none of the RAs include Swales' (1990) "establishing the niche". This seems to characterize the genre in the field of Medicine, among others, since the RA consists mainly in an analytical revision of previous research. This is congruent with Morales' (2010) assertion that authors of RAs in the field of science do not pretend to "occupy the niche" by making reference to new findings; they try to organize, evaluate, and select relevant research to keep the audience informed of a selected topic. Although establishing the objective is considered an "obligatory" move in research articles, this does not seem to be the case in medical RAs. It seems interesting to mention that authors exceptionally choose to present the article development structure and to make recommendations for the reader. This could indicate that authors do not explicitly tend to orient the readers by making overt comments of how the following section is organized neither are they likely to address the readers directly by making suggestions of what they should read first.

As regards the *Development* section, expository sequences predominate. This is congruent with the idea that it is in this section where the topic under study is developed in depth. Therefore, definitions, descriptions and classifications are likely to be found in this section. To aid comprehension, all the section is divided by sub-headings and diagrams, tables, figures, and glossaries are included. This could indicate that the authors want to make the text reader-friendly.

Of the four moves identified in the *Development* section – (6) *presenting the information*, (7) *elaborating/ expanding the information*, (8) *stating the author's opinion/ point of view*, and (9) *summarizing* – moves 6 and 7 were found to be "obligatory". This finding is in agreement with Morales' (2010). Move 8, however, has been proposed for the present study and is considered "quasi-obligatory", and move 9, in turn, is regarded as "optional", finding which differs from Morales' (2010) work.

It seems that authors are likely to present the topic, which will be elaborated in the following move by presenting arguments and evidence structured in content-oriented categories. Most of the times, the authors choose to state their opinion about the topic under discussion. This is done in a subtle way and is evidenced by the authors' choice of words, which reflects a critical stance towards the topic being discussed. Sometimes, authors present a summary of relevant findings before a new topic is presented or before the *Conclusion* section. This seems to indicate that some authors are likely to round off the topic under discussion before moving on to a different one.

As regards the *Conclusion* section, the analysis of our corpus suggests that all the texts but one (RA 29) contain this section. This finding is in agreement with Huth (1999), Myers (1991), and Murlow (1987, 1994), who suggest that this type of texts should necessarily have a section with the conclusions of the review. It is interesting to mention that this is the only section labeled as such, anticipating the content of the paragraphs that follow.

Of the four moves identified in the Conclusion section – (10) summarizing the main findings, (11) making recommendations for future research or practice, (12) indicating implications, and (13) making predictions – moves 10 and 11 were found to be "quasi-obligatory" whereas moves 12 and 13 were classified as "optional" ones. The first two moves coincide with Morales' (2010) findings.

It seems that authors are likely to begin this section by summarizing the salient results of the research. Moreover, most authors seem to highlight the importance of the results stated in the RA by mentioning what needs to be done in the future. In fact, Sternberg (2003: 61) suggests that if conclusions different from the original hypotheses have been drawn, ways in which those conclusions could be verified in future research should be recommended. It is worth mentioning that authors sometimes tend to summarize their views on the contributions which the study has made to the field (Nwogu, 1997) or to raise themes and questions for future research. In fact, *indicating implications* is usually the closing move. It seems that some writers are more inclined to suggest what conclusions can be drawn from their results and to offer explanations of what those results may mean in the context of their study. The present results suggest that some researchers are more likely to "look at ways in which results might be implemented or

lead to applications in the future" (Glasman-Deal, 2010: 177). Finally, some authors tend to close this section by *making predictions*. It seems that authors tend to state their predictions for the future in relation to the topic under discussion.

Swales (2004) agrees to say that authors of RAs are invited to bring their chosen subfield to a wider audience, offering them a chance to reflect on the past, and to bring into focus some earlier work that might have been neglected, allowing them not only to reflect on some future trends but also to "showboat" their own contributions to the field. Hence, the RA is a literary review which closes with some overall evaluation on the part of the author. This genre offers the writer an opportunity to project a synoptic vision of an area of expertise, contributing to an understanding of such area and suggesting what can be done next.

6.3. Proposed Template

The second goal of this study was to capture the rhetorical structure most frequently used in medical RAs written in English. All the above mentioned moves do occur in the corpus analyzed; however, they do not occur in a linear fashion. Nor do they occur with the same degree of frequency since the results showed quantitative differences. Despite these differences, it may be reasonable to assume that the following sequence conforms to what can be considered a logical rhetorical structure for medical RAs:

A. INTRODUCTION

- 1. Presenting the topic
- 2. Justifying the topic
- 3. Establishing the objectives
- 4. Presenting the article development structure
- 5. Making recommendations for the reader

B. DEVELOPMENT

- 6. Presenting the information
- 7. Elaborating/expanding the information
- 8. Stating the author's opinion/point of view
- 9. Summarizing

C. CONCLUSION

- 10. Summarizing the main findings
- 11. Making recommendations for future research or practice
- 12. Indicating implications
- 13. Making predictions

Despite certain differences, the thirteen-move framework put forward in the present study may be considered to be consonant with the ten-move structure proposed by Morales (2010) for RAs written in Spanish in the field of Dentistry:

A. INTRODUCCIÓN

- 1. Definición y delimitación del tema
- 2. Justificación del artículo
- 3. Objetivos
- 4. Descripción de la metodología
- 5. Estructura del desarrollo del artículo

B. DESARROLLO

- 6. Presentación de la información/sección/apartado
- 7. Elaboración/expansión de la información
- 8. Resumen

C. CONCLUSIÓN

- 9. Resumen de los principales resultados del artículo
- 10. Recomendaciones para la práctica clínica y para futuras investigaciones

6.4. Limitations of the Study

Whereas the findings of the current study are interesting from an applied perspective, some limitations must be addressed. Probably, the main limitation is that this research

was mainly descriptive, and consisted of a relatively small sample if compared to studies in which a bigger sample was used (Kanoksilapatham, 2005; Peacock, 2002). Therefore, the findings should be corroborated with larger corpus in order to be able to make generalizations. Moreover, the RAs that make up the corpus of the present study were downloaded from only one journal. We suggest replicating this study with texts taken from different journals to be able to make generalizations about the rhetorical structure of RAs. Also, it would be interesting to make a contrastive study of medical RAs written in English and in Spanish to be able to establish similarities and differences between their rhetorical patterns. Finally, more research is needed on the lexical choices that signal the presence of the different moves in the different sections of the RA. An important next step would be to thoroughly examine these linguistic features.

6.5. Implications of the Study

The rhetorical structure proposed in the present study should be regarded as tentative. Much remains to be analyzed before the whole picture of the rhetorical structure of RAs written in English can be described in detail. Nevertheless, this study may have significant pedagogical implications. The proposed template can empower learners, novice researchers and teachers in their practices. First, by being aware of the preferred rhetorical moves of this emerging genre, students can be aided in the process of reading and writing scientific RAs. Second, by understanding the rhetorical conventions agreed upon in particular academic communities, novice researchers can be assisted in finding a niche in the international publishing arena. The generic features of RAs should therefore be incorporated into academic writing courses for both undergraduate and postgraduate students. Third, this type of descriptive studies can also provide teachers with an insight of the distribution of information across RAs. This knowledge, in turn, may enhance the design of ESP course materials, since teachers can design tasks to help students capture and disentangle the rhetorical structure of the different sections of RAs. Finally, by further exploring the rhetorical schema of RAs, we can advance the cause of gaining new insights into the phenomenon of a newly-emergent genre.

References

- Atkinson, P. (1999). Radical discourse, evidentiality and the construction of professional responsibility. In S. Sarangi y C. Roberts (Eds.), *Talk, work and institutional order: Discourse in medical, mediation, and management settings* (pp. 75-107). Berlín: Mouton de Gruyter.
- Bhatia, V. K. (1993). Analyzing genre. Language use in professional settings. Londres: Longman.
- Bhatia, V. K. (1997). Genre-mixing in academic introductions. *English for Specific Purposes*, 16(3), 181-195.
- Biber, D. (1993). Representativeness in corpus design. *Literary and Linguistic Computing*, 8(4), 243-247.
- Brett, P. (1994). A genre analysis of the results section of sociology articles. *English for Specific Purposes*, *13*, 52-54.
- Caldeiro, M. et al. (1993). Manual de estilo. Publicaciones biomédicas. Barcelona: Mosby.
- Connor, U. and Mauranen A. (1999). Linguistic analysis of grant proposals: European Union research grants. *English for Specific Purposes*, *18*, 47–62.
- Crookes, G. (1986). Towards a validated analysis of scientific text. *Applied Linguistics*, 7, 57-70.
- Cué Brugueras, M., Díaz Alonso, G., Díaz, A. and Valdés Abreu, M. (1996). El artículo de revisión. *Resumed*, 9(2), 86-96.
- Day, R. (1990). *Cómo escribir y publicar trabajos científicos*. Washington, DC: Organización Panamericana de la Salud.
- Dudley-Evans, T. (1994). Genre analysis: an approach to text analysis. In Coulthard, M. (Ed.), *Advances in written text analysis* (pp. 219-228). Routledge: London.
- Flowerdew, J. and Dudley-Evans, T. (2002). Genre analysis of editorial letters to international editorial contributors. *Applied Linguistics*, 23(4), 463-489.
- Gisbert, J. P. and Bonfill, X. (2004). ¿Cómo realizar, evaluar y utilizar revisiones sistemáticas y meta análisis? *Gastroenterología Hepatológica*, 7(3), 129-49.
- Glasman-Deal, H. (2010). *Science research writing for non-native speakers of English*. London: Imperial College Press.
- Grabe, W. and Kaplan, R. (1996). *Theory and practice of writing*. London: Addison Wesley Longman.

- Holmes, R. (1997). Genre analysis and the social sciences: an investigation of the structure of research article discussion sections in three disciplines. *English for Specific Purposes*, 16(4), 324-325.
- Horton-Salway, M. (2002). Bio-psycho-social reasoning in GPs' case narratives: The discursive construction of me patients' identities. *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine*, 6(4), 401–21.
- Huth, E. (1987). *Medical styles and format: An international manual for author, editors and publishers*. Philadelphia: Si Press.
- Huth, E. (1999). Writing and publishing in medicine. Pennsylvania: Williams & Wilkins.
- Hyland, K. (1997). Scientific claims and community values: Articulating an academic culture. *Language & Communication*, 17(1), 19-31.
- Hyland, K. (2002). Genre: Language, context and literacy. *Annual Review of Applied Linguistics*, 22, 113-135.
- Hyland, K. (2003). Dissertation acknowledgements. *Written Communication*, 20(3), 242-268.
- Hyland, K. (2004). "Graduates" gratitude: the generic structure of dissertation acknowledgements. *English for Specific Purposes*, 23, 303-324.
- Hyon, S. (1996). Genre in three traditions: Implications for ESL. *Tesol Quarterly*, 30 (4), 693-722.
- Johns, A. (1997). *Text, role and context: Developing academic literacies.* New York: Cambridge University Press.
- Kanoksilapatham, B. (2005). Rhetorical structure of biochemistry research articles. English for Specific Purposes, 24, 269-292.
- Kanoksilapatham, B. (2007). Introduction to move analysis. In D. Biber (Ed.), *Discourse on the move* (pp. 23-41). Philadelphia: John Benjamins.
- Kwan, B. (1996). Introductions in state-of-the-art, argumentative, and teaching tips TESL journal articles: Three possible sub-genres of introduction? Hong Kong: City University of Hong Kong.
- Leech, G. (1991). Corpora. In K. Malmkjaer (Ed.), *The linguistics encyclopedia* (pp. 73-80). London: Routledge.
- Li, L. and Ge, G. (2009). Genre analysis: Structural and linguistic evolution of the English-medium medical research article (1985-2004). *English for Specific Purposes*, 28, 93-104.

- Lim, J. (2006). Method sections of management research articles: a pedagogically motivated qualitative study. *English for Specific Purposes*, 25, 282-309.
- Martin, J. (1992). English text: System and structure. Amsterdam: Benjamins.
- McAlister, F.; Clark, H.; van Walraven, C.; Strauss, S.; Lawson, F.; Moher, D.; and Murlow, C. (1999). The medical review article revisited: has the science improved? *Annals of Internal Medicine*, *131* (12), 947-951.
- Morales, O., Cassany, D., González, C. and Tona, J. (2007). Análisis discursivo de artículos de revisión odontológicos publicados en revistas hispanas entre 1989 y 2005: estudio exploratorio. *Revista Estudios de Lingüística Aplicada*, 25(45), 7-32.
- Morales, O. (2010). Los géneros escritos de la Odontología Hispanoamericana.

 Estructura retórica y estrategias de atenuación en artículos de investigación,
 casos clínicos y artículos de revisión. Tesis Doctoral UPF/2010. Available on
 line at URL:
 http://www.tdx.cat/bitstream/handle/10803/7577/tom.pdf?sequence=1
- Murlow, C. (1987). The medical review article: state of the science. *Annals of Internal Medicine*, 106 (3), 485-488.
- Murlow, C. (1994). El artículo de revisión en la literatura médica actual. In Organización Panamericana de la Salud (Ed.), *Publicación científica. Aspectos metodológicos, éticos y prácticos en ciencias de la salud* (pp. 167-174). Washington, D.C.: Organización Panamericana de la Salud.
- Murlow, C. (1995). Rationale for systematic reviews. In Chalmers, I, and Altman, D. (Eds.), *Systematic Reviews* (pp. 1-9). London: BMJ Publishing Group.
- Mungra, P. (2006). Macrostructure and rhetorical moves in secondary research articles: The meta-analysis and the systematic analysis. In Gotti, M. and Salager-Meyer, F. (Eds.), *Advances and medical discourse analysis: Oral and written contexts* (pp. 331-356). Berg, Alemania: Peter Lang AG.
- Myers, G. (1991). Stories and styles in two molecular biology review articles. In Bazerman, C. and Paradis, J. (Eds.). *Textual dynamics of the professions.*Historical and contemporary studies of writing in professional communities (pp.45-75). Wisconsin: The University of Wisconsin Press.
- Noguchi, J. (2006). The science review article. An opportune genre in the construction of science. Berlin: Peter Lang.

- Nwogu, K. (1997). The medical research paper: structure and functions. *English for Specific Purposes*, 16(2), 119-138.
- Ozturk, I. (2007). The textual organization of research article introductions in applied linguistic: Variability within a single discipline. *English for Specific Purposes*, 26, 25-38.
- Parodi, G. (2010). Rhetorical organization of textbooks. A "colony-in-loops?" In Parodi, G. (Ed.), *Academic and professional discourse genres in Spanish* (pp.143-169). Amsterdam and Philadelphia: John Benjamins.
- Peacock, M. (2002). Communicative moves in the discussion section of research articles. *System*, *30*, 479-497.
- Pérez-Llantada, C. (2003). Social pragmatics in technical writing: A corpus-based analysis of thematic articles. *Ibérica*, 5, 19-34.
- Petticrew, M. (2001). Systematic reviews from astronomy to zoology: Myths and misconceptions. *British Medical Journal*, 322, 98-101.
- Piqué, J. and Posteguillo, S. (2006). Medical discourse and academic genres. In Brown,K. (Ed.), Encyclopaedia of Language and Linguistics (Vol. 7) (pp. 649-656).Amsterdam: Elsevier.
- Posteguillo, S. (1998). The schematic structure of computer science research articles. English for Specific Purposes, 18(2), 139-160.
- Ruiying, Y. and Allison, D. (2004). Research articles in applied linguistics: Structures from a functional perspective. *English for Specific Purposes*, 23(3), 264-279.
- Samraj, B. (2002). Introductions in research articles: variations across disciplines. English for Specific Purposes, 21, 1-17.
- Sternberg, R. (2003). *The psychologist's companion. A guide to scientific writing for students and researchers*. Cambridge: Cambridge University Press.
- Swales, J. (1981). Aspects of article introductions. *Aston ESP Reports* No. 1. The University of Aston in Birmingham.
- Swales, J. (1990). *Genre analysis. English in academic and research settings*. Cambridge: Cambridge University Press.
- Swales, J. (2004). *Research genres. Explorations and applications*. Cambridge: Cambridge University Press.
- Swales, J. (2009). Worlds of genre-metaphors of genre. In Bazerman, C., Bonini, A. and Figuereido, D. (Eds.), *Genre in a changing world* (pp. 3-16). Colorado and Indiana: The WAC Clearing House and Parlor Press.

- Thompson, S. (1994). Frameworks and contexts: A genre-based approach to analyzing lecture introductions. *English for Specific Purposes*, *13*, 171–186
- Watkins, M. and Pacheco, M. (2000). Interobserver agreement in behavioral research: Importance and calculation. *Journal of Behavioral Education*, 16(4), 205-212.
- Yang, R. and Allison, D. (2003). Research articles in applied linguistics: Moving from results to conclusions. *English for Specific Purposes*, 22, 365-385.

APPENDICES

APPENDIX A

Review Articles Analyzed

RA 1: Ezzati, M. and Riboli, E. (2013). Behavioral and Dietary Risk Factors for Noncommunicable Diseases. *The New England Journal of Medicine*. 369, 10, 954-964. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1203528

RA 2: Nabel, G. (2013). Designing Tomorrow's Vaccines. *The New England Journal of Medicine*. 368, 6, 551-560. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1204186

RA 3: Bhutta, Z. and Black, R. (2013). Global Maternal, Newborn, and Child Health — So Near and Yet So Far. *The New England Journal of Medicine*. 369, 23, 2226-2235. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1111853

RA 4: Frenk, J. and Moon, S. (2013). Governance Challenges in Global Health. *The New England Journal of Medicine*. 368, 10, 936-942. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109339

RA 5: Leaning, J. and Guha-Sapir, D. (2013). Natural Disasters, Armed Conflict, and Public Health. *The New England Journal of Medicine*. 369, 19, 1836-1842. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109877

RA 6: Hunter, D. and Srinath Reddy, K. (2013). Noncommunicable Diseases. *The New England Journal of Medicine*. 369, 14, 1336-1343. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109345

RA 7: Norton, R. and Kobusingye, O. (2013). Injuries. *The New England Journal of Medicine*. 368, 18, 1723-1730. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109343

RA 8: Becker, A. and Kleinman, A. (2013). Mental Health and the Global Agenda. *The New England Journal of Medicine*. 369, 1, 66-73. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1110827

RA 9: Murray, C and López, A. (2013). Measuring the Global Burden of Disease. *The New England Journal of Medicine*. 369, 5, 448-457. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1201534

RA 10: Hopkins, D. (2013). Disease Eradication. *The New England Journal of Medicine*. 368, 1, 54-63. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1200391

RA 11: Mc Michael, A. (2013). Globalization, Climate Change and Human Health. *The New England Journal of Medicine*. 368, 14, 1335-1343. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109341

RA 12: Piott, P. and Quinn, T. (2013). Response to the AIDS Pandemic — A Global Health Model. *The New England Journal of Medicine*. 368, 23, 2210-2218. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1201533

RA 13: Relman, D. (2011).Microbial Genomics and Infectious Diseases. *The New England Journal of Medicine*. 365, 4, 347-357. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1003071

RA 14: Hudson, K. (2011). Genomics, Health Care, and Society. *The New England Journal of Medicine*. 365, 11, 1033-1041. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1010517

RA 15: Cho, J. and Gregersen, P. (2011). Genomics and the Multifactorial Nature of Human Autoimmune Disease. *The New England Journal of Medicine*. 365, 17, 1612-1623. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1100030

RA 16: O'Donnell, C. and Nabel, E. (2011). Genomics of Cardiovascular Disease. *The New England Journal of Medicine*. 365, 22, 2098-2109. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1105239

- RA 17: Feero, W. Guttmacher, A. and Collins, F. (2010). Genomic Medicine An Updated Primer. *The New England Journal of Medicine*. 362, 21, 2001-2011. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0907175
- RA 18: Manolio, T. (2010). Genomewide Association Studies and Assessment of the Risk of Disease. *The New England Journal of Medicine*. 363, 2, 166-176. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0905980
- RA 19: Dietz, H. (2010). New Therapeutic Approaches to Mendelian Disorders. *The New England Journal of Medicine*. 363, 9, 852-863. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0907180
- RA 20: Mc Carthy, M. (2010). Genomics, Type 2 Diabetes, and Obesity. *The New England Journal of Medicine*. 363, 24, 2339-2350. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0906948
- RA 21: McDermott, U., Downing, J., and Stratton, M. (2011). Genomics and the Continuum of Cancer Care. *The New England Journal of Medicine*. 364, 4, 340-350. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0907178
- RA 22: Bodurtha, J. and Strauss, J. (2012). Genomics and Perinatal Care. *The New England Journal of Medicine*. 366, 1, 64-73. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1105043
- RA 23: Mefford, H., Batshaw, M. and Hoffman, F. (2012). Genomics, Intellectual Disability, and Autism. *The New England Journal of Medicine*. 366, 8, 733-743. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1114194
- RA 24: Wang, L., Ph.D, McLeod, H., and Weinshilboum, R. (2011). Genomics and Drug Response. *The New England Journal of Medicine*. 364, 12, 1145-1153. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1010600

RA 25: Sheffield, V. and Stone, E. (2011). Genomics and the Eye. *The New England Journal of Medicine*. 364, 20, 1932-1942. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1012354

RA 26: Armitage, J. (2010). Early-Stage Hodgkin's Lymphoma. *The New England Journal of Medicine*. 363, 7, 653-662. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1003733

RA 27: Nathanson, E., Nunn, P., Uplekar, M., Floyd, K., Jaramillo, E., Lönnroth, K., D., and Raviglione, M. (2010). MDR Tuberculosis — Critical Steps for Prevention and Control. *The New England Journal of Medicine*. 363, 11, 1050-1058. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0908076

RA 28: Lambert, L. and Fauci, A. (2010). Influenza Vaccines for the Future. *The New England Journal of Medicine*. 363, 21, 2036-2044. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1002842

RA 29: Szpilman, D., Bierens, J., Handley, A., and Orlowski, J. (2012). Drowning. *The New England Journal of Medicine*. 366, 22, 2102-2110. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1013317

RA 30: Kauffman, C., Pappas, P., and Patterson, T. (2013). Fungal Infections Associated with Contaminated Methylprednisolone Injections. *The New England Journal of Medicine*. 368, 26, 2495-2500. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1212617

APPENDIX B

Rhetorical Analysis of the Corpus

R.A. 1 GLOBAL HEALTH	97 SENTENCES	
INTRODUCTION		
Topic presentation	1,2,3	
Topic justification	4,5,6,8	
Objectives	7	
Article development structure		
DEVELOPMENT		
Info presentation(1) SMOKING	9	
Info elaboration/expansion	10,11,12	
Info presentation (2)	13	
Info elaboration/expansion	14,15,16,17	
Info presentation (3)	18	
Info elaboration/expansion	19,20,21,22	
Info presentation (4)	23	
Info elaboration/expansion	24,25	
Info presentation (5)	26	
Info elaboration/expansion	27,28	
Info presentation (6) ALCOHOL CONSUMPTION	29	
Info elaboration/expansion	30,31	
Info presentation (7)	32	
Info elaboration/expansion	33,34	
Info presentation (8)	35	
Info elaboration/expansion	36,37,38,39,40,41,42,43,44,45	
Info presentation (9) EXCESS WEIGHT	46	
Info elaboration/expansion	47,48,49,50,51,52,53,54,55,56	
Info presentation (10)	57	
Info elaboration/expansion	58,59	
Info presentation (11)	60	
Info elaboration/expansion	61,62,63,64,65,66,67,68,69,70,71	
Info presentation (12) PHYSICAL ACTIVITY	72	
Info elaboration/expansion	73,74,75,76	
Summary	77,78,79,80	
CONCLUSION		
Summary of main findings	81,82,83,84,85,86,87,88,89,90,91,92,93	
Recommendations	94,95,96,97	

R.A. 2 GLOBAL HEALTH	131 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9
Topic justification	10,11,12,13,14,15,16,17,18,19,20,21,22,23,24
Objectives	
Article development structure	
DEVELOPMENT	
Info presentation (1) STRUCTURAL BIOLOGY & PATHOGEN ENTRY	25,26
Info elaboration/expansion	27,28,29,30,31
Info presentation (2) RATIONAL VACCINE DESIGN	32,33
Info elaboration/expansion	34,35,36,37,38,39,40,41,42,43,44,45
Info presentation (3) RATIONAL VACCINE DESIGN: CHALLENGES	46
Info elaboration/expansion	47,48,49
Info presentation(4) INTERACTIONS BETWEEN HOST & PATHOGENS	50,51
Info elaboration/expansion	52,53,54,55,56,57
Info presentation (5) IMMUNE BIOMAKERS FOR PROTECTION	58,59
Info elaboration/expansion	60,61,62
Info presentation (6) DENTRIC CELLS	63,64
Info elaboration/expansion	65,66,67,68
Info presentation (7) VACCINE DELIVERY	69,70
Info elaboration/expansion	71,72,73,74,75,76
Info presentation (8) VACCINE TRIALS	77
Info elaboration/expansion	78,79,80,81,82,83,84,85
Info presentation (9) STRATEGIES TO ADDRESS SPORADIC INFECTIONS	86,87
Info elaboration/expansion	88,89,90
Info presentation (10) INABILITY TO IDENTIFY PROMISING VACCINE CANDIDA	91
Info elaboration/expansion	92,83,84,95,96,97,98
Info presentation (11) EFFECTIVE VACCINE DISTRIBUTION	99
Info elaboration/expansion	100,101,102,103,104
Author's opinion/ point of view	105
Info presentation (12) ADVANCES IN VACCINE EFFICACY	106,107
Info elaboration/expansion	108,109
Info presentation (13) BEYOND IMMUNOLOGY MIMICRY	110,111

Info elaboration/expansion	112,113,114,115	
Info presentation (14) MANAGEMENT OF VACCINES	116	
Info elaboration/expansion	117,118,119	
Info presentation (15) NEXT-GENERATION VACCINES	120,121	
Info elaboration/expansion	122,123,124,125,126	
CONCLUSION		
Summary of main findings	127,128,129,130,131	

R.A. 3 GLOBAL HEALTH	100 SENTENCES
INTRODUCTION	
Topic presentation	1,1a
Topic justification	2,3,4,5
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) MORTALITY TRENDS	6,7
Info elaboration/expansion	8,9,10,11
Author's evaluation / point of view	12,13
Info presentation (2) CAUSES OF DEATH	14
Info elaboration/expansion	15,16,17,18,19
Info presentation (3) TARGETING INTERVENTIONS	20
Info elaboration/expansion	21,22
Author's evaluation / point of view	23
Info presentation (4) STILLBIRTH	24
Info elaboration/expansion	25,26,27
Author's evaluation / point of view	28
Info presentation LIMITED INFORMATION ON THE CAUSES OF MATERNAL DEA	29
Info elaboration/expansion	30,31,32
Info presentation (6) SOCIAL DETERMINANTS	33
Info elaboration/expansion	34,35,36,37,38
Author's evaluation / point of view	39
Info presentation (7) LINK POVERTY AND UNDERNUTRITION	40
Info elaboration/expansion	41,42,43,44
Info presentation (8) CHILD MORTALITY AND ARMED CONFLICT	45
Info elaboration/expansion	46,47,48,49
Author's evaluation / point of view	50
Info presentation (9) EFFECTS OF POVERTY ON WOMEN	51
Info elaboration/expansion	52,53
Author's evaluation / point of view	54
Info presentation (10) INTERVENTIONS TO REDUCE CHILD MORTALITY	55
Info elaboration/expansion	56,57,58

Info presentation (11) GAPS IN IMPLEMENTATION	59
Info elaboration/expansion	60,61,62
Info presentation (12) SHORTAGE OF HEALTH WORKERS	63,64,65
Info elaboration/expansion	66,67,68,69,70,71,72,73,74
Author's evaluation / point of view	75
Info presentation (13) INNOVATIONS TO IMPROVE ACCESS TO CARE	76,77
Info elaboration/expansion	78,79,80,81,82,83,84,85,86
Author's evaluation / point of view	87
CONCLUSION	
Summary of main findings	88,89,90,91,92
Recommendations	93,94,95,96,97,98,99

R.A. 4 GLOBAL HEALTH	105 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1) DEFINITION OF GLOBLA HEALTH	7
Info elaboration / expansion	8.9.10
Info presentation (2) DIMENSIONS OF HEALTH IN POPULATIONS	11,12
Info elaboration / expansion	13,14,15,16
Info presentation (3) GOVERNANCE & GLOBAL GOVERNANCE	17,18
Info elaboration / expansion	19,20
Info presentation (4) GLOBAL GOVERNANCE & WHO	21
Info elaboration / expansion	22,23,24,25,26,27,28,29
Info presentation (5) DEFINITION OF GLOBAL HEALTH SYSTEM	30
Info elaboration / expansion	31,32,33,34,35,36
Info presentation (6) INDIRECT INFLUENCES ON HEALTH	37
Info elaboration / expansion	38,39,40,41
Info presentation (7) CHALLENGES OF ACHIEVING GOOD GOVERNANCE	42
Info elaboration / expansion	43,44,45
Info presentation (8) THE SOVEREIGNTY CHALLENGE	46
Info elaboration / expansion	47,48,49,50
Info presentation (9) THE SECTORAL CHALLENGE	51
Info elaboration / expansion	52
Info presentation (10) THE ACCOUNTABILITY CHALLENGE	53,54,55,56
Info elaboration / expansion	57,58,59,60,61,62
Info presentation (11) FUNCTIONS OF GLOBAL HEALTH SYSTEM: 1ST FUNCTION	N 63,64,65
Info elaboration / expansion	66,67,68
Info presentation (12) 2ND FUNCTION	69
Info elaboration / expansion	70,71,72,73
Info presentation (13) 3RD FUNCTION	74
Info elaboration / expansion	75,76,77,78,79,80,81

Info presentation (14) 4TH FUNCTION	82
Info elaboration / expansion	83,84,85
Author's opinion / point of view	86
CONCLUSION	
Implications	87,88,89,90
Recommendations	91,92,93
Implications	94
Summary of main findings	95,96,97,98,99,100
Recommendations	101,102,103
Implications	104,105

R.A. 5 GLOBAL HEALTH	90 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,11a,12,13,14,15,16,17,18
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) ADVANCES IN PUBLIC HEALTH RESPONSE	19
Info elaboration / expansion	20,21,22
Info presentation (2) ROLE OF PUBLIC HEALTH IN INTERNATIONAL RELIEF	23
Info elaboration / expansion	24,25
Info presentation (3) HEALTH CONSEQUENCES OF ARMED CONFLICTS	26,27
Info elaboration / expansion	28
Info presentation (4) RELIEF NEEDS IN NATURAL RESOURCES	29
Info elaboration / expansion	30,31,32
Info presentation (5) ACUTE DISASTERS	33
Info elaboration / expansion	34,35,36
Info presentation (6) ROLE OF EPIDEMIOLOGIC METHODS IN NATURAL DISASTERS	37
Info elaboration / expansion	38,39
Info presentation (7) EPIDEMIOLOGIC METHODS IN THE 1980's	40
Info elaboration / expansion	41,42,43
Info presentation (8) THRESHOLDS OF KEY INDICATORS TO CLASSIFY CRITICAL SITUAL	444
Info elaboration / expansion	45,46
Info presentation (9) CHALLENGES IN COLLECTING RELIABLE INFORMATION	47
Info elaboration / expansion	48,49,50,51
Info presentation (10) WEAKNESSES REVEALED BY THE HAITI EARTHQUAKE RESPONS	52
Info elaboration / expansion	53,54,55
Info presentation (11) EVOLVING NORMS & PRACTICE GUIDELINES FOR PH RESPONSE	56
Info elaboration / expansion	57,58,59
Info presentation (12) MEDICAL RESPONSES IN DISASTER OR CONFLICT	60
Info elaboration / expansion	61,62
Info presentation (13) COLLECTION OF DATA ON SENSITIVE TOPICS	63
Info elaboration / expansion	64

Info presentation (14) NORMS OF EQUITY	65
Info elaboration / expansion	66,67,68,69
Info presentation (15) CHALLENGES: COORDINATION	70,71
Info elaboration / expansion	72,73,74,75,76
Info presentation (16) CHALLENGES: ETHICAL DILEMMAS	77
Info elaboration / expansion	78,79,80,81
CONCLUSION	
Summary of main findings	82,83,84
Recommendations	85
Implications	86,87,88,89

R.A. 6 GLOBAL HEALTH	106 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1) NONCOMMUNICABLE DISEASES	7,8,9
Info elaboration / expansion	10,11,12,13
Info presentation (2) PROPORTIONAL MORTALITY FROM NONCOMMUNICABLE DISEASES	14
Info elaboration / expansion	15,16,17
Info presentation (3) DALYs	18
Info elaboration / expansion	19,20,21,22,23,24
Info presentation (4) ECONOMIC EFFECTS	25
Info elaboration / expansion	26,27
Info presentation (5) RISK FACTORS	28
Info elaboration / expansion	29,30,31,32,33
Info presentation (6) "UNFINISHED AGENDA" AND NONCOMMUNICABLE DISEASES	34
Info elaboration / expansion	35,36
Info presentation (7) RATE OF DEATH DUE TO NONCOMMUNICABLE DISEASES	37
Info elaboration / expansion	38,39,40,41,42,43,44,45,46
Info presentation (8) PROGRAM FOR THE PREVENTION AND CONTROL OF NONCOMMUNICA	147
Info elaboration / expansion	48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63
Info presentation (9) COST-EFFECTIVE INTERVENTIONS	64,65
Info elaboration / expansion	66,67,68,69,70
Info presentation (10) CHALLENGES TO HEALTH SYSTEMS	71
Info elaboration / expansion	72,73,74
Info presentation (11) LOW AND MIDDLE-INCOME COUNTRIES	75
Info elaboration / expansion	76,77,78,79
Info presentation (12) ACCESS TO DRUGS	80
Info elaboration / expansion	81,82,83,84,85
Info presentation (13) MEDICAL TOURISM	86
Info elaboration / expansion	87

Info presentation (14) NEED FOR TRAINING HEALTH CARE WORKERS	88
Info elaboration / expansion	89,90
Info presentation (15) CELL PHONE-BASED TOOLS	91
Info elaboration / expansion	92,93
Info presentation (16) COUNTRY-SPECIFICATIONS AND GLOBAL COOPERATION	94
Info elaboration / expansion	95,96,97
Info presentation (17) NONCOMMUNICABLE DISEASES AT THE GLOBAL LEVEL	98
Info elaboration / expansion	99,100,101
CONCLUSION	
Predictions	102,103,104,105
Implications	106

R.A. 7 GLOBAL HEALTH	90 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5,6
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) INJURY-RELATED DEATHS	7
Info elaboration / expansion	8,9,10,11,12,13
Info presentation (2) UNINTENTIONAL INJURIES	14
Info elaboration / expansion	15,16
Info presentation (3) ROAD-TRAFFIC INCIDENTS	17
Info elaboration / expansion	18,19,20
Info presentation (4) FALLS	21
Info elaboration / expansion	22,23,24
Info presentation (5) INTENTIONAL INJURIES - SELF-HARM	25
Info elaboration / expansion	26,27,28,29
Info presentation (6) OTHER HEALTH OUTCOMES	30,31
Info elaboration / expansion	32
Info presentation (7) GLOBAL BURDEN OF INJURIES IN THE FUTURE	33
Info elaboration / expansion	34,35,36,37,38
Author's opinion / point of view	39
Info presentation (8) PREVENTION OF INJURIES	40
Info elaboration / expansion	41,42
Info presentation (9) PREVENTION OF UNINTENTIONAL INJURIES: INJURIES FROM ROAD-TRAF	F 43,44,45
Info elaboration / expansion	46,47
Info presentation (10) PREVENTION OF OTHER CAUSE-SPECIFIC UNINTENTIONAL INJURIES	48
Info elaboration / expansion	49
Info presentation (11) THE HEALTH SECTOR AND THE PREVENTION OF INJURIES TO CHILDREN	V 50
Info elaboration / expansion	51,52
Summary	53,54,55
Info presentation (12) PREVENTION OF INTENTIONAL INJURIES: SELF-HARM	56
Info elaboration / expansion	57,58

Info presentation (13) PREVENTION OF INTERPERSONAL VIOLENCE	59
Info elaboration / expansion	60,61,62
Info presentation (14) IMPROVING THE MANAGEMENT OF INJURIES	63,64
Info elaboration / expansion	65,66,67,68
Info presentation (15) PREHOSPITAL MANAGEMENT	69
Info elaboration / expansion	70,71,72,73
Info presentation (16) HOSPITAL MANAGEMENT	74
Info elaboration / expansion	75,76,77,78,79
Info presentation (17) REHABILITATION	80,81
Info elaboration / expansion	82,83,84
CONCLUSION	
Recommendations	85
Summary of main findings	86
Predictions	87
Implications	88,89,90

R.A. 8 GLOBAL HEALTH	92 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6,7,8
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GLOBAL DIMENSIONS OF MENTAL ILLNESS	9
Info elaboration / expansion	10,11,12,13,14
Info presentation (2) GLOBAL BURDEN CAUSED BY MENTAL DISORDERS NOWADAYS	15,16
Info elaboration / expansion	17,18,19,20,21
Info presentation (3) GAPS IN TREATMENT	22
Info elaboration / expansion	23,24,25
Info presentation (4) BUILDING THE MENTAL HEALTH WORKFORCE	26,27
Info elaboration / expansion	28,29,30,31,32,33,34,35,36
Info presentation (5) DEVELOPING NEW MODELS OF TREATMENT	37,38
Info elaboration / expansion	39,40,41,42,43,44,45,46
Info presentation (6) MILESTONES THAT MARK NEW ADVANCES IN THE INTEGRATION OF MEI	N47
Info elaboration / expansion	48,49,50
Info presentation (7) INSUFFICIENT AVAILABLE DATA	51
Info elaboration / expansion	52,53,54,55
Info presentation (8) GAPS IN SCIENTIFIC KNOWLEDGE	56
Info elaboration / expansion	57,58,59,60
Info presentation (9) NEED FOR RESEARCH TO REFINE DIAGNOSTIC TOOLS	61,62
Info elaboration / expansion	63,64,65,66
Info presentation (10) BARRIERS TO EQUITABLE CARE	67,68
Info elaboration / expansion	69,70,71,72
Info presentation (11) UNIVERSAL STIGMA ATTACHED TO MENTAL ILLNESSES	73
Info elaboration / expansion	74,75,76,77,78,79
Author's opinion / point of view	80
Info presentation (12) EXCLUSION OF THE TOPIC OF MENTAL HEALTH OF THE GLOBAL HEALT	181
Info elaboration / expansion	82,83
Author's opinion / point of view	84
CONCLUSION	
Summary of main findings	85,86,87,88,89,90,91,92

R.A. 9 GLOBAL HEALTH	119 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18
Topic justification	19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,39,40
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) KEY FINDINGS FROM GBD 2010	41
Info elaboration / expansion	42,43,44,45,46,47,48,49,50,51,52,53,54,55,56,57,58,59
Info presentation (2) GLOBAL DRIVERS OF RAPID TRANSITIONS IN GLOBAL HEALTH: DEMOG	R 60,61
Info elaboration / expansion	62,63,64,65
Info presentation (3) GLOBAL DRIVERS: CHANGES IN CAUSES OF DEATH	66
Info elaboration / expansion	67,68,69,70,71,72,73,74,75,76
Info presentation (4) GLOBAL DRIVERS: CHANGES IN THE CAUSES OF DISABILITIES	77
Info elaboration / expansion	78,79,80,81,82,83,84,85,86
Info presentation (5) REGIONAL AND NATIONAL DIVERGENCES FROM THE GENERAL PATTER	N 87,88
Info elaboration / expansion	89,90,91,92,93,94,95,96,97
Info presentation (6) GBD 2010 RESULTS FOR BENCHMARKING	98
Info elaboration / expansion	99-100-101-102-103-104-105-106-107-108-109-110
CONCLUSION	
Summary of main findings	111
Recommendations	112
Predictions	113,114,115,116,117

R.A. 10 GLOBAL HEALTH	101 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9
Topic justification	14,15
Objetives	
Article development structure	10,11,12,13
DEVELOPMENT	
Info presentation (1) DRACUNCULIASIS	16,17,18,19
Info elaboration / expansion	20,21,22,23,24,25,26,27,28,29
Info presentation (2) POLIOMYELITIS	30,31,32,33,34,35,36
Info elaboration / expansion	37,38,39,40,41,42,43,44,45,46,47,48,49,50
Info presentation (3) LYMPHATIC FILIARIS	51,52,53,54,55,56,57
Info elaboration / expansion	58,59,60,61,62,63,64,65,66
Info presentation (4) ONCHOCERCIASIS IN AMERICA	67,68,69,70
Info elaboration / expansion	71,72,73
Info presentation (5) MALARIA AND LYMPHATIC FILIARIS IN HISPANIOLA	74,75
Info elaboration / expansion	76,77,78,79,80
CONCLUSION	
Summary of main findings	81,82,83,84,85,86,87,88,89,90,91,92,93,94,95,96
Predictions	97,98
Summary of main findings	99
Predictions	100
Recommendations	101

R.A. 11 GLOBAL HEALTH	114 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5,6,7,8,9,10,11,12,13,14
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GLOBAL INFLUENCES ON POPULATION HEALTH	15,16
Info elaboration / expansion	17,18
Info presentation (2) POPULATION GROWTH	19
Info elaboration / expansion	20,21,22,23,24,25
Info presentation (3) SOCIAL CHANGES & ECONOMIC ACTIVITY	26,27
Info elaboration / expansion	28,29,30,31
Author's opinion / point of view	32,33
Info presentation (4) ENVIRONMENTAL & ECOLOGIC CHANGES	34
Info elaboration / expansion	35,36,37,38
Info presentation (5) EXAMPLES OF ENVIRONMENTAL & ECOLOGIC CHANGES	39
Info elaboration / expansion	40,41,42,43,44,45,46,47,48,49,50,51,52,53
Info presentation (6) GLOBAL CLIMATE CHANGE	54,55
Info elaboration / expansion	56,57,58,59,60,61,62,63,64,65,66
Info presentation (7) EFFECTS OF CLIMATE CHANGE ON HUMAN HEALTH	67
Info elaboration / expansion	68,69,70,71,72,73,74,75,76
Info presentation (8) BENEFICIAL HEALTH EFFECTS	77
Info elaboration / expansion	78
Info presentation (9) CLIMATIC CHANGES & THEIR EFFECTS ON POPULATIONS	79
Info elaboration / expansion	80,81,82
Info presentation (10) FUTURE EFFECTS	83
Info elaboration / expansion	84,85,86,87
Summary	88,89,90
Info presentation (11) ADAPTATION STRATEGIES	91,92,93
Info elaboration / expansion	94,95,96,97,98
Info presentation (12) HEALTH BENEFITS OF CLIMATE-CHANGE MITIGATION	99,100
Info elaboration / expansion	101,102,103,104

Info presentation (13) CHALLENGES FOR THE HEALTH SECTOR	105
Info elaboration / expansion	106,107
CONCLUSION	
Summary of main findings	108,109,110,111,112
Implications	113,114

R.A. 12 GLOBAL HEALTH	107 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8
Topic justification	9,10,11,12,13,14,15
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) INTERNATIONAL RESPONSE TO AIDS	16
Info elaboration / expansion	17,18,19
Info presentation (2) A GLOBAL HEALTH MODEL	20
Info elaboration / expansion	21,22,23,24,25,26,27,28
Info presentation (3) GLOBAL FIGURES OF AIDS	29,30
Info elaboration / expansion	31,32,33,34,35,36,37,38,39,40,41
Info presentation (4) PROGRESS IN THE TREATMENT OF HIV INFECTION	42,43
Info elaboration / expansion	44,45,46
Info presentation (5) PEOPLE THAT SHOULD TAKE ANTIRETROVIRAL THERAPY	47
Info elaboration / expansion	48,49,50,51,52,53
Info presentation (6) REMAINING CHALLENGES	54
Info elaboration / expansion	55,56,57,58,59
Author's opinion / point of view	60,61
Info presentation (7) PREVENTION STRATEGIES: USE OF CONDOM	62,63
Info elaboration / expansion	64,65,66,67,68
Info presentation (8) PREVENTION STRATEGIES: ACCESS TO STERILE INJECTIONS	69
Info elaboration / expansion	70,71
Info presentation (9) INTEGRATION OF STRUCTURAL APPROACHES	72
Info elaboration / expansion	73,74
Info presentation (10) BIOMEDICAL ADVANCES IN PREVENTION: MALE CIRCUMCISION	75
Info elaboration / expansion	76,77
Info presentation (11) BIOMEDICAL ADVANCES IN PREVENTION: PREEXPOSURE PROPHYLAXIS	78,79
Info elaboration / expansion	80,81,82,83,84
Info presentation (12) BIOMEDICAL ADVANCES IN PREVENTION: TREATMENT AS PREVENTION	85
Info elaboration / expansion	86,87
Info presentation (13) BIOMEDICAL ADVANCES IN PREVENTION: COMBINATION PREVENTION	88

Info elaboration / expansion	89,90,91,92,93,94
Info presentation (14) CHALLENGES	95,96
Info elaboration / expansion	97,98,99,100,101,102
CONCLUSION	
Summary of main findings	103,104
Recommendations	105
Implications	106,107

R.A. 13 GENOMIC MEDICINE	140 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GENOMIC DIVERSITY	13,14,15
Info elaboration / expansion	16,17,18
Info presentation (2) GENOMES OF MICROBES	19
Info elaboration / expansion	20,21
Info presentation (3) MICROBIAL DIVERSIFICATION AND ADAPTATION	22
Info elaboration / expansion	23,24,25,26
Info presentation (4) GENOMIC ISLANDS	27
Info elaboration / expansion	28,29
Info presentation (5) CRISPR (EXAMPLE OF SHORT-TERM GENOME EVOLUTION)	30
Info elaboration / expansion	31,32,33
Info presentation (6) POPULATION STRUCTURE	34
Info elaboration / expansion	35,36
Info presentation (7) EXAMPLES OF GENOME EVOLUTION AND TRANSMISSION	37
Info elaboration / expansion	38,39,40,41,42,43
Info presentation (8) POWER OF FULL-GENOME SEQUENCING TO DISCRIMINATE	44
Info elaboration / expansion	45,46,47,48
Info presentation (9) CHALLENGES	49
Info elaboration / expansion	50,51,52,53
Author's opinion / point of view	54,55
Info presentation (10) PATHOGENS	56
Info elaboration / expansion	57,58
Info presentation (11) 1ST THEME RELATED TO VIRULENCE	59
Info elaboration / expansion	60,61,62,63
Info presentation (12) 2ND THEME RELATED TO VIRULENCE	64
Info elaboration / expansion	65,66,67,68,69
Info presentation (13) 3RD THEME RELATED TO VIRULENCE	70

Info elaboration / expansion	71,72,73
Info presentation (14) 4TH THEME RELATED TO VIRULENCE	74
Info elaboration / expansion	74,75,77
Info presentation (15) THE HUMAN MICROBIOME AND METAGENOMICS	78,79,80
Info elaboration / expansion	81,82,83,84,85,86
Author's opinion / point of view	87
Info presentation (16) IMPORTANCE OF GENOMIC APPROACHES	88
Info elaboration / expansion	89,90,91,92,93,94,95,96,97,98,99,100,101
Info presentation (17) GENOME SEQUENCES	102,103
Info elaboration / expansion	104,105,106
Info presentation (18) MANAGEMENT OF HIV INFECTION	107
Info elaboration / expansion	108-109-110-11-112-113-114-115
Info presentation (19) MANAGEMENT OF SCHISTOSOMIASIS	116
Info elaboration / expansion	117,118,119,120,121
Summary	122,123,124,125
Info presentation (20) VACCINES	126,127
Info elaboration / expansion	128-129-130-131-132
Author's opinion / point of view	133
CONCLUSION	
Summary of main findings	134
Predictions	135,135a
Summary of main findings	136
Predictions	137,138
Recommedations	139

R.A. 14 GENOMIC MEDICINE	158 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1) GENOME AND GENETIC RESEARCH: ETHICAL ISSUES	7
Info elaboration / expansion	8,9,10
Info presentation (2) CONSENT	11,12
Info elaboration / expansion	13,14,15,16,17
Info presentation (3) CONTROVERSIAL ISSUES	18
Info elaboration / expansion	19,20,21,22,23,24,25
Info presentation (4) REGULATIONS THAT GOVERN RESEARCH ON HUMAN SUBJECTS	26
Info elaboration / expansion	27,28
Info presentation (5) DE-IDENTIFIED DATA AND CONSENT	29
Info elaboration / expansion	30,31,32,33,34
Info presentation (6) CERTIFICATES TO PROTECT RESEARCH PARTICIPANTS	35
Info elaboration / expansion	36,37,38,39,40,41,42,43,44,45,46,47
Info presentation (7) REFORMS TO THE EXISTING REGULATIONS	48
Info elaboration / expansion	49
Info presentation (8) RETURN OF RESEARCH RESULTS	50
Info elaboration / expansion	51,52,53,54,55,56,57,58
Info presentation (9) REGULATION OF GENETIC TESTS	59,60
Info elaboration / expansion	61,62,62a,63,64,65,66,67
Info presentation (10) PHARMACOGENETICS	68
Info elaboration / expansion	69,70,71,72,73,74,75,75a,76
Author's opinion / point of view	77
Info presentation (11) DUAL CHALLENGE	78
Info elaboration / expansion	79
Info presentation (12) EMR SYSTEMS	80
Info elaboration / expansion	81,82,83,84,85
Info presentation (13) RISKS	86
Info elaboration / expansion	87,88

Author's opinion / point of view	89
Info presentation (14) HIPAA'S PRIVACY RULE	90
Info elaboration / expansion	91,92,93,94,95,96,97,98
Info presentation(15) GINA	99,100
Info elaboration / expansion	101-102-103-104-105-106-107-108-109
Info presentation (16) ACA	110
Info elaboration / expansion	111,112
Info presentation(17) WHAT GINA STIPULATES	113
Info elaboration / expansion	114-115-116-117-118-119-120
Info presentation (18) LAW ENFORCEMENT	121
Info elaboration / expansion	122-123-124-125-126-127-128-129-130-131
Info presentation (19) GENE PATENTS	132
Info elaboration / expansion	133,134
Info presentation (20) EFFECTS OF GENE PATENTS	135
Info elaboration / expansion	136-137-138-139-140-141-142-143-144-145-146-147-148-149-150-15
CONCLUSION	
Summary of main findings	152,152a,153,154,155

R.A. 15 GENOMIC MEDICINE	121 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6,7
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GENOMEWIDE ASSOCIATION STUDIES	8,9
Info elaboration / expansion	10,11,12,13,14,15,16,17,18
Info presentation (2) AUTOINMUNITY	19,20
Info elaboration / expansion	21,22,23,24,25,26,27
Info presentation (3) EXEMPLE (MENDELIAN DISORDERS)	28
Info elaboration / expansion	29,30,31,32,33,34,35
Summary	36,37,38,39,40
Info presentation (4) INTRACELLULAR SIGNALING PATHWAYS	43,44
Info elaboration / expansion	45,46,47,48,49,50,51,52,53,54
Info presentation (5) VARIATIONS WITH EFFECTS ON INTRACELLULAR SIGNALING PA	TI 55
Info elaboration / expansion	56,57,58,59
Author's opinion / point of view	60
Info presentation (6) GENETIC VARIATIONS AND CYOKINE PATHWAYS	61,62
Info elaboration / expansion	63,64,65,66,67,68,69,70,71,72,73,74,75,76
Info presentation (7) INNATE IMMUNITY AND MICROBIAL RESPONSES	77,78
Info elaboration / expansion	79,80,81,82,83,84,85,86
Author's opinion / point of view	87
Info presentation (8) GENES-ENVIRONMENT AND AUTOIMMUNITY	88
Info elaboration / expansion	89,90,91,92,93
Author's presence	94,95
Info presentation (9) ENVIRONMENTAL FACTORS	96
Info elaboration / expansion	97,98,99,100,101
Author's opinion / point of view	102
CONCLUSION	
Summary of main findings	103,104,105,106
Implications	107,108
Summary of main findings	109,110,111,112,113

Implications	114,115,116,117
Summary of main findings	118,119
Predictions	120,121

R.A. 16 GENOMIC MEDICINE	122 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	sentence 5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1) MENDELIAN AND CANDIDATE -GENE STUDIES	7,8,9,10
Info elaboration / expansion	11,12,13,14
Info presentation (2) ROLE OF GENOMEWIDE ASSOCIATION STUDIES	15,16,17
Info elaboration / expansion	18,19,20,21,22,23,24,25
Author's opinion / point of view	26
Info presentation (3) CORONARY ARTERY DISEASE AND MYOCARDIAL INFARCT	27
Info elaboration / expansion	28,29,30,31,32,33,34,35,36,37,38
Info presentation (4) HEART FAILURE	39
Info elaboration / expansion	40,41
Info presentation (5) ARRHYTMIAS	42
Info elaboration / expansion	43
Info presentation (6) PERIPHERAL AND CEREBRAL VASCULAR DISEASES	44
Info elaboration / expansion	45
Info presentation (7) GENOMEWIDE ASSOCIATION STUDIES	46
Info elaboration / expansion	47,48,49,50,51,52,53,54,55,56,57,58,59,60
Info presentation (8) NEXT GENERATION OF GENOME APPROACHES	61
Info elaboration / expansion	62,63,64,65,66,67,68,69,70,71,72
Info presentation (9) CARDIOVASCULAR DISEASE PATHWAYS	73,74,75
Info elaboration / expansion	76,77,78,79,80,81,82,83,84,85,86,87,88,89,90,91,92,93,94,95
Summary	96,97,98,99,100,101,102,103,104,105,106,107,108,109,110,111,112,113,114
CONCLUSION	
Summary of main findings	115
Implications	116
Summary of main findings	117
Recommendations	118
Summary of main findings	119,120,121,122

R.A. 17 GENOMIC MEDICINE	131 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6
Topic justification	7,8,9,10,11
Objetives	12
Recommendations for the reader	13,14
Article development structure	
DEVELOPMENT	
Info presentation (1) GENE DEFINITION AND REGULATION	15,16,17
Info elaboration / expansion	18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36
Info presentation (2) GENOMIC VARIATION	37,38,39
Info elaboration / expansion	40,41,42,43,44,45,46
Info presentation (3) MUTATIONS	47
Info elaboration / expansion	48,49,50,51
Info presentation (4) EVENTS CONTRIBUTING TO GENOMIC VARIATION	52
Info elaboration / expansion	53,54,55,56,57
Info presentation (5) IMPORTANCE OF GENOMEWIDE ASSOCIATION STUDIES	58
Info elaboration / expansion	59,60,61
Author's opinion / point of view	62
Info presentation (6) SNP'S	63
Info elaboration / expansion	64,65
Author's opinion / point of view	66
Info presentation (7) CONTRIBUTIONS OF GENOMEWIDE ASSOCIATION STUDIES	67
Info elaboration / expansion	68
Info presentation (8) INSERTIONS AND DELETIONS	69
Info elaboration / expansion	70,71
Author's opinion / point of view	72
Info presentation (9) EPIGENETIC CHANGES	73
Info elaboration / expansion	74,75,76,77,78,79
Info presentation (10) MOLECULAR DIAGNOSIS LANDSCAPE	80
Info elaboration / expansion	81,82,83,84,85,86,87
Info presentation (11) GENE CHIPS	88
Info elaboration / expansion	89,90,91,92,93
Info presentation (12) CHANGES IN THE DNA SEQUENCING DEVICES	94

Info elaboration / expansion	95,96,97,98,99,100,101,102,103
Info presentation (13) CLINICAL AXIOMS	104
Info elaboration / expansion	105,106,107,108,109,110,111,
Author's opinion / point of view	112,113,114
CONCLUSION	
Summary of main findings	115-116-117-118-119-120-121-122-123-124
Recommendations	125
Implications	126
Recommendations	127
Summary of main findings	128
Predictions	129,130,131

R.A. 18 GENOMIC MEDICINE	105 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5,6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GENOMEWIDE ASSOCIATION STUDIES AND THE SNP	13,14,15
Info elaboration / expansion	16,17,18,19,20,21,22,23
Info presentation (2) FINDINGS OF GENOMEWIDE ASSOCIATION STUDIES	24
Info elaboration / expansion	25,26,27,28,29,30,31,32,33,34
Info presentation (3) SCHIZOPHRENIA	35,36
Info elaboration / expansion	37,38,39
Info presentation (4) SIZE OF ASSOCIATIONS BETWEEN SNPS AND TRAITS	40
Info elaboration / expansion	41,42,43,44,45
Info presentation (5) SNP'S REGIONS	46
Info elaboration / expansion	47,48
Info presentation (6) SURPRISING FINDINGS	49
Info elaboration / expansion	50,51,52,53,54
Info presentation (7) FIRST CHALLENGE	55,56
Info elaboration / expansion	57,58,59
Info presentation (8) SECOND CHALLENGE	60
Info elaboration / expansion	61,62,63
Info presentation (9) 3RD CHALLENGE	64
Info elaboration / expansion	65,66
Info presentation (10) 4TH CHALLENGE	67
Info elaboration / expansion	68
Info presentation (11) RISK ASSESSMENT	69
Info elaboration / expansion	70,71
Info presentation (12) PREDICTION OF COMPLEX DISEASES	72
Info elaboration / expansion	73,74,75,76,77,78,79
Info presentation (13) PREDICTIVE MODELS	80
Info elaboration / expansion	81,82,83,84
Info presentation (14) GENOMEWIDE SCANNING	85

Info elaboration / expansion	86,87,88,89,90,91,92
Author's opinion / point of view	93,94
Info presentation (15) PATIENT'S CHOICE	95
Info elaboration / expansion	96,97,98
CONCLUSION	
Summary of main findings	99,100
Recommendations	101,102
Implications	103,104
Recommendations	105

R.A. 19 GENOMIC MEDICINE	118 SENTENCES
INTRODUCTION	
Topic presentation	sentence 1
Topic justification	
Objetives	
Article development structure	2
DEVELOPMENT	
Info presentation (1) INTRODUCTION OF GENETIC MATERIAL	3
Info elaboration / expansion	4,5
Info presentation (2) CONCEPT OF SYSTEMATIC DELIVERY OF A DEFICIENT ENZYME	6
Info elaboration / expansion	7,8
Info presentation (3) EARLY ATTEMPTS AT ERT	9,9a
Info elaboration / expansion	10,11,12,13,14,15
Info presentation (4) BIOCHEMISTRY AND PATHWAY OF LYSOMAL ENZYMES	16
Info elaboration / expansion	17,18,19,20,21,22
Info presentation (5) HUTCHINSON-GILFORD PROGERIA SYNDROME	23
Info elaboration / expansion	24,25,26,27,28,29,30,31
Info presentation (6) DRUGS TO TREAT NUCLEAR-BLEBBING IN PATIENTS WITH H-G.	32
Info elaboration / expansion	33,34,35,36,37,38,39,40,41
Info presentation (7) MARFAN'S SYNDROME	42
Info elaboration / expansion	43,44,45,46,47
Info presentation (8) USE OF LOSERTAN IN PATIENTS WITH MARFAN'S SYNDROME	48
Info elaboration / expansion	49,50,51,52,53,54
Info presentation (9) ONGOING EFFORTS	55
Info elaboration / expansion	56,57,58,59
Info presentation (10) SMALL MOLECULES AS THERAPEUTIC AGENTS	60
Info elaboration / expansion	61,62,63,64,65,66
Info presentation (11) DESIRABLE FUNCTIONS OF SMALL-MOLECULE THERAPEUTIC	67
Info elaboration / expansion	68,69,70,71
Info presentation (12) ILLUSTRATION OF RELEVANT PRINCIPLES OF SUBSTRATE REL	72
Info elaboration / expansion	73,74,75,76,77,78,79,80,81,82
Info presentation (13) NONSENSE SUPRESSION	83
Info elaboration / expansion	84,85,86,87,88,89,90,91
Info presentation (14) POTENTIAL LIMITATIONS	92

Info elaboration / expansion	93,94,95,96,97,98.99,100
Info presentation (15) SHORT OLIGONUCLEOTIDES	101,102
Info elaboration / expansion	103-104-105-106-107-108-109-110-111
CONCLUSION	
Summary of main findings	112-113-114-115-116
Predictions	117

R.A. 20 GENOMIC MEDICINE	117 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5,6,7
Objetives	8
Article development structure	
DEVELOPMENT	
Info presentation (1) DISCOVERY OF CASUAL GENES FOR TYPE 2 DIABETES: 1ST WAVE	9,10
Info elaboration / expansion	11,12,13,14,15
Info presentation (2) 2ND WAVE	16
Info elaboration / expansion	17,18,19,21,21,22
Info presentation (3) 3RD WAVE	23
Info elaboration / expansion	24,25
Info presentation (4) GENOMEWIDE ASSOCIATION STUDIES	26
Info elaboration / expansion	27,28,29,30,31
Info presentation (5) GENOMEWIDE ASSOCIATION STUDIES OF GENETIC VARIANTS INF	32
Info elaboration / expansion	33,34,35,36,37
Info presentation (6) FROM GENES TO CLINICAL PRACTICE: OBSTACLES	38,39
Info elaboration / expansion	40,41,42,43,44,45,46,47,48,49,50,51,52,53,54
Info presentation (7) FROM GENETICS TO BIOLOGY	55
Info elaboration / expansion	56,57,58,59
Author's opinion / point of view	60,61
Info presentation (8) EFFORTS TO ACHIEVE THERAPEUTIC MODIFICATION OF WEIGHT	62
Info elaboration / expansion	63,64,65,66,67,68,69,70
Info presentation (9) METABOLIC SYNDROME	71
Info elaboration / expansion	72,73,74,75,76
Info presentation (10) PREDICTION AND DIFERENTIAL DIAGNOSIS	77,78
Info elaboration / expansion	79,80,81,82,83
Info presentation (11) EFFECT SIZES	84
Info elaboration / expansion	85,86,87,88,89,90,91
Info presentation (12) GENETIC PREDISPOSITION AND ENVIRONMENTAL EXPOSURES	92
Info elaboration / expansion	93,94,95
Info presentation (13) COMMON VARIANTS	96,97
Info elaboration / expansion	98,99,100,101,102

Info presentation (14) TARGETED TREATMENT AND PREVENTION	103
Info elaboration / expansion	104-105-106-107-108-109
Info presentation (15) CARE OF PATIENTS WITH TYPE 2 DIABETES AND OBESITY	110
Info elaboration / expansion	111-112-113
CONCLUSION	
Summary of main findings	114-115
Recommendations	116
Predictions	117

R.A. 21 GENOMIC MEDICINE	137 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9
Objetives	10
Article development structure	
DEVELOPMENT	
Info presentation (1) BIOLOGIC CLASSIFICATION	11,12,13
Info elaboration / expansion	14,15,16,17,18,19,20
Info presentation (2) PROGNOSTIC INDICATORS: BREAST CANCER	21,22
Info elaboration / expansion	23,24,25,26
Info presentation (3) PROGNOSTIC INDICATORS: COLON CANCER	27
Info elaboration / expansion	28,29,30
Info presentation (4) WHAT SHOULD BE INCORPORATED INTO THE ROUTINE CI	31
Info elaboration / expansion	32,33,34,35
Info presentation (5) RESPONSE TO TREATMENT	36,37,38
Info elaboration / expansion	39,40,41
Info presentation (6) EFFECT OF MUTATIONS ON A PATIENT'S RESPONSE TO TH	42,43,44
Info elaboration / expansion	45,46,47,48,49,50,51
Info presentation (7) THERAPEUTICS IN THE NEAR FUTURE	52
Info elaboration / expansion	53,54,55
Info presentation (8) DEVELOPMENT OF INHIBITORS	56
Info elaboration / expansion	57,58,59,60,61,62,63,64,65,66,67,68,69,70,71,72
Info presentation (9) MUTATED CANCER GENES AND DRUG DEVELOPMENT	73,74
Info elaboration / expansion	75,76,77,78,79
Info presentation (10) LARGE-SCALE CANCER GENOME STUDIES	80
Info elaboration / expansion	81,82
Info presentation (11) RESISTANCE TO THERAPY	83
Info elaboration / expansion	84,85,86,87,88,89
Info presentation (12) MONITORING OF DISEASE BURDEN	90,91
Info elaboration / expansion	92,93,94,95,96,97,98,99,100,101,102,103
Author's opinion / point of view	104,105,106,107
Info presentation (13) GENOMICS AND THE DESIGN OF CLINICAL TRIALS	108,109,110

Info elaboration / expansion	111,112,113
Author's opinion / point of view	114
CONCLUSION	
Summary of main findings	115-116-117-118-119-120-121-122-123-124-125-126
Predictions	127-128-129-130-131
Summary of main findings	132-133-134
Predictions	135
Recommendations	136,137

R.A. 22 GENOMIC MEDICINE	135 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6,7,8,9,10
Objectives	
Article development structure	
DEVELOPMENT	
Info presentation (1) GENETIC SCREEING AND GENETIC TESTING	11,12,13,14
Info elaboration/expansion	15,16,17,18,19,20,21,22,22a,23,24
Info presentation (2) PREIMPLANTATION GENETIC SCREEING	25
Info elaboration/expansion	26,27,28,29,30,31,32,33,34
Info presentation (3) PREIMPLANTATION GENETIC DIAGNOSIS	35
Info elaboration/expansion	36,37,38,39,40,41,42,43,44,45
Info presentation(4) PRENANTAL GENETIC AND GENOMIC TESTING	46,47,48,49
Info elaboration/expansion	49,50,51,52,53,54,55,56,57,58
Author's evaluation / point of view	59
Info presentation (5) NONINVASIVE PRENATAL DIAGNOSIS	60,61
Info elaboration/expansion	62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78,79,80,81,82
Author's evaluation / point of view	83,84,85
Info presentation (6) NEWBORN GENETIC SCREEING	86,87,88,89
Info elaboration/expansion	90,91,92,93,94,95,96,97,98,99
Info presentation (7) NEWBORN GENETIC DIAGNOSIS	100,101
Info elaboration/expansion	102,103,104,105,106
Info presentation (8) COMMERCIAL SCALING OF GENETIC TESTING	107,108
Info elaboration/expansion	109-110-111-112-113-114-115
Author's evaluation / point of view	116
Info presentation (9) PRECONCEPTION HEALTH AND HEALTH DISPARITIES	117,118
Info elaboration/expansion	119,120,121
Summary	122-123-124-125-126-127-128
CONCLUSION	
Summary of main findings	129,130,131
Recommendations	132,133,134

R.A. 23 GENOMIC MEDICINE	149 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9
Topic justification	10,11,12
Objetives	13
Article development structure	
DEVELOPMENT	
Info presentation (1) COPY-NUMBER CHANGES	14
Info elaboration /expansion	15,16,17,18,19,20
Info presentation (2)CHANGES IN CHROMOSOMAL COPY-NUMBER	21
Info elaboration /expansion	22,23,24,25
Info presentation (3) FISH	26
Info elaboration /expansion	27
Info presentation (4) GENOMEWIDE TECHNIQUES	28,29
Info elaboration /expansion	30,31,32,33
Info presentation (5) MICRODELETIONS	34
Info elaboration /expansion	35,36,37,38,39,40,41,42
Info presentation (6) VARIABLE PHENOTYPES	43
Info elaboration /expansion	44,45,46,47,48,49
Info presentation (7) 16P11.2 DELETION	50
Info elaboration /expansion	51,52,53
Info presentation (8) DIAGNOSTIC YIELD AND RECOMMENDATIONS	54
Info elaboration /expansion	55,56,57,58,59
Info presentation (9) THE GENETICS OF RELATED DISORDERS	60
Info elaboration /expansion	61,62,63,64,65,66,67,68
Info presentation (10) SINGLE-GENE CAUSES OF INTELLECTUAL DISABITLTY	69
Info elaboration /expansion	70,71,72,73,74,75,76,77,78,79,80,81,82,82a,83
Info presentation (11) SANGER SEQUENCING	84
Info elaboration /expansion	85,86,87,88
Info presentation (12)MASSIVE PARALLEL SEQUENCING	89
Info elaboration /expansion	90,91

Info presentation (13) EXOME SEQUENCING	92
Info elaboration /expansion	93,94,95,96,97,98,99,100,101
Info presentation (14) SEQUENCING IN UNRELATED SUBJECTS	102,103
Info elaboration /expansion	104-105-106-107-108-109
Info presentation (15) ANALYSIS OF TRIOS	110
Info elaboration /expansion	111,112
Summary	113
Info presentation (16) TRIO ANALYSIS AND INTELLECTUAL DISABILITY	114
Info elaboration /expansion	115-116-117-118-119-120,120a
Info presentation (17) EXOME SEQUENCING AND RECESSIVE DISEASES	121
Info elaboration /expansion	122, 123,124,125,126,127,128,129,130,131
Info presentation (18) SEQUENCING AND CLINICAL DIAGNOSTIC LABS	132
Info elaboration /expansion	133,134,135,136
Summary	137-138-139-140-141-142-143
CONCLUSION	
Summary of main findings	144,145,146,147

R.A. 24 GENOMIC MEDICINE	125 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6,7,8,11
Objetives	9,10
Article development structure	
DEVELOPMENT	
Info presentation (1) CARDIOVASCULAR DRUGS	12,13,14
Info elaboration / expansion	15,16,17,18
Info presentation (2) WARFARIN	19,20
Info elaboration / expansion	21,22,23,24,25,26,27,28,29,30,31,32,33,34,35,36,37,38,38,40,41,42,43,44
Info presentation (3) CLOPIDOGREL	45,46
Info elaboration / expansion	47,48,49,50,51,52,53,54,55,56,57
Info presentation (4) STUDIES TO IDENTIFY GENETIC VARIANTS	58,59
Info elaboration / expansion	60,61,62,63,64,65,66,67,68,69,70,71,72,73,74,75,76,77,78
Summary	79
Info presentation (5) ANTINEOPLASTIC DRUGS	80,81
Info elaboration / expansion	82,83,84,85,86,87,88
Info presentation (6) AROMATOSE INHIBITORS	89,90
Info elaboration / expansion	91,92,93,94,95,96,97,98,99,100,101,102,103,104,105,106,107
Info presentation (7) CLINICAL TRANSLATION	108,109,110,111,112
Info elaboration / expansion	113-114-115-116-117-118-119
CONCLUSION	
Summary of main findings	120,121,122
Recommendations	123
Predictions	124,125

R.A. 25 GENOMIC MEDICINE	116 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8
Objetives	9
Article development structure	
DEVELOPMENT	
Info presentation (1) GENETIC TESTING	10,11
Info elaboration / expansion	12,13,14
Info presentation (2) CHALLENGE IN GENETIC TESTING	15
Info elaboration / expansion	16,17,18,19,20
Author's opinion / point of view	21,22
Info presentation (3) MENDELIAN DISORDERS	23,24
Info elaboration / expansion	25
Info presentation (4) 1ST EXAMPLE	26,27
Info elaboration / expansion	28,29,30,31
Info presentation (5) 2ND EXAMPLE	32
Info elaboration / expansion	33,34,35,36,37,38
Info presentation (6) 3RD EXAMPLE	39,40
Info elaboration / expansion	41,42,43
Info presentation (7) COMPLEX DISORDERS	44
Info elaboration / expansion	45,46,47,48
Info presentation (8) DISORDERS: AMD	49,50
Info elaboration / expansion	51,52,53,54,55,56,57,58,59,60
Author's opinion / point of view	61
Info presentation (9) GLAUCOMA	62
Info elaboration / expansion	63,64,65,66,67,68,69
Author's opinion / point of view	70
Info presentation (10) FUCH'S CORNEAL DISTROPHY	71
Info elaboration / expansion	72,73,74,75,76,77
Author's opinion / point of view	78
Info presentation (11) THERAPIES FOR GENETIC EYE DISEASE	79
Info elaboration / expansion	80,81,82,83,84,85,86,87

Info presentation (12) GENE THERAPY	88,89
Info elaboration / expansion	90,91,92,93,94
Info presentartion (13) TRANSPLANTATION OF STEM CELLS	95,96
Info elaboration / expansion	97,98,99,100,101,102,103,104,105,106
Author's opinion / point of view	107
Info presentation (14) RETINAL PROSTHESES	108,109
Info elaboration / expansion	110
CONCLUSION	
Summary of main findings	111
Predictions	112
Implications	113,114,115,116

R.A. 26 CURRENT CONCEPTS	117 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6,7,8,9,10,11,12,13,14,15
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) VARIATIONS IN RISK	16,17
Info elaboration / expansion	18,19,20
Info presentation (2)SURVIVAL RATE AFTER TREATMENT	21,22
Info elaboration / expansion	23,24
Info presentation (3) LATE TREATMENT-RELATED COMPLICATIONS	25
Info elaboration / expansion	26,27,28,29,30,31,32,33,34,35
Info presentation (4) NEGATIVE EFFECTS OF PRESCRIBED DRUGS	36
Info elaboration / expansion	37,38,39,40,41,42,43,44
Info presentation (6) TREATMENT STRATEGIES	45
Info elaboration / expansion	46,47,48,49,50,51,52
Info presentation (7) SPECIAL CONSIDERATIONS	53
Info elaboration / expansion	54
Info presentation (8) PREGNANCY	55
Info elaboration / expansion	56,57,58,59,60,61
Info presentation (9) OLDER AGE	62
Info elaboration / expansion	63,64,65,66,67,68,69,70
Info presentation (10) HIV INFECTION	71,72
Info elaboration / expansion	73,74
Info presentation (11) NODULAR LYMPHOCYTE-PREDOMINANT HODGKIN'S LYMPHOCYTE LYMPHOCYT LYMPHOCYTE LYMPHOCYTE LYM	75,76
Info elaboration / expansion	77,78,79
Info presentation (12) TREATMENT SELECTION	80,81
Info elaboration / expansion	82,83,84,85,86
Author's opinion / point of view	87
Info presentation (13) SURVIVAL RATES VS. TREATMENT	88
Info elaboration / expansion	89,90,91,92,93,94
Info presentation (14) ONCOLOGISTS IN THE USA	95

Info elaboration / expansion	96,97,98,99
Info presentation (15) TREATMENT PLANS AND PET SCANNING	100,101
Info elaboration / expansion	102-103-104-105-106-107-108-109-110
CONCLUSION	
Summary of main findings	111-112-113
Recommendations	114
Summary of main findings	115
Implications	116
Summary of main findings	117

R.A. 27 CURRENT CONCEPTS	127 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9,10
Topic justification	11,12,13,14,15,16,17,18,19,20,21,22,23,24,25
Objetives	26
Article development structure	
DEVELOPMENT	
Info presentation (1) PREVENTION	27,28
Info elaboration / expansion	29,30,31
Info presentation (2) FINANCING CONTROL AND CARE	32,33,34
Info elaboration / expansion	35,36,37,38,39
Info presentation (3) COLLECTIVE FINANCING MECHANISMS	40,41,42
Info elaboration / expansion	43,44,45,46,47
Info presentation (4) ENGAGING ALL CARE PROVIDERS	48
Info elaboration / expansion	49,50,51,52
Info presentation (6) IMPLEMENTING A MIX OF PUBLIC AND PRIVATE APPROACE	2 53
Info elaboration / expansion	54,55,56,57,58,59
Info presentation (7) IMPLEMENTING REGULATION	60
Info elaboration / expansion	61,62,63,64
Info presentation (8) MDR TUBERCULOSIS TRANSMISSION: THE COMMUNITY	65
Info elaboration / expansion	66,67,68,69
Info presentation (9) MDR TUBERCULOSIS TRANSMISSION: HOSPITALS	70
Info elaboration / expansion	71,72,73,74,75
Summary	76
Info presentation (10) RESPONDING TO THE LABORATORI CRISIS	77,78
Info elaboration / expansion	79,80,81,82,83,84,85,86,87,88,89
Info presentation (11) ENSURING ACCESS TO QUALITY-ASSURED DRUGS	90,91
Info elaboration / expansion	92,93,94,95,96,97,98
Info presentation (12) RESTRICTING DRUG AVAILABILITY	99,100
Info elaboration / expansion	101-102-103-104-105-106-107-108-109-110
Info presentation (13) PRIORITIZING CONTROL OF TUBERCULOSIS INFECTION	111-112
Info elaboration / expansion	113-114-115-116-117-118
CONCLUSION	
Summary of main findings	119-120-121-122-123-124-125-126
Implications	127

R.A. 28 CURRENT CONCEPTS	85 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9,10,11
Topic justification	12,13,14
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) VACCINES FOR INFLUENZA CONTROL	15,16,17,18
Info elaboration / expansion	19,29,21,21a,22,23,24,25,26
Info presentation (2) CHALLENGES TO PRODUCING H1N1 VACCINE	27,28
Info elaboration / expansion	29,30,31,32,33,34,35
Info presentation (3) NEED FOR NEW TECHNOLOGIES IN VACCINE PRODUCTION	ON 36
Info elaboration / expansion	37,38,39
Info presentation (4) CELL-CULTURE TECHNIQUES	40,41
Info elaboration / expansion	42,43,44,45
Info presentation (6) ANJUVANTS	46
Info elaboration / expansion	47,48,49,50,51,52
Info presentation (7) NOVEL LIVE ATTENUATED VACCINES	53
Info elaboration / expansion	54,55
Info presentation (8) NEXT-GENERATION OF INFLUENZA VACCINES	56
Info elaboration / expansion	57
Info presentation (9) RECOMBINANT PROTEINS	58
Info elaboration / expansion	59,60,61
Info presentation (10) VIRUSLIKE PARTICLES	62
Info elaboration / expansion	63,64,65,66
Info presentation (11) VIRAL VECTORS	67
Info elaboration / expansion	68,69,70
Info presentation (12) DNA-BASED VACCINES	71,72
Info elaboration / expansion	73,74
Info presentation (13) "UNIVERSAL" VACCINES	75,76
Info elaboration / expansion	77,78,79,80
CONCLUSION	
Summary of main findings	81,82,83
Implications	84

R.A. 29 CURRENT CONCEPTS	137 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8,9,10
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) DEFINITION AND TERMINOLOGY	11,12,13,14
Info elaboration / expansion	15,16,17
Info presentation (2)PATHOPHYSIOLOGY OF DROWNING	18,19,20,21,22,23,24
Info elaboration / expansion	25,26,27,28,29,30,31,32,33,34,35
Info presentation (3) RESCUE	36
Info elaboration / expansion	37,38,39,40
Author's opinion / point of view	41
Info presentation (4) RESUSCITATION	42
Info elaboration / expansion	43,44,45,46,47,48
Info presentation (5) SPECIAL CONSIDERATIONS	49
Info elaboration / expansion	50
Info presentation (6) INITIAL RESUSCITATION ON LAND	51
Info elaboration / expansion	52,53,54
Info presentation (7) CARDIAC ARREST	55
Info elaboration / expansion	56,57,58
Info presentation (8) FREQUENT COMPLICATIONS	59
Info elaboration / expansion	60,61,62,63,64
Info presentation (9) ADVANCED PREHOSPITAL CARE	65,66
Info elaboration / expansion	67,68,69,70,71,72,73,73a,74,75,76,77,78,79,80,81,82,83
Info presentation (10) CARE IN THE EMERGENCY DEPARTMENT	84,85
Info elaboration / expansion	86,87,88,89,90,91,92,93,94,95,96,97,98
Info presentation (11) TREATMENT IN THE ICU	99
Info elaboration / expansion	100-101-102-103-104-105
Info presentation (12) PNEUMONIA	106
Info elaboration / expansion	107-108-109-110-111-112-113-114-115-116
Info presentation (13) SEVERELY DETERIORATED PULMONARY FUNCTION	117

Info elaboration / expansion	118
Info presentation (14) CIRCULATORY SYSTEM	119
Info elaboration / expansion	120-121-122
Info presentation (15) NEUROLOGIC SYSTEM	123
Info elaboration / expansion	124-125-126-127-128-129
Info presentation (16) UNUSUAL COMPLICATIONS	130
Info elaboration / expansion	131-132-133
Info presentation (17) PREVENTION	134
Info elaboration / expansion	135-136

R.A. 30 CURRENT CONCEPTS	119 SENTENCES
INTRODUCTION	
Topic presentation	sentence 1
Topic justification	2,3,4,5,6,7,8,9,10,11,12,13,14
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1) IDENTIFICATION OF THE MOLD	15,16,17
Info elaboration / expansion	18,19,20,21,22,23,24,25,26
Info presentation (2)SUSCEPTIBILITY TO ANTIFUNGAL AGENTS	27,28
Info elaboration / expansion	29,30
Info presentation (3) THE OUTBREAK	31
Info elaboration / expansion	32,33,34,35,36,37,38,39,40
Info presentation (4) SPINAL TAP, JOINT ASPIRATION OR IMAGING STUDIES	41,42,43,44
Info elaboration / expansion	45,46,47,48,49,50,51,52,53,54,55,56,57,58
Info presentation (5) TREATMENT	59,60,61,62
Info elaboration / expansion	63,64,65,66,67,68,69,70,71
Info presentation (6) PATIENTS WITH MILD AND SEVERE CNS DISEASE	72,73
Info elaboration / expansion	74,75,76
Info presentation (7) PATIENTS WITH OSTEOARTICULAR INFECTION	77
Info elaboration / expansion	78,79,80
Info presentation (8) VARICONAZOLE: ADVERSE EFFECTS	81
Info elaboration / expansion	82,83,84,85,86,87,88,89,90,91,92,93
Info presentation (9) DURATION OF THERAPY	94
Info elaboration / expansion	95,96,97
Info presentation (10) THERAPEUTIC DRUG MONITORING	98
Info elaboration / expansion	99,100,101,101a
Info presentation (11) TREATMENT OF PATIENTS WITH NORMAL CEREBROSPINA	102
Info elaboration / expansion	103-104-105-106-107
Info presentation (12) PROPHYLAXIS	108
Info elaboration / expansion	109-110-11-112
CONCLUSION	
Summary of main findings	113-114-115-116-117
Predictions	118

APPENDIX C

Samples for Raters

SAMPLE 1 - RA 1: Ezzati, M. and Riboli, E. (2013). Behavioral and Dietary Risk Factors for Noncommunicable Diseases. *The New England Journal of Medicine*. 369, 10, 954-964. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1203528

SAMPLE 2 - RA 6: Hunter, D. and Srinath Reddy, K. (2013). Noncommunicable Diseases. *The New England Journal of Medicine*. 369, 14, 1336-1343. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1109345

SAMPLE 3 - RA 12: Piott, P. and Quinn, T. (2013). Response to the AIDS Pandemic — A Global Health Model. *The New England Journal of Medicine*. 368, 23, 2210-2218. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1201533

SAMPLE 4 - RA 13: Relman, D. (2011). Microbial Genomics and Infectious Diseases. *The New England Journal of Medicine*. 365, 4, 347-357. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1003071

SAMPLE 5 - RA 18: Manolio, T. (2010). Genomewide Association Studies and Assessment of the Risk of Disease. *The New England Journal of Medicine*. 363, 2, 166-176. Available at http://www.nejm.org/doi/full/10.1056/NEJMra0905980

SAMPLE 6 - RA 25: Sheffield, V. and Stone, E. (2011). Genomics and the Eye. *The New England Journal of Medicine*. 364, 20, 1932-1942. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1012354

SAMPLE 7 - RA 28: Lambert, L. and Fauci, A. (2010). Influenza Vaccines for the Future. *The New England Journal of Medicine*. 363, 21, 2036-2044. Available at http://www.nejm.org/doi/full/10.1056/NEJMra1002842

APPENDIX D

Rhetorical Analysis of Raters

R.A. 1 GLOBAL HEALTH	97 SENTENCES	
INTRODUCTION		
Topic presentation	1,2,3,4	
Topic justification	5,6	
Objectives	7	
Article development structure	8	
DEVELOPMENT		
Info presentation(1)	9	
Info elaboration/expansion	10,11,12	
Info presentation (2)	13	
Info elaboration/expansion	14,15,16,17	
Info presentation (3)	18	
Info elaboration/expansion	19,20,21,22	
Info presentation (4)	23	
Info elaboration/expansion	24,25	
Info presentation (5)	26	
Info elaboration/expansion	27,28	
Info presentation (6)	29	
Info elaboration/expansion	30,31	
Info presentation (7)	32	
Info elaboration/expansion	33,34	
Info presentation (8)	35	
Info elaboration/expansion	36,37,38,39,40,41,42,43,44,45	
Info presentation (9)	46	
Info elaboration/expansion	47,48,49	
Info presentation (10)	50	
Info elaboration/expansion	51,52,53,54,55,56	
Info presentation (11)	57	
Info elaboration/expansion	58,59	
Info presentation (12)	60	
Info elaboration/expansion	61,62,63,64,65,66,67,68,69,70,71	
Info presentation (13)	72	
Info elaboration/expansion	73,74,75,76	

Summary	77,78,79,80
CONCLUSION	
Summary of main findings	81,82,83,84,85,86,87,88,89,90,91,92,93
Recommendations	94,95,96,97

R.A. 1 GLOBAL HEALTH	97 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4
Topic justification	5,6
Objectives	7
Article development structure	8
DEVELOPMENT	
Info presentation(1)	9,10
Info elaboration/expansion	11,12
Info presentation (2)	13
Info elaboration/expansion	14,15,16,17
Info presentation (3)	18
Info elaboration/expansion	19,20,21,22
Info presentation (4)	23
Info elaboration/expansion	24,25
Info presentation (5)	26
Info elaboration/expansion	27,28
Info presentation (6)	29
Info elaboration/expansion	30,31
Info presentation (7)	32
Info elaboration/expansion	33,34
Info presentation (8)	35
Info elaboration/expansion	36,37,38,39,40,41,42,43,44,45
Info presentation (9)	46
Info elaboration/expansion	47,48,49
Info presentation (10)	50
Info elaboration/expansion	51,52,53,54,55,56
Info presentation (11)	57
Info elaboration/expansion	58,59
Info presentation (12)	60
Info elaboration/expansion	61,62,63,64,65,66,67,68,69,70,71
Info presentation (13)	72
Info elaboration/expansion	73,74,75,76

Summary	77,78,79,80
CONCLUSION	
Summary of main findings	81,82,83,84,85,86,87,88,89,90,91,92,93
Recommendations	94,95,96,97

R.A. 6 GLOBAL HEALTH	106 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1)	7,8,9
Info elaboration / expansion	10,11,12,13
Info presentation (2)	14,15
Info elaboration / expansion	16,17
Info presentation (3)	18
Info elaboration / expansion	19,20,21,22,23,24
Info presentation (4)	25
Info elaboration / expansion	26,27
Info presentation (5)	28
Info elaboration / expansion	29,30,31,32,33
Info presentation (6)	34
Info elaboration / expansion	35,36
Info presentation (7)	37
Info elaboration / expansion	38,39,40,41,42,43,44,45,46
Info presentation (8)	47
Info elaboration / expansion	48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63
Info presentation (9)	64
Info elaboration / expansion	65,66,67,68,69,70
Info presentation (10)	71
Info elaboration / expansion	72,73,74,75,76,77,78,79
Info presentation (11)	80
Info elaboration / expansion	81,82,83,84,85
Info presentation (12)	86
Info elaboration / expansion	87
Info presentation (13)	88
Info elaboration / expansion	89,90

Info presentation (14)	91
Info elaboration / expansion	92,93
Info presentation (15)	94
Info elaboration / expansion	95,96,97
Info presentation (16)	98
Info elaboration / expansion	99,100,101
CONCLUSION	
Predictions	102,103,104,105
Implications	106

R.A. 6 GLOBAL HEALTH	106 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3
Topic justification	4,5
Objetives	6
Article development structure	
DEVELOPMENT	
Info presentation (1)	7,8,9
Info elaboration / expansion	10,11,12,13
Info presentation (2)	14
Info elaboration / expansion	15,16,17
Info presentation (3)	18
Info elaboration / expansion	19,20,21,22,23,24
Info presentation (4)	25
Info elaboration / expansion	26,27
Info presentation (5)	28,29
Info elaboration / expansion	30,31,32,33
Info presentation (6)	34
Info elaboration / expansion	35,36
Info presentation (7)	37
Info elaboration / expansion	38,39,40,41,42,43,44,45,46
Info presentation (8)	47
Info elaboration / expansion	48,49,50,51,52,53,54,55,56,57,58,59,60,61,62,63
Info presentation (9)	64
Info elaboration / expansion	65,66,67,68,69,70
Info presentation (10)	71
Info elaboration / expansion	72,73,74,75,76,77,78,79
Info presentation (11)	80
Info elaboration / expansion	81,82,83,84,85
Info presentation (12)	86
Info elaboration / expansion	87
Info presentation (13)	88
Info elaboration / expansion	89,90

Info presentation (14)	91
Info elaboration / expansion	92,93
Info presentation (15)	94
Info elaboration / expansion	95,96,97
Summary	98,99,100,101
CONCLUSION	
Predictions	102,103,104,105
Implications	106

R.A. 12 GLOBAL HEALTH	107 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,12,13,14,15
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	16
Info elaboration / expansion	17,18,19
Info presentation (2)	20
Info elaboration / expansion	21,22,23,24,25,26,27,28
Info presentation (3)	29,30
Info elaboration / expansion	31,32,33,34,35,36,37
Info presentation (4)	38
Info elaboration / expansion	39,40,41
Info presentation (5)	42,43
Info elaboration / expansion	44,45,46
Info presentation (6)	47
Info elaboration / expansion	48,49,50,51,52,53
Info presentation (7)	54
Info elaboration / expansion	55,56,57,58,59
Author's opinion / point of view	60,61
Info presentation (8)	62,63
Info elaboration / expansion	64,65,66,67,68
Info presentation (9)	69
Info elaboration / expansion	70,71
Info presentation (10)	72
Info elaboration / expansion	73,74
Info presentation (11)	75
Info elaboration / expansion	76,77
Info presentation (12)	78
Info elaboration / expansion	79,80,81,82,83,84
Info presentation (13)	85

Info elaboration / expansion	86,87
Info presentation (14)	88
Info elaboration / expansion	89,90,91,92,93,94
Info presentation (15)	95,96
Info elaboration / expansion	97,98,99,100,101,102
CONCLUSION	
Summary of main findings	103,104
Recommendations	105
Implications	106,107

R.A. 12 GLOBAL HEALTH	107 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,12,13,14,15
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	16
Info elaboration / expansion	17,18,19
Info presentation (2)	20
Info elaboration / expansion	21,22,23,24,25,26,27,28
Info presentation (3)	29,30
Info elaboration / expansion	31,32,33,34,35,36,37
Info presentation (4)	38
Info elaboration / expansion	39,40,41
Info presentation (5)	42,43
Info elaboration / expansion	44,45,46
Info presentation (6)	47
Info elaboration / expansion	48,49,50,51,52,53
Info presentation (7)	54
Info elaboration / expansion	55,56,57,58,59,60
Author's opinion / point of view	61
Info presentation (8)	62,63
Info elaboration / expansion	64,65,66,67,68
Info presentation (9)	69
Info elaboration / expansion	70,71
Info presentation (10)	72
Info elaboration / expansion	73,74
Info presentation (11)	75
Info elaboration / expansion	76,77
Info presentation (12)	78
Info elaboration / expansion	79,80,81,82,83,84
Info presentation (13)	85

Info elaboration / expansion	86,87
Info presentation (14)	88
Info elaboration / expansion	89,90,91,92,93,94
Info presentation (15)	95,96
Info elaboration / expansion	97,98,99,100,101,102
CONCLUSION	
Summary of main findings	103,104
Recommendations	105
Implications	106,107

R.A. 13 GENOMIC MEDICINE	140 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	13,14,15
Info elaboration / expansion	16,17,18
Info presentation (2)	19
Info elaboration / expansion	20,21
Info presentation (3)	22
Info elaboration / expansion	23,24,25,26
Info presentation (4)	27
Info elaboration / expansion	28,29
Info presentation (5)	30
Info elaboration / expansion	31,32,33
Info presentation (6)	34
Info elaboration / expansion	35,36
Info presentation (7)	37
Info elaboration / expansion	38,39
Info presentation (8)	40
Info elaboration / expansion	41,42,43
Info presentation (9)	44
Info elaboration / expansion	45,46,47,48
Info presentation (10)	49
Info elaboration / expansion	50,51,52,53
Author's opinion / point of view	54,55
Info presentation (11)	56
Info elaboration / expansion	57,58
Info presentation (12)	59
Info elaboration / expansion	60,61,62,63
Info presentation (13)	64

Info elaboration / expansion	65,66,67,68,69
Info presentation (14)	70
Info elaboration / expansion	71,72,73
Info presentation (15)	74
Info elaboration / expansion	74,75,77
Info presentation (16)	78,79,80
Info elaboration / expansion	81,82,83,84,85,86
Author's opinion / point of view	87
Info presentation (17)	88
Info elaboration / expansion	89,90,91,92,93,94,95,96,97,98,99,100,101
Info presentation (18)	102,103
Info elaboration / expansion	104,105,106
Info presentation (19)	107
Info elaboration / expansion	108-109-110-11-112-113-114-115
Info presentation (20)	116
Info elaboration / expansion	117,118,119,120,121
Summary	122,123,124,125
Info presentation (21)	126,127
Info elaboration / expansion	128-129-130-131-132
Author's opinion / point of view	133
CONCLUSION	
Summary of main findings	134
Predictions	135,135a
Summary of main findings	136
Predictions	137,138
Recommedations	139

R.A. 13 GENOMIC MEDICINE	140 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5
Topic justification	6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	13,14,15
Info elaboration / expansion	16,17,18
Info presentation (2)	19
Info elaboration / expansion	20,21
Info presentation (3)	22
Info elaboration / expansion	23,24,25,26
Info presentation (4)	27
Info elaboration / expansion	28,29
Info presentation (5)	30
Info elaboration / expansion	31,32,33
Info presentation (6)	34
Info elaboration / expansion	35,36
Info presentation (7)	37
Info elaboration / expansion	38,39
Info presentation (8)	40
Info elaboration / expansion	41,42,43
Info presentation (9)	44
Info elaboration / expansion	45,46,47,48
Info presentation (10)	49
Info elaboration / expansion	50,51,52,53
Author's opinion / point of view	54,55
Info presentation (11)	56
Info elaboration / expansion	57,58
Info presentation (12)	59
Info elaboration / expansion	60,61,62,63
Info presentation (13)	64

Info presentation (14) 70 Info elaboration / expansion 71,72,73 Info presentation (15) 74 Info elaboration / expansion 74,75,77 Info presentation (16) 78,79,80 Info elaboration / expansion 81,82,83,84,85,86 Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	65,66,67,68,69
Info elaboration / expansion 71,72,73 Info presentation (15) 74 Info elaboration / expansion 74,75,77 Info presentation (16) 78,79,80 Info elaboration / expansion 81,82,83,84,85,86 Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125		
Info presentation (15) 74 Info elaboration / expansion 74,75,77 Info presentation (16) 78,79,80 Info elaboration / expansion 81,82,83,84,85,86 Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125		71,72,73
Info presentation (16) 78,79,80 Info elaboration / expansion 81,82,83,84,85,86 Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	_	
Info elaboration / expansion 81,82,83,84,85,86 Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	74,75,77
Author's opinion / point of view 87 Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info presentation (16)	78,79,80
Info presentation (17) 88,89 Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	81,82,83,84,85,86
Info elaboration / expansion 90,91,92,93,94,95,96,97,98,99,100,101 Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Author's opinion / point of view	87
Info presentation (18) 102 Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info presentation (17)	88,89
Info elaboration / expansion 103,104,105,106 Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	90,91,92,93,94,95,96,97,98,99,100,101
Info presentation (19) 107 Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info presentation (18)	102
Info elaboration / expansion 108-109-110-11-112-113-114-115 Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	103,104,105,106
Info presentation (20) 116 Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info presentation (19)	107
Info elaboration / expansion 117,118,119,120,121 Summary 122,123,124,125	Info elaboration / expansion	108-109-110-11-112-113-114-115
Summary 122,123,124,125	Info presentation (20)	116
	Info elaboration / expansion	117,118,119,120,121
	Summary	122,123,124,125
Info presentation (21)	Info presentation (21)	126,127
Info elaboration / expansion 128-129-130-131-132	Info elaboration / expansion	128-129-130-131-132
Author's opinion / point of view 133	Author's opinion / point of view	133
CONCLUSION	CONCLUSION	
Summary of main findings 134	Summary of main findings	134
,	Predictions	135,135a
Summary of main findings 136	· ·	
· · · · · · · · · · · · · · · · · · ·	Predictions	
Recommedations 139	Recommedations	139

R.A. 18 GENOMIC MEDICINE	105 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	13,14,15
Info elaboration / expansion	16,17,18,19,20,21,22,23
Info presentation (2)	24
Info elaboration / expansion	25,26,27,28,29,30,31,32,33,34
Info presentation (3)	35,36
Info elaboration / expansion	37,38,39
Info presentation (4)	40
Info elaboration / expansion	41,42,43,44,45
Info presentation (5)	46
Info elaboration / expansion	47,48
Info presentation (6)	49
Info elaboration / expansion	50,51,52,53,54
Info presentation (7)	55,56
Info elaboration / expansion	57,58,59
Info presentation (8)	60
Info elaboration / expansion	61,62,63
Info presentation (9)	64
Info elaboration / expansion	65,66
Info presentation (10)	67
Info elaboration / expansion	68
Info presentation (11)	69
Info elaboration / expansion	70,71
Info presentation (12)	72
Info elaboration / expansion	73,74,75,76,77,78,79
Info presentation (13)	80
Info elaboration / expansion	81,82,83,84
Info presentation (14)	85

Info elaboration / expansion	86,87,88
Info presentation(15)	89
Info elaboration / expansion	90,91,92
Author's opinion / point of view	93,94
Info presentation (16)	95
Info elaboration / expansion	96,97,98
CONCLUSION	
Summary of main findings	99,100
Recommendations	101,102
Implications	103,104
Recommendations	105

R.A. 18 GENOMIC MEDICINE	105 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8,9,10,11,12
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	13,14,15
Info elaboration / expansion	16,17,18,19,20,21,22,23
Info presentation (2)	24
Info elaboration / expansion	25,26,27,28,29,30,31,32,33,34
Info presentation (3)	35,36
Info elaboration / expansion	37,38,39
Info presentation (4)	40
Info elaboration / expansion	41,42,43,44,45
Info presentation (5)	46
Info elaboration / expansion	47,48
Info presentation (6)	49
Info elaboration / expansion	50,51,52,53,54
Info presentation (7)	55,56
Info elaboration / expansion	57,58,59
Info presentation (8)	60
Info elaboration / expansion	61,62,63
Info presentation (9)	64
Info elaboration / expansion	65,66
Info presentation (10)	67
Info elaboration / expansion	68
Info presentation (11)	69,70
Info elaboration / expansion	71
Info presentation (12)	72
Info elaboration / expansion	73,74,75,76,77,78,79
Info presentation (13)	80
Info elaboration / expansion	81,82,83,84
Info presentation (14)	85

Info elaboration / expansion	86,87,88
Info presentation(15)	89
Info elaboration / expansion	90,91,92
Author's opinion / point of view	93,94
Info presentation (16)	95
Info elaboration / expansion	96,97,98
CONCLUSION	
Summary of main findings	99,100
Recommendations	101,102
Implications	103,104
Recommendations	105

R.A. 25 GENOMIC MEDICINE	116 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8
Objetives	9
Article development structure	
DEVELOPMENT	
Info presentation (1)	10,11
Info elaboration / expansion	12,13,14
Info presentation (2)	15
Info elaboration / expansion	16,17,18,19,20
Author's opinion / point of view	21,22
Info presentation (3)	23
Info elaboration / expansion	24,25
Info presentation (4)	26
Info elaboration / expansion	27,28,29,30,31
Info presentation (5)	32
Info elaboration / expansion	33,34,35,36,37,38
Info presentation (6)	39,40
Info elaboration / expansion	41,42,43
Info presentation (7)	44
Info elaboration / expansion	45,46,47,48
Info presentation (8)	49,50
Info elaboration / expansion	51,52,53,54,55,56,57,58,59,60
Author's opinion / point of view	61
Info presentation (9)	62
Info elaboration / expansion	63,64,65,66,67,68,69
Author's opinion / point of view	70
Info presentation (10)	71
Info elaboration / expansion	72,73,74,75,76,77
Author's opinion / point of view	78
Info presentation (11)	79
Info elaboration / expansion	80,81,82,83,84,85,86,87

Info presentation (12)	88,89
Info elaboration / expansion	90,91,92,93,94
Info presentartion (13)	95
Info elaboration / expansion	96,97,98,99,100,101,102,103,104,105,106
Author's opinion / point of view	107
Info presentation (14)	108,109
Info elaboration / expansion	110
CONCLUSION	
Summary of main findings	111
Implications	112-113-114-115-116

R.A. 25 GENOMIC MEDICINE	116 SENTENCES
INTRODUCTION	
Topic presentation	1,2
Topic justification	3,4,5,6,7,8
Objetives	9
Article development structure	
DEVELOPMENT	
Info presentation (1)	10,11
Info elaboration / expansion	12,13,14
Info presentation (2)	15
Info elaboration / expansion	16,17,18,19,20
Author's opinion / point of view	21,22
Info presentation (3)	23,24
Info elaboration / expansion	25
Info presentation (4)	26,27
Info elaboration / expansion	28,29,30,31
Info presentation (5)	32
Info elaboration / expansion	33,34,35,36,37,38
Info presentation (6)	39,40
Info elaboration / expansion	41,42,43
Info presentation (7)	44,45
Info elaboration / expansion	46,47,48
Info presentation (8)	49,50
Info elaboration / expansion	51,52,53,54,55,56,57,58,59,60
Author's opinion / point of view	61
Info presentation (9)	62
Info elaboration / expansion	63,64,65,66,67,68,69
Author's opinion / point of view	70
Info presentation (10)	71,72
Info elaboration / expansion	73,74,75,76,77
Author's opinion / point of view	78
Info presentation (11)	79,80
Info elaboration / expansion	81,82,83,84,85,86,87

Info presentation (12)	88,89
Info elaboration / expansion	90,91,92,93,94
Info presentartion (13)	95
Info elaboration / expansion	96,97,98,99,100,101,102,103,104,105,106
Author's opinion / point of view	107
Info presentation (14)	108,109
Info elaboration / expansion	110
CONCLUSION	
Summary of main findings	111
Predictions	112
Implications	113-114-115-116

R.A. 28 CURRENT CONCEPTS	85 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9,10,11
Topic justification	12,13,14
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	15,16
Info elaboration / expansion	17,18,19,20,21,21a,22,23,24,25,26
Info presentation (2)	27,28
Info elaboration / expansion	29,30,31,32,33,34,35
Info presentation (3)	36
Info elaboration / expansion	37,38,39
Info presentation (4)	40,41
Info elaboration / expansion	42,43,44,45
Info presentation (6)	46
Info elaboration / expansion	47,48,49,50,51,52
Info presentation (7)	53
Info elaboration / expansion	54,55
Info presentation (8)	56
Info elaboration / expansion	57
Info presentation (9)	58
Info elaboration / expansion	59,60,61
Info presentation (10)	62
Info elaboration / expansion	63,64,65,66
Info presentation (11)	67
Info elaboration / expansion	68,69,70
Info presentation (12)	71,72
Info elaboration / expansion	73,74
Info presentation (13)	75
Info elaboration / expansion	76,77,78,79,80
CONCLUSION	
Summary of main findings	81,82
Predictions	83
Implications	84

R.A. 28 CURRENT CONCEPTS	85 SENTENCES
INTRODUCTION	
Topic presentation	1,2,3,4,5,6,7,8,9,10,11
Topic justification	12,13,14
Objetives	
Article development structure	
DEVELOPMENT	
Info presentation (1)	15,16
Info elaboration / expansion	17,18,19,20,21,21a,22,23,24,25,26
Info presentation (2)	27
Info elaboration / expansion	28,29,30,31,32,33,34,35
Info presentation (3)	36
Info elaboration / expansion	37,38,39
Info presentation (4)	40,41
Info elaboration / expansion	42,43,44,45
Info presentation (6)	46
Info elaboration / expansion	47,48,49,50,51,52
Info presentation (7)	53
Info elaboration / expansion	54,55
Info presentation (8)	56
Info elaboration / expansion	57
Info presentation (9)	58
Info elaboration / expansion	59,60,61
Info presentation (10)	62
Info elaboration / expansion	63,64,65,66
Info presentation (11)	67
Info elaboration / expansion	68,69,70
Info presentation (12)	71
Info elaboration / expansion	72,73
Author's opinion / point of view	74
Info presentation (13)	75,76
Info elaboration / expansion	77,78,79,80
CONCLUSION	
Summary of main findings	81,82,83
Implications	84