CMED 305 Course

Practical Session - How to write Introduction for Research Study

An introduction is the road map leading to the topic. If the following questions are answered, then the pathway to introduction becomes easy.

1. What was research topic?
2. Why was this topic important to investigate?
3. What did we know about this topic before the study?
4. How will this study contribute to new knowledge or new ways of understanding?

Pathway to writing 'Introduction'

The introduction leads the reader from a general subject area to a particular field of research.

It establishes the context and significance of the research being conducted by summarizing current understanding and background information about the topic

It states the purpose of the work in the form of the research problem supported by a hypothesis or a set of questions

Explains briefly the methodological approach used to examine the research problem, highlighting the potential outcomes the study can reveal.

Paragraph writing

1. Establish an area of research by:

- Highlighting the importance of the topic
- Making general statements about the topic
- Presenting an overview on current research on the subject.

2. Identify a research niche by:

- Opposing an existing assumption

- Revealing a gap in existing research
- Formulating a research question or problem
- Continuing a disciplinary tradition.

3. Place the current research topic by

- Stating the intent of your study
- Outlining the key characteristics of your study
- Describing important results
- Giving a brief overview of the structure of the paper.

The importance of Narrative Flow

- **Your introduction should clearly identify the subject area of interest**. A simple strategy to follow is to use key words from your title in the first few sentences of the introduction. This will help focus the introduction on the topic quickly without losing focus, or discussing information that is too general.

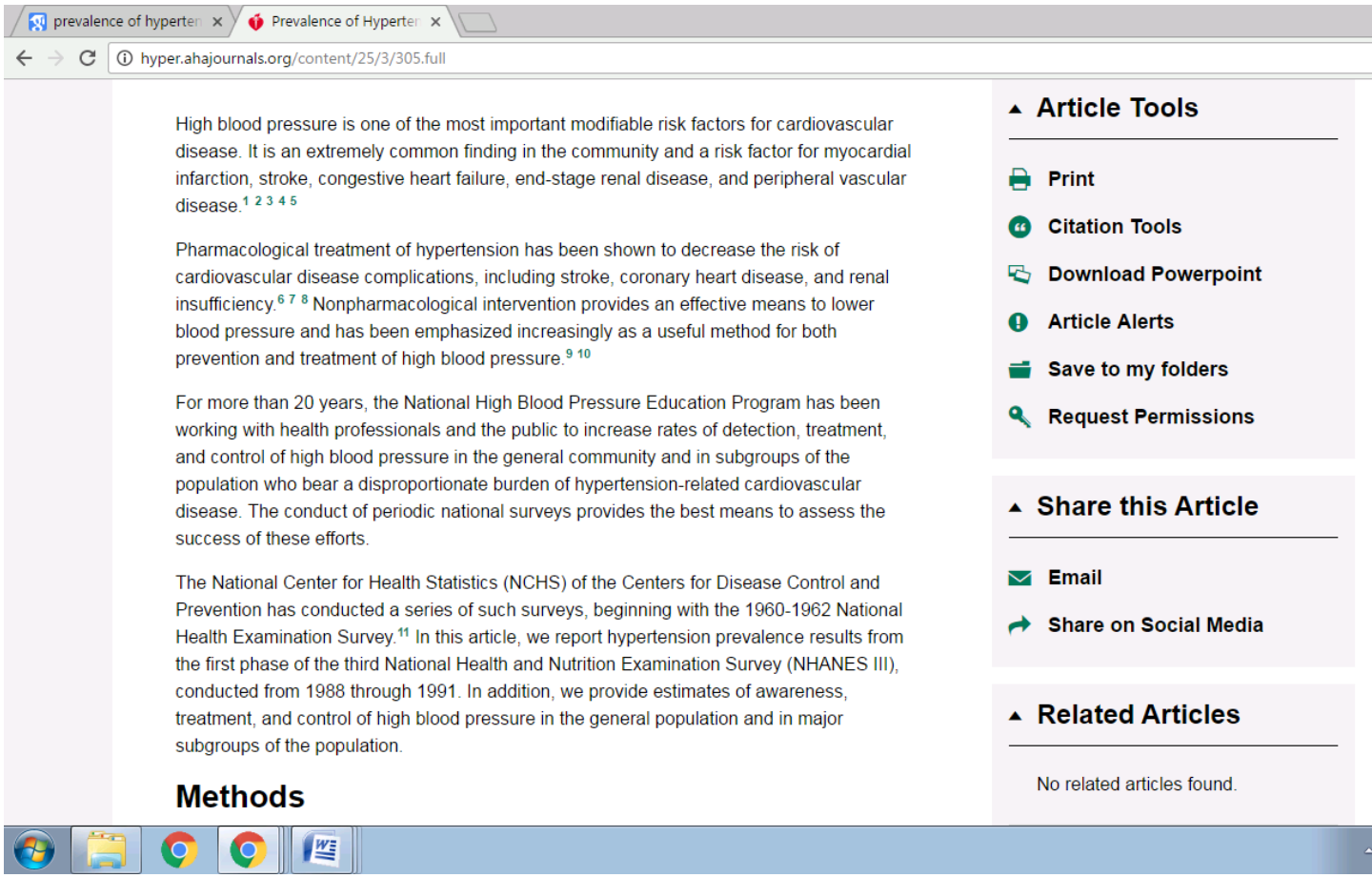
- **Establish context by providing a brief and balanced review of the published literature that is available on the subject.** The key is to summarize for the reader what is known about the specific research problem. This part of introduction should not represent a comprehensive literature review.

- **Rationale and justification for choosing this kind of research study.** Provide a clear statement of the rationale for your approach to the problem studied. This will usually follow your statement of purpose in the last paragraph of the introduction.

Example of a short introduction published in journal 'Hypertension' with an impact factor of 6.8

The students are requested to read the above paragraph and discuss the narrative flow

Article 1:



Text:

High blood pressure is one of the most important modifiable risk factors for cardiovascular disease. It is an extremely common finding in the community and a risk factor for myocardial infarction, stroke, congestive heart failure, end-stage renal disease, and peripheral vascular disease.[1] [2] [3] [4] [5]

Pharmacological treatment of hypertension has been shown to decrease the risk of cardiovascular disease complications, including stroke, coronary heart disease, and renal

insufficiency.[6] [7] [8] Nonpharmacological intervention provides an effective means to lower blood pressure and has been emphasized increasingly as a useful method for both prevention and treatment of high blood pressure.[9] [10]

For more than 20 years, the National High Blood Pressure Education Program has been working with health professionals and the public to increase rates of detection, treatment, and control of high blood pressure in the general community and in subgroups of the population who bear a disproportionate burden of hypertension-related cardiovascular disease. The conduct of periodic national surveys provides the best means to assess the success of these efforts.

The National Center for Health Statistics (NCHS) of the Centers for Disease Control and Prevention has conducted a series of such surveys, beginning with the 1960-1962 National Health Examination Survey.[11] In this article, we report hypertension prevalence results from the first phase of the third National Health and Nutrition Examination Survey (NHANES III), conducted from 1988 through 1991. In addition, we provide estimates of awareness, treatment, and control of high blood pressure in the general population and in major subgroups of the population.

Article 2:

Source : NEJM.

The students are asked to quote the impact factor of the journal before starting to read the text.

[[The impact factor of NEJM **is 59.58** in 2015.]] So try to comprehend the language style carefully.

Text:

Childhood obesity is a major health problem in the United States.1 The prevalence of a body-mass index (BMI; the weight in kilograms divided by the square of the height in meters) at the 95th percentile or higher among children between the ages of 6 and 11 years increased from 4.2% in 1963–1965 to 15.3% in 1999–20002,3 and may have plateaued during the first decade of the 21st century.4,5 Although trends in the prevalence of obesity are documented, surprisingly little is known about the incidence of childhood obesity. Examining incidence may provide insights into the nature of the epidemic, the critically vulnerable ages, and the groups at greatest risk for obesity.

National data on the incidence of pediatric obesity to date have pertained only to adolescents transitioning to adulthood. A study that was based on data from the National Longitudinal Study of Adolescent Health showed that the 5-year cumulative incidence of obesity among persons who were 13 to 20 years of age in 1996 and 19 to 26 years of age in 2001 was 12.7%, ranging from 6.5% among Asian girls to 18.4% among non-Hispanic black girls.[6] However, since many of the processes leading to obesity start early in life,[7] data with respect to incidence before adolescence are needed.

We report here the incidence of obesity according to data from a large, nationally representative longitudinal study of children who were followed from entry into kindergarten to the end of eighth grade (ages 5 to 14 years); the study included direct anthropometric measurements at seven points between 1998 and 2007.