

Medical Editing Sample – Before & After: Clinical Research Summary Enhanced for Clarity, Accuracy, and Publication Readiness



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- Published On: [MedLexis](#)
- May 11, 2025

Framing Introduction

This editing sample demonstrates how MedLexis elevates complex clinical research writing into a clear, accurate, and publication-ready format. The *Before* version presents a typical raw draft—scientifically sound but lacking precision, flow, and editorial polish. The *After* version reflects MedLexis’s expert editing approach, enhancing clarity, correcting language and terminology, and aligning with professional medical writing standards. This transformation

illustrates our commitment to editorial excellence, scientific integrity, and client-focused precision.

At-a-Glance: Before vs. After Editing

Feature	Before Editing	After Editing by MedLexis
Clarity	Dense, imprecise phrasing with jargon overload	Streamlined, reader-friendly language
Scientific Accuracy	Contains vague or inconsistent terminology	Terminology refined and aligned with medical standards
Grammar & Syntax	Awkward sentence structures and punctuation issues	Polished syntax and flawless grammar
Flow & Readability	Poor logical flow, hard to follow	Improved coherence and narrative structure
Publication Readiness	Requires major revisions before submission	Ready for peer-reviewed publication or stakeholder review

Before Editing – Unrefined Client Version

A study was done to see if semaglutide helps reduce cardiovascular problems in patients who have type 2 diabetes. It was a randomized clinical trial with over 3,000 people that took place in many countries. The patients were adults who had diabetes and already had heart disease or other health risks, and they got either semaglutide or a placebo for a little more than 2 years. The results showed that fewer people had heart attacks or strokes in the semaglutide group compared to the placebo. There was also some improvement in kidney outcomes. Some people in the semaglutide group had problems with their eyes, and some stopped the treatment because of side effects like nausea.

After Editing – MedLexis Refined Version

The SUSTAIN-6 trial was a multicenter, randomized, double-blind, placebo-controlled study designed to evaluate the cardiovascular safety of once-weekly subcutaneous semaglutide in patients with type 2 diabetes mellitus (T2DM) at high cardiovascular risk.

A total of 3,297 participants were enrolled across 20 countries and followed for a median of 2.1 years. Semaglutide significantly reduced the incidence of major adverse cardiovascular events (MACE)—including cardiovascular death, nonfatal myocardial infarction, or nonfatal stroke—by 26% compared to placebo (hazard ratio [HR], 0.74; 95% CI, 0.58–0.95; $p=0.02$). Secondary benefits included a reduced risk of nonfatal stroke and progression of nephropathy.

Although the treatment was generally well tolerated, semaglutide was associated with a higher rate of retinopathy complications, particularly among patients with pre-existing retinopathy or poor baseline glycemic control.

Key Revisions / Editor's Notes

- 1. Clarified Study Objective and Design**
 - Replaced vague phrasing with the trial name (*SUSTAIN-6*) and a complete description of study design and methodology.
- 2. Specified Study Population and Duration**
 - Added details on patient characteristics, number of participants, global reach, and follow-up time for scientific transparency.
- 3. Refined Key Outcomes with Quantitative Precision**
 - Transformed general language into accurate reporting of MACE results, hazard ratios, and statistical significance.
- 4. Integrated Secondary Findings with Clinical Significance**
 - Highlighted secondary outcomes (stroke, nephropathy) as therapeutic advantages to support clinical decision-making.
- 5. Elevated Safety Profile Description**
 - Summarized the nature and context of retinopathy concerns, reflecting balanced medical reporting.

6. **Enhanced Language, Flow, and Professional Tone**

→ Improved cohesion, syntax, and tone to meet journal-level quality and MedLexis's editorial standards.

Editing Tier

Service Level: Advanced Technical + Scientific Editing

Includes in-depth restructuring, medical accuracy refinement, terminology correction, data verification, tone elevation, and journal-style optimization.

MedLexis Portfolio Disclaimer

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All medical information contained herein is derived from publicly available, evidence-based sources and is crafted solely to demonstrate the professional medical writing expertise of MedLexis. For any real-world medical concerns, always seek the guidance of a qualified healthcare professional.

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