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## A PEARL of wisdom on Pearls

**F**or the last 5 years, I've had the opportunity to peer review Pearls articles submitted for publication in *CURRENT PSYCHIATRY*. In that time, I have read many worthwhile papers written by authors who may not be entirely clear about what constitutes a Pearl. The mnemonic PEARL could help authors:

- decide if their article or idea is appropriate for Pearls
- construct the article to conform to the Pearls format
- begin writing a Pearl.

**P**recise. A Pearl should make an accurate and concise statement. It should not be an elaborate or generalized idea based on either limited or copious information.

**E**asy to remember. Lengthy, highly detailed articles may be helpful and informative but are not consistent with the purpose of Pearls.

**A**lert. A Pearl should alert a physician to identify a problem, diagnosis, or adverse effect that he or she might otherwise miss or take unnecessary time to identify. Classic examples are the "handshake diagnosis" of hyperthyroidism,<sup>1</sup> or the "3 little words that can diagnose mild cognitive impairment."<sup>2</sup>

**R**eferences. A professional article of any length should include references. References add immediate credibility to the information presented. For a Pearl, even 1 reference is acceptable. A writer can eas-

ily search PubMed and the Internet to find references to confirm or support his or her ideas.

**L**ess is more. Architect Mies van der Rohe's minimalist concept applies to Pearls. A Pearl—like its namesake—is small, polished, and valuable. Simplicity is its essence.

I hope this mnemonic is useful for clinicians interested in sharing their ideas or experiences to help others in the field. I look forward to reviewing many more Pearls in the future.

### References

1. Bedell SE, Graboys TB. Hand to hand. *J Gen Intern Med.* 2002;17(8):654-656.
2. Steenland NK, Auman CM, Patel PM, et al. Development of a rapid screening instrument for mild cognitive impairment and undiagnosed dementia. *J Alzheimers Dis.* 2008;15(3):419-427.

**Editor's note:** Pearls are brief, focused articles featuring practical advice from psychiatrists about confronting clinical and practical challenges in everyday practice. Submissions should be no more than 500 words. To view Pearls authors' instructions, visit [CurrentPsychiatry.com](http://CurrentPsychiatry.com) and click on the "Information for Authors" link or contact Erica Vonderheid, Senior Associate Editor, *CURRENT PSYCHIATRY*, at [erica.vonderheid@dowdenhealth.com](mailto:erica.vonderheid@dowdenhealth.com).

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