

The Oxford comma in academic writing: a matter of preference?

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Abstract: An Oxford comma is a punctuation mark that immediately precedes any of the conjunctions “and”, “or”, or “nor” before the last item in a list of three or more. We aim to settle the debate whether or not it should be used in academic writing. We conducted a literature study, identifying cases of (potential) ambiguity due to Oxford comma preference in a sample of articles from academic journals. We included 45 articles, evenly distributed over nine subjectively chosen journals. Two journals explicitly preferred the use of an Oxford comma, four journals did so implicitly, and three journals implicitly preferred not to use an Oxford comma. We found five examples of potential ambiguity that were resolved with an Oxford comma. On the other hand, we found three examples of ambiguity that could have been prevented if an Oxford comma had been used. It seems an Oxford comma does indeed reduce ambiguity in academic writing.

Keywords: grammar; serial comma; author instructions; copyeditor; style

0. Prologue

This is the manuscript we submitted for consideration for publication in the renowned Christmas edition of the *British Medical Journal*. Following peer review and discussion in the manuscript committee, the editorial decision sadly was not to publish it.

As the article was specifically tailored towards this end, we felt that a submission towards a different journal would be a bit out of place. Therefore, we decided to make it available through our own means. Since the reviewer comments were probably the most entertaining remarks we have ever received, we have included these at the end of the article (Appendices).

1. Introduction

Writing, and in particular academic writing, poses quite a challenge. To get a clear and concise message out on paper, preferably with some good-looking figures, can be a painstaking job. Additionally, there are all these rules that must be obeyed. Aside from obvious methodological requirements, each journal has their stylistic preferences. Thankfully author instructions exist.

One very particular stylistic issue is that of the so-called ‘Oxford comma’. The Oxford (or serial) comma is a comma that immediately precedes any of the conjunctions “and”, “or”, or “nor” before the last item in a list of three or more. The main reason for using the Oxford comma is to avoid ambiguity.¹ A well-known example is illustrated in Figure 1. Newspaper articles rarely include this comma, perhaps because journalists need to economize on typographic space. On the other hand, academic writing often does, but it varies per journal.² Though the punctuation mark bears the name of Oxford, it has been embraced more in the United States than in the United Kingdom.¹ As it seems, a seemingly

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I would like to thank my parents, Mrs Claus, and the Grinch

(a)



I would like to thank my parents, Mrs Claus and the Grinch

(b)

Figure 1. A well-known example regarding the use of the Oxford comma: (a) The Oxford comma is used; (b) The Oxford comma is not used.

trivial matter on punctuation has sparked an avid debate, hence this piece of advice from a bestseller on punctuation:³

“There are people who embrace the Oxford comma and people who don’t, and I’ll just say this: never get between these people when drink has been taken.”

Is it just a matter of preference? Or is it possible to build a case for one or the other? On the subject of cases, perhaps the costliest omission of an Oxford comma was recently settled in court. A missing comma created such ambiguity that a dairy company was ruled to pay its drivers \$5 million in overtime. The difference between “... packing for shipment or distribution...” and “... packing for shipment, or distribution...” was considered decisive. Consequently, the law has been changed.⁴

As this year’s events demonstrated, when in need the world looks to science for answers. Therefore, the ever-accumulating body of scientific evidence should be presented in an unambiguous manner. To that end, we set out to identify possible examples of ambiguity due to Oxford comma preference in a sample of articles from academic journals.

2. Materials and Methods

2.1. Data sources

For each of the nine subjectively selected journals listed in Table 1, starting with the first issue of 2020, we included the first five research articles. Other types of text (e.g., editorial, educational, and comment sections) were excluded. In addition, the respective author instructions were checked on the preferred use of the Oxford comma. If none were explicitly stated, the author instructions were screened for the implicit (i.e., applied) preference regarding the Oxford comma.

2.2. Data extraction

For each included article, we thoroughly searched the main text (i.e., abstract, tables, and legends) for lists containing three items. Technically, it would be possible for ambi-

Table 1. Selected Journals for analysis

Journal	Abbrev	Author instructions	Oxford comma preference
The British Medical Journal	BMJ	For Authors/Article Types and Preparation/House Style/Punctuation/	Minimal commas, but use commas before the "and" and "or" in lists.
The Lancet	Lancet	Submit a Paper/the Lancet/Information for Authors/Guideline for Authors PDF/	We use a comma before the final "and" or "or" in a list of items.
The New England Journal of Medicine	NEJM	Author Center/Preparation Instructions/New Manuscript/Key Journal Style Elements/	Not stated, implicitly OC+
Journal of Bone and Joint Surgery	JBJS	Journal Info/Author Resource Center/Instruction for Authors/Manuscript Structure/	Not stated, implicitly OC+
American Journal of Sports Medicine	AJSM	Journal Info/Submission Guidelines/AJSM Submission Guidelines/Text/	Not stated, implicitly OC+
British Journal of Sports Medicine	BJSM	Author/Submission Guidelines/Writing and Formatting/Style/	Not stated, implicitly OC-
Canadian Medical Association Journal	CMAJ	Author & Reviewers/Submission Guidelines/Research/	Not stated, implicitly OC-
South African Medical Journal	SAMJ	Author/Author Guidelines/Manuscript Preparation/General Article Format/	Manuscripts must be written in UK English, implicitly OC-
The Medical Journal of Australia	MJA	For Authors/MJA Instruction for Authors/MJA Style/Overall Style/	Not stated, implicitly OC+

* by 'implicitly' we mean that in the body of author instructions this OC preference was used

Table 2. Examples of (possible) ambiguity

OC+		ref
	... to the questions for repeat attendances, over-the-counter or other medication, and antibiotic use it was assumed ...	10
	... was logistic regression with treatment, geographical location, and MRI and CRP status at screening included in the model.	12
resolved	... the use of noninvasive imaging of the cervical vessels (carotid duplex, CT angiography, and MR angiography) ...	15
	... inclusion criteria were an age of 18 to 85 years, presence of symptomatic paroxysmal atrial fibrillation (...) or symptomatic persistent atrial fibrillation with a rhythm-control strategy, and regular alcohol consumption ...	19
	... there was no relationship between age, sex, and hand dominance and WOSI scores.	35
unresolved	... have used either the anterior approach, a 2-incision technique, or minimally invasive posterior approaches for total hip arthroplasties, ...	
created	-	-
OC-		ref
resolved	Thirteen thousand, seven hundred and thirteen distal radial fractures were analyzed.	20
unresolved	-	-
created	... some form of preoperative counselling outlining the general flow of the hospital stay, pain management and postoperative physical therapy, ...	35
	... when applied to the HAPO, United Arab Emirates and Brazilian cohorts.	43
	Leukaemias, myeloproliferative and myelodysplastic diseases	49

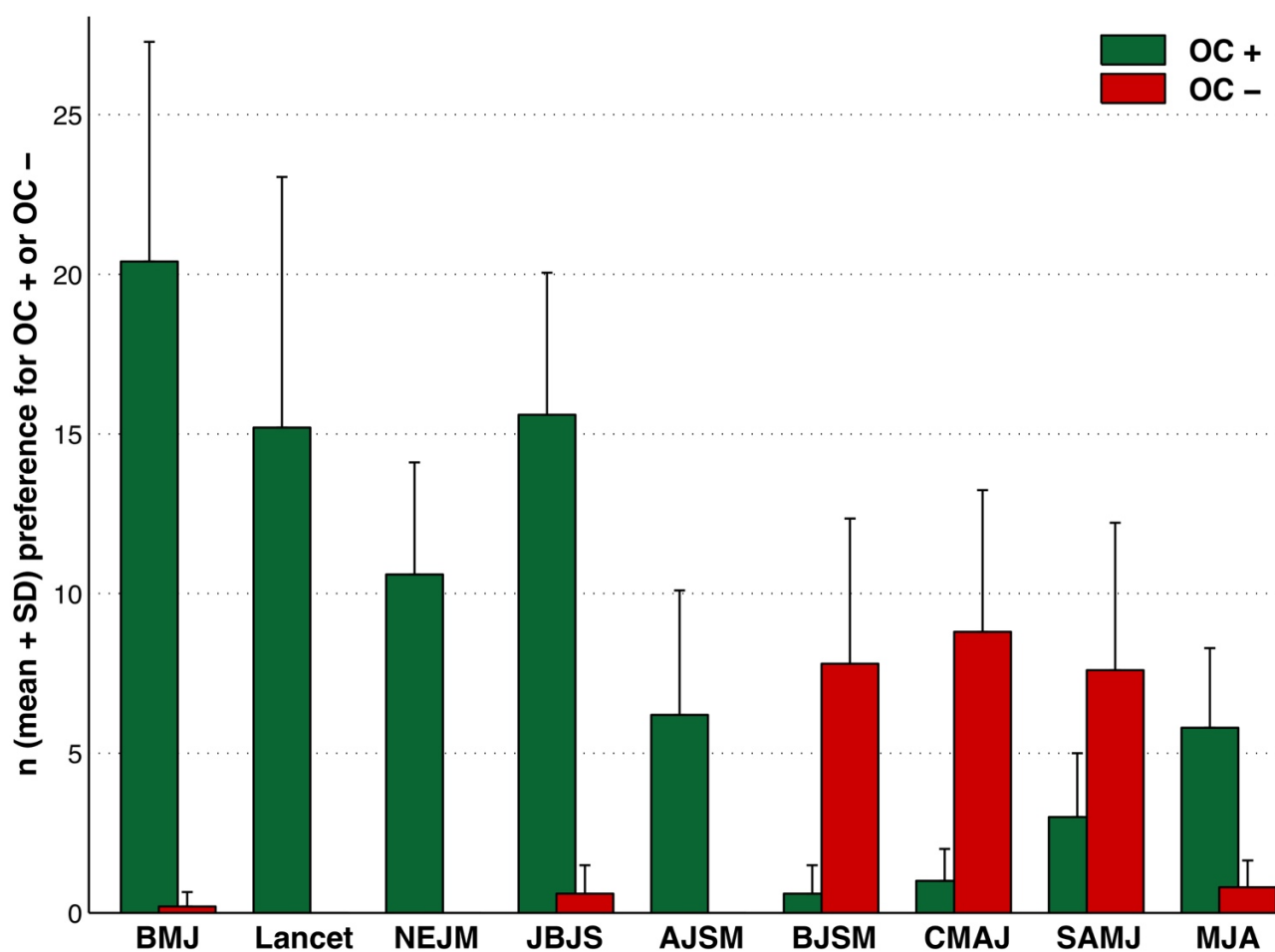


Figure 2. The preference for Oxford comma usage for the identified lists of three items in the respective journals

guity to occur in lists containing four or more items. Since this is a lot less likely, we stuck to the three-item-list. We did not include the list of authors, references, nor the required statements and acknowledgements for our analysis. If a list used semicolons instead of commas, it was excluded.

For each identified list of three items, we registered (by mutual agreement) whether an Oxford comma was used (OC+) or not (OC-). Consequently, we argued whether this choice influenced possible ambiguity, thus resulting in four categories (i.e., no effect versus unresolved, resolved, or created ambiguity). If a list was an exact copy of one previously identified, we scored it as a repetition (and was excluded from further analysis). Examples that illustrate possible ambiguity were saved.

2.3. Statistical analysis

For each article the number three-item-lists was totaled per category, OC+ or OC-. The mean and standard deviation (SD) were calculated per journal.

3. Results

We included five articles for each of the following journals: BMJ,⁵⁻⁹ Lancet,¹⁰⁻¹⁴ NEJM,¹⁵⁻¹⁹ JBJS,²⁰⁻²⁴ AJSM,²⁵⁻²⁹ BJSM,³⁰⁻³⁴ CMAJ,³⁵⁻³⁹ SAJM,⁴⁰⁻⁴⁴ and MJA.⁴⁵⁻⁴⁹

The (first) institution of the first author was most often located in the United States (nine times), followed by Australia (six times), and China, the United Kingdom, and South

Africa (five times each). The average number of pages (\pm SD) per article was highest for the BMJ (10.6 ± 1.51 pages), and lowest for the SAMJ (5.6 ± 0.55 pages).

The average number (\pm SD) of Oxford commas used (or both) per journal article is shown in Figure 2. Note that two instances of OC- in the JBJS can be ascribed to the direct quoting of statements made elsewhere (which also was the subject of the study).²¹

Table 2 shows a collection of examples of (possible) ambiguity due to Oxford comma preference. The presence of an Oxford comma resolved five phrases that would otherwise have been ambiguous, whereas its omission resolved one case of ambiguity. For OC+ we found one example of unresolved ambiguity. Finally, using an Oxford comma did not create any confusion, whereas not using an Oxford comma resulted in three examples of an ambiguous phrase.

Also noteworthy are the about seventy uses of an Oxford comma (albeit including 43 repetitive phrases) in a single article, including the title.⁶ That the first author whose institution is part of the University of Oxford uses the analogous comma accordingly.¹⁰ And that the use of three Oxford commas in one single sentence is the current record:²²

"Outcomes were 5-year hip survival free from revision (all-cause revision, revision for dislocation and/or subluxation, and revision for periprosthetic fracture), patient survival (30 days, 1 year, and 5 years postoperatively), and intraoperative complications."

4. Discussion

Across our sample of nine academic journals there exists no consensus with regard to the use of an Oxford comma. As Table 1 shows, a priori there were two journals that explicitly stated their preference (i.e., the BMJ and the Lancet). Four journals had an implicit preference in favour of the Oxford comma (three from the United States, one from Australia), and three journals had the implicit preference to refrain from using an Oxford comma (United Kingdom, Canada, and South Africa). This is also apparent from Figure 2, which shows a distribution accordingly. However, there was one article that, despite the journal preference, used four Oxford commas (and chose not to on two occasions).⁴⁰

In addition to this geographical association, the more pages an article covered, the larger the number of three-item-lists and possible Oxford commas. We opted not to correct for this bias, since this would also imply a correction for both size and quantity of Tables and Figures. As Figures tend not to improve by incorporating a large body of text, this would invoke a negative skew with regard to the more orthopaedic oriented journals (that thankfully rely considerably on imaging).

We found five examples where the use of an Oxford comma resolved possible ambiguity (Table 2). The first example indicated that 'antibiotic use' is a distinct category (versus 'over-the-counter or other medication').¹⁰ The second example specified that 'MRI and CRP status' are a combined parameter.¹² The third example shows that a 'carotid duplex' isn't a combination of 'CT and MRI angiography', which wouldn't be such an unlikely possibility for those unfamiliar with these diagnostic modalities.¹⁵ The fourth example is a bit more complicated, but implies that the 'regular alcohol consumption' is a separate factor, and not so much concomitant to the 'persistent atrial fibrillation with a rhythm-control strategy'.¹⁹ The last example might lose its luster a little if explained, but let's just say that the meaning of 'sex' could be interpreted differently when paired with 'hand dominance'.²⁹

We found one case of unresolved ambiguity. The example concerns the surgical approach used for total hip arthroplasty (i.e., the operation of the century).⁵⁰ The ambiguity persists, despite the use of an Oxford comma. Whether or not the 'anterior approach' consists of two incisions, or the '2-incision technique' is a separate entity, remains unclear. Moreover, the use of the word 'either' only adds to the confusion.³⁵ On the other hand, we found one example where the use of an Oxford comma would have created ambiguity,

implying the existence of three groups (with the respective sizes of 13,000, 700, and 13 each).²⁰

In contrast, not using an Oxford comma resulted in three examples of an ambiguous phrase. In the first example it is unclear if ‘pain management’ and ‘postoperative physical therapy’ determine the ‘general flow of the hospital stay’, or if another description explaining ‘flow’ should be available somewhere.³⁵ In the second example, even if the acronym HAPO (hyperglycaemia and adverse pregnancy outcome) is known, it remains unclear how many cohorts are involved. Are the ‘United Arab Emirates and Brazilian cohorts’ a subcategory of the HAPO study, or are three different cohorts implied?⁴³ The last example represents a category from a Table. In line with the second example, we are unsure if ‘myeloproliferative and myelodysplastic diseases’ are an elaboration on ‘leukaemias’, or represent the second and third subcategory.⁴⁹

In short, our results presented in Table 2 would suggest a 5-1 win for the OC+ in the first leg, and a 1-3 defeat for the OC- in the return game. Therefore, it seems that (in a sample of 45 articles) the use of an Oxford comma resolved five cases of possible ambiguity and would have resolved three more cases, if it had been used. In a recent BMJ blog, Jeffrey Aronson concluded that:¹

“It is better to concentrate on avoiding ambiguity, rather than relying on punctuation to resolve it; do this by writing clearly. In an unambiguous list of items, it is a matter of preference whether to use an Oxford comma.”

While we fully agree with the first part of his conclusion, the second part presents with a *sine qua non*: the list of items has to be unambiguous before it can be a matter of preference whether or not to use an Oxford comma. And the main reason for using the Oxford comma is ... to avoid ambiguity.¹

This is why, based on the current data, we would recommend a low threshold with regard to the Oxford comma. Consistent use improves readability, reduces ambiguity, and comes without drawback.

This study has several limitations. The main limitation being that the selection of the nine journals was completely subjective, and the selection of articles was based on publication date and sequence (which for the AJSM meant that all five focused on shoulder pathology). The second limitation is that we carefully read each article looking for a list of three items. Therefore, it may be possible that we might have missed a few, at best. And, as always, future research is needed to confirm the current findings.

5. Conclusions

Though the debate whether or not to use an Oxford comma is of long standing, this is the first study that provides – by sampling of nine academic journals – evidence that using an Oxford comma does indeed reduce ambiguity.

6. Epilogue

Throughout this manuscript (and according to the aforementioned methods, however with the exclusion of Table 2) fifteen Oxford commas were used, three of which resolved ambiguity. On one occasion we did not use an Oxford comma as an explicit example of ambiguity. The sentence directly following ‘statistical analysis’ could have possibly resulted in ambiguity, if our Oxford comma use throughout the article had been inconsistent. There was one repetition that we excluded from this postscript analysis.

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Appendix A

Overall, this is a great article. It's an interesting and rarely discussed topic. Would recommend for publication with minor edits for the Christmas Issue.

Appendix B

Let's eat, Grandma!

Let's eat Grandma!

As they say, commas save lives. Nowhere is this more important than in the world of the academic – and in particular, the medical – journal, where a missing comma may be as good as a slip of the scalpel in parsing an author's meaning. As a person of somewhat advanced age who is likely to become a patient of the authors or their colleagues at some point in my declining years, I am gratified to know that these two surgeons have cut to the quick of the all-important matter of the Oxford (a/k/a serial) comma in the journal articles they access to bone up on their skills and knowledge. After all, the hip, shoulder, or knee, benefitting from their cogent critique and clarification of the comma conundrum in medical writing, could be my own!

That said, I have one disagreement with the authors, outside of the obvious one of missing words and non-parallel phrasing in a few places. The restriction of their research to lists of only three items is inexplicable to me, as it is quite possible to confuse a reader in a list of half a dozen serial items as readily as in a list of three. I have been that reader. More than once. And I'm old. I've read a lot. Sometimes, I've become virtually commatose due to the ambiguity of a missing comma.

There must always, however, be serious research left on the table for want of resources to pursue it in the depth it deserves, no matter the possible consequences to public health and welfare. I applaud these authors for the spirit(s) that moved them to weigh in on this global issue and at least begin to bring the rigor of the scientific method to bear on the debate.

Appendix C

Reviewer #3 went through great lengths (i.e., a pdf of six pages) to provide constructive criticism. We included a small selection that preserves anonymity and implemented a number of corrections throughout the manuscript.

My conclusion is that authors should be encouraged to craft text such that it avoids ambiguity that might be introduced by the inclusion of a list of items, having learned, or been taught, to identify such potential ambiguity. If a list of items is unavoidable and is unambiguous, whether a serial comma is used or not, its use should be a matter of preference. Journals may prefer to recommend its use or not, as a matter of house style. Within an individual article it should be consistently used or not at all.

Introduction. I am not alone, I believe, in my enjoyment of what the authors describe here as "good-looking figures", although I prefer to seek them in the pages of Playboy and the like, rather than in bioscience journals. The authors might like to consider using a different adjective here.

Discussion. The serial comma does not necessarily improve readability; the nearly unreadable three comma sentence that the authors quote (with or without its serial commas) is clear evidence of that. Nor, if ambiguity can be otherwise avoided textually, should the comma be used to avoid ambiguity, although that is its main purpose when used. Nor does it come without drawbacks, since it can occasionally itself create ambiguity.

Discussion. Contrary to this assertion, further research is not always needed, although one rarely sees anyone admit that research in their area should be abandoned.