

Writer's Block in Biomedical Research: Cognitive Load, Self-Regulation and Practical Strategies

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Abstract

Writer's block is a recognized obstacle to academic productivity, yet it remains underexplored in biomedical research. Biomedical scientists work in a particularly demanding writing environment marked by intense publication pressure, technical complexity and rigorous peer review conditions that heighten cognitive and emotional barriers to consistent writing. This narrative review synthesizes evidence-based and experiential strategies for overcoming writer's block in this context. The causes and types of writer's block are analyzed and mental, behavioral and environmental interventions are examined. Two promising techniques for biomedical writers are highlighted: constructing a detailed hierarchical outline before drafting and using voice dictation as the primary mode of composition. Combining structured outlining with dictation can substantially reduce the effort required to produce a first draft, turning scientific writing from a daunting task into a manageable scholarly routine.

Keywords: Writer's Block; Academic Writing; Dictation; Outlining; Publication Productivity

Introduction

The ability to communicate scientific findings in writing is among the most important skills a biomedical researcher can possess. A major discovery that is never published is a loss not only to the individual scientist but also to the wider scientific community. Yet for many researchers, writing is a source of deep anxiety. Writer's block generally defined as a temporary or ongoing inability to produce written work despite the desire and need to do so is reported by many graduate students, postdoctoral fellows and experienced faculty in the life sciences [1]. Even researchers deeply engaged in their

science may find that their writing time is scattered and unproductive; for clinician-scientists who juggle research and full-time patient care, this problem is especially severe [2].

The term "writer's block" was popularized in the psychological literature shortly after the Second World War, but systematic research on its prevalence and solutions in academic science remains limited [3,4]. In the biomedical field, the stakes are especially high: grant cycles, tenure clocks and the pressure to publish in top-tier journals create an environment in which the psychological impact of writing difficulties is amplified [1,5]. Short, regular writing sessions have been shown to be far more effective than infrequent, long efforts, yet most faculty members write far less consistently than they could [6]. This review has four objectives: 1) to identify the specific forms of writer's block that affect biomedical scientists; 2) to examine the evidence on mental, behavioral and environmental strategies for overcoming it; 3) to advocate for two underused yet highly effective techniques structured hierarchical outlining and voice dictation drawing on available empirical evidence and practical insights from experienced academic writers and 4) to suggest directions for future research on this important yet overlooked topic.

Understanding Writer's Block in Biomedical Science

Definition and Prevalence

Writer's block is best understood not as a single phenomenon but as a collection of related difficulties that collectively reduce written output [7]. These challenges may be primarily emotional (anxiety, self-doubt, shame), primarily cognitive (difficulty organizing thoughts, uncertainty about argument structure) or primarily behavioral (avoidance, procrastination). In academic settings, they often co-occur and reinforce one another (Fig. 1).

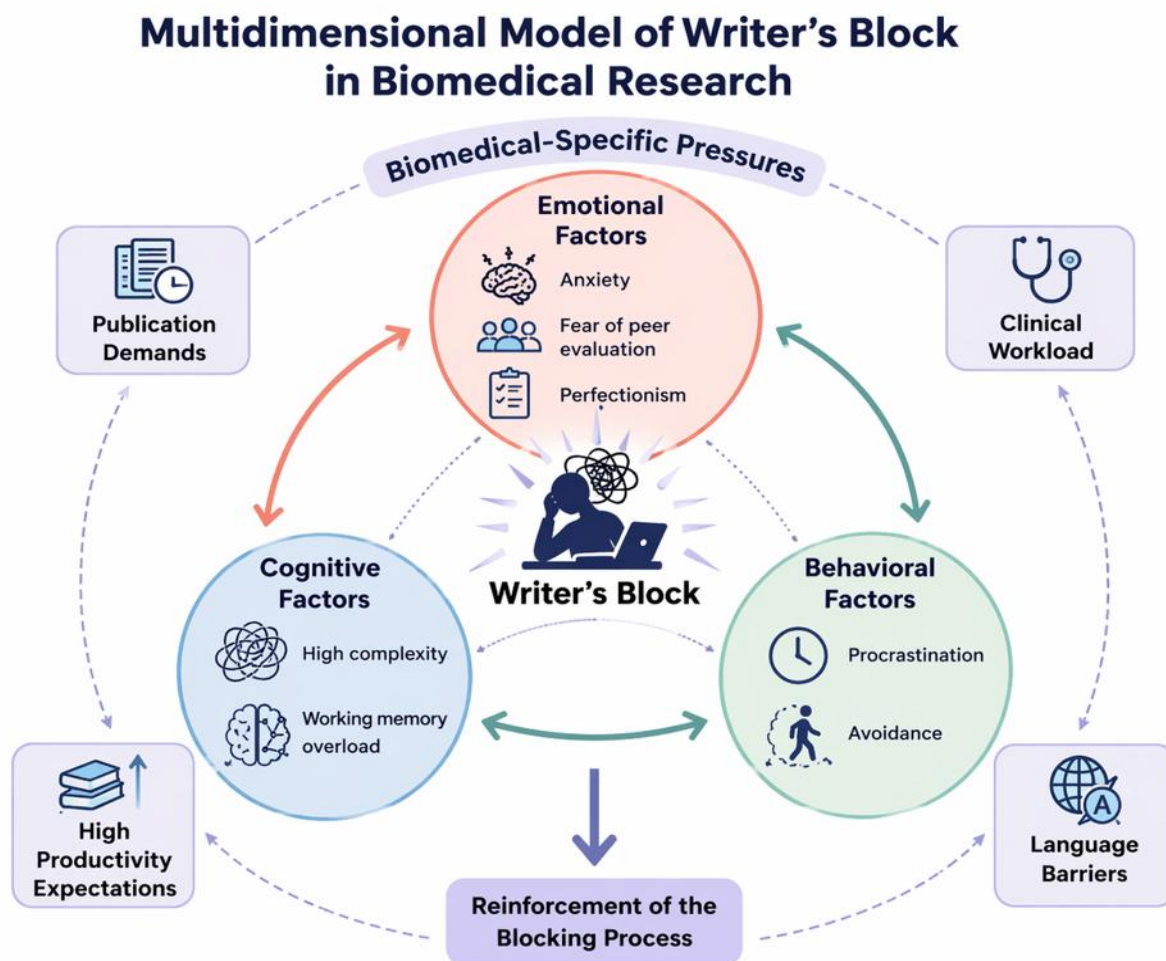


Figure 1: Multidimensional model of writer's block in biomedical research. Writer's block is conceptualized as the result of interacting emotional, cognitive and behavioral factors. Emotional components include anxiety, fear of peer evaluation and perfectionism; cognitive factors relate to high complexity and working memory overload; behavioral elements include procrastination and avoidance. These domains are embedded within biomedical-specific pressures, such as publication demands, clinical workload and language barriers, which further reinforce the blocking process.

A recent survey of 146 experienced writers found that physiological factors life stress, anxiety, depression and burnout were the most commonly self-reported cause of blocking, followed by motivational factors such as evaluation anxiety and reduced intrinsic motivation; cognitive and behavioral factors were less often cited [7]. Importantly, blocks most frequently occurred during the articulation or composition stage of the writing process when ideas must be turned into sentences rather than during idea generation [7]. Writers who wrote daily reported markedly shorter blocks than those with less consistent habits [7]. In academic settings, most doctoral students encounter significant writing challenges at some point in their training and these challenges are associated with delayed degree completion, lower publication output and higher dropout rates [8,9]. Among experienced researchers, writing habits are often described as irregular or crisis-driven, with text produced only when deadlines become urgent [10]. Contributing factors include low self-confidence, fear of rejection or competition and the absence of a structured framework [1,11].

Causes and Contributing Factors in Biomedical Research

Biomedical scientists encounter multiple writing-related stressors that are either absent or less intense in other academic disciplines.

Publication Pressure

The “publish or perish” imperative is especially intense in the biomedical sciences, where career advancement depends on a steady stream of publications in journals with stringent acceptance standards [5]. Time constraints have been identified as a major barrier for clinicians seeking to conduct and publish research and this pressure creates a paradox: the higher the stakes of a manuscript, the more debilitating writer’s block can be [2].

Technical Complexity

Biomedical writing requires managing complex empirical data, detailed methodology, statistical intricacies and interpretive arguments simultaneously a cognitive load that can overwhelm working memory and leave the author paralyzed at the paragraph level [12].

Fear of Peer Judgment

The prospect of harsh criticism from anonymous reviewers is a potent source of anticipatory anxiety that can prevent writing [13]. Perfectionism the belief that any draft submitted for review must already be essentially flawless is a common, self-defeating manifestation of this fear [1,14]. Procrastination, sometimes termed “academic trait procrastination,” frequently co-occurs with perfectionism and compounds the block [15].

Insufficient Training

Many doctoral and postdoctoral programs in the biomedical sciences offer little or no formal instruction in scientific writing, leaving trainees to develop their skills independently [16]. Dedicated writing courses remain rare despite the strong emphasis on publishing [17]. Junior scientists consistently report needing both emotional support and a structured framework when drafting their first manuscripts [18].

Language Barriers

For researchers whose first language is not English, writing a scientific manuscript introduces an additional layer of difficulty that can precipitate or prolong blocking [15,18]. Qualitative accounts describe how non-native English speakers may avoid writing altogether out of shame, miss professional opportunities because they cannot draft an abstract or cover letter and find even routine correspondence torturous [18].

A Typology of Writer’s Block

It is both clinically and practically useful to distinguish between two broad categories of writer’s block because each requires different remediation strategies (Fig. 2).

Mental and emotional blocks primarily stem from psychological factors such as perfectionism, fear of failure, imposter syndrome or anxiety about peer evaluation. The author understands, in theory, what needs to be written but struggles to write it.

Structural and conceptual blocks arise when the author does not yet know what they want to say when the argument is unresolved, the data are ambiguous or the logical flow is unclear. No amount of motivational intervention will fix a block rooted in unfinished thinking.

Accurate diagnosis matters because applying emotional strategies to a structural problem (or vice versa) is unlikely to be effective. The outline-and-dictation approach discussed in Section 4 is valuable because it addresses both categories simultaneously: the outline clarifies structural ambiguity and dictation reduces the emotional activation required to produce a first draft.

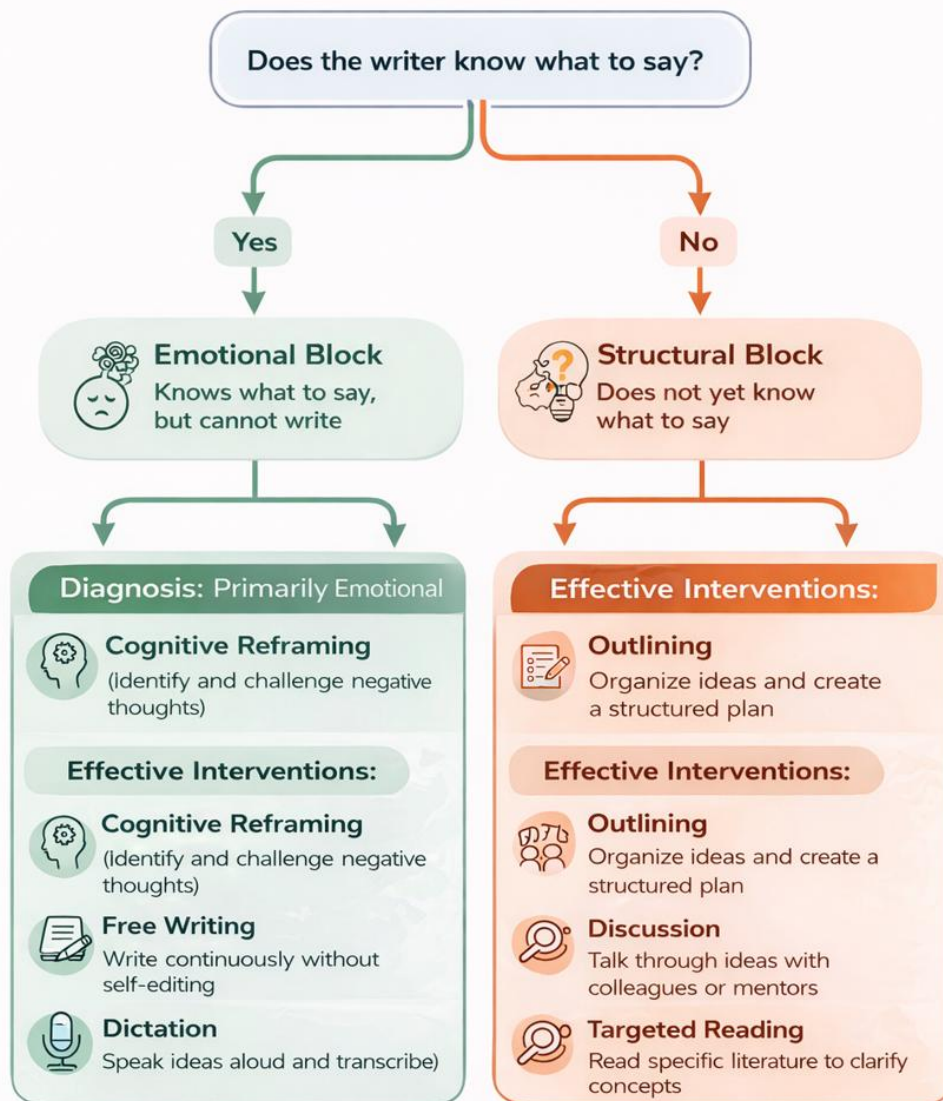


Figure 2: Typology and diagnostic framework for writer's block. A practical decision model that distinguishes two primary forms of writer's block. If the writer knows what to say but cannot write, the block is primarily emotional and may be addressed through strategies such as cognitive reframing, free writing or dictation. If the writer does not yet know what to say, the block is structural and requires clarifying ideas through outlining, discussion or targeted reading. Accurate diagnosis is essential for selecting effective interventions.

Strategies to Address Writer's Block: An Overview

A wide range of strategies for overcoming writer's block has been described in the writing pedagogy and cognitive psychology literatures. A useful clinical framework distinguishes mild blockage (addressed by revising expectations and breaking work into tasks), moderate blockage (addressed by creative exercises such as brainstorming, visioning and mind-mapping) and recalcitrant blockage (addressed by professional counseling) [19].

Mental and Emotional Approaches

Mindfulness and Stress Management: Mindfulness-based interventions including meditation, controlled breathing and body-scan exercises reduce anxiety and improve attentional control, both of which are closely linked to writer's block [20]. A qualitative study of mindfulness-based stress reduction among university students found substantial reductions in anxiety about academic evaluations [21]. Even brief mindfulness practices performed immediately before a writing session appear to reduce the perceived threat perfectionist writers associate with the blank page.

Cognitive Reframing: Cognitive behavioral techniques particularly identifying and disputing maladaptive beliefs about writing have a strong evidence base in the anxiety literature and have been effectively adapted to academic writing challenges [22]. Common unhelpful beliefs include “I can only write when I am inspired,” “My first draft must be polished,” and “A rejection of my manuscript is a rejection of me as a scientist.” Challenging these beliefs through structured journaling or with the support of a writing coach can lead to rapid improvements in writing frequency and output [23].

Setting Realistic Expectations and Embracing Imperfection: The notion of the “shitty first draft” the idea that good writing starts as bad writing and that the sole purpose of an initial draft is to generate raw material for revision has been widely embraced in writing education and is highly relevant to scientific writing [24]. The single most important habit change a blocked academic writer can make is to separate the creative stage of writing (generating text without judgment) from the editing stage (assessing and refining that text) [6]. When these two mental activities are combined, the inner critic hinders the inner creator, leaving the page blank. Abandoning the pursuit of a perfect first draft and simply getting thoughts down on paper is one of the best-established ways out of writer’s block [14]. The same principle underlies the advice many senior scientists give to early-career researchers: once something however rough is on the page, the task shifts from creation to revision, which most writers find less aversive [25].

Behavioural Techniques

Structured Writing Habits and Scheduled Sessions: One of the most robust findings in writing-productivity research is that writers who schedule short daily writing sessions even 30 to 60 minutes are far more productive over time than those who rely on irregular binge sessions [6,26]. Regular practice lowers the activation energy needed to start each session and ideas continue to develop during breaks, so the next session begins with more material ready. Treating writing like a recurring teaching commitment blocked out on the calendar, with a dedicated workspace has been advocated as a way to overcome the myth that one must wait for a “perfect time” to write [25]. In a large survey of experienced writers, those who reported writing every day had shorter blocks and were more likely never to have experienced writer’s block [7].

Time-Limited Writing Sprints: The Pomodoro Technique alternating 25-minute focused work intervals with 5-minute breaks was designed as a general productivity tool but has been enthusiastically adopted by academic writing coaches to make writing feel less overwhelming [15]. The bounded, clearly defined nature of the work intervals reduces procrastination and helps sustain focus.

Free Writing: Free writing continuously for a set period without pausing to correct, revise or evaluate has long been advocated as a way to bypass the inner critic and access the natural fluency of informal speech [27]. Focused free writing has been shown to empower young researchers by enabling discoveries during the writing process and by helping them learn to express themselves with confidence [28]. In the context of dictation, free writing and dictation share the same core principle: the author produces text without stopping to correct or rewrite, reserving all editing for the revision phase [17,28].

Physical Environment and Workspace Optimisation

The writing environment strongly shapes writing productivity. Research on environmental design and cognitive performance consistently shows that distractions ambient noise, visual clutter and digital notifications undermine the sustained attention needed for complex writing [29]. Non-academic internet use in a learning setting has been shown to impair performance regardless of cognitive ability, underscoring the importance of a disturbance-free environment [30].

Practical environmental interventions include designating a dedicated physical space for writing, using website blockers during writing sessions, establishing signaling conventions with colleagues (e.g., a closed door or “do not disturb” status) to protect uninterrupted writing time and addressing ergonomic factors such as seating posture and keyboard positioning to reduce physical discomfort during extended sessions [31].

The Outline-First, Dictation-Driven Approach: A Central Strategy for Biomedical Writers

Among the many strategies available to the blocked biomedical writer, two stand out for their ability to address both the structural and emotional causes of blockage and for their particular suitability to the demands of scientific manuscript preparation. Each is discussed in turn before their combined use is recommended (Fig. 3).

Constructing a Detailed Hierarchical Outline

The importance of outlining before drafting is well recognized in writing pedagogy, but in practice, it is often done superficially and therefore fails to realize its full potential [32,33]. The purpose of a manuscript outline is to create a “map” of the article before writing begins to establish a logical structure and ensure that the manuscript flows naturally [33]. A good outline makes it possible to see all parts of the article at once, identify sections that do not fit and clarify which elements still need to be added [17]. For complex scientific manuscripts, a detailed hierarchical outline is essential, specifying every argument, piece of evidence and logical transition before any prose is written [17]. The key insight is that outlining and drafting involve fundamentally different cognitive processes. Outlining is primarily a planning activity: it prompts the writer to think clearly about what is known and how each element supports the overall argument. Drafting is primarily a production activity: it requires the writer to turn structured thoughts into fluent prose. When these two activities are combined, the cognitive demand becomes multiplicative rather than additive and writer’s block becomes a predictable outcome. This point has been memorably made by an experienced non-fiction writer who spent two weeks lying on a picnic table under the trees, working out how to begin a long essay on pines; once a preplanned structure was established, the eventual article became both better organized and easier to produce [4]. Focus-group research with biomedical scientists who have adopted this method emphasizes that the outline embodies preparation and is not useful if constructed only minutes before dictation begins it must be carefully developed, ideally well in advance, to achieve full clarity before the writing session [17]. At the level of the individual sentence, the act of writing then shifts from creation to something closer to transcription a markedly less intimidating cognitive task, compared with the traditional writing process where the different components of the writing process compete for working memory [34]. The outline also provides a natural opportunity for collaboration. Sharing the outline with co-authors and supervisors before any prose is written allows the research team to align expectations about content and structure, so structural disagreements are resolved when they are easy to fix, rather than during revision of a completed draft [17]. Experienced researchers often develop large parts of the outline even before all results are available, using empty tables and placeholder sections to obtain an early overview of the overall structure [17].



Figure 3: The outline-first, dictation-driven workflow for scientific writing. A structured workflow that separates the writing process into distinct phases: preparation (data and literature review), hierarchical outlining, dictation of a full first draft, transcription and subsequent revision. The model emphasizes separating the planning and production processes to reduce cognitive load and facilitate efficient manuscript generation.

Voice Dictation as a Primary Compositional Mode

The Theoretical Case for Dictation: The most underused technique in the academic writer's toolkit is voice dictation using speech (recorded on a smartphone, dictation device or computer) to produce a first draft rather than typing. Dictation makes it easy to transfer ideas to paper without interruptions from distracting thoughts and competing practical tasks [35]. Speech more closely matches the speed of thinking than typing or handwriting and evidence that dictation benefits both average and expert writers continues to grow [35,36].

From a developmental perspective, humans are fundamentally oral creatures: spoken language is acquired naturally in childhood, whereas written language is a later-acquired, cognitively complex skill [37]. The greater ease and fluidity of speech compared with writing reflect these deep developmental differences. Studies of dictation for scientific writing report that most people find it easier to communicate orally than "through their fingers" and that dictation feels more natural and less intimidating than typing [38].

A key advantage of dictation is that it prevents the author from pausing to revise sentences mid-creation precisely the habit that most disrupts writing flow. By keeping the recording device running continuously, without pausing or rewinding to fix mistakes and by using "mental sticky notes" to flag items for the revision phase, writers can maintain an unbroken flow from introduction to conclusion [35]. Many current software solutions offer dictation rather than manual typing, but this means the text appears on the screen as it unfolds, which can disturb the author because they feel inclined to correct errors immediately after a sentence is produced. Therefore, these systems are not optimal for producing complex scientific texts, such as biomedical science articles. When dictating, some writers initially feel anxious about not being able to see what they have just spoken; however, after transcription, the resulting prose is consistently rated as high quality and authors are often surprised by the naturalness and coherence of their own spoken sentences [38].

Empirical Evidence for the Outline-and-Dictation Method: The most extensive empirical evaluation of the outline-and-dictation approach in biomedical science comes from a program of work known as the Mind-to-Paper (MTP) method [17,35,38-40]. In the initial evaluation, twelve young scientists with limited prior writing experience produced a full article draft ready for submission within twelve weeks of structured work [35]. All participants completed a dictated draft in a single day and the resulting manuscripts assessed for flow, structure, language, preparation, length and references were consistently high quality across all dimensions. Readability scores of the dictated drafts matched or exceeded those of articles published in the BMJ and JAMA, demonstrating that dictated manuscripts can maintain scientific rigor while remaining accessible [35].

A qualitative companion study used focus-group interviews to explore the experiences of fourteen junior scientists who used the method for the first time [38]. Three main themes emerged: 1) the importance of thorough preparation with an outline before "letting go" during dictation; 2) the value of writing teams and a retreat environment for sustaining preparation and accountability; and 3) the occurrence of flow-like mental states during the dictation process itself a finding of particular interest (Fig. 4). Participants described flow as a feeling of rapid association and a complete overview of the subject, in which "two plus two equals four because one gets more done, thinks faster and works more efficiently" [38]. This flow experience, resembling the classical psychological construct was nearly addictive: once experienced, participants were strongly motivated to repeat it [38,41].

Conceptual Representation of Flow During Dictation-Based Writing

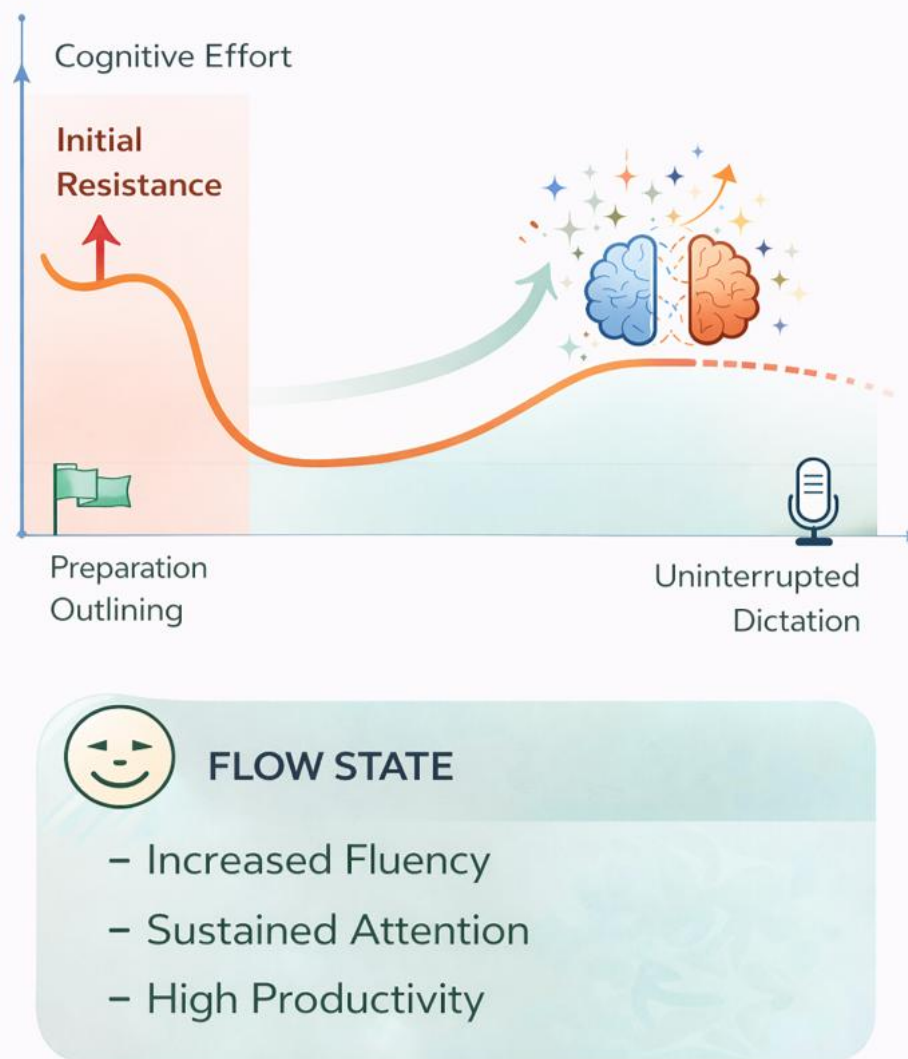


Figure 4: Conceptual representation of flow during dictation-based writing. A schematic illustration of the temporal dynamics of cognitive effort during dictation. Initial resistance is followed by a rapid reduction in cognitive friction as the writer enters a flow-like state characterized by increased fluency, sustained attention and high productivity. This state is facilitated by prior structuring through outlining and uninterrupted dictation.

A subsequent focus-group study of fourteen experienced young researchers at a writing retreat yielded two main themes: “process guidance with the outline as the map” and “arrival at dictation” [17]. Participants consistently described the outline as essential for organizing ideas and coordinating with co-authors before dictation began, while the dictation phase itself was characterized as a “monk-like” state of complete immersion in the task. Repeatedly entering a mental bubble of motivation containing the author, the outline and the references and being completely disconnected from distractions were emphasized as prerequisites for success [17]. The method was considered effective for producing full first drafts in just a few hours and was viewed as a structured, reproducible approach to scientific writing [17]. A parallel qualitative study of young scientists drafting their first scientific articles highlighted a complementary finding: emotional support and a clear procedural framework are both essential to a successful first writing experience [39].

Voice Recognition Software for Transcription

Dictation-based writing relies on an efficient interface between speech and text. Historically, this interface has been a limiting factor. Earlier voice recognition software required user training and produced relatively high error rates, particularly among non-native speakers [40]. Although usable for drafting, such systems imposed additional cognitive and technical demands. Recent advances in deep learning-based automatic speech recognition have transformed this landscape [42]. Modern systems, such as Whisper, are trained on large-scale multilingual datasets and achieve high baseline accuracy without user-specific adaptation. AI-based transcription reduces a traditionally time-consuming task often requiring six to seven hours per hour of audio to minutes, thereby removing a major practical barrier to text production.

From a cognitive perspective, this shift enables a clearer separation between idea generation and transcription. Contemporary systems provide near real-time output with automatic punctuation and contextual language modeling, supporting fluent text production. Some platforms further integrate large language models, allowing immediate post-processing of dictated text. Limitations persist, including prediction errors and data governance concerns, particularly with cloud-based solutions. However, most errors are minor and readily corrected. Overall, AI-driven voice recognition software now functions as an enabling infrastructure for academic writing, reducing cognitive load and facilitating efficient draft generation.

Language Quality of Dictated Manuscripts: A common concern about dictation is that it might produce prose that is too casual for academic publication. The evidence does not support this worry. When authors were instructed to aim for a language level between normal spoken language and advanced academic prose using simple words and short sentences the resulting manuscripts achieved readability scores (Flesch Reading Ease, Gunning Fog index, LIX number) comparable to those of articles published in the BMJ and JAMA [35]. With more dictation experience, the language complexity of manuscripts increased toward that of traditionally written articles while still maintaining good readability [35]. The text produced by dictation thus occupies a register between speech and formal writing and this is, if anything, an advantage: scientific writing is often criticized for unnecessary opacity and the greater accessibility of dictated text is a benefit rather than a drawback [8].

Practical Guidance for Dictation in Biomedical Writing

The following practical guidance is drawn from the published MTP methodology and from general writing pedagogical principles [17,35,38-40].

Preparation: All data analyses, figures, tables and references must be completed before dictation begins. References should be printed and organized in the order dictated by the manuscript outline so they can be cited smoothly during dictation without searching. The outline should be reviewed and finalized with co-authors before the day of dictation.

Isolation: The dictation session should occur in a quiet, distraction-free environment. Electronic devices should be set to flight mode and email and internet access should be disabled. Ideally, the author should have a full, uninterrupted day dedicated solely to dictating a complete draft [17].

Continuous Flow: The recording device should remain on throughout (some smartphone voice recording apps will only record when words are spoken). If a mistake occurs, the author should continue speaking and briefly note a “mental sticky note” (a spoken signal for the revision phase) rather than stopping and rewinding [35].

Language: Aim for simple, clear sentences. If you aim for academic prose, the final result will most likely fall somewhere between spoken language and academic written English (and that is exactly what we want). The goal is a complete, coherent first draft, not a polished final manuscript [35].

Non-Native Speakers: Researchers whose first language is not English have successfully used dictation and dictating in a non-native language tends to produce shorter, simpler sentences that can improve readability [17,38]. For researchers with more limited English, outlining and writing rather than dictating based on the same detailed outline may be the better option [17].

Integrating Outlining and Dictation: A Recommended Workflow

The following workflow integrates the outline-first, dictation-driven method into the standard stages of biomedical manuscript preparation.

Step 1 Data and literature review. Before any writing begins, ensure that the empirical work is complete, the key results have been identified and the relevant literature has been reviewed. All figures and tables should be finalized. Writing cannot replace thinking.

Step 2 Create a high-level outline. Identify the manuscript's main sections and, within each, the key arguments or narrative units.

Step 3 Create a detailed hierarchical outline. Expand each main point until every argument, piece of evidence and logical transition is clearly articulated. Insert reference placeholders at the outline level. Review and refine the outline with co-authors and supervisors [17]

Step 4 Dictate the first draft. Use the detailed outline as a script and dictate the manuscript section by section. Avoid editing during dictation. The goal at this stage is to produce a complete rough draft [35]

Step 5 Transcription. Have the audio file transcribed using voice recognition software [42]

Step 6 Edit and revise. Review the transcribed draft for technical accuracy, appropriate register, complete citations and adherence to the journal's style. Momentum is best maintained by starting revision immediately after transcription [38]

Step 7 Gather feedback and finalize revisions. Share the revised draft with co-authors and trusted colleagues, incorporate their input and submit.

Additional Research-Specific Techniques

Reading and Literature Engagement as a Writing Stimulus

Reading relevant literature has been proposed as an effective strategy for overcoming writer's block in academic and scientific writing [43-45]. Reading well-written papers in the target journal helps familiarize the writer with the expected style and conventions; examining papers whose methodology or conclusions are contested can sharpen the writer's own argument by contrast; and reading broadly in related fields can supply unexpected conceptual resources. The key point is that reading should be active and purpose-driven, focused on specific questions the manuscript needs to answer, rather than diffuse and open-ended.

Writing Aids and Technological Tools

Reference management software (e.g., Zotero, Mendeley, EndNote) eliminates one of the most tedious and error-prone aspects of manuscript preparation maintaining accurate, consistently formatted citations and frees cognitive resources for substantive writing [46]. Grammar and style tools, such as e.g. Grammarly, can detect surface-level errors in a dictated draft, but they should not disrupt the flow of initial composition. AI-based writing assistants, including large language models that generate draft text from outline points, are increasingly available and may support certain aspects of manuscript preparation; however, their use must align with the target journal's policies and relevant research-ethics guidelines and all AI-generated content must be carefully checked for factual accuracy [47].

Writing Groups, Retreat Environments and Accountability Structures

Writing groups small cohorts of academics who meet regularly to share work in progress, provide feedback and hold one another accountable for writing commitments have repeatedly been shown to increase writing productivity and reduce writing anxiety [48]. The value of shared accountability is especially pronounced for non-native English speakers and for researchers who struggle with isolation during the drafting process. A personal account of starting a small writing club during a PhD abroad describes how a judgment-free peer environment transformed writing from "torture" into something participants began to enjoy [18]. The structured writing retreat plays a particularly important role in the MTP methodology: bringing participants together at a remote location for a dedicated dictation day removes the distractions of normal work life and fosters a shared sense of purpose and accountability. In focus-group interviews, the retreat has been described as a firm, unmovable deadline the outline has to be ready before departure and the communal feeling of dictating together as a powerful motivational driver [17,38].

Case Studies and Anecdotal Evidence

The academic writing literature includes numerous first-person accounts of writer's block and its resolution. The following illustrative cases are composites drawn from the qualitative evidence cited above and from broader research in writing pedagogy.

The Junior Researcher Who Discovered Dictation

Qualitative interviews with junior scientists who dictated their first manuscript reveal a common pattern: initial hesitation and awkwardness when speaking into a recording device, followed typically within four or five sentences by a sense of fluency. One participant described seeing her transcribed dictation for the first time: although anxious about not being able to produce good sentences without seeing them as she wrote, she found, after transcription, that she had spontaneously produced good sentences and that the language was actually better than anything she would have written herself an experience she described as very positive [17].

The Experience of Flow

A notable finding in the qualitative literature is that participants in dictation-based writing courses frequently describe entering a state of psychological flow a feeling of simultaneous mental efficiency, motivation and enjoyment. One participant characterized this as a sensation of quick associations and a complete overview of the subject, likening it to a state of heightened productivity in which “two plus two equals four” because more gets accomplished more rapidly [38]. Another described dictation as “absolutely fantastic” and “perfect for my way of thinking,” noting that it frees the creative process because one can associate much more quickly while dictating than while writing [38]. This flow-like state has been found to be a powerful motivator for continued participation in writing retreats [38].

The Research Group that Outlines Together

Senior researchers who use the MTP method report that a detailed shared outline transforms writing from an open-ended, daunting creative task into a limited, manageable one that can be completed in a single focused session once outlining is done [35]. A recognized advantage of collaborative outlining is that it obviates the need for co-authors to respond to full prose drafts; meaningful input can be provided at the outline stage, when revisions are still structural rather than linguistic, thereby reducing the overall revision effort for the co-authors [38].

The Writing Club as a Remedy for Isolation

A personal account by a non-native English-speaking PhD student describes how starting a small writing club with four colleagues transformed her relationship with writing [8]. Each member faced similar struggles but had been trying to deal with them alone; the group became a judgment-free zone where sharing imperfect work was not only tolerated but encouraged and writing-related activities could no longer be avoided. Writing shifted from a source of shame and avoidance to a shared, ultimately enjoyable activity a reminder that writer’s block is often sustained by social isolation and that simple peer structures can be disproportionately effective.

Discussion

Comparative Efficacy of Strategies

The strategies discussed in this review vary widely in their evidence base, accessibility and suitability for different writers and stages of the writing process. Mental and emotional approaches especially cognitive reframing and mindfulness have the strongest evidence from randomized controlled trials, but most of it comes from general populations of anxious individuals rather than from biomedical scientists specifically. Behavioral strategies, notably scheduled daily writing, have been well validated in academic groups [6,26]. Environmental optimization is widely endorsed but rarely studied as a primary intervention. Survey evidence from experienced writers indicates that simple strategies, such as discussing ideas with others, working briefly on a different project, taking a walk, changing location and scheduling short breaks, are often rated as the most effective possibly because they address several cognitive and emotional components of blocking at once [7]. The outline-and-dictation approach holds a distinctive place in this landscape: it is among the most practical and effective strategies available, as evidenced by a controlled evaluation of manuscript quality and by consistent qualitative reports from research participants [17,35,38,39]. Importantly, it can be learned quickly and used by researchers at any career stage, with a seemingly low learning curve [35].

The Superiority of Integrative Approaches

The evidence reviewed here strongly suggests that no single strategy can fully address writer’s block in all its forms. A comprehensive approach one that tackles the emotional, behavioral, environmental and structural dimensions of the problem simultaneously is most likely to be effective. Combining mindfulness (to reduce anxiety), scheduled writing (to build productive

habits), environmental adjustments (to protect writing time), detailed outlining (to clarify structural issues) and dictation (to reduce the effort required to produce first drafts) exemplifies this integrated method.

Furthermore, decoupling the writing processes will reduce cognitive load (Fig. 5). Conventional writing typically demands that idea generation, structural organization and sentence-level editing occur simultaneously, resulting in substantial cognitive load. In contrast, the outline-dictation approach distributes these activities across distinct, sequential phases-planning, drafting and revision-thereby lowering cognitive demands and facilitating more fluent text production.

For most biomedical writers, changing multiple aspects of their writing practice at once can be overwhelming. A practical starting point is to focus on the outline-and-dictation method, since these two techniques directly address the most common forms of writer's block and can produce quick, noticeable improvements in output that encourage continued effort.

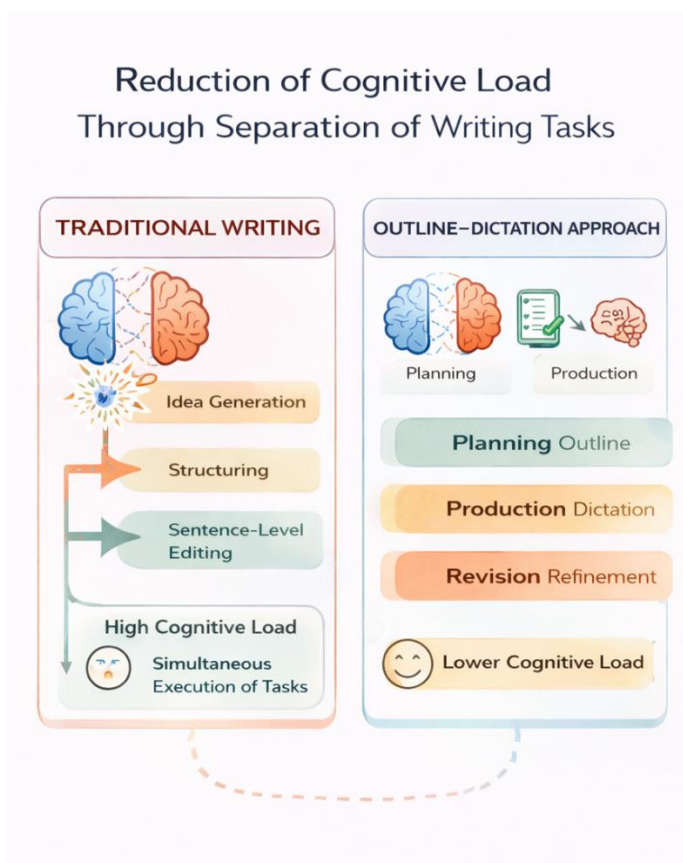


Figure 5: Reduction of cognitive load through separation of writing tasks. Traditional writing often requires simultaneous idea generation, structuring and sentence-level editing, which creates high cognitive load. In contrast, the outline-dictation approach separates these processes into sequential stages-planning, production and revision-thereby reducing cognitive demands and enabling more fluent text generation.

Limitations and Caveats

Several limitations of the current review should be acknowledged. First, the strongest evidence for the outline-and-dictation approach comes from a single, highly productive research group and requires independent replication in different settings [17,35,37-39]. Second, participants in the cited studies were exposed to an idealized writing environment during organized retreats, which may have amplified the method's effects; individual researchers attempting to replicate the approach in their own offices may need to work harder to create equivalent conditions of isolation and focus [17]. Third, dictation in English may not be the best option for researchers with very limited English, for whom free writing based on a detailed outline may be a preferable alternative [17]. Fourth, individual differences in writing style, cognitive profile and personal preference mean that no single strategy will work for every writer.

Future Directions

The field of academic writing support in the biomedical sciences requires more rigorous research. Key priorities include: 1) surveys assessing the prevalence and types of writer's block in representative samples of biomedical students and faculty; 2) randomized trials of writing interventions including the outline-and-dictation method in biomedical training programs; 3) studies examining how institutional factors (such as mentorship quality, departmental culture and the availability of writing-support services) influence writing productivity; and 4) the development and validation of standardized tools to measure writing self-efficacy and writing anxiety in scientific populations [49]. Future work should also examine whether AI-assisted drafting, used within appropriate ethical constraints, can shorten the gap between outline and first draft without compromising scientific integrity [47].

At the institutional level, there is a strong case for integrating explicit writing instruction into graduate and postdoctoral training programs in the biomedical sciences [16,17]. Writing courses, particularly when paired with peer writing groups and structured retreats, have been shown to increase publication rates [48-52]. Because published science is vital to both career advancement and the public good, improving biomedical researchers' writing productivity has direct implications for the pace of scientific progress.

Conclusion

Writer's block is a common and significant challenge in biomedical science, but it is neither unavoidable nor impossible to overcome. A diverse set of evidence-based, practice-tested strategies is available to motivated academic writers. Among these, the combination of careful hierarchical outlining before drafting and voice dictation as the primary method for producing first drafts is especially noteworthy. Empirical evidence indicates that this method works for researchers at all career stages, helps produce acceptable manuscripts on the first attempt and perhaps most importantly can induce a flow-like state that turns scientific writing from a daunting task into an energizing, repeatable scholarly routine (Fig. 4).

The goal of these strategies is not to make writing easy the intellectual effort required for scientific communication is inherently demanding but to ensure that genuine cognitive challenges are not compounded by unnecessary psychological barriers. When an argument's structure is clear and the effort required to produce prose is low, writing can become, if not effortless, at least manageable: a skill that can be practiced regularly, improved with experience, and, on the best days, even enjoyed. Researchers, mentors and program directors in the biomedical sciences are encouraged to recognize writer's block as a serious professional and institutional issue, to try the strategies reviewed here and to help build the growing body of evidence that this important topic warrants.

Conflict of Interest

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Ethical Statement

The project did not meet the definition of human subject research under the purview of the IRB according to federal regulations and therefore was exempt.

Informed Consent Statement

Informed consent was obtained from all participants included in the study.

Authors' Contributions

All authors contributed equally to this paper.

References

1. McGrail MR, Rickard CM, Jones R. Publish or perish: A systematic review of interventions to increase academic publication rates. *High Educ Res Dev.* 2006;25:19-35.
2. Royal College of Physicians. *Research for all: Building a research-active medical workforce.* London: Royal College of Physicians. 2016.
3. Bergler E. *The writer and psychoanalysis.* New York: Doubleday. 1950.
4. Castillo M. Writer's block. *AJNR Am J Neuroradiol.* 2014;35:1043-4.
5. Rawat S, Meena S. Publish or perish: where are we heading? *J Res Med Sci.* 2014;19:87-9.
6. Boice R. *Professors as writers: a self-help guide to productive writing.* Stillwater (OK): New Forums Press. 1990.
7. Ahmed SJ. *An analysis of writer's block: causes, characteristics and solutions [master's thesis].* Jacksonville (FL): University of North Florida. 2019.
8. Gopen GD, Swan JA. The science of scientific writing. *Am Sci.* 1990;78:550-8.
9. Ali A, Kohun F. Dealing with isolation feelings in IS doctoral programs. *Int J Doctoral Stud.* 2006;1:21-33.
10. Sword H. *Stylish academic writing.* Cambridge (MA): Harvard University Press. 2012.
11. Steinert Y, McLeod PJ, Liben S, Snell L. Writing for publication in medical education: The benefits of a faculty development workshop and peer writing group. *Med Teach.* 2008;30:e280-5.
12. Kellogg RT. A model of working memory in writing. In: Levy CM, Ransdell S, editors. *The science of writing: theories, methods, individual differences and applications.* Mahwah (NJ): Lawrence Erlbaum Associates; 1996;57-71.
13. Lee CJ, Sugimoto CR, Zhang G, Cronin B. Bias in peer review. *J Am Soc Inf Sci Technol.* 2013;64:2-17.
14. Möller A. Die Auflösung von Schreibblockaden durch Introvision: Ergebnisse einer Pilotstudie. *Gruppendyn Organ Ber.* 2008;39:199-211.
15. Cirillo F. *The Pomodoro technique: the life-changing time-management system.* London: Virgin Books. 2006.
16. Barroga E, Vardaman M. Essential components of educational programs on biomedical writing, editing and publishing. *J Korean Med Sci.* 2015;30:1381-7.
17. Andresen K, Laursen J, Rosenberg J. Outlining and dictating scientific manuscripts is a useful method for health researchers: A focus group interview. *SAGE Open Med.* 2018;6:2050312118778728.
18. Garcia BM. Don't face writer's block alone. *eLife.* 2023;12:e92931.
19. Huston P. Resolving writer's block. *Can Fam Physician.* 1998;44:92-7.
20. Kabat-Zinn J. Mindfulness-based interventions in context: Past, present and future. *Clin Psychol Sci Pract.* 2003;10:144-56.
21. Hjeltnes A, Binder PE, Moltu C, Dundas I. Facing the fear of failure: An explorative qualitative study of client experiences in a mindfulness-based stress reduction program for university students with academic evaluation anxiety. *Int J Qual Stud Health Well-being.* 2015;10:27990.
22. Clark DA, Beck AT. *Cognitive therapy of anxiety disorders: science and practice.* New York: Guilford Press. 2010.
23. Murray R, Moore S. *The handbook of academic writing: a fresh approach.* Maidenhead: Open University Press. 2006.
24. Lamott A. *Bird by bird: some instructions on writing and life.* New York: Vintage Books. 1995.
25. Sohn E. Twelve scientist-endorsed tips to get over writer's block. *Nature.* 2024;631:241-3.
26. Silvia PJ. *How to write a lot: A practical guide to productive academic writing.* Washington (DC): American Psychological Association. 2007.
27. Elbow P. *Writing without teachers.* New York: Oxford University Press. 1973.
28. Li LY. Exploring the use of focused freewriting in developing academic writing. *J Univ Teach Learn Pract.* 2007;4(1):46-60.
29. Egeth H, Lamy D. Attention. In: Weiner IB, Healy AF, Proctor RW, editors. *Handbook of psychology: Experimental psychology.* Hoboken (NJ): Wiley; 2013;4:269-92.
30. Ravizza SM, Hambrick DZ, Fenn KM. Non-academic internet use in the classroom is negatively related to classroom learning regardless of intellectual ability. *Comput Educ.* 2014;78:109-14.

31. Kroemer KHE, Grandjean E. Fitting the task to the human: a textbook of occupational ergonomics. 5th Ed. London: Taylor & Francis. 1997.
32. Flower L, Hayes JR. A cognitive process theory of writing. *Coll Compos Commun*. 1981;32:365-87.
33. Taylor RB. The joys of outlining in medical writing. *Med Writ*. 2012;21:205-8.
34. Kellogg RT. Competition for working memory among writing processes. *Am J Psychol*. 2001;114:175-91.
35. Rosenberg J, Burcharth J, Pommergaard HC, Danielsen AK. Mind-to-paper is an effective method for scientific writing. *Dan Med J*. 2013;60(3):A4593.
36. Gould JD. How experts dictate. *J Exp Psychol Hum Percept Perform*. 1978;4:648-61.
37. Pinker S. *The language instinct: how the mind creates language*. New York: Harper Perennial. 2007.
38. Spanager L, Danielsen AK, Pommergaard HC, Burcharth J, Rosenberg J. A feeling of flow: Exploring junior scientists' experiences with dictation of scientific articles. *BMC Med Educ*. 2013;13:106.
39. Laursen J, Andresen K, Rosenberg J. Young scientists need emotional support and a framework when drafting scientific articles. *J Biomed Educ*. 2017;2017:8656538.
40. Pommergaard HC, Huang C, Burcharth J, Rosenberg J. Voice recognition software can be used for scientific articles. *Dan Med J*. 2015;62(2):A5012.
41. Csikszentmihalyi M. *Flow: the psychology of optimal experience*. New York: HarperCollins. 1990.
42. Mojadeddi ZM, Rosenberg J. Automated transcription of interviews in qualitative research using artificial intelligence: A simple guide. *J Surg Res Pract*. 2024;5:1-6.
43. Chintamani. Challenges in writing-the writer's block? *Indian J Surg*. 2014;76:3-4.
44. Peterson TC, Kleppner SR, Botham CM. Ten simple rules for scientists: improving your writing productivity. *PLoS Comput Biol*. 2018;14:e1006379.
45. Ahmed SJ, Güss CD. An analysis of writer's block: causes and solutions. *Creat Res J*. 2022;34:339-54.
46. Lorenzetti DL, Ghali WA. Reference management software for systematic reviews and meta-analyses: An exploration of usage and usability. *BMC Med Res Methodol*. 2013;13:141.
47. Mojadeddi ZM, Rosenberg J. The impact of AI and ChatGPT on research reporting. *N Z Med J*. 2023;136:60-4.
48. Rickard CM, McGrail MR, Jones R, Hatcher D, Hagen L, Young A, et al. Supporting academic publication: Evaluation of a writing course combined with writers' support group. *Nurse Educ Today*. 2009;29:516-21.
49. Bandura A. *Self-efficacy: The exercise of control*. New York: W H Freeman. 1997.
50. Golde CM, Dore TM. *At cross purposes: what the experiences of today's doctoral students reveal about doctoral education*. Philadelphia (PA): Pew Charitable Trusts. 2001.
51. Peterson TC, Kleppner SR, Botham CM. Ten simple rules for scientists: improving your writing productivity. *PLoS Comput Biol*. 2018;14:e1006379.
52. Pommergaard HC, Huang C, Burcharth J, Rosenberg J. Voice recognition software can be used for scientific articles. *Dan Med J*. 2015;62(2):A5012.

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