

Rhetorical Inflation

Rhetorical inflation refers to the use of **exaggerated or overly assertive language** to make study results, arguments, or conclusions appear more significant, definitive, or impactful than the underlying evidence justifies.

Characteristics

- Overstating clinical significance (e.g., “effective treatment” based on marginal or non-significant findings)
- Using emotionally charged or persuasive phrasing to mask methodological limitations
- Drawing **strong conclusions from weak, exploratory, or underpowered data**
- Presenting **correlation as causation** without acknowledging alternative explanations

Examples in Clinical Literature

- Claiming “breakthrough” or “landmark” results from a **small, single-center pilot study**
- Asserting “optimal dosing identified” in a **post hoc secondary analysis**
- Using phrases like “robust benefit,” “clearly effective,” or “clinically proven” without statistical support

Why It Matters

- **Misleads readers**, clinicians, and policymakers
- Contributes to **publication bias** and **false expectations**
- Undermines **evidence-based medicine** by elevating rhetoric over rigor

Related Terms

- [Conceptual Ambiguity](#)
- [Overgeneralization](#)
- [Publication Bias](#)
- [Scientific Spin](#)

See Also

- [How to critically read a scientific article](#)
- [Language Bias in Medical Literature](#)

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