

# — Editorial

## EPONYMS, ACRONYMS, SIGNS AND SOMETHING ELSE

Every day we see with fearful interest that medicine in general and dermatology in particular are becoming a complicated terminological system that our memory must digest, activate and keep current if we want to understand when we read these technical terms that supposedly should be facilitators of the study.

Eponyms, for example, much discussed by the way, are a clear example of the problem. They are defined as a person or place whose name is used to name a people, concept or object of any kind, usually as a form of homage to said person, or in medicine it is proclaimed that in the case of diseases that bear the name of scientists “the possessive use of an eponym must be of an eponym, since the author did not have or possess the disorder,” an example of this case being the so-called “*Mortimer’s disease*,” which is now considered a variant of cutaneous sar-coidosis, named after by Mrs. Mortimer, a patient of Jonathan Hutchinson.

In an article published in the *Journal of Cutaneous Pathology* in 2015 and curiously titled “supercalifragilisticexpialidocious” the author expresses his irritation when reading an article in which “*de novo intraepidermal epithelioid dysplasia*” is labeled with the acronym **DNIEMD** and, if we think that day by day the number of these nice acronyms is increasing (SDRIFFE, NAPSI, G -CSF, ICD-10, ADN, BCG, GPDC, etc) we can understand that already between eponyms and acronyms we have an excellent mnemonic exercise typical of one of those television contests so in vogue today.

However, and as if that were not enough, a growing area in dermatology is that of the so-called syndromes, very interesting by the way, but which are also accompanied by a wide range of nomenclatures that aggravate the problem of the studious reader, (**10q24-linked split hand/split foot syndrome (SHFM3)**, **13q syndrome (mosaic)**, **Aagenaes**, **Achard Thiers**, **Amish brittle hair syndrome**, **Ankyloblepharon ectodermal dysplasia (ADE)** or **Hay Wells syndrome**, **Apert syndrome**, **AREDYLD** (Acral-Renal-Ectodermal-Dysplasia -Lipoatrophy-Diabetes), we came to understand then that we really need a restructuring of our cerebral file drawers, to process everything expressed and last but not least, not happy with all this, laboratory exams also increase the difficulty rate with the acronyms that identify said exams.

Finally, comparing to the cherry on the cake, more and more diagnostic signs appear in dermatology, whose knowledge and memory are very important and which are added to those already known as; the sign of the Bielt necklace, the sign of the Venus necklace, the Grinspan sign and so many others that it would be impossible to enumerate.

Well, I thought it useful to consider the need to remember all of the aforementioned, without protesting the fact that perhaps apart from its usefulness, the difficulty it means for those who study with enthusiasm is not taken into account trying to simplify what every day becomes more confused.

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