INTRODUCTION

Purpose. The purpose in this dictionary is to gather together in one volume the profusion of eponyms and descriptive synonyms used to designate syndromes and diseases. It is hoped that this effort will in some measure not only give the reader an understanding of the disease entities listed herein, but also help to unravel the difficulties in communication concerning these entities, a problem implicit in the very proliferation of synonyms.

Scope. Included in this dictionary are eponymic names of pathological conditions named after the discoverers, literary and mythological characters, and patients. All available eponyms used in naming clinical entities, animal diseases, experimental diseases (including cancers), important diagnostic signs, and pathological conditions are entered, along with their non-eponymic synonyms (descriptive names). Since, however, new eponyms are constantly being created, a dictionary such as this can never be complete. Many terms herein listed are well known by their eponymic designations; some are known chiefly by their descriptive names; others are frankly obscure or obsolete but are included because of their rarity and the difficulty associated with their recognition. To be listed, a term must have appeared in the literature at least twice.

Alphabetization and Orthography. Terms are spelled and alphabetized in this dictionary, as in other American medical dictionaries, in accordance with the American form. That is to say, the diphthong has been eliminated from common terms of Greek origin. Thus anaemia pseudoleukaemica infantum is entered and alphabetized as anemia pseudoleukemica infantum. But, for purposes of guidance, cross-references are given for the variant forms, for example, from anaemia to anemia and from oesophagus to esophagus. In systematic names, however, the diphthong is retained. Thus Spirochaeta, not Spirocheeta; but spirocheetosis, not spirochaetosis.

In dealing with foreign proper names, the umlaut is used according to the preference in the country of origin. However, all forms of these names are listed. Again, cross-references are given as necessary, for example, from *Moebius* to *Möbius*. Similarly, such names as *Abramov* and *Abrikossov* are also entered as *Abramoff* and *Abrikossoff*, with appropriate cross-references. Complex personal names are also considered for ease of location. Thus the entries:

DE LANGE, CORNELIA. See LANGE, CORNELIA DE. KAPOSI, MORITZ KOHN. See KAPOSI-KOHN, MORITZ.

Terminology. Since most conditions described in this dictionary were originally reported in foreign literature, many terms, such as *morbus*, *malum*, *symptom complex*, or *syndrome*, are often used in a manner that is different from American convention. *Syndrome*, perhaps the most frequently used term in this dictionary, is by definition "a set of symptoms, usually three or more, which occur together." In some foreign works, and consequently in this dictionary, the word *syndrome* is used much more loosely.

Format. Eponymic entries are listed under the personal names supplied with biographical data when they are available, that is, with full name and dates of birth and death. Names that could not be verified are given as found—some include only unverified family names.

The typical entry on which a definition is given (always an eponym) consists of the following elements: the eponym, a list of synonyms, the definition, and the bibliography. In addition, all synonyms (both eponymic and descriptive) are listed separately. The entry on which a disorder is defined is selected according to common usage: Adie's syndrome over the less commonly known eponyms Adie-Holmes syndrome, Kehrer-Adie syndrome, Weill-Reys syndrome, etc. Whenever preferences of common usage could not be clearly established, an arbitrary selection is made. In no instance, however, should the selection be understood as the author's own preference, nor should it be interpreted as an indication of priority in the description of an eponym.

Synonyms. Synonymous eponyms are given under personal names with a cross-reference to the defined entry. For example, *Brill-Zinsser disease* (a synonym for *Brill's disease*) is entered under BRILL, NATHAN EDWIN, and under ZINSSER, FERDINAND, and the cross-reference *See Brill's disease* is given in both instances.

Eponymic entries and descriptive entries are arranged in the same alphabet. Since all defined main entries are eponymic, each descriptive entry is supplied with a cross-reference to the appropriate eponym.

Definitions. Although a small number of eponyms have retained their original descriptions, for the most part definitions in this dictionary form what is hoped to be a composite picture representing viewpoints of various disciplines, based on a systematic examination of the most current authoritative material. A typical definition includes recent information on symptoms, pathology, metabolism, etiology, inheritance, and special peculiarities. Also, an effort is made to account for differences in various classifications and fine differences and similarities of allied conditions. Unfortunately, some definitions fall short of the typical. This is so because the literature on certain specific topics, in spite of the enormous total output of printed material, proved to be too scanty to provide the desired information. Since this is a dictionary rather than a handbook, reference to diagnosis and treatment and judgmental interpretation are meticulously avoided.

Sources. Whenever possible, each eponym has been traced to its original description, and the title is given in the list of references following the definition. The titles of original works that could not be verified are

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transcribed as found in available sources and prefixed with an asterisk. The recent references consulted in the preparation of this work are too numerous to be listed. Other than original references are supplied, however, for untraceable eponyms or when the original references were difficult to use or obtain.

Illustrations. In certain instances, particularly in those involving disorders affecting several organ systems and in those which seem to resist verbal description, illustrations are used to enhance the definitions. The source for each illustration is given in the legend.

Author's Note. This book does not reflect my approval or disapproval of eponyms—it merely recognizes that they exist.

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