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ONOMATOLOGIA

GASTROLOGICA.

BY

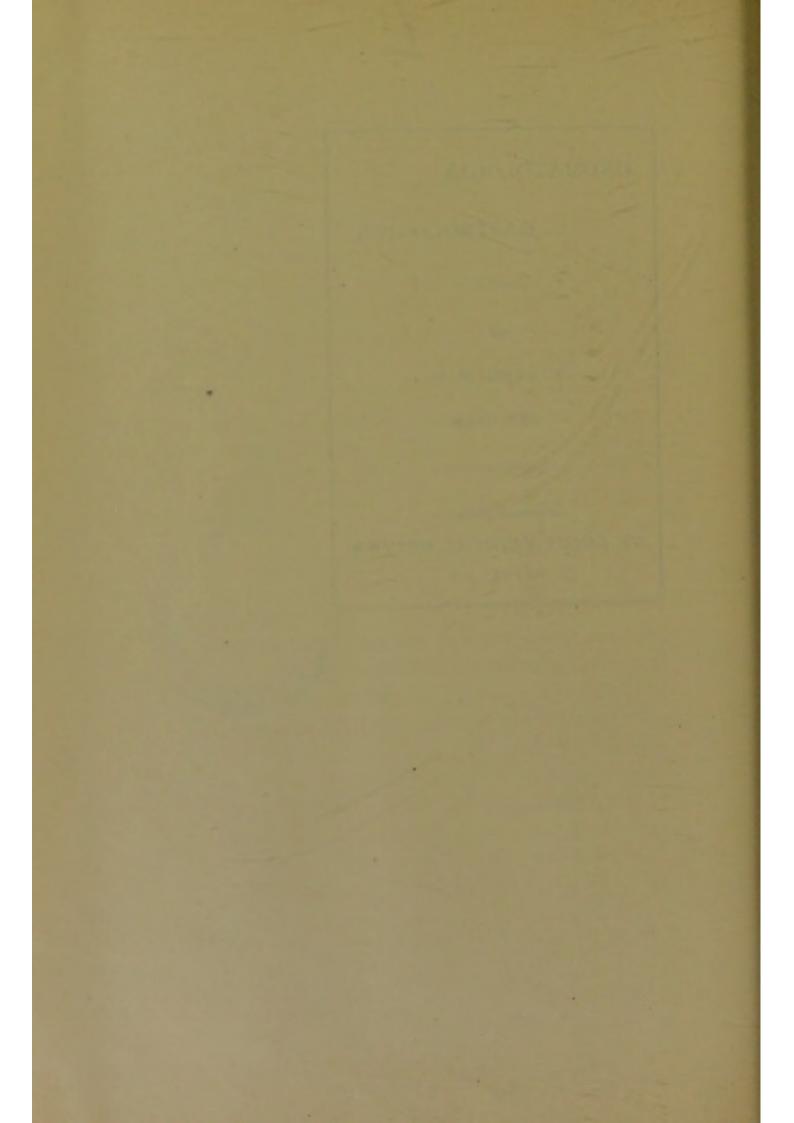
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ONOMATOLOGIA GASTROLOGICA.*

BY A. ROSE, M.D., NEW YORK.

True men of science are anxious to see purity and correctness of medical language prevail among the writers and speakers of the day. In view of this fact the following suggestions may be acceptable in regard to some terms employed in gastrology. Fortunately there exists only a small number of incorrect names or solecisms in this branch of the medical sciences, but even some of these have caused confusion and should be eliminated. The countiess and multiform conceptions contained in medical science require innumerable technical terms. Medical lexicons became a necessity when, for the purpose of the disseminating of scientific information, the useful custom had been established in medical literature, not only of giving the names of the diseases and anatomical names in the author's native language. but also of employing terms for diseases and anatomical conceptions which either were those of the old Greek and Roman physicians, or were compounded and introduced from the classical languages to denote new conceptions unknown to the ancient Greeks and Romans.

^{*}Read before the American Gastroenterological Association, at the Academy of Medicine, New York, April 24 and 25, 1905.

In our surgeon-general's library is an Onomasticon, sive Lexicon Medicinæ, by O. Brunfels, printed in Strasburg, in the year 1534, a folio; and this is perhaps the oldest medical lexicon that appears in print.

With the introduction of more and more new compounds, more and more irregularities came into our onomatology, because no exact rules could be formulated to control the formation of new compounds which had to be constructed to some important extent from a dead language, i. e., as long as Greek was considered a dead language, an error which prevailed until very recently. In the case of Latin there exists no authority, that is no people speaking it as their native tongue, who can decide whether a new Latin compound is correct; and in the case of Greek, the Greeks, who really could decide, have not been, and as yet are not, considered.

In Greece itself countless demands are constantly made on the language, which is developing rapidly so as to keep pace with the many new political, scientific, technical, commercial and journalistic requirements of the day. The Greeks do not adopt, with the constantly imported foreign ideas, the connotative words also of foreign peoples. They refuse to have a hybrid language. Their history, their na-

tional pride, lead them to exclude foreign words and to take such necessary elements from the ancient Greek as enable them to create new symbols for new ideas. In order to demonstrate the impossibility of attaining absolute correctness in new formations derived from the Latin, we have to study the methods of the Greeks and the manner in which they go to work to preserve the purity of their language. When constructions and forms have been remodelled after the old Greek, incorrect elements, when discovered, are extirpated with more and more severity and tact. Before a new formation is introduced into the regular language it has to stand a severe test and criticism. Nothing will be accepted and grafted into the regular language which deviates in any way from the genius of the Attic tongue.

Comparing these Greek precautions against corruption of language with the wanton barbarism of our nomenclators, we are forced to the conclusion that the only way to purify our onomatology is to consult our Greek colleagues of the University of Athens and to follow their advice.

In the year 1821 was published a medical lexicon, by L. A. Kraus, in which the most frequently used names of Greek origin were enumerated, with the special object of exposing

incorrectness wherever it was noticed by him. This author speaks against the formation of hybrids, considering it a principal rule to be observed, to compound words only from one and the same language, that is, Greek with Greek and Latin with Latin. We learn by his lexicon that in the days of our grandfathers there existed word monstrosities which, thanks to the critics like Kraus, have since been eliminated. Some of these words would horrify you, although we have new hybrids which are as bad as those of olden times. Some which were exposed a century ago are still in use. I will not dwell now on the ideas of Virchow in regard to incorrect terms, or on the work of Hyrtl, in which he exposes grammatical inaccuracy, calling our onomatology incorrect, ridiculous, absurd, and hence unscientific; or on the attempt of Henle, or above all on the work of the men of the German anatomical society, to create a correct onomatology. I have before pointed out the vain exertions of all these excellent men and great scholars, and I have furnished conclusive evidence that they failed and all their labor was for nothing, simply because they ignored the existence of living Greek. All this I have exhaustively treated in several publications.

There are not many—by no means so many as in some other branches of medicine—gram-

matically incorrect or misinterpreted terms in the literature on gastrology, but such as do exist have caused serious confusion.

The mouth of the stomach is called "cardia;" this may lead to misunderstanding in some instances.

Let us keep in view that gaster is the belly; that we have to recognize this fact and not use the word "gastric," when we wish to refer to the stomach expressly.

Kymograph is incorrect; the word is kymatograph.

For megalogastria, let us better say megagastria.

For gastroptosis, gastroptosia.

There is no confusion to be feared by employing these incorrect terms, but whoever takes pleasure in the purity and beauty of language will find them intolerable.

In former editions of his work Riegel has given the following differentiation: 1. Simple atony or insufficiency of the stomach. 2. Atonic or typical ectasis, or dilatation. In the latest edition, however, he has corrected his error, and states that atony and insufficiency are not synonyms, and that every atony is also dilatation. I mention this because I have noticed that the former errors of Riegel have been admitted into an American book on diseases

of the stomach. Ectasia, which we so often see, should be ectasis, and notwithstanding English distionaries and the English custom of centuries, dilation and dilatation are *not* one and the same.

It is strange that that monstrosity of a word, gastrosuccorrhea, about which so much complaint has been made, is still employed. Our grandfathers called it chylorrhea. If we wish to be very exact, let us call it chylorrhea gastrica, but by no means, as some have suggested, gastrorrhea, for this would be another barbarism. We can add the word *rhea* to a word meaning a liquid, like blennorrhea, spermatorrhea, galactorrhea, etc., but the first word in the composition must not be the name of an organ. Words like metrorrhea, otorrhea, and gastrorrhea are decidedly barbaric.

In an American book on disease of the stomach, from which I have quoted some of the foregoing errors, I find the following passage:

"It is impossible to invent a term which shall comprise and connote the important features of all types of motor and mechanical insufficiency; as clear a classification as any is one based on Riegel and Boas, as follows: Simple gastric atony, or motor insufficiency, or myasthenia without dilatation." As mentioned already, Riegel has changed his views;

he says distinctly, as I maintained years ago, that motor insufficiency is not atony; and I wish to repeat also that the word myasthenia is without any definite meaning. Our American author speaks of atonic dilatation, calls it even dilation. I may be permitted to quote another passage from him: "Gastric atony is a condition of reduced or lost tonicity of the musculature. It is a state of sub or hypo-tonicity, also very aptly designated as gastric myasthenia." Such complication, instead of saying plainly gastric atony, means abdominal relaxation. The barbarism, gastrectasia, is found very often. The preposition "ec" is impossible in the middle of a word. Let us say ectasis gastrica or gastric ectasis.

But not only are medical terms often barbaric because the nomenclators do not take into consideration living Greek, but all our dictionaries, in their attempts at the etymology of Greek words, will continue to spread errors so long as they do not consult living Greek.

Recently I found the Greek word asepsia quoted from a dictionary as being asepsis. This error is analogous to the famous "post partem" error. The Greeks say antisepsis, but asepsia, according to grammatical rules.

The mistakes that happen in translations from one language into another by the aid of

a lexicon are often a source of hilarity. We have all laughed over the witty pamphlet, English as She is Spoke, because we know better and can see the absurd incongruity of the errors; but to those who really know anything of the spirit of the Greek language-and that spirit is to-day exactly what it was in the days of the great classical writers-much of the modern would-be Greek medical nomenclature is just as absurdly incongruous. And surely, though we may not insist that every medical practitioner, as such, ought to be imbued with the Greek spirit, we have a right to demand that those who fashion our Græco-medical terms for us shall be imbued with that spirit. We are indebted to Dr. Einhorn for an example of "Medical Greek as She is Spoke," since he has named stagnation of the stomach caused by motor insufficiency, i. e., by atony or stenosis of the pylorus, "ischochymia."

"Αγιος ὁ θεός, "Αγιος Ίσχυρός, "Αγιος 'Αθάνατος ἐλέησον ήμᾶς.

May the Almighty deliver us from such onomatology!

Ischuria, which he mentions as an analogue, is quite a different kind of retention. *Ischo*, which Dr. Einhorn cites as meaning "retain," means to check or arrest, actively, forcibly, by the exercise of a restraining power; not to retain from the lack of power to expel.

Whoever wishes to hunt up barbarisms in our general medical onomatology, however, will be better rewarded for his search in any other branch than in gastrology.

On April 18, 1787, Lavoisier presented at a public session of the Royal Academy of Sciences a memoir on the necessity of a reform of chemical nomenclature, which reform he wished to be considered as a national work. He reasoned as follows:

The onomatology furnishes the real instruments for the operation of the mind; it is important that these instruments should be of the best kind, and it is indeed working in the interest of science, for the progress of science, when we exert ourselves to improve our onomatology. Referring to the manner by which we acquire our knowledge in general, he points out the importance of a perfect onomatology for those who are beginning to devote themselves to the study of science. The logic of science essentially adheres to scientific language. Science cannot teach anything that is confessedly unscientific and false.

In science we have to distinguish three things: The series of facts which constitute the science; the ideas which recall the facts; and the words to express the ideas. The word has to develop the idea, the idea has to embrace the fact; these are three impressions with the same seal. Since the words preserve the ideas and transmit them, perfection in science is impossible without perfection in language.

However true the facts may be, however correct the ideas developed by facts, only wrong impressions will be transmitted so long as the expressions by which they are communicated are not exact.

History tells of the great influence Lavoisier's nomenclature has had on the development of scientific chemistry; history also tells of the progress in botany due to Linnæus's nomenclature.

The words of Lavoisier referring to nomenclature in general and to chemical nomenclature as he found it—a regular jargon, the creation of the alchymists—apply in a great measure to many of the new formations in medical language in use at the present day, which are by on means construed according to principles pronounced by Lavoisier. It is time that we should be delivered from all barbarism in our onomatology.

Bergman, the great scientist, the pupil of Linnæus, who died in the year 1784, wrote during the last days of his life to M. de Morveau, one of Lavoisier's cooperators, "do not spare one single improper term."

Reformation of medical onomatology can be accomplished, as I have pointed out on several occasions, without difficulty and without creating confusion. Some day I shall appeal to the medical profession at large to consider my suggestions.

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N. B. Almost all these lexicons are in the Surgeon General's Library at Washington, D. C.