



## Private prescription:

A thought-provoking tonic on the lighter side

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# Abbreviation Mania and Acronymical Madness

The past few decades have seen a proliferation in the use of abbreviations and acronyms (an acronym is a specific form of an abbreviation created from the initial letters or parts of a series of words and pronounced as one word). The rate of growth is so high that the number of abbreviations and acronyms being created daily is probably in the hundreds. Many of these will never be known outside their particular circle and many will soon be discarded and forgotten. Many will have dual meanings. In this respect, *Drug Discovery Today* is no exception; its title is often abbreviated to DDT, the same acronym as for the well-known insecticide dichlorodiphenyltrichloroethane. However, here there is some connection – both have relevance in the prevention and management of disease!

The words 'abbreviation' and 'acronym' are now so widely used that it would be tempting to bestow upon them respectable antiquity. But this would be wrong. Although both are derived from classical roots (abbreviation is derived from the Latin *abbreviare*, meaning to shorten, and acronym is derived from the Greek *akros*, meaning a

point and *onyma*, meaning a name), only 'abbreviation' has a long history. The word 'acronym' was only invented in 1943, at about the same time as radar (the acronymic palindrome Radio Detection And Ranging).

### Abbreviation mania

Scientists, in general, and medics, in particular, love abbreviations. So much so that much of what is written in papers is often expressed in a mass of abbreviations, which are irritating because they demand constant reference back to their meaning in the course of reading. Steven Mann, from the Santa Cruz Radiation Oncology Medical Group in California, made reference to this in a letter to the editor of *The New England Journal of Medicine* in 1989 [1]:

There is a recent trend (RT) in the medical literature (ML) to abbreviate previously unabbreviated phrases for the sake of efficiency (PUPSAE). Although it makes good sense (GS), the frequency with which it is used can tax the inexperienced reader (IR). Sometimes repetition can actually be beneficial (RCABB) by

allowing the reader to retain words he does not constantly have to refer back to (WOHCREBT). I would like to suggest to the Editor (ED), that for the IR who doesn't wish to have PUPSAE, he have the GS to change the ML so that RCABB and he can eliminate WOHCREBT'.

Needless to say, the editor replied in a similar fashion:

We agree with Dr Mann, but protest our innocence (POI). We do not ordinarily abbreviate PUPSAE because we also believe RCABB and we know that the IR needs WOHCREBT. But it makes GS to allow some previously abbreviated phrases (PAPS) when they are in widespread use (WU), and we occasionally even allow abbreviation of PUPSAE when repeatedly spelling them out would be unusually cumbersome (STOWBUC). We admit, however, that WU of PAPS and PUPS in the ML, even when STOWBUC, often raises the IR's and the ED's BP and HR.

However, abbreviations in scientific papers continue to be used in ever increasing numbers.

### Acronymical madness

A marked feature of the past few decades has been the increase of acronymous titles for organizations, particularly for charities. We now take UNESCO and UNICEF in our stride, and almost every medical disability has created a new acronym to denote its supporting organization. It has even been stated that the title of an organization might well be formulated from several letters of an apposite word describing its function [2].

A recent trend that has found favour in the drug development arena is the use of acronyms for clinical studies. It would appear that a good study needs to have a memorable acronym for it to make a splash on the scientific horizon.

Recent examples include SUPPORT (Study to Understand Prognoses and Preferences for Outcomes and Risks of Treatment) and PAARC (Pollution Atmospherique et Affections Respiratoires Chronique – a French study investigating the prevalence of asthma and pollution).

Kim Shaftner and David Meehan have taken this use of acronyms even further, suggesting that the correct acronym is of crucial importance to the outcome of a trial [3]. Renaming the LATE trial (Late Assessment of Thrombolytic Efficacy) to the DEAD trial (Dynamic Effect of Antithrombotic Delay) would have, they suggest, negative consequences. They suggest a number of acronyms that would have the same negative effect, for example NERD (Nifedipine Effect in Reducing Death) and PORNO (Prospective Outcomes Research of Nifedipine in the Old). They even advocate the training of specialists with certification in this area, that is, the creation of a Doctor of Acronymics, or DOA! Although somewhat frivolous, the authors do make a valid point.

A generally unacknowledged use of acronyms is as a mnemonic for remembering specific facts. Most readers will have heard of the acronym HOMES, used to recall the names of the five Great Lakes (Huron, Ontario, Michigan, Erie and Superior). Medics often resort to the use of acronyms to

recall facts in areas where there are a large number of possibilities and outcomes (e.g. in diagnosis). I recently came across a delightful book on differential diagnosis, listing some interesting acronyms to help the doctor organize diagnostic possibilities quickly and effectively for a wide variety of clinical scenarios [4]. For instance, kidney stones are among the most painful of afflictions, hence the acronym 'OUCHS' standing for Oxalate (a common component of kidney stones), Uric acid (stones that occur at low pH), Cystine (stones that are seen in patients with hereditary cystinosis), Hypercalcemia (a cause of calcium stone formation) and Struvite (stones resulting from urinary tract infections).

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*'Good things are twice as good when they are short'*

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My favourite is the acronym for the clinical symptoms and signs for hypertension 'I CHECK A BP' standing for Idiopathic, CNS disorders, High-output states, Endocrine diseases, Coarction, Kidney disease, Acute stress, Birth control drugs and Pregnancy, or how about the acronym for conditions associated with sexually transmitted diseases, 'NO WRAP, U GETS CLAP', standing for Nongonococcal urethritis, Warts, Reiter's syndrome, AIDS, Proctitis,

Ulcerative genital lesions, Gonorrhea, Epididymitis, Trichomonas, Syphilis, Cytomegalovirus, Lice, Arthritis and Pelvic inflammatory disease.

### Final word

Some would dismiss abbreviations and acronyms as exercises in idle word play and admittedly they can be irritating, particularly if used in excess. However, they do serve a purpose and I can personally vouch for their effectiveness as mnemonics. Whether or not they comply with the maxim 'good things are twice as good if they are short', as proposed by the Spanish philosopher, Baltasar Gracian, in the 17th century [5], I will leave to the reader to make up their own mind.

### References

- 1 Mann, S.G. (1989) Abbreviations in the Medical Literature. *New Engl. J. Med.* 320, 1152
- 2 Paxton, J., ed. (1986) *Everyman's Dictionary of Abbreviations* (2nd edn), J.M. Dent & Sons, London
- 3 Shaftner, K. and Meehan, D.V. (1996) Acronymical Correctness. *J. Fam. Pract.* 43, 12
- 4 Donnelly T.J., and Giza C.C. (2001) *Differential Diagnosis Mnemonics*, Hanley & Belfus, Philadelphia
- 5 Mencken, H.L., ed. (1982) *Dictionary of Quotations on Historical Principles from Ancient and Modern Sources*, Collins

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If you wish to write a personalia, please contact Dr Joanne Clough, *Drug Discovery Today*, tel: +44 20 7611 4143, fax: +44 20 7611 4485, e-mail: j.clough@elsevier.com