

Acronyms in dermatology literature: an appraisal

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Acronyms are abbreviations formed from the initial components in a phrase or a word. These represent one of the types of terminology used in medicine in general and dermatology in particular.¹ **Table 1**²⁻²⁸ lists selected acronyms in dermatology literature.

This type of terminology is being used mainly in pediatric dermatology syndromes; however, you may see it in many other aspects of dermatological sciences. For example in basic science, one may find acronym like RANTES (Regulated on Activation Normal T Cell Expressed and Secreted) factor of late-activated T lymphocytes).²⁹

In dermatopathology, some authors found the acronym as a 'playful' way to name a lesion with combined dermatology tumors and they coined the acronyms METRO (MELanocytic tumor + TRichOblastoma) and CAMEL (CArcinoma + MELAnoma) to facilitate memorization of such combination.³⁰

However, there is ongoing debate regarding the use of this type of terminology in medicine, with some people who like it and advocating its use and others who notice no indication to its use in medical literature and find it confusing.³¹

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The benefits of the use of acronyms in general documentation may appear obvious. Acronyms are short, space-saving, convenient and easy to use. They are simple and hard to misspell. They also may be exclusive, and therefore, understandable only to a specific group of professionals.

It is also believed that, the acronym itself is not the issue but rather the failure to define its meaning. It is clear that acronyms were very useful as names especially for syndromic conditions that have multiple features and are difficult to remember by the dermatologists, therefore, facilitating the recall of the various components of these syndromic conditions.

However, it appears that acronym is not without limitations. The use of common words in medical literature like NAME, RICH, might be confusing to the patients and their relatives. Some acronyms are so instantly recognizable, but with time we may forget what it originally stood for and be obscure even to healthcare workers. As a good rule, acronyms should be defined and spelled out at first usage in any published article.

Also, a single acronym might be spelled out in different ways (see NAME in **Table 1**). Moreover, certain newly added acronyms may represent one condition. For example both PELVIS and SACRAL syndromes denote the association of local hemangioma and malformation in the pelvic region, but neither

Table 1 Selected eponyms in dermatology literature.

Acronym	Remarks
CANDLE	Torrelo <i>et al.</i> ² proposed the acronym CANDLE (chronic atypical neutrophilic dermatosis with lipodystrophy and elevated temperature) syndrome for this newly described disorder, which is probably genetic in origin.
CHILD	CHILD syndrome (congenital hemidysplasia with ichthyosiform erythroderma and limb defects). ³
DRESS	DRESS (drug rash with eosinophilia and systemic symptoms). ⁴
EMPACT	EMPACT (erythema multiforme associated with phenytoin and cranial radiation therapy). ⁵
HATS	Hemimaxillofacial dysplasia and segmental odontomaxillary dysplasia appear to be the same syndrome, having the common features of unilateral abnormalities of bone, teeth, gums, and skin. The acronym HATS (hemimaxillary enlargement, asymmetry of the face, tooth abnormalities, and skin findings) is introduced to reflect the spectrum of abnormalities in bone, teeth, and skin that may be seen in this developmental disorder. ⁶
KID	KID syndrome (keratitis, ichthyosis, deafness). ⁷
LASER	Laser is an acronym for light amplification by stimulated emission of radiation.
LEOPARD	LEOPARD syndrome (lentiginos, electrocardiographic conduction defects, ocular hypertelorism, pulmonary valve stenosis, abnormalities of the genitalia, retardation of growth, and deafness)..
MIDAS	MIDAS syndrome (microphthalmia, dermal aplasia, and sclerocornea). ⁹
NAME	The term 'NAME' was originally proposed as an acronym for 'nevi, atrial myxoma, myxoid neurofibromata and ephelides'. However, in order to give a more comprehensive description of this syndrome, some authors recommend the following alternative interpretation of 'NAME': nevi, atrial myxoma, mucinosis of the skin, endocrine overactivity. ¹⁰
NICH	Noninvoluting congenital hemangioma. ¹¹
PACK	Primary biliary cirrhosis, anticentromere antibody, CREST syndrome, and keratoconjunctivitis Sicca. ¹²
PAPA	The triad of sterile pyogenic arthritis, pyoderma gangrenosum and acne is known by the acronym of PAPA syndrome. It is a rare autosomal dominant disease of early onset. It is a recently identified hereditary autoinflammatory syndrome and may be closely linked to the aseptic abscesses syndrome. The clinical triad of pyoderma gangrenosum, acne, and suppurative hidradenitis represents a new disease entity within the spectrum of autoinflammatory syndromes, similar to PAPA and aseptic abscesses syndrome. For this disease, some authors proposed the acronym 'PASH' syndrome. ^{13,14}
PELVIS	Perineal hemangioma, external genitalia malformations, lipomyelomeningocele, vesicorenal abnormalities, imperforate anus, and skin tag. ¹⁵⁻¹⁷
PHACE	A neurocutaneous syndrome characterized by: posterior fossa malformations, hemangiomas, arterial anomalies, coarctation of the aorta and cardiac defects, and eye abnormalities. ¹⁸⁻²⁰
POEM	It is a combination of polyneuropathy, organomegaly, endocrinopathy, monoclonal protein, and skin changes. It is a poorly understood paraneoplastic syndrome that stems from an underlying plasma cell dyscrasias. ²¹
RICH	Rapidly involuting congenital hemangioma. ¹¹
SACRAL	It is proposed for perineal hemangiomas: spinal dysraphism, anogenital anomalies, cutaneous anomalies, renal and urologic anomalies, associated with angioma of lumbosacral localization. ^{15,17}
SAPHO	In 1987, the acronym SAPHO (synovitis, acne, pustulosis, hyperostosis, and osteitis) was coined to refer to a cluster of cutaneous and osteoarticular manifestations, associated with either pustulosis palmoplantaris or acne. ²²
SCALP	The coincidence of sebaceous nevus syndrome, central nervous system malformations, aplasia cutis congenita, limbal dermoid, and pigmented nevus (giant congenital melanocytic nevus). ²³
SDRIFE	Historically, the condition coined 'baboon syndrome' was described as a special entity of a mild systemic cutaneous erythema after oral exposure to type IV allergens, such as nickel, mercury or drugs. Recently, it has been proposed to replace this term by the acronym SDRIFE (symmetrical drug-related intertriginous and flexural exanthema) for those reactions occurring after exposure to systemic drugs. ^{24,25}

SKALP	the acronym SKALP (skin-derived antileucoprotease) was suggested as a name for these new proteinase inhibitors. Elastase inhibiting activity (EIA) was demonstrated in the epidermis from lesions and in psoriatic scale, whereas normal epidermis did not contain significant EIA. Two new elastase inhibitors were partially purified and characterized using psoriatic scale as a source. ²⁶
TOASSUC	The spectrum of disorders reported in association with Sjögren's syndrome and sarcoidosis is wider than suggested in the acronym TASS syndrome (thyroiditis, Addison's disease, Sjögren's syndrome and sarcoidosis), and some authors suggested that the acronym TOASSUC (thyroiditis, other autoimmunity, Sjögren's syndrome, sarcoidosis, ulcerative colitis) includes a wider range of disorders and may be more memorable. ²⁷
WILD	(warts, immunodeficiency, lymphedema, dysplasia). ²⁸

fully encompasses the anomalies that may be observed in the patients affected.¹⁵⁻¹⁷ Acronym might not be conclusive to all the features of the syndromic conditions, and conversely, it might not be inclusive of all the features of the conditions.

The advances in understanding and the appearance of new features in a given acronymic syndrome render previously coined acronym inappropriate or at least suboptimal for those syndromes. In fact many authors have already suggested modification of existing acronyms and many acronyms have already been replaced in the dermatology literature. For example some authors suggest that KID syndrome should be included under the general heading of congenital ectodermal defects as a keratodermatous ectodermal dysplasia (KED).⁷

The newly reported cases with PHACE syndrome (Posterior fossa malformation, Hemangioma, Arterial anomalies, Coarctation of the aorta, Eye abnormalities) suggests further expansion of the spectrum of PHACE to include other forms of disordered cerebral development and endocrine dysfunction. Some authors include an "S" for PHACE(S) to denote the association of ventral defects including sternal clefting and supraumbilical raphe.²⁰

Similarly, some authors added PPK to IFAP after reporting a patient with IFAP (ichthyosis

follicularis, alopecia and photophobia) plus psoriasis-like lesions and palmoplantar keratoderma (PPK).³²

Recent findings in PELVIS and SACRAL syndrome have led to a more inclusive and comprehensive acronym, LUMBAR, which stands for lower body hemangioma/lipoma or other cutaneous anomalies, urogenital anomalies, myelopathy, bony deformities, anorectal/arterial anomalies, and renal anomalies.¹⁵⁻¹⁷

Acro-dermato-ungual-lacrima-tooth (ADULT) syndrome is a rare condition belonging to the group of ectodermal dysplasias. Its clinical phenotype is similar to ectrodactyly-ectodermal dysplasia-cleft lip/palate (EEC) and limb-mammary syndrome (LMS), and differs from these disorders mainly by the absence of cleft lip and/or palate. Prontera *et al.*³³ reported a patient who had the ADULT phenotype associated with cleft palate. The authors thought that, their findings, rather than extend the clinical spectrum of ADULT syndrome, suggest that cleft palate can no longer be considered an element for differential diagnosis for ADULT, EEC, and LMS. They concluded that their findings added to other reports on overlapping phenotypes, support the combining these three phenotypes into a unique entity that they propose to call 'ELA syndrome', which is an acronym of ectrodactyly-ectodermal dysplasia-cleft lip and

palate, limb-mammary, and ADULT syndromes.³³

Having said the above advantages and disadvantages of using acronyms in dermatology literature, it is important that authors, referees and editors pay attention to the comprehensibility of the language they use in the articles selected for publication and hence laying a ground for an optimal standards and uniform terminology in dermatology.

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