

Letters to the Editor

On time to veto the use of the word “appendagitis”?

Key words: Epiploic appendage. Epiploitis. Appendagitis.

Dear Editor,

In a letter to the Editor in *The Spanish Journal of Gastroenterology* González et al. (1) explain the etymology of the word *apendagitis* in Spanish, derived from the English word *appendage*. They translate the word *appendage* in Spanish as *hanging out*, because of the epiploic appendages appearance. Nevertheless, the Spanish translation of this word in that of *apéndice*, which has not any reference to the meaning of *hung*. This word has not relation with gravity. In the Anglo-Saxon books of anatomy the term *omental* or *epiploic* appendages from the latin *appendices epiploicae* is employed.

I used to employ the term *epiploitis* in Spanish to describe the inflammation of those appendages, and the word *apendagitis* in Spanish sounds me harder. However this is the term employed by Spanish authors (2). Using the search term *epiploitis* in PubMed yields some articles which non-Anglo-Saxon authorship raised the suspicion of a direct translation. When *apendagitis* is used as the search term more articles appear with great Anglo-Saxon authors involved. On contrast, neither term *apendagitis* nor *epiploitis* belong to the Medical Subject Heading Terms (MeSH). So, the correct form (at least by now in Spanish) is not decided. We call *apendicitis* in Spanish the cecal appendage inflammation. The inflammation of an epiploic or adipous appendage, terms employed in our classic books of anatomy, should be called *apendicitis*. Confusion will be created with the anterior disease, which has higher incidence and clinical importance. So we can add the adjective *epiploica* to

avoid that ambiguity. French physicians employ their own semantics, why should not we do the same thing?

In the article by Gonzalez et al. (1) there is a point that I would like to raise. The authors list some risk factors to develop the inflammation such as obesity because of greater size of the appendages, the intense physical exercise because it increases their mobility, and plentiful meals because of splenic thrombosis. The two formers are clearly opposites. Maybe they are not mutually exclusive but they increase the population at risk, a fact in contrast with the low incidence of this disease. There are not experimental studies and available data are based in descriptive studies. Actually, obesity has been ruled out as a risk factor in a recent review, despite that the epiploic appendage (3) size is directly connected with the weight of the subject (4). This size is not necessarily connected to the risk of developing inflammation. The twisting hypothesis will suggest that, but it will be difficult to find evidences to confirm this hypothesis. In the meanwhile, such assertions should not be laid down since evidence will be found.

From a semantic and etymology point of view the term *apendagitis* in Spanish seems not to be accurate to describe the epiploic appendage inflammation. We suggest the term *epiploitis* or *apendicitis epiploica* in Spanish, words with a soft phonetics, always under personal appraisal.

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