Current Trends in Romanian Medical Lexicography

Mariana FLAIŞER*

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The large number of general medical dictionaries in Romanian lexicography is an undeniable advantage for studying the medical terminological corpus. As a consequence of the development of new medical sub-branches, we have witnessed, these last few years, the fervent publishing of dictionaries in various fields such as *genetics*, *bioethics*, *allergology*, *immunology*, etc.

Therefore, we should point out that the diversity and richness of medical terms, as well as the considerable neologization of the current medical language are issues that explain the preoccupation of both lexicographers and doctors for these specialized vocabulary components.

The first point of our comment on Romanian medical lexicography as a whole is, as mentioned before, the possible dissociation of the lexicographic material under survey in two large categories:

a) *general medical dictionaries*, like for instance: *Medical Dictionary*, published by Medical Publishing in 2005, authors Valeriu Rusu et al. (which was republished several times until 2010); *Medical Dictionary*, authors L. Mănuilă, A. Mănuilă, M. Nicoulin, Ceres Publishing, 1997; *Medical Dictionary*, Medical Publishing Bucharest, 1969 (2 volumes) – collective work, etc.

b) *specialized medical dictionaries* in field such as *dentistry*, *pharmacy*, *bioethics*, *speech therapy*, *allergology*, *genetics*, etc. Here are some of the dictionaries included in this category: Iuliana Popovici, Anişoara Hrişcu, Dumitru Lupuleasa, *Pharmacy Dictionary*, Didactic and Pedagogic Publishing, Bucharest, 1997; Georgeta Burlea, Marin Burlea, *Explanatory Speech Therapy Dictionary*, Sedcom Libris Publishing, Iaşi 2004; Ion Maftei *Explanatory Dentistry and Oromaxillofacial Surgery Dictionary*, Cerma Publishing, Bucharest 1994; Dociu T. Ioniţă, *Illustrated Dental Dictionary*, Transylvania Press Publishing House, 2000; Mariana Flaişer; *Dental Romanian-English-English-Romanian Dictionary*, Demiurg Publishing House, Iaşi 2002; Lucreţia Titircă, *Dictionary for Registered Nurses*,

* "Grigore T. Popa" University of Medicine and Pharmacy of Iaşi, Romania.

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Romanian Medical Life Publishing, 2008; George Rusu, *Diseases and Syndromes with Proper Names*, Junimea Publishing, 1975; Maria Niţă, Otilia Bogdan, *Bioethics Dictionary*, Aius Publishing, Craiova, 2009; Tudor Ileana, Grivu Ovidiu, Dragomirescu Dan, *Dental Romanian-English English-Romanian Thesaurus*, Mirton Publishing, Timişoara, 1998, etc.

If we consider the definitions proposed by Angela Bidu Vrînceanu in her paper, *Specialized Vocabulary* (Bidu Vrânceanu 2007: 45 sqq) for *general dictionaries and special dictionaries*, we find her definition of *special dictionaries* convenient for the field we have been tackling, being close to the linguistic realities that these terminological corpuses refer to. According to the author, "*special dictionaries* (terminography) are difficult to use by non-specialists, as their diversity and technicality confines them to a particular field of knowledge and they are strictly determined by scientific epistemology and research" (Vrânceanu 2007: p.45)

As concerns the general medical dictionaries category, one should bear in mind that they illustrate the medical terminology corpus as a whole, the main source of various terminologies of strictly specialized medical fields, which are the result of ultra-specialization.

Here are some characteristics of the medical terms inventoried in general medical dictionaries:

1. *richness of the lexical material*. For instance, Valeriu Rusu's dictionary published in 2010 includes a higher number of terms than the more modest *General Medical Dictionary* of 1968, which proves the dynamic nature of the medical vocabulary and the constant "refreshment" (Mănuilă, Mănuilă, Nicoulin 1997: VII)[1] of the specialized terms.

For example, whereas in 1997 terms such as "*bioethics, Poems syndrome, Hellp syndrome, genic therapy, medicometry, predictive medicine, hepatitis C, D, PET* (positron emission tomography), Elisa (test or reaction)" (Mănuilă, Mănuilă, Nicoulin 1997: s.v.) were considered "new terms", some of them (*bioethics, Elisa test, hepatitis C, D,* etc.) have already become frequent terms which are well-known both in the general medical language and in everyday Romanian language.

2. Some of the both general and specialized medical dictionaries also include the *etymology* of the terms they define: *ascites* (fr. ascite), excess fluid in the space between the tissues lining the abdomen and abdominal organs (the peritoneal cavity)...; *gene*, f.n. (<gr. *genos* = ancestry, descendant, generation...) (Burlea, G., Burlea, M., 2004: sv.)

3. *callus* (lat. callosus = thickened), sin. *calus*. (L. Mănuilă, A. Mănuilă, M. Nicoulin, 1997: s.v.)

As for the etymology of the medical terms in general medical dictionaries or in medical sub-branch dictionaries, we need to underline that their etymology is not always included or if it is its accuracy is debatable. For example, *caustic* (gr. kaustikos, which burns); *cautery* (gr. kauter = red hot iron), *cauterization* (no

[1] The authors point out that the "[medical] terms are constantly updated".

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etymon), etc[2]. Etymology clarity, multiple etymology clarity, consistency in drafting the dictionary (be it medical or otherwise), preserving the preset patterns, would contribute to the correct learning of the terms.

4. Another inconsistency of these medical dictionaries is related to the symbols employed to designate the *grammatical categories*: *noun* (s), *verb* (v), *adjective* (adj), etc. In some dictionaries, these *linguistic indications* are included in the "guide for the good practice of medical language" (Mănuilă, Mănuilă, Nicoulin 1997: IX)[3]. This guide is supposed to reveal the meaning of these "linguistic indications". In the authors' opinion, only the "derivative components" (affixes, affixoids) used in the medical field belong "stricto senso" to linguistics. In other dictionaries like the *Speech Therapy Dictionary*[4] the terms *title words*, *grammatical categories*, etc. prove that the authors are familiar with elementary lexicography notions. Moreover, this dictionary, as well as many others, includes in the description of a medical term the symbols referring to their grammatical categories, without failing to specify, sometimes correctly, their etymologies: *synapse* f.n. (<gr. synapsis = connection); *bradilaly* f.n. (<gr. bradys = slowly, lalia = speech, from lalein = to speak; Engl. bradilaly). As one can notice, etymologies take into consideration the primary source, the Greek language, of the medical term. The authors fail to specify the channels through which some terms, like the ones mentioned above, entered the Romanian medical terminology, i.e. the *French language*. In other medical and pharmaceutical dictionaries[5], "linguistic indications" are completely absent, *colon* (gr. kolon, large intestine), *hypothermia* (hipo + gr. thermae = heat) = decrease of the bodily temperature below 36^0 C, etc.

4. When tackling an extremely wide medical chapter, that of abbreviations, *acronyms*, *symbols and sets of initials*, we should rely on the opinions of both linguists and doctors related to these lexical realities.

a) Firstly, as we have already pointed out, the chapter of medical abbreviations is an extremely generous one. V. Rusu's *Medical Dictionary* comprises 2000 abbreviations, acronyms, symbols, etc. (p. 89-147)[6], which entitles one to speak of a passion for abbreviations or of "abbreviomania" (Rusu 2010: 92)

Abbreviation is the act or product of shortening particular words by using only the first letters of these words which designate, in our field of expertise, realities, phenomena, processes, anatomic parts, names of diseases, physical constants, drug delivery means, institutions, names of specialists, therapeutic indications and laboratory investigations, etc.

[2] Examples excerpted from the *Pharmacy Dictionary* quoted above, s.v.

[3] Therefore, the authors argue that: "This dictionary does not resemble any other work of this kind, since it is the only medical dictionary including *linguistic indications* rendered by examples in the guide for the good practice of medical language".

[4] See *supra*.

[5] Examples from the *Pharmacy Dictionary* quoted above.

[6] V. Rusu argues that the number of abbreviations included in the 2010 edition of his *Medical Dictionary* is small "when compared to the *Common Medical Abbreviation, Abbreviation-server* site, which has no less than 2074367 entries" (cf. Rusu 2010: 92).

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Given their frequent use in the medical world, some medical abbreviations such as VSH, EKG, OMS, HTA, TBC, etc., have come to be known not only by medicine specialists, but also by Romanian language speakers who do not belong to this category of specialists. Other abbreviations such as *HES* (hypereosinophilic syndrome); *SMP* (myeloproliferative syndrome); *LAM* (lymphangioleiomyomatosis) may create confusions when trying to decode them, considering the disagreement between the translation of the English term which grounds the borrowed abbreviation and the original order of the abbreviated elements. In the example *hypereosinophilic syndrome*, the HES abbreviation stands for the English phrase *hypereosinophilic syndrome*. It goes the same for *stiffness index*, *STI* – for the English term *stiffness index*. Another shortcoming of this lexical practice is related to the fact that the same graphic sign may have several meanings, not only in the medical terminology, but in other scientific fields as well. There are similar abbreviations in different scientific fields and in the social and political life, which means that the same abbreviation may mean a number of things. For example, *CFR means the Romanian Railway System* and also the *Romanian Pharmacists' Association*. V. Rusu's *Medical Dictionary* identifies more than "55 meanings for the PI abbreviation, some of which are very close: *expiratory pressure, pressure in inspiration, protease inhibitor, post injection*" etc. (Rusu 2010: 96)

Therefore, a lot of caution is required when dealing with medical abbreviations and particular attention should be paid to meaning decoding[7]. Depending on the origin of the medical terms that are abbreviated, there are two large categories of abbreviations in the field of medical and pharmaceutical abbreviations: a) *Latin abbreviated terms: add, adde* = add, *I.M.* = intra muscular, *d.t.d. = detur tales dossis* = give such doses; b) *English abbreviations*: CAD = *coronary artery disease*, ELISA = *enzyme-linked immunosorbent assay*, HIV = *human immunodeficiency virus*, etc.

The abbreviation phenomenon is not characteristic only to modern languages. Linguists argue that abbreviations were even used by the Greeks and Romans in ancient times. Silvia Pitiriciu and Dragoş Topală reckon in their work already referred to that "ASTRA, CFR and CEC are the oldest official abbreviations" (Pitiriciu, Topală 1998: 12). In our opinion, the practice of abbreviation is much older in the Romanian linguistic environment, if we consider the Byzantine works or art, especially religious paintings, which include abbreviations and symbols that harmoniously integrate the overall pictorial work. The lists and chapters of abbreviations included in medical dictionaries and in medical treaties do not suffice to cover this linguistic reality. Considering the substantial extent, circulation and occurrence of these lexical realities in the professional language, we feel that it would be necessary to draft special medical abbreviations, acronyms and symbols dictionaries.

[7] The doctors' reservations as concerns the excessive use of abbreviations in medical writings is accounted for by the fact that "the ambiguity of such [symbols] may very seriously impede on the patients' safety". That is why the *Dictionary of Medical Acronyms and Abbreviation*, *Elsevier*, 2005, includes a list of very dangerous abbreviations entitled "do not use" (cf. Rusu 2010: 94).

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The major difference between general medical dictionaries and specialized medical dictionaries is the actual terms selection procedure. Who makes the selection? Most of the times, doctors and pharmacists. Sometimes, lexicographers, professional philologists. What is certain is that the joint efforts of the two categories of professionals would result in the publication of very reliable medical dictionaries[8].

Special medical dictionaries, which concern medical fields like *bioethics, genetics, dentistry, speech therapy, etc*., should only include *highly specific terms*. Nevertheless, any rough examination of the lists of terms found in these dictionaries proves that the authors also include many general medical terms for two reasons:

a) Any medical branch has an interdisciplinarity relation with a multitude of different medical or other sciences. Leaving aside medical terms like *gland*, *cell*, *eye*, *sarcoma*, *abdomen*, *tachycardia*, *toxin*, *artery*, *algesia*, *anesthesia*, *therapy*, *corpuscle*, *abscess* (Flaişer 2002: s.v), *disease*, *endemic*, *red blood cell* (*Dicţionar medical* 1969: s.v.) etc. in specialized dictionaries would mean the violation of the fundamental concept of medicine, according to which the human body is a complete unit.

b) Another motivation for including general medical terms in medical specialized dictionaries (of bioethics, speech therapy, pharmacy, dentistry, etc.) would have to do with numbers (quantity). Any specialized dictionary including only the specific terms of particular medical branches (like the ones mentioned above) would look like a modest list of words, since the terms tackled are less numerous than general medical terms. Could one consider that this practice, i.e. including general medical terms among terms that are highly specific to a particular medical branch, decreases the quality of the work of the authors of this lexicographic writings? We think that this would be too harsh and unmerited criticism. The repetition of general medical terms may uselessly burden specialized dictionaries, but "repetitio est mater studiorum" and the beneficiaries of medical lexicographic writings, who are specialists in various medical branches and who are familiar with the borders between general and particular, will know how to differentiate among the terms depending on their specificity.

Another classification of current medical dictionaries may rely on the languages in which the terms are listed. Thus, there are: a) *unilingual dictionaries* (dictionaries in Romanian, also called *explanatory dictionaries)* where different lexicographic methods are used at the same time depending on the formal structure, importance and polysemy of the terms.

[8] Acad. Silviu Berejan argues that: "It has become imperiously necessary to define strict selection principles, from the incommensurate amount of international scientific and technical terms, of those terms that may and is reasonable to be included in the general national language dictionary. This is currently one of the most difficult issues in international lexicographic practice. Its complexity resides in the very essence and nature of the technical and scientific terms, the perception of which requires special knowledge. But, most of all, the lexicographers developing general dictionaries do not possess such knowledge, and it is impossible for lexicographic teams to include specialists from absolutely all the current scientific and technical fields. Secondly, even specialists would be unable to solve the situation, since their linguistic intuition is limited by their belonging to a narrow professional team, for whom all the terms included in the field are of topical importance" (Berejan 2000: 22–23).

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c) And bilingual and polylingual dictionaries (cf. Bejenaru, Bejenaru, Năstase 2003, Mincu et alii 1998, *Dicţionare electronice*, etc.). Bilingual or polylingual dictionaries reveal several characteristics of Romanian medical terminology, namely:

1. the Latin-Roman nature of Romanian medical terminology[9], due to the presence of Latin terms, affixes and affixoids, of denizens from the medical French of the 18th, 19th centuries and up to today.

2. excessive neologization – a process leading to medical language internationalization, both by Greek and Latin terms which still exist in the medical international language, and by the current neologizing trends, in particular by words of English origin.

Another issue that needs to be addressed when tackling current medical dictionaries is the existence of *on-line* medical dictionaries. *Sign* Publishing posted a series of professional electronic dictionaries on the Internet. Thanks to the medical terms translated in various languages and thoroughly explained, any more or less specialized user may get familiar with the medical language and realities beyond the medical word. Thanks to several doctors preoccupied with the correct use of medical terms, with avoiding popular etymology, with punishing the phantasmagoric lexical creations of Internet surfers, we enjoy today the existence of an online *Medical Dictionary of Digestive Disease Confusions*[10].

Thus the correct term is "*bloating and not imbloating, diarrhea* and not *diarrhia*; there is no such medical term as *nerves in the stomach* and not even a synonym. It is probably just a gastric pain due to hyperacidity". Medical specialists are greatly amazed when confronted with "lexical curiosities" found on the Internet: "You probably do not think that there are searches such as *anal stool, pig liver improving human liver*"[11] etc.

To conclude with, current medical lexicography is an extremely wide and complex field. This paper was not aimed at dealing with all the definitive components of lexicographic medical writings, as its purpose was to focus on the characteristics, qualities and shortcomings of these dictionaries, with a view to contributing to the improvement of the quality of the Romanian scientific language.

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[9] Doina Butiurcă argues that the "medical terms originating in French grounded on the Greek-Latin formants matrix" are one of the "four lexical layers of Romanian medical terminology" (Butiurcă 2009: 43–44).

[10] Doctor Alecse Valerian Dițoiu has a medical consultation and information site (www.despreboli.ro), where we also find entries on the meaning of some medical terms.

[11] See *supra*.

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Abstract

In the Romanian lexicography, the existence of a large number of general medical dictionaries represents an advantage for the study of the terminological corpus in the field of medicine. In recent years, we can notice, as a consequence of the appearance of certain new medical sub branches, an intense activity of publication of certain dictionaries focused on fields such as: *genetics, bioethics, immunology*, etc. In this respect, we have to mention that the diversity and richness of the medical terms, the accentuated use of neologisms in the current medical language are elements which explain the concern, both of lexicographers and of physicians for these aspects of the specialized vocabulary.

The analysis of the Romanian medical lexicography can show, besides the positive aspects, certain decreases of this kind of writings. Therefore, the special dictionaries which take into consideration narrow fields (*dentistry, bioethics, logopedia*) take up the general medical terms; these repetitions unnecessarily charge the inventory of the specialized terms. Even though there is a diversity of current Romanian medical dictionaries, there are still uncovered areas. Even though certain treatises of medicine contain lists of abbreviations and acronyms, the autonomous dictionaries of medical abbreviations are not present in the Romanian lexicographic area. All these notations, and not only, can contribute to the replenishment of the image of the Romanian scientific lexicography as a whole.

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