

Misnomers in Dermatology

Ammar Alhathlool, MD

Department of Dermatology and Allergy, Biederstein, Technical University of Munich, Munich, Germany

ABSTRACT

Dermatology literature is rich in descriptive terminology, full of numerous disease names and terms. It also includes number of misnomers, which are misleading to physicians outside the specialty. Herein, we have discussed a few examples of common diseases that cannot be interpreted literally. These misnomers stem largely from lack of appreciation of underlying etiology or histopathological features of certain skin conditions, imprecise historical observations and erroneous eponymous credit.

KEY WORDS: misnomers, dermatology, terminology

INTRODUCTION

In the daily practice in the field of dermatology, there are many misnomers used widely by many dermatologists. In this work, I try to collect the dermatological misnomers I faced in the search function in Pubmed, Dermatology 3rd Edition by Bologna, Practical Dermatopathology by Rappini and Braun-Falco's Dermatology 3rd Edition. However I excluded any misnomer which undergoes to a lot of terminological debate. This work considered as continuation to Barankin and Freeman work.¹

- 1. Acanthosis Nigricans:** Somewhat common, velvety papillomatous hyperpigmented plaques. Histopathologically it presents Hyperkeratosis and papillomatosis, but the acanthosis usually absent.²
- 2. Auspitz Sign:** This sign was discovered by both Devergie Jeune (1860) and Hebra (1845), Heinrich Auspitz (1835-1886) was not the first

one who describe it.³

- 3. Borst Jadassohn phenomenon:** In 1904, Borst first observed nests of malignant cells at the edges of carcinoma of the lip as secondary intraepidermal growth of the carcinoma. Jadassohn in 1926 described the epidermal nests occurring in the absence of dermal invasion, who thought that these were intraepidermal basal cell carcinomas. Mehregan and Pinkus concluded that Borst and Jadassohn had described quite different biological phenomena, and the term "Borst-Jadassohn intraepidermal epithelioma" should be discarded. They believed that Borst was describing a squamous cell carcinoma of the lip that secondarily invaded the epidermis, and the Jadassohn lesion has a mixed etiology and that intraepidermal basal cell carcinoma seldom occurs.⁴
- 4. Cellulitis:** It is common infection of the skin. Cellulitis defined in the dictionary as inflammation of tissue but is commonly used to mean

Correspondence: Dr. Ammar Alhathlool, Biedersteinerstr. 29, 80802 Munich, Germany, Email: dr_sa2@hotmail.com, Tel.: +49 89 4140 0

infections cellulitis.²

5. **Collagen disorders:** This term is a misnomer because the connective tissue contains many components other than the collagen.¹
6. **Congenital triangular alopecia:** is a common disorder that is assumed to be congenital. But most of the cases appear to develop during the first few years of life, and the term “congenital” is a misnomer, Temporal triangular alopecia has been proposed.⁵
7. **Cosmetic Dermatology versus Cosmetology:** Some dermatologists who call themselves cosmetologist are degrading their status. The term “Cosmetic dermatologist” has been proposed to keep the value of their education.⁶
8. **Granuloma faciale (GF):** uncommon brown-red plaques on the face of adults. It is a misnomer, as there is no granuloma formation.²
9. **Granuloma gluteale:** Granuloma gluteale infantum is a benign disorder with the clinical appearance of “granulomatous” nodules involving the diaper area. The name granuloma gluteale infantum is a misnomer since no granulomas are found in these lesions.⁷
10. **Dyskeratosis follicularis:** It is a synonym for Darier Disease, but Darier disease affects not only the skin but also oral mucosa and nails, confirming how false the name dyskeratosis follicularis.⁸
11. **Dyshidrotic eczema:** The original definitions of dyshydrosis by Tilbury Fox (1873) and pompholyx by Hutchinson (1876), emphasized that clear vesicle develop in normal skin and often recurrent. Fox implicated sweating while Hutchinson not. Careful Histologic studies have shown that the vesicles do not reflect occlusion of sweat ducts. Nonetheless, many patients do have hyperhidrosis, confusing the

issue somewhat. The eruption is somewhat more common during the summer, providing a weak but tantalizing link to sweating.⁸

12. **Ectoderma dysplasia:** very rare heterogeneous group of more than 150 disorders of skin and its appendages, mainly involving hair, teeth, nails and sweating. It is a misnomer because the ectoderm is hypoplastic, not dysplastic (if dysplasia is defined cytologic atypia of epithelium).²
13. **Eruptive syringoma:** some of the so-called “eruptive-syringoma” may represent a hyperplastic response of the eccrine duct an inflammatory reaction rather than a true adnexal neoplasm. The term “syringoma dermatitis” has been proposed.⁹
14. **Herpes gestations:** The misnomer (Herpes) is unfortunate, as it has nothing to do with herpes virus. The term Pemphigoid gestations is better to be used.²
15. **Horn Cyst:** These intraepidermal whorls of invaginated keratin found in seborrheic keratosis are not true cysts because each connects to the skin surface via a prominent ostium. Horn pseudocysts have been proposed as a more appropriate term.¹⁰
16. **KID syndrome (Keratitis, Ichthyosis and Deafness):** According to Caceres-Rion KID syndrome is a misnomer because most of the patients have diffuse hyperkeratotic erythroderma rather than ichthyosis.¹¹ A new term has been proposed keratodermatous ectodermal dysplasia (KED).¹²
17. **Leser-trélat Sign:** Two European surgeons, Edmund Leser (1828-1916) and Ulysee Trélat (1828-1890) are credited to be the first description of this sign. Actually they observed cherry angiomas in patients with cancer rather

than Seborrheic keratosis.¹³

18. Macrocephaly-cutis marmorata telangiectasia congenital syndrome (M-CMTC):

The reticulated or confluent port-wine stain and persistent capillary malformations of the central face, rather than cutis marmorata telangiectasia congenital, are the most characteristic cutaneous vascular anomalies seen in so called M-CMTC syndrome. The name macrocephaly-capillary malformation (M-CM) more accurately reflects the features of this syndrome.¹⁴

19. Moniliasis (as synonym to Candida): It is a misnomer since moniliasis refers to a stage of ascomycetes and does nothing to the genus Candida.¹

20. Mycosis fungoides: A French dermatologist, Jean Louis Alibert in 1806 described for the first time a disease “pian fungoide” and in 1835 renamed mycosis fungoides because the resemblance to mushroom. The term is a misnomer since the condition is a cutaneous T-Cell Lymphoma and the fungal infection doesn't have a role in the disease.¹¹

21. Nevus Comedonicus: Its name may be a misnomer since, according to some, true comedons are not present. Nevus comedonicus is viewed by many as hamartoma arising from a defective mesoderm, others consider to be an epidermal nevus involving the hair follicle or an appendageal nevus of sweat ducts.¹⁵

22. Palisaded encapsulated neuroma (PEN): It is asymptomatic skin colored or pink, solitary, papule of the face of adults. Well-circumscribed but poorly encapsulated, with less palisaded than Schwannoma (It is somewhat a misnomer).²

23. Pautrier's microabscess: In the cutaneous T-

Cell Lymphoma, there is a collection of atypical lymphocyte in the epidermis. It is a misnomer since an abscess refers to collection of neutrophils.¹⁰

24. Porokeratosis: It is a misnomer, as porokeratosis has nothing to do with pores of sweat glands.²

25. Pyogenic granuloma: It is a misnomer since the condition is neither pyogenic nor granulomatous. It is a vascular lesion with lobular capillary hemangioma on histology.¹

26. Scleredema: It is a misnomer, since histologically neither sclerosis nor edema, but thickened dermis with mucin deposition between collagen bundles.¹

27. Sebaceous Cyst: It is a misnomer for epidermal or epidermoid cyst. The cyst originally lined by epidermis not of sebaceous origin.¹

28. Stasis dermatitis: In 1917, the leg ulcerations secondary to chronic venous insufficiency have been termed “stasis ulcer”. This is based on idea proposed by Homans. But it is thought that the fact “stasis” does not occur.¹⁶

29. Tinea Versicolor: This disease not caused by one of three genera of the Tinea. Therefore some prefer the name pityriasis versicolor.²

30. Urticaria Pigmentosa: It is a misnomer; there are no wheals and also a little or no pigmented lesions.¹⁷

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