



Commentaries

Acronyms: What's In a Name?

I sometimes work out wearing a t-shirt from the Parkinson Study Group (PSG), a clinical research consortium I belong to, which boasts the many studies the PSG has successfully completed, all having acronyms, with their names arrayed in a Scrabble-like format. I am a little embarrassed by the shirt because of these acronyms. I would much prefer a small logo. The acronyms themselves had become a source of personal irritation which had been dying down until a recent article in *JAMA* ("Extremities," Sept 10, 2008) revived it. Believe it or not, trials with acronyms are more commonly cited than those without, and protocols with acronym titles are thought to more likely be funded than those without (*NEJM* 2006;355:101).

What this says about clinical researchers who review or cite the studies is unclear, but I doubt that it's good. I'm sure every reader has watched advertisements on TV and wondered who that ad was intended to influence. Was it the 13 year-old boy embedded within the 60 year-old man that would allow him to view a beautiful young female model and confuse her with an expensive gas-guzzling car? Was it the teenage girl in the pudgy, middle-aged woman who thinks that an expensive diamond will put the thrill in the marriage again? Do we really think that an Olympic athlete dripping colored sweat sells Gatorade? Obviously groups with larger amounts of money than most of us believe this. So why will a study called DAZLE be more likely to be successful than a study called "Disability after zirconium-levodopa enteral infusions," possibly then called the "Z study" or merely the "zirconium study?" [this study is made up. I'm not sure about the acronym. It may have been a *New England Journal of Medicine* article whose name, not content, made a dent in my memory, perhaps an example justifying acronyms]

There is a company that makes its living creating names for new products. They came up with "Lexus," an obvious success. I don't know about their other

inventions but I think they too have experienced successes. When the Ford motor company launched a new car in the fifties it hired the poetess, Marianne Moore, to supply a list of names for its models. Whether it was due to the name or the car itself, the company rejected her suggestions and, instead, named the car after a member of the Ford family, making poor Edsel Ford's name synonymous with poor quality and failure.

I have been involved in a series of trials of a single drug for Parkinson's disease that have taken for their names the tempos of classical music. The first study in the series was TEMPO, then LARGO, PRESTO, and the last, ADAGIO, which suitably was aimed at slowing disease progression. Some of these acronyms arise quite naturally, with the abbreviated goal of the study naturally spelling some appealing name, either exactly or closely, allowing the official title to be teased into a form that allows the acronym to fall out rather easily. Sometime the acronym comes first. These names are more annoying because they have taken on an unfortunate life of their own and often provide no information on what the study was about.

I have had two flings at acronyms, the first successful and the second not. The title of my first proposal was "low-dose clozapine for the treatment of psychosis in Parkinson's disease." This does not easily translate into a catchy name, but "Psychosis and clozapine for Parkinson's psychosis" became PSYCLOPs, a rather catchy title which I came up with myself. I even invented a logo of a smiling face with one eye. The logo was used informally, the acronym officially and the project funded by the federal government. My next proposed study was pretty close to the first but with a different drug, quetiapine. So the trial name became: quetiapine against psychosis in PD, or QUAP. I thought this rather clever, reflecting perhaps a strain of sophomoric humor in an otherwise elderly persona determined to emanate oth-



erwise a sense of gravitas. When I presented my proposal at a reverse site visit at the National Institutes of Health (NIH), a friend at the funding agency pulled me aside and told me that I had to change the name of the study. "Some people will think you're saying your study's name is 'CRAP!'" In fact that was the point. I thought it rather clever and assumed that the reviewers would also find this clever and amusing, perhaps even bold, and give me extra points. They did not. They seemed to think it was, in fact, crap, thereby erasing "clever, amusing and bold," and substituting instead "second rate," or "loser." The resubmission of the study, without an acronym, aroused no complaint but no interest either and the proposal died an unheralded death.

I recently voted with the rest of my steering committee to accept the name "APPLIED" for a study of an experimental drug, Aplindore, in Early Parkinson's Disease, benign if uninspired. Why not simply "The Aplindore Study?" I would have preferred it, but not my colleagues. They like SEESAW, TEAPOT, CONCEPT, PRECEPT, names that convey no useful information (these are real study names).

Are the days of "The Framingham Study" gone? I hope not. Would that have been funded in recent years with an antediluvian name like that?

How about CURMUDGEON, or TROGLODYTE?

—JOSEPH H. FRIEDMAN, MD

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