Words Expressing Finality

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Each language devises its own way of expressing the aging, the closure or the termination of events or persons. Thus, the Greek prefix, *paleo-*, defines an assortment of English words denoting such aging phenomena as fossil plants (paleobotany), ancient geologic epochs (eg, Paleocene), the study of ancient life (paleozoology, paleontology); but, with the exception of paleopathology and a few neuroanatomic terms (eg, paleothalamus), there are few *paleo-* words that pertain to medicine.

The ancient Greeks, never at a loss for descriptive prefixes, offered yet another combining term, *teleo-*, variously meaning entire, complete, perfect, the end of something, or, more concretely, an extremity. The English vocabulary is rife with *teleo-* appended words including telegraphy (writing at a distance), television, telephone, and even telepathy (literally, feeling from a distance). Medicine has inherited further words such as telegnosis, a synonym for clairvoyance and teleesthesia.

Three Greek terms join to form the pathologic term, telangiectasia, defined as the dilatation (*ektasis*) of the terminal (*teleo-* blood vessels (*angeion*). Further medical usage of the *teleo-* prefix includes teleelectrocardiography (EKGs recorded at a distance), telemetry, telencephalon, telephase (the terminal phase of mitosis), and teleology, a word employed by both physicians and the clergy.

Teleology may be defined as that doctrine which insists that final, ultimate causes and purposes exist; and further, that they may be studied in a formal philosophic enterprise called teleology. Medicine tends to be silent on ascribing ultimate causes of cosmic design to biologic or pathobiologic happenings, relying rather on a more Darwinian appreciation to such happenings.

The Latin word, *terminus*, describes a boundary, a limit and sometimes, the end of a path. In late Latin, the word came to mean an expression, even a definition (as in words such as term paper or terminology). And so, a variety of English words evolved: terminate, determine, exterminate, and even interminable (literally, something without an ending). Physicians have reserved the word, terminal, however, to describe illnesses which may not linger but will shortly result in death.

There are, of course, a handful of other words, mostly of Latin derivation, to convey the sense of completeness, finality, the ending.
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In the May 1963 edition of the *Rhode Island Medical Journal*, THOMAS PERRY, JR., MD, president-elect of the Rhode Island Medical Society (RIMS) and a general surgeon at Rhode Island Hospital, shared an account of a month-long medical mission to Algeria at the end of its eight-year struggle for independence.

The physician team included: DRS. ARMAND VERSACI, a plastic surgeon; FREDERICK H. STEPHENS, an ophthalmologist; THOMAS FORSYTHE, a roentgenologist; PATRICIA FARNES, an internist; Charles Cox, an anesthesiologist, pediatricians GEORGE K. BOYD and BANICE FEINBERG, and general surgeons Perry and ANTHONY V. MIGLIACCIO.

Dr. Perry noted that by the end of the conflict in the summer of 1962, there were only about 200 doctors left in the country. “Virtually every French doctor had left the country because the FLN (the Algerian Nationalist Front) rightly or wrongly believed that the medical profession as a whole was secretly aiding the OAS [French Resistance]. Mass extermination of the doctors was therefore announced.” The majority fled the country.

According to the account, the new Algerian government issued a call for medical aid and, through the organization Care-Medico, the Rhode Island team volunteered for the month of October, 1962. They worked in a hospital on the outskirts of Algiers staffing the operating rooms and out-patient clinics. Part of the facility also housed a tuberculosis sanitorium caring for 1,000 patients.

Dr. Perry reported the group took several excursions “except for two days during the Cuban blockade crisis when the American Embassy advised us to stay on the hospital grounds.”

On the weekends, the intrepid among them ventured overnight in a Land Rover to “Bou Saada. This was a rather thrilling trip over a rugged mountain road to an oasis town,” Dr. Perry wrote.

In addition, the medical team was also sent south over the mountains to the edge of the Sahara, to assist at a 700-bed hospital with only a single physician left. Chronic orthopedic cases accounted for the bulk of the surgical patients. Dr. Perry lauded the “aseptic techniques” of the Algerian technicians but, “we regarded the toilet facilities as a major adventure.”