

Nude Mice

**And Other Medical Writing
Terms You Need to Know**

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ISBN 978-1-60145-743-1

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Printed in the United States of America.

Cynthia L. Kryder

2009

www.theaccidentalmedicalwriter.com

Nude Mice

And Other Medical Writing Terms You Need to Know

By

Cynthia L. Kryder, MS, CCC-Sp

With a foreword by Brian Bass

About the Author

Cyndy Kryder has worked in the field of health care in some way ever since she grabbed her Master's Degree and headed to her first professional job as a speech-language pathologist at a private school in suburban Philadelphia. Her later 9-year stint working in a pediatric-rehabilitation hospital developed her passion for writing patient-education materials and cemented her interest in the field of medicine. She launched her freelance medical writing career in 1992 and is thankful for the freedom and flexibility it offers her.

Cyndy currently writes promotional, educational, and scientific pieces for professionals and lay audiences in a number of different therapeutic areas and for a wide range of media. She also assists companies in their publication-planning efforts. A member of the Delaware Valley Chapter of the American Medical Writers Association (AMWA), Cyndy presents workshops and leads roundtable discussions on various topics for freelance medical writers and editors.

In 2008, Cyndy and her colleague, Brian Bass, formed a company and made a commitment to develop books for individuals interested in pursuing freelance medical writing as a career. Their first book, *The Accidental Medical Writer*, describes their indirect and different paths to successful freelance medical writing careers. Subsequent books in the series focus on different aspects of freelance medical writing and provide tools for aspiring freelance medical writers.

You can reach Cyndy at <http://www.theaccidentalmedicalwriter.com>. You can also follow her on Twitter: <http://twitter.com/cyndyandbrian>.

Dedication

To my family. Thanks for sharing my successes as well as my failures, and for agreeing to order out from Rocco's occasionally when a deadline approaches. I love you guys!

Foreword

When I started in medical writing, I had already been a professional writer for 6 years. And while I was still in school, my favorite assignment was to write papers. So I felt pretty confident in front of a keyboard. But by the time I finished my first day as a medical writer, I felt like I was a blithering idiot.

I had just started work for an advertising agency whose clients were all in animal-health pharmaceuticals. The day began with a start-up brainstorming meeting for an ad campaign we were assigned to develop for our client's new product, an equine anthelmintic. Equine *what!*? Now, I knew that equine meant horse. But what the heck was that other word? I could barely say it, let alone figure out how to spell it. The rest of the day didn't go much better. I was bombarded with so many new words that, at first, I thought maybe I had made the wrong career move. After all, how could I be successful if I couldn't even figure out what people were saying? Then I thought better of myself.

Armed with my medical dictionary and a few other medical reference books, I thought to myself, "I can do this. If a medical student can learn it, so can I." From then on, I treated every day like I was in school. I soaked up everything I could, made notes to myself, and then challenged myself to put what I had learned to use by speaking with my colleagues and writing. That helped me to think through the processes and internalize them. Slowly, the new language I was learning began to make sense. But it wasn't easy. It took a lot of time, and I made a lot of mistakes along the way. Some of those mistakes still make me blush to think that I could have been so naïve!

If you're starting out like I did, a professional writer with no prior experience in the health care field, you'll probably feel like I felt at first, too. Dazed and confused, overwhelmed and underprepared. But perhaps you're starting like Cyndy did, a health care professional with

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no prior experience as a writer. I hate to tell you, but you're still in for an uphill ride. Cyndy knew a lot about this stuff before she started writing, and she was overwhelmed by the language of health care, too! Face it, no matter from which direction you come to medical writing, learning the language will be a challenge...at first. The good news is, this book is going to make it a lot easier!

When Cyndy first came up with the idea for *Nude Mice* (that title still makes me chuckle), I thought it was fantastic! We talked about how we both struggled to learn the language of health care, the language of medical writers, when we got started. It wasn't easy. Sure we had medical dictionaries, and they were invaluable. And as the Internet took off, it became easier to research terms, and particularly acronyms, online. We also each had our arsenal of books on grammar and style to help keep us on the straight and narrow. But we realized that none of these tools helped us overcome the linguistic confusion we encountered, and that we still encounter, on a daily basis. Words that sound the same but are spelled differently and have completely different meanings. Words with the same prefixes or suffixes that seem like they should pertain to the same thing, but do they?

Cyndy agreed to write this book to finally unravel the complex language that is medicine, so you can overcome the linguistic challenges you will face throughout your career as a medical writer. It's the book we both wish we'd had long ago so we could separate the Greek from the Latin, the HMOs from the CROs, the viscous from the viscus; and so we'd know a nude mouse when we saw one. It's like the old Chinese proverb, "Give a man a fish and he will eat for a day. Teach a man to fish and he will eat for the rest of his life." Here, Cyndy does a fantastic job of teaching you how to fish out the meaning of the words every medical writer needs to know to become successful. Bon appétit!

---Brian Bass

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Ignorance Isn't Always Bliss

Imagine this scenario. You've been hired by a medical communications firm to create a slide deck for a live symposium that will be presented during the annual meeting of a national medical specialty organization. The therapeutic area is infectious disease, an area in which you haven't worked before. Your client expects you to participate in a start-up teleconference to learn more about the project, discuss the project's parameters, and develop a timeline for deliverables (standard procedure for almost all projects). Because you haven't received any background information yet, you're at somewhat of a disadvantage.

The conference call begins, and you listen carefully as your client talks about a disease that sounds something like "mer-suh." Sometimes she calls it "C-A mer-suh," other times it's "H-A mer-suh." Then she talks about something called "ick-ack" and the IDSA. She discusses the need to focus a portion of the slides on empirical treatment of SSTIs and to incorporate new prevalence information from a recent MMWR article at some point in the presentation.

Huh?

This previous scene isn't fictional. It actually happened to me when I took on my first project in infectious disease. I had been working as a freelance medical writer for several years, yet I was a newbie in this therapeutic area and didn't know the lingo. You might not want to hear this, but in the field of medical writing each therapeutic area has its own unique jargon (that means verbal or written shorthand) and terminology. And that's jargon with a capital J.

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Let me give you one example. The acronym CA means *cancer* to an oncologist (that's a cancer specialist), but to an infectious-disease doctor it stands for *community acquired*.

Here's another example. The acronym ED means *erectile dysfunction* (think Viagra®) to the urologist, but to the physician working in the emergency room, it means *emergency department*.

Those are just two examples, but you get the idea. The meanings change depending on the therapeutic area in which you are writing. And if you're talking about erectile dysfunction when your client's talking about something entirely different, it can be quite embarrassing.

So although I was familiar with the terms and abbreviations for the fields in which I had been working—cardiology, rehabilitation, and women's health—I was rather ignorant when it came to communicable diseases. Not having any background information before the conference call made it even more of a challenge.

You've probably already been in the situation where you talk to your doctors or other health care professionals and they sound as though they are speaking in a foreign language. It's common, and folks in the medical profession are notorious for using jargon that a layperson can't interpret.

Even though I had a quasi-medical background, when I first began working in a hospital I was confused. (You can read more about my background in our book, *The Accidental Medical Writer*.) Sitting in the cafeteria, I listened to conversations that were peppered with acronyms and abbreviations. The nurses and doctors were using jargon as though their lives depended on it. Instead of saying high blood pressure, they said hypertension; for high cholesterol, they substituted hypercholesterolemia. The person in charge of seeing that patients' services were covered by third-party insurers talked about

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HMOs, PPOs, CPT codes, and ICD-9.

The field of biomedical communications is no different. That's why having a great medical dictionary is important. Even more so, though, is the need to have a clear understanding of some of the unique medical writing terms and acronyms you'll encounter. Because as I learned in that first infectious-disease discussion, feeling ignorant does not promote confidence in your skills, no matter what industry you're working in.

That's the purpose of this book. When my business partner, Brian, and I were discussing topics for books in our series, we knew from past experience that it would be important for aspiring medical writers to have a reference source that accomplished two purposes. First, it introduced them to certain terms that are unique to medical writing and the health care and pharmaceutical industries in general; and secondly, it defined acronyms and abbreviations in numerous therapeutic areas. Now that I think about it, there's a third purpose, too. We want this book to give you tools to enable you to figure out unfamiliar terms when you encounter them. We've filtered through the multitude of resources out there so that we can point you to the ones we consider to be useful.

This book is not a reference on English grammar and usage. There are already many excellent sources on that subject (see the resources section at the end of this book for some titles). Nor is this book meant to be a medical dictionary. Browse the shelves of your local bookstore and you can see just how many medical dictionaries already exist.

This book is meant to serve as a tool so that when your clients sound as though they are speaking Greek, you can figure out what they're saying.

And in case you're wondering about the title, nude mice do exist.

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They're specially bred rodents that are missing their thymus glands. And nude they are; they have no hair or fur on their little rodent bodies.

The first time I came across the term was early in my career when I was editing preclinical study reports for a major pharmaceutical company. I was sure the writer had made a mistake until I looked up *nude mice* in one of my handy-dandy reference books and learned that these little guys are widely used in cancer research. Pretty cool, huh?