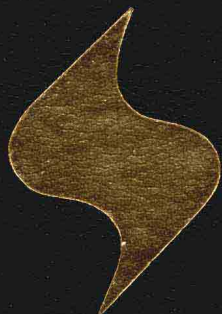


Stedman's

MEDICAL DICTIONARY

25th Edition
ILLUSTRATED



STEDMANS

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MEDICAL DICTIONARY

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Accurate indications, adverse reactions, and dosage schedules for drugs are provided in this book, but it is possible that they may change. The reader is urged to review the package information data of the manufacturers of the medications mentioned.

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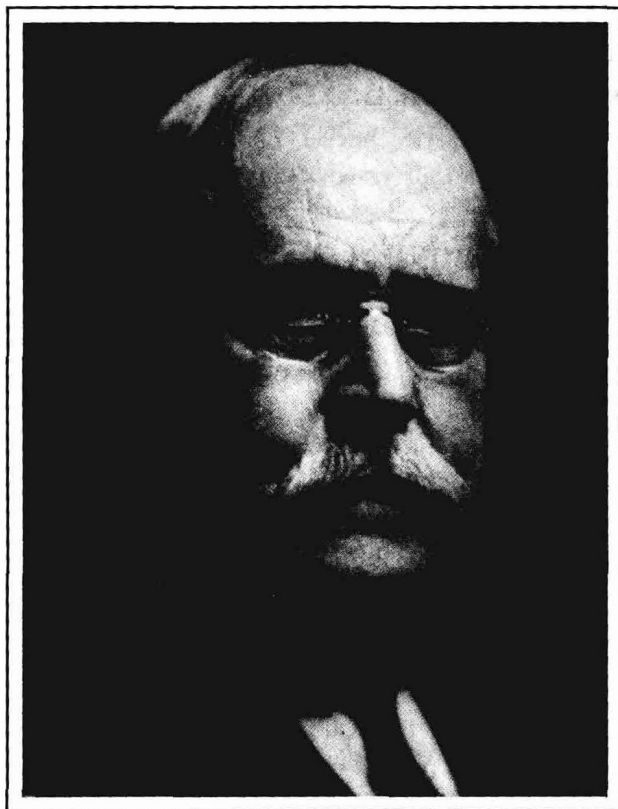
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THOMAS LATHROP STEDMAN

(1853-1938)

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PUBLISHER'S PREFACE

This 25th edition of *Stedman's Medical Dictionary* celebrates a tradition of over one and one-half centuries of American medical lexicography and an ongoing dedication of the dictionary to the needs of the medical and allied health professions.

The tradition began in 1833 with publication of the first American medical dictionary, Dr. Robley Dunglison's *A New Dictionary of Medical Science and Literature*, a work that continued through successive editions until the 23rd edition, which was edited by Thomas Lathrop Stedman, M.D., in 1903. Five years later, respect for an "institution" from which he had learned the language of medicine prompted Dr. Stedman to write a modernized version of the Dunglison dictionary. It was published in 1911 as *A Practical Medical Dictionary* and now is commonly known as *Stedman's*.

By the early 1970s, *Stedman's* led the way as the first American medical dictionary to use database publishing in the form of electronic storage, retrieval, updating, and composition. Another first followed with the adaptation of this innovation to incorporate terms in the 1982 edition into electronic software as a stand-alone medical spelling reference and as part of editorial processing systems. Existing and developing technologies appear to offer limitless possibilities for development and dissemination of "word information" products drawn from the *Stedman's* database and tailored to the needs of any segment of the health-care market.

"User-friendly" is a concept that has been universally applied to computer hardware and software to promote easy and efficient use by both novice and expert. It is a concept that is equally applicable to the print media. Making *Stedman's* easier to use and easier to read has been a major focus in the preparation of this edition, from design of its specifications through construction of its individual entries. First-time medical dictionary users as well as seasoned veterans will immediately appreciate the difference.

Our increased page trim size enhances readability by allowing more white space around the vocabulary entries, wider text columns, and a larger and more open typeface. The traditional main entry-subentry format has been revamped to facilitate scanning for the sought-after term. In multiple-definition entries, the definition numbers are in boldface to distinguish each definition further.

The phonetic spelling used for pronunciation of entry terms has been simplified to a broad transcription to avoid inclusion of esoteric phonetic symbols, the need to remember a variety of stylistic conventions, and frequent consultation of the pronunciation key. For the most part, the phonetic spelling incorporates commonly understood sounds that are encountered in everyday English words.

The "*Stedman's* Subentry Locator," which now conveniently precedes section A of the vocabulary, is unique among medical dictionaries. It functions as an index of the adjectival or descriptive words in subentry terms cross-referenced to the main entries under which the subentries are found. This feature is a particularly useful tool for the dictionary user who is unfamiliar with the main entry-subentry format common to many medical and specialty dictionaries and who would seek a multiple-word term at the strictly alphabetical location common to general language dictionaries.

Users of *Stedman's* are urged to read carefully the section, "How to Use This Dictionary," which follows this preface. There the organization, format, and style of the dictionary are clearly explained, and actual vocabulary entries serve as illustrative examples. An understanding of the principles of *Stedman's* organization, format, and style not only will save time through an efficient search for information but also will increase the amount of information obtained.

The "Medical Etymology" section has been rewritten to concentrate on the principles

of word formation that underlie the creation of medical and scientific terms, with special consideration given to the needs of those users of the dictionary who approach its vocabulary without a background in Greek and Latin.

Each entry in the present vocabulary of approximately 100,000 entries has been reviewed by at least one of the 33 specialty consultants, frequently by three, and often by five or six. This ongoing multispecialty review resulted in the addition and substantial revision (often re-revision) of over 10,000 entries. Noteworthy updating occurred in the terminologies of molecular biology, immunology, infectious diseases, endocrinology, genetics, and psychiatry and psychology. Four appendices, "Comparative Temperature Scales," "Temperature Equivalents," "Weights and Measures," and "Laboratory Reference Range Values," have been revised and updated to include SI units and equivalents.

During this editing cycle we continued to strive for optimum clarity of definitions by rewriting to make them as readable as possible within the constraints of conciseness. As an aid to understanding, all major words in a definition that one would expect to find in a medical dictionary can be found as defined entries in the vocabulary. However, the terminology of many advanced, sophisticated subjects frequently contains terms that can be adequately and clearly defined only to users who have had at least some basic introduction to the material.

Stedman's Medical Dictionary is a working dictionary, a record of a living language. As such, its words are formed, spelled, pronounced, and defined as they are used rather than as they should be. Every dictionary contains numerous words that by philological standards are misformed, misspelled, mispronounced, and misused. A dictionary may suggest standards, as by choosing to place definitions with the terms of an official nomenclature, but it cannot enforce them. *Stedman's*, therefore, serves as a guide for those who wish to speak and write more precisely and to coin new words more accurately.

Acknowledgments

This edition of *Stedman's*, like previous editions, is a tribute to its consultants and contributors, who are listed on the pages immediately preceding this preface. Their generous assistance in the form of recommended new entries, revisions, and "words of wisdom" has been invaluable to the preparation of this edition and doubtlessly will benefit editions to come.

We regret that it is not possible to cite individually all of the nomenclatures, glossaries, compendia, references, textbooks, journals, and other literature sources from which our entries have been derived. Our sincere appreciation is extended to the authors, editors, and publishers of the anonymous publications for their indirect contributions.

Special credit is due the copy editors of Williams & Wilkins and of Waverly Press who, as a result of regularly consulting *Stedman's* during the course of their work on book and journal manuscripts, have provided us with many useful ideas to enhance the dictionary's content.

We thank the numerous *Stedman's* owners who have written us to suggest new entries and revisions and to correct the inevitable errors. We welcome your comments on this edition.

WILLIAMS & WILKINS

William R. Hensyl
Managing Editor

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ORGANIZATION OF THE VOCABULARY

Main Entry-Subentry Format

Entries in the vocabulary generally adhere to the organization of multiple-word terms located as subentries under governing single-word *noun* main entries, in an index-like arrangement. Thus, “hemorrhagic fever,” “Q fever,” and “Rocky Mountain spotted fever” will be found under *fever*; “carcinoid tumor,” “giant cell tumor of bone,” and “Wilms’ tumor” will be found under *tumor*:

fever (fē’ver) [A.S. *fefer*]. Pyrexia; febris. **1.** A bodily temperature above the normal of 98.6°F (37°C). **2.** A disease in which there is an

hemorrhagic f., a syndrome that occurs in perhaps 20 to 40% of infections by arboviruses of the hemorrhagic f. group: al-

Q f. [Q, for “query,” so named because etiologic agent was unknown], a disease caused by *Coxiella burnetii*, which is propagated

Rocky Mountain spotted f., an acute infectious disease of high mortality, characterized by frontal and occipital headache, intense

tumor (tū’mōr) [L. *tumor*, a swelling]. **1.** Any swelling or tumefaction. **2.** Neoplasm. **3.** One of the four signs of inflammation (t., ca-

carcinoid t., argentaffinoma; a usually small, slow-growing neoplasm composed of islands of rounded, oxyphilic, or spindle-

giant cell t. of bone, giant cell myeloma; osteoclastoma; a soft, reddish brown, sometimes malignant, osteolytic t. composed of

Wilms’ t., adenomyosarcoma; embryoma of the kidney; mesoblastic nephroma; nephroblastoma; renal carcinosarcoma; a malig-

In a specialty dictionary, as contrasted with a general language dictionary, the advantages of such categorization in an index-like arrangement of entries are obvious.

Verbs, adjectives, adverbs, combining forms, prefixes, abbreviations, and symbols follow the general rules of indexing and thus are located as main entries.

Multiple-word Terms as Main Entries

Certain multiple-word terms, such as compound words or chemical and drug terms, may deviate from the standard main entry-subentry format.

Compound words that usually are written closed up as one word or that are hyphenated are located as main entries rather than as subentries under the portion of the term that would otherwise represent the main entry. For example, “aftercontraction” is located in the *A*’s rather than under *contraction*; “self-hypnosis” is located in the *S*’s rather than under *hypnosis*.

Multiple-word chemical and drug terms generally are located as main entries unless the term includes a general noun that would logically be considered a type or kind or when the term's location as a subentry would appear to be illogical or forced. For example, "adrenergic blocking agent" (a type of agent) is under *agent*, but "Agent Orange" (a specific compound) is a main entry; "bile acid" (a type of acid) is under *acid*, but "acid red" (a stain that is neither an acid nor red) and "ribonucleic acid" (a molecule rather than an acid) are main entries.

Users of the dictionary who initially may be unable to discern the appropriate location of such terms should look for them at the alphabetical locations of the specific words making up the term.

Multiple-word Terms as Subentries

An elusive multiple-word term may be located as a subentry under another main entry that is synonymous with the *noun* in the sought-after term. For example, a certain surgical "procedure" might be spoken of or written about as an "operation," "technique," or "method" and be found under one of those main entries; similarly, "disease" and "syndrome" frequently are used interchangeably. At such main entries, a cross-reference will refer the user to the alternative main entries under which the desired term may be located as a subentry:

operation (op-er-ā'shūn). 1. Any surgical procedure. 2. The act, manner, or process of functioning. *See also entries under method, procedure, technique.*

procedure (prō-sē'jūr). Act or conduct of diagnosis, treatment, or operation. *See also entries under method, operation, technique.*

disease (di-zēz') [Eng. *dis-* priv. + *ease*]. 1. Morbus; illness; sickness; an interruption, cessation, or disorder of body functions, systems, or organs. 2. A morbid entity characterized usually by at least two of these criteria: recognized etiologic agent(s), identifiable group of signs and symptoms, or consistent anatomical alterations. *See also syndrome.*

syndrome (sin'drōm) [G. *syndromē*, a running together, tumultuous concourse; (in med.) a concurrence of symptoms, fr. *syn*, together, + *dromos*, a running]. The aggregate of signs and symptoms associated with any morbid process, and constituting together the picture of the disease. *See also disease.*

Location of elusive subentries can be determined in the following ways:

- The "**Stedman's Subentry Locator**," immediately preceding section A of the vocabulary, is an alphabetical index of the adjectival or descriptive words of subentry terms and the noun main entry words under which they are located.

- **Cross-reference locators** beginning with the word “see,” within the vocabulary, are found as main entries and as subentries and as part of the definition of an entry. Examples and additional information concerning cross-referencing are given on page xxi.
- For **eponymic terms**, the biographical surname main entry has cross-references to all eponymic terms attributed to that person. Examples and additional information are given under “Eponyms” on page xxii.

Alphabetization

Main Entries

Main entries are alphabetized letter by letter as spelled, rather than word by word as in a telephone directory:

blood	cross
blood bank	crossbreed
bloodletting	cross-cylinder
blood purple	crossing-over of genes
bloodstream	cross-matching
blood vessel	crossway

Alphabetization exceptions are as follows:

- Prepositions, conjunctions, articles, and the apostrophe s of possessive eponyms are disregarded, as are spaces, punctuation, Greek letters (*e.g.*, α , β , γ), numbers, configurational characters (*e.g.*, D-, +, -), and italicized forms (*e.g.*, *p*-, *N*-, *cis*-), whether as prefixes or as interior components in compound chemical terms.
- Prepositional phrases, especially Latin expressions, include the preposition in alphabetization. Therefore, *ante cibum* is in the *A*'s; *in vitro* is in the *I*'s.
- Spelled-out Greek letters and configurational forms are considered in alphabetization. Thus, “ α -naphthylurea” is located in the *N*'s, but “alpha-blocker” is in the *A*'s; “L-dopa” is located in the *D*'s, but “levodopa” is in the *L*'s.

Capitalized words (proper nouns) precede lower case words (common nouns). Thus, “*Streptococcus*” appears before “streptococcus,” and “Down” appears before “down.”

Subentries

Subentries are alphabetized letter by letter following the same rules given above for main entries, but with some additional significant differences.

In subentry terms (as well as throughout definitions of both main entries and subentries), the governing main entry noun is represented by its initial letter, if it is singular; by addition of apostrophe and *s*, if it is a regular plural; or by a spelled-out form, if it