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Illustrated Dictionary of DENTISTRY

JABLONSKI

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STANLEY JABLONSKI

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Introduction

PURPOSE AND SCOPE This Dictionary has been compiled to gather in one place and define terminologies in all specialties of dentistry and allied fields of science and technology, health care (including dental practice management and health insurance), as well as some peripheral terms that are considered to be important or of potential interest to dental practitioners, researchers, educators, students, and auxiliary personnel. Some terms no longer in general use but of historical or etymological interest are also included.

FORMAT The style of the Dictionary follows that of most leading biomedical dictionaries as refined from traditional practices and adapted to modern needs, as in *Dorland's Illustrated Medical Dictionary*.

A typical main entry of a preferred term (as opposed to a synonym) consists of the name (in bold-face type), a phonetic respelling (in parentheses), an etymological source (in square brackets), a descriptive definition, and, finally, synonyms, trademarks (where applicable), and cross-references.

A compound entry, consisting of a noun and an adjective or modifier, is defined under the noun, according to traditional biomedical lexicographical style, which has its origin in the Latin custom of placing adjectives after nouns. Although there are now many non-Latin terms in biomedical (particularly dental) terminology, the inversion of terms under nouns permits clustering of terms on the same subject, thus allowing the reader to find related terms at one place and facilitating extensive browsing.

Many illustrations and tables complement the definitions, and are aimed at giving the user maximum information within the framework of a dictionary.

Information considered to be unsuitable for the standard dictionary format has been arranged in the frontmatter and in appendices. This includes The Language of Medicine and Dentistry (pp. xi–xiv), the organization and functions of the American Dental Association (Appendix 1), and the Canadian Dental Association (Appendix 6), directories of schools of dentistry in the United States (Appendices 2–5) and Canada (Appendices 7–9), and Laboratory Reference Values of Clinical Importance (Appendix 10).

ARRANGEMENT AND ALPHABETIZATION Entries will be found alphabetized on the sequence of the letters, regardless of space or hyphens that may occur between them. An exception to this occurs in the case of compound eponymic terms; for example, *Brown Kelly* and *Brown-Symmers disease* precede *brownian*, and *Caldwell projection* precedes *Caldwell-Luc operation*. In eponymic terms, the apostrophe s ('s) is ignored in determining the alphabetical sequence; thus *Barton's bandage* precedes *Bartonella* and *Addison's anemia* precedes *Addison-Biemer anemia*, both as a main entry and under *anemia*. Similarly, umlauts (ö, ü) are ignored in alphabetizing proper names. German proper names in which umlauts appear are sometimes Anglicized; for example, *Böck* may be written *Boeck* and *Müller* may be written *Mueller*. Proper names beginning with "Mc" and "Mac" are alphabetized as though spelled "mac" in every instance, the sequence being determined by the letter immediately following the c.

A proper name (capitalized entry) appears before a common noun (or lower case entry) with the identical spelling. Thus, *Bacteria* precedes *bacteria*, *Streptococcus* precedes *streptococcus*.

The plural of a word that is irregularly formed or of a foreign word is given following the phonetic respelling and often is given a separate bold-face listing in proper alphabetical order. Subentries appear in proper alphabetical order, determined by the subsequent modifying word or phrase, regardless of whether they are singular or plural. For example, under *arteria*, the entries *a. alveolaris inferior*, *arteriae alveolares superiores anteriores*, and *a. alveolaris superior posterior* appear in that order.

ETYMOLOGY Information on the derivation of a word appears in square brackets following the phonetic respelling, or following the plural form of the word, when that is given. The original foreign words from which the terms in this Dictionary are derived are reproduced in italic type, the language of their origin being indicated by the appropriate abbreviation (see list under the heading Abbreviations).

As a guide to related vocabulary, especially on anatomical terms, the Latin and/or Greek equivalent of a term may be given; for example, "liver [L. *jecur*; Gr. *hepar*]" and "kidney [L. *ren*; Gr. *nephros*]."

THE GREEK ALPHABET

CAPITAL	SMALL LETTER	SOUND	NAME	TRANSCRIPTION
A	α	<i>aha</i>	alpha	a
B	β	<i>bet</i>	beta	b
Γ	γ	<i>get</i>	gamma	g
Δ	δ	<i>do</i>	delta	d
E	ϵ	<i>egg</i>	epsilon	e
Z	ζ	<i>adze</i>	zeta	z
H	η	<i>fête</i>	eta	ê
Θ	θ	<i>thin</i>	theta	th
I	ι	<i>it</i> <i>machine</i>	iota	i
K	κ	<i>key</i>	kappa	k
Λ	λ	<i>let</i>	lambda	l
M	μ	<i>met</i>	mu	m
N	ν	<i>net</i>	nu	n
Ξ	ξ	<i>hex</i>	xi	x
O	\omicron	<i>oho</i>	omicron	o
Π	π	<i>pet</i>	pi	p
P	ρ	<i>r</i> (trilled)	rho	r
Σ	σ, ς^*	<i>set</i>	sigma	s
T	τ	<i>tell</i>	tau	t
Υ	υ	<i>ü</i> (German)	upsilon	y
Φ	φ	<i>photo</i>	phi	ph
X	χ	<i>ach</i> (German)	chi	ch
Ψ	ψ	<i>tips</i>	psi	ps
Ω	ω	<i>oho</i>	omega	ô

* Sigma is written σ at the beginning or in the middle of a word and ς at the end of a word. E.g., *σύνθεσις*.

DEFINITIONS An effort has been made to assign the descriptive definitions to those terms for which a preference has been shown or to which priority has been given in the scientific literature that we used as our reference sources. All synonyms and other secondary entries have been directed to these preferred terms. Certain descriptive definitions are more extensive and in-depth than is customary in standard dictionaries. An encyclopedic approach has been taken in areas of particular complexity. In keeping with the purposes of the Dictionary, particular attention is given to terms associated with dentistry.

Whenever possible, uniformity of definitions has been maintained within each specialty. In the case of anatomical structures, their definitions usually comprise information on systems to which they belong or organs from which they derive, descriptions of their form and topography, and descriptions of their structure (both gross anatomy and histology); anatomical terms listed in *Nomina Anatomica* are identified by the abbreviation NA. The definitions of diseases usually include descriptions of their clinical properties, etiology, symptomatology, pathology, and epidemiology. The chemical names, pharmacological class names, therapeutic and pharmacological properties, toxic effects, and trademarks of drugs are usually given. Enzymes are coded according to a numerical system (E.C. numbers), which is explained in the vocabulary under *enzyme*.

Terms that are no longer in common usage but are of historical interest are usually identified with an annotation, such as "formerly used" or "in the past."

SOURCES Specialized dental glossaries were used as a primary source of information for the definitions. In instances in which the needed data were not available in glossaries or in which the information obtained from glossaries required augmentation or updating, textbooks and other forms of authoritative current monographic and serial literature were used as source material.

When authoritative sources differed about the meaning of a term, minor differences have been reflected in single definitions and major ones in separate definitions for the same term.

CROSS-REFERENCES Cross-references direct the reader from synonyms, abbreviations, acronyms, trademarks, or other types of secondary entries to the preferred terms where descriptive definitions are found, omitting the word *see*.

A definition cross-referencing a synonym to a single-word preferred term appears as follows:

moniliasis (mon-î-li'ah-sis) candidiasis.

When an entry sends the reader to a compound preferred term, the main entry is indicated by small capital letters and lower case letters indicate a subentry. For example:

acrodysplasia (ak"ro-dis-pla'se-ah) [*acro-* + *dysplasia*] Apert's **SYNDROME**.

or under *periodontitis*

suppurative apical p., chronic apical **ABSCESS**.

The reader is alerted to the existence in other parts of the Dictionary of related terms or additional important information by the cross-references *see also*, *see under*, and *cf.* (*compare*).

CAPITALIZATION Standard rules for the capitalization of scientific terms is followed in the Dictionary. First letter capitalization has been used for proper names and the names of biological kingdoms, phyla, classes, orders, families, and genera; species are set in lower case letters.

An attempt has been made to identify and capitalize all trademarks, but the absence of capitalization does not always exclude the possibility that the name is a trademark or the subject of proprietary rights.

PRONUNCIATION With the exception of proper names, trademarks, and combining forms, the pronunciation of words is indicated by a simple phonetic respelling in parentheses immediately following the main bold-face entry. As a rule, the most commonly heard pronunciation is given. Diacritical markings to distinguish vowel sounds are used only when necessary. The basic rules are:

An unmarked vowel ending a syllable is long (ba'be).

An unmarked vowel in a syllable ending with a consonant is short (ab'dukt).

A long vowel in a syllable ending with a consonant is indicated by a macron (ah-bāt, lēd, la'bīl, tōōth).

A short vowel that constitutes or ends a syllable is marked with a breve (ē-de'mah, ī-mu'nī-te).

The syllable *ah* is used for the sound of *a* in open, unaccented syllables (ah-sis'tant, ah-bāt').

The primary accent in a word is indicated by a bold-face, single accent ('). The secondary accent is indicated by a light-face, double accent (""); an unstressed syllable is followed by a hyphen.

ABBREVIATIONS Abbreviations used in the text are few and fairly obvious.

a.	artery (L. <i>arteria</i>)	i.e.	that is (L. <i>id est</i>)
Ar.	Arabic	It.	Italian
A.S.	Anglo-Saxon	L.	Latin
c.	about (L. <i>circa</i>)	l.	ligament (L. <i>ligamentum</i>)
cf.	compare (L. <i>confer</i>)	m.	muscle (L. <i>musculus</i>)
dim.	diminutive	n.	nerve (L. <i>nervus</i>)
e.g.	for example (L. <i>exempli gratia</i>)	pl.	plural
Fr.	French	Port.	Portuguese
gen.	genitive	sing.	singular
Ger.	German	Sp.	Spanish
Gr.	Greek	v.	vein (L. <i>vena</i>)

In elaboration of entries that are themselves abbreviations, the words "abbreviation for" have usually been omitted.

PROFESSIONAL REVIEW In an effort to ensure the accuracy, completeness, and currency of the information and to make certain that it represents the thinking and knowledge of the scientific community, particularly, the profession of dentistry, the material presented in this Dictionary has been submitted to extensive review by our consultants (see p. ix), who are acknowledged authorities in their respective disciplines of dentistry and allied sciences.

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The Language of Medicine and Dentistry — An Introductory Note

Western medicine had its origin in Greece in the fifth century B.C., in the Age of Pericles. When the Greek physician Hippocrates (430–370? B.C.) established the scientific and ethical principles of medicine basic elements of the language of medicine were already formulated. Thus, Greek was the original language of modern medicine, and, by extension, of dentistry.

With the Roman conquest of Greece, bringing to an end the Hellenic Era, Greek gave way to Latin. By the time Christ was born, Latin was already established in Europe and in parts of Asia and Africa — first, as the language of the Roman conquerors, and later, spreading to local populations.

During the fourth century A.D., Latin also replaced Greek as the official language of the Church. As Christianity spread gradually throughout Europe to become the principal religion, Latin became the first (and probably the last) universal language by means of which scholars of all nations of what was then known as the civilized world could communicate with each other. It served in this capacity for more than 1500 years, almost into the twentieth century.

This is not to say that everyone spoke the same Latin. The language of the streets of Rome, Vulgar Latin, was obviously different from that used by classical writers in many respects. And the speech of local populations in remote outposts of the Empire, who learned Latin from the Roman legionnaires, must have been different from that spoken in Rome. Also, similar to what occurs now, different branches of learning and technology developed jargons to suit their specific requirements. This was especially true with the language of medicine.

In ancient Rome, which had little medical tradition of its own, physicians were mostly itinerant Greek healers during the Hellenic Era and imported Greek slaves (*servi medici*) after the Roman conquest of Greece. One would assume that these reluctant immigrants learned Latin (called a language of barbarians by the Greek intellectuals of the time) without much enthusiasm. They borrowed heavily from Greek whenever the need arose, eventually developing a jargon that was a mixture of Latin and Greek words with superimposed Latin syntax, which was in many ways similar to the patois spoken by immigrant populations everywhere.

Although the basis for medical terminology was established during the Hellenic Era, and an impressive medical vocabulary (much of it still in use) existed before the fall of the Roman Empire, the development of the language of medicine, as we know it today, did not actually begin until the works of da Vinci, Vesalius, and other anatomists of the Renaissance identified and described parts of the human body; thus laying the foundation for a systematic anatomical nomenclature that is the base for modern medical and dental terminology.

As used in the United States and other English-speaking countries, anatomical terminology exists in two parallel forms: one that is official, composed of Latin and some Greek words, and one that is unofficial, composed of Latin, Greek, and English words, some of which are Anglicized forms of Latin and Greek.

The first, the official, internationally recognized terminology identifies preferred anatomical names (eliminating those that are erroneous, ambiguous, or duplicate), organizes anatomical nomenclature into accepted hierarchical classifications and schemes, and serves as the paradigm and authority for national anatomical terminologies. This official Latin and Greek terminology is maintained and controlled by the International Anatomical Committee and is listed in the publication *Nomina Anatomica*. These terms are usually identified in the literature, especially in dictionaries, with the abbreviation NA.

The second, unofficial terminology, is that which is commonly used in the medical and dental literature of individual countries. In English-speaking countries, older, gross

anatomy terms are usually in English, whereas names of organs that were identified later, fine structures for which English equivalents are lacking, and parts of the body for which there are no “polite” English words are in Latin and Greek. Thus, names of organs such as the *skin*, *neck*, *liver*, *kidney*, or *tooth* are in English (their official NA equivalents are *cutis*, *cervix*, *hepar*, *ren*, and *dens*, respectively), whereas names for organs that were described relatively late, such as *reticulum*, *epithelium*, *cerebellum*, *sinus*, and *neuron*, are in Latin or Greek. Also, Latin or Greek is used for such terms as *penis*, *anus*, and *vagina*, which are considered “nicer” than their English counterparts. Terms in the last two categories are also in the official (NA) terminology.

Many older English anatomical terms, such as *sweetbread*, *gristle*, and *sinew*, have been either discarded or are now used only in connection with animal tissues and organs, and their sometimes Anglicized Latin counterparts (*pancreas*, *cartilage*, and *tendon*, respectively) are considered as proper terms in human anatomy.

The majority of Latin and Greek anatomical terms now in use had no original anatomical meaning; they have been borrowed from the general vocabulary. *Pons*, for instance, is Latin for bridge; *reticulum* is a diminutive for *rete*, a Latin word for net; nerve derives from Latin *nervus*, in turn Latinized from Greek *neuron*, bowstring; and *testis* is Latin for witness (believed to have originated from an ancient custom of a man taking an oath with his hand on his testicle).

The majority of Greek names are not recognized in *Nomina Anatomica* as official anatomical terms. Nevertheless, they are essential to the language of medicine, particularly in forming compound nonanatomical terms and adjectives, as in *odontalgia* (toothache) and *odontoid* (resembling a tooth), both terms deriving from Greek *odous* (a tooth), a non-NA term.

English nouns are often used to modify other nouns, as when referring to the breaking of a tooth, *tooth fracture*. The same concept can be also expressed as *dental fracture*, in which the NA term for tooth (*dens*) is used and is modified to the adjectival form by an appropriate suffix. Generally, Latin and Greek anatomical names are modified when used as adjectives in English sentences, but there are exceptions: one correctly refers to *maxillary injury* (instead of *maxilla injury*) and *cranial tumor* (instead of *cranium tumor*), but *sinus infection* is preferable to *sinusal infection*, and both *sternum fracture* and *sternal region* are acceptable.

Some adjectives are used alone as nouns — *canine*, *incisor*, and *molar teeth* are usually referred to as *canines*, *incisors*, and *molars*, respectively. The *musculus biceps femoris* (NA) is usually called *biceps*. And many dental writers refer to *centric occlusion* as simply *centric*. This practice has its dangers, however. While one could correctly conclude that *temporal fracture* applies to the temporal bone, referring to injury of the temporal bone as *temporal injury* would be ambiguous, for the injury could apply to the temporal artery, nerve, or region, as well as to the temporal bone. Perhaps, *temporal bone injury* would have been more appropriate.

Much of the language of medicine and dentistry consists of composite terms in which stems derived from Latin and Greek anatomical names are appended with prefixes and suffixes. Generally, although there are many exceptions, prefixes denote sites, locations, and orientation, and suffixes indicate conditions, states, techniques, and devices.

Names of pathological conditions of the tongue, as an example, are produced by appending the anatomical stems *gloss-* or *glosso-* (Greek *glōssa*, tongue) with suffixes, such as *-pathy* (Greek *pathos*, suffering), to denote general pathological conditions, *-itis* to denote inflammation, *-algia* (Greek *algos*, pain) to denote painful conditions, or *-plegia* (Greek *plēgē*, stroke) to denote paralysis.

Surgical terms may be formed by adding to the same stem suffixes, such as *-ectomy* (Greek *ektomē*, excision), *-tomy* (Greek *tomē*, a cutting), or *-rrhaphy* (Greek *rhaphē*, suture). Synonymous terms may be constructed when both Latin and Greek names for the same organ are used in the stem, as in *gingivitis* (Latin *gingiva* + Greek *-itis*) and *gingivectomy* (Latin *gingiva* + Greek *-ectomy*), which are also called *ulitis* (Greek *oulon*, *gingiva* + *-itis*) and *ulectomy* (*oulon* + *-ectomy*).

The name of the instrument *glossodynamometer* (for recording the power of the tongue to resist pressure) originates from *glosso-* + *dynamometer*; the latter, in turn, derives from Greek *dynamis*, power, and *metron*, measure.

Names of neoplasms are formed by combining anatomical or histological designations characteristic of tumors with the suffix *-oma*, as in *osteoma* (a tumor composed of bony tissue), which derives from Greek *osteon*, bone, + *-oma*.

Terms relating to several organs are built on stems constructed from several anatomical names. A disease involving the stomach, intestine, liver, and kidney, for example, would have a stem *-gastroenterohepatonephro-*, deriving from Greek *gastēr* (stomach), *enteron*

(intestine), *hepar* (liver), and *nephros* (kidney), to which prefixes and suffixes may be appended as needed.

Not all pathological terms are formed by combining anatomical names with appropriate prefixes or suffixes. *Tetanus* (muscle spasm) has its origin in the time of Hippocrates, when it was known as *tetanos*, and *diabetes* derives from Greek *diabētēs* (a syphon, from *dia*, through, and *beinein* to go). Some terms derive from modern European languages, such as *jaundice* (French *jaune*, yellow). Many names identify diseases and their pathogenic organisms, such as salmonellosis (*Salmonella*, a bacterial genus, + *-osis*, a suffix denoting a process, often a disease), or by their symptoms, as in *pruritus* (Latin *prurire*, to itch).

Many terms in medicine and dentistry are eponymous; that is, they are named after persons or other proper nouns. A livid appearance of the face indicative of approaching death is known as *facies hippocratica*, named after Hippocrates, who is said to have been first to describe the condition. Other examples are *Begg appliance*, an orthodontic appliance named after its inventor, *Christmas disease*, a hemorrhagic condition named after the patient in whom it was first observed, and *Tangier disease*, named after an island in the Chesapeake Bay, where the disease was first reported. Often, eponyms are used with syndromes or other pathological conditions that cannot be readily defined with self-explanatory designations.

The term *syndrome* (Greek *syndromē*, concurrence) traditionally was defined as a set of symptoms, usually three or more, which occur together; but, in current usage, it is applied to any condition that cannot be easily defined and is characterized by complex etiology, involvement of several organs or systems, and varied symptomatology. *Otopalatodigital syndrome* is self-explanatory, but nothing about the nature of *Recklinghausen syndrome* can be discerned from its eponymic name (first described by the German physician Friedrich Daniel von Recklinghausen). *LEOPARD syndrome* is an acronym for an unmanageably long designation: lentigines, electrocardiographic abnormalities, ocular hypertelorism, pulmonary stenosis, abnormalities of genitalia, retardation of growth, and deafness. In addition, the term *syndrome* is now often appended to names of organs that are believed to be the source of complex pathological conditions (e.g., *brachial syndrome*) and to names of already well-known conditions that are believed to be more complex than originally suspected (e.g., *tuberculosis syndrome*, *hypertension syndrome*, *diabetes syndrome*).

Bacteriological nomenclature follows the method for naming plants and animals established in 1735 by the Swedish naturalist Karl von Linné (who Latinized his name to Linnaeus). Names of bacteria are created by Latinizing eponyms and Greek words and with the use of some original Latin names. For instance, the colon bacterium, *Escherichia coli*, is named after its discoverer, Theodor *Escherich*, and *Streptococcus* derives its name from Greek *streptos*, twisted, and Latin *coccus*, which is a Latinized form of Greek *kokkos*, a berry.

The kingdom, orders, and families of bacteria are always in the plural form, the genus in the singular form, and species in the genitive form — all according to the Latin rules of grammar.

Traditionally, plant and animal viruses were named after diseases that they cause, the term *virus* modifying the name of the condition, as in *smallpox virus*. Bacterial viruses, or bacteriophages, on the other hand, were named by attaching the suffix *-phage* (Greek *phagein*, to eat) to the name of the host organism, as in *coliphage* (*colibacillus* + *-phage*), and complemented by code symbols, such as T1, C16, S13, etc. Later, efforts were made to name viruses according to certain criteria, such as the characteristics of the host, properties of the virion, or the features of the reproductive cycle. Recently, plant pathologists proposed a taxonomy based on the Linnean method, whereby the order *Virales* would encompass all viruses. The order would be subdivided into families, genera, and species. At the same time, the International Committee on Nomenclature of Viruses proposed a taxonomic system for naming viruses with generic names appended with an ending *-virus* (e.g., *Rhinovirus*, from Greek *rhis*, nose, + *-virus*), complemented by a parallel method, whereby viruses would be designated with cryptograms describing each virus according to a conventional key. In spite of many proposals, the problem of virus nomenclature and taxonomy still remains in a state of flux.

Terms generated by combining word fragments drawn from the list of already existing anatomical names and standard prefixes and suffixes are self-explanatory, and precisely define complex concepts that otherwise would require whole sentences, or even paragraphs, in a manner that is readily understood by physicians and dentists across language barriers and millennia apart. The number of these combinations being almost infinite, the potential biomedical vocabulary is, thus, virtually limitless. Herein lies the genius of the Greek fathers of the language of medicine. They have created a language unsurpassed in its sim-

plicity, utility, economy, even beauty, which, in its basic form, has survived two millennia of linguistic evolution, numerous changes in medical philosophy, and the enormous growth of terminology brought about by constantly expanding scientific discovery. It has also survived the decline of its parent tongues as universal languages of learning, continuing to grow even at a time when its practitioners no longer possess a basic classical background.

Since everything in the environment influences in some way our health and well-being, terminologies in all branches of science, technology, social and behavioral study, administration, etc., technically belong in the language of medicine and dentistry. Each of these terminologies has its own history, mechanism for growth, and other characteristics with which students of biomedical disciplines must have some familiarity. The space allotted in this Dictionary does not allow for discussion of the entire field of scientific and technical linguistics, only those aspects that influence directly human, particularly oral, health, or the core of the language of medicine and dentistry.

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A

A 1. subspinal. 2. accommodation. 3. Ångström UNIT. 4. mass NUMBER. 5. BLOOD GROUP A.

Å Ångström UNIT.

a. accommodation; ampere; anode; anterior; aqua; arteria; total acidity.

a- 1. [Gr.] an inseparable prefix signifying want or absence; appears as *an* before stems beginning with a vowel or with *h*. 2. [L.] a prefix signifying separation, or away from.

α the first letter of the Greek alphabet. See ALPHA.

AA, aa [Gr. *ana* of each] abbreviation used in prescription writing, following the names of two or more ingredients and signifying "of each."

AAAS American Association for the Advancement of Science.

AADE 1. American Association of Dental Editors. 2. American Association of Dental Examiners.

AADGP American Academy of Dental Group Practice (see under ACADEMY).

AADP American Academy of Denture Prosthetics.

AADPA American Academy of Dental Practice Administration (see under ACADEMY).

AADR American Academy of Dental Radiology (see under ACADEMY).

AADS American Association of Dental Schools (see under ASSOCIATION).

AAE American Association of Endodontists.

AAFP American Academy of Family Physicians.

AAGFO American Academy of Gold Foil Operators (see under ACADEMY).

AAGO American Academy of Gnathologic Orthopedics (see under ACADEMY).

AAGP American Academy of General Practice.

AAHD American Association of Hospital Dentists (see under ASSOCIATION).

AAID American Academy of Implant Dentistry (see under ACADEMY).

AAMC American Association of Medical Colleges.

AAMI Association for the Advancement of Medical Instrumentation.

AAMP American Academy of Maxillofacial Prosthetics (see under ACADEMY).

AAMRL American Association of Medical Record Librarians.

AAO American Association of Orthodontists (see under ASSOCIATION).

AAOGP American Academy of Orthodontics for the General Practitioner (see under ACADEMY).

AAOM American Academy of Oral Medicine (see under ACADEMY).

AAOP American Academy of Oral Pathology (see under ACADEMY).

AAP 1. American Academy of Pediatrics. 2. American Academy of Pedodontics (see under ACADEMY). 3. American Academy of Periodontology (see under ACADEMY).

AAPA American Academy of Physician Assistants.

AAPHD American Association of Public Health Dentists (see under ASSOCIATION).

Aarane trademark for *cromolyn sodium* (see under CROMOLYN).

Aaron of Alexandria [7th century A.D.] a physician who wrote medical works in the Syriac language, all of which are lost except fragments (e.g., on smallpox) preserved by Rhazes.

Aarskog's syndrome [D. Aarskog] see under SYNDROME.

Aarskog-Scott syndrome [D. Aarskog] Aarskog's SYNDROME.

AAS American Analgesia Society (see under SOCIETY).

Aasse's syndrome [J. M. Aasse] see under SYNDROME.

AAV adenoassociated VIRUS.

AAV, primate adenoassociated viruses isolated from primates.

AAV-2, AAV-3 types of primate adenoassociated viruses (see under VIRUS) found in man.

AB 1. BLOOD GROUP AB. 2. apiobuccal.

A.B. abbreviation for *L. Ar'tium Baccalau'reus*, Bachelor of Arts.

ab antibody.

ab- [L. *ab* of, off] a prefix signifying from, off, away from.

Abacin trademark for a mixture of sulfamethoxazole and trimethoprim.

abacterial (ab'ak-te're-al) nonbacterial; free from bacteria.

abamp abampere.

abampere (ab-am'pēr) in the centimeter-gram-second system, a unit of electromagnetic current equivalent to 10 amperes; absolute ampere. Abbreviated *abamp*.

abandonment (ah-ban'don-ment) 1. giving up; leaving completely; forsaking. 2. the unilateral severance by the dentist or physician of the professional relationship between himself or herself and the patient without reasonable notice and at a time when there is still the need for continuing professional care.

Abano Pietro d' see PETER OF ABANO.

abarticular (ab'ar-tik'u-lar) 1. not affecting the joint. 2. remote from a joint.

abarticulation (ab'ar-tik'u-la'shun) [*ab-* + L. *articulatio* joint] dislocation of a joint.

abasia (ah-ba'zhe-ah) [*a neg* + Gr. *basis* step + *-ia*] inability to walk.

abate (ah-bāt') to lessen or decrease.

abatement (ah-bāt'ment) [Fr. *abatre* to throw down] decrease in the severity of symptoms or pain.

abaxial (ab-ak'se-al) [*ab-* + L. *axis*] not situated at the axis.

Abbé flap see under FLAP.

Abbé-Estlander operation see under OPERATION.

Abbe's condenser (illuminator) [Karl Ernst Abbe, German physicist, 1840-1905] see under CONDENSER.

Abbe-Zeiss counting chamber [K. E. Abbe; Carl Zeiss, German optician, 1816-1888] Thoma-Zeiss counting CHAMBER.

Abboceillin V trademark for *penicillin V hydrabamine* (see under PENICILLIN).

Abbot's paste [William Abbot, British physician, born 1831] see under PASTE.

ABC axiobuccocervical.

abcoulomb (ab-koo'lom) in the centimeter-gram-second system, a unit of electricity equivalent to 10 coulombs. Called also *absolute coulomb*.

Abderhalden-Fanconi syndrome [Emil Abderhalden, Swiss physiologist, 1877-1950; Guido Fanconi, Swiss biochemist, born 1892] see under SYNDROME.

Abderhalden-Kaufmann-Lignac syndrome [E. Abderhalden; G. O. E. Lignac] Abderhalden-Fanconi SYNDROME.

abdomen (ab-do'men) [L., possibly from *abdere* to hide] that portion of the body which lies between the thorax and the pelvis.

ABDPH American Board of Dental Public Health (see under BOARD).

abducens (ab-du'senz) [L. "drawing away"] an adjective used in conjunction with names of anatomical structures, such as nerves or muscles, which serve to abduct a part of the body.

abducent (ab-du'sent) [L. *abducens*] abducting, or effecting a separation, as an abducent nerve.

abduct (ab-duk't') [*ab-* + L. *ducere* to draw] to draw away from the median plane or (in the digits) from the axial line of a limb.

abduction (ab-duk'shun) [L. *abductio*] drawing or leading away from the axis of the body.

abductor (ab-duk'tor) [L.] that which abducts or leads away from the axis of the body.

ABE American Board of Endodontics (see under BOARD).

Aberel trademark for *tretinoin*.

aberrant (ab-er'ant) [L. *aberrans*, from *ab* + *errare* to wander] 1. wandering. 2. deviating from the normal.

aberratio (ab'er-a'she-o) [L.] aberration.

aberration (ab'er-a'shun) [*ab-* + L. *errare* to wander] 1. any deviation from the normal. 2. unequal refraction or focalization of light rays by a lens. angle of a., ANGLE of deviation. chromatic a., unequal deviation of light rays of different wavelengths passing through a refractive medium, resulting in fringes of