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## EPONYMS IN THE DERMATOLOGY LITERATURE LINKED TO LATIN AMERICA

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Latin America refers to territories in America where the Spanish or Portuguese languages prevail: Mexico, most of Central and South America, and in the Caribbean, Cuba, the Dominican Republic, and Puerto Rico – in summary, Hispanic America and Brazil [1].

By this definition, Latin America is coterminous with Iberoamerica ("Iberian America") [1].

Latin America has an area of approximately 21,069,500 km<sup>2</sup>, almost 3.9% of the Earth's surface or 14.1% of its land surface area. As of 2010, its population was estimated at more than 590 million [1].

Many medical conditions derive their names from either Greek or Latin. In this manuscript, we are reviewing, some selected examples of eponyms, in dermatology literature, linked to the Latin America (Tabl. I) [2-14].

We want also to point out that many scientists in other parts of the world and particularly in USA, for whom medical diseases were eponymously named, were originated from latin America. Just an example is, Bannayan–Riley–Ruvalcaba syndrome (BRRS), which is a dominant autosomal disorder characterized by cutaneous lipomas, macrocephaly, intestinal polyps, and developmental delay [15]. It is named after American physicians. One of them, Rogelio H. Ruvalcaba (born in 1934) received his MD degree from the Universidad de Guadalajara, in Mexico and immigrated to USA.

Finally, one can find part of the eponym is originated from Latin America for example, idiopathic atrophoderma of Pasini and Pierini (IAPP), is named after an italian dermatologist Agostino Pasini (1875-1944) and dermatologist from Argentina, Luis Enrique Pierini (1899-1987) (Fig. 8).

In 1923, Pasini described the condition under the name progressive idiopathic atrophoderma. In 1936, Pierini and Vivoli extensively studied and defined the condition and its possible link to morphea. Canizares et al, in 1958 renamed it as idiopathic atrophoderma of Pasini and Pierini (IAPP) [16].

There are many clinical and histologic similarities between, atrophoderma of Pasini and Pierini and Linear atrophoderma of Moulin (LAM). LAM was first described by Moulin in 1992 as an acquired unilateral hyperpigmented atrophic band along Blaschko's lines.

Eponyms in the dermatology literature linked to Latin America	Remarks
Alezzandrini syndrome [2,3]	It is a rare disorder characterized by whitening of scalp hair, eyebrows and eyelashes as well as depigmentation of the skin in association with ipsilateral visual changes. The pathogenesis of Alezzandrini syndrome is unknown, but it is believed to be closely related to Vogt–Koyanagi–Harada (VKH) syndrome, which is Characterized by uveitis, poliosis, vitiligo, and meningitis. Arturo Alberto Alezzandrini is an Argentine ophthalmologist from Argentine, born 1932 (Fig. 1). VKH was named after, Alfred Vogt (1879–1943), Yoshizo Koyanagi (1880–1954), and Einosuke Harada (1892–1946).Vogt was a Swiss ophthalmologist.Koyanagi and Harada were a Japanese ophthalmologists.
Table I. Selected Eponyms in the dermatology literature linked to Latin America	



Figure 1. Arturo Alberto Alezzandrini (1932-). A courtesy of Arturo Alezzandrini Jr., MD.



Figure 2. Daniel Alcides Carrión (1857-1885)



Figure 3. Henrique da Rocha Lima (1879-1956)

Eponyms in the dermatology literature linked to Latin America	Remarks
Bartonellosis [4-7]	Also known as Carrion's disease, Oroya fever, and Verruga peruana. Bartonella are Gram-negative bacilli. There are many known species of Bartonella. However, only three are known to cause human disease, namely <i>Bartonella bacilliformis</i> (Carrion's disease), <i>B. henselae</i> (cat-scratch disease), and <i>B. quintana</i> (trench fever). Both <i>B. henselae</i> and <i>B. quintana</i> also cause bacillary angiomatosis and endocarditis. Bartonellosis is serious infection caused by <i>Bartonella bacilliformis</i> and transmitted by the bite of a Phlebotomine sand fly. There are 2 clinical forms (1), Oroya fever, an acute febrile disease with associated hemolytic anemia; and (2) verruga peruana (Peruvian wart), a chronic disease characterized by cutaneous vascular lesions. In 1885, a Peruvian medical student, Daniel Alcides Carrión García (1857 – 1885), (Fig. 2), died of complications of Oroya fever after inoculating himself with blood derived from a lesion of verruga peruana, proving a common causality for the two disease states. Most patients who recover from Oroya fever develop cutaneous nodules during or after their convalescent period, but verruga peruana can also appear in previously asymptomatic individuals. Pathologically, in the lesions of verruga peruana, masses of intracytoplasmic Bartonellaorganisms (Rocha–Lima inclusions) are present within swollen endothelial cells. In light microscopy the finding of Rocha-Lima's inclusions was found to be the only definite morphologic evidence of the presence of bartonella in verruga lesions. Rocha-Lima's inclusions is named after Henrique da Rocha Lima (1879-1956), (Fig. 3), who was Brazilian physician, pathologist. Alberto Leopoldo Barton Thompson (1871-1950), (Fig. 4), was a Peruvian microbiologist who discovered the etiologic agent of Carrion's disease or Oroya fever. The bacteria was named: <i>Bartonella bacilliformis</i> , in his honor.
Carrion disease [4-7]	See above.
Chagas disease [8,9]	This is another name for American trypanosomiasis. The disease was named after the Brazilian physician, Carlos Justiniano Ribeiro Chagas (1879–1934), (Fig. 5), who first described it in 1909, while working at the Oswaldo Cruz Institute in Rio de Janeiro.
Fernandez type of lepromin test [10]	The lepromin test is useful in determining the extent of host immune reactivity to <i>Mycobacterium leprae</i> . 0.1ml of lepromin, prepared from a crude extract of organisms, is injected intradermally. The reaction is read at 48 hours (Fernandez reaction). José Maria Fernández was an Argentinean physician who described reading of lepromin test at 48 hours. Fernández was born in Argentina in 1902. He is one of the pioneers in dermatology, in Rosario (Santa Fe). He participated in the creation of the South American Classification of Lepra (La Habana, 1948). Lepromin test can be, also, read at 3 to 4 weeks and in this case, it is called Mitsuda reaction, after a Japanese physician, Dr Kensuke Mitsuda (1876-1964).



Figure 4. Alberto Leopoldo Barton (1871-1950)



Figure 5. Carlos Chagas (1879-1934)

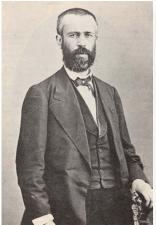


Figure 6. Rafael Lucio Nájera (1819-1886)

Eponyms in the dermatology literature linked to Latin America	Remarks
Lucio-Latapí's leprosy [10]	The Lucio-Latapí's leprosy or diffuse lepromatous leprosy is a clinical variety of lepromatousleprosyfirstdescribedbyLucioandAlvaradoin1852 andreidentifiedbyLatapíin19365. Fernando Latapi (1902-1989) is a Mexican physician who for half a century was considered to be the dean of Mexican leprologists. The Lucio-Latapi's leprosy is frequent in Mexico (23%) and in Costa Rica and very rare in other countries. It is characterized by a generalized diffuse infiltration of the skin which never is transformed into nodule, by a complete alopecia of eyebrows and eyelashes and body hair, by anhydrotic and dysesthesic zones of the skin and by a peculiar type of lepra reaction named Lucio's phenomenon or necrotic erythema which is a vasculitis of vessels especially of the dermohypodermic union and of the hypodermis. Rafael Lucio Nájera (1819-1886), (Fig. 6), was a Mexican physician. In 1851 Dr. Rafael Lucio published his Opúsculo sobre el real de San Lázaro o elefantiásis de los griegos which was republished by the Ministry of Economic Development in 1889 for exhibition at Paris. In it, Lucio for the first time described a particular kind of leprosy called man-chada, which he found in Mexico.
Mazzotti reaction [11]	First described in 1948, for diagnosis of onchocerciasis .It is helpful when skin snips are negative. 50mg of diethylcarbamazine (DEC) is administered orally, and a pruritic eruption develops within 15 minutes (as the microfilariae die) if the patient is infected.Named after a Mexican parasitologist, Luis Mazzotti (1900-1971), (Fig. 7).
Romaña sign [12]	Unilateral painless periorbital swelling associated with the acute stage of Chagas' disease. It is named after Cecilio Romaña (1899-1997), an Argentinian researcher who first described the phenomenon.
Stajano-Fitz Hugh-Curtis syndrome [13,14]	It is an old eponym, not used any more.Best known Currently as Gonorrheic perihepatitis or FitzHugh-Curtis syndrome, with inflammation of the adjacent peritoneal area. It is an infrequent complication of gonorrhea, in which symptoms of Pelvic Inflammatory Disease (PID), are accompanied by pain in the right upper quadrant that mimics acute cholecystitis. Carlos Stajano (1891-1976), was an Uruguaian surgeon. Thomas Fitz-Hugh, Jr (1894-1963), was an American physician.Arthur Hale Curtis (1881-1955), was an American gynaecologist.



Figure 7. Luis Mazzotti (1900-1971)



Figure 8. Luis Enrique Pierini (1899-1987)

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