“EPONYMS IN THE DERMATOLOGY LITERATURE: USA; Latin America; Russia”

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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 km², 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 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.

**Table I. Selected Eponyms in the dermatology literature linked to Latin America**

<table>
<thead>
<tr>
<th>Eponyms in the dermatology literature linked to Latin America</th>
<th>Remarks</th>
</tr>
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<tbody>
<tr>
<td>Alezzandrini syndrome [2,3]</td>
<td>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 Argentina, 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.</td>
</tr>
</tbody>
</table>

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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 Bartonella bacilliformis (Carrion’s disease), B. henselae (cat-scratch disease), and B. quintana (trench fever). Both B. henselae and B. quintana also cause bacillary angiomatosis and endocarditis.
Bartonellosis is a serious infection caused by Bartonella bacilliformis 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 Bartonella organisms (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: Bartonella bacilliformis, 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 Mycobacterium leprae. 0.1ml of lepromin, prepared from a crude extract of organisms, is injected intradermally. The reaction is read at 48 hours (Fernandez reaction). José María 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).

Table I. Selected Eponyms in the dermatology literature linked to Latin America (continued)
Eponyms in the dermatology literature linked to Latin America

Remarks

Lucio-Latapi’s leprosy [10]
The Lucio-Latapi’s leprosy or diffuse lepromatous leprosy is a clinical variety of lepromatous leprosy first described by Lucio and Alvarado in 1852 and reidentified by Latapi in 1936. 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 dysesthetic 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 Najera (1819-1886), was a Mexican physician. In 1851 Dr. Rafael Lucio published his Opúsculo sobre el real de San Lázaro o elefantiasis 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 Fitz Hugh-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 Uruguayan surgeon. Thomas Fitz-Hugh, Jr (1894-1963), was an American physician. Arthur Hale Curtis (1881-1955), was an American gynaecologist.

Table I. Selected Eponyms in the dermatology literature linked to Latin America (continued)
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A MINI-REVIEW ON EPONYMS IN THE DERMATOLOGY LITERATURE LINKED TO UNITED STATES OF AMERICA (USA)

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²Department of Public Health, King Faisal Hospital, Makkah, Saudi Arabia

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The United States of America (USA or U.S.A.), commonly called the United States (US or U.S.) or America, is a federal republic consisting of fifty states and a federal district [1]. At 3.79 million square miles (9.83 million km²) and with around 315 million people, the United States is the third- or fourth-largest country by total area and the third-largest by both land area and population [1]. The U.S. is a global leader in medical innovation. America solely developed or contributed significantly to 9 of the top 10 most important medical innovations since 1975 as ranked by a 2001 poll of physicians. Since 1966 Americans have received more Nobel Prizes in Medicine than the rest of the world combined [1]. Large numbers of the eponyms we use currently, in dermatology are originated from USA, and many new conditions in dermatology are being named after scientists from USA. In Table I, we selected some examples of eponyms in dermatology literature which are linked to USA [2-23].

Table I. Selected Eponyms in the dermatology literature linked to USA

<table>
<thead>
<tr>
<th>Eponyms in the dermatology literature linked to USA</th>
<th>Remarks</th>
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</thead>
<tbody>
<tr>
<td>Becker nevus [2]</td>
<td>Also known as Becker melanosis. It appears, first as an irregular pigmentation on the torso or upper arm (though other areas of the body can be affected). This form of nevus was first documented in 1948 by American dermatologist Samuel William Becker (1894–1964), (Fig. 1).</td>
</tr>
<tr>
<td>Bloom syndrome [3]</td>
<td>It is a rare autosomal recessive disorder characterized by short stature and predisposition to the development of cancer. The condition was discovered and first described by New York dermatologist Dr. David Bloom, (Fig. 2), in 1954.</td>
</tr>
</tbody>
</table>

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Eponyms in the dermatology literature linked to USA

Table I. Selected Eponyms in the dermatology literature linked to USA (continued)

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<tr>
<td>Bowen disease [4]</td>
<td>Also known as „squamous cell carcinoma in situ“. It is a neoplastic skin disease, it can be considered as an early stage or intraepidermal form of squamous cell carcinoma. Named after, John Templeton Bowen (1857–1940), (Fig. 3), who was an American dermatologist.</td>
</tr>
<tr>
<td>Cannon diseases [5]</td>
<td>This is another name for White sponge nevus, an autosomal dominant condition of the oral mucosa caused by a mutations in certain genes coding for keratin. The clinical characteristics of the white sponge nevus were first described by Hyde in 1909, followed by Cannon in 1935. A. Benson Cannon (1888-1950), (Fig. 4), was an American physician.</td>
</tr>
<tr>
<td>Dennie – Morgan fold [6]</td>
<td>Also known as a Dennie–Morgan line or an infraorbital fold, is a fold or line in the skin below the lower eyelid caused by edema in atopic dermatitis. Named after the 2 physicians who described it. Charles Clayton Dennie (1883-1971), was an American dermatologist.</td>
</tr>
<tr>
<td>Dilated pore of Winer [7,8]</td>
<td>It was first reported by Winer in 1954. Dilated pore was seen predominantly in young adult males as a solitary brown to black, giant comedo with central pore, which is nonpalpable due to lack of infiltration. Louis H. Winer (1903-1990), (Fig. 5), was an American dermatologist.</td>
</tr>
<tr>
<td>Duhring disease [9]</td>
<td>Dermatitis herpetiformis; sometimes referred to as „Duhring’s disease“. It was first described by Dr. Louis Duhring in 1884. Louis Adolphus Duhring (1845-1913), (Fig. 6), was an American physician and professor of dermatology at the University of Pennsylvania.</td>
</tr>
<tr>
<td>Fibroepithelioma of Pinkus (FEP) [10]</td>
<td>It is an unusual neoplasm that was first described by Hermann Pinkus in 1953 as a premalignant fibroepithelial tumor. Although FEP traditionally is considered to be an unusual variant of basal cell carcinoma, its indolent nature and often asymptomatic clinical presentation suggest that it may be best classified as a benign counterpart of BCC, such as a trichoblastoma. It is named after Hermann K. B. Pinkus (1905-1985), (Fig. 7).</td>
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Table I. Selected Eponyms in the dermatology literature linked to USA (continued)

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<tbody>
<tr>
<td>Fite stain [11]</td>
<td>A special histopathological stain for leprosy. Named for, George Liddle Fite (1933-1993), (Fig. 8), who was arguably the most important American figure in the fight against leprosy. The crowning achievement of a life devoted to the treatment of leprosy was a chief pathologist of the laboratory at the States Leprosarium in Carville, Louisiana.</td>
</tr>
<tr>
<td>Fox-Fordyce disease [12]</td>
<td>It is a rare inflammatory disorder that affects the apocrine sweat glands. Originally described, in 1902, by 2 American dermatologists; George Henry Fox (1846-1937), (Fig. 9), and John Addison Fordyce (1858-1925), (Fig. 10).</td>
</tr>
<tr>
<td>Goltz syndrome [13]</td>
<td>This is another name for, focal dermal hypoplasia. Also called Goltz-Gorlin syndrome. It is a rare syndrome and may result in multisystem disorders. Robert William Goltz, is an American dermatologist, born 1923. Robert James Gorlin (1923-2006), was an American oral pathologist and geneticist.</td>
</tr>
<tr>
<td>Grover disease [14]</td>
<td>This is another name for transient acantholytic dermatosis. The disease was named for Dr. Ralph Grover after he reported the condition in 1970.</td>
</tr>
<tr>
<td>Hailey-Hailey disease [15]</td>
<td>Also known as benign familial pemphigus. It is a rare autosomal dominant genodermatosis characterized by the formation of blisters. Named for; Hugh Edward Hailey (1909-1963), (Fig. 11), and W. Howard Hailey (1898-1967), (Fig. 12).</td>
</tr>
<tr>
<td>Netherton syndrome (NS) [16]</td>
<td>NS is characterized by the triad of trichorrhexis invaginata, ichthyosis linearis circumflexa, and an atopic diathesis. It is named after Earl Weldon Netherton, an American dermatologist. Who described a 4-year old girl with scaly red and different hair, which he called bamboo hair, because of how it looked in the microscope.</td>
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</thead>
<tbody>
<tr>
<td>Schamberg disease [17]</td>
<td>It is a type of pigmented purpuric dermatosis. Named for an American dermatologist, Jay Frank Schamberg (1870-1934), (Fig. 13).</td>
</tr>
<tr>
<td>Senear-Usher syndrome [18]</td>
<td>This is eponym for what is also known as pemphigus erythematodes. It is named after the American dermatologist, Frances Eugene Senear (1889–1958), (Fig. 14), and the Canadian dermatologist, Barney David Usher (1899–1978).</td>
</tr>
<tr>
<td>Sister Mary Joseph nodules [19]</td>
<td>It is a metastatic lesion of the umbilicus originating from intra-abdominal or pelvic malignant disease. The English surgeon Hamilton Bailey, in his famous textbook „Physical Signs in Clinical Surgery” in 1949, coined the term „Sister Joseph’s nodule” after Sister Mary Joseph (1856-1939) (Fig. 15) a superintendent nurse at St. Mary’s Hospital in Rochester, Minnesota, USA, who was the first to observe the association between the umbilical nodule and intra-abdominal malignancy.</td>
</tr>
<tr>
<td>Solomon’s syndrome [20]</td>
<td>It is one type of epidermal nevus syndromes, which consist of extensive epidermal nevi with abnormalities of the CNS, skeleton, skin, cardiovascular system, genitourinary system, and eyes. It was reported by other authors under many different names, such as ‘Schimmelpenning syndrome’, ‘Feuerstein-Mims syndrome’, ‘Schimmelpenning-Feuerstein-Mims syndrome’, ‘epidermal nevus syndrome’, ‘linear sebaceous nevus syndrome’, ‘organoid nevusphacomatosis’, or ‘Jadassohn nevus phacomatosis’. Gustav Schimmelpenning, born in 1928, is a German neurologist and psychiatrist. Richard C. Feuerstein and Leroy C. Mims are both, American physicians. Lawrence Marvin Solomon, born in 1931, (Fig. 16), is an American dermatologist.</td>
</tr>
<tr>
<td>Spitz nevus [21]</td>
<td>Also known as spindle and epithelioid cell nevus. It is a benign melanocytic nevus. Named after Sophie Spitz (1910–1956), (Fig. 17), the American pathologist who originally described it in 1948.</td>
</tr>
<tr>
<td>Sutton nevus [22]</td>
<td>This is another name for Halo nevus, which is a mole that is surrounded by a depigmented ring or ‘halo’. Named for, Richard L. Sutton (1878-1952), (Fig. 18).</td>
</tr>
<tr>
<td>Wood’s lamp [23]</td>
<td>Wood’s lamp was invented in 1903 by a Baltimore physicist, Robert W. Wood (1868-1955), (Fig. 19). It was first used in dermatology practice for the detection of fungal infection of hair by Margarot and Deveze in 1925.</td>
</tr>
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</table>

Table I. Selected Eponyms in the dermatology literature linked to USA (continued)
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EPONYMS IN THE DERMATOLOGY LITERATURE LINKED TO RUSSIA

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Russia, also officially known as the Russian Federation. At 17,075,400 square kilometres, Russia is the largest country in the world, covering more than one-eighth of the Earth’s inhabited land area. Russia is also the world’s ninth most populous nation with 143 million people as of 2012 [1].

The Russian economy is one of the world’s fastest growing. Its extensive mineral and energy resources, the largest reserves in the world, have made it one of the largest producer of oil and natural gas globally. It is a great power and a permanent member of the United Nations Security Council [1].

In this communication, we aim to highlight on selected eponyms in dermatology literature, linked to Russia, shown in Table I [2-5].

### Table I. Selected Eponyms in the dermatology literature linked to Russia

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Abrikossoff tumor [2]</td>
<td>It is another name for granular cell tumors (GCT). GCT is an uncommon mesenchymal soft tissue neoplasm of Schwann cell origin. This tumor may occur throughout the body, usually in the head and neck, skin or subcutaneous tissues of the trunk and upper extremities, breasts and female genital region. It is usually benign and solitary; however, approximately 2% occur as malignant tumors, and 5–10% as multiple lesions. It is first described in 1926, by Aleksei Ivanovich Abrikossoff (1875-1955), (Fig. 1), who was a Russian/Soviet pathologist. His wife Fanya Davidovna Vulf-Abrikosova, 1895-1965, was a pathologist too and in 1927 at the first time described deposits of Bence-Jones protein (B-J crystals) in tissues. Their only son, Alexei Alexeyevich Abrikosov, a theoretical physicist and a co-recipient of the 2003 Nobel Prize in Physics, for a work about how matter can behave at extremely low temperatures. On the morning of January 23, 1924, Abrikosov was given a task to embalm Lenin’s body to keep it intact until the burial. The body is still on permanent display in the Lenin Mausoleum in Moscow.</td>
</tr>
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</table>

![Figure 1. Aleksei Ivanovich Abrikossoff (1875-1955)](image-url)
Eponyms in the dermatology literature linked to Russia

<table>
<thead>
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<tr>
<td>Nikolsky’s sign [3-5]</td>
<td>The sign is encountered in blistering disorders, and it is present when slight rubbing of the skin results in exfoliation of the outermost layer of the skin. Named for, Russian dermatologist Pyotr Vasiliyevich Nikolskiy (1858-1940), (Fig. 2). Nikolskiy studied medicine at the medical faculty of the University of Kiev (now National Medical University). In 1900, he became a professor at Warsaw, and later worked as a professor in Rostov. Nikolsky’s sign is useful in differentiating between pemphigus vulgaris (where it is present) and bullous pemphigoid (where it is absent). The Asboe-Hansen sign (also known as „indirect Nikolsky sign” refers to the extension of a blister to adjacent unblistered skin when pressure is put on the top of the bulla. This sign is named for Gustav Asboe-Hansen (1917–1989), who was a Danish physician.</td>
</tr>
<tr>
<td>Sheklakov sign [5]</td>
<td>Nikolay Dmitriyevich Sheklakov (1918-1989), (Fig. 3), who was Professor and Chairman of the Department of Dermatology and Venereology at the Moscow School of Dentistry, Moscow, Russia (then the Union of Soviet Socialist Republics), described the sign of perifocal subepidermal separation (“false Nikolskiy sign”), which is also known in the modern dermatologic literature published in Russian as the Sheklakov sign. In contrast to the true Nikolskiy sign, perifocal subepidermal separation is induced at the periphery of blisters with a subepidermal location by pulling the remnant from the blister roof or wall. The induced erosions are limited in size, do not have a tendency to subsequent spontaneous extension, and heal fast.</td>
</tr>
</tbody>
</table>

Table I. Selected Eponyms in the dermatology literature linked to Russia (continued)

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