

Commentary (Series editor: David Taylor)

Pleonasms, pomposity and plain bad English!

"Proper words in proper places make the true definition of style" Jonathan Swift 1667–1745

"Words are wise men's counters, they do but reckon with them, but they are the money of fools" Thomas Hobbes 1588–1679

"If language is not correct, then what is said is not what is meant, if what is said is not what is meant, then what ought to be done remains undone" Confucius

From time to time someone makes us think about the way that doctors speak and write English, both in note taking and in writing for publications. Asher "revelled in the clinical paradox and the unusual; delighted in poking fun at authority and pomposity; a modern Don Quixote." He opened our eyes to how medical authors are adept at using arcane words and jargon, mixing them in unwieldy sentences and tendentiously wrapping them up in obfuscating verbosity (there I go again!).

Asher followed Gowers, Swift, Confucius, and many others who have tried to improve communication by saying less and saying it more simply. Each time these giants have succeeded, however, there is a relentless creep back towards the flatulent use of language that prevents our notes, words, and publications doing what they are meant to do—communicate ideas and concepts clearly.

You might well ask what right have I to talk about these things and you might even reach for my flabby CV to prove that I am as bad as anyone. By all means do that—you will find that I am as guilty as the next person but I am the series editor of the commentaries and that at least gives me the right to submit this passage for scrutiny by the editor and reviewers . . . so here goes!

The needless use of modish scientific words

There is a widespread and ingrained habit of using fashionable scientific sounding words when commonplace ones would not only do but would be clearer. Many of these words remain in vogue for a few years before they are forgotten, only to rise to the surface after a few years like a drowned body, the gas increasing with time. Paradigm, protocol, algorithm, dyad, and intervention could often easily be replaced by pattern, consent form, flow chart, couple, and treatment.

"Pompo-verbosity"

Do we really have to use "paediatric patient," "paediatric population," and "paediatric age group" for child, children, and childhood? Pity the poor children that their natural simplicity should be ruined by such prosiness! What's next—"geriatric generation," "adolescent age group"?

The use of "ocular motility" to describe the specialty of strabismus is not only inaccurate (it is mostly eye position, not movement, that is studied) but in many cases it is an unnecessary substitution for plain old "squint."

The use of too many or unfamiliar words

At this point in time, to our knowledge, ascertained, elevated, utilised, visualised, initiate, and conceptualised are all words that we can usually do without. Now, we think, ensured, raised, used, seen, start, and thought might be clearer.

" . . . be direct, simple, brief, vigorous and lucid."
 "Prefer the familiar to the far-fetched
 Prefer the concrete to the abstract
 Prefer the single word to the circumlocution
 Prefer the short word to the long
 Prefer the Saxon word to the Romance."
 (Fowler HW. *Modern English Usage*. 2nd ed. Oxford: Oxford University Press, 1968)

The use of words inappropriate for the likely reader

"To quantitate the actual magnitude of SIA, the absolute value of the Cartesian coordinates was used in the vector algorithm" might make sense to those who know the jargon but could be simplified for the average reader of the journal that this was published in.

The use of unnecessary and unsafe abbreviations

A few remaining ophthalmologists condone the use of abbreviations in the notation of planned surgical operations. LR, for example, could equally mean the removal of tissue from the lateral rectus muscle (a resection) or a weakening procedure (recession). Although the convention is that it refers to a recession, not everyone is familiar with the convention and it is likely that the courts would be unsympathetic to a failure to devote that little extra time to writing "recession" or "resection," words that have no second meaning.

The use of abbreviations in a dead language

There is nothing wrong with abbreviations that have meaning, but why abbreviate words from the language of a dead empire? What's wrong with our day to day language? OD, OS, and OU are commonly used in the United States (not normally fond of the trappings of other empires!) and sometimes used in Europe by those wanting to give a North American flavour to their writings when referring to right, left, or both eyes. My parents spent a fortune on several years of Latin lessons and, although I liked the stories and admired the teacher, I still can't fathom why we don't universally use RE, LE, and BE. The French use OD, OG—well, they would, wouldn't they—it's their day to day language!

Our orthoptists still quaintly use laevo- and dextro- as prefixes: how sweet, how bizarre!

Is it time for a rigorous outing of the consumptive elements in our speech and writing? Enough said or I won't have any ophthalmologist friends left!

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1 Lord Rosenheim in Avery Jones F, ed. *Richard Asher talking sense*. London: Pitman Medical, 1972.

2 Gowers E. *The complete plain words*. Middlx: Pelican Books, 1975:97.



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