Our Dermatology Online

Historical Article

Eponyms in Tuberculosis

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Tuberculosis (TB) is an old disease and the most common cause of infection-related death worldwide. In 1993, the World Health Organization (WHO) declared TB to be a global public health emergency.

There are several eponyms related to TB. Some of these eponyms are rarely used in the present time. For example some medical dictionaries mention about "Lorenz sign", which is an

Table 1: Selected eponyms in tuberculosis

Selected eponyms in tuberculosis	Remarks
Erythema induratum of Bazin [2]	In 1861, Bazin gave the name erythema induratum to a nodular eruption that occurred on the lower legs of young women with tuberculosis. Erythema induratum/nodular vasculitis complex is classified into 2 variants: erythema induratum of Bazin type and nodular vasculitis or erythema induratum of Whitfield type. The Bazin type is related with tuberculous origin, but Whitfield type is not. Ernest Bazin (1894-1964), (Fig. 2), was a French physician
Ghon's complex [3,4]	It is the initial site of parenchymal involvement at the time of the first infection. It consists of a calcified focus of infection and an associated lymph node. These lesions are particularly common in children and can retain viable bacteria, so are sources of long-term infection and may be involved in reactivation of the disease in later life Anton Ghon (1866-1936), was an Austrian pathologist
Heaf test [5]	It is a diagnostic skin test, was long performed to determine whether or not children had been exposed to tuberculosis infection. It is named after, Professor Frederick Roland George Heaf (1894-1973), (Fig. 3), who was a British physician. The test was discontinued in 2005 because the manufacturer deemed its production to be financially unsustainable after manufacturers could not be found for tuberculin or Heaf guns. Until 2005, the test was used in the United Kingdom to determine if the BCG vaccine was needed
Mantoux test [6-8]	Also known as Mendel-Mantoux test, Mantoux screening test, tuberculin sensitivity test, Pirquet test, or purified protein derivative (PPD) test, is a screening tool for tuberculosis (TB). It is named after Charles Mantoux (1877-1947), (Fig. 4), how was a French physician. Mantoux built on the work of Robert Heinrich Herman Koch (1843-1910) and Clemens Peter Freiherr von Pirquet (1874-1929) to create his test in 1907. Koch (Fig. 5) was a celebrated German physicianand pioneering microbiologist. The founder of modern bacteriology, he is known for his role in identifying the specific causative agents of several pathogens including tuberculosis. His work with this disease won Koch the Nobel Prize in Physiology and Medicine in 1905. Pirquet (Fig. 6) was an Austrian scientist and pediatrician .He introduced the term "allergy" in 1906. He and his wife committed suicide with potassium cyanide in 1929. One more scientist to be mentioned in this regards is Florence Barbara Seibert (1897-1991), (Fig. 7), who was an American biochemist known for isolating a pure form of tuberculin used in the standard TB test
Pott disease [9-11]	It is tuberculosis of the spine. It is named after Percivall Pott (1714-1788), (Fig. 8), a British surgeon. He was one of the founders of orthopedy, and the first scientist to demonstrate that a cancer may be caused by an environmental carcinogen
Ranke's stages of tuberculosis [12]	This term is no longer used in the current literature. It was based on a hypothesis that lung tuberculosis develops in three stages. Named after, Karl Ernst Ranke (1870-1926), who was a German internist, pediatrician and pulmonologist known for his research of tuberculosis. His name was also associated with the so-called "Ranke complex", a combination of a Ghon focus and enlarged or calcified lymph nodes
Rasmussen's aneurysm [13-16]	It is a pulmonary artery aneurysm adjacent or within a tuberculous cavity. It is caused by erosion from an adjacent tuberculous cavity. It occurs in up to 5% of patients with such lesions. It may lead to rupture and hemorrhage. It is named after, a Danish physician, Fritz Valdemar Rasmussen (1837-1877), (Fig. 9)
Ziehl-Neelsen stain [17]	Also known as the acid-fast stain, which is used to identify acid-fast bacteria. In this stain, Mycobacteria will appear bright red. Dr. Franz Ziehl (1857-1926), (Fig. 10), was a German bacteriologist. He was a professor in Lübeck. Franz Ziehl introduced the carbolfuchsin stain for the tubercle bacillus in 1882. With a Friedrich Carl Adolf Neelsen (1854-1898), (Fig. 11), who was a German pathologist, he developed the Ziehl-Neelsen stain

How to cite this article: Al-Aboud NM. Eponyms in Tuberculosis. Our Dermatol Online. 2016;7(3):355-358.
Submission: 22.09.2015; **Acceptance:** 06.12.2015
DOI: 10.7241/ourd.20163.98

obsolete term for stiffness of the thoracic spine in early pulmonary tuberculosis. Named after, Adolf Lorenz (1854 - 1946) (Fig. 1), who was an Austrian surgeon [1].

One may find little information in the literature about the origin of some of the eponyms related to tuberculosis. An example of this is "Löwenstein-Jensen" media used for TB culture.

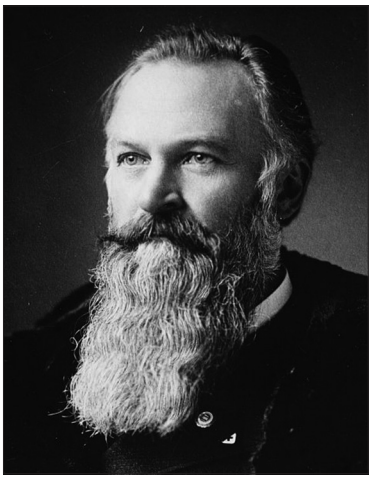

Figure 1: Adolf Lorenz (1854-1946).

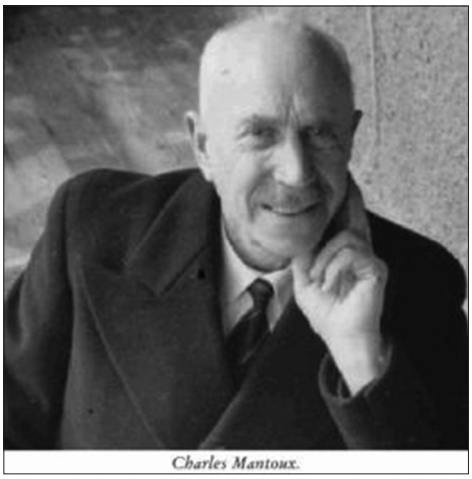

Figure 4: Charles Mantoux (1877-1947).

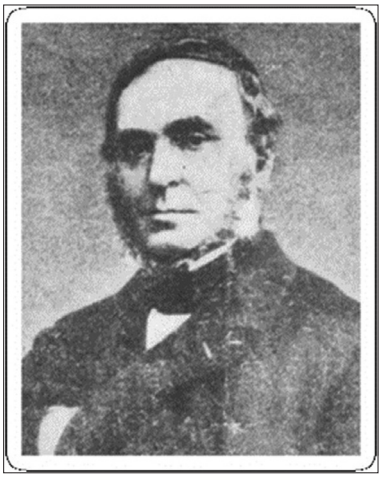

Figure 2: Ernest Bazin (1894-1964).

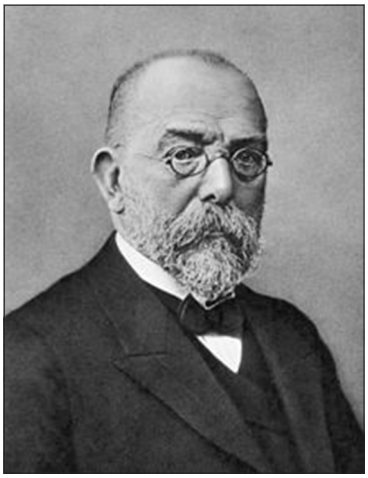

Figure 5: Robert Heinrich Herman Koch (1843-1910).

Figure 3: Frederick Roland George Heaf (1894-1973).

Figure 6: Clemens Peter Freiherr von Pirquet (1874-1929).

Figure 7: Florence Barbara Seibert (1897-1991).

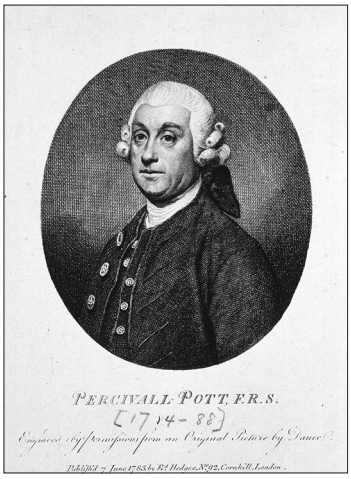

Figure 8: Sir Percivall Pott (1714-1788).

Figure 9: Fritz Valdemar Rasmussen (1837-1877).

In Table I, we tried to summarize the available literature for selected eponyms linked to TB.

Figure 10: Franz Ziehl (1857-1926).

Figure 11: Friedrich Carl Adolf Neelsen (1854-1898).

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Source of Support: Nil, **Conflict of Interest:** None declared.