Summary

Obtaining an eponym for one’s academic literature is regarded as one of the greatest honours: “Eponymity, not anonymity, is the standard” (Merton, 1973). To be exact, we will specifically look at 7 venous eponyms of gastrointestinal tract by analyzing names of the scientist (of the eponyms), their contribution to medicine. This article will provide an anatomical description as well as clinical implication of each of the eponyms.

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Obtaining an eponym for one’s academic literature is regarded as one of the greatest honours: “Eponymity, not anonymity, is the standard” [1].

For some time now there continues a debate among specialists and linguists. Should eponyms remain or should they be replaced with descriptive terms? The aim of our work is to look at the main advantages and disadvantages involved in both the use of eponyms and descriptive terms.

Ductus venosus Aranti is a fetal shunt connecting umbilical vein to inferior vena cava. It plays a major role in the regulation of the circulation of oxygenated blood from the placenta. It directs 20–30% highly-oxygenated blood toward the left side of the heart to maintain preferential streaming to the left atrium. Within 3–5 weeks after birth, ductus venosus is obliterated by a combination of muscular contraction and fibrous proliferation of the intima. It becomes Lig. venosum.

This anatomical entity was discovered by great Italian anatomist and surgeon Giulio Cesare Aranzio (1530–1589) (fig. 1). Its description appeared in his treatise "De humano foetu" (1564) (fig. 2) together with account of the foramen ovale and ductus arteriosus, which he described before Leonardo Botallo (1519 or 1530–1588 or 1600) whom its discovery is ascribed [2].

Aranzio studied medicine at the University of Bologna in 1548–1556. Just after graduation he was appointed professor of anatomy and surgery at his Alma Mater. In 1570 after decision of authority to separate anatomy and surgery into two independent professorships Aranzio held both appointments until his death [3]. Thus, Aranzio became first professor of anatomy in history of Bologna University. Besides discoveries mentioned above he described for the first time m. levator palpebrae superioris and m. coracobrachialis as separate muscle, demonstrated nodules in the semilunar valves in the heart, fourth ventricle, hippocampus and introduced this term [3].

Konstantinovich’s vein (marginal vein of anus) was mentioned first in dissertation of Russian anatomist Vikentiy Bonifat Konstantinovich (b. 1845)”On distribution of arteries and veins in walls of rectum” defended by him at the Imperial Medical-Surgery Academy in Saint Petersburg [4]. Nothing more is known about his life.

Latarget’s vein (Mayo’s vein, prepyloric vein) is a tributary of the right gastric vein that crosses the anterior surface of pylorus. It is used as a landmark to identify location of pylorus intraoperationally.

Andre Latarjet (1877–1947) (fig. 3) was a French anatomist and surgeon. In 1919 he succeeded famous anatomist Leo Testut as anatomy professor on the Faculty of Medicine in Lyons. His anatomical and physiological observations on vegetative innervation of internal organs led him to first use of vagotomy for treatment of peptic ulcers. Later he added to this procedure gastrojejunostomy as method to prevent delayed gastric emptying found in many of his vagotomized patients. From 1992 anatomical museum in Lyons bears name of Latarjet and his teacher. He was a first president of the International Federation of Sports Medicine [5].

Mayo’s vein (Latarget’s vein, prepyloric vein) — see above.

Distinguished surgeon Charles Horace Mayo (1865–1939) (fig. 4) is representative of very famous family of US medical practitioners. He earned his Doctor of medicine degree at the Chicago Medical School in 1888 [6]. In 1889 together with his father and brother founded Mayo Clinic in Rochester (Minnesota, USA). Now it is a largest private medical practical and research center in the world. From 1915 he served as a professor of surgery for the University of Minnesota.

He is best known for his practice in the field of thyroid, neurologic, cataract, and orthopedic surgery. He is considered as a “Father of American Thyroid Surgery”. He introduced term “hyperthyroidism”. He was a president of American Medical Association.

Quain’s veins (colicospermatic veins) collect blood from descending colon and drain into the left testicular vein [7].

An Irish anatomist Jones Quain (1796–1865) received his Bachelor degree in 1820. After that he spent some time in Paris. In 1825 he settled in London where he
taught anatomy at the University College. In 1831 he became professor of anatomy and physiology. In 1835 he was appointed a member of the senate of the London University. Ten years after he retired and moved to Paris.

Quain’s main contribution to anatomy is his “Elements of Descriptive and Practical Anatomy for the use of Students” (1828) (fig. 5), better known as “Quain’s anatomy”, which was a standard textbook in English-speaking countries [8].

Retzius’ veins connect roots of portal vein in mesenteries with retroperitoneal tributaries of inferior vena cava. Retzius’ veins may provide a route for the hematogenous dissimilation of colon cancer.

Anders Adolf Retzius (1796–1860) (fig. 6) was one of the greatest biologists of his period, and representative of very famous scientific dynasty. He studied at Lund and Copenhagen Universities. After getting his medical doctorate in 1819 he served as a military physician. In 1821–1823 he worked in the Stockholm Veterinary Institute. In 1824 he became professor of anatomy at the Karolinska Institute. In 1830 Retzius was also posted as inspector of this school. In 1840, being appointed full professor at Karolinska Institute, he resigned his post at the Veterinary Institute and until his death devoted all his time to the two positions he held at the Karolinska Institute. Fellow of the Royal Swedish Academy of Sciences since 1826 [9].

He made fundamental contributions to many areas of medicine and biology, including comparative anatomy, histology, anthropology, horticulture, hygiene, etc. He discovered interrenal organ in elasmobranch fishes — homolog of the mammalian adrenal cortex. He described retropubic space, which now bears his name. He improved knowledge about structure of abdominal viscera and their vascularization in humans and animals. He demonstrated first ciliary ganglion in horses [10]. He was first to describe many histological structures of enamel and dentine. Created by him “cephalic index” is useful to describe skull’s shape. He coined the terms “dolichocephalic” and “brachycephalic”.

Sappey’s veins (paraumbilical veins) — venous plexus in the falciform ligament of liver. They originate from superficial veins around the navel, run along Lig. teres hepatis and join branches of portal vein of left lobe of liver. Several veins placed in cranial portion of falciform ligament penetrate through the diaphragm and communicate with the tributaries of the internal thoracic veins. This plexus is a potential collateral pathway in portal hypertension. This can result in dilation of cutaneous veins of anterior abdominal wall known as “caput medusae”.


In his research he focused on the structure of lymphatic system [12]. He proposed technique to visualize lymphatic vessels of a cadaver by injecting mercury subcutaneously. Among his works are the “Anatomie, physiologie, pathologie des vaisseaux lymphatiques considérées chez l’homme et les vertébrés” (“Anatomy, Physiology and Pathology of the Lymphatic Vessels in Man and Vertebrates” (1874)) and “Atlas d’anatomie descriptive” (“Atlas of descriptive anatomy” (1879)).

Eponyms highlight all the scientists that worked on the development of anatomy as a science. They are still widely used in medical language. It is impossible to ignore the role of eponyms in the discoveries that were made. Some scientists are saying: “Medical terms are very much like individual jigsaw puzzles. They are constructed of small pieces that make each word unique, but the pieces can be used in different combinations in other words as well” [13]. So, all eponyms definitely play there role in medicine paying contribution to the scientists that discovered them, so they can be remembered.
References

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