

The update document does not contain any changes to the preferred indication criteria for the polypill in the context of secondary prevention of CV disease, although the new evidence on polypill use and the introduction of the new 40 mg atorvastatin dosage form do broaden the therapeutic spectrum of patients who could benefit from its use. Furthermore, these developments justify the update to the consensus document on the clinical use of the polypill as CV risk prevention, which will allow clinical staff more uniformity in making decisions in line with the available evidence.

#### Acknowledgements

We are grateful for the work performed by the other members of the scientific committee (Benjamín Abarca, José María Lobos, José Luis Llisterri, and José María Mostaza), the recommendations update group (José Juan Alemán, Gonzalo Barón-Esquivias, Isabel Egocheaga, Enrique Galve, Francisco Xavier García-Moll, Rosa María Lidón, Jesús Millán, Vicente Pallarés-Carratalá, Pedro Luis Sánchez, and Carmen Suárez) and the recommendations validation group. We also thank Ferrer Internacional for their support and GOC Networking for their technical and methodological support.

#### FUNDING

Ferrer Internacional funded the logistics required for the document to be updated, but did not participate in the discussions or decision-making.

#### CONFLICTS OF INTEREST

J.R. González-Juanatey has received fees from Ferrer Internacional for giving lectures.

#### Anglicisms in Spanish: Apropos of “Into the Heart of Terminology”



#### *¿Ligera y severa o leve y grave? A propósito de «Viaje al corazón de las palabras»*

#### To the Editor,

The cardiology community should be extremely grateful for the recently-added section of *Revista Española de Cardiología*, “Into the heart of terminology”. The wisdom and experience of Professor Fernando Navarro teaches us something new in each edition of the journal and shows us the rights and wrongs of medical language use.

English, despite what some may believe,<sup>1</sup> is the language of science,<sup>2,3</sup> so modern professionals need to know that language in depth: first, for their professional advancement, and second, to be able to share their knowledge and allow the results of their research to reach a wide audience. However, inappropriate translations have led to the increasing inclusion of foreign-language terms (anglicisms in this case) in our scientific language repertoire, despite there being well-established equivalents in Spanish. Therefore, many physicians and linguists, such as the aforementioned Dr Navarro, have become staunch defenders of Spanish medical language,<sup>4–6</sup> in an attempt to help improve how medical professionals talk and write.

We are not referring to *stent*, *strain rate*, *milking*, *kissing*, *odds ratio* or *end point*,<sup>2–4</sup> to name just a few examples that have been gladly accepted because conciseness and the lack of a short, simple equivalent in Spanish favor the use of the English term. However, *patología* instead of *enfermedad* for a disease or “pathology”,

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Available online 8 May 2018

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<http://doi.org/10.1016/j.rec.2016.02.008>

<https://doi.org/10.1016/j.rec.2018.04.004>

1885–5857/

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admisión rather than *ingreso* (admission), *balón* instead of *globo* (balloon), *patente* instead of *permeable* (patent), *banding* instead of *cercleaje* or *ligadura*, *cleft* instead of *hendidura*, *leak* instead of *fuga* or *escape*, *flap* instead of *colgajo*, *desorden* instead of *trastorno* or *alteración* (disorder) and *randomizado* instead of *aleatorizado* (randomized), along with many other examples, have become common words, to the detriment of (or perhaps as part of the evolution of) our rich Spanish language. Unfortunately, as Fernando Navarro points out in his excellent article<sup>6</sup> (which we recommend reading), some of the reasons for this are ignorance, laziness, and snobbery.

This reflection raised a question with us: what terms should we use to describe the severity or status of a particular condition or disease, for what would be described in English as mild and severe – *ligera* and *severa* or *leve* and *grave*?

As far as we understand, although *ligera* (literally, *light*) usually describes the weight of objects, *ligera* and *leve* are synonyms and can be used interchangeably in this sense, to describe something slight, subtle, or of little importance; however, this is not the case with *severa* and *grave*. *Severa/o* (from the Latin *sevērus*) is the inappropriate translation of the English term *severe*. In Spanish, it bears no relation to describing the seriousness of a particular condition or disease, which it does in its original language, as the American Heritage Dictionary of the English Language defines it, in one of its accepted uses, as “very dangerous or harmful; grave or grievous”.<sup>7</sup> In contrast, the *Diccionario de la Real Academia Española*<sup>8,9</sup> defines the word as an adjective, meaning:

1. *Riguroso, áspero, duro en el trato o el castigo* (strict, harsh, tough in manner or punishment).

2. *Exacto y rígido en la observancia de una ley, un precepto o una regla* (exact and strict in the observation of a law, order or rule).
3. *Dicho de una estación del año: que tiene temperaturas extremas* (p. ej., «el invierno ha sido severo») (of a season of the year: having extreme temperatures, eg “it has been a harsh winter”).

Therefore, when referring to the severity of some diseases, one should say—though we are not used to it—*estenosis aórtica grave* (severe aortic stenosis), *insuficiencia mitral grave* (severe mitral regurgitation), *disfunción ventricular grave* (severe ventricular dysfunction) and *estenosis grave de la coronaria derecha* (severe stenosis of the right coronary artery), to give but a few examples.

Earlier in this letter we said “to the detriment of (or perhaps as part of the evolution of) our rich language” because we cannot be absolute: we know that one of the reasons for changes in medical language and effects on language in general is that new scientific and technical concepts are constantly arising and require terms to describe them. In addition, and with its supporters and opposers, the frequency of use of a certain term leads to its acceptance and inclusion in the dictionary. Nonetheless, defending the Spanish language from unnecessary Anglicisms and other foreign words helps strengthen our medical language.

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<https://doi.org/10.1016/j.rec.2018.04.013>

1885-5857/

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