DR. AMIN J. BARAKAT AND BARAKAT SYNDROME

E.V. Varnavskaia, *Candidate of Philology, Senior Lecturer*
N.S. Yakovenko, *Candidate of Philology, Senior Lecturer*
Mohamad Moussa, *Student*
Voronezh N.N. Burdenko State Medical University
(Russia, Voronezh)

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Abstract. *The present paper discusses the problem of eponyms in medical terminology. Terminology as an independent linguistic discipline combines many areas that vary in degree of development, goals and research aspects. The authors show that eponymy is a naming of a proper name, things or phenomena in honor of real or mythical characters. Eponymy has a long tradition and is applied in all areas of scientific knowledge. The main focus of the article was put on the study and interpretation of the naming of Barakat syndrome or HDR syndrome – hypoparathyroidism, sensorineural deafness, renal disease.*

Keywords*: eponyms, medical terminology, Brakat syndrome, hypoparathyroidism, sensorineural deafness, renal disease syndrome.*

Terminology as an independent linguistic discipline combines many areas that vary in degree of development, goals and research aspects [1]. Eponymy – naming of a proper name, naming things or phenomena in honor of real or mythical characters - has a long tradition and is applied in all areas of scientific knowledge. The dualism of the concept, when the eponym is understood as the signifier and the signified, as well as the explication of the intention of choosing a proper name for the nomination of realities, is connected with the problem of orientation in the cultural space [2].

The problem of eponymy in medicine relates to various aspects and is very relevant for a long time. The phenomenon of eponymy is unlimited, at the moment the number of publications related to research issues in this area is steadily growing. In the works that investigated the phenomenon of eponymy and the terms of eponymy, their syntagmatic connections were carefully studied, conclusions were drawn both on the beneficial and negative effects on the development of the biomedical term system in the era of globalization [3, 4]. A number of articles deal with medical ethics and various humanitarian issues including tolerance development [5]. Raising the topic of crime against humanity, doctors make serious claims against using the names of doctors who collaborated with the Nazis in medical terms. Nevertheless, it is worth saying that many doctors are sure that «no history, including the history of medicine, needs censorship and varnishing» [2].

Results and Discussion. We decided to join the research that has been conducted by our supervisor for many years and make a small contribution to its development. The aim of the article is to shed light on Dr. Amin Brakat, who is considered one of the pioneers in the field of medicine. Our research also dwells upon the HDR syndrome – hypoparathyroidism (H), sensorineural deafness (D), renal disease (R) syndrome, called Barakat syndrome, which is one of his most important achievements of this scientist.

Lebanon is an Arab country located in the Middle East, and it is considered a relatively small country with an area of 10,452 square kilometers, but despite its smallness, it managed to graduate many geniuses whose name shined in all fields of science. Perhaps among the most prominent of these names is Dr. Amin Barakat, who brightened his star in the field of medicine after his discovery of HDR syndrome, which later became known as Barakat Syndrome in honor of his efforts in the field of scientific research.

Amin Barakat is a Lebanese-American doctor, born on November 2, 1942 in Jbeil, Lebanon. He was educated at Tripoli school for boys, after his graduation he entered the

American University of Beirut, where he studied medicine, and from 1967 until 1970 he began studying pediatrics at the American University of Beirut and Johns Hopkins University in America. Between 1970 and 1972 he received training fellowship in pediatrics at Georgetown University. During his career, Barakat graduated from many academic educational positions both in America and London, where he worked at the American University of London, Vanderbilt and Georgetown Universities. As for his personal life, he resides in Virginia with his family consisting of his wife Amal Nassar and his three children.

In his research, Barakat focused on children suffering from rare hereditary and congenital diseases. In 1977, Barakat and co-authors J.B. D'Albora, M.M. Martin, and P.A. Jose described four siblings with familial nephrosis, nerve deafness, and hypoparathyroidism. This syndrome is now known as HDR syndrome – hypoparathyroidism, sensorineural deafness, renal disease, or Barakat Syndrome, which is characterized by hearing problems, kidney troubles. Barakat syndrome is a group of disorders associated with a person growth, which is usually accompanied by increased activity over the normal rate of thyroid gland function and sensory nerve deafness, and suffers usually suffer from cramps of hypocalcemia, tetanus or fever of any age. Deafness caused is usually bilateral and it can be mild to deep. Renal disease includes nephrotic syndrome, cystic kidney, renal dysplasia, hypoplasia or aplasia, pelvicalyceal deformity, vesicoureteral reflux, chronic kidney disease, hematuria, proteinuria and renal scarring. Other reported features include: intellectual disability, polycystic ovaries, particular distinct facial characteristics, ischemic stroke and retinitis pigmentosa.

On the genetic level, after studying many cases and comparing them, it was found that the syndrome is linked to chromosome 10 p, and it was found that the mutations that occur at the level of the factor GATA3, in addition to deletion of zinc-fingers, are also responsible for the emergence of the syndrome. As a result of all these changes, the cells of the cochlear duct which has an important role in the process of hearing, have an increased rate of death, which ultimately leads to deafness. Since the spectrum of phenotypic variation in affected people is quite large, Barakat (HDR) syndrome probably arises as a low penetrance haploinsufficient disorder, the severity in which can be determined based on the patients' genes. The inheritance of Barakat syndrome is generally considered as autosomal dominant.

Lebanon was and still is proud of Dr. Amin Barakat and his ilk who have done a lot to raise the name of their country and promote it to the ranks of developed countries, and they have done a lot to move the wheel of scientific progress in order to achieve the benefit of all mankind. Therefore, the state must work to develop the range of services it provides, and by means of developing and supporting all areas of scientific research, which creates new job opportunities, which limits the brain drain and gradually contributes to the return of expatriates. Moreover, the state must maintain ties with expatriates and support them to be able to achieve their best in the field of medicine and science.

Conclusion. Summing up the foregoing, we note that familiarity with eponymous terms as a cultural artefact plays a large role in teaching any medical specialty. The knowledge of their origin and current usage on the border of language and medicine can expand both professional and cultural competence of future healthcare professionals.

Reference

1. Стеблецова А.О., Варнавская Е.В. От лечца до врача: лингвоисторическая эволюция взаимоотношений врача и общества // Прикладные информационные аспекты медицины. 2018. Т. 21. № 1. С. 244-256.

2. Варнавская Е.В., Варнавский В.С. Эпонимы и политика: семасиологические проблемы // Научно-методический электронный журнал «Концепт». – 2019. – № 3 (март). – С. 188–196. – URL: http://e-koncept.ru/2019/195008.htm. DOI: 10.24411/2304-120X-2019-1301

3. Яковенко Н.С. Ономастическая лексика как важный компонент формирования общекультурной компетенции студентов / Н.С. Яковенко, Н.Ю. Кузьменко // В сборнике: Многоуровневая языковая подготовка специалистов в высшей школе: проблемы и перспективы развития. Труды IV международной научно-практической интернет-конференции. Ответственный редактор Сафроненко О.И. 2014. С. 157-160.

4. Яковенко Н.С., Варнавская Е.В., Ломтадзе А.Д. Художественный ономастикон В. Набокова и терминология лепидоптерологии // В сборнике: Методика преподавания иностранных языков и РКИ: традиции и инновации. Сборник материалов IV Международной научно-методической онлайн-конференции. 2019. С. 260-267.

5. Stebletsova A.O., Torubarova I.I. Empathy development through ESP: a pilot study // Journal of Educational, Cultural and Psychological Studies. – 2017. – № 16. – P. 237-249.

ДОКТОР АМИН БАКАРАТ И СИНДРОМ БАКАРАТА

Е.В. Варнавская, *канд. филол. наук, старший преподаватель*
Н.С. Яковенко, *канд. филол. наук, старший преподаватель*
Мусса Мохамад, *студент*
Воронежский государственный медицинский университет им. Н.Н. Бурденко (Россия, г. Воронеж)

Аннотация. *В настоящей статье поднимается проблема эпонимов в медицинской терминологии. Терминология как самостоятельная лингвистическая дисциплина объединяет множество областей, которые различаются по степени развития, целям и аспектам исследования. Авторы показывают, что эпонимия - это наименование именем собственным вещей или явлений в честь реальных или мифических персонажей; эпонимия имеет давние традиции и применяется во всех областях научных знаний. Основное внимание в статье уделено изучению и интерпретации наименования синдром Бараката или синдрома HDR – гипопаратиреоз, нейросенсорная глухота, почечная недостаточность.*

Ключевые слова: *эпонимы, медицинская терминология, синдром Бакарата, гипопаратиреоз, нейросенсорная глухота, синдром почечной недостаточности.*