We have read with deep interest the Editorial “Hipócrates, el arte médico, el racionalismo y la astrología” by Samuel Finkielman, where he delineates the undeniable contributions of Hippocrates of Cos (460-370 BC) to Medicine. Finkielman highlights Hippocrates’s “medical profession” and his ability to identify and name symptoms and signs, along with his semiological descriptions. For this reason, it is relevant to remember the influence of classical languages such as Greek—and later Latin—on medical language. This Letter aims to report the assessment of Greek and Latin terminology by medical students at a Chilean university to highlight the importance that both Greek and Latin maintain in medical language to date, thereby highlighting the relevance of including the contribution and legacy of these languages in undergraduate medical training.

The oldest written sources of Western Medicine are considered to be the Hippocratic writings (Ιπποκρατική Συλλογή), dating back between the 5th and 4th centuries BC1,2. The Romans later adopted Greek Medicine, and in the 1st century AD, Aulus Cornelius Celsus translated several Greek medical terms into Latin3. However, the Greek era of language in medical sciences extended its influence until about the 2nd century AD3. Subsequently, various sociopolitical and cultural factors led to the incorporation of Latin as a scientific language3, becoming the science language per excellence, of prestige, to transmit knowledge in the different fields. Examples of this were the writings of Andreas Vesalius (De Humani Corporis Fabrica, 1543), William Harvey (Exercitatio Anatomica de Motu Cordis et Sanguinis in Animalibus, 1628), Marcello Malpighi (De Viscerum Structura Exercitatio Anatomica, 1666) as well as the work of Sir Isaac Newton (Philosophiae Naturalis Principia Mathematica, 1687). The influence of prestigious Latin in the medical area extended until the 19th century. Today, however, English is, without a doubt, the language of scientific and medical communication, just as Latin was and, before it, Greek.

Currently, classical Greek and Latin are considered “dead languages”. However, far from this, they are not obsolete languages or have limited modern use, and in certain circles, they are considered “living” languages4 and essential for the medical community through terminology. This contribution is through prepositions, prefixes and suffixes5 that have allowed the construction of words for new concepts, with widespread use in science in general, for example, in botany, zoology, anatomy or microbiology6.

Now, it is true that, in general, there is no medical training curriculum—except for the case recalled by the authors of the Latin course for Medicine at the Pontifical Catholic University of Chile7,8 including classical languages, but rather, this knowledge is expressed in the form of a “hidden curriculum” or indirectly through terminology teaching in the various subjects4. Therefore, to determine the students’ interest in these languages and their contribution to the medical vocabulary, a survey was carried out, shown in Figure 1. The
results express recognition of the contribution of the Latin and Greek languages in medical language. However, the specific knowledge on the part of the students is more limited.

Finally, in a scenario where classical language and culture centres have been gradually disappearing in several Latin American universities, we consider remembering the transcendental relevance of classical Greek and Latin. We need to connect the training of medical and related health professions students with the recognition of the contribution of these classical languages, promoting a genuine and deep interest in these subjects to integrate this knowledge into the cultural background of future health professionals and scientists. The above can facilitate the acquisition of medical vocabulary and other specific knowledge5.

References

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7. Chuaqui B. Lingua latina ad usum medici per litteras et grammaticam tractata. Instituto de Filosofia, Universidad Católica de Chile, 1990.

Figure 1 | Percentage frequency results of the survey applied to medical students. N = 54. Average age = 19.0 ± 0.9 years