

could interfere with blood purification techniques. Finally, the information obtained at the different centres that have tested these techniques and other treatments should be orchestrated and shared swiftly by international scientific associations.

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## Kidneys also speak Spanish<sup>☆</sup>

### Los riñones también hablan español

Dear Editor,

Recently, the conclusions of a Kidney Disease: Improving Global Outcomes (KDIGO) consensus conference were published.<sup>3</sup> The main objective of the conference was to standardise nephrology nomenclature for scientific articles written in English, guided by the essential principle of improving understanding on the part of (English-speaking) patients.<sup>3,4</sup> From a Spanish-speaking point of view, it is striking that one of the main recommendations made was to use the term “kidney” instead of the term “renal” for general descriptions of kidney function and kidney disease, as it was stated that (in an English-language context) the noun “kidney” is more familiar than the adjective “renal”.<sup>3</sup>

Curiously, this decision did not appear to extend to a change in nomenclature for anatomical structures (e.g. “renal artery”) or historically established names (e.g. the United Kingdom’s “Renal Association”) (which seems to be reasonable). In another logical decision, the Greek prefix “nepro-” (Spanish “nefro-”) was retained for syndromes, kidney diseases and kidney functions (nephritic, nephrotic, nephropathy, nephrology and so on)<sup>3</sup>, since revising these terms would seem excessive and might even lead to a change in the name of the International Society of Nephrology (ISN) itself. Hence, a group of 10 nephrologists from nine different countries, not all Spanish-speaking, recently brought to the attention of the ISN<sup>5</sup> the need for different nephrology associations (ideally, both national and supranational) to make efforts similar to the

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KDIGO efforts to unify nomenclature, especially acronyms, in each language and related publications.

This is not a matter of humbly acknowledging that English is the richest and universally known language, since at present it is the *lingua franca* of politics, business, finance, technology, public demonstrations and even science, stretching even beyond *terra firma*. Rather, it is a matter of defending absolutely correct and precise non-English terminology based on the second most common source of English words, following native derivatives.<sup>6</sup> In addition, Spanish still is the second most common native language in the world (with 460 million native speakers), after Mandarin Chinese (with 917 million native speakers). By contrast, English is spoken as a native language by around 380 million people.<sup>7</sup>

Setting aside common misconceptions (e.g. the very definition of chronic kidney disease and/or failure),<sup>8</sup> the appearance of new kidney terminology primarily originating from the English language (e.g. AKI [acute kidney injury]) and/or the need for current literature searches to be as broad and inclusive as possible (e.g. for meta-analyses or simply to unify keyword use in articles and/or registries and/or meta-tags in search engines) would call for implementing this same initiative in Spanish for nephrology, beyond prior general attempts.<sup>9</sup> This broad alignment of nephrologists from highly diverse Spanish-speaking countries reflects existing concerns and may be not only a source of debate but also the germ (genesis) of a broad, open basis for discussion among Spanish-speaking nephrologists.

Finally, we find it important to note that this is not just about defending “renal” as the natural adjective in Spanish for “riñón” [kidney] in a scientific context or pointing out that Latin was the language of science up to the 18th century. It is, above all, about clinicians not losing sight of the fact that, in medicine today, individualization plays a central role in shared decision-making.<sup>10</sup> Therefore, especially in nephrology where the degree of evidence generally corresponds to “suggestions” rather than “recommendations”, what is truly essential is the use of simple, adapted explanations to patients—whether that disease is “renal” or “del riñón” (of the kidney), and whether physicians devoted to the kidney are “nefrólogos” (“nephrologists”) or “riñón-ólogos” (“kidneylogists”)—, using plain, understandable words, whatever their etymological origin is.<sup>3,8</sup>

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