Medical terms worry more people than lay terms, study finds
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The label used to identify a disease – whether it is common language or medical terminology – can influence how serious people think the condition is, according to new research from McMaster University, the second part of a larger study on how people understand and interpret disease.

The study, published online in the journal *Public Library of Science: ONE*, examined many recently medicalized disorders. For example, impotence is now widely known as erectile dysfunction; excessive sweating is also known as hyperhidrosis.

Researchers found that when study participants were presented with the medicalized term for these recently medicalized conditions, they were perceived to be more severe, more likely to be a disease and more likely to be rare, compared to the same disorder presented with its synonymous lay label.

"A simple switch in terminology can result in a real bias in perception," says Meredith Young, one of the study's lead authors and a graduate student in the Department of Psychology, Neuroscience & Behaviour at McMaster University. "These findings have implications for many areas, including medical communication with the public, corporate advertising and public policy."

Participants in the study were given a survey that included 16 disorders, eight of which were chosen due to the increased popular use of a medical label within the last 10 years (eg. erectile dysfunction versus impotence). The remaining eight were established medical disorders with both lay and medical terminology in popular use for more than 10 years (eg. hypertension versus high blood pressure).

"A lot of people have become critical of what is sometimes called 'disease-mongering' - or defining more and more conditions as diseases when they were previously just in the range of normal health, and a change in language certainly seems to accompany this," says Karin Humphreys, one of the study's authors and assistant professor in the Department of Psychology, Neuroscience & Behaviour. "We don't mean to dismiss any of the recently medicalized conditions we tested as trivial. Rather, because public understanding of these conditions is still in flux, they are an excellent place to examine how different terminology impacts this understanding."

The pattern of results has implications for the patient, researchers found. If a patient is informed that she has gastro esophageal reflux disease, for example, rather than chronic heartburn, she might think she is more ill. An important implication is that patient's understanding of the condition heavily influences how she goes about taking care of her own health.

For established medical conditions, researchers found that it did not make a difference in perception if a lay term was used or if subjects were presented with the medicalized language.

"We can see that there are a number of conditions where the medicalese term has, over the past ten years or so, been really rising in how often it is used, compared to the lay term for the same thing," says Humphreys. "This is particularly important when you have lots of conditions that have recently become medicalized, some of them possibly through the influence of pharmaceutical companies, who want to make you think that you have a disease that will need to be treated with a drug."

Source: McMaster University