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Adventitia

“Non-tuberculous mycobacteria”

I have been concerned for many years with some logical difficulties in discourse about mycobacterial diseases¹ and have concluded that some, at least, of this continued confusion arises from the adoption in the current nomenclature of mycobacteria of the specific name *tuberculosis* for the species most commonly associated with tuberculosis in the human subject. In colloquial discourse this organism has always been called the human tubercle bacillus with clarity and propriety, and it is regrettable that in the formal terminology of the mycobacteria this was not translated into Latin as *Mycobacterium hominis*. The increasing use of such absurd terms as “non-tuberculous mycobacteria” impels me to return to this theme.

We must surely accept that “tuberculosis” currently refers to a disease, in man or other animals, characterised by granulomatous changes caused by mycobacteria, and must not confuse this disease with its own cause. A diagnosis of tuberculosis places the patient in a category with defining characteristics in two fields – morbid anatomy and aetiology. A complete diagnostic statement would include identification of the causal mycobacterium. When a diagnosis of tuberculosis (unspecified) is made in man, it is an acceptable convention that the causal organism is thought, or has been shown, to be the human tubercle bacillus. In the days when disease caused by *Mycobacterium bovis* was important in man we referred to it as bovine tuberculosis, implying with perfect clarity disease caused by the species of mycobacterium most commonly causing disease in cattle. The adoption of the name *hominis* for the species most prevalent in the human race would have been logical and convenient, and would not have implied that only the disease caused by this species is properly called tuberculosis – leaving in limbo granulomatous dis-

eases caused in man by other species of mycobacteria – and raising interesting logical questions about the nomenclature of granulomatous diseases caused by various species of mycobacteria in other animals.

Since tuberculosis is a compound diagnostic category with morbid anatomical and aetiological defining characteristics, the argument that epidemiological considerations justified the specific name *tuberculosis* for the mycobacterium most important in man was always weak since the aetiological term in the diagnostic label is evidently the one most relevant to epidemiology. Indeed, it was always recognised that the epidemiology of the disease caused in man by *M bovis* and uncontroversially called tuberculosis was epidemiologically distinct. I see no reason why it should not be proper to speak of tuberculosis caused by any species of mycobacterium. We may properly refer to non-tuberculous mycobacterial disease if we encounter one of the rare cases of acute mycobacteriosis causing only necrotic and non-granulomatous changes; but I see no logical justification for the ghastly term “non-tuberculous mycobacteria” which seems to imply mycobacteria that do not cause tubercloid granulomatous changes. Presumably the excuse for this clumsy usage is that it is to be understood as referring to mycobacteria other than *M tuberculosis*. We should always be prepared to use a few extra words to express our meaning clearly and logically. If the human tubercle bacillus had been called *M hominis* we could refer to what I think (but am sometimes left uncertain) is intended by “non-tuberculous mycobacteria” as “mycobacteria other than *M hominis*” without unwanted implications.

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