To the Editor—The current Chinese term for dementia, “痴呆症”, is unfortunate in that “痴” means madness and “呆” means idiocy. Patients and caregivers often find it difficult to accept this diagnosis and therefore delay medical consultation. A change in the current Chinese terminology which removes stigmatisation and reflects current conceptual changes on cognitive impairment is clearly needed.

We, the 10 medical professional bodies in Hong Kong (Box), have deliberated on the possible new term and propose that “認知障礙症” be used to replace the old term “痴呆症”.

In doing so, we have adhered to the principles that the new terminology should be medically correct, reduce the risk of stigmatisation and be congruent with the likely Diagnostic and Statistical Manual of Mental Disorders (5th ed) [DSM-5] nomenclature. In dealing with the concept of “major (neuro)cognitive disorders” we felt that because of linguistic difference, “嚴重” may not be suitable as an equivalent term for “major”. Furthermore, “major” conveys a sense that the disorder is of importance which does not necessarily equate to severity. We therefore propose that the Chinese word “症” be used to signify the disorder to be of importance, whilst the term “認知障礙” be used for “mild cognitive impairment”.

Whilst new, we are aware that the terms “認知障礙症” and “認知障礙” are less than perfect. With usage over time, further refinements will no doubt emerge. The task force on the classification of neurocognitive disorders in DSM-5 has been at work since 2008 and vigorous discussions on the proposed terms are still ongoing.1,2 A fuller report on our deliberations is being prepared. We welcome further suggestions and comments as well as continuous feedback, as and when these new terms are used.

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References