When Right Is Redundant

To the Editor:

Clinicians frequently see the “right middle lobe” referred to in radiology reports, textbooks, and medical journals. Yet, there is no “left” middle lobe to distinguish it from, save a rare patient with Kartagener syndrome. We do not refer to the lingula as the “left” lingula. “Right” adds nothing to our understanding of the anatomic position of the lobe. So “right” is redundant when talking about the middle lobe. Yet, PubMed has 5,266 right middle lobe references, and a Google Scholars search found 22,900 publications used the phrase in the past 161 years. That is the equivalent of the length of two and one-half football fields worth of wasted words in just a Google search, nevermind those found in radiology reports, textbooks, or Index Medicus references (in Calibri font size 12, “right” = 1 cm × 22,900 search results = 228.99 m).

When was the term first used? Before there was radiology, there were anatomy textbooks and medical journals. No Gray’s Anatomy textbook from 1858 through the 1980 edition uses the term “right middle lobe” except the 1966 edition.¹ The first medical journal article found online using the term “right middle lobe” was from 1900.² The term has even infiltrated the Internet medical service UpToDate.

As a clinical entity the “middle lobe syndrome” has fared slightly better, perhaps because the original 1948 medical journal article used the title “Middle Lobe Syndrome.”³ There are 11,278 “middle lobe syndrome,” but only 8,030 “right middle lobe syndrome,” references in a Google search.

It is time that we recognize this waste of printers’ ink and Internet electrons, as well as our time, and, in the spirit of Twitter, become more concise. Sometimes “right” is wrong.

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