
CORRESPONDENCE

Word Order: Oriental or Occidental?

To the Editor:

The constant confusion in the way the Chinese write their names^{1,2} is well exemplified in the excellent article "Clinical Analysis of 15,089 Operations on the Heart and Great Vessels: Results from the People's Republic of China" by Dr. Chih Pan, published recently in the *Texas Heart Institute Journal* (1989;16:37-43). The Chinese always put their surnames first, followed by their first and then their middle names, as in the telephone directory: e.g., Mao Tse Tung. But this often creates a problem for Westerners; not infrequently Mao Tse Tung has been referred to in the press or other public media as Mr. Tung.¹ To avoid this confusion, the Chinese in recent years have begun to use hyphenation to distinguish the first and middle names: e.g., Mao Tse-tung. However, this system does not always solve the problem; now Mao Tse-tung might be addressed as Mr. Tse-tung.²

Dr. Pan admirably chose instead to adopt international standards by writing his name in a Western fashion, i.e., Chih Pan, on the title page. Unfortunately, in the address for reprints at the bottom of the page, he reverted to Chinese word order and, to compound the confusion, used a hyphen between his last name and first name, i.e., Pan-Chih. I suspect that Dr. Pan did this in order not to confuse the Chinese postal workers, who are still

used to the Chinese way of writing names. But I'll bet that your readers will now be more confused than ever in trying to figure out which is the last name, Pan or Chih, and which is the first name, Chih or Pan. Some might even wonder what happened to the rest of the name of "Pan-Chih, MD." One possible solution to this mess is to use initials: e.g., C. Pan.

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References

1. Cheng TO. The Chinese last name. *J Thorac Cardiovasc Surg* 1988;96:832.
2. Cheng TO. What's in a name—the Chinese name? *Angiology* 1989;40:324.

Editor's Note: *The Western word order of Dr. Pan's by-line was imposed by the Journal, but the author's form for writing his own name was retained for his mailing address, on the assumption that it would be more understandable to the Chinese postal service. The inconsistency, then, lies with the Journal and not with Dr. Pan, who consistently wrote his name "Pan-Chih."*

Quadricuspid Aortic Valve with Centrally Fenestrated Leaflets

To the Editor:

I read with interest the article by Coltharp, et al,¹ in which aortic regurgitation in a 20-year-old man is attributed to fenestrations in each cusp of a congenitally quadricuspid valve. A photograph of the surgically excised valve shows circular perforations in the central portions of the cusps, and the authors interpret these as congenital fenestrations.

It is recognized, however, that fenestrations of semilunar valves tend to involve the lunular areas of a cusp (that is, the 2 crescentic regions, on either side of the nodule of Arantius, between the free and closing edges) adjacent to the commissures, rather than the central portions.^{2,3} Furthermore, the fenestrations occur with increasing age, are most

commonly observed in valves of elderly persons, and are considered to represent acquired rather than congenital lesions.^{2,5} Therefore, it seems unlikely that congenital fenestrations were responsible for the cusp defects reported by Coltharp and colleagues.

Healed infective endocarditis, on the other hand, may be the most probable explanation for the gross observations in this case. Small mounds of thickened tissue bordering each perforation, visible in the photograph of the excised valve, support this interpretation. The location of each defect in a similar position on each cusp is a feature of so-called "kissing" lesions, wherein infection on 1 cusp is transferred to an adjacent cusp along points of contact between the 2 during ventricular diastole.

The fact that no history of previous endocarditis was recorded does not necessarily exclude this interpretation. In our own experience, a clinical