Multiple Endocrine Neoplasia Type 2 Syndromes: Nomenclature Recommendations from the Workshop Organizing Committee

Robert F. Gagel
Charles E. Jackson
Bruce A. J. Ponder
Friedhelm Raue
Nancy E. Simpson

See next page for additional authors

Follow this and additional works at: https://scholarlycommons.henryford.com/hfhmedjournal

Part of the Life Sciences Commons, Medical Specialties Commons, and the Public Health Commons

Recommended Citation

This Article is brought to you for free and open access by Henry Ford Health System Scholarly Commons. It has been accepted for inclusion in Henry Ford Hospital Medical Journal by an authorized editor of Henry Ford Health System Scholarly Commons.
Multiple Endocrine Neoplasia Type 2 Syndromes: Nomenclature
Recommendations from the Workshop Organizing Committee

Authors
Robert F. Gagel, Charles E. Jackson, Bruce A. J. Ponder, Friedhelm Raue, Nancy E. Simpson, and Reinhard Ziegler

This article is available in Henry Ford Hospital Medical Journal: https://scholarlycommons.henryford.com/hfhmedjournal/vol37/iss3/3
For this issue of the Journal and as a recommendation to other authors and journals for uniformity of preferred nomenclature, the following suggestions were made:

MEN 2 The multiple endocrine neoplasia type 2 syndromes (not MEA, MEN-II, MEN-2, or M.E.N. 2).

MEN 2A The MEN 2 syndrome without the mucosal neuroma phenotype (not MEN 2a).

MEN 2B The MEN 2 syndrome with the mucosal neuroma phenotype (not MEN 2b). This has also been referred to as MEN 3.

MEN2A The designation of the mutated gene causing MEN 2A. As recommended by the 1989 Human Gene Mapping conference (1), gene designations are no longer italicized or underlined.

MEN2B The designation of the mutated gene causing MEN 2B.

MTC Medullary thyroid cancer or carcinoma, to be used for consistency rather than MCT. The two types of MTC are hereditary and nonhereditary.

Reference