

Letters to the Editor

History of Blood Group Nomenclature

Believe it or not, but forty years ago group O was called group AB. This is demonstrated in Tab. 1, taken from Feinblatt's book (1926). The explanation is that the capital letters, A and B, were used then to designate the isoagglutinins while the small letters, a and b, were used for the agglutinogens.

History repeats itself. Just as our generation of immunohematologists continues to struggle, unnecessarily, with Rh-Hr nomenclature, so did the former generation of blood groupers struggle with A-B-O terminology.

In 1928, Kennedy tried to resolve the problem by means of a questionnaire which showed the Moss numbers to be most popular. However, scientific problems are not resolved by voting, and two years later the Health Committee of the League of Nations (1930) recommended the adoption of Landsteiner's A-B-O terminology as the sole method of designating the blood groups. This recommendation was ignored by workers in the field and by editors of scientific journals, even though the other terminologies proved to be incapable of coping with complexities of serology such as the subgroups of A, or with the genetics of the blood groups. It was not until ten years later that suddenly, as if by tacit mutual consent, all terminologies except the one presently used disappeared from use. Perhaps the exigencies of World War II, which could brook no nonsense, was responsible. At any rate, young workers entering the field at the present time are taught and use only Landsteiner's A-B-O nomenclature, so that earlier published articles which use either the Moss or Jansky's numbers are largely unintelligible to them.

Similarly, about 15 years ago, at a meeting of the International Society of Hematology, in Buffalo, a motion was made to adopt the C-D-E notations as the international nomenclature for the Rh-Hr types. When I pointed out that this was a problem to be settled in the laboratory and not by voting, the motion was tabled, never to be brought up again at any subsequent meeting. Then, in 1956 and 1957, after consultation with workers in the field, and based on an analysis of the available facts, the Committee on Medicolegal Problems of the American Medical Association recommended that Wiener's original Rh-Hr nomenclature be used exclusively for designating the Rh-Hr types (Wiener *et al.*, 1956, 1957). As in the case of the recommendation of the League of Nations for the A-B-O groups, the A. M. A. recommendation regarding Rh-Hr nomenclature has largely been disregarded by workers in the field and by editors of scientific journals. In view of the greater complexity of the Rh-Hr types, the resulting confusion has been even greater than for the A-B-O groups. History indeed does repeat itself. Ten years have passed since the recommendation

was made by the A. M. A. Committee. In the interval, those using other terminologies have failed to take advantage of their opportunity to publish any evidence in defense of their position. This is understandable, since nothing scientific exists which support their position. No doubt as in the case of the A-B-O groups, now, as if by

Tab. 1. Designations of the four major blood groups according to three classifications*

| Jansky | Moss | Isoagglutinin-agglutigen content |
|--------|------|----------------------------------|
| I | IV | AB |
| II | II | aB |
| III | III | Ab |
| IV | I | ab |

* This table, including its title, is reproduced exactly as it appeared in H. M. Feinblatt's *Transfusion of Blood*, p. 27. The MacMillan Co., New York, 1926.

tacit mutual consent, all terminologies except the Wiener Rh-Hr nomenclature will be discarded. Workers in the field apparently sense this, because most of them already use so-called shorthand notations, which are merely trivial modifications of the original Rh-Hr terminology.

The purpose of this communication is to call the attention of readers of this journal to these facts. Those who work in the field should bear in mind that the next generation of workers will almost surely use the approved Rh-Hr nomenclature exclusively. The sooner that other terminologies are completely discarded, therefore, the better. Those who persist in using anything but the correct Rh-Hr nomenclature will find that publications using terminologies other than the Rh-Hr nomenclature approved by the A. M. A. Committee will be largely unintelligible to future generations of workers who may have occasion to consult articles now being published.

History does repeat itself.

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