

To the Editor: I enjoyed your editorial in the recent edition of *The Journal of the American Board of Family Practice*. Two points, however, disturbed me.

First, your instruction on the use of plural pronoun forms to avoid sexism in writing is incorrect. To use "each" and "their" in the same reference is preposterous and belongs with other absurdities, such as committeeperson.

Second, I would appreciate your explaining the use of "setting" in the final paragraph. Are you referring to type-setting? Why not sitting?

The other distinctions you make are very useful and we can only hope that future contributors will use your suggestions to make our reading easier.

Stephen E. Schubert, M.D.
Mendot, IL

To the Editor: I am writing to you about my reactions to your article about the secrets of copyediting. As an educated, fluent, literate, native speaker of American English, I disagree with certain of your recommendations.

To whitt [*sic*]: (taken in the order in which they appeared)

—Recommending the use of they/them/their as a nongender specific where the singular is clearly called for.

Your recommended sentence: "Each patient was taught to monitor their glucose levels" His/her would have been better in this sentence.

—Delivery in the obstetrical sense is used in its ancient, "inverted" meaning: to rescue, to save from, rather than in its current meaning of transporting or giving to.

A physician who delivers a woman of her child (the correct usage) is rescuing her from her "travail." I prefer the more modern understanding of the role of woman and physician illustrated by the construction: "The woman delivered a 6-pound infant into the waiting hands of her obstetrician." Better yet, avoid the whole controversy and say, "The woman birthed a 6-pound"

—Developed/Develop

I prefer this as a transitive verb because it scans better so.

Thank you for your article. In spite of my quibbles, it was nicely written, informative, and a pleasure to me to see specifics of good writing

published in a physician's journal rather than just admonitions to "write better."

Vicken Y. Totten, M.D.
Modesto, CA

The above letters were referred to the authors of the article in question, who offer the following reply:

To Our Readers: Thank you for your letters about our editorial on copyediting. There is room for disagreement. We were describing the conventions we use, and giving our sources, for the benefit of potential authors, not to set ourselves as arbiters of language in a more general sense.

The use of a plural relative pronoun with a singular noun to avoid "sexism" in writing generated the most protests. Our authority for that preference is *Handbook of Nonsexist Writing for Writers, Editors, and Speakers* (p 38-40) by Casey Miller and Kate Swift. You will agree, we hope, that avoiding sexism in writing is a worthy objective.

You are correct that "delivery" has a number of meanings other than that used in obstetrics; however, the obstetrical use of this word has its own conventions, as a verb describing the action of one who assists at childbirth. You may prefer to use it to describe what the parturient woman does, i.e., to hand over, convey, or surrender the infant. Our image of this usage is colored by experiences with UPS and Federal Express. Surely the role of one who assists at childbirth is more active than "waiting hands" suggests. Finally, we can find no support for using "birth" as a verb.

We have no argument with your preference for "develop" as a transitive verb. Our Executive Editor called this to our attention in the first draft of our manuscript, and we softened our recommendations for the intransitive verb status by adding, "when describing a patient's condition."

You caught us *setting* when we were actually sitting, tired after *setting* that editorial in type, *setting* our minds against ungrammatical construction, and our teeth against the grating sounds of jargon. We were not resting in chairs, but we completed as much editorial work as we could do at one time, or as much as our eagle-eyed, literate readers could stand at one sitting.

We appreciate your comments.

G. Gayle Stephens, M.D.
Birmingham, AL
Ann Stockham, M.A.
Lexington, KY