

IC!

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"The difference between the almost right word and the right word is really a large matter. 'tis the difference between the lightning bug and the lightning." –Mark Twain

Many terms in scientific communication end in the adjectival suffix "-ic." Or is it "-ical"? Yes and no. And does it matter?

Both *-ic* and *-ical* can be appropriate suffixes for adjectives. According to the current edition of the *AMA Manual of Style*, often the "-ic" and "-ical" forms have the same meaning, for example, *anatomic* and *anatomical*, *neurologic* and *neurological*, and *physiologic* and *physiological*. However, there are times when the suffix may change the meaning of the word and it is important to use the correct form. Once the suffix use is sorted, it is also preferable to be consistent throughout a document.¹

AMA style guidance on this topic has evolved over the years. The 10th edition (as well as the 9th) directed authors and editors to check medical dictionaries as well as *Webster's* for guidance on which suffix to choose but noted a preference for the shorter term.²

Other style guides offer identical or similar guidance. The current edition of *Scientific Style and Format* advises consistent use of the chosen suffix and also notes that some variants are not idiomatic, for example, "'chemic' is not accepted as a shorter form of 'chemical.'"³

Webster's includes a host of individual entries from *anatomical* to *zoological*, including not only definitions but also preferred usage (e.g., *anatomic* and *zoologic* are listed as variants). In the entry for *-ical*, the definition includes this note: "sometimes differing from *-ic* in that adjectives formed with *-ical* have a wider or more transferred semantic range than corresponding adjectives in *-ic*."⁴ In other words, *-ical* terms tend to be used more often in different ways, and context helps guide meaning and word usage.

The most comprehensive guidance on "-ic" vs. "-ical" appears in *Fowler's*.⁵ An entry on *-ic(al)* has 6 points of consideration. In addition to those raised above, *Fowler's* notes that some terms only ever occur with *-ic* endings,

such as *dramatic*, *patriotic*, and *microscopic*. And some only ever occur with *-ical* endings, such as *chemical*, *radical*,

Box. Important distinctions for *-ic* vs *-ical*

biologic, biological

Biologic is typically used in the medical literature as a noun, a product

Biological refers to anything related to biology or living things

classic, classical

Classic means important or authoritative; in medicine it can mean typical (e.g., the classic symptoms of stroke)

Classical is used to refer to traditional values in literature, music, etc., or to the definitive form (e.g., classical architecture)

economic, economical

Economic means involving finances, supply and demand, or relating to an economy

Economical means thrifty, efficient, and not wasteful

empiric, empirical

Empiric is a noun, someone who relies on practical experience

Empirical means based on observation or experience

historic, historical

Historic refers to a moment in history, especially important events

Historical means anything that is related to or occurred in history

periodic, periodical

Periodic means occurring at regular intervals

Periodical can also mean published at fixed intervals but typically is used as a noun

physic, physical

Physic is the practice of treating disease, sometimes used to refer to the medical profession

Physical refers to the body or natural science

politic, political

Politic refers to a clever or diplomatic manner of managing or dealing with someone or some situation

Political relates to government, policy, or a political system

Compiled from *Webster's*, *AMA Manual of Style*, and *Medical Usage and Abuse*.

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and *practical*. The guidance goes on to note that of those that can take either suffix, there appears to be a preference in American English for *-ic* and in British English for *-ical*. The distribution, however, is noted to be “erratic” and sometimes seems to depend on “idiomatic or rhythmical considerations” in context.

One final resource of note is Edie Schwager’s *Medical English Usage and Abusage*. Schwager refers to the “al” in this context as a “vestigial tail,” noting that in many cases nothing is lost if the tail is removed, and nothing is gained if it’s added. For that reason, she omits the “al” when it’s an option.⁶ Schwager provides several examples and closes the entry recommending use of the shorter term. “And thus ends the tale.”

Fascinating, you might think (or maybe not). But what should a writer or editor do when faced with a term that could end in *-ic* or *-ical*? First, consult a trusted reference, such as *Webster’s* or *Dorland’s* (for medical terms). Then, if no distinction in meaning appears based on *-ic* vs. *-ical* forms, decide which you want to use and stick with it (unless a stylesheet dictates otherwise). Note that *Webster’s* often lists a preference even without a difference in meaning.

The Box includes some of the more common terms for which the suffix *does* matter; in some cases the difference determines the part of speech (adjective or noun). As always, the editor’s job is to ensure that the final content is authentic, logical, and of course, grammatical.

References and Links

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