International Consensus Dictionary of Balneology and Thermal Medicine

A proposed FEMTEC international scientific initiative

Towards a shared scientific language across countries, disciplines and clinical traditions

Project initiators: Dr. Monica Surdu | Dr. Traian Surdu

Concept proposal • FEMTEC coordination proposed • WHO collaboration to be explored

Why is this initiative needed?

Terminological heterogeneity limits international comparability.

Different traditions

The same term can describe different practices, resources or disciplines across countries.

Scientific consequences

Inconsistent definitions complicate systematic reviews, clinical trials and guideline development.

Practical consequences

Differences affect education, regulation, professional communication and cross-border collaboration.

Goal: harmonization without erasing justified national and regulatory differences.

Examples of terminology requiring consensus

Illustrative areas of ambiguity; final definitions will be developed by experts.

Balneology / thermal medicine	Scope of the discipline and relationship with medical practice
Balneotherapy / hydrotherapy	Boundaries between natural-resource therapy and water-based procedures
Crenotherapy / spa therapy	Clinical meaning versus broader wellness usage
Peloid / therapeutic mud	Classification, maturation, characterization and therapeutic use
Mineral medicinal water	Scientific criteria versus country-specific legal definitions

Vision and principal objectives

An evidence-informed, consensus-based, multilingual reference.

Scientific foundation

Collect national terminology; compare definitions; identify overlaps and conflicts; develop precise reference definitions.

International usability

Validate definitions by international consensus; document national variants; review translations; publish an accessible digital dictionary.

The dictionary will be a scientific reference—not an automatic replacement for national legislation.

What will the dictionary cover?

Six complementary thematic domains.

01 Core concepts

Balneology, thermal medicine, medical hydrology, climatotherapy

02 Natural resources

Mineral waters, thermal waters, therapeutic gases, peloids

03 Characterization

Physicochemical, biological and quality-related terminology

04 Interventions

Baths, drinking cures, inhalations, peloid applications

05 Clinical practice

Indications, contraindications, outcomes, rehabilitation

06 Institutions

Facilities, education, professional and regulatory terms

Institutional model: clear roles

All institutional roles remain proposals until formally accepted.

FEMTEC

Proposed coordinating organization: institutional mandate, invitations, oversight and international dissemination.

Project initiators

Dr. Monica Surdu and Dr. Traian Surdu: proposed scientific co-coordination and methodological development.

WHO

Potential technical dialogue or collaboration, only following formal consultation and institutional agreement.

No WHO endorsement, participation or approval is implied at this stage.

How will the working group be constituted?

Mixed model: national representation + merit-based scientific expertise.

National representatives

Each participating country is invited to nominate one representative through a relevant scientific society or recognized academic institution.

Additional scientific experts

Selected transparently for expertise, publications, interdisciplinary coverage and methodological competence.

Balanced geographical participation and scientific quality are both mandatory design principles.

Governance and working structure

Proposed structure; composition to be confirmed through FEMTEC procedures.

FEMTEC

Institutional oversight

Steering Committee

7–9 members; project governance

Terminology

Definitions & concepts

Resources

Water, peloids, gases

Clinical

Therapies & outcomes

Methods

Delphi & validation

International Expert Panel: approximately 40–60 participants in consensus assessment.

Selection, independence and voting safeguards

Transparent nomination and independent evaluation are essential.

Eligibility

Short CV; relevant scientific work; field expertise; conflict-of-interest declaration; institutional nomination where applicable.

Independence

Separate definition drafting from independent Delphi evaluation where feasible; document expert roles.

Fairness

Predefine consensus thresholds; balance country influence; report voting outcomes and unresolved disagreements.

Consensus methodology: six stages

A transparent, reproducible modified Delphi process.

1 Mapping

Collect existing national definitions

2 Comparison

Identify inconsistencies and overlaps

3 Drafting

Prepare evidence-informed entries

4 Delphi

Independent rounds of expert rating

5 Validation

Scientific review and translation

6 Publication

Release, dissemination and revision

What will a dictionary entry contain?

A structured record rather than a simple word translation.

Core entry

Preferred English term and definition

Synonyms and related concepts

Scientific and technical notes

Supporting references

International validation

National equivalents and variants

Multilingual reviewed translations

Level of expert consensus

Notes on unresolved or legal differences

Indicative 24-month implementation

Milestones will depend on participation, resources and project scope.

M1–3

Approval & governance

M4–7

Recruitment & mapping

M8–11

Draft definitions

M12–16

Delphi rounds

M17–20

Translation & review

M21–24

Publication & launch

Expected outputs and long-term value

A durable international reference with a clear updating mechanism.

Scientific outputs

Comparative terminology inventory; English reference definitions; published consensus statement.

Practical outputs

Multilingual digital dictionary; terminology for education, research and professional exchange.

Sustainability

Editorial governance; periodic updates; documented amendments and national variants.

Decision requested from FEMTEC

A staged approval process—not an immediate institutional or financial commitment.

Initial decisions

1. Consider and endorse development in principle
2. Mandate a small founding committee
3. Prepare Terms of Reference and nomination call
4. Invite international participation

Next-stage decisions

5. Approve governance and expert selection
6. Adopt the Delphi methodological protocol
7. Explore WHO institutional dialogue
8. Agree scope, resources and publication pathway

Proposed by Dr. Monica Surdu and Dr. Traian Surdu