They removed a mole when I was 17,” Claire said, pointing to her knee. “The scar had faded to white in the 50 years since.

Claire had come for a body check. Her special concerns were the seborrheic keratoses on her torso. “Do you think,” she asked, eying them suspiciously, “these spots coming out are from the mole they took off my knee?”

Clinical work involves a bit of ethnography. Understanding other cultures with alien ideas can be hard; it’s even harder when the people from the other culture look just like you.

Claire is a retired teacher from a Boston suburb. You would never guess from her dress and demeanor that her concept of the body has little in common with the one they teach in medical school. The key to understanding Claire lies in the homely word “roots.”

Our patients apply it to the common skin growths we treat every day, as in, “Don’t these warts have roots, Doctor?”

That sort of question might not matter to us, perhaps, but to someone in Claire’s family—"the Mole’s Revenge," she said as he pointed to a dermal nevus on his hip, "that a mole is like an invertebrate golf tee. Most of it is deep underneath.

It would be a mistake to think that such people are uniquely imaginative or de-