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ON THE ISSUE OF TRANSLATING ENGLISH AND CHINESE MEDICAL DISCOURSE

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Abstract: The novelty of the research is determined by the translation techniques and devices analysis in the paradigm of the communicative and functional approach to translation. The object of the research is English and Chinese medical discourse in the aspect of its translation. The subject of the research is represented by the arsenal of translation techniques and devices applied. The research was performed on the basis of the recommendations on in vitro COVID-19 testing both in English and Chinese. The objective of the research was formulated as the analysis of the English and Chinese medical texts with the focus on the terms. As far as the distinctive lexical linguistic features are concerned, the experimental analysis has revealed the predominance of terms over general vocabulary units in the English medical texts. Moreover, the translator's background knowledge comprises linguistic competence in the various fields of knowledge, such as IT, physics, statistics and others. Another challenge of medical translation is the high content of international lexis both in diachrony and synchrony. Among the grammatical peculiarities of the Chinese medical discourse there are various grammatical constructions, types of complex and compound sentences, parenthetical words and expressions, aimed at foregrounding the most relevant information. Grammatical constructions, coined according to the requirements of the written language wenyan, stereotypical word combinations, 3d person narration as well as the absence of personal addresses contribute to the similarity with scientific discourse.

Keywords: medical discourse, Chinese, English, terms, techniques, devices, linguistic features.

1. Introduction

1.1. Problem-setting

Medicine is nowadays one of the most popular spheres of human activity. For the flourishing and more intensive development of this field scholars from all over the world unite their efforts. Consequently, the application of medical discourse is becoming more extensive with the focus on the medical official paper translation, in particular, the adequate rendering of the WHO's recommendations, statutes and protocols on prevention and treatment of COVID-19. Such activity presupposes the combination of various approaches to translation, as medical translation in this case in interrelated with judicial discourse translation.

So, the article is dedicated to the issue of the English and Chinese medical discourse in the aspect of its translation. The theoretical foundation was formed on the works by Allright J. [1], Karasyk V.I. [2], Mayboroda S.V. [3], Makusheva Zh. N. [4], Mertova N. [5], Wilce J.M.[17], and others. However, the issue of adequate rendering of medical papers from English and Chinese still remains urgent and not fully disclosed.

The novelty of the research is determined by the translation techniques and devices analysis in the paradigm of the communicative and functional approach to translation. The object of the research is the medical discourse in English and Chinese in the aspect of its translation. The subject of the research is represented by the arsenal of translation techniques and devices applied.

The research was performed on the basis of the recommendations on in vitro COVID-19 testing both in English and Chinese. The objective of the research was formulated as the analysis of English and Chinese medical texts with the distinction of the most efficient translation techniques and devices.

The following tasks were outlined to achieve the objective:

• to characterize medical discourse and describe its distinctive features;

• to perform an overall linguistic analysis of medical discourse in English and Chinese on the different linguistic levels;

• to outline the key techniques and devices of Ukrainian translation.

The methodological basis was formed by the descriptive-analytical method, comparative method, methods of quantitative, contextual, semantic and interpretative analysis, as well as the method of vocabulary definitions analysis.

The theoretical value of the work lies in the contribution to the medical translation theory, whereas medical official papers rendering is studied both with regards to the formal and semantic correspondence of the target texts to the source texts, interpreted as the adequacy and faithfulness of translation performed.

The practical value is seen in the possibility the research application in the aspect of the basic universal translation recommendations formulation. Moreover, the findings may be employed in medical discourse translators and interpreters training.

2. Discussion

2.1. Medical discourse overview

There exists certain ambiguity and there are a lot of debates on the issue of the specificity of medical discourse translation. In the view of its linguistic interpretation medical discourse comprises all the papers and texts on medical topics: from scientific articles to oral treatment protocols explanation. According to M. Foucault the most relevant in interpreting medical discourse is the ability to comprehend it [13]. The concept «medical discourse» is used in the narrowest sense to denote mental discourse which is understood as the communication during the mental therapy session.

As long as medical discourse is treated as socially oriented institutional discourse according to V.I. Karasyk [2], it is determined by the specificity of the communicative act, the higher degree of persuasion and heterogeneous structure. This results in the interpenetration and synergy of the terminology and formats of the technical and medical discourse. As for the higher degree of persuasion it is foregrounded by such communicative elements as recommendations, orders and instructions. The three dominant communicative strategies of medical discourse are correspondingly: the diagnostic one, the curative one and the recommendatory one.

2.2. English medical texts analysis

As far as the distinctive lexical linguistic features are concerned, the experimental analysis has revealed the predominance of terms over general vocabulary units in the English medical texts. Moreover, the translator's background knowledge comprises linguistic competence in the various fields of knowledge, such as IT, physics, statistics and others. Another challenge of medical translation is the high content of international lexis both in diachrony and synchrony. In the diachronic aspect this is especially true for the synonymous terms of Greek and Latin origin: *«bacteria», «cholera», «neoplasm», «tumor», «tonsilitis», «appendicitis», «insomnia», «pneumonia», «cordial», «cardio»* etc. At the same time some international units have synonyms of native British origin: *«insomnia»–«sleeplessness», «nausea»– «sickness», «pneumonia» – «lung unflammation»*. In synchrony there are also the following international units of French origin: *«jaundice» – «yellow fever» «malady»– «disease»; «fatigue» – «stamina».*

According to the findings of the experimental analysis about 30 % of English medical terms are of French origin (e.g.: *«bowel», «disease», «malaise»*), about 29 % are of Latin origin (e.g.: *«virus», «femur», «puncture», «insulin»*) and about 6% of Greek origin (e.g.: *«trauma», «diabetes», «myopia»*).

Another challenge for English-Ukrainian medical translation are the so-called pseudo-internationalisms or the «the translator's false friends, represented by

internal and external homonyms and paronyms. The most recurrent sources of such are the products of the partial semantic assimilation as a result of borrowing combined with the narrowing of the sematic scope (concretization), as well as etymological contiguity without any semantic relationship. In English and Ukrainian medical terminology there exist pseudointernationalisms with quite different meaning, namely *«angina tonsillitis»* which comes to denote the inflammation of the tonsils and *«angina pectoris»* which deals with heart problems.

Still another distinctive feature of English medical texts is the predominance of shortenings and abbreviations. Not all abbreviations preserve their initial form if translated into Ukrainian, quite many of them are restored as extended word combinations.

Thus, the abbreviation *«BPD»* is employed in psychiatry in two different meanings: *«bipolar personality disorder»* and *«borderline personality disorder»*. Such homonymy can be only revealed by the context which helps to avoid ambiguity.

English medical texts are structurally varied according to the genre. The translation technique employed is the tactic of the correct information rendering as well as the tactic of formal and structural features preservation.

It is worth pointing out that drug prescriptions and treatment protocols are distinguished due to the rigid structure and strict requirements as for the lexis and syntax. Among the factors affecting the peculiarities of medical texts there are differences in the authorities and documentation. As a rule, the translators employ in this situation the tactic of cultural and pragmatic adaptation.

On the whole, it may be concluded that the most adequate and apt strategy of translating English texts into Ukrainian is the strategy of the communicatively relevant translation. Among the tactics the most widely used are the tactic of the correct information presentation, the tactic of the formal and structural features preservation, the tactic of cultural and pragmatic adaptation and the tactic of relevant information rendering. The above-mentioned tactics are realized via such translation operations as addition, omission, transposition, grammatical and functional replacement, generalization and concretization, transcoding and semantic development. The least recurrent transformation is antonymous translation.

2.3. Chinese medical texts analysis

Medical terminology (医学术语) is a complex of names, words and word combinations, employed chiefly to denote more specifically scientific notions connected with medicine.

There are two dominant term types in Chinese medical discourse – common terms and professional terms. Common terms comprise a certain group or category of notions employed in the narrower sense. Professional terms are

characteristic of certain specialization in a scientific or technical field of knowledge. Chinese medical terms are coined in the following ways:

a) addition;

b) abbreviation;

c) shortening;

d) affixation;

e) borrowing.

The most widely distributed group of terms is represented by the common nouns which have evolved into the terms. For instance, «紧张», which was used in the sense of *«tension»*, came to denote *«tonus»* in Chinese medical terminology.

Qualitative adjectives are mainly used as the base in such complex terms, as «*扁平* \mathcal{E} » – «*flat feet*», «*生理状态*» – «*physiological state*», «*生理适应*» – «*physiological adaptation*».

Verbal terms are employed to denote specific actions or processes. For instance, « *突变» – «mutate», «regenerate», «麻醉» – «anaesthetize»*.

Among the grammatical peculiarities of the Chinese medical discourse there are various grammatical constructions, types of complex and compound sentences, parenthetical words and expressions, aimed at foregrounding the most relevant information. Grammatical constructions, coined according to the requirements of the written language wenyan, stereotypical word combinations, 3d person narration as well as the absence of personal addresses contribute to the similarity with scientific discourse.

The composition of bases is performed by combining lexical complexes by different grammatical ways of cohesion. There exist five ways of grammatical links between lexical components:

- attributive (the first component modifies the second, the relationship is hyper-hyponymic);

- copulative (the components are equal);

- verbal-objective (the first constituent indicates the action directed at the second nominative part);

- verbal-resultative (the second constituent part nominates the result of the action expressed by the first constituent part);

- subject-predicative (the first constituent indicates the subject, the second - its action or state).

These ideas may be illustrated by the following examples from Chinese medical texts:

1) the combination of two substantive components by the attributive connection type: *«Adam's apple» –«喉结»*, where *«喉» – «larynx» + «结» – «knot»; «glycoprotein» – «糖蛋白»*, where *«糖» – «sugar» + «蛋白» – «protein»; «kidney deficiency» – «肾亏»*, where *«肾» – «kidney» + «亏» – «drawback», «肺疝» –*

«lung hernia» = «lung» + «hernia», «化学疗法» «chemical therapy» = «chemistry»
+ «treatment»;

2) the blending of two substantive components by copulative connection: *«carcinogen» – «致癌因子»,* where *«致癌» – «carcinogen» + «因子» – «multiplier», «火眼» «acute conjunctivitis» = «flame» + «eye»;*

3) the combination of two adjective components by copulative type: *«寒热» «fever»*, where *«寒» – «cold»*, *«热» – «hot»*;

4) the merging of the substantive and predicative components by the verbal and object type: *«blastomere» – «裂球»*, where *«裂» – «to tear» + «球» – «ball»; «wrinkle» – «皱纹»*, where *«皱» – «to wrinkle» + «纹» – «line»*;

5) the combination of the substantive and verbal components by the subject and predicative type: *«thrombosis» – «血栓形成» – where «血栓» – «thrombus» + «形成 » – «to form», «气喘» «asthma» = «air» + «to suffocate».*

There have appeared quite many English borrowings-medical terms in the abbreviated form recently. The main distinctive feature of terminological abbreviations is their brevity. Abbreviation is the way of term coinage consisting in the addition of the shortened forms of words.

For instance, 《脱氧核糖核酸》(«deoxyribonucleic acid») = 《脱氧核酸》(DNA); 《心动电流图》(«electrocardiogram») = 《心电图》(«EKG»); 《流行性感》(«influenza epidemics») = 《流感》(flu); 《超声回波描记术》(«ultrasound») = 《超声检查» («ultrasound»); 《获得性免疫系统缺损综合症》(«Acquired Immune Deficiency Syndrome») = 《艾滋病》(«AIDS»).

There are four groups of abbreviations in Chinese medical discourse:

1) English loan abbreviations without the graphical rearrangement with the addition of the hieroglyphical component. The English component is pronounced in accordance with the British Pronunciation Standard, and the Chinese component – according to the Chinese language pronunciation requirements. For instance, $\langle N \underline{X} \underline{X} \rangle = \langle gene N \rangle$, where $\langle \underline{X} \underline{X} \rangle = is \langle gene \rangle$; $\langle COVID-19 \rangle = in$ this abbreviation the letters are pronounced as in English while the figures are pronounced in Chinese;

2) English abbreviations as a full term. For instance, 《艾滋病》-《AIDS》 (《 艾滋àizī》) from English «AIDS»; «Acquired Immune Deficiency Syndrome» + «病» («disease»);

3) English abbreviation which preserved its initial form in Latin and was rendered by transposition while according to its pronunciation it's an initialism. For instance, *«ICU» («intensive care unit» – «重症监护病房») – «the intensive therapy ward»*;

4) numeral /Latin letters + hieroglyphical component. For instance, *«四趟磷酸化* », where *«四*» – is the sixth cyclical sign out of 20; *«甲型肝炎»* (shortly *«甲肝»*) –

«hepatitis A» («甲型» – «type A», where «甲» – the first cyclical sign, «肝炎» – «hepatitis»); «thiamine» (vitamin B1)» – «维生素B1»; «17–hydroxysteroid» –«17羟 类固醇»; «第二分裂中期» – «second metaphase»; «二头肌» – «bicpes brachii»; «三 焦» – «three body parts»; «三叉神经» – «trigeminal nerve», «品药» – «three types of medicines», where «三» – «three»; «罟» – «class»; «药» – «medicines».

The term coinage is possible by shortening. Words are mostly shortened to two or three syllables: *«cytoplasm» – «胞质»* from *«细胞质»*; *«osteosarcoma» – « " 骨肉瘤*》 from *«骨肉瘤源生长因子»*; *«EKG» – «electrocardiogram» – «心电图»* from *«心动电流图»*; *«radioactivity» – «放射性»* from *«放射性活»*; *«pneumonia»*, caused by the coronavirus (covid) – *«新冠»* from *«新型冠状病毒肺炎»*; *«flu» – «流感»* from *«流行性感冒»*; *«therapeutic effect» – «疗效»* from *«治疗效果»*.

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