

分类号	
UDC	
密 级	
学 号	1105020026

西安理工大学

# 硕士学位论文

中医名词术语英译的文化视角

——以《伤寒论》为例

于艳蓉

学 科 门 类：文 学

学 科 名 称：外国语言学及应用语言学

指 导 教 师：车明明 教授

申 请 日 期：2014 年3月



**The Translation of Traditional Chinese Medicine Terminologies  
from the Cultural Perspective**

**—— Taking *Shanghanlun* for Example**

by

Yu Yanrong

Under the Supervisor of Professor

Che Mingming

A Thesis Submitted to

the Graduate School of Xi'an University of Technology

in Partial Fulfillment of the Requirements

for the Degree of Master of Arts

Xi'an, China

2014



# 独创性声明

本人所提交的学位论文是在导师指导下进行的研究工作及取得的成果。尽我所知，除特别加以标注的地方外，论文中不包含其他人的研究成果。与我一同工作的同志对本文的研究工作和成果的任何贡献均已在论文中作了明确的说明并已致谢。

本论文及其相关资料若有不实之处，由本人承担一切相关责任。

论文作者签名：于艳蓉

2014年3月30日

# 学位论文使用授权

本人作为学位论文作者了解并愿意遵守学校有关保留、使用学位论文的规定，即：在导师指导下创作完成的学位论文的知识产权归西安理工大学所有，本人今后在使用或发表该论文涉及的研究内容时，会注明西安理工大学。西安理工大学拥有学位论文的如下使用权，包括：学校可以保存学位论文；可以采用影印、缩印或其他复制手段保存论文；可以查阅或借阅。本人授权西安理工大学对学位论文全部内容编入公开的数据库进行检索。本学位论文全部或部分内容的公布（包括刊登）授权西安理工大学研究生学院办理。

经过学校保密办公室确定密级的涉密学位论文，按照相关保密规定执行；需要进行技术保密的学位论文，按照《西安理工大学学位论文技术保密申请表》内容进行保密（附《西安理工大学学位论文技术保密申请表》）。

保密的学位论文在解密后，适用本授权。

论文作者签名：于艳蓉 导师签名：Guo

2014年3月30日



论文题目：中医名词术语英译的文化视角——以《伤寒论》为例

学科专业：外国语言学及应用语言学

研究生：于艳蓉

签名：于艳蓉

指导老师：车明明 教授

签名：车明明

## 摘要

中医有五千多年的悠久历史，它与京剧和国画并称中国的三大国粹。它体现了中华民族深厚的文化底蕴，不仅为中华儿女的健康保驾护航，也为中华文化的繁荣昌盛做出了不可磨灭的贡献。随着中国国际地位的提高和国内外专家学者对中医研究的热情不断增长，中医也越来越受到世界人民的青睐。中医英译不仅可以让世界人民更好地了解祖国光辉灿烂的传统文化，而且有利于进一步提升我国的国际声誉，因此中医英译也变得日趋重要。

但是，由于译者的文化背景、专业领域及所使用的翻译视角的不同，中医英译难以形成较为统一的原则及方法，而对中医名词术语的英译更是未能形成统一的标准，以致没有章法可循。本研究认为，中医名词术语中蕴含着丰富的文化信息，毫无疑问，从文化翻译理论着手，可以更好地指导中医名词术语英译。

本研究借鉴中医翻译前辈们的宝贵经验，从文化视角对《伤寒论》中中医名词术语英译的原则及方法进行剖析，以期提出可借鉴性的方法，从而为中西方不同文化之间能够更好地交流也为更好地传播祖国的文化贡献自己的微薄之力。

中医名词术语的英译是一项艰巨而漫长的任务，需要中医界和译界学者的热情参与及广大有志者的共同努力。相信在不久的将来，中医英译之路可以从“天堑”变“通途”。

**关键词：**文化；文化翻译；中医名词术语；伤寒论





**Title: THE TRANSLATION OF TRADITIONAL CHINESE MEDICINE  
(TCM) TERMINOLOGIES FROM THE CULTURE PERSPECTIVE ——  
TAKING *SHANGHANLUN* FOR EXAMPLE**

**Major: FOREIGN LANGUAGES AND APPLIED LINGUISTICS**

**Name: Yanrong YU**

**Signature: Yanrong Yu**

**Supervisor: Prof. Mingming CHE**

**Signature: Mingming Che**

**Abstract**

There is a long history of Traditional Chinese medicine (TCM), with more than 5,000 years, and it is one of three national essence of our country together with Peking Opera and traditional Chinese painting. Traditional Chinese medicine reflects the thick traditional Chinese cultural flavor. It has made indelible contributions not only to the health of Chinese people, but also to the prosperity of Chinese culture.

With the increasing improvement of Chinese international position and the rapid development of TCM both at home and abroad and “the enthusiasm for TCM”, Traditional Chinese medicine has been favored by an increasing number of people in the world. So the English translation of TCM is becoming more and more important.

However, due to the differences of the cultural background, fields of expertise and translation perspectives, it is difficult to form unified English translation principles and methods of traditional Chinese medicine, while the English translation of traditional Chinese medicine terminology presents the tendency of various versions.

This study holds that the cultural information in TCM terminologies is rich; therefore, there is no doubt that cultural translation theory can provide a better approach to the English translation of TCM terminologies.

This study will analyze the English translation principles and methods of traditional Chinese medicine terminology appearing in the Chinese classical work *Shanghanlun* from the cultural perspective on the base of the valuable experience of predecessors, hoping to make a humble contribution to promote the communication of different cultures between Chinese and

western countries and spared traditional Chinese culture better.

We believe that in the near future, the road of the English translation on TCM terminology will become smoother and smoother as long as experts, scholars and lovers of medicine are willing to take part in the translation of TCM terminologies.

**Key words:** Culture; Cultural translation; TCM terminologies; *Shanghanlun*

# Contents

摘 要 .....	i
Abstract .....	iii
<b>Chapter One Introduction .....</b>	<b>1</b>
1.1 The Background and Significance of This Thesis.....	1
1.2 The Purpose of This Thesis .....	3
1.3 The Structure of This Thesis .....	3
<b>Chapter Two Literature Review .....</b>	<b>5</b>
2.1 Cultural Shift in Translation .....	5
2.1.1 The Definition of Culture.....	5
2.1.2 Features of Culture.....	7
2.2 Traditional Chinese Medicine and Terminologies Translation.....	7
2.2.1 Studies at Home .....	10
2.2.2 Studies Abroad .....	12
2.3 A Brief Introduction to <i>Shanghanlun</i> and Its English Versions.....	14
<b>Chapter Three Cultural Barriers and Existing Problems in the Translation of Traditional Chinese Medicine Terminologies.....</b>	<b>17</b>
<b>3.1 Characteristics of Traditional Chinese Medicine Terminologies .....</b>	<b>17</b>
3.1.1 Cultural Characteristic .....	17
3.1.2 Historical Characteristic.....	20
3.1.3 Polysemy Characteristic.....	20
3.1.4 Literary Characteristic.....	21
3.2 Cultural Barriers of Translation of Traditional Chinese Medicine Terminologies.....	21
3.2.1 Default of Cultural Words between Chinese and Western Medicine .....	21
3.2.2 Differences of Philosophy between Chinese and Western Medicine .....	22
3.2.3 Differences of Thinking Modes between Chinese and Western Medicine.....	23
3.3 Existing Problems in the Translation of Traditional Chinese Medicine Terminologies.....	24
3.3.1 The Abuse of Literal Translation.....	24
3.3.2 Lack of Standards.....	24
3.3.3 Mistranslation.....	25
3.3.4 Redundant Translation .....	25
<b>Chapter Four Principles and Methods of the Translation of Traditional Chinese Medicine Terminologies.....</b>	<b>27</b>
4.1 Translation Principles of Traditional Chinese Medicine Terminologies from the Cultural	

Perspective .....	27
4.1.1 The Back-translation Principle .....	27
4.1.2 The Natural Principle.....	28
4.1.3 The Ethnic Principle .....	30
4.1.4 The Stipulated Principle .....	33
4.2 Methods of the Translation of Traditional Chinese Medicine Terminologies from the Cultural Perspective .....	34
4.2.1 Literal Translation .....	34
4.2.2 Free Translation .....	36
4.2.3 Transliteration.....	37
4.2.4 Neologisms .....	39
4.2.5 Footnotes and Interlinear Notes.....	41
4.2.6 Concretion .....	42
<b>Chapter Five Conclusion .....</b>	<b>47</b>
5.1 Major Findings of This Thesis.....	47
5.2 Limitations of This Thesis .....	48
5.3 Suggestions for Further Study .....	48
<b>Bibliography .....</b>	<b>49</b>
<b>Acknowledgements.....</b>	<b>53</b>
<b>Achievements .....</b>	<b>55</b>

## Chapter One Introduction

### 1.1 The Background and Significance of This Thesis

Traditional Chinese medicine (TCM), as an important part of traditional Chinese culture, has been making contributions to the health of our Chinese people for thousands of years. It contains a wealth of traditional Chinese culture. It explores life from a philosophical perspective, and perfectly combines “heaven”, “earth”, “human beings” as a holism, therefore, in its developing process, it is deeply influenced by ancient Chinese culture, religious beliefs, and the values of the Chinese people.

With the rapid development of human society and the needs of human health, people gradually become aware of the side effects of chemical drugs on their health, accordingly, TCM, which mainly focuses on health preserving, disease prevention and treatment and is based on such natural therapies as acupuncture, moxibustion, massage, qigong and other non-drug therapies, is gaining more and more attention and is spreading at a fast speed in every corner of the world.

With China's gradually deepening of reform and opening up policy since the 1990s, TCM has been enjoying a high reputation around the world. “In a short span of 30 years, a variety of TCM translation theories and methods appeared one after another, but there is not a unified translation standard, so it is urgent to set up a new and practical TCM translation principle.” (麦考尔·雅蒲, 2003: 3).

Even in recent days, with the continuous development of modern medicine, traditional Chinese medicine is still playing an irreplaceable role in the fields, such as disease prevention and treatment with its long history, magical clinical effect, unique and profound theoretical system, low medical costs and few side effects. On its long and inevitable way of legalization and internationalization, TCM has been gradually recognized by more and more countries and regions in the world, so an increasing number of people in west countries begin to understand and learn this ancient Chinese medicine and are deeply surprised by its magical effects.

The English translation of TCM is not an easy task and a great number of medical experts and skilled translators are devoting themselves to TCM terminologies translation. Unfortunately, at present, the translation of TCM terminologies do not have well-developed criteria and standards. It is a pity that due to the huge differences in languages, cultures, values and logical thinkings between eastern and western countries, there is great differences in thinking and expression modes in medical cultures between east and west.

Therefore, if we want to promote the TCM which contains rich traditional Chinese cultures to the world, the English Translation of tradition Chinese medicine, especially the translation of traditional Chinese medicine terminologies becomes the first thing that we must concern. Qiu Maoru once put forward that “knowing two cultures is at least equally important to grasping two languages.” (邱懋如,2001). A great number of famous specialists and scholars in the medical world both at home and abroad, such as Li Zhaoguo, Xie Zhufan and Li Jingwei, Nigel Wiseman, Joseph Needham and Giovanni Maciocia, put forward their own translation principles and methods of cultural elements in traditional Chinese medicine terminologies. But in order to push forward the internationalization of TCM, the problem of how to translate the traditional Chinese medicine terminologies contained in traditional Chinese culture accurately in order to help foreigners really understand and accept them should be the first concern.

this thesis focuses on international standards and cultural heritage of traditional Chinese medical terminologies, and translation is closely related to culture, because through translation, we can spread our cultures to other nations and regions, at the same time, we can also borrow and learn their exotic cultures, which can contribute a lot to cultural exchange between different countries.

However, readers of different social and cultural backgrounds may have different cognitive modes to the same words because of the diversity and differences of culture. In this case, translation is needed to establish a cultural bridge among readers between source language and target language, so as to reflect the whole cultural characteristics of original works. With the aim of improving the quality of translation, translators are required to make use of different translation methods flexibly and take culture features into full account in the translation of traditional Chinese medicine terminologies, which can guide the translation practice of traditional Chinese medicine, and is difficult to many experts and scholars.

The nature of the English translation of traditional Chinese medicine is cultural translation. Just as Eugene. A. Nida once pointed out, “Translation is an exchange between two cultures. For a real successful translation, knowing two cultures is more important than grasping two languages, (because words become meaningful only in its effective cultural background)” (Nida, 1993). Accordingly, English translators of TCM should have a strong sense of cultural awareness, and in the process of studying and research their own culture, they should also understand cultural characteristics behind the target language carefully, and overcome the cultural differences between English and Chinese in a deep level, and explore the most effective ways that are the closest to the source language scientifically to convey the implied meanings and cultural information in the source language, and minimize the phenomena of cultural default in the translation process of traditional Chinese medical terminologies.

## 1.2 The Purpose of This Thesis

“As one of four representative classical works in traditional Chinese medical theory, the English translation of *Shanghanlun* has a great influence on the development of traditional Chinese medical, and the difficulty of translating this classical work lies in translation of TCM terminologies in it, because the translation quality will influence foreign learners, understanding and study to traditional Chinese medical theory directly.” (柏文捷, 邓曼, 2005).

Through the analysis of the relationship between translation and culture, together with the influence of culture on the English translation of traditional Chinese medical terminologies, this study is designed to explore how to deal with the cultural factors in the English translation of traditional Chinese medical terminologies, to explore translation principles and specific translation methods, to explore the issue of how to pass traditional Chinese medical terminologies with rich cultural connotations to the world, expecting to provide a reference and to improve the quality of the English translation of traditional Chinese medical terminologies further, and to promote the development of the cause of the English translation of traditional Chinese medicine.

First of all, the author will collect information about culture and TCM terminologies translation according to the purpose of this study, including translation methods and principles through literature research, knowing the history and development of this study. At the same time, the author will read *Shanghanlun* and its translation versions carefully, thus, to get some comprehensive information about this study.

In the second place, the author will collect some information about TCM and linguistics as much as possible under the guidance of interdisciplinary study, thus, having a comparatively qualified result about this study.

At last, the author will put forward some questions, point out the translation disadvantages, describe phenomena and then try to translate some TCM terminologies contained in *Shanghanlun* under the guidance of culture.

## 1.3 The Structure of This Thesis

This thesis can be divided into the following five chapters.

Chapter one is a brief introduction to the background of the object of research, and it expounds the significance, purpose and research methods of this study.

Chapter two first gives a brief review on the definition and characteristics of culture, and then the present research situations of TCM terminologies both at home and abroad are

followed, finally it offers a brief introduction to the classical medical work *Shanghanlun*.

In Chapter three, the cultural barriers and existing problems of English translation in TCM terminologies are pointed out. Due to the inherent cultural features and the cultural differences in medicine between Chinese and western countries, some problems, such as lack of unified standards of translation, the transliteration problem, the redundant problem, and even the phenomenon of wrong translation, have occurred in the English translation of TCM terminologies.

In Chapter four, based on the valuable experiences of the predecessors from the cultural perspective, the author first explores four basic principles followed in the English translation of TCM terminologies in *Shanghanlun*, namely, the natural principle, the ethnic principle, the stipulated principle and back-translation principle. Next, this study makes a short summary on the four principles and its relation with translation methods so as to guide the TCM terminologies better. Then, the author points out that under the guidance of the cultural perspective, TCM Terminologies translation in *Shanghanlun* should follow six major translation methods, including the literal translation, the free translation, the transliteration, the coinage translation, footnotes and interlinear notes translation, and specific method translation.

The last chapter is a conclusion. In this part, it first points out contributions and limitations of the study, and makes some suggestions to translators, hoping to help them in their later translation career. However, the English translation of traditional Chinese medicine is an arduous undertaking, and it needs not only the active participation of enthusiasts, but also the joint efforts of excellent translators.



## **Chapter Two Literature Review**

### **2.1 Cultural Shift in Translation**

For a long period of time, translation was simply regarded as an activity between different languages. Culture, as an important factor in translation, however, is ignored and not recognized and emphasized in the practice and process of translation. In fact, “Translation is a kind of activity which inevitably involves at least two languages and two cultural traditions.” (Toury, 1978: 200). It was not until recent years that this thesis of translation, especially from cultural perspective, has become a popular topic in translation studies. At the same time, with the globalization and the increase of cooperation among different countries, people of different cultures have created more opportunities to get in touch with each other. Most of them now are holding an open rather than a conservative attitude when talking about and learning cultures of other nations.

Therefore, this thesis of translation, which is a means of communication, should break out the hedge of language and enter a more capacious level-culture. “In the 1970s, translation studies began to take a cultural turn” (Wang, 2002). From then on, people’s understanding and study of translation have been further deepened instead of being merely restricted at the linguistic level.

With the popularity of cultural turn in translation studies, a growing number of experts, scholars have realized that translation is neither just a process of word-for-word transformation, nor a process of coding and decoding mechanically, but is a dynamic interaction between two cultures of source language and target language. As Andre Lefevere said, “Translations are not made in a vacuum, and it processes in a given culture and at a given time. The way translators understand themselves and their culture is one of the factors that may influence the way in which they translate.” (Lefevere, 2004: 14)

#### **2.1.1 The Definition of Culture**

The word “culture” comes from a Latin word “cultura”, whose meaning is related to worship or cultivate. In a broad sense, the word is a result of human interaction. Edward Burnett Tylor, an anthropologist, was the first person who gave a definition to culture. In a famous book called *Primitive Culture*, he defined culture as: “a completed system including knowledge, faith, art, law, morality, custom, and all the abilities and habits from which a social

member would acquire” (Edward Tyler, 1871: 202).

After the republication of this book, hundreds of famous experts have studied and given definitions to culture from a broader sense, some people related it to language, so different definitions have been offered. For example, In Peter Newmark’s opinion, culture is “the way of life and its manifestations that are peculiar to a community that uses a particular language as its means of expression” (Newmark, 1988: 94). By saying like this, he acknowledged that each social group with the same language has its own features in culture.

Later, however, he further definitely announced that he does “not regard language as a component or feature of culture” (Newmark, 198: 95). His statement is opposite to Vermeer’s point of view on the relation between language and culture, who thought that “language is part of a culture” (Vermeer, 1989: 222). Another famous expert Nida also had its own view on the relationship between culture and translation, he held equally important attitude of the differences both linguistic and cultural between the source language and the target language and he suggested that “differences between cultures may cause more severe complications for the translator than differences in language structure”(Nida, 1964: 130). Geert Hofstede, an expert of cross-cultural differences, considered culture as “the collective programming of the mind which distinguishes the members of one human group from another culture, in this sense, culture includes systems of values and values are among the building blocks of culture” (Geert Hofstede, 1991).

A large number of sociologists, such as Zvi Namenwirth and Robert Weber, presented another definition to culture, and they considered culture as a systematic belief and held that these believes consist of purposes for living. In the Concise Oxford Dictionary, the definition of “culture” is inclusive, varying from the description of “art” to bacteria and plant cultivation and contains a wide scope of transitional aspects. More importantly it connected language with translation.

However, at present, the definition of culture is divided into a general sense and narrow sense. In a general sense, the culture contains three levels: the first aspect is material culture, it refers to various kinds of material civilizations created by human beings; the second aspect is institutional culture, which refers to different kinds of systems, such as social system, political system and its corresponding customs and habits and so on; the third aspect is spiritual culture, which means people’s modes of thinking and aesthetic point of views. From this division, it can be seen that connotations of a general culture are rather rich, from people’s life styles to basic necessities of life, such as food, clothing, living and walking, from customs and habits, to political systems, social ethics, religious belief, and then to their outlooks on life, values and world. People’s aesthetic taste, ways of thinking and language are all included in culture. In a

narrow sense, the culture only refers to social habits, such as diet habits, marriage and funeral customs, life styles, criteria of conduct.

### **2.1.2 Features of Culture**

No matter how different people's definitions to culture are, culture is a kind of acquired knowledge that people can use to communicate experiences and normalize behaviors to each other. This knowledge and normalized behaviors can create values, form attitudes, and influence a society on the contrary. Most experts and scholars of culture agree that there are the following features of culture:

1. Culture is learned. Culture is not biologically based or inherited, on the contrary, it is acquired through experience and learning.
2. Culture is shared. People, being members of an organization, group, or society, share the same culture, and it is not a specific feature of single individuals.
3. Culture is inherited. Culture can be cumulative and passed down from one generation to another generation.
4. Culture is symbolic. Culture is based on the capacity of human beings to symbolize or refer to another with one thing.
5. Culture is patterned. Culture is integrated and has its own structures; a small change in one part may even definitely bring changes to other parts.
6. Culture is adaptive. The adaptation or change of culture is based on the capacity of human beings, which is distinguished from the adaptive process of animals.(胡文仲,1999)

Because of the existence of different cultures in the world, a precise understanding of the influence of culture on the behavior of human beings is critical to the learning and study of intercultural communication. People's little or a little knowing about the cultures of other countries they are dealing with can result in quite disastrous consequences. So it is of great significance to develop and promote cultural exchanges between different countries and nations.

## **2.2 Traditional Chinese Medicine and Terminologies Translation**

As early as in the year of 1707, a British medical expert Sir. JF published a book called *The Physician's pulse - watch* (医生诊脉) in London on the base of Wang Shuhe's *The Pulse Classic* (脉经), and the book published by him was now in the British library. This shows a fact that is nearly 300 years ago, there already was English version of books of traditional Chinese

medicine published. Acupuncture is an important symbol and starting point of traditional Chinese medicine being attentioned by modern western world. James Reston a deputy editor-in-chief, senior journalist and columnist of The New York Times columnist, visited China with Kissinger in the year of 1971, and during an interview in Beijing, he suffered from appendicitis. Under the care of Premier Zhou Enlai, James Reston received acupuncture and moxibustion therapy of less than 20 minutes so as to alleviate the serious discomfortable condition of abdomen after surgery and the effect is obvious. After that, he wrote a report titled “Now Let Me Tell You about My Appendix in Beijing” ( “现在让我告诉你们我在北京的阑尾手术”), and this reported was published in New York times on July 26 in 1971, in which he objectively reported the experience after his appendix was cut in Beijing and the special effects of acupuncture and moxibustion which caused close attention of westerners.

After that, some west government agencies and western medical research institutions including National institutes of Health (National Institutes of Health, the NIH) of the United States have sent related scholars and experts to visit China, also, they have sent students to study to China, and they studied acupuncture. From then on, the west countries began studying acupuncture in a large scope, which stimulated the rise of the acupuncture and moxibustion, also the demand for the English version of traditional Chinese medicine was raised. As a result, translation activities of traditional Chinese medicine were carried out in a large scale and entered the first popular period of development.

With China’s reform and opening up policy to the outside world, the international development process of traditional Chinese medicine has been speeded up. Since 1983, the world health organization (WHO) has created 7 collaborating centers for traditional medicine in such cities as Beijing, Nanjing, Shanghai, which shows the vitality of internationalization of TCM. These centers were based on TCM colleges and universities. As the pace of reform and opening up policy of our country has been further accelerated, some TCM colleges and universities which had not set up collaborating centers for traditional medicine also recruited foreign students.

In the 1990s, the world health organization (who) continuously issued a series of documents about traditional Chinese medicine, such as The International Standard of Acupuncture and Moxibustion Points, which set up now goals for the cross-century development and internationalization of traditional Chinese medicine and made traditional Chinese medicine popular in other countries. The development of the English translation of traditional Chinese medicine has entered another high period.

As a representative of Chinese nation, there is no doubt that traditional Chinese medicine

has been gained high attention. What is more, the historical task and importance shouldered by the English translation of traditional Chinese medicine is indubitable. To finish such significant historical and international task, the English translation of traditional Chinese medicine should increase its internal potential to continuously improve and innovate. TCM education not only been introduced to foreign countries, that is to say there appeared a lot of traditional Chinese medicine colleges and universities, such as the Houston College of Traditional Chinese Medicine of the United States, Canada International College of Traditional Chinese Medicine, but also these colleges and universities have been extended in China, and every year a large number of international students come to colleges and universities of TCM to carry out different kinds of long-term or learning or short-term training.

Since the 1980s, China's education for overseas students of traditional Chinese medicine has played an important role, on the one hand, it has cultivated a batch of professional talents of traditional Chinese medicine for the world and increased the accepted degree of traditional Chinese medicine; on the other hand, it has trained a batch of TCM English translation talents not for our country but also for western countries in the process of mutual exchange. All of these can constantly cross language and cultural barriers and as a kind of virtuous cycle, more and more doctors both in foreign countries and our country have acquired a lot of knowledge in TCM field and English at the same time. As a result, the development of the internationalization of education of traditional Chinese medicine has become a force in publishing thousands of English books and papers of traditional Chinese medicine each year; moreover, it also has provided strong technical support (translation). Therefore, we can think that the English translation of traditional Chinese medicine has entered a peak stage of further development.

Different opinions about the standardization of TCM terms have risen among Chinese and foreign experts since the beginning of the research. On one hand, there are some experts who hope to hew out a proper way to pilot the standardization of TCM. However, their hope proved to be an uneasy one. Because basic principles and guidelines that can help us to value whether the translated versions are good or not are needed in order to achieve this goal. Since the translation purpose of TCM is to introduce it to other countries and nations of the world, and target readers of TCM English translation versions are foreigners rather than Chinese. So the acceptance of foreign readers have their final rights to judge whether our translation is successful or not, which, in turn, means that when translating we should choose a way that can be accepted by them. (Liu Ganzhong, Lü Weibo & Xie Zhufan, 1992: 12(6):327).

On the other hand, some of them held that Chinese scholars should take an initiative spirit in the English Translation of TCM, "An international standardization of Traditional Chinese Medicine language must be set up on the basis of our own language...As for the westerners,

how to understand deeply and how to remember easily in learning new TCM words, that is their own business... We should use our language to teach them, not to acclimatize ourselves to their language” (Huang Sixian 1993: 13(4):240).

Under the above two different views, a variety of translators and scholars made a long-time disputes. In the end, after a lot of discussions and disputes again and again, they make an agreement on the standardization of TCM terms in English translation as “coordinate with the world” (Luo Lei 2003: preface).

### **2.2.1 Studies at Home**

It is from the beginning of the 20th century that Chinese scholars start to translate TCM. According to incomplete statistics, from 1900 to the foundation of the People’s Republication of China, there were about 160 English versions of TCM magazines and books altogether, whose study focused on the history and pharmacy of TCM.

In the late 1970s, some Chinese experts and scholars, such as Ou Ming, Huang Kaokai and Xie Zhufan, played a leading role in the English translation of TCM terms. They worked hard in the publication of some important and related brochures, dictionaries and books. For example, the Chinese-English Dictionary of Traditional Chinese Medicine compiled by Ou Ming was of epochal significance not only in the translation of TCM but also in cross-cultural communications, which laid a foundation for a further development of this translation trend.

In the early 1980s, some medical lovers and scholars began to translate individual books of TCM. For example, the Basis of Traditional Chinese Medicine was translated by Fang Tingjue. In the middle 1980s, in order to thoroughly and systematically translate TCM, Xu Xiangcai took a leading part in organizing a worldwide translation activity. Under his leadership, 21 volumes of Practical English-Chinese Library of Traditional Chinese Medicine were finished by him and his team. In 1991, he also took a vanguard role in launching the opening of the first national academic meeting of Chinese medical English in Ji’nan, which was designed to integrate traditional Chinese medicine with Western medicine.

The 1990s has witnessed a rapid development in the translation study of TCM. Not only did a variety of valuable Chinese-English dictionaries of TCM have produced, but also this thesis of English translation of TCM in theory has made gratifying progress. Chen Keji, an academician, once pointed out that there was great differences between our self-contained theory in TCM and modern medicine. Translators should realize this and adopt proper methods in translation.

In 1993, a book called An Introduction to Translation of Traditional Chinese Medicine was

published by Professor Li Zhaoguo. In this book, the author, combined his work experience with the practice of some translators both at home and abroad, summarized some basic principles used in the translation of TCM terms, thus ending the longtime disputing situation between “literal” translation and “free” translation, which paved a new road in the translation of TCM.

In 1996, another important book called *English Translation Skills of Traditional Chinese Medicine* was published by him, in which, he integrated TCM study with linguistics and put forward that translators should compare the difference between TCM and western medicine so as to seek common ground for the purpose of translation smoothly, which was regarded as a landmark in the developing period of TCM translation.

What is more, there are also some other translators, who tried their best to apply translation theories to TCM translation, including Nida’s translation equivalence, adaptation and alienation, reception theory. For instance, an idea that alienation should be adapted as a top priority in order to keep the features of TCM works when handling with cultural elements in the English translation practice was put forward by Zhao Zhenhong and Mao Hong after their analysis of cultural elements contained in classical works of TCM in the first issue of *Chinese Journal of Basic Medicine* in 2007 (毛红、赵震红, 2007: 76 ); in 2004, in the fourth issue of *Shanghai Journal of Translators for Science and Technology*, Li Weibing, from the perspective of culture difference, discussed some basic principles of TCM translation; (李伟彬, 2004: 57); in 2005, in the fifth issue of *Chinese Journal of Integrated Traditional and Western Medicine*, Dai Qi and Zhang Jingjing, from the perspective of reception theory, analyzed cultural convey in TCM translation (张晶晶、戴琪, 2005: 463); in 2004, Jiang Jianyong, from the perspective of Nida’s translation equivalence, discussed the application of transliteration to TCM translation in the eighth issue in *Chinese Journal on Integrated Traditional and Western Medicine* (蒋建勇, 2004: 750).

In recent days, the significance of the standardization of traditional Chinese medicine (TCM) terminologies has been realized by a growing number of scholars, naturally, English translation of traditional Chinese medicine terms has become the focus in this thesis of traditional Chinese medicine.

Professor Li Zhaoguo once put forward that since the 1970s, an increasing number of Chinese and foreign scholars have started to study traditional Chinese medicine translation conclusively, especially the English translation of traditional Chinese medicine terminologies, which has laid a solid foundation for the International Standard of Terminology of Traditional Chinese Medicine (ISTTCM) (Li Zhaoguo, 2008: 2). With indefatigable efforts of some experts and scholars in traditional Chinese medicine field, glorious achievements have been made

recently.

Here, we can have a brief look about published articles, dictionaries and book. For instance, a Chinese-English Dictionary of Traditional Chinese Medicine compiled by Li Zhaoguo and a Classified Dictionary of Traditional Chinese Medicine(New Edition) by Xie Zhufan were both published in 2002. In 2008, a book named International Standard Chinese-English Basic Nomenclature of Chinese Medicine(《中医基本名词术语中英对照国际标准》) mainly compiled by Li Zhenji was published by People's Medical Publishing House under the supporting of World Federation of Chinese Medicine Societies(世界中医药学会联合会), which is a masterpiece of more than 200 experts and scholars and 70 Traditional Chinese Medicine Organizations. Furthermore, in 2008, Professor Li Zhaoguo organized and compiled International Standardization of English Translation of Traditional Chinese Medicine: Study of Theory, Summarization of Practice and Exploration of Methods (《中医基本名词术语英语翻译国际化研究-理论研究、实践总结、方法探索》). The birth of this book is of great significance to the English translation of traditional Chinese medicine terminologies. He also published a lot of articles about the English translation of traditional Chinese medicine terminologies in famous Journals, such as Chinese Integrative Medicine and Chinese Translation.

Nowadays, the focus of Chinese translation academia is on the nomenclature of TCM. A lot of experts and scholars both at home and abroad have done numerous researches in this field. In October 2004, an International Standardization Seminar on the Standardization of Nomenclature of TCM Terminologies was held; it is in November of the same year of the Second International Conference on TCM Education that a study session of standardization of English translation on TCM was held. Many famous experts put forward their translation principles and methods on some basic TCM terminologies. Professor Xie Zhufan initiated the standardization of English translation of TCM terminologies. He held that Chinese and Western medicines belong to different medical systems, and when combining them together it would become a unique medical model. The international standardization of TCM nomenclature would definitely help to boost cross-cultural communication and the development of TCM.

### 2.2.2 Studies Abroad

In 1707, John Floyer, a British Physician, published a book named The physician's Pulse-Watch in London. What is more, from the late 18th century to the 19th century, TCM had become very popular in Europe, especially acupuncture, which became a hot topic to



researchers and translators. During this period, most translators were missionaries in China who were from European countries. Their translation included some TCM terms, such as moxibustion (艾灸) and acupuncture (针刺).

Although these terms were translated by three Dutchmen named Rhijne W. Buschof H. and Dane Jacob Booudt firstly, they are still recognized widely at present day. In the 1970s, TCM was approved officially in the west countries. However, there were disputes concerning biomedical terminologies and Chinese medical terms, which were paid great attention by them.

In the 1980s, a range of English versions of TCM books were appeared. For instance, *Tongue Diagnose in Chinese Medicine* (1987), compiled by Ciovanni Maciocia, was published; besides, *The Foundations of Chinese Medicine* (1989), *The Practice of Chinese Medicine* (1994) and *Obstetrics and Gynecology in Chinese Medicine* (1998) were also emerged.

During this time, under the guidance of translation theories, some famous translators, such as Nigel Wiseman, Paul U. Unschuld and Manfred Porkert, started to study translation of TCM terms. Manfred Porkert, who wrote a book named *The Theoretical Foundations of Chinese Medicine* (1974), was considered as the first scholar to study terminologies in English translation of TCM. In this book, he put forth that we should use normative translations in TCM. Furthermore, he said that we should examine the whole contexts to make sure that the original terms were translated accurately when we choose a normative equivalent. Paul U. Unschuld, a Germany scholar, also made thorough research on the history and translation of TCM. He pointed out three major misunderstanding of the English translation of TCM terms: the first misunderstanding is on the level of individual concepts, the second misunderstanding in on the level of conceptual contents, the third misunderstanding on the level of thought.

In a book named *Glossary of Chinese Medical Terms and Acupuncture Points* (1990), Nigel Wiseman carried out a systematic research on TCM terms. Under his efforts with Feng Ye, *A Practical Dictionary of Chinese Medicine* was published in 1999. He also compiled two dictionaries, one was *English-Chinese Dictionary of Chinese Medicine* and the other was *Chinese-English Practical Dictionary of Chinese Medicine*, which were published respectively in 1995 and 1998. He intended to use less frequent English words, which can make TL readers stop to think their connotative meanings. However, this did not mean he prefers to choose complicated and lengthy words in the translation of TCM terms.

What is more, in 1991, a *Standard International Acupuncture Nomenclature* was issued by World Health Organization in which 14 main meridians of English nomenclature, 8 extra meridians 361 classical acupuncture points and 48 extra points were included. This standardized nomenclature promoted teaching, clinical practice and research and exchanging of information of acupuncture globally as well. In 2007, WHO *International Standard Terminologies* on

Traditional Medicine in the Western Pacific Region (《世界卫生组织西太区传统医学国际标准名词术语》) was produced by World Health Organization Western Pacific Region(世界卫生组织西太区), in which Traditional Chinese Medicine terminologies occupied a large proportion.

In a word, the English translation of terminologies on traditional Chinese medicine is developing in a standardized tendency gradually with the unceasing working of many scholars and translators.

## 2.3 A Brief Introduction to *Shanghanlun* and Its English Versions

*Shanghanlun*, which was written by medical sage Zhang Zhongjing, is regarded as the first clinical medical work with a lot experiences in the world, and this work was finished about eastern Han Dynasty (200-219) in its later period. This book is gloriously listed as “one of four classic works” in traditional Chinese medicine. It is a monograph describing exogenous diseases and regular patterns of treatment on miscellaneous diseases. This work summarizes medical achievements and rich practical experience of the predecessors before Han Dynasty and systematically expounds syndrome differentiation and treatment of various exogenous febrile and miscellaneous diseases according to its clinical experience, and integrates principles, methods, recipes and medicines as a whole. “This work has a profound significance for the guidance of TCM theory and clinical practice, and also it has an epoch-making significance and a transitional function in the development history of traditional Chinese medicine, and has made great contributions to the development of traditional Chinese medicine in our country” (Xiong Manqi, 2007). There is no doubt that this work is of high value in high literature and medicine.

There is a long history of this thesis of the translation of Chinese classics by translators at home, but most of these classics are concentrated on and limited to the English translation and the commentary of *Huangdneiijing* or *Yellow Emperor's Canon of Medicine*. For example, there have been five experts and scholars such as Shi Yunzhong, Lan Fengli and Li Zhaoguo in China who have given related commentaries on existing English version of *Neijing* in different levels already. In contrast, so far, this thesis of *Shanghanlun* and its English versions are not deep, and according to information from the Internet, it has not been listed as a research focus by academia.

The English translation versions of *Shanghanlun* could be divided into the following periods:

The first period began from 1981 to 1991, during which translation methods and choices of words were not unified in translation, and the difference of knowledge background and

historical factors have a significant effect on translators' orientations and strategies. (林亭秀, 孙燕, 2010).

In 1951, Dr. HongYen HSu, a Chinese and American, translated *Shanghanlun*, Wellspring of Chinese Medicine and was published in America, and he introduced Chinese prescription medicine to Taiwan and spread to the United States.

His translation version was an abridged one and he abridged 118 articles from the original text, which reflected the research level of *Shanghanlun* in Japan, Hong Kong, Taiwan areas before the 1980s to some extent. But there still some room for discussing on his translation of using some western medicine terms to translate TCM concepts, for example, he translated “霍乱” into “cholera” in western medicine. His version was not a perfect one, but still could not hide its values in the translating process of *Shanghanlun*.

A researcher Luo Xiwen, at the Chinese Academy of Social Sciences, was the first person who translated the full text of *Shanghanlun* for the first time. A British famous scholar, Joseph Needham, polarized for his version and the full text version were released by New World Press in 1986. The version translated 398 articles according to the vulgate text of Song Dynasty and widely praised by western researchers of traditional Chinese medicine, and was reprinted in 1993, 500 cases of medical books and records of traditional Chinese medicine were attached as well.

In 1985, Dean C. Epler JR published The Concept of Disease in an Ancient Chinese Medical text, the Disease on Cold-Damage Disorders “*Shang-hanLun*” in The Journal of History of Medicine and Allied science. In this paper, he abridged parts of the original text of *Shanghanlun*.

A Taiwanese couple Mr. and Mrs. Paul Lin, also Chinese and American people, published a selecting version of *Shanghanlun* in 1991, and this version was used as a textbook in Traditional Chinese Medicine College of Texas.

The second stage was from 1992 to 2008, during which TCM terms and its translation projects were started and achieved some progress. The year of 2007 witnessed the event of the Western Pacific Region of WHO issued International Standard of Traditional Chinese Medicine Terms, marking that new progress of international cooperation of the English translation of traditional Chinese medicine was made. In this stage, three versions of *Shanghanlun* were appeared:

The first version was translated by Nigel Wiseman and was published in 1999 by Paradigm Publications of America. The main purpose of this version focused on leading traders to analyze linguistic features of *Shanghanlun*. Wiseman was born in America, and lived in Taiwan for 17 years, so he had a good mastery of Chinese. This version listed the text of *Shanghanlun* of Song

Dynasty as an appendix, and paid high attention to the conveying of original meanings. So in his version, Wiseman stuck to systematic principles and the translating concept of making the original text the guidance. There were two characteristics about his version: one was that each term contained four parts, which means the first part was the original text of Chinese, the second part was Chinese Pinyin, followed by its Chinese meaning, and the last part was its English translation. The main part included translations of 398 articles. The other was that he paid great attention to notes of articles and the elucidation of physicians of past generations, so as to learn wildly from their strong points.

By comparison, the version based on the original one and translated by Huang Hai was relatively simple in content arrangement.

Greta Young Jie's version was based on Zhao Kaimei's *Shanghanlun* in Ming Dynasty and was published in 2009 by Churchill Livingstone Press. In 1998, he learned classical prescriptions from Liu Duzhou, who was a master of typhoid, later; he became a favorite apprentice of Liu Duzhou. From 1997 to 2006, his major focus was on exogenous and epidemic febrile disease in Beijing University of Chinese Medicine as a student of master and doctor student. In his version, he was not limited to the translation of the original text, more importantly, he put emphasis on the thoughts of the articles, key points and related clinical syndrome differentiation.

## Chapter Three Cultural Barriers and Existing Problems in the Translation of Traditional Chinese Medicine Terminologies

### 3.1 Characteristics of Traditional Chinese Medicine Terminologies

#### 3.1.1 Cultural Characteristic

Many medical classics were finished in ancient China, when philosophical thoughts such as Taoism, Confucianism and Buddhism, which were based on objective views and comprehensive logical thinking, had a dominated position; as a result, many theories of TCM were inevitably influenced by these thoughts. So, TCM terms and their methodologies were largely relied on philosophical thoughts and rules of those schools. Just as Paul Unschuld said, TCM was closely related to and profoundly influenced by Taoist traditions, and acupuncture was more closely associated with Confucian traditions. Perhaps this was due to Taoist which explored the immortality with mineral and herbal substances (Unschuld, Paul U. 1985:103).

Therefore, in terms of this aspect, TCM is more of a philosophical discipline than a medical one, or a combination of medicine with philosophic implications. TCM terms, as carriers of cultures of these philosophical thoughts, not only carry medical information, more importantly, they carry Chinese culture reflected in those thoughts. For example, some main philosophic views involved in these theories such as five-element theory (五行学说), qi theory (精气学说) and yin-yang theory (阴阳学说) are of great significance in TCM. All of these terms have a strong cultural color of Chinese culture.

Some scientists and medical experts claim that the treatment of diseases should be based on the theory of yin-yang through acupuncture, qigong therapy and herbal medication. The yin-yang theory describes that in this physical world, everything exists together in the form of two opposite sides, and that the movements of the two opposite halves make up a whole world for the changes and development. The yin and yang theory is used to describe two opposite but closely related sides. Look at the following table about the yin and yang theory.

Table 1(Zhu Ming, 2001:10):

yin	yang
water	fire
night	day
cold	hot
autumn, winter	spring, summer
dark	bright
turbid	clear
still	mobile
bottom	top
inward	outward
chest	back
flavor	smell
earth	heaven

The theory of five elements is a general cogent explanation for the interrelationship among moving objects and their relatively steady-going state during their movement. Its basic tenet is that the world is composed of five primary elements: fire, wood, water, soil and metal. Each element either restricts or promotes to another.

Thus, the universe can move smoothly. The ancient Chinese were used to associating changes of human bodies with changes of natural phenomena. For instance, they associated wood with liver for the reason that they believed liver can boost the spread of qi and blood vessels were like a tree growing up freely. Trees can produce green leaves, so green was corresponded to wood. When fruit was not ripe, it was green in color, and was usually sour, and according to this logical reasoning, sourness was pertained to wood. Spring is the best season for trees to germinate, because in this season the weather is neither too cold nor too hot, but is often windy. So spring is the season associating with wood, and wind is associated with wood. We can have a clear understanding about their relationship of five elements with the following table.

Table 2(Zhu Ming, 2001:11):

Nature	Five Directions	East	South	Center	West	North
Nature	Five seasons	Spring	Summer	Late summer	Autumn	Winter
Nature	Five airs	Wind	Heat	Dampness	Dryness	Cold
Nature	Five actions	Generation	Growth	Bloom	Harvest	Storage
Nature	Five elements	Wood	Fire	Soil	Metal	Water
Man	Five zang-organs	Liver	Heart	Spleen	Lungs	Kidneys
Man	Five fu-organs	Gallbladder	Small intestine	Stomach	Large intestine	Bladder
Man	Five tissues	Sinews	Vessels	Muscles	Skin	Bones
Man	Five sense organs	Eyes	Tongue	Mouth	Nose	Ears
Man	Five manifested parts of bloom	Nails	Face	Lips	Body hair	Hair
Man	Five colors	Blue	Red	Yellow	White	Black
Man	Five flavors	Sour	Bitter	Sweet	Acrid	Salty
Man	Five emotions	Anger	Joy	Thought	Sorrow	Fear

### 3.1.2 Historical Characteristic

TCM has a history of as long as 5000 years, TCM terms thus carry thick characteristics of history. Most languages were archaic Chinese which can find its origin throughout history, and the ideas of these terms were thought its linguistic features.

In some conditions, one Chinese character is one word, let us take the character “气” as an example, which means “the invisible basic substance that forms the universe and produces everything in the world through its movement and changes.” (谢竹藩, 2002). In other cases, a short sentence is also treated as a word as a whole. For example, “肝属木”. In this example, “属” is used as a verb which means “belong to”. Since wood is characterized by development freely and the liver prefers freedom to stagnancy, so the liver is attached to wood in Five-element doctrine. “金曰从革” is another instance to refer to the feature of five elements, which means that metal is the result of smelting, for the form of metal can be changed by smelting. Here “曰” is just a modal auxiliary in archaic Chinese, which has no real meaning and is almost out of use today. “从” is a verb in archaic Chinese, which means “attach to”. Here “革” means “change”. From this example, we can find changes of TCM terms in meaning.

### 3.1.3 Polysemy Characteristic

One of the most remarkable features of Chinese language is that one word may bear many meanings in different situations. Some may be denotative meanings and some may be connotative meanings and TCM terms are not an exception. At the same time, we must pay attention to the phenomenon that some concepts are very vague in meaning. In this case, it is inevitable to have some difficulty when we are translating their exact meanings into English. For instance, “虚” is a very common character in TCM, however, in various versions it has been acquired different translations, such as, insufficiency, deficiency, hypo function, debility and weakness. Let us look at some typical examples together.

肝血虚: insufficiency of liver blood ; 脾虚: spleen deficiency; 虚家: patient with weak constitution; 脾虚泻: chronic diarrhea due to hypo function of the spleen; 虚脉: feeble pulse; 虚热泻: Thirst due to aesthetic heat.

Another typical example is “天”, which is translated into “heaven, nature, sky, weather, etc. In “承天而行之” (Acting in accordance with the movement of the celestial body), “天”



is translated into celestial body; in “积阴为天,积地为阳” (The accumulation of Yin forms the sky and the accumulation of Yang forms the earth.); “天” means the sky or heaven which is opposite to the earth; in “在腰以上为天” (The part from the waist upwards is the upper part of the body), “天” refers to the upper part of the god. And in “成而登天” (When growing up, Yellow Emperor came to the throne), “天” means throne. So from here, we can conclude that in form TCM terms are concise but in meaning they are rich. One term may be given various information and meanings in different contexts.

### 3.1.4 Literary Characteristic

Another conspicuous feature of traditional Chinese medicine language is that it is full of literary color. We know that traditional Chinese medicine was passed down by our ancestors. Those classics were all written in ancient prose in which four-character words were very common. Those classics have daedal styles such as verses, poesies and prose etc. In those protean styles, rhetoric, such as hyperbole, metaphor and analogy were applied not niggardly. For instance, “With the touch of doctors’ hands, the disease will be cured” (手到病除); and “a magic hand can restore health” (妙手回春). They were used to speak highly of a doctor’s light-fingered leech craft. “Nip in the bud” (防患于未然) and “take precautions before it is too late” (未雨绸缪) were both applied to explain the importance of taking care of one’s health and preventing occurrence of diseases.

What is more, some treatments in traditional Chinese medicine were also vividly described by some idioms. For example, “A boat will float with the incoming of tide” (增水行舟), which refers to increasing body fluid can cure constipation. “Boating against the river” (逆流挽舟) means the application of pungent-cool diaphoretics for dysentery. Just as rowing a boat goes against the stream. “Removing burning wood from under the boiler” (釜底抽薪) mean reducing the substantive heat by laxatives. On one hand, those lyric expressions are poetic and beautiful when reading, on the other hand, the wide existence of them in traditional Chinese medicine system has become a great challenge for most translators.

## 3.2 Cultural Barriers of Translation of Traditional Chinese Medicine Terminologies

### 3.2.1 Default of Cultural Words between Chinese and Western Medicine

According to “language national conditions science”, in a language there are always some

words that reflect things and ideas of a nation, but we can not find corresponding language in a foreign language. (朱文晓, 2008, 28(4): 371-373). There are some vocabularies which belong to words of cultural default in TCM terms and they distinguish one culture from another. Some terms, such as the basic theory of TCM terminologies, yin and yang, five elements, trigram, qi, meridians, visceral and their manifestations, acupuncture, syndrome differentiation and treatment, fluid, do not have corresponding words in English. A typical term is “气”, and in traditional Chinese medicine, it is “anything that is invisible and moves constantly”, such as nutrients. In English, it is translated into breath, air, energy, atmosphere, vapor, gas, influence and chi and so on, but these translations are far from the connotative meaning of “qi”, so why do not we translate it into “Qi” to preserve the culture color of traditional Chinese medicine.

### 3.2.2 Differences of Philosophy between Chinese and Western Medicine

Taoism, Confucianism and Buddhism bring about deep and far-reaching effects in the formation and development of TCM. So there is no doubt that some ideologies of these three philosophies also exert ubiquitous and profound influences on traditional Chinese medicine. In its development, Taoism has almost integrated all aspects of human civilization, and its influence naturally embodied in traditional Chinese medicine as well.

It stresses great importance of the harmony between human beings and nature, just as mentioned in chapter 25 in Dao De ling (道德经), “man takes his law from the Earth; the Earth takes its law from the Heaven; Heaven takes its law from the Tao, the law of the Tao is its being what it is” (人法地, 地法天, 天法道, 道法自然) (<http://www.Docin.Com/p-12579730.Html>). Which summarizes the relations between human beings and nature pervasively? When penetrating this thought into traditional Chinese medicine, it would unavoidably influence the diagnosis and treatment of diseases and the preservation of health. From the perspective of traditional Chinese medicine, it stresses integrity between human beings and nature, man can be influenced by movements and changes of nature directly or indirectly, according to which they would make corresponding responses physiologically and pathologically.

In Confucianism, mild-nourishing is regarded as the base of life-nourishing. It believed that the treatment of minds should attach more importance than the treatment of diseases, so does cultivating the mind and cultivating the life. In terms of health-preserving culture, traditional Chinese medicine is bound to be affected by Confucianism profoundly.

In Buddhism, an old saying goes like this: “physicians should love and take care of their patients as if they were their parents”. (医者父母心). It demonstrates that physicians should be tender-hearted and benevolent towards their patients, and this medical teaching corresponds

with “CiBei” (benevolence) in Buddhism coincidentally. In *Dayi Jingcheng* (大医精诚), it states that, “凡大医治病,必当安神定志,无欲无求,先发大慈恻隐之心,誓愿普救含灵之苦”. (Wang Jiakui,Zhang Ruixian 2001: 53).

In the west, however, duality and rationalism are main traditional philosophies. From Aristotle and Plato on, the western philosophies put more emphases on logical thinking. The logical systems of philosophies in ancient Greek and the systematic experiment lay a solid and unshakable foundation for the form of western medicine. Albert Einstein once stated that, to his surprise, the western science created the whole western civilization by means of formal logic system of ancient Greek philosophies (in Euclid geometry) and the possibility to find causalities through scientific experiments; while the ancient China made many inventions without those two essential means (FanWuqi,2008:236-237).

### **3.2.3 Differences of Thinking Modes between Chinese and Western Medicine**

The core thinking modes of Chinese culture is the infiltration and integration among all factors, emphasizing the harmonious coexistence among human beings, nature and heaven. In general, Chinese people prefer to put more stress on sensing and integration rather than analysis; on the contrary, the English used to putting more emphasis on concept and analysis to avoid generality. Throughout thousands of years, Chinese people in ancient times relied on experience, intuition and integrated cognition, and they developed a visualized thinking mode instead of choosing a rational thinking mode. They always make an imaginative analogy in accordance with similarity and closeness among things and from the unknown to knowing things in the process of movement and transformation. They seek after harmony and compromise by means of induction.

Different from Chinese people, western nationalities formed a rational thinking mode which is rather abstract and has a large amount of conception systems on the bases of logical computation and individual experiences. The western people take classifying the world into subjective and objective ones as their fundamental tasks. They understand objects by means of inference and judgment logically, which requires that they should have the ability to separate parts from the whole and make a rational analysis of their qualities and essence when they think about things. And their final purpose is to pursue the authenticity of everything in the world through logical and deductive thinking modes. Therefore, we can also call this thinking mode as analytic thinking mode. In this procedure, rational elements are always more important than imagines.

Accordingly, these two completely opposite thinking modes can also find their expressions

in the medical field. We know that in ancient China, the theory of man is an organic whole of nature plays a prominent part in their cognitive process, which provides a philosophical basis for TCM in the process of inspecting, listening, inquiry and palpation. As a result, TCM regards human bodies as an indispensable part of the whole universe and emphasizes the harmony and integrity between human bodies and nature as well as stresses the connection of human bodies with their external environment. In terms of this thinking mode, analysis and reduction are two primary medical methods of western medicine.

On the ground of modern medical system, anatomy which divides physical bodies of human beings into several dependent parts is very popular. For example, the connotation of kidney-an organ of human bodies, in TCM it is very different from that in western medicine. In TCM, spleen is more than an anatomical organ, but an essential part, whose function is related to transformation and transportation in the body closely, and studying and thinking in the mental.

### **3.3 Existing Problems in the Translation of Traditional Chinese Medicine Terminologies**

#### **3.3.1 The Abuse of Literal Translation**

Nobody advocates using transliteration completely and we should try to control the amount of it and apply it to some terms that are difficult to express properly in other ways. Otherwise, the whole article will become a vast sea of Chinese pinyin. (罗磊, 2004: 411). Literal translation, which is a means of dead translation without understanding its meaning really, is very common in the translation of TCM terms. Here are some examples, “养心” was translated as “heartsease”, “滋” was “nutrition”, “保和丸” was “defend peace pill” and “标本” was “sample”, etc. Sometimes when we pick up a medicine bottle we will find “Pills of Six Flavors” for “六味地黄丸” and “Defend Peace Pill” for “保和丸” on the bottle. Only then do we realize that the method of word for word translation is a real problem which should arouse our concern in the translation of TCM terms.

#### **3.3.2 Lack of Standards**

At present, the standards of English translation of TCM terminologies are rich in variety, which leads to diversification of translation. We can describe this phenomenon vividly with an old Chinese saying: “there is much to be said on both sides.” (曹山鹰, 2002, 15(2):12-14.)

Let us look at some specific examples together. In science of health preserving of TCM, there are a variety of versions on “气功”, such as “meditation”, “Qigong” and “Chinese Yoga”. “气功疗法” was translated into “Qigong therapy”, “breathing technique therapy” and “fresh air therapy”. “气” is translated into material force matter, energy, matter-energy, life force, vital force, moving power, vital power etc. “虚” is broadly applied in traditional Chinese medicine, whose corresponding versions are also rich in variety in English, such as insufficiency, deficiency, weakness, hypofunction, debility, asthenia. Which version on earth is right and which one is wrong, there is not a uniformed scientific norm.

### 3.3.3 Mistranslation

TCM terms are rich in traditional Chinese culture, it is inevitable that in the process of English translation some mistranslation phenomena may appear and these phenomena may even lead to some jokes. The following are some examples.

“生气” (vitality), which is a term in TCM, was once translated into fury, anger and outrage, which were translated into “发怒” in turn, “五脏六腑” (five Zang-organs and six Fu-organs) were once translated into “Five palaces and six warehouses”. Someone even translate “带下医” (gynecologist) into “doctor underneath the skirt”, which is rather ridiculous. “失笑散” (powder for relieving blood stagnation) was translated into “powder for lost smiles”. Such translations of TCM terms will misunderstand foreigners and hinder the internationalization of traditional Chinese medicine seriously. According to Prescription of Traditional Chinese Medicine, “This prescription is mainly for relieving pains caused by the retention of stagnated blood, the stagnation of the meridians or the unsmooth flow of blood, the pain will be stopped after using this prescription and the patients will smile happily.” From the above explanation we know that if we translate it into “Wonderful Powder for Relieving Blood Stagnation” or “ShiXiaoSan”, it will be more reasonable and appropriate. (张奇文, 孙衡山, 2001: 804).

### 3.3.4 Redundant Translation

One of the obvious features of TCM terms is that they are very concise in form, however, when these succinct terminologies of traditional Chinese medicine are translated into English; this important characteristic is totally lost. A very typical example is “八纲辨证”, in several comparatively popular Chinese-English dictionaries of TCM, it was translated into “differential diagnosis in accordance with the eight principal syndromes; analyzing and differentiating

pathological conditions in accordance with the eight principal syndromes; diagnosis according to the eight guiding principle” respectively. (李照国, 朱忠宝, 2002: 73).

Another typical example is “辨证论治”, it was translated into “different diagnosis in accordance with the eight principal syndromes, analyzing and differentiating pathological conditions in accordance with the eight principal syndromes, diagnosis and treatment based on the overall analysis-of symptoms and signs” etc in English. Such long and redundant translation versions are more explanations than translations. With the ever-increasing communication between China and foreigner countries in the medical area, such translations are becoming more and more unaccepted and unpopular, so we should seek for a more practical translation.

As Nigel Wiseman put forth, “the successful transmission of knowledge from one language community to another depends on the effectiveness of the strategy chosen to overcome the language barrier. This barrier can be overcome when either the recipients of the knowledge learn the source language so as to gain access to original texts or when an effective translation method is developed” (Nigel Wiseman, 2006: 37). It is also true in the English translation of TCM. So we should find a practical translation method to clear up obstacles so as to transmit traditional Chinese medical knowledge as well as traditional Chinese culture to the whole world.

## Chapter Four Principles and Methods of the Translation of Traditional Chinese Medicine Terminologies

### 4.1 Translation Principles of Traditional Chinese Medicine Terminologies from the Cultural Perspective

#### 4.1.1 The Back-translation Principle

Back-translation principle refers to that in English translations TCM terminologies are close or similar to Chinese language in structures; this kind of translation is advantageous to the two-way transmission of the two different medical systems in the world. The differences between traditional Chinese medicine and western medicine are a huge one, since the former one belongs to a unique cultural phenomenon in China. Back-translation is a translation method and can be treated as a bridge and based on which we can cross the two different cultures.

What is more, the back translation also has the characteristic of accurately reproducing the information contained in the original work comparatively, thus reducing the degree of information loss in the process of translation, and it is advantageous to have a better grasp of traditional Chinese medicine for English medical workers faster and better. (李照国、朱忠宝, 2002). Let us look at the following table:

TCM terms	English translation
阴阳失调	imbalance between yin and yang
心开窍于舌	the heart opens into tongue.
木生火	wood generating fire
五脏	five Zang—organs
阳化气	yang transforming into qi
阴中之阳	yang within yin

Of course, we emphasize translatability on condition that this method will not damage the original information. For example, someone translated Sun Simiao's 《千金要方》 into "Prescriptions Worth One Thousand Gold". Although this kind of translation has the feature of back translation, it can not convey the original meaning accurately. Sun Simiao named this book for the reason that he thought human lives were as precious as one thousand gold, and when he gave this name he was intended to emphasize the importance of collections of prescriptions for patients in this book.

If we want to express the author's intention accurately we had better translate it into valuable prescriptions. Furthermore, when we consider back translation, we should also pay attention to the internationalization and standardization of terminologies in translation. Such as the term “三焦” (triple energizer), in English they were translated into three warmers, three heaters, three burners and trijiao, Sanjiao and other different forms. These translation versions conform to the principle of back translation.

#### **4.1.2 The Natural Principle**

Natural principle refers to that terms of traditional Chinese medicine should be translated into naturally corresponding English language. As long as a terminology of traditional Chinese medicine is naturally close to western medicine in concept, then we can translated it into a corresponding terms of western medicine accordingly, which makes the target translation natural, because such a translation is the most natural one in target language. For example, at present, some translators always emphasize the uniqueness of traditional Chinese medicine and oppose to borrow western medical terms. As a result, they translated “髓海” into “sea of marrow”, which makes readers rather confused. As a matter of fact, “髓海” means brain in the corresponding English. So, brain is not only a most natural corresponding translation in English, but also a proper term in western medicine.

According to the natural principle, the English translation of traditional Chinese medicine terms should be concise in morphology, accurate in semantics and consistent in structure in both the length and formation of the original terms. There is a huge difference among different countries and nations, but in the aspects of language, culture or other fields, they still bear some similarities in experience obtained from nature because of some common features in daily life of human beings. For example, in the experience of analyzing and understanding some illnesses and some symptoms of diseases, traditional Chinese medicine and Western medicine share some similarities, so we can found some corresponding western medical terms of traditional



Chinese medicine. The following is a table of TCM terms which are translated into English according to the principle of nature, and nowadays they have been gradually accepted and extensively adopted in the medical field.

TCM terms	English translation
盗汗	night sweating
失眠	insomnia
能近视不能远视	Myopia; nearsightedness
嗜睡	somnolence
能远视不能近视	farsightedness; hyperopia; hypermetropia
头痛	headache
早泄	premature ejaculation
腰痛	lumbago
呃逆	hiccup
耳鸣	tinnitus
阳痿	impotence
遗尿	enuresis
里急后重	tenesmus
咯血	hemoptysis
心悸	palpitations
拘挛	spasm

When we emphasize the literal translation, it does not mean that in the translation of traditional Chinese medicine, we should translation every term word by word according to their Chinese terms at all times. For instance, we can translate “温病” into “warm disease” and “风火眼” into “wind-fire eye”; however, if we translate “里急后重”, “盗汗” and “失眠”

into “internal urgency and back heaviness”, “stealing sweat” and “loss of sleep” literally and respectively, they would sound very ridiculous and confused obviously. These terms of traditional Chinese medicine can find corresponding ones in English directly, so when they are rendered into English, it’s not necessary for us to move around the bush. Therefore, the above translations in the table are not only concise but also natural.

It is once said that the translation of traditional Chinese medicine terms can be regarded as a scientific one; in that case, the scientific information of traditional Chinese medicine must be given top consideration when it is translated to target language readers. Eugene A. Nida once pointed out that, “the process of translation could be described in an objective and scientific manner, just as linguistics may be classified as a descriptive science, so the transference of messages from one language to another is likewise a valid subject for scientific description” (Ma Huijuan, 2004:15). By this his purpose is that meanings of source language should be given priority when we render it to target language.

What is more, some translation theorists in modern times also believe that the process of translation is meaning translation. When it comes to the translation of traditional Chinese medicine, we should convey its scientific information naturally in the process of translation, rather than its philosophic or literature knowledge. At the same time, some cultural factors should also be kept when we adhere to the principle of nature, since language and culture are interrelated closely, and language is an indispensable part of culture, therefore, only by putting it in linguistic and cultural contexts, can the meanings of words and phrases be defined accurately.

### **4.1.3 The Ethnic Principle**

There is always some uniqueness in every culture, so does the language. Because of this feature, a large number of words and expressions can not be found and translated adequately and faithfully. Though these words and expressions take up maybe only a small part in the whole language system, they are of great significance for the reason that they are a distinct reflection of the cultural features of a nation and distinguish their languages from others. In terms of this point of view, we should try our best to keep and emphasize features of these kinds of words and expressions in translation.

Traditional Chinese medicine is a unique medical system of China and is characterized by the ambivalent nationality. According to the Science of Language National Condition, there are always some objects that reflect the ethnic characteristic of a nation but their corresponding languages can not be found in foreign languages. Therefore, there are large parts of TCM terms

can not find their corresponding words in western medical languages, just like the phenomenon of cultural default which we have mentioned in chapter four. The principle of nationality can be embodied in the translation of these TCM terms. The author thinks that the principle of nationality can also be called the principle of “harmony should coexist with difference”. By “harmony” the author means the translation can be understood and accepted universally by readers, so as to enrich the culture of the target language; and by “difference” the author means both features of the original language and traditional Chinese medicine can be contained.

Though information is often regarded as the first important point in the translation of TCM, it is true that only part of these terms have their counterparts in English. And for other terms them either do not have equivalents or they are so national that we can not abandon their distinctive and original flavor. Under such conditions, transliteration is probably a better way if we want to keep the uniqueness of TCM, and at the same time he also points out that it is the last but not the best choice in translation, because transliteration may cause great challenges for readers and also it can not convey the information sufficiently. The following are some example of transliteration:

TCM terms	transliteration
阴阳	yinyang
推拿	tuina
三焦	sanjiao
当归	danggui
道	Dao
五行	wuxing
气功	qigong
礼	Li
足三里	zusanli
命门	mingmen

Professor Li Zhaoguo holds that in the standardization process of international terminologies of translation and studying of traditional Chinese medicine, the principle of

nationality was mainly reflected in the methodology of foreignization (Li Zhaoguo 2008: 22). By foreignization, the original flavors of the source language can be better preserved in the target language, because this kind of translation is a combination of text type, images, rhetoric meanings and structures of the source language discourse.

If we loss these features in translation, it is a recreation rather than translation. Foreignization is thought to be able to enrich the language and help the construction of culture of a nation. Some concepts such as pathology and physiology can reflect the uniqueness in traditional Chinese medicine, for these terms, their original features should be contained as much as possible when they are translated into English, otherwise, both the original flavor of source language and culture of a nation will be lost. There are more and more scholars and experts who have realized the importance of foreignization. The following table is a demonstration of some English versions in some traditional Chinese medical terms:

TCM terms	English versions
风寒咳嗽	Wind-cold cough
风热耳痛	Wind-heat deafness
寒湿痢	Cold-damp dysentery
清心火	cleaning away heart fire
热痫	heat epilepsy
温肺祛痰	warming the lung to eliminate phlegm
风火牙痛	Wind-fire toothache
风湿症	Wind-warm syndrome
寒气腹痛	cold abdominal
祛湿止泻	eliminating dampness to stop diarrhea
暑泻	summer-heat diarrhea

#### 4.1.4 The Stipulated Principle

By putting forward the principle of the stipulated principle, the author means when translating we should provision the connotations of TCM terminologies so as to make other translation versions unavailable.

The stipulated principle is generally followed by any languages. Let's take the term of “*中医学*” as an example. Some people advocate translating it into Chinese medicine or China's medicine. However, according to translation versions of hundreds of journals and magazines of traditional Chinese medicine and the combination of traditional Chinese medicine and western medicine published in recent years both at home and abroad, “traditional Chinese medicine” and its abbreviation form of TCM has been established, therefore, we can regarded them as a standardized translation of “*中医*”.

The suggestion of this principle is of great significance both for the source language and the target language of medical terminologies when solving the problems of equivalent connotations. Due to the lack of equivalent translation versions in English, it is difficult for some connotations of traditional Chinese medicine terms to be conveyed in translation completely. As a result, some experts once pointed out that there were always some basic concepts in traditional Chinese medicine that can not be translated accurately.

However, according to linguistics we know this point of view is not proper in recent days, because languages are considered as symbols of expressing certain meanings, and we also know that languages have the feature of arbitrariness. Just as Hsun Tzu explained that “there are no names necessarily appropriate themselves. Names were named by convention. But when the convention has been established, it has become customary, this is called an appropriate name” (名无固宜, 约之以命。约定俗成谓之宜。)(荀子·正名)。According to Feng Youlan, a great philosopher, “all names are manmade, so when they were firstly invented, there was no reason why some objects were called by one particular name rather than others”. (Feng Youlan and Zhao Fusan, 2008: 246). For example, we name a kind of animal dog, but there is not any relation between the name “dog” and the animal that can bark. However, on the other hand, a certain name came into being, it should be applied to certain situations and it must be attached to a specified object but not others.

Therefore, it is necessary and reasonable to specify some connotations of English translation versions of some terms of traditional Chinese medicine in order to maintain the coherence of the translation and to clear up some existing misunderstandings (Li Zhaoguo,

2001: 78). For example, “辨证” was usually translated as “syndrome differentiation” in English, but some experts people believe that the character of “证” in traditional Chinese medicine is different from the word “syndrome” in English language.

However, when considered their dialectal relationship between the name and its potential meaning, the English version of “syndrome differentiation” can be regarded as the only corresponding version of Chinese “辨证”. Under this kind of proposal, some versions are used customarily. For instance, in the painstaking standardizing process of the translation of traditional Chinese medicine terms, the World Healthy Organization stipulated “purgation” as the standard English form of “泻法”, “triple energizer” as “三焦”, “thoroughfare” as “冲脉”, “five elements” as “五行” and “meridian” as “经脉” and so on. If we compare the target language and source language, we can certainly find they are not corresponding. However, since they are stipulated by the WHO, there are no chaotic situations in daily communication practically.

## **4.2 Methods of the Translation of Traditional Chinese Medicine Terminologies from the Cultural Perspective**

According to polysystem theory, it is impossible to study all cultural phenomena solely, on the contrary, they must be put in the whole cultural system and combined with other cultural phenomena. (洪溪珧, 2009) Therefore, there exists a profound relationship between methods and strategies adopted by translators of traditional Chinese medicine and the position of traditional culture of TCM in the whole traditional medical culture system of the world.

When the TCM is in the verging position, translators are used to adopting the method of domestication, which means they always prefer stipulated medical terms in western medicine in translating. On the other hand, with the ever growing position of TCM in the medical culture system of the world, an increasing number of translators are inclined to use the method of foreignization to make translation versions close to conventional expressions and features of classical works of traditional Chinese medicine (惠佳蓓, 张斌, 2010). After the analysis and study of Shanghanlun and its translation versions, in this part, the author will try to make an exploration on some translation methods of some terms of TCM in this classical work in detail.

### **4.2.1 Literal Translation**

Different countries and nations have different customers and believe in culture, language and psychology, but their relationships with nature and experience in daily life are similar.

Accordingly, some concepts and notions based on these concepts and notions are also similar which can also find its expressions in TCM. (兰凤利, 2003, 04(4):71-71).

For example, there are some similarities and commonness on some feelings and experience to some diseases and some understanding and analysis to some pathological features both in TCM and western medicine, so there are some corresponding expressions and terms. For these expressions and terms, we can translate them into corresponding western terms instead of word for word translation. For instance, “失眠”, “头痛”, “腰疼”, “呃逆” can be translated into “insomnia”, “headache”, “lumbago” and “hiccup” respectively, these translations are not only natural but also clear. The method of literal translation has always been emphasized in the translation of TCM terms, such as “伤寒” was translated into “cold attack”, but if “失眠”、“里急后重” were translated “into loss of sleep” and “internal urgency and back attack” literally, it is rather ridiculous. Because these concepts can find corresponding expressions in English language, it is unnecessary to create new expressions; instead, we can borrow existing expressions in English language.

Since we live in this material world together, our life experience is interlinked, “any things that can express in one language can be expressed in another language” (Nida, 1964: 4).

When we refer to Language National Conditional Science, we can learn that most words and expressions of any language in the world can find their corresponding ones in other different languages and they are a reflection both the things and phenomena that are commonly shared by all other nations in the world.

Literal translation refers to the method of borrowing corresponding words and expressions in the target language on the base of maintaining cultural features of the original language on condition that cultures of English countries are not violated. When some TCM terms can find corresponding words in the western medical terms, this translation method can be used, such as “头痛”、“鼻”、“数脉”、“迟脉”、“短脉” and “涩脉” can be translated into “headache”, “nose”, “rapid pulse”, “slow pulse”, “short pulse”, and “unsmooth pulse” respectively. The literal translation can be used in the following conditions:

First of all, in the translation of some anatomical terms of traditional Chinese medicine: just as some scholars in early times who used TCM terms to translate western medical terms. At present, most scholars believe that it is a scientific method to translate anatomical terms of traditional Chinese medicine with western medical terms. Accordingly, some anatomical terms such as “大肠”、“子宫”、“膀胱”、“心” can be translated into “large intestine”, “uterus”, “urinary bladder” and “heart” in traditional Chinese medicine respectively.

In the second place, in the translation of some basic terms of basic theory in TCM: some basic terms such as “表”、“里”“痰”、“热” can be translated into “exterior”, “interior”,

“phlegm” and “heat” respectively.

In the third place, in the translation of some unique therapeutics of traditional Chinese medicine terms: for example “针灸”、“拔罐”、“宣肺”、“祛痰”、“通经活络” can be translated into “acupuncture and moxibustion”, “cupping”, “dispersing the lung”, “eliminating phlegm” and “activating meridians and collaterals” respectively.

In the last place, in the translation of some terms which carry a strong culture flavor of traditional Chinese medicine but they are not taboos in another language: For example, “白鹤展翅” is one of the tai chi boxing whose action is just like a crane with its wings open, so it can be translated into “White Crane Spreading Wings” literally. Again, “桃花汤”、“神” can be translated into “Peach Blossom Decoction” and “Spirit”.

However, we should not imitate blindly by all means when translating, because over literal translation can cause an opposite result. For example, in traditional Chinese medicine terms, “生气” means “生命力”, and it is improper if we translate it into “get angry”, instead, we can translate it into “vitality”. Another example is “换药” whose correct version is “change dressings (敷料, 绷带)” rather than “change drugs”.

#### 4.2.2 Free Translation

Our ancestors were used to adopting figures of speech such as metaphor when discussing the relationship among objects or describing features of related things, which is very common in TCM. For instance, “乌风内障” is a terminology which describes pathological changes of eyes.

The literal way of translation will make westerners readers all at sea, so we had better translate this term into “glaucoma” under the guidance of free translation. Some TCM terms such as “白虎力节”, “天行赤眼”, “牛皮癣”, “天柱骨” were translated into “white tiger joint running”, “heaven current red eye”, “oxide lichen” and “celestial pillar” respectively by some translators according to their literal meanings. Actually, “白虎力节” refers to “acute arthritis”; the real meaning of “天行” is “epidemic” in traditional Chinese medicine, so when it is rendered into English, it is usually unnecessary to seek for literal equivalence and give up its real meaning, because we can find an equivalent and corresponding term in English, that is “acute contagious conjunctivitis”, “牛皮癣” just means “psoriasis” in English; (Li Zhaoguo and Zhu Zhongbao, 2002: 1 85-1 87).

For the terms mentioned above, free translation is always a better translating method in order not to confuse readers. What is more, literal or mechanical translation is difficult for readers to understand, what is worse, it may even mislead them. On the contrary, if they were



rendered into English by their actual meanings, they would be readable instead of causing any puzzling or misunderstanding situations. Furthermore, they would not distort the original meanings, thus, it is propitious to the spread of traditional Chinese medicine to the world. So free translation is a must job in the translation process of traditional Chinese medicine terminologies and this method has been accepted step by step by more and more readers and translators.

### 4.2.3 Transliteration

Traditional Chinese medicine has a very special cognitive system and has its own unique rules in both thoughts and concepts. Also, it is not the same with modern medicine in theoretical systems and operational processes. In terms of cultural features, TCM is a special medical system belonging to Chinese nation only; therefore, the national feature is vivid, which should be taken into consideration in translation. This feature can find its expressions mainly in transliteration (张璇,施蕴中,2008).

As long as Language National Conditional Science mentioned above is concerned, we can get that in any language there are always some words which can reflect things, thoughts and ideas of a nation and these words can not find corresponding words in a foreign language.

Although these words take up only a small proportion in a language of that country, they play a very important role and reflect unique cultures of a country and a nation, and they are a symbol which distinguishes one culture from another. So transliteration is a better method for these vocabularies.

Furthermore, Nigel Wiseman, a famous British translator, once said, “in the process of spreading traditional Chinese medicine to the west, traditional Chinese medicine should not make any changes in order to meet the needs of westerners. It is impossible for western people who are willing to learn traditional Chinese medicine when they adopt the learning method of refiltering traditional Chinese medicine and western medicine from a relatively familiar knowledge system, on the contrary, they must enter traditional Chinese medicine world really and truly”. (李照国, 朱忠宝, 2002:163).

Therefore, the author thinks that transliteration still remains a very important method in maintaining characteristics of traditional Chinese medicine when it is difficult for translators to find appropriate corresponding words in the existing English vocabularies. Transliteration can be used in the following aspects in TCM terms translation:

First, in the translation of some terms unique in concepts which are rich in meanings and some basic terms with special cultural connotations in TCM theory in meanings we can adopt

this method. Such as “阴”、“阳”、“气”、“命门”、“藏象”、“气功”、“推拿” can be transliterated into “Yin”, “Yang”, “Qi”, “Mingmen”, “Zangxiang”, “Qigong” and “Tuina”. In fact, transliteration of these terms major has been widely accepted by international TCM.

Secondly, in the translation of some acupuncture terms. In the early 1990s, the world health organization regulated that the standardized translation of acupuncture and meridian should take the method of transliteration. For example, some acupuncture points in acupuncturology of TCM such as “少阳”、“中府” , “合谷” , “列缺” , “手三里” , “下关” 和 “内庭” should be transliterated into “shaoyang”, “zhongfu”, “hegu”, “lieque”, “shousanli”, “xiaguan” and “neiting” .

Thirdly, in the translation of some terms with a strong cultural color of traditional Chinese medicine and it is easy for literal translation to cause misunderstanding or culture shock. For example, if “青龙白虎汤” is literal translated into “Blue Dragon and White Tiger Decoction”, some westerners will think it is a kind of medicine which can be used to treat blue dragon or white tiger, also they may think the main ingredients of the drug are blue dragon and white tiger. In this case, westerners could not help asking, “How dare your Chinese are to eat such animals as dragon?”

As we all know, dragons are regarded as the symbol of evil in western countries but in China is the symbol of auspice and powers. What is more, they also may dispute that tigers are a kind of very precious animals, so we should protect them rather than eat them. As a result, If we translate “青龙白虎汤” into “the Qing long and Bai hu Decoction” in a transliteration way, at least it will not cause culture shock. And also, this kind of translation adheres to the principle of back-translation, so it can help readers to have a further understanding to the original information according to Chinese pinyin. Another example is “失笑散”, which was translated into “powder for lost smiles” by some translators, however, according to the prescriptions of traditional Chinese medicine, “This prescription is mainly for relieving pains caused by the retention of stagnated blood, the stagnation of the meridians or the unsmooth flow of blood, the pain will be stopped after using this prescription and the patients will smile happily.” (李照国, 朱忠宝 2002: 25). Obviously the translation of “powder for lost smiles” for “失笑散” is inappropriate, so it is better to transliterate it into “Shixiao powder” (a powder for dissipating blood stasis).

In a word, transliteration is a new concept to foreign counterparts, and it is also the highest level of “faith”. It can not only maintain national characteristics of TCM, but also can avoid misunderstanding. But Chinese translators can not misuse transliteration, instead, they should combine transliteration, literal translation and free translation and other translation methods dialectically, which has an impellent significance for keeping characteristics and promoting

international academic exchange of traditional Chinese medicine.

#### 4.2.4 Neologisms

According to Nida, translation is a kind of recreation, which means translation is an activity of science and art (Nida, 2001: 91). In the translation of TCM terms, when the translator is faced with the situation of he or she can not find a proper and corresponding term in the target language and it is difficult to adopt the method of transliteration, neologisms can be used as a suitable method to solve this problem. The author thinks we can adopt such methods of word-formation as “V+-ing+N” and “N+V+-ed+N”, which not only makes translated terms concise, but also agree with the requirement of terms of western medicine.

The method of “N+V+-ing+N” means we can first use a noun, and then add a suffix of “-ing” after a verb and then a noun. Here, “V+-ing” can be regarded as a modifier of a compound adjective, and that verb has a passive relation with the noun in front of it in logic. For example, in energy-saving measure, energy can be regarded as an object of saving. In traditional Chinese medicine, we can also find such terms as “经活络剂” and “驱风散寒法” can be translated into prescription for dredging meridians and activating collaterals and method of dispelling wind and dispersing cold respectively. But if we apply the method of neologism, these two terms can be simplified as meridian-dredging and collateral-activating prescription and wind-dispelling and cold-dispersing method.

The method of “N+V+-ed+N” means that we can first use a noun, and then add a suffix of “-ed” after a verb and then a noun. Here, “V+-ed” can also be regarded as a modifier of a compound adjective, which means the first noun and that verb form a passive relation in logic. For instance, electricity-powdered vehicle (电动交通工具) means vehicles that are “driven by electric”. There are also such terms that can be translated in this method in traditional Chinese medicine. Such as, 酸味剂、寒性药、火针手法 can be simplified as sour-flavored prescriptions, cold-natured drugs, needle-heated method.

The word-formation structure forms of “V+-ing+N” and “N+V+-ed+N” in the English translation of terminologies are in accordance with English terms of western medicine, therefore, this method can be widely used in the English translation of TCM terms, the followings are some summaries in which situations this method can be used.

First, in the translation of terms of medical history, for example, 补土派: spleen-strengthening school; 寒凉派: school of cool-natured drugs; 养阴派: yin-nourishing school.

Second, in the translation of terms on some treatment method in some basic theory of

TCM, for example, 行气法: qi-promoting method; 清法: heat-reducing method; 降气法: qi-descending method.

Third, when in the translation of terms of traditional Chinese pharmacology, we can also use this method.

In the first place, when translating properties of some traditional Chinese pharmacology, we can use this method, for example, 寒性药: cold-natured drugs; 凉性药: cool-natured drugs; 热性药: hot-natured drugs; 温性药: warm-natured drugs.

In the second place, when translating five flavors of some traditional Chinese pharmacology, we can also use this method, for example, 辛味药: pungent-flavored drugs; 酸味药: sour-flavored drugs; 甘味药: Sweet-flavored drugs; 咸味药: salty-flavored drugs; 苦味药: bitter-flavored drugs. Thirdly, when translating functions of some traditional Chinese pharmacology, we can adopt this method too, for example, 温里药: interior-warming drugs; 理气药: qi-regulating drugs; 祛湿药: dampness-eliminating drugs; 平肝药: liver-calming drugs; 清热药: heat-clearing drugs; 补阳药: yang-strengthening drugs.

Forth, when translating terms in science of prescription, we can also use this method. The following two are some examples:

About the usage of some prescription, such as 煎药法: drug-decocting methods; 煎药火候: drug-decocting fire; 煎药用水: drug-decocting water; 服药时间: drug-taking time; 服药法: drug-taking methods.

In the translation of prescription, such prescriptions are named according to their drug-taking time and functions as 鸡苏散: cock-waking powder and 鸡鸣散: cock-crowing powder; 止咳散: cough-checking powder; 温经汤: meridian-warming decoction; 温脾汤: spleen-warming decoction; 健脾丸: spleen-enhancing pill.

Fifth, in the translation of some terms of sciences of health preserving, rehabilitation and Chinese qigong and other sciences of TCM, such as 练功时间: qigong-practicing time; 调心法: mind-regulating methods; 练功方位: qigong-practicing direction; 理脾功: spleen-regulating qigong.

Besides, we can also use the method of blending, which means we can clip two words and combine the head and end together to form a new word. In English we can find some vocabularies such as motel and smog which are formed by motor and hotel and smoke and fog respectively. Another example is “针灸” (acupuncture and moxibustion), which can be simplified as aumoxi. What is more, creating a new word according to a certain principle by existing morphemes to make terms more accurate is also a kind of neologism. For example, “herb-” is a prefix of herbal medicine and “-ology” is suffix of subjects, and when we combine these two affixes together, we can get a new word herbology. In traditional Chinese medicine,

the concept of “Yin and Yang” (阴阳) is a widely spread doctrine including anything in universe, and it is a science with its own unique theory system. According to word formation in English, we can add a suffix “- ology” after the widely accepted transliteration “Yin and Yang”(阴阳) to constitute a new word Yinyangology (阴阳学说), and thus we can also derive two words Yinyangological (阴阳学说的) and Yinyangologist (阴阳学家). To a certain degree, this kind of translation can not only retain the original flavor of TCM terms, but also easy for westerners to accept.

From the above, we can conclude that the method of neologism can not only make translations concise but also provide a practical and feasible method for solving the problem existing in TCM terms at present, so it is in line with the requirement of scientific terms.

#### **4.2.5 Footnotes and Interlinear Notes**

According to polysystem theory, traditional Chinese medicine once existed as a weak culture in western medical culture (乐萍, 2010, 8: 63). If we want to find a place for TCM in western medical culture, and make westerns understand and accept TCM, some redundant and impractical translations are a must during the development of history and can not be overstepped at the beginning of TCM translation. “Because this kind of explanatory translation has been a new exploration and it has promoted the development of TCM vigorously” (刘明玉, 2006).

With the ever growing development of TCM with other countries and nations of the world, the westerns have a more profound understanding to principles, methodologies, prescriptions and drugs of TCM. In western medical culture, TCM is not in a dominate position, but its culture has been recognized and accepted by more and more people internationally.

One of its prominent features of TCM is concise in form, so in translation we should take this feature into consideration (张登峰, 薛俊梅, 田杨等, 2006). For example, “奔豚” was once translated into “a syndrome characterized by a feeling of gas rushing up through the thorax to the throat from the lower abdomen” by Luo Xiwen, but a more proper method is that we can translate it into a concise term such as running-pig syndrome, and then add the above explanation by footnotes or interlinear notes.

Some TCM terms are rich in meanings and unique in concepts, and readers can not understand their connotations only by translation simply. Some basic TCM terms such as “阴”、“阳”、“五行”、“卫气” can not find their corresponding words in English language and free translation is too redundant and complex. For these terms, the method of transliteration with annotations which can highlight the culture of traditional Chinese medicine is an ideal

choice.

On the other hand, annotations should be concise in form and accurate in contents. It is generally believed that connotations are more feasible when a certain concept appears for the first place but when it reappears it is unnecessary to annotate. Also, we can only transliterate concept terms in an article and add annotations for a further explanation in a proper location. For example, the theory of five elements is one of the basic core contents in the traditional Chinese medicine theory, which explains the relationship among various phenomena and the coordination and balance of them on the base of the movements and their growth and restrictions of five elements of metal, wood, water, fire and soil in nature.

By taking the method of analogy and matching five elements with five Zang-organs, we can come to the conclusion from traditional Chinese medicine that the liver belongs to wood, heart belongs to fire, spleen belongs to earth, lungs belongs to metal and kidney belongs to water (李嵩岳, 2008: 12-14).

If we take the method of combining transliteration with comments, we can help readers have a better understand of the connotations of “five elements”, that is, Wuxing: five elements which mean the world consists of water, fire, wood, metal and earth that they interact and inhibit each other. Wu is the number Five, and xing implies a process. The theory of Wuxing is a system of correspondences and patterns that subsume events and things, especially their relationship to dynamics.

#### **4.2.6 Concretion**

Generality and comprehensiveness is one of the cultural characteristics of terminologies of traditional Chinese medicine, so it is common that a TCM term may contain more than one meaning. So when translating we should put these terms in a certain context and translate them into different English versions according to different conditions, which is called concrete method and this method can be used to deal with TCM terms handle containing many meanings. For example, the Chinese character “虚” has the following corresponding words in different language conditions: deficiency, weakness, insufficiency, debility, asthenia hypofunction and so on. When it comes to Zang-organs it means asthenia; if we use the word deficiency, readers may misunderstand that there may be a substantial defect of Zang-organs. When it comes to functions, hypofunction is a proper choice. Deficiency may be used to refer to Yin and Yang, qi and blood and weakness and debility to body.

In the translation of Chinese medicine and prescriptions, Latin language is usually considered as a universal translation method internationally. However, in recent years,

transliteration has become a very popular translation method. In order to shift the translation of Chinese medicine from English and Latin language to transliteration successfully, it is a transitional way to adopt the means of Chinese pinyin followed by English or Latin language. Such as 厚朴,半夏,甘草,当归 were translated into Houpo (officinal magnolia bark; Cortex Magnoliae Officinalis); Banxia (ternate pinellia; Rhizome Pinelliae); Gancao (liquorice root; Radix Glycyrrhizae); Danggui (Chinese angelica; Radix Angelicae Sinensis) respectively (李照国, 李相敏, 2007: 714). This kind of translation can ensure the accuracy of names of traditional Chinese medicine, so we can say it is a “three insurance” way of translation, namely, Chinese pinyin, English and Latin language are used together in the translation of names of traditional Chinese medicine at the same time, just as the four examples mentioned above.

Transliteration and literal translation can be used in the translation of food therapy of traditional Chinese medicine. Such as wuji (black chicken), gaoliang (Chinese sorghum), shengjiang (fresh ginger), baimai (white wheat), congbai (green Chinese onion), shanyao (Chinese yam). Judged from the effect of translation, the author thinks that method of transliteration and literal translation can promote the development of “China English” to loanwords of English language to some extent, so it can maintain culture characteristics of the Chinese language.

Some ancient proverbs and terms of TCM containing metaphors are thick in culture traits and it is difficult to find corresponding words in English. So it is rather confusing because the single method of literal translation or free translation can not express their initial concepts included in traditional Chinese medicine. However, the method of combining literal translation and free translation can help readers establish semantic coherence in a rapid way; let us look at some examples of TCM terms with unique connotations. If “娇脏”、“髓海”、“血之余” were translated into “delicate organ”, “sea of marrow” driving at by saying this. (谢娟, 王瑛, 2009: 1093). As a matter of fact, “娇脏”、“髓海” and “血之余” are alias of “lung”, “brain” and “hair”, which contain abundant knowledge of traditional Chinese medicine theory. According to traditional Chinese medicine, “hair is the surplus of blood condition” (发为血之余), which means the nutrition of hair depends on the blood. In turn, the hair can also reflect the blood condition of human body. Therefore, “surplus of blood” (血之余) is an alias of the hair.

If we combine literal translation and liberal translation together when translating these terms, they can be translated into as “delicate outraged (lung)”, “sea of marrow (brain)”, “surplus of blood”(hair), which can make foreign readers understood clearly. Another example is “釜底抽薪”, if we translate it literally into “taking away firewood from under the cauldron”, target readers will misunderstand its meaning because of the lack of related allusions of Chinese cultural. In fact, “釜底抽薪” is a kind of diarrhea-treating method by discharging stool with a

cold and excretory drug. In this case, literal translation combined free translation maybe a satisfying method: taking away fire-wood from under the cauldron (a method of clearing heat by drastic purgation).

Transliteration and free translation refers to half transliteration and half free translation. The combination of transliteration and free translation is not an original in the translation of traditional Chinese medicine, in fact, this kind of translation are very common in the translation of other areas. For example, rifle for 来复枪; jeep for 吉普车; tango for 探戈舞; beer for 啤酒; cigar for 雪茄烟. In these translations, the former part is transliteration, while the latter part is free translation and can be regarded as an annotation for a better understanding. In “吉普车”, “吉普” is a transliteration of “jeep” and “车” is the explanation to the function of jeep.

In some terms of TCM, the former part is concrete and the latter part is abstract. For example, “五脏” was once translated into “Five solid organ” (陈宏薇, 1999). To some degree, this kind of translation represented the structure of the organ, but this translation is not an accurate one. In recent years, the method of combining transliteration and free translation has been adopted and it was translated into “five zang-organs” (Paul, F, Bandia, 1993).

The method of combining transliteration and free translation is mainly reflected in the following three aspects in the English translation of TCM terms.

In the first place, in the translation of zang-fu organs, we can learn from this method. For example, “五脏” and “六腑” can be translated into five zang-organs and six fu-organs.

In the second place in the translation of various forms of “气”. Nowadays, “气” has been conventionally transliterated into “Qi”, but its related forms are the combination of transliteration and free translation, such as:

元气: Primordial qi; original qi ; congenital qi;

卫气: Defensive qi; defense qi;

正气: Healthy qi ; right qi; genuine qi ; vital qi;

肾气: Kidney qi; renal qi

Seen from the above examples, we know that some translations related to “气” are not unified, which is a flexible reflection of “free translation” by the combination of transliteration and free translation. But in the long term practice of translation exploration and communication, transliteration is a better choice. As a matter of fact, an increasing number of people have adopted the versions such as yuanqi, zongqi, zhengqi, weiqi, yingqi. As for “气” related to zang organs, we can still use the method of combining transliteration and free translation together, such as “肾气” for kidney qi, “肝气” for liver qi, “心气” for heart qi and “脾气” for spleen qi.

In the third place, in the translation of the names of meridians and acupoints, this is also a



better method. According to the International Standardized Nomenclature of Acupuncture and Meridians and Acupoints issued by the world health organization, the translation of acupuncture points adopt the method of transliteration combining codes, but the names of meridians and specific acupoints are translated by the method of the combination of transliteration and free translation, such as “Jing-well” for “井穴”; “Shu-stream” for “输穴”; “Yuan-primary acupoint” for “原穴”; “Luo-Connecting acupoint” for “络穴”. The standard translation of “手太阴肺经” is “Lung Meridian of Hand-Taiyin”, in this translation, “hand” and “lung” are transliterations for “手” and “肺经”, and “Taiyin” is free translation for “太阴”, which can maintain the characteristic of TCM terms better.

The purpose of English translation of traditional Chinese medicine is not only communicating with the outside world, more importantly, it should be a carrier of our traditional culture, showing the essence of traditional Chinese medicine and characteristics in our country. From this perspective, literal translation combining with free translation is a translation method worthy promoting.

To sum up, due to TCM terms are rich in ethnic flavor; there is not an absolute translation method. Therefore, in the English translation of TCM terms, different translating methods should be adopted dialectically according to specific situations, that is we should promote the healthy development of English translation cause of TCM by relating, penetrating and supplementing different translation methods, so as to better spread the traditional Chinese culture to the world.

At the same time, the TCM translation are related to science and technology, so any qualified translators should be familiar with relevant professional knowledge of science and technology and the style pattern. Just as DengYanchang and Liu Runqing put, “The translation of scientific and technological articles needs professional knowledge.” (邓炎昌, 刘润清, 1989).



## **Chapter Five Conclusion**

### **5.1 Major Finding of This Thesis**

In this chapter, the author will first make a brief summary about the contents of this thesis, then; some limitations of this thesis will be pointed out, followed by some suggestions for further study.

First, the author points out that since traditional Chinese medicine is one of the treasures of Chinese culture and English translation of TCM terms is necessary for the internationalization of traditional Chinese medicine. At present, traditional Chinese medicine has entered the western world, but it is in a simple and superficial manner, rather than on the base of traditional classics. If traditional Chinese medicine is to go to the world lastingly and durably, and gradually become a formal subject of study in western medicine and medical education, translators should attempt to cross cultural differences between Chinese and western medicines and spreading TCM and its specific culture based on classics of traditional Chinese medicine to the west independently and fully.

Next, the author points out that Chinese and western languages belong to two different language systems and are involved in two different cultures, so it is inevitable to encounter some obstacles in translation, which makes it difficult to retain cultural flavors of TCM. So it has been a challenging problem to deal with cultural factors of TCM terms in translated work. Because cultural barriers are the main problem in the English translation of TCM terms, for they can result in such problems as the lack of unified standards, transliteration, redundancy even the phenomenon of wrong translation in translation activities.

Last, on the basis of the experience of former translators and starting from the cultural perspective, the author makes a summary of four principles which should be followed when translating traditional Chinese medicine terms, namely the stipulated principle, the ethnic principle, the natural principle and back-translation principle. this thesis holds the belief different translation methods should be applied dialectically. Only by this way can TCM terms be better introduced to foreign readers, and eventually overstep the barriers between Chinese and western cultures.

## **5.2 Limitations of This Thesis**

However, this is far from enough, because in the English translation of traditional Chinese medicine terms, translators are faced with enormous challenges, so translators must learn traditional Chinese culture and traditional Chinese medicine in a more intensive way, and have a good command of philosophy, culture, traditional Chinese medicine and other subjects as much as possible, so as to improve their own professional quality and participate in translation activity better.

## **5.3 Suggestions for Further Study**

Because of the limitation of time and the shortage of bibliographies, there are still some inadequacies of this study: first, the perspective of the research is not comprehensive, and then the depth of the research is greatly limited. Therefore, in later studies, depending on the purposes of translators, we can shift to other perspectives such as ideology and background of researchers and economic conditions of researchers. Besides, there is still some room for improvement in dealing with translation methods.

## Bibliography

- [1] Chen Hongwei. Culture difference and translation [J]. Meta, 1999, (1):121-132.
- [2] Chen Ke-ji Medicine, Foreword. Changsha: Hunan Science and Technology Press, Preface 2, 37.
- [3] Edward Tyler, Primitive culture: researches into the development of mythology, Philosophy, Religion, Art, and Custom. London: John Murray, 1871.
- [4] Hofstede, G Cultures and Organizations [M]. London: Harper Colins, 1991.
- [5] Hsu Hong yen. ShangHan Lun: Wellspring of Chinese Medicine [M]. Long Beach: Oriental Healing Arts Institute Press, 1981.
- [6] Lefevere, André. Translation / History / Culture: A Sourcebook. Shanghai: Shanghai Foreign Language Education Press, 2004.
- [7] Newmark, P. A Textbook of Translation [M]. London & New York: Prentice Hall, 1988.
- [8] Nida, Eugene A. Language, Culture and Translating [M]. Shanghai: Shanghai Foreign Language Education Press, 1993.
- [9] Nida, E. Principles of Correspondence. The Translation Studies Reader [M]. London: Routledge. 1964.
- [10] Nida, E. Language and Culture: Context in Translating [M]. Shanghai: Shanghai Foreign language Education Press, 2001.
- [11] Nida, E. Toward a Science of Translation [M]. Leiden: E. J. Brill, 1964.
- [12] Nigel Wiseman. English—Chinese Chinese-English Dictionary of Chinese[M]. Shanghai: Shanghai Foreign language Education Press, 2006,
- [13] Paul F, Bandia. Translation as cultural transfer: evidence from creative writing [J]. Meta, 1993,(6):55.
- [14] Toury, G. The Nature and Role of Norms in Translation. The Translation Studies Reader. London: Routledge. 1978.
- [15] Unschuld, Paul U. Medicine in China: A History of Ideas [M]. University of California Press, 1985.
- [16] Vermeer, H. Skopos and Commission in Translational Activity. The Translation Studies Reader. London: Routledge. 1989.
- [17] Zhu Ming. 2001. The Medical Classic of the Yellow Emperor [M]. Beijing: Foreign Language Press.
- [18] 柏文捷, 邓曼. 中医英语翻译发展简述[J]. 中华中西医杂志, 2005, 6 (22-23).
- [19] 曹山鹰. 中医文化的翻译[J]. 中国科技翻译, 2002, 15(2) : 12-14.
- [20] 邓炎昌, 刘润清. 语言与文化[M]. 北京: 外语教学与研究出版社, 1989.
- [21] 范武邱. 《汉英翻译过程中模糊美感的磨蚀》. 长沙: 湖南人民出版社, 2008, (236-237, 256-257).
- [21] 冯友兰, 赵复三. 中国哲学简史[M]. 天津: 天津社会科学院出版社, 2008.
- [22] 黄海. Introduction to Treatise on Exogenous Febrile Disease[M]. 上海: 上海中医药大学出版, 2005.
- [23] 惠佳蓓, 张斌. 关联理论在中医英语翻译中的应用[J]. 中西医结合学报, 2010, 8(2):195-197.

- [24] 黄欣贤. 1993. 中医基本理论名词术语英译探讨 (四) [J]. 中国中西医结合杂志, 13(4): 240.
- [25] 洪溪珧. 多元系统论-翻译研究的新视野[J]. 湖南科技学院学报, 2009, 30 (2): 169-171.
- [26] 蒋建勇. 中医英译中的音译现象与翻译的等值理论. 中国中西医结合杂志, 2004, (8).
- [27] 林大勇. 伤寒杂病论语言文字研究法举隅[J]. 吉林中医药 2009. 29(5): 149-450.
- [28] 林大勇. 《伤寒杂病论》词义考析[J]. 吉林中医药, 2008, 28(4): 305-306.
- [29] 刘渡舟. 《刘渡舟论伤寒》[M]. 上海: 上海中医药大学出版社, 2009: 352.
- [30] 刘渡舟. 新编伤寒论类方[M]. 太原: 山西人民出版社, 1984.
- [31] 兰凤利. 论中医文化内涵对中医英译的影响--中医药古籍善本书目译余谈[J]. 中国翻译, 2003 (4): 71-71.
- [32] 刘干中, 吕维柏, 谢竹藩等. 1992. 中医基本理论名词术语英译探讨 (一) [J]. 中国中西医结合杂志, 12(6): 327.
- [33] 罗磊. 10 年中医英译的研究回顾. 广州中医药大学学报[J]. 2004, 21(5): 410- 412.
- [34] 罗磊. 2003. 现代中医药学英汉翻译技巧[M]. 北京: 中医古籍出版社.
- [35] 刘玲, 徐照, 余汇. 浅析《伤寒杂病论》书名的翻译[J]. 中西医结合学报, 2006, 4 (6): 661-662.
- [36] 刘敏. 伤寒论大黄如博棋子考辨, 中医杂志. 2010. 4(4): 374 — 375
- [37] 刘明玉. 探索中医经典书籍名称英译的原则[J]. 中西医结合学报, 2006, 4 (5): 548-550.
- [38] 乐萍. 浅谈中医英译中归化和异化的翻译策略[J]. 黑河教育, 2010, 8: 63.
- [39] 李嵩岳. 中医英译中文化缺省的补偿策略. 河南中医学院学报[J]. 2008, 23(4): 12-14.
- [40] 林亨秀, 孙燕. 《伤寒论》的英译发展与思考[J]. 中医教育, 2010, 29 (3): 29-31.
- [41] 李伟彬. 从中英文化差异看中医英译的基本原则. 上海科技翻译, 2004, (4).
- [42] 罗希文. 《伤寒论》-Treaties on Febrile Caused by Cold (Shang han lun) [M]. 北京: 新世界出版社, 2007.
- [43] 李振彬. 《伤寒论》重言考析[J]. 国医论坛: 1988(3): 27- 28.
- [44] 李照国. 中医名词术语英译国际化研究[M]. 上海: 上海科学技术出版社, 2008.
- [45] 李照国. 中医名词术语英译国际化研究[M]. 上海: 上海科学技术出版社, 2008.
- [46] 李照国. 中医英语翻译技巧[M]. 北京: 人民卫生出版社, 2001, 78.
- [47] 李照国, 李相敏. 言不过其辞, 动不过其则——谈谈中医英语翻译中的音译问题. 中西医结合学报[J]. 2007, 5(6): 712-714.
- [48] 李照国, 朱忠宝. 中医英语[M]. 上海: 上海科学技术出版社, 2002.
- [49] 李照国, 朱忠宝. 中医英语翻译技巧训练[M]. 上海: 上海中医药大学出版社, 2002.
- [50] 梅国强. 《伤寒论讲义》[M]. 湖南科学技术出版社. 2002: 292 — 293.
- [51] 马会娟. 奈达翻译理论研究[M]. 北京: 外语教学与研究出版社, 2004.
- [52] 毛红, 赵震红. 从异化与归化看中医文化因素的翻译. 中国中医基础医学志, 2007, (1).
- [53] 麦考尔·雅蒲. 中西英译西医化问题的透析及反思[D]. 福建中医学院硕士研究生学位论文, 2003: 3.
- [54] 邱懋如. 可译性及零翻译[J]. 中国翻译, 2001 年 1 月第 22 卷: 24-27.

- [55] 施建邦. 台湾《伤寒论》近 50 年研究述要[D]. 广州中医药大学 2006 博士学位论文, 2006:9, 94-95.
- [56] 王东风. 归化与异化: 矛与盾的交锋? [J]. 中国翻译, 2002 (5).
- [57] 王家葵, 张瑞贤. 神农本草经研究[M]. 北京: 北京科学技术出版社, 2001.
- [58] 魏迢杰. Shang Han Lun-on Cole Damage Translation and Commentaries [M].Brookline: Paradigm Publications, 1999.
- [59] 谢娟, 王瑛. 中西医结合学报. 语义翻译和交际翻译在中医英语翻译中的应用[J]. 2009, 7 (11):1093-1095.
- [60] 熊曼琪. 伤寒学[M]. 北京: 中国中医药出版社, 2007:2-5.
- [61] 谢竹藩. 新编汉英中医药分类词典. 北京: 外文出版社, 2002.
- [62] 张登峰, 薛俊梅, 田杨等. 中医药翻译的回顾与思考[J]. 中西医结合学报, 2006, 4(5): 548-550.
- [63] 张晶晶、戴琪. 从接受理论浅谈中医翻译中的文化传达. 中国中西医结合杂志, 2005, (5).
- [64] 张奇文、孙衡山. 《实用汉英中医词典》. 济南: 山东科技出版社: 2001, 804.
- [66] 张沁园. 《伤寒论》用字举隅[J]. 国医论坛. 2006 (4):49-50.
- [67] 朱文晓. 试论英汉中医术语的词汇空缺现象与翻译[J]. 中国中西医结合杂志, 2008, 28 (4): 371-373.
- [68] 张璇, 施蕴中. 文化与中医英译研究[J]. 山西中医学院学报, 2008, 9(4):57-60 [Http: //www. Docin. Com //p-1 2579730. Html](http://www.Docin.Com//p-12579730.Html).





## **Acknowledgments**

Here and now, I would like to extend my sincere thanks to all of those who have helped me during my writing; it is their help that makes this thesis possible and better.

First, I am deeply grateful to my honorable supervisor, Professor Che Mingming, who has checked and read through my thesis with patience sentence by sentence and given me instructive suggestions, and she also played an important role in indicating a bright road in my future writing.

Then I would like to express my thanks to the teachers and professors who have taught me over the past two and a half years of study, such as Professor Li Qing ming, Yin Pi'an, Song Gairong and Jia Liping .

Finally, I would to extend my thanks to my lovely friends and classmates who have offered me quiet situation to compose my thesis and discussed with me about my thesis.



Achievements

攻读硕士学位期间发表的论文：

于艳蓉：《木兰诗》中的互文性英译分析，《大观周刊》，2013 年 10 月刊，P15—16