

English Translation of Traditional Chinese Medicine Treatment Protocol for COVID-19 from the Perspective of Skopos Theory

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ABSTRACT

In 2020, COVID-19 broke out globally. Countries around the world worked together to fight the epidemic. Now the world has entered the "post-epidemic era." In the prevention and control of the epidemic in China, traditional Chinese medicine (TCM) has exerted its unique advantages and contributed to the effective containment of the epidemic, which has attracted the attention of the WHO and the world. However, there are still many problems in the translation and foreign exchange of TCM, and there is a great lack of effective translation theories for guidance. To this end, this paper conducts an in-depth study of the English translation of Diagnosis and Treatment protocol for COVID-19 in Traditional Chinese medicine (Trial Version 7), and combines the translation examples of TCM in the epidemic, such as the translation of five-character syndrome types, drug names, and prescription names. Under the guidance of Skopos theory, it explains the translation strategies of TCM translation, and puts forward some thoughts and suggestions for the future TCM translation and external communication, so as to promote the TCM culture to the world better.

Keywords: TCM translation, Diagnosis and treatment protocol for COVID-19, Skopos theory.

1. INTRODUCTION

Mankind has created a rich and colorful world civilization in the long process of development. The Chinese civilization is a significant part of the diversity and diversification of world civilizations. As a distinguished representative of Chinese civilization, traditional Chinese medicine (TCM) is a medical science that has been gradually formed and continuously enriched and developed by the people of all ethnic groups in China through thousands of years of production and life practices and the fight against diseases.

In 2020, COVID-19 broke out globally. TCM has made outstanding achievements in the fight against COVID-19. The use of TCM has prevented a large proportion of patients of mild case from becoming severe case. This has proved the effectiveness of TCM in combating the epidemic. China has accumulated rich experience in diagnosis and treatment, in which TCM has made great

contributions. Therefore, it is necessary to share TCM diagnosis and treatment experience with other countries. This will not only help other countries fight COVID-19, but also benefit the spread of TCM. Obviously, the translation of TCM diagnosis and treatment protocols for COVID-19 becomes particularly important.

Since traditional Chinese medicine is deeply rooted in China's long-standing and well-established traditional culture, medical classics are all written in classical Chinese, which makes translation extremely difficult. It is a great challenge for translators not only to be loyal to the source text, but also to keep the original flavor of traditional Chinese medicine, so that foreigners can understand the essence of it accurately, and at the same time, make the translation readable for people without Chinese cultural background. Based on the current situation of TCM translation, translation standards have not yet been unified, and different translators may have different versions of the same term. Some translators even have no profound knowledge of TCM and are prone to mistranslation.

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As a result, the translation of TCM is uneven and the overall translation quality is poor, which undoubtedly seriously hinders the spread of TCM abroad. Therefore, we urgently need a scientific translation theory to guide TCM translation. This paper aims to discuss the strategies of translation of Traditional Chinese Medicine Treatment Protocol for COVID-19 under the guidance of the three principles of Skopos theory in order to improve the translation quality, achieve better translation effects and facilitate the external communication of TCM.

2. THE CURRENT STATUS OF TRANSLATION OF TCM TREATMENT PROTOCOL FOR COVID-19

In order to further improve the diagnosis and medical treatment of COVID-19 cases, the National Health Commission organized experts to revise the diagnosis and treatment protocol based on the analysis, judgment, and summary of the previous medical treatment work, forming the "Diagnosis and Treatment Protocol for COVID-19(Trial Version 7)", officially released on March 3, 2020. The protocol is divided into two parts: the "medical observation period" and the "clinical treatment period". The first part summarizes the clinical characteristics of the patients in the medical observation period and the Chinese patent medicines recommended for the patients. The second part is the "clinical treatment period". This part is for patients who have been diagnosed with COVID-19. The disease is clinically divided into five types, namely, mild, moderate, severe and critical and convalescence. In different types of diseases, according to the different clinical manifestations of patients, they are divided into different syndrome types. For the different clinical manifestations of each syndrome type, the diagnosis and treatment protocol is given a detailed description, with corresponding recommended prescriptions and methods of administration. Compared with the previous protocol, trial version 7 also presents some characteristics. For example, treatment methods and drugs are more detailed, and more drug treatment methods are proposed, which can provide more targeted treatment to patients. Trial version 7 is an improvement of version 6 as a whole, and has a good guiding role for the medical staff to treat patients with COVID-19. At present, the translation of Traditional Chinese medicine diagnosis and treatment protocol for COVID-19 at home and abroad is still relatively limited. In order to share the results of TCM's anti-epidemic in a

timely manner with foreign countries, provide powerful guidance and assistance for the prevention and control of foreign epidemics, and for the purpose of promoting TCM, National Administration of Traditional Chinese Medicine issued the diagnosis and treatment protocol for COVID-19 in Traditional Chinese medicine (Trial Version 7) on March 20, 2020. The English part is translated by Beijing University of Chinese Medicine. In addition, the book Chinese Medicine and COVID-19: Results and Reflections from China provides a comprehensive summary and translation of the current anti-epidemic results of TCM. In this paper, the author will select some translations in the above two materials as a reference.

3. TRANSLATION ANALYSIS OF TCM TREATMENT PROTOCOL FOR COVID-19

3.1 *Literal Translation*

"The purpose of translation determines the method of translation" ^[1]. Among the three rules of Skopos theory, skopos rule is in the leading position. Under the guidance of skopos rule, translators need to carefully study the function of the target text and the purpose it needs to achieve before carrying out translation work, and on this basis, use flexible translation methods and strategies to achieve translation purposes. The translator is no longer "a person who turns over a bilingual dictionary in school and tries to convert one language into another" ^[2], but is regarded as an expert in cross-cultural communication, rather than a mechanical scribe subordinate to the author. Therefore, in the Traditional Chinese Medicine Treatment Protocol for COVID-19, the first problem that the translator has to solve is the purpose of translation. First of all, the curative effect of TCM in COVID-19 is remarkable and played a huge role. TCM is also a new way of thinking and new methods for the treatment of the disease. It also provides guidance and reference for overseas TCM practitioners. Secondly, it is to promote the overseas spread of TCM, so that foreign people can understand the culture of it through their familiar language, and finally identify with the culture of TCM. Therefore, after illuminating the aim of translation, the translator needs to understand that it is very important to enhance the readability and comprehensibility of the translation, which directly determines whether foreigners can accurately understand the content of

the diagnosis and treatment protocol and whether they have the desire to deeply understand TCM after reading it. Although TCM and Western medicine have completely different theoretical systems, there are many words with Chinese cultural characteristics in TCM, which makes TCM translation quite difficult. However, it is undeniable that TCM and Western medicine are medical sciences, and there are similarities between them. TCM has a large number of basic vocabularies, which can be found in English equivalent expression. In this case, the translator can directly use literal translation, which is not only accurate, but also will not make foreign readers feel strange to TCM.

For example, in the seventh edition of Traditional Chinese Medicine Treatment Protocol for COVID-19, the vocabulary expressing the clinical manifestations of different syndrome types can be found in Western medicine with basically the same conceptual meaning and similar cultural meaning. In this case, Western medicine vocabulary can be directly translated, such as 发热 fever, 乏力 fatigue, 咳嗽 cough, 咽痛 sore throat, 腹胀 abdominal distension, 胸闷 chest tightness, 恶心 nausea and 腹泻 diarrhea. The literal translation method can ensure that the information conveyed in the target language is basically the same as the information conveyed in the source language, which provides convenience for Western readers to understand the culture of TCM and is beneficial to the spread of TCM.

The literal translation method is also suitable for translating some vocabularies and terms with strong TCM characteristics in the protocol, such as the five-character syndrome types such as "寒湿郁肺证" and "湿热蕴肺证". These five-character syndrome types have very cultural characteristics, and no equivalent expression can be found in English. If people want to accurately convey the original meaning and retain the original taste of TCM, they can directly translate them by literal translation :

- 寒湿郁肺证

Cold-damp constraint in the lung pattern^[3]

- 湿热蕴肺证

Damp-heat accumulation in the lung pattern^[3]

- 湿毒郁肺证

Damp-toxin constraint in the lung pattern^[3]

- 寒湿阻肺证

Cold-damp obstructing the lung pattern^[3]

- 疫毒闭肺证

Epidemic toxin blocking the lung pattern^[3]

"证", namely syndrome, refers to the generalization of the pathological attributes of a certain stage in the course of disease development. TCM divides the human body into yin and yang, qi and blood, and divides the cause of disease into wind, cold, heat, dampness, phlegm, and deficiency and excess. Syndrome types are different disease states of the human body caused by different changes in yin, yang, qi and blood caused by different causes. Among the above five-character syndrome types, "寒", "湿", "毒", "郁", "蕴" and "闭" are all vocabularies with TCM characteristics. They describe the development process of the disease and the state of the lungs. Literal translation can allow readers to quickly obtain the above important information. In fact, the literal translation method allows the target text to precisely deliver the information that the source text wants to convey to the target language readers. This is another major advantage of the literal translation method.

In the book *Chinese Medicine and COVID-19: Results and Reflections from China*, in addition to trial version 7 of the diagnosis and treatment protocol, the translator also translated provisional first edition protocol of Guangdong Province. Different from trial version 7, this edition divides the whole course of disease into early stage, middle stage, severe stage and recovery stage. Different stages are divided according to the specific situation, using four-character phrases. Translators also use literal translation when translating these four-character phrases, for example :

- 湿邪郁肺，枢机不利

Damp pathogen is stuck in the lung; interfering with qi movement through this pivot^{[4]298}

- 邪热雍肺，肺失宣降

Heat-evil obstructing the lung; lung loses ability to diffuse and descend^{[4]300}

- 邪热闭肺，腑气不通

Damp-heat lung block; large intestine organ qi is blocked^{[4]302}

- 湿热蕴毒，肺气闭塞

Damp-heat latent toxin; blocked and congested lung qi^{[4]304}

- 气阴两伤，余邪未尽

Dual vacuity of qi and yin; latent pathogen has not fully resolved^{[4]308}

- 肺脾两虚

Dual vacuity of lung and spleen^{[4]310}

In terms of treatment, the treatment methods given in the protocol are also concise, and they are all four-character phrases, which are also translated by literal translation :

- 化湿解毒，宣肺透邪

Transform dampness and release toxins; diffuse the lung to vent the toxin^{[4]299}

- 清热宣肺，通腑泻热

Clear heat and diffuse lung; open the fu (large intestine) and drain heat^{[4]303}

- 回阳固脱

Benefit qi and return yang to secure what is separating^{[4]307}

- 益气养阴祛邪

Benefit qi and nourish yin to dispel the pathogen^{[4]309}

- 健脾益气祛痰

Build the spleen and benefit qi to dispel phlegm^{[4]310}

It can be seen that these four-character phrases are very characteristic of TCM, and translators can retain the original flavor of TCM to the greatest extent by literal translation. Literal translation can also reveal more information, so readers can have a more comprehensive understanding of the physical condition of patients in different stages of the disease and the explanation of TCM behind the symptoms. Some people may question the use of literal translation in this part, because most foreign readers do not have the knowledge background of TCM. Sometimes, retaining the characteristics of TCM to the maximum means that the translation will make foreign readers feel obscure. As Nord proposed in the principle of function plus loyalty, if the translator can not meet the expectations of all readers, he must explain the translation strategies he uses^[5]. According to the Skopos rule, the translator must fully analyze the purpose of translation and have a deep understanding of the audience and the effect of translation. The target audience for the translation of the diagnosis and treatment protocol is the vast number of foreign

medical workers struggling in the anti-epidemic front line, medical professionals who have a certain understanding of TCM and foreign readers who are interested in TCM. These people usually have the knowledge background of TCM, so the translator does not need to think too much about whether the translation will bring incomprehensible trouble to foreign readers. Moreover, due to the wide spread of the epidemic, the translation task is urgent, and translators need to improve the efficiency of translation. For the purpose of maintaining the readability of the translation, translators are bound to add a lot of annotations to the translation, which will reduce the efficiency. Reviewing the whole diagnosis and treatment protocol, we will find that both trial version 7 and the Guangdong edition has used short and concise four character phrases to represent "证型", but their status is very important, so how to translate them accurately and efficiently is very worth thinking about. Literal translation can not only retain the characteristics of these TCM specific words, but also maintain high translation efficiency, which is very practical.

3.2 Transliteration

As a medical science, TCM is deeply influenced by and imprinted on traditional Chinese culture. TCM has its own theoretical system which is completely different from other medicine. The understanding of physiology and pathology is very different from that of Western medicine. Therefore, some unique concepts will inevitably appear in the theory of TCM. These concepts can hardly find equivalent words in English, such as "气", "阴阳", "五行" and so on. For the translation of these special words, the TCM translation community has made many explorations. For example, the translation of "气" has experienced the process from "vital energy" "chi" to the final pinyin "qi". These words have typical Chinese cultural characteristics, and neither literal translation nor free translation can accurately reproduce the connotation of the original text. According to the requirements of fidelity rule in Skopos theory, the source language text and the translation must be consistent. Specifically, the source language information received by the translator, the translator's interpretation of the information and the target language readers' information from the translator should be consistent^[6]. The translator must be loyal to the source text, so the translator can use transliteration to translate these characteristic vocabularies, without changing the vocabulary itself, so that it retains its own

characteristics. Another advantage of using transliteration is that pinyin will make these words unique to TCM more recognizable, which will make these words more widely recognized by the public, and more and more people will know, learn and explore TCM. In the seventh edition of Traditional Chinese Medicine Treatment Protocol for COVID-19, transliteration can be used in the translation of some syndromes and prescriptions, such as :

- 气营两燔证

Blazing of both qi and ying pattern^[3]

"气" is a well-known TCM vocabulary. In previous translation explorations, translators finally translated it into pinyin "qi", retaining the characteristics of TCM to the greatest extent. "营" and "气" are both theoretical terms in TCM. It means "subtle substances produced by diet", which is similar to the English word "nutrition". However, because "营" is an older term in TCM, its meaning has been given a deeper meaning other than "nutrition", which is not covered by nutrition, so the translation into nutrition is not exact. The author thinks that the more appropriate method here is transliteration, which is directly translated into pinyin "ying", so that it can retain the original connotation just like "qi".

- 肺脾气虚证

Lung-spleen qi deficiency pattern^[3]

- 气阴两虚证

Deficiency of both qi and yin pattern^[3]

"阴" is the same as "气" and "营", both of which are unique vocabulary of TCM. Here it refers to the yin fluid in the body. The author believes that here is the same as the above two places, and transliteration should be used to translate characteristic words.

清肺排毒汤 Qingfei Paidu Decoction^[3]

化湿败毒方 Huashi Baidu Formula^[3]

疏风解毒胶囊 Shufeng Jiedu Capsule^[3]

The name composition of the above three prescriptions is "effect + dosage form"; in the TCM protocol, the translation of the name of the drug and the name of the prescription is very different from the drug instruction. Drug instructions are often literal translations, which express the efficacy of the drug most directly, so that people can

understand the drug the fastest and find the drug that suits them. However, for the translation of the protocol, we need to analyze specific issues in detail. Skopos theory guides us to analyze the purpose before translating. The TCM protocol faces foreign medical workers and all people interested in TCM. Therefore, they all have a certain cultural knowledge of TCM and a certain degree of understanding of Chinese herbal medicine. At this time, it is not necessary to translate the name of a medicine directly, but directly to use transliteration, so that the reader can be most effectively told which prescription is used.

Secondly, the efficacy language of drugs is usually more complicated, the translated language will also become lengthy, and the transliteration will be more concise and clearer than the literal translation.

Transliteration can also avoid possible mistranslations that may occur in literal translation. Traditional Chinese medical terms are usually very concise and abstract. If the translator does not have strong knowledge reserves and blindly translates literally, it may appear that the translation seems reasonable, but actually distort the original meaning, thus misleading the readers.

Finally, transliteration can maintain the nationality of the language. Pinyin is highly recognizable and can impress people who are not familiar with TCM, knowing that these useful prescriptions are the achievement of TCM. Demonstrating the uniqueness of TCM and strengthening the recognition of it are also very important for the external communication of TCM.

藿香正气胶囊 Huoxiang Zhengqi Capsule^[3]

金花清感颗粒 Jinhua Qinggan Granule^[3]

连花清瘟胶囊 Lianhua Qingwen Capsule^[3]

These three drugs are different from the above three. The names of these three drugs are composed of "component + effect + dosage form". If literally translated, the format of "dosage form of component for effect" will be used. But for the same reasons as above, these three also use transliteration.

3.3 Annotation in Transliteration

In the seventh edition of the TCM protocol, all basic prescriptions and recommended formulas are traditional Chinese herbal medicines, and the names of them cannot be expressed in English. At this

time, we can only use transliteration to deal with these Chinese herbal medicines. But although there is no corresponding vocabulary in English, we can find it in Latin. In the protocol, the translator used the translation strategy of pinyin plus Latin annotations when translating the names of Chinese herbal medicines, for example :

炙甘草 Zhi Gan Cao (Glycyrrhizae Radix)^[3]

生石膏 Sheng Shi Gao (Gypsum fibrosum)^[3]

射干 She Gan (Belamcandae Rhizoma)^[3]

贯众 Guan Zhong (Cytromii Rhizoma)^[3]

苦杏仁 Ku Xin Ren (Armeniaca Semen)^[3]

羌活 Qiang Huo (Notopterygii Rhizoma seu Radix)^[3]

This will not only enable the names of herbs to retain the characteristics of Chinese culture, but also make the translation more accurate and rigorous, and can shorten the distance with Western readers, especially medical people who are familiar with Latin.

4. THE ENLIGHTENMENT FOR FUTURE TCM TRANSLATION

4.1 Retaining the Original Flavor of Traditional Chinese Medicine

It is not difficult to see that transliteration is widely used by translators in the seventh edition of diagnosis and treatment protocol. For example, "qi" and "yin" are TCM specific words mentioned above by the author. There is no reference and corresponding concept in western medicine for such words, and no equivalent words can be found. In this case, in order to maintain the nationality of TCM terms, translators choose to transliterate them directly. As a matter of fact, most of the TCM translation circles adopt the same translation methods for these TCM specific words. Ruan Jiyuan and Zhang Guangji's *Synopsis of the Golden Chamber of Chinese English Comparison* in the principle of translation of such words is to directly borrow the method of Pinyin. The same translation method is used by Luo Xiwen. At the same time, Li Zhaoguo put forward his own views. He believes that for the English translation of similar TCM specific words, there was no need to convert units, only to retain the most traditional and original characteristics of TCM culture. However, from the perspective of communication, to protect the

nationality of TCM terms means to reduce the acceptability.

So for the English translation of TCM terms in the future, how we can achieve both nationality and acceptance has become a topic worthy of discussion. First of all, we need to have sufficient cultural self-confidence. These characteristic words are unique to our national literature and are our cultural characteristics. Therefore, when faced with a "vocabulary vacancy", we should have full confidence to spread them out in the original and tell the world that this is a cultural symbol unique to our nation. At the same time, we will inevitably face a certain communication dilemma. At this time, we must fully consider the intelligibility and acceptability of readers. The author believes that after translating some special concepts, we can add annotations or supplementary explanations afterwards, so that foreign readers can understand these terms better, and will not be completely incomprehensible. Looking back at the seventh edition of the diagnosis and treatment plan, we will find that the translator did not add annotations to the terms. This is due to the particularity of the diagnosis and treatment protocol. The diagnosis and treatment protocol is different from other TCM classics. If we add notes to each characteristic vocabulary, the entire diagnosis and treatment protocol will appear bloated and redundant, and will not allow people to see the most critical information. Secondly, in the context of the outbreak of the epidemic, any translation work is very urgent. Translators need to complete the translation work in a short time. Adding annotations will undoubtedly take time and reduce efficiency. But while we are studying the diagnosis and treatment protocol, we can still reflect on ourselves and get some enlightenment, that is, the transliteration and annotation method can provide a new idea for the future translation of TCM. Such accumulation will eventually increase the potential for the spread of TCM culture overseas, and make it more acceptable and recognized by Western readers. The author believes that eventually concepts such as "yin", "yang", and "ying" will become common vocabulary in Western culture, which will become a new normal.

4.2 Promoting the Standardization of TCM Terminology

There are still some problems in the translation of a large number of medicines names and proprietary Chinese medicine names. For example,

for the translation of "莲花清瘟胶囊", Shelley Ochs' translation is Lianhua Qing Wen Capsule, and Beijing University of Chinese Medicine's translation is Lianhua Qingwen Capsule. The translation of "清肺排毒汤" is not uniform, they are Qing Fei Pai Du Tang and Qingfei Paidu Decoction respectively. For another example, Shelley Ochs translated "化湿败毒方" into Hua Shi Bai Du Tang, and Beijing University of Chinese Medicine translated it into Huashi Baidu Formula. It can be seen from this that the two sides have different views on the translation of words such as "汤" and "方" that indicate drug dosage forms. Shelley Ochs believes that the Chinese form should be retained and pinyin should be used. Experts from Beijing University of Chinese Medicine believe that it should be translated into English equivalents. However, it has to be admitted that multiple versions will cause confusion or misunderstandings among target language readers about the quality and efficacy of drugs. In order for TCM to enter the international market and increase its influence and international discourse power, it is necessary to do a good job of translation of TCM terminology to promote its external dissemination. Therefore, it is urgent to promote the standardization of Chinese medicine names.

4.3 Strengthening the Construction of the Talents for Foreign Exchange of TCM

In this foreign exchange of TCM for COVID-19, we have achieved certain results, but overall, it is still relatively limited. Both in terms of the quantity of translations and the content of translation, there are major limitations. For example, the problem of inconsistent terminology in TCM mentioned above will affect the quality of translation and hinder the spread of TCM to the outside world. This undoubtedly gives a hint to the domestic TCM industry, that is, to cultivate leading TCM talents and strengthen the construction of Chinese medicine foreign exchange talent teams. We must realize that only by advocating the deepening of education and teaching reform to increase the training of international TCM talents, exploring the training model of TCM nationalization talents, and accelerating the construction of international TCM education standards, can we truly solve the current lack of compound TCM translators. First of all, the government should introduce corresponding training policies, and vigorously promote TCM English to enter the campus. Second, TCM schools

should establish a more scientific education and teaching system and create a syllabus that is more suitable for cultivating external communication talents. TCM colleges and universities can also set up foreign language undergraduate majors and postgraduate master programs with TCM characteristics, so that students can lay a solid foundation in foreign languages while also having a deep background knowledge of TCM. Finally, both the government and the universities of TCM should intensify their efforts to promote the external communication of TCM, guide more students to take on the important task of disseminating our country's excellent culture, and more actively participate in the great cause of external communication of TCM.

5. CONCLUSION

To spread and promote the culture of TCM to improve the status and influence of TCM in the world, translators could use methods such as transliteration, literal translation, and free translation. In this translation practice for COVID-19, most translators used the above translation strategies. In the seventh edition of the diagnosis and treatment protocol, except for some words that are totally equivalent in Chinese and English, the translators have adopted the literal translation method for the more significant "five-character syndrome", which not only retains the characteristics of TCM, but also improves the efficiency and accuracy of the translation. For the unique vocabulary of Chinese medicine such as "yin yang", it is more appropriate to use the transliteration method, because it can retain the cultural connotation of TCM. In addition, the use of transliteration of drug names can also make the translation concise and clear. Pinyin is often used in transliteration, which can help to form a new cultural vocabulary of Chinese medicine, make people remember Chinese medicine, and help the spread of it. Finally, for the translation of the names of medicinal materials, the Latin names are also given along with the transliteration, which helps to narrow the distance with Western readers. In short, the TCM diagnosis and treatment protocol for COVID-19 under the guidance of Skopos theory can not only make Western readers understand to the maximum extent, but also convey the most original things of TCM, and imprint TCM with a profound Chinese culture. At the same time, the translation study of the diagnosis and treatment protocol has also brought us enlightenment. First of all, we must form an awareness that when

translating TCM, we must pay attention to retaining the original taste of it and maintaining the nationality of the language, but we must also take into account the readability and acceptability of the translation. In addition, we should also promote the standardization of TCM terminology, so as to avoid unnecessary misunderstanding and confusion, and further enhance the international influence of TCM. Finally, the government should also strengthen the construction of TCM foreign exchange talents, and cultivate a group of compound talents with a solid foreign language foundation and profound knowledge of Chinese medicine, so as to provide sufficient reserves for TCM to go to the world. If we can seize these opportunities, TCM translation will surely develop vigorously in the future.

AUTHORS' CONTRIBUTIONS

Ruyi Song wrote the manuscript, Ya Liu contributed to revising and editing.

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