



Study on English Translation of Traditional Chinese Medicine Terminology from the Perspective of Chesterman's Translation Ethics

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Abstract. Traditional Chinese medicine, a subject with strong Chinese cultural characteristics and philosophical concepts, is a shining star of human civilization. The acceptance of traditional Chinese medicine worldwide is directly influenced by the translation of TCM terminology. Under the guidance of Chesterman's translation ethics, this paper analyzes the categories of TCM terminology according to various translation tasks and discussed the application of Chesterman's five translation ethics in TCM terminology. The result shows that Chesterman's five translation ethics can help to improve the translation quality of TCM terminology and promote the international communication of traditional Chinese medicine.

Keywords: Traditional Chinese Medicine Terminology; Chesterman's Translation Ethics; Ethics Models; Translation Strategies

1 Introduction

Since the Reform and Opening up in 1980s, the communication and integration between traditional Chinese medicine and Western medicine have also become increasingly frequent. However, there is no uniform principle for the translation of TCM, nor is there a translation standard for TCM terminology, which leads to the uneven quality of different translated versions, hurdling the international communication of traditional Chinese medicine. Li Zhaoguo proposed that, due to the translator's lack of clear understanding of the translation principles of TCM terminology, the translation of TCM terminology is usually of low quality, and its current situation can be divided into three main aspects: confusing translation, lengthy translation and unclear interpretation.[1] Based on his own practice of medical translation, he believes that the translation of TCM terminology should follow the following basic principles of naturalness, simplicity, nationality, back-translation and prescriptiveness.

In recent years, there are also many translators and Chinese medicine experts who have conducted a lot of researches on the translation of TCM terminology, including the principles and strategies of the translation of TCM terminology, standardization of

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TCM terminology and corresponding countermeasures, Chinese translation of Western medicine terminology and its inspiration for the translation of TCM terminology, translation and dissemination of TCM terminology and Chinese medicine culture, the construction and application of bilingual corpus of TCM terminology, as well as the adoption of some relatively mature translation theories to solve the problems in the translation of TCM terminology. For instance, in *The Translation Strategies of TCM Terminology*, Yang Di put forward that translators should conduct in-depth research on TCM terminology to fully understand their content. Translation methods such as literal translation, liberal translation, transliteration, and morpheme should be adopted flexibly according to different contexts to ensure the scientificity, accuracy and completeness of their translation.[2] Jiang Haiping and Wu Jun explored the standardization and unification of English translation of TCM terminologies from three aspects of TCM terms including metaphors, TCM terms consistent or partially consistent with Western medical expressions and TCM terms with transliteration with annotation.[3] Besides, foreignization is proposed to be adopted in the translation of TCM terminologies from the perspective of national image in order to enhance international discourse of TCM and construct China's national image more effectively.[4]

The aforementioned researches shows that most researches on TCM terminology focus on translation strategies or standardization of TCM terminology from a certain perspective, or analysis on translation skills from the grammatical structure and linguistic structure of those terminologies. Obviously, translation theories are seldom adopted as a guidance for TCM terminology translation. Different from previous researches, this paper discussed the translation of TCM terminology under the guidance of Chesterman's translation ethics. The five models of his translation ethics, which highlight ethics, values and norms, were reviewed and the characteristics of TCM terminology were analyzed. Under the guidance of Chesterman's translation ethics, translators could decide which kinds of ethics to adopt so as to flexibly choose their translation strategies and skills.

2 Five Models of Chesterman's Translation Ethics

Translation ethics was first advanced by French philosopher and translation theorist Antonie Berman in 1980s in response to "ethnocentrism", which has drawn great attention from the field of translation theory. It was then researched and developed by Anthony Pym, Lawrence Venuti and Andrew Chesterman from different perspectives.

Pym explicitly states that ethics has become a hot topic in cross-cultural analysis, focusing on "translator's ethics" in translation.[5] Furthermore, by comparing the two translation strategies of "foreignization" and "domestication", Venuti puts forward the idea of translation ethics characterized by "resistance" and "difference". He advocates the "ethics of difference" that preserves foreign cultures and discourages ethnocentric tendencies.[6] Based on the previous researches, Chesterman highlights "translator's ethics" in the process of translation, which refers to the set of accepted principles according to which translation should be done (and, *mutatis mutandis*, interpreting),

and hence the norms governing what translations should be like.[7] Among those researches on translation ethics, Chesterman's researches are more comprehensive and profound in translation field. In his Proposal for a Hieronymic Oath, five kinds of translation ethics were concluded, which are ethics of representation, ethics of service, ethics of communication, norm-based ethics, and ethics of commitment, aiming to offer guidance to translators under different translation tasks.

By ethics of representation, it means that the meaning of the original text should be conveyed without adding, omitting or changing any information in the process of translation.[7] It highlights fidelity and truth, requiring translators to view the original text as classic. Translators should seek the maximum degree of reciprocity and fidelity to reproduce the content of the original text and the author's intention of writing as well as the writing style of the original text. However, ethics of service, which attaches importance to the function of translation, regards translation as a commercial activity that translators should satisfy the client and the translation should be acceptable to the readers.[8] In this regard, the translator is fully empowered subjectivity as long as he/she could achieve the expected purpose.

According to ethics of communication, cultural communication between the source language and the target language is significant on the basis of regarding translation as a cross-cultural communicative activity. Thus, the translator should choose appropriate translation methods to interpret the source text in order to achieve the exchange between the two languages. In the light of norm-based ethics, translators must comply with social and ethical norms to make sure the translated text can be accepted by the target readers as well as their culture and society. However, norms vary in different society and cultural background. Thus, the norms of translation production should be the ones required by current mainstream standards of the target language.[9] Additionally, as a compliment to his previous research, Chesterman concluded ethics of commitment as the fifth model, which regulates translators to be excellent, ethical and responsible. The translated text must reflect the translator's professional competence in that translator is a profession with its own specific regulations and obligations.

Based on aforementioned, combining diversified factors such as the needs of the client, the target of translation, social and cultural norms, the target reader and professional ethics, translators could have new understandings on their translation activities so as to adopt more appropriate translation strategies.

3 Characteristics of TCM Terminology

As a ancient discipline with a long history, traditional Chinese medicine has its unique theoretical system. In order to promote the dissemination of TCM around the world, it is especially important to enhance the quality of TCM translation. Thus, the linguistic, literary and cultural characteristics of TCM terminology need to be analyzed and understood.

3.1 Thinking Method of “The Analogy of Xiang”

Originated from The Book of Changes, the term “the analogy of Xiang (phenomenon)” is a traditional Chinese correlative thinking mode, which was utilized to establish associations among things in order to comprehend them. Through this thinking method, concrete phenomenon is used to compare and analogize the abstract object of study, aiming to study the interactions between things and comprehend the rules of the nature. It's common to use specific things in nature as analogies to describe human diseases or bodily functions in TCM terminology. For example, plants or geographical features are often adopted in TCM to describe human organs or acupuncture points, such as “舌苔” (fur of tongue), “命门” (life gate), “血海” (blood sea), and “涌泉” (gushing spring). In addition, TCM compares the viscera of the human body to a palace. In this regard, the viscera are compared to different positions according to their locations and functions, such as the heart is usually regarded as the “king”, while the liver as the “general”.

3.2 Literary Distinctiveness

Developed in ancient times, TCM books and classics were written in ancient Chinese, so TCM terminology is characterized by a strong classical culture. In TCM, sometimes a character is a word, such as “气”(qi). The four-character form of the ancient Chinese is very common, and rhetorical devices are often used for logical coherence. For example, “母病及子, 子病及母”. Rhetoric devices like exaggeration are also wildly used in TCM terminology. For instance, when describing the efficacy of a cure, “起死回生, 妙手回春” (bring a patient back to life) is often adopted.

3.3 Deep Bond with Ancient Chinese Philosophical Thoughts

Deeply influenced by ancient Chinese philosophical thought, TCM is closely linked to the principles of yin and yang as well as the five elements. Besides, through the worldview of simple materialism, it also utilizes the balance of yin and yang and the interplay of the five elements to describe and explore the human body. For example, “木郁化火” (Liver depression generating fire.) uses the elements of “wood” and “fire” to describe syndrome of liver depression result from liver-qi stagnation. These philosophical words consist of an extremely important part of TCM terminology, and it is necessary to have a certain understanding of ancient Chinese philosophical thought if translators attempts to enhance the quality of TCM terminology translation.

3.4 Qualitative Descriptions

Qualitative descriptions refer to drawing conclusions in terms of the general attributes and trends of objects based on observation and experience. Originated from the extensive practices of the ancient Chinese medicine practitioners and the labouring people, TCM usually describes or makes judgments of diseases based on their general

characteristics, symptoms and attributes, rather than precise data or specific calculations, resulting in qualitative descriptions rather than quantitative descriptions of TCM terminology. For example, TCM differentiates dyspnea into “实喘”(sthenia dyspnea) and “虚喘”(dyspnea due to deficiency) according to the patients' diverse symptoms. Specifically, patients with symptoms such as cough, chest pain and fever will be diagnosed as “实喘”, while those with symptoms such as fatigue, dizziness and pallor will be diagnosed as “虚喘”.

3.5 Polysemy

In contrast to Western medicine, where the vocabulary is clear and a term often denotes one subject, the meanings of TCM terminology are often very rich. In different contexts, a TCM terminology may have different meanings. For example, the term “血室” can refer to the liver, the meridians, or the uterus. The specific meaning of each TCM terminology can only be analyzed in a specific context. In addition, due to the complexity of the causes of diseases, TCM terminology need to be analyzed on the basis of different symptoms in order to prescribe the right medicine. For example, the corresponding disease of “郁症” in Western medicine may be “neurasthenia” or “hysteria”.

4 English Translation of TCM Terminology Based on Translation Ethics

In terms of different translation tasks as well as the linguistic and cultural characteristics of TCM terminology, this paper divided TCM terminology into five categories — specific expressions, culture-loaded TCM terminology, TCM terminology consistent or partially consistent with Western medical expressions, widely-accepted TCM terminology, and TCM terminology used for different levels of target readers, and the application of Chesterman's five models were explored in TCM terminology.

4.1 Specialized Medical Expressions

In the long term practice of diseases treating, the ancient Chinese and doctors have accumulated rich experience, resulting in highly specialized and practical system of traditional Chinese medicine. Ancient Chinese doctors named the diseases, syndromes and herbs they encountered according to their own knowledge and experience. Thus, many specialized medical expressions and terminologies were coined, and there are not completely consistent expressions in Western medicine. Moreover, these terms generally contain no cultural connotation or metaphors, and are the most intuitive generalization of medical things such as diseases or symptoms.

In Table 1, TCM terminologies such as “休息痢”, “肾虚”, “风寒咳嗽”, “痛痹”, “骨痿” are specialized medical expressions named after the syndromes of diseases

without any metaphors or cultural meanings. In order to translate this kind of TCM terminology, the translator should follow the ethics of reproduction to accurately convey the information contained in them. Therefore, translators are suggested to apply the strategy of literal translation so as to avoid missing information that could lead to serious consequences such as wrong diagnosis or treatment failure.

Table 1. Translation guided by the ethics of representation.

肾虚	kidney deficiency
多梦	excessive dreaming
痛痹	pain-stagnation
骨痿	bone-flaccidity
风寒咳嗽	wind-cold cough

4.2 Culture-loaded TCM Terminology

With a long history, TCM has been deeply influenced by traditional Chinese culture, especially by the ancient Chinese philosophical concept of simple materialism in the process of its development and evolution. As a result, TCM terminologies are characterized by distinctive Chinese culture elements, and may even contain some allusions and metaphors. In this regard, for foreign readers without the background of Chinese history and culture, these terminologies are difficult to understand. Furthermore, not only will it result in long and cumbersome translation, but also low readability if the translators translate the historical allusions or cultural symbols contained in culture-loaded TCM terminology with the principle of complete “faithfulness”. However, if the translator completely ignores the cultural elements in such terminology, the information and the cultural characteristics of TCM terminology will be lost. In light of this, translators should follow the communication ethics to find the balance between information and culture, acting as a communicator between two different languages and cultures. Thus, it is suggested that the translator adopt the strategy of liberal translation.

For instance, “营卫不和” in Table 2 describes the pathology of fever and sweating, with “营” referring to a nutritive qi traveling through the meridians and “卫” referring to a defensive qi traveling outside the meridians. For foreign readers who have not read any TCM classics without Chinese cultural background, it is suggested to the translator that liberal translation instead of transliteration should be adopted. The translated version of “nutrient qi and defense qi” can accurately convey the information in the original text and achieve the purpose of cross-cultural communication. Moreover, in TCM, “土” and “金” are analogous to “spleen” and “lung” respectively, and it is obvious that the translator should also adopt the strategy of liberal translation to directly indicate the referent of analogy. If “培土生金” is translated as “strengthen soil to nourish gold” with the strategy of literal translation, it will not only confuse doctors and patients, but also hinder the dissemination of TCM.

Table 2. Translation of culture-loaded TCM terminology guided by ethics of communication.

七情	seven ways of pharmaceutical compatibility
苗窍	sprout orifices for reflecting the change of qi, blood, yin and yang[10]
培土生金	strengthen spleen to nourish lungs[10]
木喜条达	thrives by orderly reaching[11]
营卫不和	Disharmony between nutritive qi and defensive qi.

4.3 TCM Terminology Consistent with Western Medical Expressions

Both as highly practical subjects, TCM and Western medicine study the physiological functions and pathological phenomena of the human body. Thus, there are many common points in TCM and Western medicine in terms of the perception of the human body, pathological symptoms and many diseases. Especially, the translation of terminologies describing human body parts can directly borrow Western medical terminologies with the same meaning, such as “肾” (kidney) and “喉” (throat). For example, in Chinese dictionary, “产后恶露” in Table 3 means “产后随子宫蜕膜脱落, 含有血液、坏死蜕膜等组织经阴道排出”, while “lochia” refers to “substance discharged from the vagina (cellular debris and mucus and blood) that gradually decreases in amount during the weeks following childbirth”. The two terminologies in different languages convey similar information, thus “lochia” is a equivalent translation to “产后恶露”, there being no need to create a new expression in English. And the other four examples in Table 3 are similar to the first one. Therefore, for such TCM terminology consistent with Western medical expressions, translators should comply with norm-based ethics and directly adopt the corresponding expressions that already exist in Western medicine to make them easier for foreign readers to understand.

Table 3. Translation under the guidance of norm-based ethics.

产后恶露	lochia
闭经	amenorrhea
肠痈	appendicitis
麻疹	measles
心悸	palpitation

4.4 Widely-accepted TCM Terminology

With the deepening of cultural exchanges between China and foreign countries, there are increasingly more Western medical scholars or Chinese culture enthusiasts who are interested in TCM terminology, theories and classics. With the long-term unremitting efforts of Chinese and foreign translators and medical experts, the dissemination of TCM overseas has made great progress. In table 4, concepts such as

“气”(qi) and “阴阳”(yin and yang) have been spread widely abroad. Even for foreign readers who have not been exposed to Chinese medicine culture, or even those who have little contact with Chinese culture, such expressions are normal in their daily lives, movies, books, etc., with high acceptance. When translating such terms, it is suggested for the translator to retain their prevailed transliterations. Moreover, as traditional Chinese medical treatments and health care methods such as acupuncture, Chinese massage and medicinal wine are becoming increasingly popular among foreigners, expressions such as “留针”, “药酒” and “正经” have become more widely-accepted than before. However, the acceptance of those terminologies are not as high as that of “气” and “阴阳”, and their transliterations are more difficult for target readers to understand. Thus, it is suggested to adopt the strategy of liberal translation.

There is no unified standard for TCM terminology translation for a long time, resulting in several different translated versions for a TCM terminology, which will hinder foreign readers from learning TCM terminology and the development of TCM overseas. On this basis, many scholars have actively promoted the standardization of TCM terminology translation and compiled books to enhance the quality of it. For example, in 2007, the World Health Organization and the State Administration of Traditional Chinese Medicine jointly published “WHO International Standard Terminologies on Traditional Medicine in the Western Pacific Region”.^[12] Thus, translators should make efforts to promote the process of standardization of TCM terminology, consult more published medical terminology dictionaries or standards and respect the choice of foreign readers under the guidance of norm-based ethics in terms of widely-accepted TCM terminology.

Table 4. Translation of widely-accepted TCM terminology guided by norm-based ethics.

气	qi
阴阳	yin and yang
留针	retention of needle
药酒	medical wine
正经	main meridian

4.5 TCM Terminology Used for Different Levels of Target Readers

Traditional Chinese medicine has received widespread attention not only in China, but also from international students in China, foreign people who are interested in TCM, Western medicine institutes, foreign TCM institutes and international TCM forums. On this basis, translators should comply with the ethics of service according to different levels of target readers, and communicate the translation requirements with the client to know about their target readers' level of TCM background knowledge, aiming to provide acceptable translated texts to those readers. Just as shown in Table 5, for target readers without Chinese and TCM culture foundation, strategies of liberal translation or liberal translation with annotations are more

advisable to help readers understand the meaning; however, for target readers with higher Chinese and TCM culture foundation, it is suggested to adopt literal translation or transliteration in that those readers have already learned about basic TCM knowledge.[13]

Table 5. Translation for Different Levels of Target Readers guided by service ethics.

	For target readers without Chinese and TCM culture foundation	For target readers with higher Chinese and TCM culture foundation
推拿	traditional Chinese massage	Tuina
三焦	triple energizers[13]	Sanjiao
桂枝汤	Ramuli Cinnamomi Decoction	Guizhi Decoction
风寒湿	a combined pathogen of wind, cold and dampness	wind-cold-dampness
后天之气	qi that transformed from food inhaled in lungs	post-natal qi

5 Conclusion

This paper analyzes the characteristics of traditional Chinese medicine terminology and classifies Chinese medicine terminology into five types according to the linguistic and cultural characteristics of the TCM terminology and the acceptance of the target readers, exploring the application of Chesterman's five modes of translation ethics in the English translation of TCM terminology. For different types of TCM terminology, translators should comply with different types of translation ethics, and give play to their subjectivity in order to produce translations that can correctly and effectively convey the information of TCM terminology and be acceptable to target readers. In light of this, Chesterman's translation ethics provide important guidance to the enhancement of the quality of TCM terminology translation, which is conducive to promoting the development and dissemination of TCM worldwide and making TCM benefit the people all over the world.

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References

1. Li Z. G. (1996). On the Translation Principles of Traditional Chinese Medicine Terminology. *Shanghai Journal of Translations for Science and Technology*, 3: 31-33. https://kns.cnki.net/kcms2/article/abstract?v=3uoqIhG8C44YLTlOAIiTRKjKpgKvIT9NkZ NmQN04kSVqdRSZyyc8_zjpcRf---WTj5bTy_BESDGGLf4lesGgcCTCREyxgO-as&unip latform=NZKPT

2. Yang D. (2015). The Translation Strategies of TCM Terminology[J]. *Journal of Hubei University of Education*, 2015, 32(05): 120-121. https://kns.cnki.net/kcms2/article/abstract?v=2KdPcD7ewrQC1tb0lOt1ktRJZuhoJEiXeC-DL-n9uKHFIRN16P9TG6p-KLi-dDqbzENWZF_wrfbiuocWaeAUiHBP5z11d5sQH5pZ YqIBRYsN1vmROMgncM77YSTAjsR7pAqmJI20YXeZzVYInGbIQ=&uniplatform=NZKPT&language=CHS
3. Jiang H. P., Wu J. (2019). Standardization of English Translation of Traditional Chinese Medicine Terms. *Chinese Science & Technology Translation Journal*, 32(01): 5-8. DOI:10.16024/j.cnki.issn1002-0489.2019.01.002.
4. Jiang J. B. (2021). Research on Translation Strategies of Terminologies of Traditional Chinese Medicine from Perspective of National Image. *Journal of Basic Chinese Medicine*, 27(11): 1802-1805. DOI:10.19945/j.cnki.issn.1006-3250.2021.11.027.
5. Pym, A. (2001). Introduction: The Return to Ethics in Translation Studies[J]. *The Translator*, 7(2): 129-138.
6. Tao Y. (2020). Review and Assessment of Translation Ethics. *Foreign Language Education & Research*, 8(02): 54-60. DOI:10.16739/j.cnki.cn21-9203/g4.2020.02.009.
7. Chesterman, A. (2001). Proposal for a Hieronymic Oath. *The Translator*, 2, 139-154. <https://doi.org/10.1080/13556509.2001.10799097>
8. Guo, P. Y., Yang, M. (2019). English Translation of Chinese Tea Terminology from the Perspective of Translation Ethics. *Open Journal of Modern Linguistics*, 9, 179-190. <https://doi.org/10.4236/ojml.2019.93017>
9. Guo, P. Y., Chen, J. H. (2021). Study on Translation Strategies of News Headlines from the Perspective of Chesterman's Translation Ethics. *Open Journal of Modern Linguistics*, 11, 520-528. <https://doi.org/10.4236/ojml.2021.114039>
10. Wiseman, N. (2021). Analysis and Analogy in the Translation of Chinese Medicine: Making Sense of TCM Theory for Beginners[J]. *Chinese Medical Literature and Culture*, 2021(01): 73-82. https://kns.cnki.net/kcms2/article/abstract?v=2KdPcD7ewrSNeAP_yhwpFSqbKsFW1eBq nBx7AgYGTCSjWxvZqakxqZ3i83ovHqCQ2VwQ79Bhg7GpOwGvE7i7-HITwwxGqs6 HMTbMIN7lBHfOwBoMcRNGZhhXXz9nzwhoV4yvabt6qEY=&uniplatform=NZKPT&language=CHS
11. Tan W. G. (2013). On the Translation Strategies of TCM Terms. *Fudan Forum on Foreign Languages and Literature*, 1: 123-128. https://kns.cnki.net/kcms2/article/abstract?v=3uoqIhG8C44wp2hfVlbnleNvEqg4RtCv9 vPrf2sA9obOZjgOEmIDsc7FfXZTbX6ap6gTFedqp_POHl45w2z65JDwiZRVHl&uniplatform=NZKPT
12. Zhou W. (2015). Translation Ethics and the Translation of Traditional Chinese Medicine Terms. *China Education of Light Industry*, 2: 21-23. DOI:10.3969/j.issn.1673-1352.2015.02.006.
13. Chen Y., Huang Z. L. (2021). Study on Li Zhaoguo's Concept of Foreign Language Translation of Traditional Chinese Medicine. *Chinese Journal of Integrated Traditional and Western Medicine*, 41(01): 112-115. https://kns.cnki.net/kcms2/article/abstract?v=3uoqIhG8C44YLTIOAiTRKibYiV5Vjs7iy_Rpms2pqwbFRRUtoUImHcoQvkIdER8II7H3z8NKJOCK60l7cxlv1quT2vmnzArB&uniplatform=NZKPT

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