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## POLYEQUIVALENCE AND STORAGE CONCEPTUAL UNIT OF CHINESE TERMINOLOGY

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**Annotation:** The theory of traditional Chinese medicine is totally different from that of modern medicine and has a unique system of its own. Some of the terms are rather difficult to express in other languages, nor is it easy to find an exact translation of the original. Some words that convey the concept of the Chinese terms convey it only in part.

**Key word:** Medical concepts, ȳın-y'ang (阴阳), p'ı (皮), ideograms, xi`ang p'ı (象皮), s̄ang b'ai p'ı (桑白皮), hu'ang (黄) and q̄ıng (请), Chinese medical concepts, English and Chinese terminology.

### ПОЛИЭКВИВАЛЕНТНОСТЬ И СОХРАНЕНИЕ КОНЦЕПТУАЛЬНОЕ ЕДИНСТВО КИТАЙСКОЙ ТЕРМИНОЛОГИИ

**Аннотация:** Теория традиционной китайской медицины полностью отличается от теории современной медицины и имеет уникальную систему. Некоторые из терминов довольно сложно выразить на других языках, и нетрудно найти точный перевод оригинала. Некоторые слова, которые передают понятие термина «китайский», передают его лишь частично.

**Ключевые слова:** Медицинские концепции, y-in-y'ang (阴阳), p'i (皮), идеограммы, xi'ang p'i (象皮), s-ang b'ai p'i (桑 白皮), hu'ang (黄) va q-ing (清), китайские медицинские концепции, английская и китайская терминология.

## XITOY TERMINOLOGINING POLIEKVIVALENTLIGI VA SAQLASH KONSEPTUAL BIRLIKLIGI

**Annotatsiya:** An'anaviy xitoy tabobati nazariyasi zamonaviy tibbiyot nazariyasidan butunlay farq qiladi va oʻziga xos tizimga ega. Ba'zi terminlarni boshqa tillarda ifodalash ancha qiyin va asl nusxaning aniq tarjimasini topish qiyin emas. Xitoy terminlari tushunchasini bildiruvchi ba'zi soʻzlar uni faqat qisman ifodalaydi.

Kalit sozlar: tibbiy tushunchalar, ȳın-y´ang (阴阳), p´ı (皮), ideogrammalar, xi`ang p´ı (象皮), s̄ang b´ai p´ı (桑 白皮), hu´ang (黄) va q̄ıng (请), xitoy tibbiy tushunchalari, ingliz va xitoy terminologiyasi.

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Chinese and English, as all languages, map the world and human experience in different ways. Illustrative of this is 皮 p´ı, which has three correspondences in English, skin, hide, bark. The English words have a specificity that is reflected in distinct collocations: a patient's skin, the hide of an ox, and the bark of a tree. By comparison, \*a patient's hide and \*skin of a tree are unnatural expressions, while skin of an ox is acceptable but by no means the rule. Similarly, 府 f`u corresponds to abdomen (of a human patient) and to belly (of an animal), where belly in the medical context would be out of place since it expressively marks voluminousness. Again, \_ chˇan (term 140) has several equivalents in English (in the medical context), birth, partum, delivery, presentation, whose choice is collocationally determined (e.g., postpartum, difficult delivery as opposed to \*post delivery and \*difficult partum). In terminological translation, polyequivalence is unavoidable, but it nevertheless has to be kept to a minimum.

The polyequivalence frequently observed in LGP terms becomes problematic when LGP terms enter the LSP domain and take on new connotations. This problem

arises in the translation of colours in Chinese medicine. At least two of the colour words found in Chinese medical texts, 黄 hu´ang and 请 q̄ng, have wider meaning than any corresponding English words. The Chinese 黄 hu´ang includes not only colours we call 'yellow', but also ones we call 'brown' (as in 黄仁 hu´ang r´en, 'yellow kernel', i.e., the iris). In LGP translation, it might be quite appropriate to use different words in different contexts, but in Chinese medicine 黄 hu´ang is one of five basic colours that are each associated with one of the five phases. This association may disintegrate if different words are used in English. While the concept of giving birth is not lost when referring to it by different expressions, the notion of the colour associated with the phase earth is lost if 黄 hu´ang is translated by any term other than one used to denote the colour associated withearth (universally yellow) (see Wiseman 1995b: 52–53).

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In the context of polyequivalence, we should mention the problem arising in the translation of terms that have been differently defined by medical scholars in China. As we saw, a number of speculative concepts have been interpreted in different ways. While the translator might be tempted to base his or her rendering of the term on one of these interpretations, the chosen rendering would only be valid when translating texts by writers known to hold to this particular interpretation. For example, 2 血室 xu`e sh`i, blood chamber is variously interpreted as 'uterus', 'thoroughfare vessel' (衝脈 ch⁻ong m`ai), or 'liver'. Any one of these could serve as a rendering in texts only where this is known to be the intended mean ing. Quite often a Chinese writer provides no indication of which interpretation he holds to, so the context does not disambiguate the term, and provides no grounds for choosing any one of the specific interpretations. The solution applicable to all texts is a semantic translation and any interpretation should be reserved for commentary.

Finally, there are some uses of terms that we might consider exempt from the need to preserve conceptual unity. The words 陰 y-in and 陽 y-ang are used in many senses in Chinese medicine, but they are usually always systematically transcribed. Nevertheless, their use in naming the genitals can be regarded as almost purely euphemistic. When 陰 頭 y-in t'ou, lit. 'y-in head', is translated as glans penis, no medical information is lost. The same is true of 陰卵 y-in lu an, lit. 'y-in eggs' (testicles), 陰 吹 y-in chu lit. 'vaginal flatulence' (flatus vaginalis),陰 癢 y-in y-ang, lit. 'y-in itch' (pudendal itch), and 陰 縮 y-in y-in su o, lit. 'y-in shrinkage' (retracted genitals). It should however be noted that earlier in history, as the

M'a-W'ang-Du texts reveal, the y in-nature was of great significance in hygienic practices (Harper 1998: 122).

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