
SPECIFIC PECULIARITIES OF THE LANGUAGE OF MEDICINE IN THE ENGLISH AND THE UZBEK LANGUAGES

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The language of medicine is complex. It consists of general medical, general scientific, highly specialized terms, professionalisms, slang terms that express medical information, participate in the process of cognition, consolidation and transfer of knowledge.

The peculiarity of the language of medicine, as shown by the studies of V.F. Novodranova, E.V. Bekisheva, is as follows:

- internationality (the basis of modern medical English, German, Russian and other languages is the vocabulary of Greek-Latin origin; for example, virus – Virus – virus [uzb]);
- use of terms of other sciences (biology – biologiya, chemistry – kimyo, physics – fizika, etc.) or medicine (genetics – genetika, psychology – psixologiya, psychiatry – psixiatriya, etc.), which confirms the idea of the complexity of the language of medicine in terms of concepts and content [2007].

A characteristic feature of the language of medicine is the change in the meaning of medical terms, the emergence of new terminological units due to the change of one conceptual scheme to another (pneumonia – atypical pneumonia – pnevmoniya- atipik pnevmoniya; influenza – bird flu, swine flu – gripp – parranda grippi, cho'chqa grippi; virus – human immunodeficiency virus – virus – inson immunitet tanqisligi virusi). Consequently, the meaning of medical terms is determined by the entire context of medical knowledge and is transformed with a change in this context under the influence of practice.

The specificity of medicine as a field of knowledge and activity lies in the fact that its concepts are described by sets of terms, words of common language that reflect phenomena, processes associated with the treatment and prevention of diseases. Some of the terms used in the first set pass into it from common vocabulary (foot – to'piq, pen – shprints ruchkasi, infection – infeksiya), other terms are created in the scientific field, including borrowed lexical units, and can be used in parallel (“diabetes” along with “diabetes mellitus” [uzb. “diabet” = “qandli diabet”]), and the presence of some of these synonyms depends on the requirements of deontology (saraton – kanser – neoplasm).

Medical terminology is characterized by an orientation towards the Latin language. The path of the formation of medical terminology based on the Latin language is unique: having ceased to exist as a living language, the Latin language continued another artificial life in a new professional field. Since ancient times, peculiar connections began to take shape between the language of classical Latin, on the one hand, and the language of a special field of knowledge – medical, on the other.

Thus, the continuous development of the language of medicine is due to several factors: 1) the status of the Latin language as the generally accepted language of science and education in antiquity and the Middle Ages; 2) deontological principles, the doctor's desire to hide the real state of things from the patient behind incomprehensible words; 3) the possibility of saving language resources, for example, the term diabetes expresses the conceptual content – a violation of carbohydrate metabolism, in which there is no oxidation of sugar due to insufficient secretion of the hormone insulin by the pancreas.

The specificity of the language of medicine is due to the following factors: it is one of the oldest and at the same time rapidly developing terminological systems; many author's terms function in it, which is a fertile material for studying the influence of extra-linguistic factors, associative links and emotive intentions of the author in the process of term creation; the intensive progress of scientific medical knowledge provides ample opportunities to explore the potential abilities of terms.

The next feature of medical terminology, as noted in the previous paragraph, is its openness. In recent decades, hundreds of Anglicism terms created on the basis of Greek-Latin term elements have joined the Uzbek medical terminology system through the Russian one, for example, *insulin*, *insulin pompasi*, *podiatrist*, *skrinig*, *manifestatsiya*, etc. This feature of medical terminology is associated with its other essential feature – the mobility of the vocabulary. This determines such processes in terminology as the emergence of neologisms, ambiguous terms, the displacement of obsolete terms, semantic shifts within certain terms, etc. [Бекишева, 2007, с. 49].

The analysis of medical terminology also revealed the problem of determining the status of such language units for special purposes as professionalisms. In the history of terminology, attempts have been repeatedly made to typify it (S.V. Grinev, V.M. Leichik, V.A. Tatarinov, A.V. Superanskaya, S.D. Shelov) [2] [3] [4] [5]. Since professionalisms are understood as variant units of generally accepted terms, and they, like terms, refer to special scientific concepts, it would be legitimate to attribute them to a special stylistic layer of the vocabulary of a language for special purposes, which should be studied, according to V.M. Leichik (2012), within the framework of general and particular terminology. Observation of the functioning of professionalisms in the language provides rich material illustrating the features of the development of the language system. In oral medical discourse, terms and professionalisms are interchangeable, and their use is subject to the pragmatic goals of optimal adequate mutual understanding [2012].

The deepening of medical knowledge occurs through the formation and clarification of terms, which are a reflection and external expression of the mobility of concepts. This implies the need to analyze medical terminology, bringing it to uniformity in line with the new level of science and technology. Without this systematic work, the terminology of medicine will lag behind the changed concepts, so the standardization and unification of terminology should be considered as one of the urgent tasks of modern society.

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