

# THE ROLE OF ENGLISH LANGUAGE IN THE FIELD OF MEDICAL TRANSLATION: ANEEDS ANALYSIS

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Annotation. The paper sets out to illustrate the similarities and differences of direct and indirect equivalency in the medical translation that attempts the research into the translationas closely as possible professional translation that medical students will encounter in their later career as future doctors. The purpose of this article is to analyze the ways of achieving medical translation equivalence at different approaches of the studies of medical translation researches based on the scientifictexts. The article presents the review of translated sentences to determine the notional similarity between original text and its translation. The frequency distribution of the use of equivalent levels is due to professional reasons, the difference in grammatical structures, the variety of collocations, the differences in word order etc. As a result of analysis the most frequently used levels of equivalence in scientific writing style are identified. This is due to the fact that some medical texts part of professional translation, detailed complex sentences are often used, in addition, the original translation contains a large number of terms that have completely different formulations in English.

**Keywords:** equivalence, medical text, professional text, translation, translation methods, future doctor

## **RELEVANCE**

Among the scientific problems in which the interests of the disciplines in the medical high schools cross over, the problem of equivalence in medical translation is relevant in the scientific-theoretical sense, because on the one hand, it has not been studied enough and on the other hand, it is very important for the translation studies, comparative linguistics and linguistics in general.

The problem of equivalence in medical translation occupies a central place in linguistic translation studies since the equivalence of the source and translated

Considering the specifics of medical translation as a linguistic phenomenon occurring within the framework of professional communication, we can state that the achievement of equivalence in practice at different levels will depend on specific of the translator's goals and tasks. From this point of view, the study of medical translation techniques approaching equivalence in translation at certain levels is of practical value in the professional development of medical interpreters.



#### **METHODS**

The present study was carried out within the framework of equivalence norms, studied by Vinay and Darbelnet, Jakobson, Nida and Taber, Catford, House, Baker.In particular, for Pym equivalence is a relation of "equal value" between origin and translated text and can be established onany linguistic level from form to function based on the definition of equivalence as maximum possible linguistic proximity of a translation text to the original text the authors distinguishes equivalence paradigms, by which he means of grammar and pragmatism between a translation and the original: communication purpose, identification, description method, syntactic structures, terminological paradigms [11].

Study of the ways of achieving equivalence has been done on the material of scientific-medical chapters of the textbook "Children traumatology", by U.K. Narzikulov, M.N. Buriev, U.S. Ruzikulovwhich is currently available in English language. Translation of the topics of the textbook into English is carried out at the International Research Center at the Tashkent Pediatric Medical Institut.

This article presents the results of the analysis of all chapters of the textbook and their translations into English: "Examination methods for patients with traumas and orthopedic diseases", "Transportation and transport immobilization", "Treatment of limb bone dislocations", "Fractures at childhood", "Craniocerebral Trauma", "Dysplasia. Congenital Hip Dislocation ", "Congenital Clubfoot ", "Spinal Osteochondrosis", "Deforming Arthrosis" and etc. The total volume of the analyzed material was 18 chapters of the original text. The first chapters deal with the examination of children, adolescents and adults with diseases, deformities and injuries of the musculoskeletal system. The last chapters provide information on immobilization, which prevents damage to blood vessels, nerves, etc., by moving bone fragments and creates conditions for bone fusion. Bone fractures in children often manifest themselves in stressful situations as fearfulness, defiant disobedience or bouts of crying, and in adults as painful shock.

#### **RESULTS**

The analysis of the practical material shows that the translator solved the task of achieving content equivalence in a complex way, resorting to different of translation techniques and approaches. This diversity allows us to apply a level approach to the equivalence and identify linguistic and cultural factors. The difference of equivalence approaches in terms of semantics and communication of lexical units, grammar and syntaxes od sentences, nature and direction of the translated texts were the key indicators in studying medical texts translation. If in the first part of the guide-book example of translated sentences such semantic correspondence were revealed in a great number, in the second part less. As can be seen from the examples, all units are translated word for word, the basic lexical meaning of words is used, the order of words and constructions is preserved. The English version of the translation corresponds to the Russian one in terms of



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grammar structure (the same tenses), syntax structure and is maximally close to the original by its lexical composition. The only change introduced is connected to the difference in the systems of languages: in the first sentence in the Russian version the definite article (the) is absent, as in the system of the Russian language this linguistic phenomenon does not exist. Examples of the achievement of equivalence on the identification level (natural and direct) – the similarity of the semantics of the lexical structures - were found in the last chapters of the guidebook, respectively. In sentences of this kind lexical units do not act as exact substantive analogues of the original lexemes, but they are used in identical syntactic construction, which conveys equivalent semantics. The translation corresponds to the original in the structure and composition of the sentence. Consequently, the choice is left to the discretion of the translator, depending on the specific communicative situation. The achievement of equivalence on communicative level - the way of using professional lexicons in the situation was detected in the last chapters of the guide-book, describing diseases of orthopaedics. The correspondence of the indicated order means the possibility of partial replacement of the professional lexical units and speech constructions by more appropriate units and constructions in the target language. Thus the form of figurative representation of an professional situation remains the same, generality of concepts is kept by semantic paraphrasing at which in the message of translation the basic schemes of the message of the original are transferred. When translating this sentence, the translator used a copy translation, excluding the information that was given in the original. The linguistic illustrations show that the translation deviates from the original in grammatical structures (пункция сустава с введением кислорода - puncture of a joint with the introduction of oxygen) and in the choice of lexical units (одновременное введение газа-simultaneous introduction of gas; наличие свободных тел – the presence of free bodies). At a higher level of equivalence – the description of the situation as a whole (identification of the situation) - the translated correspondence is characterized by the preservation of two informative elements, that is, the translation version retains the same basic concepts and ideas as in the original. Translation at this level - the presentation of the original in other words with preservation of the basic schemes, but with the possibility of freely changing places in the sentence. The situation is described from different sides, nevertheless, the native speaker is able to realize the identity of this situation, as there are sets of statements, perceived as synonymous, despite the fact that the linguistic means do not coincide.

For this reason, the translator must strive for the greatest possible accuracy and correspondence when presenting the original text in the target language. This is why equivalence in the level of communication in the translation of scientific texts is quite rare and in the analyzed material, we have not seen cases of such a translation.



#### **CONCLUSIONS**

The analysis of the chapters of the textbook "Childrentraumatology" allows us to say that medical translations performed at one or another approaches of equivalence, occur with varying incidence. In the studied material the most regular translations are at semantics and communication diversity, at the level of similarity of grammar and syntax, at the level of natural and directional specificities, at the level of formal and dymanic terminology, they do not occur at all at the level of communication purpose. It is worth noting that it is impossible to say that medical translation at any approach is preferable, as each approach of equivalence, having its own terminology base, allows to preserve the content and purpose of communication of the original. Such a distribution of frequency is due to professional linguistic reasons, similarity in grammatical structures of languages, same combinability of words, directional approach in the established order of words and so on. It is worth noting that in the scientific style is much preferable medical translation of the text, as the scientific text, above all, requires clarity in the presentation with the fullest compliance with the translation of the original.

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