

Comments on Nigel Wiseman's *A Practical Dictionary of Chinese Medicine: On the Use of Western Medical Terms in English Glossaries of Chinese Medicine* XIE Zhu-fan, LIU Gan-zhong, LU Wei-bo, et al The First Clinical Medical School, Peking University, Beijing (100034)

Abstract: Mr. Wiseman believes that Western medical terms chosen as equivalents of Chinese medical terms should be words known to all speakers and not requiring any specialist knowledge or instrumentation to understand or identify, and strictly technical Western medical terms should be avoided regardless of their conceptual conformity to the Chinese terms. According to such criteria, many inappropriate Western medical terms are selected as English equivalents by the authors of the Dictionary, and on the other hand, many ready-made appropriate Western medical terms are replaced by loan English terms with the Chinese style of word formation. The experience obtained by translating Western medical terms into Chinese when Western medicine was first introduced to China should be helpful for developing English equivalents at present. However, the authors of the Dictionary adhere to their own opinions and reject others' experience. The English terms thus created do not reflect the genuine meaning of the Chinese terms, but make the English glossary in chaos. The so-called true face of traditional Chinese revealed by such terms is merely the Chinese custom of word formation and metaphoric rhetoric. In other words, traditional Chinese medicine is not regarded as a system of medicine but merely some Oriental folklore.

Key words Nigel Wiseman; *A Practical Dictionary of Chinese Medicine*; English terminology of Chinese medicine; Western medical term

{the above is from the journal, with a few minor corrections}

*Translation and comments (marked 't.n.' – translator's notes): Herman Oving.  
Corrected and edited by Eric Brand.*

Chinese and Western medicine are two different medical systems. However, both systems study human beings. Both systems study the comprehensive science of human physiology and pathology, and the prevention, diagnosis, treatment, and recovery from disease, as well as the preservation of health. They [share] the common nature of academic connotation. Their characteristic differences and common nature are inevitably reflected in the English translation of the terminology of Chinese medicine; that is, [for] one group [of the Chinese terms] it is possible to find corresponding words [that are] identical or similar to [terms from] Western medicine (contemporary medicine) and another group [of the Chinese terms] consists of characteristic concepts of Chinese medicine, [for which] there are no corresponding terms in Western medicine. We believe that [the question of] whether a Western medical term can be used to translate a certain Chinese medical term hinges on having to look at whether or not the two have a corresponding nature of academic connotation. Regarding this question we differ rather greatly from Mr. Wiseman.

In the preface to the second edition of *Practical English Dictionary of Chinese Medicine* (hereafter abbreviated to 'Dictionary') Mr. Wiseman time and again admonishes that a large quantity of employed Western medical terms are unable to accurately transmit the essence of traditional Chinese medicine. However, he did not explicitly point out which Western medical terms can be used and which cannot. Mr. Wiseman did explore this in his English-Chinese/Chinese-English Dictionary (1995). He divides Western medical terms in three categories: the first category consists of Western medical terms that are composed by borrowing words used in common language, like fever, chill, cold, influenza, malaria, leprosy, hiccough, headache, etc. These terms can be used because everyone is able to understand them. Another category refers to terms that Western medicine uses to describe concepts in specific disciplines, for example conjunctivitis, anemia, hypertension, paranasal sinusitis, trichomoniasis etc. "Because there is a wide discrepancy between the specialized knowledge reflected/evoked by these terms and common/general understanding," Mr. Wiseman believes they should be absolutely avoided. The third category is situated between the above mentioned two categories of terms. Examples [of this third category are] enuresis, lochia, tumor, fistula, diphtheria etc. These terms "do not require any specialized knowledge or equipment to be understood or determined" and can also be employed.

When looking at concrete English [translations of] Chinese medical terms, the Dictionary continues to use this method of demarking Western medical terms. If we can speak of any changes, it only is that [the Dictionary] goes one step further in emphasizing a regularized, literal and character-for-character translation and has added a bunch of odd English corresponding terms. For example, the corresponding English term for *fare* 发热 in the 1995 edition is 'fever,' and in the 1998 and 2002 editions, although 'fever' is still used, a translation method is added, namely 'heat effusion'; moreover, the latter is taken to be the principal. There are no major changes in other terms; it looks as if the principles [regarding] the application of Western medical terms are unchanged.

If terms that are "general knowledge" and "do not require any specialized knowledge or equipment to be understood or determined" act as a demarcating and defining standard [to decide] whether or not Western medical terms can be employed, this is 'breaking new ground' and poses problems in scientific, academic and functional aspects. First, there is a lack of standard to determine what is general knowledge. For instance, in the Dictionary, the English

equivalent for *ganglou* 肛漏 is ‘anal fistula’ and the English equivalent for *ganglie* 肛裂 is ‘splitting of the anus’ and not ‘anal fissure’ (note: it is ‘anal fissure’ in the 2004 list). We have no idea how it is determined that ‘fistula’ belongs to general knowledge, while ‘fissure’ exceeds the scope of general knowledge. To raise another example, the English equivalent (corresponding term) for *jing* 痉 is determined as ‘tetany’ and accordingly a series of English Chinese medical terms containing ‘tetany’ or ‘tetanic’ is modeled: *fengjing* 风痉 wind tetany, *hanjing* 寒痉 cold tetany, *gangjing* 刚痉 hard tetany, *jingbing* 痉病 tetanic disease, *jingjue* 痉厥 tetanic reversal, *jiejing* 解痉 resolving tetany, etc.

To [find out] what ‘tetany’ is, allow us to do an investigation of the literature. The *Lingshu* [chapter on] *Heat Disease* points out: “[Patients who suffer from] heat and tetany die. It is [accompanied by the symptoms] lumbar rigidity (*yao fan zhe* = arched back rigidity), tugging and slackening (clonic spasms), clenched teeth and teeth grinding.” In the *Jingui yaolue* [chapter] *Pulses, patterns and treatment of tetany damp thirst* there is a discussion devoted to ‘*jing* 痉’: “[If] the patient [suffers from] generalized heat [effusion] (fever), cold feet, stiffness of the neck and nape, aversion to cold, seasonal hot head/head heat [effusion] (fever), a red face and red eyes, independent shaking of the head, sudden clenching of the jaw and arched-back rigidity, it is tetany disease.” In the *Wenbing tiaojian* (Systemized Identification of Warm Diseases) [chapter] ‘General Discussion on Tetany Disease and Tugging and Slackening’ it says: “*Jing* is expressing [the meaning of] rigid(ity); what later generations called arched-back rigidity.” The *Zhongyi da cidian* (Great Dictionary of Chinese Medicine edited by Li Jingwei and others) [states]: “*Jing*, name of a disease with stiffness of the neck and nape, clenched jaw, convulsions of the extremities and arched-back rigidity as main signs.” In the common teaching material for higher level TCM education programs *TCM Internal Medicine* (1997) the discussion on *jing* diseases reads as follows: “The family/series of *jing* diseases points to common diseases observed clinically, which are principally characterized by stiffness of the neck and nape, convulsions of the extremities, even leading to arched-back rigidity, are triggered by loss of nourishment the sinews and vessels.” From this we can see that from ancient times up to the present there has not changed much in the understanding of *jing* in Chinese medicine. Contemporary Western medicine defines the term ‘tetany’ as follows: it is increased irritability of nerves and muscles triggered by a decreased density of cell-exterior calcium ions, which can be seen in diminishing parathyroid gland function, shortage of vitamin D, and alkalosis. Its characteristics are spasms of the hands and feet, muscular tics, and even laryngeal spasms.

From this can be seen that the clinical manifestations of ‘tetany’ and ‘*jing*’ are not the same. Tetany in general is limited to the hands and feet, in particular the two flexor muscles of the hand. Phenomena such as stiffness of the neck and nape and arched-back rigidity are absent and thus tetany’s corresponding Chinese [term] is *shouzu chunuo* ‘convulsions of the hands and feet’ and not the general *jing* disease. Inconceivable is why a Western medical term with such a specific meaning as ‘tetany’ is persistently chosen in quite a lot of English terms related to *jing*. Could it be that it is because common people without specialized knowledge of medicine all recognize this word? Besides medical dictionaries there are some dictionaries that are not medical specialty [dictionaries], such as the *Oxford Advanced Learner's Dictionary of Current English*, which do not carry this word at all.

Mr. Wiseman may believe some English terms in the Dictionary are not Western medical terms, but in fact this is not the case. The [character] *fa* 发 in Chinese medicine, for example, indicates a welling-abscesses or flat-abscesses on the surface of the body with a rather wide surface area and [related to/indicating] a rather severe disease condition. Mr. Wiseman from



the literal translation method of character-for-character correspondence, because ‘block’ is provided as a corresponding word for *bi* 闭 in the single character tables of Chinese. Thus, although ‘amenorrhea’ corresponds with *jingbi* 经闭, [the Dictionary] emphasizes the use of ‘menstrual block’ to serve as a corresponding term. Actually, using ‘amenorrhea’ is even better to reflect the Chinese medical idea than this kind of literal translation. *Jingbi* 经闭 means that arrival of menstrual periods did not occur yet in women the age of eighteen or, when it has arrived, discontinues again; ‘amenorrhea’ just has this meaning, ‘menstrual block’ firstly makes people think of menstrual blood being blocked and unable to flow out, - this is different from the meaning of *jingbi* 经闭.

{t.n.: If the authors think a criterion like ‘首先让人想到的’ ‘first make people think of’ is fit to evaluate terms, the majority of terms used in ANY specialized language can be dismissed... Furthermore, the PD provides a definition – which is a bit better than the one given here by the way, specifying the duration of the cessation of menstrual periods}

[Since] *Ekou chuang* 鹅口疮 in Chinese medicine is identical to *ekou chuang* 鹅口疮 in Western medicine, why has [the term] ‘goose-mouth sore’ been created as an English equivalent? A particular cause of misunderstanding is that the Dictionary notes that ‘goose-mouth sore’ is also called ‘snow mouth.’ Despite ‘snow’ carrying the meaning of ‘snow-white things,’ nevertheless in Western medicine there already is a very suitable corresponding term, that is, ‘thrush’ is also called ‘white mouth.’ It is unnecessary to translate [this term] once more and come up with an additional new term ‘snow mouth.’

The Chinese *choufeng* 抽风 is a very ordinary medical term; all common Chinese people know its meaning. It corresponds to ‘convulsions.’ Mr. Wiseman abandons it and provides for it the made-up phrase ‘tugging wind.’ If this kind of translation would come out of the pen of a Chinese person, there would be people who would impolitely call it Chinglish. But it is hard to know what to call it when it comes out of the pen of an English lecturer who has English as native language. Does Mr. Wiseman abandon its use because ‘convulsions’ is a Western medical term? Certainly not; in the Dictionary, the corresponding term for *chouchu* 抽搐 is ‘convulsions’ and the corresponding term for *chunuo* 搐搦 is also ‘convulsions.’ Since the term ‘convulsions’ can be used and the three terms *chouchu*, *chunuo*, and *choufeng* are synonyms, why insist on translating *choufeng* into ‘tugging wind’? Investigating the reason, it is quite possible that it is related to the list of English equivalents for single Chinese characters that has been established. In the list there are no English equivalent terms for the three characters *chou*, *chu* and *nuo*, but for *feng* the English equivalent ‘wind’ has been stipulated and thus an English term like ‘tugging wind’ made its appearance. If it really [happened] like this, then the standards for English medical term selection as established by Mr. Wiseman can be changed as one sees fit. Frankly speaking, using ‘convulsions’ to convey *chouchu* and *chunuo* does not distort the Chinese medical meaning, but ‘tugging wind’ really leaves people uncertain what is being spoken about; not only Western people, even Chinese people who understand English do not have a clue as to what is said.

These situations are too numerous in the Dictionary to enumerate. For example, the equivalent established for *dan* 丹 is ‘cinnabar’ and all kinds of [combinations with] ‘cinnabar’ are derived. You must know that ‘cinnabar’ is a drug name in Western medicine as well, namely vulcanized mercury. When people see ‘cinnabar toxin,’ they generally will firstly think of vulcanized mercury toxin, at most they can only think of vermilion colored toxin; we wonder whether anybody would be able to think of *dandu* – erysipelas.

{t.n.: this term is defined on page 62 of the PD; as always when there is a –more or less closely- related Western medical term, this is mentioned at the end of the definition: ‘W(estern) M(edical)C(orrespondence): Mostly corresponds to erysipelas.’ That term is probably the term the authors have in mind here to use for *dandu* in Chinese medical settings}.

When people see ‘cinnabar sand,’ they generally also only will think of *dansha* 丹砂 (*zhusha* 朱砂– Cinnabaris; note: *dansha* is an alternative name for this Chinese medicinal substance) or [they will think of] sand-shaped vulcanized mercury. There is no way it will occur to them that this is *dansha* 丹痧 – ‘scarlet fever.’

{t.n.: I think anybody can see this is very illogical: actually, the character *sha* here is different from the one in *dansha* 丹砂 and *zhusha* 朱砂. The authors are confused because 砂 means ‘sand’ and in the PD the *sha* in *dansha* 丹痧 is also translated ‘sand’ – the character 沙 means sand as well and in the character 痧 is ‘covered’ by the signific/radical 疒 which indicates disease in general. Anyway, when you look up 丹痧 in the PD, you are referred to the key term *yihousha*: ‘epidemic throat sand.’ In the entry there the term is clearly defined, ‘cinnabar sand’ and ‘putrefying throat sand’ are mentioned as synonyms, and the corresponding term in Western medicine is given: ‘scarlet fever.’ – I hope this illustrates that the authors are once again creating riddles here; the irony is that the PD is a perfect tool to solve it ;->...}.

To be a specialized term it always must contain some information that reflects the basic concept or characteristic [of the source term]. If there is no trace of this kind of information, and [the terms] cause people to be misled (and take the wrong road), then it is still better to use *Hanyu pinyin* [- romanization of the Chinese language]. *Hanyu pinyin* at most causes people to not have an idea what is being stated, but it does not give rise to misunderstandings. Other [terms] like ‘fire cinnabar’ and ‘red wandering cinnabar’ are conundrums that give people a hard time to figure out. We do not know whether or not Mr. Wiseman would contend ...that if] ‘cinnabar’ is synonymous with *dan* 丹, and if in Chinese it is possible to call [something] *huodan* 火丹 and *chiyoudan* 赤游丹, why would it just not be possible to reflect this in the English translation.

{t.n.: the ‘logic’ of the authors seems to be as follows: if the Chinese character X as single character is –correctly- translated Y in English, then, when X is used in other terms consisting of two or more characters and X is then used in meanings which are connotated or correlated with the meaning Y, you cannot use Y for translation of Chinese terms structured AX BX XC. The not-so-logic about this is as follows: what in Chinese is possible, you cannot do in English!}

We believe that *dan* 丹 has multiple meanings (is polysemous). As *zhusha*, translating it as ‘cinnabar’ is certainly possible. But the Chinese *dan* 丹 also points to certain diseases [in which there is] skin that is red like cinnabar and heat like scorching fire. The meaning of the English ‘cinnabar’ as a term is very explicit: no matter whether it is natural or synthesized, it all is vulcanized mercury and has no relation with the disease sign/symptom of reddening of the skin. Therefore English terms of Chinese medicine of the type of ‘cinnabar toxin,’ ‘cinnabar sand,’ ‘fire cinnabar’ and ‘red wandering cinnabar’ created by Mr. Wiseman, all are categorized as mistranslations.

{t.n.: ... so we cannot have the associations with cinnabar the Chinese have with cinnabar! Or we are not capable of understanding the fact that the Chinese associations with cinnabar may

tell us something about the terms used! Anyway, the meaning of the English cinnabar is clearly understood by the Chinese authors!}

{t.n.: PD page 178 for reference}

A further example is *zixian* 子癩. It is an acute gynecological condition in Chinese medicine, and in Western medicine there is the clear-cut corresponding term ‘eclampsia.’ Mr. Wiseman translates *zixian* as ‘epilepsy of pregnancy’ (*renshen dianxian*), an acute neurological condition which needs to be differentiated from *zixian* (eclampsia). It is obvious that by abandoning the use of a corresponding term from a Western medical specialty, and by creating a regularized, literal, character-for-character translated term, not only mistranslation and misunderstanding is produced, but it also may lead to erroneous diagnosis in the clinic.

{t.n.: another cheap criticism: you cannot miss the term ‘eclampsia’ for *zixian* in the PD}

In fact, the experience of translating Western medical terms into Chinese at the time of the transmission of Western medicine to China has much referential value in regard to the question how to apply Western medical terms in the English translation of Chinese medicine. There are two things that are particularly worth mentioning: the first is that if what is denoted by Western medicine and Chinese medicine is the same thing, then, when Western [medicine] was translated into Chinese, the existing Chinese medical term was directly applied, another Chinese term was not (additionally) looked for. For instance in the realm of anatomical jargon, ‘tragus’ was translated as *erzhu* 耳珠, ‘uterus’ as *zigong* 子宫, ‘glans penis’ as *guitou* 龟头 and so on. Without exception, these were previously existing Chinese medical terms. All these Chinese and English terms can be reciprocally translated back and forth, over more than a hundred years of use, no problems ever arose. But in the Dictionary the correspondence is denied, *erzhu* is not ‘tragus’ but ‘pearl of the ear,’ {t.n.: in PD, ‘tragus’ is both indexed and mentioned in the *erzhu* entry as corresponding term} *zigong* is ‘infant’s palace,’ {t.n.: this is simply not true; it is ‘uterus’ in PD, synonym ‘womb,’ and ‘Infant’s Palace’ is only used as translation of the name of the acupoint CV-4} and *guitou* is ‘tortoise’s head.’ Mr. Wiseman may argue that the Western medical corresponding terms of these nouns can be found in the Dictionary. For example, by checking the index it appears that *guitou* is on page 621, and on that page one can find out that ‘tortoise’s head’ is annotated as ‘YIN HEAD’ and after that one can find out on page 710 that among the synonyms of ‘yin head’ there is the term ‘glans penis.’ Only after going through this complicated process one is able to understand what the heck ‘tortoise’s head’ really is. {t.n.: and a person studying Chinese medicine who is not familiar with the term ‘glans penis’ will have learned something in the process ... but I agree there are inconsistencies in the PD in this respect... have noticed them while translating anatomical terms}

If one does not have this Dictionary at hand, and wants to read and understand Chinese medical texts which are translated or composed using Mr. Wiseman’s English terminology of Chinese medicine, the difficulties are just too great. When talking about terms like ‘pearl of the ear’ and ‘tortoise’s head,’ Westerners who speak English might guess right when treating them as word riddles to be solved, but there is no way to figure out ‘infant’s palace’; there is no-one who will think of the possibility of an already born baby returning into the mother’s abdomen to live there. {sic}

Some terms for symptoms and diseases have interconnected terms in Chinese medicine and Western medicine as well. Quite a few Western medical terms that were adopted at the time of translation into Chinese also are Chinese medicine terms [now] and through many years of application they never have been objected to. For example, ‘opisthotonus’ is translated into

*jiaogong fanzhang* 角弓反张, ‘edema’ into *zhong* 肿, ‘wheal’ into *feng zhenkuai* 风疹块, ‘rubella’ into *fengzhen* 风疹 and so on and on.

How come these Chinese translations of names now cannot be translated backwards into the original English? What Western medicine calls *jiaogong fanzhang* 角弓反张 – ‘opisthotonus,’ ‘edema,’ ‘wheal’ and ‘rubella’ all are identical to the things or phenomena indicated by what in Chinese is called *jiaogong fanzhang*, *zhong*, *fengzhenkuai* and *fengzhen*. The Chinese translations of the English of that time were appropriate and when they now are translated backward from Chinese into English they are equally appropriate. If saying we ought to translate *jiaogong fanzhang* according to Mr. Wiseman’s translation method into ‘arced-back rigidity’ to be able to reflect ‘the original appearance of Chinese medicine,’ then the former translation of ‘opisthotonus’ into *jiaogong fanzhang* is problematic, because it did not reflect ‘the original appearance of Western medicine.’ The English ‘opisthotonus’ stems from two Greek words... (meaning) ‘backward, toward the back’ and ... (meaning) ‘pull-tense, pulled tight’; there are no words in it like *jiao* ‘horn; something horn-shaped; angle’ and *gong* ‘bow; bend, arch.’

{t.n.: actually, these words together appear to have – logically and sensibly – inspired the PD’s use of ‘arched’ in this term. The authors provide an explanation of the thought process behind creation of the terminology and, without realizing it, give an argument in favor of an important prerequisite for a decent terminological system: transparency. The PD terminology is largely adhering to that principle. - other principles are: clarity, intelligibility and a potential for amplification.}

The same holds for ‘edema,’ which also has been mistranslated at the time because it stems from the Greek word (meaning) ‘swelling’ – it does not contain the word for ‘water.’

{t.n.: what is the point here?}

From this we can see that what Mr. Wiseman calls ‘the original appearance of Chinese medicine’ not at all is the original face and essence possessed by Chinese medicine as a medical science, but is nothing more than certain habits and fashions conveyed in the language of Chinese medicine. In the Dictionary the English term for *shuizhong* 水肿 is ‘water swelling,’ *fengzhenkuai* is ‘papular wind lumps,’ and *fengzhen* is ‘wind papules.’ We doubt whether the practical result of this translation method really is that Westerners are enabled to understand the original appearance and essence of Chinese medicine or that [the result] is that Westerners learn to recognize some Chinese characters. {t.n.: I would suspect that these two go hand in hand} In the transmission of Chinese medicine to the West, the language barrier is one of the crucial obstacles; the elimination of this kind of barrier certainly not can be accomplished by teaching Westerners to master a few hundred single Chinese characters or by creating some Chinese-styled English terms for Chinese medicine. To the contrary, the more Chinese-styled English terms for Chinese medicine, the more Westerners will find Chinese medicine to be abstract, unfathomable and hard to understand.

[Regarding the value of the experience of former translation of Western medical terms into Chinese] the second [thing worth mentioning] is: how to deal with the question of different terms for the same thing. In the terminology of Western medicine there are quite a few [instances of] ‘also called’ and/or ‘other name for,’ for example ‘felon,’ ‘whitlow,’ ‘panaris’ and ‘panaritim.’ Although they each has [their respective] background, - some originally are English, some stem from Latin -, still what they all indicate is ‘pyogenic (pus involved) infection of the (tips of the) fingers.’ At the time of translating the English term into Chinese [the translators] did not consider having to reflect this circumstance of not uniformly used



terms and translated all equally into *biaoju* 癰疽. If the four terms would have been separately translated into different Chinese [terms], this only would have created chaos in regard to the transmission of Western medicine into China and would not have played a useful role whatsoever. The present question is: how to translate *biaoju* 癰疽 into English? Four synonymous terms appear in the Dictionary: ‘biaoju,’ ‘tip-abscess,’ ‘flare-tip abscess’ and ‘whitlow.’ This way, one English name, *huanongxing zhitouyan* 化脓性指头炎 (pyogenic infection of the fingers) at least would have seven [terms]. There already are several names in the original English; to further artificially add some in the process of English translation makes it hard for people to understand. Because of its long history and vast area, [in] Chinese medicine different names did appear in different periods and different regions. This is not really surprising, however, whether or not there is a necessity to express this kind of ‘original appearance’ of Chinese medicine through the direct (literal) translation of the written language merits to be discussed. Like the [body] part ‘root of the nose’: in Chinese medicine, there are the different wordings ‘mountain root,’ ‘lower extreme’ etc. [for it]. These merely are different metaphors in Chinese rhetoric, which are valuable for research into figures of speech in literary studies; [but] there is no necessity at all to translate them separately into ‘mountain root’ and ‘lower extreme’ in medical terminology. To say that collecting these terms in the Dictionary is of use for the translation of ancient writings is not without reason, but it is sufficient to explain the original meanings of the Chinese characters in annotations. There is no way people will accept them as terms to approach the discipline of medicine.

Mr. Wiseman praises himself for propagating the essence of traditional Chinese medicine towards the West and therefore is opposed to generously using Western medical terms, but he in fact is contradictory himself regarding this problem. He not only intentionally or inadvertently uses many Western medical terms, moreover, even Chinese Western medical terminology unexpectedly appears in the Dictionary. The Dictionary both has [Chinese translations of] Western medical terms like *lanwei* 阑尾 (appendix) {t.n.: this is not an entry in the PD; only occurring in formula- and acupoint names; ‘appendicitis’ is marked as Western medical term in the index} *junli* 菌痢 (bacterial dysentery) {t.n.: in PD only occurs in one formula name; in the 2004 list occurring also in a Western medical term -and marked as such-: *jixing junli* acute bacterial dysentery} and also lists Chinese [translations of] Western medical disease names as *xianzhao liuchan* 先兆流产 (threatened miscarriage) {t.n.: with a reference to the Chinese medical Chinese term ‘stirring fetus’}, *jingqianqi jinzhang zonghezheng* 经前期紧张综合征 (premenstrual syndrome) {t.n.: the PD clearly states that this is ‘a term adopted from Western medicine’ and explains why it is included}. For the term ‘premenstrual syndrome,’ Mr. Wiseman exceeds the space of one column in adding a lengthy explanation, [from which] the degree of importance attached to it can be seen.

In the issue of the use of Western medical terms in the English terminology of Chinese medicine, Mr. Wiseman also reflects to what kind of Western people he actually wants to propagate Chinese medicine: Why does he want to take general knowledge as criterion for the choice of Western medical terms? Why is it that “Western medical terms for which it is not necessary to have any specialized knowledge or equipment to be understood or determined” can be used, while Western medical terms who “reflect a specialized knowledge which diverges widely from the general understanding” should be avoided? According to general rules, selection of terms should be considered on the basis of the degree of correspondence between Chinese and English, and not on the basis of the degree of general understanding. If there is reliable correspondence, the more specialized a Western medical term is, the more consideration should occur, because Chinese and Western medicine both are medicines and

their terminologies both are specialized languages. Since they are specialized languages (languages for special purposes – LSP’s), it is just not possible to demand that people who do not possess specialized knowledge all are able to understand [them].

{t.n.: in terminology (as scientific discipline), the studies I have seen argue quite the contrary: one of the principles in the construction of a useful system of concepts (terms and definitions) is the principle of clarity. The fact should be appreciated that the readers/observers of the system often are non-experts or not-yet-experts, such as students of the special subject, or translators. The concept systems and the terminology based on them frequently serve to provide the observers with a more thorough idea and understanding of the subject field.}

Even in China it is not so that, provided one has a general level of knowledge, one is completely able to read and understand the Chinese terms of Chinese medicine. We do not oppose the propagation of knowledge of Chinese medicine to the general public, but Chinese medicine is a medicine and we foremost have to consider propagating it to the medical circles of the West. The reason why acupuncture was able to spread in the West was because Western medical circles confirmed its curative effects. Why Mr. Wiseman emphasizes the propagation towards the general public and does not attach importance to the propagation towards Western medical circles is a question that deserves to be explored.

To sum up, there exist many serious problems in the Dictionary with the application of Western medical terms. For each of the inappropriate terms there is no doubt a separate reason, but the fundamental reason lies in Mr. Wiseman prescribing to take “common knowledge” and “no requirements for any specialized knowledge or equipment [for the terms] to be understood or determined” as a demarcating and defining standard [to decide] whether or not to employ Western medical terms. The viewpoint this standard reflects is that Chinese medicine is not a genuine medicine, and that it merely is a kind of popular Oriental culture. This is precisely wherein we fundamentally differ from Mr. Wiseman as for the approach of English Chinese medical terms.