# ENGLISH FOR MEDICAL PURPOSES IN A KNOWLEDGE-BASED SOCIETY

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*Abstract: The present paper aims at presenting the increasing relevance of learning medical English especially for those who practice it. As means for sharing new discoveries, the weight of English in medical contexts has gained new insights. Medical English is fundamental in communication with patients, with peers or even in more formal settings such as conferences or writing articles. EMP has emerged as a sub-category of ESP and has reached to be a vernacular that binds health care professionals with the beneficiaries of health systems. Being used so extensively EMP brings along another advantage: higher career opportunities and better incomes. Having said all these, we should all come to the conclusion that EMP has gained its right to be a subject in itself in academic medical settings.*

*Keywords: EMP, vernacular, lingua franca, interdisciplinary approach, lexicon*

Since medical studies have begun to gain increasing importance in today's society, studying English in a faculty with medical profile is a priority. Taking into account the increasingly varied media (such as the Internet, research published in journals and in books with wide circulation) that use and circulate information from all over the world, English has become a real *lingua franca* of the 21st century. Although we cannot yet discuss of an independent academic subject to blend medicine and philological study, we believe that the possibility of bringing together these two areas of knowledge so important in the era of globalization and communication would be through medical linguistics. Medical English is a real language of medicine, tooled by common methodology it is grafted on medical etymology. Therefore, it can be apprehended by using logical breaking words down into components that makes sense by themselves. For example, the adjective *epicardial* is formed of the prefix *epi-* meaning above to which the word root *-kardia* (of Greek origin) is added, plus the suffix *–al* meaning pertaining to. Furthermore, once a pattern of formation has been established it can be expanded. For the example above, the model of creating adjectives can be spread and used to create other words such as: *pericardial*, *endocardial*, etc.

Medical terminology, even for its practitioners, has challenges even in the language system of their mother tongue. The greater the stimulation is when we speak of a foreign language. There are countries where the reception of English, in general, and especially in medical environments, is made much better because of the common origin with the mother tongue. Thus, a greater spread of English use can be seen in northern countries compared to Asian countries. Used extensively on the old continent, and in North America, English is the most studied in the countries of the European Union, and, globally, science is the one that most uses this language as the vehicle for the new discoveries.

English is the second language spoken internationally after Mandarin, not to mention the fact that it is the official language in 196 countries and over a quarter of the world's population speaks it. It provides effective communication and opens up numerous opportunities for information, travel and professional achievement. Undergraduate medical programs (including medical studies) also featured Erasmus programs that provide mobility for students who want to experience in foreign countries, whether they want a subsequent establishment in that country, or they want to know the culture better. English plays an

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important role in programs that provide students with mobility and open the career horizon, also allowing a much easier access to the knowledge resources of mankind by helping develop new skills and create new inter-human relationships.

Approximately 95% of scientific articles circulated around the world are written in English. Even though practitioners may or may not have knowledge of the history of medicine as science that has found a growing resonance in society, they all need English to communicate with patients, other colleagues/peers, or simply to get informed. Thus, there is almost no debate at conferences or international congresses not to be held in this language. Even if the patient can be provided translation if they do not know English, doctors will not be given this benefit. Another reason why the English language used in medicine is growing is that the vast majority of European universities have created medical education programs taught directly in English, and in order to attend seminars and courses, this language has gained the essential status of prerequisite.

English is very popular in the digital age in which almost all online resources are translated in it.

As far as medical publications are concerned, two perspectives can be distinguished. There are international media journals where articles submitted must be in English because readers of such magazines are from all over the world. But there are also national journals that require the article to be written in English, at least in their abstract and bibliography. Although these national journals are originated and engraved or addressed to local or national practitioners, the fact that they tend to a wider implementation of English corresponds to the standardization needs. Between 1979 and 1991, 10 volumes of ING (International Nomenclature of Diseases) were published proposing a uniform medical and clinical terminology, a standardized formula of these terms. The Corpus, beyond the remarkable aspiration to create a unitary terminology that could be used by most practitioners, fell into the extreme of the creation of terms that gave the feel of unnaturalness, a combination of English and Latin.

The quoting of these journals leads to the necessity of writing in English. Some national magazines have adopted the bilingual system to meet the needs of readers and the need to adapt to market demand. "As a medium of international communication in several spheres, including science and technology, English has largely replaced-on a global scale-many other regional *lingua francas*. (…) English appears to have growing *intra*national as well as *inter*national currency in medical communication"[1]

The importance that English has gained in the medical field opens the way for a new branch of linguistics, that of English for Medical Purposes. But this form of English for Specific Purposes needs to be adapted to the actual needs of students, would-be and future physicians. Starting from defining EMP as a process of teaching/ learning English in a context that aims to improve the quality of life and health[2], we can come to the conclusion that such a medical approach to language English has certain characteristics. Firstly, such a language comes to meet professionals who already know terminology in their mother tongue, have the theoretical basis on which to build a foreign language. Sometimes it is even advisable to be stimulated learners to make analogies to the terminology they have in their mother tongue in order to facilitate the long-term retention process. Secondly, health care professionals are interested in certain aspects of this language (vernacular). Last but not least, teaching English for use in medicine should focus on certain aspects considered to be more important by a

[1] John Maher, The Development of English as an International Language of Medicine, in Applied Linguistics, Volume 7, Issue 2, 1 July 1986, p. 206
[2] See John Maher, English for Medical Purposes, in Proceedings of the Third International Congress of Applied Linguistics, Cambridge University Press, Volume 19, Issue 2, April 1986 , p. 112

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specialist in this field. Thus, less interested in the syntax study, a physician may show interest in the study of linguistics and etymology because most of the terms in medical English come from Greek and Latin and this would appeal to the knowledge already acquired during the medical study years. Also, a physician would be much more interested in the speaking English in medical contexts, or in some features employed in drafting English texts for editing articles.

Knowing English in the medical field can save a life because in a job where every detail matters, knowing the language as best as possible can make the difference between various diagnosis, health or worsening the status and, ultimately, between life and death. Speaking fluent English means better patient care and an improvement in their health. Having a common language with the interlocutor can lead to better results in the treatment not only of the patient but also in better outcomes of the hospital.

Taking into account all advances in technology and science, English is the binder of science and medicine on the one hand, of humanities and medicine on the other. In an era based on communication and sharing information, a common language was mandatory to facilitate this process. Just as humanity was connected in antiquity through Greek then Latin during the Renaissance and Europe during Enlightenment through French, English is now linking a wider community: the worldwide one. There are many reasons why this language has such a large spread: beginning with the nineteenth century when the industrial revolution occurred, and the UK reached the peak of its colonies, continuing with the twentieth century, when the US begins to dominate the political scene and up to the end of the last century when science reached the highest level in the history of humanity, English has increased its power to connect people, interests and economies.

Today we are witnessing an inter-human as well as an institutional connection through it. Inevitably, medicine as science aimed at increasing life expectancy has turned to the international prestige already gained by humanity in order to transmit progress from the health care system. The medical field needs communication beyond the hospital ward or college years, because in this field, more than anywhere else, there is continuing medical education. Through continuous medical education, we understand the need of practitioners to keep up-to-date with everything is new having in view the dynamics of this system. What, no more than twenty years ago, was little or even not known in medicine, today is not just something that has been answered but already solved.

Medicine is a very active field that requires the most of its practitioners as well as the decision-makers and the funding bodies, but ultimately the beneficiary is the ordinary person. The number of medical specializations is steadily increasing, with sub-specializations created in the hope of better research and better solving of medical problems. The development of technology went hand in hand with the development of medicine because it provided its aid where human capacity was limited. For example, Robo-Mate is a user-friendly, intelligent wearable human-robotic exoskeleton for manual handling used not only in the military or industrial areas but also in medicine in order to manipulate heavy patients with minimum of effort. Nowadays, modern medicine cannot be conceived without technology: diagnosing devices, artificial organs, and robotic prosthetic limbs, surgical procedures, nanorobotics and so on are only few examples. However, English language adapted to the medical system makes use of the knowledge which has been acquired by humanity since ancient times. If English language system is accessible to everyone, leaving aside the alphabet for those who are not accustomed to it, the real challenge in medical field is to learn the specific terminology because it makes a historical reference to Greek and Latin. There are also words borrowed from English in other languages. For instance, bypass surgery, CT, scanning, clearance, screening, inlay/onlay, cross-face etc. All such terms show an unique feature: English has managed to connect the newly emerging technology with the science of healing.

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The specialized English medical lexicon should be interpreted in the context of the profession. Medical English responds to the desires of conciseness and efficiency. That's why today there are many abbreviations to facilitate communication. From a historical point of view, medical English has recourse to loanwords. The meaning of the word loanword must be perceived as a word of another language that translates into the vocabulary of another through "transfer or copying processes"[3] and can be achieved by extracting a word from another language of the another country's vocabulary or by assigning some of its own language features to words from other languages. But studying medical English in a systematic, philological way is not something to anyone can do because it requires linguistic and etymological knowledge that must be correlated with medical information. An area dedicated to medical English is a true intellectual effort, a periplus not only linguistically and etymologically but also historically and from a specialist point of view. As James Calnan wrote in reviewing John Dircks's book, *The Language of Medicine Its Evolution, Structure and Dynamics*, studying medical English is a complex journey that bears the one who wants to learn it through "plain English (..), medical English, our heritage from Latin and Greek, slang, jargon and gibberish, to modern speech."[4]

However, one must distinguish between two types of knowledge: disciplinary and pedagogical. The first category is "circumscribed body of knowledge, that is considered by the language-teaching profession to be essential to gain membership", but it is not so practical. On the other hand, pedagogical "provides a basis for language teaching."[5] Precisely, medical English requires the kind of pedagogical skills of this kind, because besides basic training, the one who offers teaching of specialized medical language must also have a medical background.

Medical English is a special domain of the ESP and it must come to the attention of medical practitioners not only with a clear etymology and expertise but also with medical information *per se*. In reaching this scope, it uses the already existing teaching methodology and is compiled on didactic activities that correspond to the future profession of the learners. It has the task of putting together theory and practical application of medical terminology and require a solid foundation of knowledge in the field. For students in medicine, not the vocabulary could be a problem but the practical skills of using English in a context appropriate to their needs.

The study of EMP has, however, advantages compared to other forms of ESP because it is the closest to human beings, to interacting with life itself. Even if it uses a difficult vocabulary by its historical nature (Greek and Latin), it is possible to see real results of the theoretical accumulations, which can only encourage the trainee to continue learning. To see how linguistic achievements are used in a real contexts, the feeling that what you learn is not broken from certain circumstances, but, on the contrary, that it complements physiology, anatomy or other specialized knowledge acquired can only foster the learning process: "In the medical field we are perhaps more fortunate than teachers in other ESP courses, because whereas some sciences, such as the so-called hard Sciences, are removed from the world of everyday life, medicine is a discipline which is concerned not only with laboratory research and hypothetical reasoning, but also has to do with people. It is thus possible to bring the

[3] Martin Haspelmath; Uri Tadmor, Loanwords in the World's Languages A Comparative Handbook, De Gruyter Mouton, 2009, p. 36
[4] James Calnan, Review to John Dircks, The Language of Medicine Its Evolution, Structure and Dynamics, in Proceedings of the Royal Society of Medicine, 1977 Feb; 70(2), London, p. 125
[5] Jack C. Richards, Foreword in Juan de Dios Martínez Agudo, English as a foreign language teacher education: Current perspectives and challenges, Amsterdam-New York, 2014, p. 1

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outside world into the classroom and create activities based on authentic situations, using language which doctors and other health practitioners really use and for real purposes."[6]

There is an interdependence between the survival of a language in terms of its use and what it transmits. The more valuable and up-to-date the information, the more the language will survive and therefore will be used. History of medicine dates back for around two thousand years, but the history of EMP is much more recent. We could say that medical English is at the crossroads of several sciences: medicine itself, studying a foreign language, but it is also a form of communication in itself that should create a stand-alone path. Knowledge is power and people are becoming more aware of their need to know more and communicate more efficiently. EMP as form of communication is responsible for spreading the information and can bring its own contribution to the becoming of a new era of globalization in medical field. Therefore, teaching and learning EMP is an interdisciplinary approach which blends humanities with medical sciences.

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[6] Pauline Webber, Speaking Practice in the Medical English Classroom Bridging the gap between medical English and the everyday world, in Revista de lenguas para fines específicos , no.2, 1995, p. 62

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