

# Translating Traditional Chinese Medicine Terms into English from a Cultural Perspective

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## ABSTRACT

Chinese people have a long history of disease prevention and treatment, and traditional Chinese medicine is TCM, which has an essential position in the international medical system. As a global healthcare system, TCM is an essential part of the Chinese civilization and is a historically significant legacy of China. Returning to a dialectical and organic view of life, TCM has evolved a theoretical and diagnostic model quite different from conventional medicine, which, according to historical records, facilitated the strength and long life of the Chinese people. Mao Zedong once described TCM as a sea of knowledge and discoveries, a treasure trove waiting to be discovered further every day. The perceptions of the system, as well as the previous success, see it being used beyond the beginning of China or East Asian countries. The fact that TCM stands ready to contribute a rapidly escalating burden to the health and longevity of people all around the globe in the 21st century. Translation of TCM literature is crucial to make it available and easily understood in the Western world. However, there are numerous difficulties due to the differences between China's clinical, philosophical, and linguistic medical approaches. With the advent of the cultural turn, which critiques universalist thinking and posits culture as a primary translation concern, it is possible to give perspective on the standardization of TCM terminology in English. This paper gives a brief history of TCM and translates real terms, outlines significant translation features, and reveals current trends in TCM terminology translation that focus on the cultural aspect of translation. It highlights the profound interplay between language and culture, framing translation as a bridge for cross-cultural exchange. Additionally, the study outlines principles and strategies for translating fundamental TCM concepts, advocating for a culturally sensitive approach that preserves the philosophical depth and unique essence of TCM. As TCM continues to influence global health, its contributions to Western medical thought will enhance the diversity and integration of medical perspectives worldwide, enriching the global understanding of health and healing practices.

**KEYWORDS:** TCM Terminology, translation principles and strategies, cultural turn, standardization.

## **1. Introduction**

### **1.1 Research Background**

TCM embodies a distinctive fusion of medical practice and cultural heritage, profoundly rooted in Chinese civilization. However, in the globalized landscape of the 21st century, the dissemination and comprehension of TCM in the West are limited and frequently subject to misinterpretation. A primary barrier to its broader acceptance lies in its inconsistent and non-standardized core terminology translation. Despite growing Western interest in Chinese language and culture—bolstered by China’s expanding global influence—English remains the primary language through which TCM is accessed. Unfortunately, current TCM translations are inadequate: only a fraction of the over 8,000 TCM texts (Ye & Zhang, 2017) have been translated into English, and many translations misrepresent fundamental TCM theories, resulting in widespread misconceptions (Cai, 2006. p.58-58). Even translations produced by leading scholars often display methodological inconsistencies, leading to a fragmented and uneven field. Although the World Health Organization (WHO, 1991) has tried to standardize TCM terminology, these initiatives have yet to achieve comprehensive acceptance.

The lack of a standardized, culturally sensitive translation framework poses a significant challenge to the global transmission of TCM knowledge. Developing such a framework—particularly for essential TCM concepts and terms—is crucial to bridging this gap. The proposed study seeks to enhance the current advancement of TCM terminology standardization by considering the cultural meanings of these terms when seeking translation models that embrace a variety of methodologies oral to TCM. The other achievement derived from the study is creating a transparent and harmonized TCM discourse system and reducing the number of common misconceptions by correcting inaccuracies common in translations and improving the understandability of TCM documents for readers using Western language. This will enable cross-cultural communication by ensuring that the transfer of knowledge regarding TCM is accompanied by cultural context correctly depicted. Proposing translation models that incorporate diverse methodologies aligned with TCM principles. This research will contribute to the dissemination of TCM worldwide and help create a holistic view of its practices and doctrines.

### **1.2 Research Scope**

This study proposes and identifies approaches and methods for interpreting some basic TCM terms rather than entirely confined Chinese sentences or passages. It explores fundamental concerns, including the cultural aspects inherent in TCM terms, dominant principles and means of translating, and fundamental philosophies, languages, and cultural paradigms, which are vital when translating TCM concepts.

### **1.3 Research Methods**

In this study, a comparative case research method is used in conjunction with theoretical considerations to critically analyze the terminologies, principles, strategies, and methods used by some eminent translators of TCM when assessing communicative efficacy. The research also has a comparative view of TCM and Western medicine regarding their philosophical views, linguistic aspects, theoretical

treatment modalities, and terminologies, where the differences are apparent at first glance. This analysis is intended to contribute to the clarification of relationships between culture, language, and translation to create the basis for elaborating TCM translation principles and approaches and selecting appropriate methods. This paper is underpinned by relevant theoretical frameworks, which have been used to inform and ground these observations.

## **2. Literature Review**

### **2.1 The Concept of TCM**

TCM represents a sophisticated integration of empirical insights into human physiology, pathology, and comprehensive disease management. Rooted in ancient Chinese philosophy, the theoretical framework of TCM intricately interweaves structure and function, substance and energy, and form and spirit. Core tenets, such as holism and a detailed understanding of meridians and collaterals, underpin syndrome differentiation and guide therapeutic interventions.

TCM deeply investigates the regulatory mechanisms underlying health, offering a comprehensive perspective on disease onset, progression, prevention, and treatment. It emphasizes the maintenance of health and the extension of lifespan through life cultivation and rehabilitation practices. As a distinct branch of life sciences characterized by uniquely Chinese attributes, TCM embodies a balanced synthesis of theoretical precision and practical application, demonstrating marked therapeutic efficacy (Liu Ming, 2013).

### **2.2 The Historical Development of TCM**

The theoretical and therapeutic foundations of TCM began to crystallize during the Spring and Autumn and Warring States periods, a transformative era marked by notable advancements in economics, science, politics, and philosophy. This period laid the groundwork for TCM's core principles, later codified in foundational classical texts.

In the 3rd century CE, The A-B Classics of Acupuncture and Moxibustion by Huangfu Mi expanded the recognized acupuncture points to 649. The Tang Dynasty saw Sun Simiao's Valuable Prescriptions for Emergencies, which enriched TCM with over 5,000 prescriptions. Additionally, Wang Bing's extension of the Five Movements theory into the doctrine of Five Periods and Six Qi facilitated TCM's dissemination to Japan and Korea.

The Liao, Song, Xia, Jin, and Yuan Dynasties marked the emergence of various medical schools, including the Cool and Cold Medicine School, Evil-Eliminating School, Spleen and Stomach School, Yin-Nourishing School, and Warm Disease School. Although TCM experienced a decline in prominence during the Ming and Qing Dynasties due to the rise of Western medicine, this period also saw a proliferation of pharmacological texts, notably Li Shizhen's The Comprehensive Herbal Foundation, often hailed as an encyclopedia of TCM.

The influence of TCM further waned with the expansion of Western medicine after

the Opium Wars. However, since the establishment of the People's Republic of China, integration efforts between TCM and Western medicine have intensified, preserving traditional principles while incorporating modern scientific methodologies. This integration is exemplified by establishing over 20 TCM colleges, representing a significant step toward TCM's modernization and global reach (Zhu & Lin, 2016, p.130-131).

## 2.2 Basic Characteristics of TCM

TCM(TCM) represents a highly sophisticated medical system deeply rooted in China's cultural and philosophical heritage. Distinct from Western medicine and other Eastern healing traditions, TCM has developed into a comprehensive discipline grounded in two foundational principles: holism and syndrome differentiation. These principles form the core of its diagnostic and therapeutic approaches, emphasizing an integrated view of human health that aligns with the broader natural and cosmological order.

### 2.3.1 The Concept of Holism

Holism, a fundamental principle in ancient Chinese philosophy, emphasizes the seamless integration and interdependence of the body's internal organs and the dynamic relationship between the body and its external natural and social environments (Li, 2013, p. 41-42).

#### 2.3.1.1 Holism among Internal Organs

In TCM, holism conceptualizes the human body as an interconnected system, applying this perspective to physiology, pathology, diagnosis, and treatment. This approach posits that the body's systems—particularly the five zang-organs (Liver, Heart, Spleen, Lung, and Kidney)—function in concert to maintain physiological equilibrium. Localized disorders are interpreted as part of the body's overall health status, with treatments targeting the restoration of systemic harmony. For example, TCM posits that dryness and heat in the lungs may induce heat accumulation in the large intestine, leading to constipation, a condition explained by the intricate interconnections of the body's meridians and collaterals.

#### 2.3.1.2 Holism between Human and Nature

In TCM, the human body is intricately connected to the natural environment, highlighting a bidirectional influence between human health and environmental factors. This holistic perspective emphasizes that human life depends fundamentally on nature, while human actions, in turn, affect the environment. The dynamic relationship between environmental changes and human health forms a core tenet in TCM, as environmental fluctuations can directly or indirectly alter physiological functions.

In TCM, the functions of the internal organs correspond with seasonal cycles: Liver Qi aligns with spring, Heart Qi with summer, Lung Qi with autumn, Kidney Qi with winter, and Spleen Qi with late summer. These seasonal associations guide therapeutic strategies, suggesting, for example, that pulmonary conditions are best addressed in autumn while renal disorders are optimally managed in winter. This framework underscores the importance of adapting to seasonal variations; TCM

posits that unseasonably warm winters can elevate the incidence of specific illnesses, and certain diseases demonstrate seasonal prevalence—epidemic febrile diseases in spring, summer-heat conditions in summer, dysentery and diarrhea in late summer and autumn, and cold-induced ailments in winter.

Additionally, TCM considers the daily cycles of Qi, where Yang Qi is most active at dawn, peaks at noon, and diminishes by evening, while Yin Qi dominates at night. TCM therapeutic approaches are thus designed to harmonize with these seasonal and diurnal rhythms, embodying a comprehensive, integrative approach to health and well-being.

### 2.3.2 Syndrome Differentiation and Treatment

Syndrome Differentiation and Treatment (辨证论治) represents a fundamental principle in TCM encapsulating its distinctive clinical methodology. This approach systematically identifies syndromes through the Four Diagnostic Methods: observation (望), listening and smelling (闻), inquiry (问), and palpation (切). TCM practitioners carefully analyze the collected symptoms and signs, synthesizing this information to establish precise therapeutic principles, formulate treatment strategies, and select prescriptions, thereby delivering highly individualized patient care.

In TCM, the concept of “syndrome” (证) differs significantly from the Western definitions of “symptom” and “sign.” A TCM syndrome encompasses the body's holistic physiological and pathological responses at a particular stage of disease, whereas symptoms and signs are understood as subjective and objective manifestations, respectively. This distinction is essential, as TCM treatment relies on syndrome differentiation rather than a straightforward disease diagnosis.

A single disease may present with various syndromes, each requiring a unique therapeutic approach. Similarly, identical syndromes may appear across different diseases, enabling a unified treatment strategy. This flexibility is encapsulated in TCM principles such as “treating the same disease with different therapies” (同病异治) and “treating different diseases with the same therapy” (异病同治). These principles underscore the importance of tailoring treatment to the patient's specific syndrome, reflecting TCM practice's nuanced and adaptable nature.

## 2.3 Cultural Factors in TCM

The development of TCM is deeply rooted in ancient China's cultural and philosophical heritage. Early Chinese medical practitioners applied materialistic dialectical methods—including induction, analysis, and synthesis—to systematically structure medical knowledge. This rigorous methodology allowed for integrating diverse medical practices into a cohesive system grounded in Chinese philosophical thought, rendering TCM not only scientifically structured but also emblematic of China's cultural identity and intellectual depth. Consequently, translating TCM concepts requires linguistic precision and an in-depth understanding of the cultural and philosophical frameworks underpinning TCM (Ge, 2009).

### 2.4.1 Philosophical Influences from the Pre-Qin Period

Many fundamental concepts in TCM are derived from pre-Qin philosophical

traditions, particularly the theories of Yin-Yang (阴阳) and the Five Phases (五行).

#### 2.4.1.1 Yin and Yang

The foundational principles of TCM(TCM) are deeply embedded in pre-Qin philosophical traditions, particularly the theories of Yin-Yang (阴阳) and the Five Phases (五行). Emerging from the Yin-Yang School, the Yin-Yang theory initially explained natural phenomena, later expanding to abstract domains such as politics and ideology, thereby illustrating the widespread application of binary oppositions (Newmark, 1977, p. 21-22). Classical texts like the Yi Zhuan and Guan Zi present Yin and Yang as universal principles governing the cosmos, with profound implications for TCM's diagnostic methods, therapeutic strategies, and overall worldview.

Within TCM, the Yin-Yang theory is essential for understanding physiological functions and pathological transformations, as it explains the body's dynamic and complementary relationships. The Plain Questions describes Yin and Yang as foundational principles of all phenomena, origins of life and death, and sources of profound insight. These abstract yet interdependent forces lie at the heart of TCM, symbolizing the balance necessary for maintaining health and effectively managing disease.

#### 2.4.1.2 Five Movements

The Five Movements theory, deeply rooted in ancient Chinese philosophy and formalized during the Shang and Zhou Dynasties, identifies five fundamental elements—wood, fire, earth, metal, and water—as pivotal forces in the universe. Classical texts such as the Book of Zuo Zhuan and the Book of Shang Shu emphasize their essential roles in natural and human contexts: water and fire in culinary processes, metal and wood in productive labor, and earth as the foundational element. This theory organizes the universe-spanning nature, society, and the human body—into these five elements, introducing the concepts of engendering and restraining (相生相克) and overwhelming and rebellion (相乘相辱) to explain natural and pathological dynamics. The “Five Movements” framework highlights the dynamic interactions among these elements rather than statically categorizing them.

In TCM, the Five Movements theory is critical in understanding physiological functions and pathological relationships within the body. It asserts that the principles observed in the natural world govern the interactions among organs, tissues, and systems. For instance, environmental factors such as the east wind believed to nourish the wood, and the southern heat associated with the generation of fire are traditionally linked to specific physiological functions and symptoms. These include the relationship between the liver and the sour taste and the heart's connection to blood circulation. When integrated with the Yin-Yang theory, the Five Movements framework significantly enhances the understanding of physiological processes, disease diagnosis, and treatment, reflecting the profound contributions of Chinese civilization to medical and philosophical thought.

#### 2.4.2 Influence of Buddhism, Taoism and Confucianism

Post-Qin philosophical traditions, notably Buddhism, Taoism, and Confucianism,

have profoundly influenced TCM.

#### 2.4.2.1 Influence of Buddhism

Buddhism, introduced to China during the Eastern Han Dynasty and further integrated during the Sui and Tang Dynasties, exerted a profound influence on TCM, particularly in shaping its ethical principles. The Buddhist focus on the sanctity of life and the alleviation of suffering became central to the ethical framework of TCM. This influence is notably reflected in the work of the Tang Dynasty physician Sun Simiao, whose seminal text *Valuable Prescriptions for Emergencies* emphasizes the importance of physicians maintaining a detached yet compassionate mindset. Sun's incorporation of Buddhist ethics into TCM underscored the significance of compassion, moral integrity, and selflessness in the practice of medicine, reinforcing the role of the physician not only as a healer but also as a morally conscientious figure dedicated to the well-being of the patient.

#### 2.4.2.2 Influence of Taoism

Taoism stems from the School of Tao and the period of Spring and Autumn and Warring States Periods and has dramatically impacted TCM. The Laozi's *Dao De Jing* extols the relation and dependency of the world and man on nature. For example, TCM Five Movements directly connects human body organs with the five elements and the four seasons. Consequently, the doctrine of Qi, ubiquitous in the Zhuangzi, is now repetitively endorsed as the core foundation of the TCM theory. Taoist health exercises like Qigong and Tai Chi Quan have also been adopted into Therapeutic Taoism along with TCM to enhance formal therapeutic health regimes consisting of medical and metaphysical philosophy containing Taoist ideas for improved human health. A prolific example of the Taoist impact on TCM is Taoist master Ge Hong, who discovered a drug known as artemisinin, which won the Nobel Prize in Medicine. This finding sheds light on how Taoist tenets interfused in the theoretical and clinical sphere of TCM and attests to the perpetuity of Taoism in the architecture of CM.

#### 2.4.2.3 Influence of Confucianism

TCM owes its guiding principle to Confucianism, which, during the Han Dynasty, gained the status of the paramount philosophical doctrine. In Confucian teachings, the Five Ethics: benevolence, justice, courtesy, wisdom, and fidelity, and The Doctrine of the Mean is based on harmony and the Golden Mean. As with much TCM philosophy, one is reminded of Confucian values involving moral rightness, especially self-cultivation, which focuses on the correspondence between an individual's psychological state and physiology. This link between the emotions and the organs is most evidently expounded in the Yellow Emperor's Inner Canon. Both relationships reflect the Confucian saying that within each person, the process of remodeling the character is vital to obtaining harmony within an individual and society as a whole.

Furthermore, the Confucian theory of retrenchment of the Doctrine of the Mean parallels the Yin-Yang principle of TCM, as seen in the Plain Questions. As a theory and practice system, Confucianism is closely connected with Taoism and Buddhism in the theoretical and practical constructions of TCM. TCM is much closer to an

anthropological paradigm than the WM, which is based on actual observations and experimentation. This incipient complexity poses excellent difficulties for translation, let alone interpretation, into Western languages (Li, 2003, p.309).

## 2.4 TCM Internationalization and Its Problems

In the past, the translation of TCM has focused more on experience than theory, resulting in the fragmented and confusing TCM methodology that requires standard operating procedures. The lack of equity in TCM concepts has posed significant problems, such as translation variations and conceptual inconsistency, which threaten the international popularization of TCM. In order to solve these problems, the theoretical base of the TCM translation should be strengthened, the standards of the translator should be built, and more scholars should work in this field. As an integral part of Chinese culture, TCM implies that its theories and practices have developed over centuries of practical healthcare services and, thus, have significantly expanded the global development of traditional medicine. As traditional and complementary medicine attracts more attention from people worldwide, TCM is known more and more for its therapeutical effects, orientated and promising theory, and economic efficiency. Consequently, it is crucial and imperative that TCM internationalizes, which is another crucial and necessary track for its evolution. Key challenges in the translation of TCM include theoretical gaps, lack of systematic methods, unclear academic positioning: Whether TCM translation constitutes an independent academic field remains unresolved, weak academic community. Addressing these issues is crucial for enhancing TCM's global presence and academic integrity.

## 2.5 Summary

In conclusion, the development of TCM over the past 5,000 years has been profoundly shaped by the philosophical tenets of Confucianism, Taoism, and Buddhism. In contrast to Western medicine, which is primarily grounded in empirical data, TCM is deeply embedded in cultural and philosophical frameworks. As Nigel Wiseman observes, this intrinsic connection to its cultural and theoretical context presents significant challenges for accurately translating and interpreting TCM concepts into Western languages (Li, 2001, p. 146).

## 3. Translation and standardization of TCM Terms

The 17th century is widely recognized as the beginning of the translation and global dissemination of TCM. As highlighted in the previous section, the translation of TCM—especially its culturally and philosophically rich terminology—requires meticulous attention to cultural and linguistic factors. The translation, standardization, and transmission of TCM present considerable challenges. From the outset, domestic and international translators have devoted significant effort to addressing these complexities.

Both TCM and Western medicine utilize specialized terminologies unique to their respective fields. It is, therefore, essential to note that contrary to a common tendency to perceive such terminologies as exclusive to experts, they derive from the common language and undergo combinatory or metaphorical developmental change.

This phenomenon is known in linguistics as technologization, which means that certain recurring words are transformed into terms with precise or ambiguous connotations depending on particular or various conceptual requirements. In the TCM translation, as in many other specialized disciplines, this translation of the ordinary language is essential to share complex messages accurately and overtly. The globalization and population of TCM for comprehensive communication encounter unpredictable challenges because of numerous TCM terminologies and the requirement for a great deal of standardization within translation approaches worldwide. Those differences hinder the modern acceptance and incorporation of TCM around the world. Researchers across the globe have striven to provide crucial information and have endeavored to express volumes of ideas and information on the theories of TCM. Addressing these challenges, the Chinese government has ensured that TCM develops with the proper standard terminologies to enhance the adoption of an international standard. Furthermore, due to the WHO's consideration of TCM as an essential contemporary medical system, the WHO has convened specific research conferences with the participation of experts from China and Hong Kong, Macao, Japan, South Korea, and the UK to draft specific guidelines and frameworks for moving forward the process of standardizing TCM on an international level.

### 3.1 Chaos in the translation of TCM terms

The historical, ecological, religious, and cultural diversity across nations leads to varied interpretations and emotional responses to similar concepts, highlighting the need for culturally nuanced translation between English and Chinese. Linguist Lionel Lyons identifies two primary constraints on language systems: regional structure, which facilitates global communication through shared physiological and structural features, and cultural superstructure, which introduces diversity and the potential for misunderstanding. For example, the mistranslation of the Chinese term “哪里” (meaning “where”) in response to a compliment reflects cultural norms—Chinese modesty contrasts with Western practices of accepting praise, influencing interpretation.

In the context of TCM translation, four key challenges emerge: integration of medicine and philosophy, confusion with Western medicine, incommensurability with Western medicine lack of standardization.

The evolution of TCM terminology has historically been characterized by limited standardization, with early transmission often reliant on oral tradition. This has led to inconsistent terminology, such as multiple names for “Zoster,” including “Yao huo chan dan,” “She chuan chuang,” and “Yin ting.”

Despite substantial efforts by both domestic and international scholars, the translation of TCM terminology needs to be more consistent due to the field's deeply culture-specific nature. The standardization and accurate translation of these terms pose significant challenges. First, only a few TCM terms have been reliably translated into English. Second, existing translations often need more consistency from varying principles and methodologies. Even fundamental TCM concepts, such as 阴 (Yin), 阳 (Yang), 五行 (Five Elements), 精 (Essence), 气 (Qi), and 神 (Spirit), exhibit this inconsistency, as evidenced in the following table, which reflects the

divergent interpretations of leading scholars (Gu Ye, 2012, p.1-2).

Table 3.2 Non-standard translation of some TCM basic term:

TCM Terms \ Versions	Porkert (1978)	Wiseman (1998)	Xie (2002)	Maciocia (2005)	Unschuld (2008)	Li's (2008)
五行	Five Evolutive Phases	Five phases	Five Elements; Five Evolutive Phases	Five Elements;	Five phases	Five Elements
气	Configurat-ion, configurati-onal energy, energetic configurati-ve	Qi	Qi, influence	Vital energy	Qi	Qi
神	Shen, Configurati-ive force	spirit	spirit	Mental faculties	Shen, mind	spirit
精	Ching, astrictive potential	essence	essence	essence	essence	essence

The terminology scholars use in translating TCM varies widely, resulting in inconsistencies that confuse Western audiences and hinder the global dissemination of TCM. The abstract and culturally nuanced nature of TCM terms presents unique challenges, leading translators to employ diverse principles and methods based on their Chinese language and culture interpretations. The following section offers a comparative analysis of the translation principles and strategies employed by critical translators, both domestic and international.

### 3.2 A comparison among the existing translation of TCM basic terms

This section examines key translators—Felix Mann, Manfred Porkert, Joseph Needham, Giovanni Maciocia, Nigel Wiseman, Paul Unschuld, and Li Zhaoguo---focusing on the principles and methods they employed in translating their major works. It also critically evaluates the strengths and weaknesses of their translations, assessing their communicative effectiveness.

#### 3.2.1 Felix Mann's Principles and Methods

Felix Mann, a German-born acupuncturist and founder of the Medical Acupuncture Society, was the first president of the British Medical Acupuncture Society. He authored the first comprehensive English textbook on acupuncture, *Acupuncture: Cure of Many Diseases*. His work focused primarily on acupuncture, resulting in a narrow scope in translating TCM terms. His English translations exhibit three key characteristics: Mann's bibliography includes original Chinese texts, indicating his effort to engage with primary sources. However, his interpretations often deviate from authentic TCM theories; Mann sought to explain acupuncture within the context of Western medicine, leading to significant conceptual distortions. In later years, he even denied the existence of meridians and collaterals, attributing acupuncture's efficacy to the human nervous system instead; Mann's translations of fundamental TCM terms like “精” (Jing), “气” (Qi), and “神” (Shen) are

inconsistent. He alternated between transliterations (Jing, Qi, Shen) and semantic translations (essence, life energy, spirit), reflecting a lack of systematic approach.

### 3.2.2 Manfred Porkert's Principles and Methods

Manfred Porkert, a prominent German sinologist and President of the East Asian Research Center at Munich University, is a leading Western scholar of TCM. His extensive engagement with Chinese culture and language, including multiple visits to China and lectures on TCM terminology standardization, has equipped him with a nuanced understanding of the cultural aspects of TCM translation. His principles and methods are primarily outlined in *Theoretical Foundations of Chinese Medicine: Systems of Correspondence* (1978).

Porkert advocates for the Latinization of TCM terminology, arguing that this approach highlights the distinctiveness and autonomy of TCM as a scientific discipline, thereby warranting specialized terminology similar to that found in botany, biology, or anatomy. He asserts that with its precision and clarity, Latin is ideally suited to convey TCM concepts. Porkert's methodology encompasses three primary strategies:

- **Direct Latin Equivalence:** In this approach, existing Latin terms are used for TCM concepts with direct Latin counterparts. For example, the TCM terms 风 (wind), 火 (fire), and 寒 (cold) are rendered as *Ventus*, *Ignis*, and *Algor*, respectively.
- **Coinage of New Latin Terms:** When no direct Latin equivalent exists, Porkert coins new terms, adhering to established morphological rules. For instance, TCM organs such as 肝 (liver), 心 (heart), 脾 (spleen), 肺 (lungs), and 肾 (kidneys) are translated as *Orbis hepaticus*, *Orbis cardinals*, *Orbis lienal*, *Orbis pulmonalis*, and *Orbis renal*, respectively.
- **Partial Latin Equivalence:** Porkert employs a combination of transliteration and Latin borrowing when a term only has partial Latin equivalence. For example, 营气 (*ying qi*) and 卫气 (*wei qi*) are translated as *ch'i constructivism* and *ch'i defensive*, respectively. The former is a transliteration of 气 (*qi*) using Wade-Giles Romanization, while the latter incorporates a Latin-derived term.

Overall, Porkert's approach, which seamlessly integrates profound cultural insight with a rigorous linguistic framework, represents a significant advancement in the translation of TCM, facilitating a clearer understanding of its concepts within a global scientific context.

### 3.2.3 Joseph Needham's Principles and Methods

Joseph Needham, a distinguished British scientist, historian, and sinologist, is renowned for his extensive scholarship on the history of Chinese science. As a fellow of the Royal Society and the British Academy, Needham made groundbreaking contributions to understanding TCM(TCM) through his magnum opus, *Science and Civilization in China*. In Volume VI, *Physics and Physical Technology* (2013), he dedicates substantial attention to the achievements of TCM in ancient China, acknowledging its profound impact on medical science.

Needham recognized that the TCM-related aspects of his work were among the most challenging, primarily due to the difficulty of translating terms that often need more direct European equivalents. Through meticulous lexical, linguistic, and philosophical analysis, he developed his own set of principles and methods for translating TCM, striving to capture its conceptual and cultural nuances while navigating the linguistic and terminological complexities inherent in such a task (Li, 2008, p. 41-41).

Needham emphasized the critical importance of understanding both the exterior and interior meanings of TCM terms, cautioning against superficial literal translations. He argued that the language of TCM is a complex amalgamation of philosophical, literary, and colloquial expressions, where the denotation of a term may have diverged significantly from its original or literal wording.

### 3.2.4 Giovanni Maciocia's Principles and Methods

Giovanni Maciocia, born in Italy and a naturalized British TCM physician and Visiting Professor at the Nanjing University of Traditional Chinese Medicine, is accepted as one of the most essential practicing TCM practitioners in modern Britain. He is also the author of the textbook *The Foundations of Chinese Medicine* (2nd ed., 2005), which has become one of the most widely used textbooks of TCM in the Western world. In the preface of this work, Maciocia proclaimed the principles of his translation; comparing the two sets of terms, he underlines the differences between the most significant TCM terms and their counterparts in Western languages. Finally, he translates TCM terms into English, all of which are capitalized, to show how these terms have different meanings within the TCM system. Maciocia works mainly semantically, as semantic translation aims at an exact rendering of the meanings and contexts of the TCM terms. In addition, the appendix of the textbook offers a list of 56 TCM terms for readers who need to understand the terms used in Traditional Chinese Medicine. This methodological approach improves the comprehensibility of the fundamental concepts of TCM for Western readers and helps in the understanding of the system's significant organization and cultural differences.

For instance, in TCM, terms such as “心主神明” (the heart governs mental clarity), “脾主运化” (the spleen governs digestion), and 肾藏精 (the kidney stores essence) describe physiological roles that differ significantly from those in Western medicine, where cognitive functions are attributed to the brain, the stomach and intestines manage digestion, and reproductive functions are linked to the reproductive organs, rather than the kidneys.

Maciocia categorizes TCM terms into four groups, translating them semantically as follows:

- Concrete nouns, such as “肝” (liver) and “心” (heart)
- Abstract nouns, including “表” (exterior) and “里” (interior)
- Adjective + noun combinations, such as “涩脉” (choppy pulse) and “虚脉” (empty pulse)

□ Noun + noun constructs, such as “中风” (wind stroke) and “命门” (life gate)

Through semantic translation, Maciocia aims to preserve the conceptual integrity of TCM while facilitating its understanding within a Western medical context.

Maciocia endeavors to standardize TCM terminology by including a glossary in his work appendix. Although concise and limited in scope, the glossary is an invaluable resource for translators, helping to mitigate inconsistencies in the translation process. The inclusion of a select group of critical terms underscores the idea that essential TCM concepts can be effectively conveyed using a focused set of terms, thus simplifying the perceived complexity of TCM for readers and facilitating a clearer understanding of its foundational principles.

### 3.2.5 Nigel Wiseman’s Principles and Methods

Nigel Wiseman is a former Southeast Asian TCM specialist currently lecturing at Chang Gung University on Chinese and English medical translation studies in Taipei. Wiseman is known worldwide for his translated versions of TCM and is bilingual in English, German, Spanish, and Chinese. These works, including his English-Chinese Chinese-English Dictionary of Chinese Medicine, published in 1995, have placed Zhang as the leading expert in translating TCM. Wiseman gives a comprehensive description of Chinese medical terminologies in the light of the Second Edition of *A Practical Dictionary of Chinese Medicine* (1998) and the formation of TCM terms, the classification of TCM terms and *Chinese English TCM Dictionary*, and various approaches to translation in TCM. To some extent, his work is the most detailed and comprehensive among all those available for TCM dictionaries. Based on the examples, Wiseman also recommends that when the appropriate English equivalent cannot be found, new terms should be coined or the older names of diseases used – as long as they are not diseases with modern Western medical names. Transliteration should only be used when there is no appropriate borrowed or coined English term or when the TCM concept is highly polysemous in different contexts. Wiseman's translation methodology includes borrowing common phrases, adopting existing corresponding phrases, occasionally coining new phrases, and using transliteration. Also, Wiseman has arranged the terms of TCM consciously based on semantics and history, as well as uses literary and cultural parameters. He has developed tailored strategies for standardizing these terms, such as distinguishing between “痈” (welling abscess) and “疽” (flat abscess)—terms that have historically confused even among TCM experts.

### 3.2.6 Paul Unschuld’s Principles and Methods

The only academic research vehicle for the TCM(TCM) is supervised by Paul Unschuld, the Director of Munich University’s Institute of the History of Medicine. Based on his knowledge, Unschuld applied the discussed translation principles to comprehensible TCM texts such as the *Yellow Emperor’s Canon of Medicine* and the *Difficult Issues*. He supports a translation method from cultural and historical views to capture the actual sense of TCM. Unschuld extends the definition of TCM translation to encompass not only such internal structure and content as the theoretical framework of TCM but also the social history of TCM as a discipline and

practice. Since publishing his monography, Unschuld researched the ideological and ethical background of TCM. In *Medicine in China: A History of Ideas* (1988), he suggests that historical change, politics, and economy are the fundamental forces behind the development of TCM and notes that these should be smoothly incorporated into translation. Unschuld's translations are particularly inclined towards cultural and historical perspectives and settings. For example, he understands 脏 as “depots” and 腑 as “palaces,” even though in the Western context, the translations for 脏 and 腑 are “viscera” or “bowels.” This is due to the symbolic use of characters 藏 and 府, initially meaning storage or depositories. Thus, “depots” and “palaces” correspond better with the metaphorical generalization of the organs in ancient Chinese medical outlook as they name both the metaphorical-functional connotations assigned to these organic structures during that era.

### 3.2.7 Li Zhaoguo's Principles and Methods:

Li Zhaoguo, a distinguished English professor at Shanghai Normal University and holder of a Ph.D. in TCM, is a leading authority on translating TCM terminology in mainland China. His contributions have been pivotal in the standardization and global dissemination of TCM terms. In 2002, Li published two seminal works: *Chinese-English Dictionary of TCM and International Standardization of English Translation of Traditional Chinese Medicine: Study of Theory, Summarization of Practice, and Exploration of Methods*. In these works, he underscored the collaborative efforts of domestic and international scholars since the 1980s, culminating in establishing the International Standard Terminologies of TCM (ISTTCM) (Li, 2003, p. 309). His influence was also instrumental in the publication of the WHO International Standard Terminologies on Traditional Medicine in the Translation and Standardization of TCM Terms, Western Pacific Region (《世界卫生组织西太区传统医学国际名词标准术语》) by the World Health Organization Western Pacific Region (WHOWPR) in 2007, a critical document that places significant emphasis on the standardization of TCM terminology. Li has been a vocal critic of the inconsistencies, redundancies, and ambiguities in TCM translations, which he attributes to the lack of unified translation principles. In response to these challenges, he has proposed guiding principles to address these issues and promote greater clarity and consistency in TCM terminology translation. Li advocates for the translation of TCM terms into their Western medical equivalents when conceptual alignment exists (Li, 2001, p. 41-42).

However, Li's morpheme translation method has not been widely adopted in TCM translation. Critics contend that its technical nature can obscure meaning, even for professionals, and that it may diminish the cultural richness and conceptual depth inherent in TCM terminology. Finally, the analysis of translations by outstanding translators outlined above has some limitations, with each performing excellently in some aspects of TCM terminology but could be better in others. This has caused damages and potentialities in connections in order, as well as sometimes even apparent and in now and again precise vaguenesses which rendered the permanently stable stop the comparable of TCM translation. Some translators' strategic behavior consists of their adherence to the linguistic source text and its concise translation, ignoring the cultural knowledge of TCM terms in translated language; this is used in

translation while distorting the context of the source text. Further, some translators try to match TCM terms with contemporary biomedical terms, thus encountering such problems as polysemy, homonymy, and synonymy. The most crucial question, however, remains the identification of what TCM translation aims to serve in response to vital concerns regarding principles, approaches, techniques, and assessment. It must also be stressed that TCM terminology is not simply a technical language; it has cultural, philosophic, and literate connotations and is a whole system with a lot of cultural implications. Culturally, philosophically, and linguistically, the processes of translating and standardizing TCM demand a deep understanding of the nature of TCM as a knowledge system. This study discusses in detail the associations between culture, language, and translation to establish viable models for translating TCM.

#### **4. The translation of TCM terminology and Its Cultural factors**

Language is both a mirror and a builder of culture, meaning translation is not merely an activity of transforming words from one language into another but of reconstructing culture appropriately through constructing equivalents. In this case, translation is central to providing the means to transfer cultural paradigms, beliefs, and systems of thought. Many scholars advocate using culture as a strategy when translating, as the former considers the implicit cultural beliefs in the source and target languages and the explicit cultural values that relate to the information being translated. As a result, cultural translation includes a complex study of relations between culture and translation concerning cultural differences and their role in shaping the translation.

##### **4.1 Culture, Language, and Translation**

Cultural adaptation is the fourth simple type of translation where plenty of attention is paid to conveying the proper semantic, tonal, and stylistic equivalent in the target culture. Translation means multilingualism, multiculturalism, and numerous factors like psychological, historical, cultural, and religious differences. The inherent difficulty is explained by the fact that a translator is to operate within two different cultural and linguistic systems and their respective standards and practices. Consequently, translators are to modify the sentence distribution according to the demands of the target culture; however, in so doing, references must be made to how such strategies are culturally and linguistically appropriate for translating the said message.

##### **4.1.1 Definition of Culture**

According to Peter Newmark (1988), Culture is the way of life, and the specific codes relegated to a particular linguistic community. Traditionally, Culture is defined by the Spiritual and material aspects; however, contemporary estimations based on the Western horizon have placed much importance on the Bourgeois Culture. On the other hand, the educational approach to TCM as a system inculcated in the Chinese tradition is relatively different and opposite to medical education, where history occupies the bulk of the information instead of being combined with the prevailing modern practices. Thus, TCM can be viewed in various ways besides the historical

and cultural approaches to investigating the history of knowledge, stressing its development and applicability in the present-day context. Therefore, the postmodern cultures as part of medical Culture that embrace TCM hold a central place in the overall process of cultural progress.

#### 4.1.2 Definition of Translation

According to Eugene Nida, messages are easy to translate if the form does not matter because he stated that form and content are comparable and that there are language universals. On the other hand, Professor Zheng Shiding insisted that it is necessary to convey the content and the feelings of the source language directly to the target language and be a transmitter of the meaning from the source language to the target language. Conceptual translation is particularly problematic when translating TCM because it is grounded in a culture. Culturally and ideologically driven discrepancies between source writers and translators often lead to confusion in the selection of the appropriate terms, meaning interpretation, and continuation.

#### 4.1.3 Culture, Language, Translation and Their Relationship

Lotman Watkins (2003) demonstrated that language and culture are interrelated, noting that one cannot be fully understood without considering the other. This study also explains that cultural competence is essential in the translation of TCM, as focusing on technical qualities only may lead to poor translation. It has to be understood that translation should be unrestricted within the linguistic trends to get the message across the language. Nida (2004) does not oppose matching language patterns with their connotations, but he agrees with the priority given to connotative meaning if there is conflict. Nida identifies two central challenges in cultural translation: The introduction of local epistemologies and the circulation of Indigenous knowledge systems. Since language serves as an instrument of expression, it preserves cultural imperatives that define and shape conduct and ideas. Considering Aristotle's rhetoric, it is possible to identify how emotional appeal may influence the perception of translated texts and, thus, potentially change its effect compared to the source text. Nida (2004) notes that idiomatic expressions typically have no equivalent in other languages; hence, translation is bound to depart somewhere. Music trainers also have to do the same by translating these linguistic deviations to add value rather than detract from the original information.

## 5. Principles and Strategies in Translating TCM Basic Terms

### 5.1 Translating TCM Culture as a Principle

A comprehensive analysis of cultural shifts in translation offers critical insights for translating TCM terminology, which is deeply embedded in medical, philosophical, and cultural contexts. This dissertation argues that TCM translation must transcend the mere pursuit of linguistic equivalence with Western medicine to fully convey the distinctive medical knowledge of TCM and its rich Chinese cultural essence. Three pivotal factors drive this transformation:

- Guiding Principles: TCM terminology is intricately tied to Chinese cultural and philosophical frameworks, encapsulating unique perspectives on disease

mechanisms. Establishing standardized translation principles is essential to ensure consistency and clarity in TCM terminology. A unified guiding framework will ensure the accurate transmission of TCM's holistic medical insights, preserving its integrity across languages.

□ Intercultural Communication: Translation should be viewed as an intercultural dialogue, with culture as a central focus. TCM translation must encompass its philosophical and cultural contexts to preserve its original meanings and enhance comprehension among Western audiences. This approach will mitigate potential misunderstandings and improve the accuracy of TCM term translations, facilitating a more nuanced and culturally informed understanding of TCM.

□ Strategic Cultural Transmission: Emphasizing Chinese cultural transmission within TCM translation significantly advances China's global cultural influence. Initiatives such as the Belt and Road Initiative aim to extend China's cultural reach, and promoting TCM across cultural boundaries is an essential component of these efforts. Translating TCM into global contexts aligns with China's strategic goals to enhance its international standing.

In conclusion, prioritizing the cultural dimensions of TCM translation is paramount. The following sections will outline strategies for translating TCM terminology within this cultural framework, ensuring linguistic accuracy and authenticity in cross-cultural exchanges.

## 5.2 Domestication vs. Foreignization: A Re-examination

There have been controversies like other pivotal debates in the practice and theory of translation, such as the domestication–foreignization and literal–semantic or word-for-word–sense-for-sense dichotomies. It is essential in terminating, mainly when translating TCM terminology. The translation process usually entails altering some part of the original text to match other cultural behaviors of the target community. This strategy adjusts the source language format to improve the textual message and better address the target population; it is viewed as a target-reader-centered approach. Thereby, the idea is to rinse out cultural specificities to achieve maximal iconicity of the textual images.

On the other hand, foreignization is the strategy in which the translator wants to maintain the linguistic and cultural features of foreign text at variance with the TL norms. This approach stresses the foreign and the exotic in the source text and is based on the so-called “source-information-point-of-view” philosophy. A noted translation studies scholar, Lawrence Venuti (1998), locates these strategies along a continuum where translation either domesticates or translates a foreign work into the target culture. A study of the translations produced by well-known translators reveals a clear division between the domestication and the foreignization models. In the past, Chinese translators tended to adopt domestication, especially in translating TCM terms, which are familiar to Western readers. This tendency reflects an unconscious aim on the part of some writers to Westernize TCM and adapt it to prevailing medical orthodoxy. This process tends to erode the original cultural and philosophical context of the TCM system.

### 5.3 Taking Foreignization Strategy to Transmit TCM Culture

Lawrence Venuti's seminal work *The Translator's Invisibility: A History of Translation* (1998) introduced the ideological divide between domestication and foreignization, which has since become a foundational concept in translation studies. In his subsequent book, *The Scandals of Translation: Towards an Ethics of Difference*, Venuti advocates for foreignization as an ethical approach to translation, emphasizing its potential to preserve the cultural and linguistic nuances of the source text (Gile, 2009). This research aligns with Venuti's preference for foreignization in the translation of TCM(TCM) for several critical reasons:

□ **Translation Strategy Principle:** Foreignization plays a crucial role in preserving the cultural and philosophical integrity of TCM concepts. Venuti argues that foreignization imposes "ethno-deviant pressure" on the target culture, compelling readers to engage with the unfamiliar cultural and linguistic dimensions of the source text (Venuti, 1998, p. 48). On the contrary, domestication aims to translate TCM concepts into Western standards, which, in effect, distorts and erases the cultural meaning of those concepts. This tendency can lead to misunderstandings, as this simplification level removes the richness of cultural connotations inherent in TCM.

□ **Historical Limitations of Domestication:** Historical experience shows that domestication tends to obscure the most distinctive features of TCM. For example, translating TCM organs (肝, 心, 脾, 肺, 肾) into Western anatomical terms eliminates the specificity of various organizational and functional structures that are essential in TCM theory. Early translators, due to direct translation from Western languages, misunderstood even the most fundamental concepts of TCM – such as '心主神明' (the heart governs the spirit) and '肾主生殖' (the kidney governs reproduction). These interpretations may have contributed to misconceptions about TCM being viewed as unscientific or overly simplified, making it incompatible with the holistic systems approach used in TCM. Therefore, while domestication has facilitated the spread of TCM in the West, it often does so at the expense of the multicultural and conceptual depth of the original texts.

□ There is a need for a translation strategy that preserves and promotes the cultural value system inherent in the practice of TCM. Foreignization, by maintaining the essence of TCM, actively preserves the cultural and conceptual richness that is inherent in translating TCM texts.

### 5.4 Taking Foreignization Strategy to Match Nation Power

Analyzing historical Chinese translations, we can see that foreignization is employed in a rather tactical manner, more or less in accordance with China's rising/off development as a world power. Both Lefevere and Bassnett are academics who have addressed this issue. For example, when translating computer science terms in the early 1980s as China adopted new technology, literal translations for technical accuracy were used. That exemplified foreignization. However, due to cultural differences, inserting TCM into the Western world was a significant challenge.

Another example is the work of Xuanzang, the monk of the Tang dynasty, who translated the scriptures from Sanskrit to Chinese. Still, it is necessary to emphasize that Xuanzang replaced some references according to the Chinese cultural context, which means that she, in fact, demonstrated foreignization. His “Five Untranslatables” principle focused on cultural equivalence, trying to make the texts easily understandable by Chinese people. During the May Fourth and New Culture Movements in the early period of the twentieth century, translating the Western democratic and scientific discourses into Chinese was conducted in a most literal sense, as called by intellectuals such as Lu Xun. This approach, consistent with that advocated by Western sources, emphasized the domain over the range, or as with translating Chinese texts for international consumption, the cultural fidelity-over-semantic eating system more akin to foreignizing translation. These examples highlight how, in contrast with purely linguistic translation features, translation strategies are varied by historical and cultural context. When power is exerted on translated content inverting from the source language culture to the receptor culture, the former will employ foreignization, while the latter will employ domestication. It is the other way around when knowledge transfer goes in the downward fashion. Scholars such as Xuanzang, Lu Xun, and computer science translators have implemented different strategies in view of the geopolitical realities of the world and the cultures of power. These cases show how these factors determine translation practices, thus affecting the ways knowledge is conveyed and localized.

### 5.5 Taking Foreignization Strategy to Secure Cultural Capital

Thus, translating TCM(TCM) through a foreignization strategy is essential for situating this object of Chinese cultural heritage as a culturally and politically charged twenty-first-century cultural capital. In *Translation Practices and the Circulation of Cultural Capital*, Lefevere posits that translation is the means of interculturality and transferring one culture to another (Bassnett & Lefevere, 2001). Cultural capital, pioneered by Pierre Bourdieu in 1977, is the sum of educational and cultural property used in the struggle for power and prestige in a given culture or society, as defined by Barker (2004). Lefevere's discussion of the strategies of translators who dealt with Virgil's *Aeneid* demonstrates that earlier translating strategies helped produce cultural capital to bolster translators' position and readership (Bassnett & Lefevere, 2001). Likewise, a source-culture-oriented approach in TCM translation known as foreignization can turn heritage culture into a cultural asset, enhancing a perception of the actual worth of TCM. The mobility of TCM practices, including acupuncture and moxibustion in developed countries, further strengthens the need for a foreignization approach (Feng, 2009). According to Niu (2003), as early as 1999, more than 500 publications on TCM primary literature were translated into English. In addition, after becoming the world's second-largest economy since 2010, China's scale increases power to spread culture and economic might. Foreignization in TCM translation is, therefore, to preserve and promote China's philosophical values and boost China's economic influence as well. Therefore, foreignization becomes relevant for translating TCM to nurture Oriental culture to meet International demands harmonized with China's global presence.

## 5.6 Transmitting Chinese Culture in TCM Translation

Translating Traditional Chinese Medicine (TCM) means being ready to invest considerable efforts into translating Chinese culture. Therefore, this study concludes that using a foreignization strategy is imperative to ensure that TCM terminology is not abused. It is crucial to closely analyze the medical, cultural, philosophical, and literary backgrounds because otherwise misunderstood terms will be used in a translation. For instance, the translation of '失笑散' (Shīxiào Sǎn) as 'Smiling Powder' is befitting the clinical action on stasis of blood. Also, "风火眼" (Fēnghuǒ Yǎn) must be translated as "Wind-fire eyes" as it refers to the distinct diagnostics from TCM. Translations like "腰缠火丹" (Yāo et al.) are interpreted as "Girdling Fire," which fits into TCM cultural and medical uses of the terms, as well as 脏腑 and (Zàng Fǔ) as "depots and palaces." As practitioners often note, very little TCM translates directly to modern medical parlance: anyone undertaking translation thus needs to appreciate the culture and frame in which TCM emerged. Foreignization preserves the purity of the TCM in use internationally and the medical, cultural, and philosophical aspects of TCM. It enables knowledge sharing to be done interlingually and interculturality in the context of one process.

## 6. Integrating Methods to Translating TCM Terms from a Cultural Perspective

### 6.1 Transliteration

Transliteration in TCM aims to preserve the phonetic representation of key terms, such as 气 (Qi), 阴 (Yin), and 阳 (Yang), which hold significant cultural and philosophical meanings. While direct translation may not fully capture the depth of these terms, transliteration helps maintain their authenticity and integrity within the TCM framework. Strategic use of transliteration for essential TCM concepts is crucial, considering the challenges of conveying tonal nuances and cultural nuances accurately.

### 6.2 Codification

The standardized codification of acupuncture points in TCM provides a practical system for identifying anatomical locations. However, integrating literal translation and transliteration with codification can enhance the understanding of acupuncture point names, reflecting their therapeutic functions and philosophical significance in TCM. This comprehensive approach ensures that the cultural and therapeutic context of TCM is preserved in translations, offering a more meaningful interpretation for researchers and students.

### 6.3 Adopting Western Equivalence

Equivalence in translation studies plays a vital role in accurately conveying specialized knowledge, such as TCM concepts, across linguistic and cultural boundaries. Understanding different frameworks of equivalence, such as functional, textual, and formal equivalence, helps translators navigate the complexities of cross-cultural communication while maintaining the integrity of the source text. By integrating cultural perspectives with linguistic analysis, translators can ensure

accurate and meaningful translations in specialized domains like TCM.

#### 6.4 Literal Translation

Literal translation, focusing on word-for-word conversion, is valuable in technical translation to preserve the original text's cultural and stylistic elements. By maintaining equivalence and cultural context, literal translation reconstructs the source language's cultural nuances in the target language, enriching the translation. In the context of TCM, the foreignization strategy supported by literal translation can amplify China's cultural influence globally while accurately conveying the depth of TCM concepts.

#### 6.5 Liberal Translation

Liberal translation prioritizes conveying the intended meaning of a text over strict word-for-word translation, especially for terms with nuanced meanings like those in TCM. This approach is essential for accurately translating polysemous terms and capturing the cultural and medical nuances of TCM concepts. By employing liberal translation, translators can ensure precise and culturally informed translations that reflect the original text's complexity and depth.

#### 6.6 Adding Notes

In TCM translations, including English annotations is crucial for clarifying ambiguous terms and providing additional context for readers. Annotations can address unique TCM terms, controversial interpretations, and complex concepts, enhancing understanding and bridging the cultural gap between Eastern and Western medical paradigms. By offering detailed explanations and historical insights, translators can preserve the integrity of TCM texts and facilitate accurate cross-cultural communication.

### 7. Conclusion

A deep understanding of TCM terminology requires familiarity with its cultural context to standardize its language effectively. TCM, rooted in ancient Chinese philosophy, differs significantly from Western medicine, emphasizing holistic harmony through principles like Yin-Yang and the Five Elements. The language of TCM, based on classical Chinese, poses translation challenges due to its intricate philosophical depth and linguistic complexity. The rise of translation studies in the 1970s emphasized the importance of cultural context in accurate transmission to Western audiences. Effective TCM translation requires a multifaceted approach combining cultural understanding and linguistic proficiency. Future research will focus on key TCM concepts, reception of TCM translations, digital technologies in global dissemination, enhancing China's cultural influence through TCM translation, and educational frameworks for training TCM translators.

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