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The Translatability of Euphemism in

Medical Translation

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Dedication

To my loved ones, whose unwavering love and support have been my constant moti-

vation throughout this journey, your belief in my abilities and your sacrifices have

motivated and inspired me to pursue knowledge. As a gesture of my sincere gratitude

and admiration, I dedicate my thesis to you.

Rania.

Dedication

To my beloved family and cherished friends, whose love, encouragement, and un-

wavering belief in me have been my constant motivation, this thesis is dedicated

to you, as a token of my heartfelt appreciation for your unending support

throughout this academic endeavor.
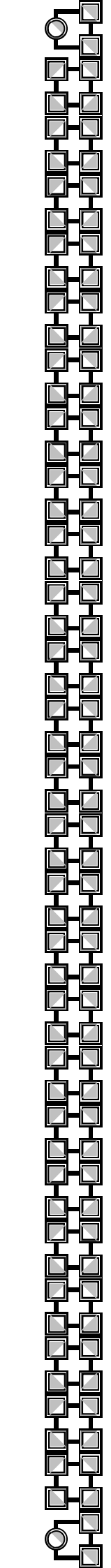
Imane.

Acknowledgements

Abstract

This dissertation is devoted to study the translatability of euphemism in medical translation, concentrating on the challenges encountered and procedures involved in transferring euphemistic expressions from English into Arabic The study begins with an investigation of the theoretical basis of euphemism and its role in communication within the medical realm. It goes into the cultural, sociological, and ethical consequences of adopting euphemistic language in healthcare situations, emphasizing the need to keep the intended meaning and impact of euphemistic terms during translation. The study examines numerous euphemistic terms frequently found in medical writings and considers the difficulties they pose for translators, drawing on a variety of case studies and examples. It investigates the linguistic structures, cultural taboos, and stylistic decisions that affect how easily euphemisms may be translated. The study explores the procedures used by medical translators to accurately and appropriately transmit euphemistic language. In order to bridge the gap between the source and target languages, it discusses how to employ similar euphemisms, cultural adaptation, explication, and other translation strategies, taking into account the target audience and particular communicative goals.

Keywords: Euphemism, translatability, medical settings, translation procedures, communication.

الملخص

تبحث هذه المذكرة قابلية ترجمة التلطيف في الترجمة الطبية، مركزة على التحديات التي تواجهها والإجراءات المستعملة في نقل التعابير التلطيفية من الإنجليزية إلى العربية. تبدأ الدراسة بالتحقيق في الأساس النظري للتلطيف ودوره في التواصل داخل السياق الطبي. وتستكشف النتائج الثقافية والاجتماعية والأخلاقية لاعتماد لغة التلطيف في السياق الطبي، مع التركيز على ضرورة الحفاظ على المعنى المقصود وتأثير المصطلحات والعبارات التلطيفية أثناء الترجمة .

تتناول الدراسة العديد من المصطلحات التلطيفية المستخدمة بشكل متكرر في الكتابات الطبية وتناقش الصعوبات التي تواجه المترجمين، مستعينة بدراسات الحالة والأمثلة المتنوعة. تستكشف الدراسة الهياكل اللغوية والتابوهات الثقافية والقرارات الأسلوبية التي تؤثر في سهولة ترجمة التلطيف. كما تبحث الدراسة في الإجراءات التي استخدمها المترجمون الطبيين لنقل اللغة التلطيفية بدقة.   تناقش الدراسة كيفية اعتماد اجراءات الترجمة في مثل التكييف الثقافي، التوضيح، واستراتيجيات الترجمة الأخرى، مع مراعاة الجمهور المستهدف والأهداف الاتصالية الخاصة.

Résumé

Cette note de recherche examine la traductibilité de l'euphémisme dans la traduction médicale, en se concentrant sur les défis auxquels elle est confrontée et les procédures utilisées pour transmettre les expressions atténuantes de l'anglais à l'arabe. L'étude commence par examiner les fondements théoriques de l'euphémisme et son rôle dans la communication dans le contexte médical. Elle explore les résultats culturels, sociaux et éthiques de l'utilisation de l'euphémisme dans le contexte médical, en mettant l'accent sur la nécessité de préserver le sens voulu et l'impact des termes et expressions atténuantes lors de la traduction.

L'étude aborde de nombreux termes atténuants couramment utilisés dans les écrits médicaux et examine les difficultés auxquelles sont confrontés les traducteurs en s'appuyant sur des études de cas et des exemples variés. Elle explore les structures linguistiques, les tabous culturels et les décisions stylistiques qui influent sur la facilité de traduction de l'euphémisme. L'étude examine également les procédures utilisées par les traducteurs médicaux pour transmettre avec précision la langue atténuante. Elle discute de l'adoption de procédures de traduction telles que l'adaptation culturelle, l'explication et d'autres stratégies de traduction, tout en tenant compte du public cible et des objectifs de communication spécifiques.

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General Introduction

General Introduction:

In today's rapidly advancing world, medical research and understanding play a pivotal role in improving healthcare outcomes and enhancing the quality of life for individuals across the globe. The field of medicine constantly evolves, bringing forth new insights, innovative treatments, and novel approaches to address complex health challenges. One such area of study is the investigation of medical terminology and its linguistic aspects, shedding light on the diverse ways in which medical conditions are described and communicated.

By shedding light on the intricate relationship between language, culture, and healthcare communication, this dissertation aspires to offer practical insights and recommendations for healthcare professionals, educators, and policymakers. It seeks to encourage informed decision-making regarding the use of euphemisms in medical discourse, with the ultimate goal of promoting effective communication, patient understanding, and culturally sensitive healthcare practices.

Problematic of the Research

The use of language in medical terminology and communication is of utmost importance in healthcare settings. Effective communication between healthcare professionals and patients is essential for accurate diagnosis, proper treatment, and patient satisfaction. However, the language used to describe medical conditions can sometimes be sensitive, complex, and emotionally charged. In an attempt to mitigate potential discomfort or confusion, euphemisms are often employed to soften or replace certain medical terms.

The use of euphemisms in medical discourse raises several important questions and concerns. How do euphemisms impact patient understanding and perception of their medical condition? Are euphemisms effective in alleviating patient anxiety and promoting empathy in healthcare interactions? What are the cultural and linguistic factors that influence the choice and usage of euphemisms in medical terminology? How do these linguistic choices vary between different languages and cultures?

This dissertation aims to address these questions and explore the use of euphemisms in medical terminology, with a specific focus on the English and Arabic languages. By examining selected medical terms and their euphemistic counterparts, this research seeks to analyze the implications of linguistic choices on effective communication, patient understanding, and cultural perceptions in healthcare settings.

The problematic of this dissertation lies in understanding the role and effectiveness of euphemisms in medical discourse, and their impact on patient-centered care and cross-cultural communication. It aims to contribute to the existing body of knowledge on medical terminology and communication by providing insights into the linguistic strategies employed by healthcare professionals and their implications for patient care and outcomes.

By conducting a comparative analysis of English and Arabic medical terminology, this research will explore the similarities, differences, and cultural considerations that influence the choice and usage of euphemisms. It will draw upon linguistic theories, cultural studies, and medical communication frameworks to examine the nuances embedded within euphemistic medical terms and their impact on effective communication and patient-centered care.

Ultimately, this dissertation seeks to provide practical insights and recommendations for healthcare professionals, educators, and policymakers, aiming to inform decision-making regarding the use of euphemisms in medical discourse. By promoting a deeper understanding of the complex dynamics between language, culture, and healthcare communication, this research aims to enhance patient-centered care, foster cross-cultural understanding, and contribute to the development of more inclusive and effective healthcare practices

The Aim of the Study

The aim of this study is to investigate the translation of euphemisms in medical discourse and explore the challenges and strategies involved in effectively conveying euphemistic meaning across different languages. By focusing on the specific context of

medical discourse, the study aims to contribute to a deeper understanding of the complexities and implications of translating euphemisms in a field where precise and sensitive communication is essential.

The primary goal of the study is to shed light on how euphemistic expressions in medical texts are translated and examine the extent to which the euphemistic meaning is preserved in different target languages. This investigation will provide insights into the linguistic and cultural considerations that translators face when dealing with euphemisms in medical texts and help identify potential areas of improvement in the translation process.

Main Research Question

What are the challenges and strategies involved in translating euphemisms across languages in medical discourse?

Sub-questions

1. What are the linguistic and cultural barriers encountered when translating euphemisms in medical terminology?
2. What are the common translation techniques employed to render euphemisms in medical discourse from one language to another?
3. How do the cultural and social connotations associated with euphemisms impact the translation process in medical communication?

Main Research Hypothesis

The translation of euphemisms in medical discourse poses challenges due to linguistic and cultural differences, requiring specific strategies to ensure accurate and culturally appropriate renditions.

Sub-hypotheses

1. Linguistic and cultural barriers significantly affect the translation of euphemisms in medical terminology, leading to potential loss of meaning or misinterpretation.

2. Translators employ various techniques such as adaptation, substitution, or calque to bridge the linguistic and cultural gaps when translating euphemisms in medical discourse.

3. The cultural and social connotations associated with euphemisms influence the choice of translation strategies in medical communication, aiming to maintain politeness, sensitivity, and effective communication across languages.

Methodology of Analysis

The methodology employed in this analysis is a qualitative research approach, specifically a comparative analysis of translations of euphemisms in medical discourse. The study will involve a careful examination and comparison of translated texts from the source language to the target language.

Data Collection

1. Selection of Source Texts: A corpus of medical texts containing euphemistic expressions will be compiled from reputable sources in the field. These texts will serve as the basis for the analysis.

2. A questionnaire will be used to gather insights from medical interpreters at the Cuban-Algerian Hospital of Ophthalmology regarding the translation of euphemisms in their practice. The findings from the questionnaire aims to contribute to a comprehensive understanding of the complexities involved in translating euphemisms in the medical field.

Data Analysis

1. Identification and Extraction: Euphemistic expressions in the source texts will be identified and extracted. These expressions will form the basis for comparison with their translated counterparts.

2. Comparative Analysis: The translated versions of the euphemisms will be compared to examine how they have been rendered in the target languages. The analysis will consider linguistic accuracy, cultural appropriateness, and the level of euphemism preservation.

3. Translation Strategies: The translation strategies employed in the target languages will be analyzed to understand the techniques used to convey the euphemistic meaning. This analysis will include techniques such as adaptation, substitution, calque, paraphrasing, and omission.

4. Cultural and Social Context: The cultural and social connotations associated with the euphemisms will be taken into account during the analysis. This will involve examining the impact of cultural norms, beliefs, and sensitivities on the choice of translation strategies.

5. Evaluation and Interpretation: The findings from the comparative analysis will be evaluated and interpreted to identify patterns, trends, and challenges in the translation of euphemisms in medical discourse. The results will contribute to a deeper understanding of the complexities involved in achieving accurate and culturally appropriate translations.

Limitations

1. The analysis will be limited to a specific set of euphemisms in medical discourse, and therefore the findings may not be generalized to all types of euphemisms or medical contexts.

2. The study will rely on existing translations and may not include direct input from translators or professionals in the field.

3. The analysis will primarily focus on linguistic and cultural aspects, while other factors such as target audience and communicative goals may also influence translation choices.

Organisation of the Study

This dissertation is organized into three chapters, each addressing specific aspects related to the translation of euphemisms in medical discourse. The following provides an overview of the content and objectives of each chapter:

General Introduction

- Provides an introduction to the topic and the importance of studying the translation of euphemisms in medical discourse.

- Presents the research problem and outlines the research questions and hypotheses.
- Offers an overview of the organization of the study and its contributions to the field.

Chapter One and Two: Theoretical Framework

- Conducts a comprehensive review of the relevant literature on euphemisms, translation theory, and medical discourse.
- Surveys previous studies that have investigated the translation of euphemisms, highlighting gaps and areas for further research.
- Provides theoretical foundations and frameworks that inform the analysis of the translation of euphemisms.

Chapter Three: Practical Chapter

- Describes the research methodology employed in the study, including the qualitative research approach.
- Explains the data collection process, selection of source texts, and gathering of translated versions in different target languages.
- Discusses the data analysis techniques, such as the identification and extraction of euphemistic expressions and comparative analysis of translations.

- Presents the findings of the comparative analysis of translated texts.
- Examines the translations of euphemisms in medical discourse in different target languages.
- Analyzes the linguistic accuracy, cultural appropriateness, and preservation of euphemistic meaning in the translated texts.
- Explores the translation strategies employed and their effectiveness in conveying the intended euphemistic message.

CHAPTER 1- MEDICAL TRANSLATION

1-1   INTRODUCTION

Medical translation is essential for addressing the language gap that may exist between patients in a hand and doctors in the other hand. It entails the rendering from one language to another of medical documents, research papers, patient records, pharmacological information, and other relevant data. The medical profession is highly specialized and includes several subspecialties, including psychiatry, surgery, internal medicine, paediatrics, and more. Each of these fields has certain vocabulary, ideas, and nuances that must be translated correctly, and that call for specialized knowledge and language proficiency. Medical translation requires a thorough grasp of medical principles, terminology, and cultural subtleties and goes beyond simple language conversion. In addition to having a strong foundation in both the source and target languages, translators in this sector also need to be aware of medical terminology and science.

1-2   English for Specific Purposes (ESP)

English for Specific Purposes (ESP) emphasizes on the language abilities and knowledge required by particular fields, sectors, or occupational domains. It is intended to achieve the specific requirements and goals of learners that require English for academic or professional reasons. ESP practitioners are aware that language learners' demands differ according to their fields of study, such as commerce, medicine, engineering, or the law. ESP attempts to offer learners the necessary practical language tools they need to excel in their chosen sector by that focuses on the language abilities and vocabulary related to a provided career or academic discipline.

According to Hutchinson and Waters (1987), ESP is a learner-centred approach, which indicates that it "does not depend on a specific type of language, teaching material, or methodology" (Rahman, 2015, p. 25), instead focusing on the basic needs, learners, the required language, and the learning context. Furthermore, Dudley-Evans and St John (1998) define ESP by using absolute and variable characteristics, as Rahman (2015) indicates below:

✓ *Absolute Characteristic*

-ESP is designed to meet specific needs of the learner;

-ESP makes use of the underlying methodology and activities of the disciplines it serves;

-ESP is centred on the language (grammar, lexis, and register), skills, discourse and genres

Appropriate to those activities.

✓ *Variable Characteristic*

-ESP may be related to or designed for specific disciplines;

-ESP may use, in specific teaching situations, a different methodology from that of 'General English';

-ESP is likely to be designed for adult learners; either at a tertiary level institution or in a professional work situation. It could, however, be used for learners at secondary school level;

- ESP is generally designed for intermediate or advanced students. Most ESP courses assume basic knowledge of the language system, but it can be used with beginners.

In general, these definitions focus on the learner-centered component of ESP and its versatility in addressing the particular language requirements of learners in various professional and academic contexts.

1-3   Definition of medical terminology

Medical language is a specialized set of terms used by medical professionals to communicate effectively and accurately.it is consistent and generic around the world because it is based mainly on Greek and Latin terms. While some of the terms are complex, they sometimes constrict a whole phrase into a single word. The healthcare vocabulary is extensive, and acquiring it seems like learning a foreign language's whole vocabulary. Furthermore, it is always expanding, much like the jargon that emerges in all evolving domains.

Davies (1985) defines medical terminology as "the study of terms used to convey knowledge and ideas concerning medicine; which is mainly related to the current usage and meaning of such terms.

As stated by Davies (1985), medical terminology is the study of words used to express facts and ideas in the field of medicine. The main objective of medical termi-

nology is to clarify the current usage and meaning of these terms. This definition high-lights the significance of understanding the medical domain's specialized language and vocabulary in order to successfully express information and concepts. Individuals can obtain a deeper grasp of medical issues and communicate more effectively in the med-ical industry by learning medical terminology.

1-4   Definition of Medical Translation

Medical translation includes an extensive number of subjects, including pharmacol-ogy, the medical rescue system, surgery, obstetrics, paediatrics, psychiatry, internal medicine, oncology, cardiology, and several other fields of specialty, beside other dis-ciplines such as law or administration. Translation is an essential component in the global dissemination of medical information and new discoveries.

The statement highlights the wide-ranging significance of medical translation in various subject areas. Medical translation encompasses fields like pharmacology, med-ical rescue systems, surgery, obstetrics, paediatrics, psychiatry, internal medicine, on-cology, cardiology, and other specialties. Additionally, it extends its reach to disci-plines such as law or administration. The statement rightly emphasizes the crucial role of translation in the global dissemination of knowledge and new discoveries in the medical field. By accurately translating medical information, researchers, healthcare professionals, and patients worldwide can access and benefit from the latest advance-ments and findings in medicine.

1-5   Features of Medical Translation

Medical translation is distinguished by several important features in particular, em-phasizes the language that possesses a set of scientific qualities. The most important of these are:

Accuracy: The translation aims to express concepts directly, with clarity and without resorting to ambiguity or vagueness in meaning. To achieve this accuracy, a scale is developed to avoid concepts with different connotations, verbal redundancy, and syn-onyms.

Objectivity: This feature is prominent in specialized language and focuses on the sci-entific subject matter. It limits itself to the essential and most important part, avoiding subjectivity and references to personal beliefs, attitudes, and assumptions.

Clarity: This feature excludes obscure and unfamiliar terms from the language. It aims to avoid complexity and facilitates understanding by using extended expressions, such as similes, metaphors, analogies, and others, which can lead to multiple interpretations and hinder accurate comprehension.

Simplicity: The purpose of this feature is to convey scientific content in an easily understandable manner, using concise sentences that are familiar in general language, such as simplification, omission, and separation, among others.

Conciseness: Specialized language prefers to convey knowledge with the fewest possible words. It is known that one of the oldest and most effective linguistic means is the use of concise expressions. In formulating regulations, this feature is achieved by relying on direct expression with the fewest possible words.

Symbols and Codes: The use of symbols and numbers is common in specialized language, especially in scientific fields. It contains two distinct sets of symbols: basic symbols derived from the natural language, subject to its visual and auditory rules, and non-basic symbols formulated by each specialized field, such as mathematical symbols in mathematics, unique symbols in chemistry, and specific symbols in physics.

1-6   Difficulties of Medical Translation

1. **Complexity and Ambiguity:** Some medical terms may be complicated and ambiguous to translators, especially beginners in the field of translating scientific and medical content. Such as derived Latin and Greek terms, and also borrowed figurative language terms.

2. **Free Use of Abbreviations and Acronyms:** Most abbreviated phrases might possess multiple corresponding meanings.

3. The features of each language, such as grammatical and lexical aspects, implement barriers to translators and affect the translation process.

4. **Language Evolution:** new phrases may be provided to substitute outdated ones, while certain terms may become obsolete. This could render translation extremely challenging due to the lack of current English-Arabic medical dictionaries and translated documents into Arabic.

5. The lack of medical knowledge and practical experience in medical translation among students or translators restricts both the translator and the translation process.

6. The Use of Foreign Terms: Universities teach science and medicine in English or French rather than Arabic, which causes students to be confused with the meaning of Arabic phrases.

7. A single term could be used to convey a pair of different meanings, or two alternative equivalents may exist.

1-7   Recommendations for Medical Translation Difficulties

Many researchers provided numerous solutions to the challenge of medical term translation difficulties.

1. Translation must be continuously updated to ensure it keeps up with the changes that both Arabic and English go throughout.

2. Translators should be knowledgeable about healthcare science.

3. Translators have to take into account the various features of grammatical and lexical in both the source and target languages.

4. Dictionary of medical terms in English/Arabic should be kept recent and up to date, and students ought to practice and translate English medical terminology regularly as possible.

5. Universities ought to include Arabic in their medical education programs.

1-8   Conclusion

In conclusion, the first chapter has provided a thorough overview of medical translation, highlighting its importance and the difficulties involved in accurately conveying medical information across different languages. We have examined the specific difficulties faced by medical translators, such as the technical nature of medical terminology, cultural variations, and the need to balance linguistic precision with cultural sensitivity.

CHAPTER 2- EUPHEMISM

2-1   Introduction

Euphemism is a language technique used to substitute words or phrases with softer, more socially acceptable equivalents when they tend to be regarded as harsh, rude, or nasty. It comprises the replacement of a clear or explicit language with one that is more indirect or softened, occasionally with the intention of reducing the harmful effects of particular words or concepts.

2-2   DEFINITIONS
2-2-1 Dictionary Definitions
a-Etymology

The word "euphemism" is derived from Greek. The prefix "eu-" means "good, well"; the stem "pheme" means "speak"; the suffix "-ism" means "action or result". The word means "speaking well of…", "good speech" , and "words of good omen".
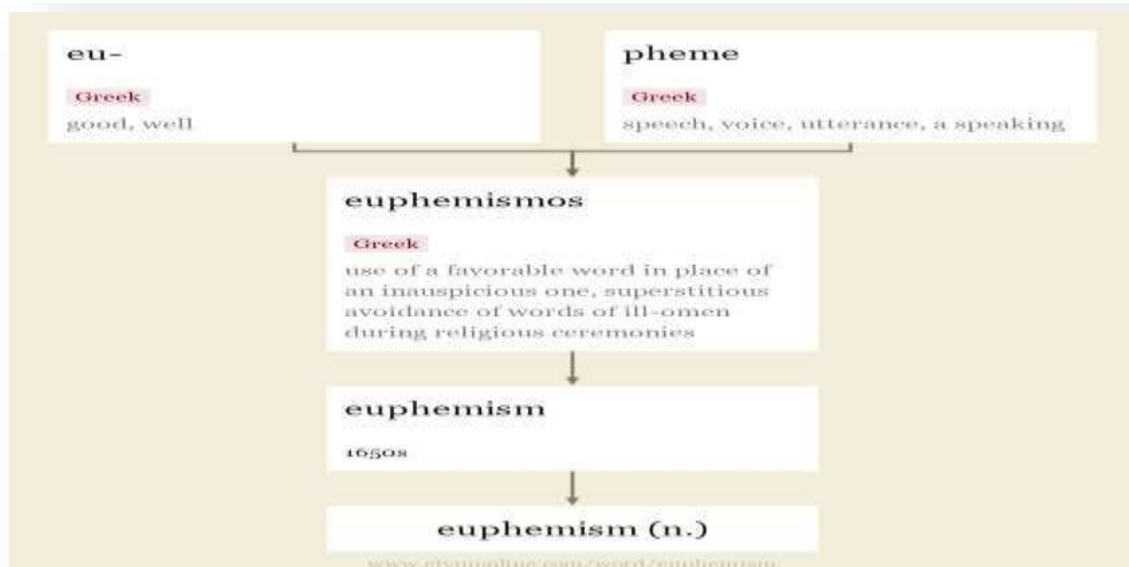
b-Longman Dictionary of Contemporary English

defines euphemism as the use of a pleasanter, less direct name for something thought to be unpleasant.

c- Concise Oxford Dictionary (1982)

Defined euphemism as a substitution of mild or vague or roundabout expression for harsh or blunt or direct one."

d- Merriam Webster Dictionary

Defined euphemism as "the substitution of an agreeable or inoffensive expression for one that may offend or suggest something unpleasant" of mild or vague or roundabout expression for harsh or blunt or direct one." an indirect word or phrase that people often use to refer to something embarrassing or unpleasant, sometimes to make it seem more acceptable than it really is.

e- CAMBRIDGE DICTIONNARY

A word or phrase used to avoid saying an unpleasant or offensive word.

2-2-2 Scholars Definitions

a- Allan and Burridge (1991)

Allan and Burridge define euphemism as "Alternative to dispreferred expressions, and are used in order to avoid possible loss of face.

The dispreferred expressions may be taboo, fearsome, distasteful or for some other reason have too many negative connotations to felicitously execute speaker's communicative intention or a given occasion" (p ,14) . It highlights the purpose of euphemisms as alternatives to dispreferred expressions, which are language choices that could potentially cause embarrassment, offense, or loss of face. By utilizing euphemisms, individuals can navigate sensitive or taboo topics, avoiding the negative connotations associated with the dispreferred expressions. This definition acknowledges that euphemisms serve to facilitate effective communication by aligning the speaker's intention with the social context or occasion. It emphasizes the importance of selecting appropriate language that maintains a positive communicative atmosphere.

b- Beckman and Callow (1974: 120)

They define euphemism as "a metaphorical or metonymic use of an expression in place of another expression that is disagreeable or offensive"

c- Wilson (1993)

Wilson defines euphemism as words or phrases thought in some way to be more pleasant, cleaner. They are used to replace words that are perceived to be offensive, uncouth, and ugly in both meaning and sound.

A pleasant or roundabout expression used as a substitution of more straightforward word or expression to make a person's tongue sensitive and inoffensive even to a squeamish person referred to as euphemism by Willis and Klammer.

d- Leech (1974, p. 53)

According to Leech euphemism is described as the practice of discussing something that it is offensive or inappropriate in a ways that make it more suitable or acceptable than they actually are.

2-2-3 Arab Scholars Definitions

Euphemism in Arabic with the Arabic root (*luṭf*) and its derivative (*laṭa:fah*) which are "to be kind, friendly, thin, fine, delicate, dainty, graceful, elegant, nice, amiable, etc., to make mild, soft, and gentle, and to mitigate, alleviate, ease, soothe, moderate, to treat with kindness", etc. (Cowan, 1976).

The English term "euphemism" is also translated into Arabic with (*luṭfatta'bi:r*) "kind expression" (Al-Khuli, 1982) and (*ḥusunatta'bi:*r) "nice expression".

In Arabic, the root "luṭf" and its derivative "laṭa:fah" are associated with various meanings such as kindness, friendliness, gracefulness, elegance, and being delicate or fine. These terms also encompass concepts of being mild, soft, gentle, and mitigating or alleviating something. According to Cowan (1976), the Arabic root "luṭf" and its derivative "laṭa:fah" are connected to the notion of euphemism.

When translating the English term "euphemism" into Arabic, different expressions are used. One translation is "luṭfatta'bi:r," which can be understood as a "kind expression." Another translation is "ḥusunatta'bi:r," which can be interpreted as a "nice expression." These translations reflect the underlying concept of using polite, gentle, and socially acceptable language to convey sensitive or unpleasant ideas.

2-3   Types of Euphemism

Rawson (1981) divided euphemism into two main types:

✓ **Positive euphemism** entails making the euphemized items appear more important than they are. This form is employed when translators or interpreters desire to express audience solidarity, as in "council» which was euphemized to "lawyer" (p.2).

✓ **Negative euphemism:** When translators or interpreters want to deliver something offensive, they tend to use this type. Rawson described this type as a "defensive" euphemism. For instance, expressions like "hence", "pious", and "Jews" are euphemisms for "God".

Euphemisms, according to (Paul. R., 2019), (Allan &Burridge, 1991), and (Rusman, 2000), may be categorized into thirteen kinds, each of which refers to a specific detail. The table below summarizes the many forms of euphemisms:

Table 2.1 Types of Euphemism

Types of Euphemism	
	Metaphor: refers to something other than literal meanings.
	Idiom: a single unit whose meaning cannot be deduced from its constituent components.
	Circumlocution: is the use of numerous words to convey something that might be spoken in a few words.
	Litotes: a figure of speech consisting of an understood case conveyed by a negative case.
	The fifth category involves the use of learnt terminology rather than common phrases.
	Acronym and abbreviation: this kind consists of a group of initial letters from a phrase derived from another term.
	The seventh category is general-for-specific, which uses subclasses to refer to a specific item.
	Hyperbola: is the use of exaggerated remarks to convey a point or to emphasize something.
	Denial: a circumstance in which a person attempts to discern the actual meaning or a declaration that something does not exist.
	The tenth and eleventh categories are nearly identical; they correspond to euphemistic dysphemism, which employs location in euphemistic phrases but illocution on dysphemism.

	Synecdoche: is a figure of speech that relates to something generic in a specific way.
	Associative engineering: often known as irony, is a figure of speech in which the intended meaning of something is the inverse of its literal meaning.

Williams (1975) divided euphemism into three types:

- **Shortening :** There are some expressions that people do not dare to use, thus they are replaced with abbreviations ,phrases that, in the end, result in any of the following processes :

- **Abbreviation:** According to Rawson (1981), individuals may use abbreviations to indicate things that are offensive or socially inappropriate. For example, instead of "bullshit," use "B.S."

- **Apocopation**: or shortening or deleting the last syllable of a noun, such as "vamp" for "vampire".

- **Backformation:** According to Neaman and Silver (1989), backformation is the substitution of one element of a speech with a reduced one, such as using "burgle" instead of "burglar," a euphemism phrase for the word "rob."

- **Diminutive:** This is the process of producing new forms for some phrases by shortening them and adding a suffix at the end to signify smallness or desire. For example, "buttocks" is shortened to "heinie».

- **Omission:** which involves ignoring the last letters of taboos, as in "S---" instead of "shit".

- **Clipping:** Clipping, according to Williams (1975), is the omission of a component of a lengthy term, such as using "nation" to refer to "domination."

- **Circumlocution**: refers to the process of utilizing extended phrases, such as "middle eastern dancing" instead of "belly dance" (Allan &Burridge, 2006). They went on to say that "this type of euphemism is known to be a phonological modification, which employs many words to explain a widening meaning" (p. 128).

- **Remodeling:** According to Allan and Burridge (2006, p. 2), re-modelling is "the sound of words [that] can be altered to conceal something offensive." A process of this type may include several sub-processes, such as :

    - **Phonological distortion:** When a speaker intentionally distorts the pronunciation of a phrase, euphemism might result, such as saying "crust" or "cripes" instead of "Christ," or substituting "hell" with "heck," and so on.

    - **Blending:** This is the technique of combining two or more words visually and phonetically. For example, "gezunda" means "chamber pot" (Williams & Shipley, 1975, p. 362), while "zounds" means "God's wounds" (Allan &Burridge, 2006, p. 3).

    - **Reduplication:** is the process of repeating one syllable. For example, "jeepers creepers" is a phrase that is shortened to "Jesus Christ" (Williams, 1975, p. 364).

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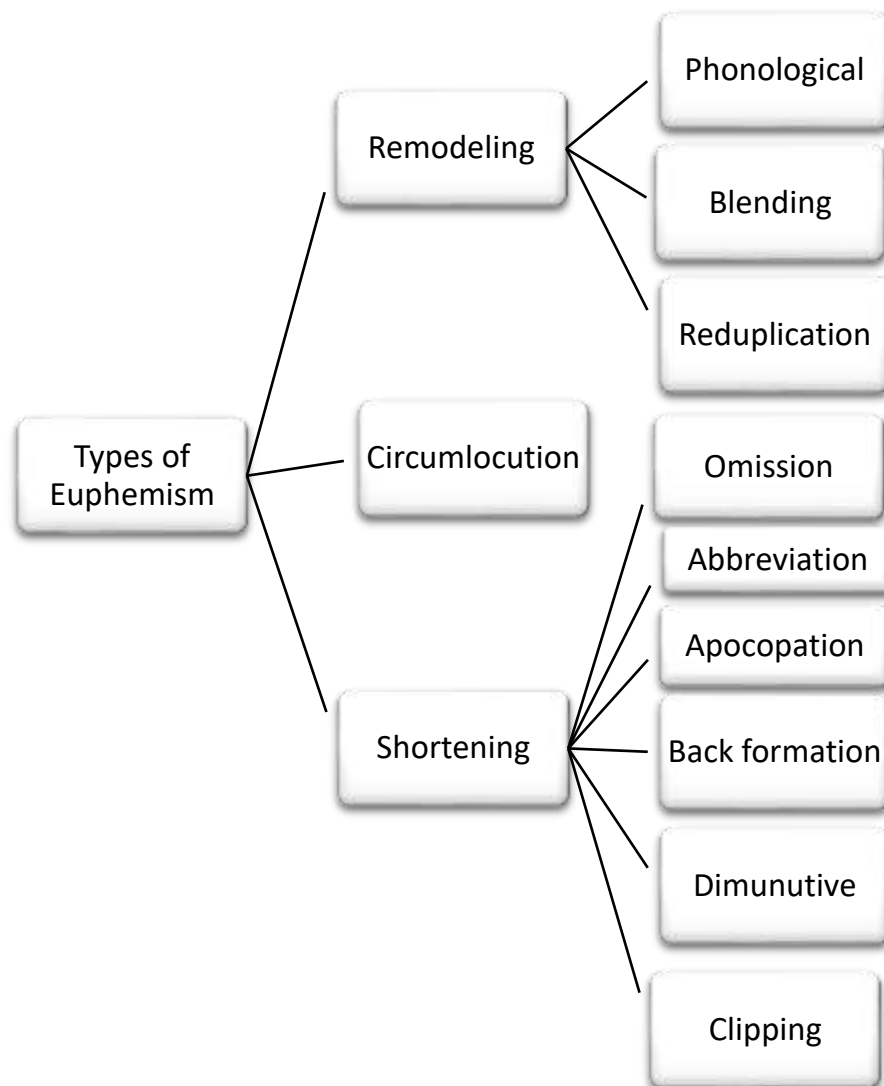
Figure 2.1 Types of Euphemism in English as suggested

2-4   Functions of Euphemism

The functions of euphemism involve the use of milder language for the purpose of polite communication. Translators and interpreters should understand the specific function of each euphemistic expression to determine if it qualifies as a euphemism. In their work, Wijana and Rohmadi (2008) outlined five functions of euphemism:

1. The primary function of euphemism is to facilitate smooth communication by replacing unpleasant words or phrases with more polite ones, allowing for a smoother interaction with the intended recipients.

2. In the field of medicine, euphemism serves as a means to keep certain information confidential. For instance, when delivering news about a patient's serious illness or condition, euphemisms may be employed, such as using the abbreviation "CA" to refer to cancer.

3. Euphemism also serves as a diplomatic tool, commonly employed by officials to establish a positive rapport with their audience. For example, using the term "price adjustment" during a conference can be a euphemism for "price increase," aiming to soften the impact and maintain a satisfactory connection.

4. As an educational tool, euphemism is often utilized when teaching children about sensitive subjects. For instance, terms like "urinate" and "pee" may be used interchangeably, and sometimes animal names, such as "pus" instead of "cats," are employed to avoid direct references to specific animals.

5. Euphemism can function as a defense mechanism to protect individuals from potential criticism. Some topics, particularly those involving sexual matters or explicit body parts and activities, may be approached with euphemistic language to reduce the likelihood of facing severe criticism or backlash.

Kate Buridge (2012) has expanded the functions of euphemism into six categories, which are as follows:

1. Protective Euphemism: This function of euphemism acts as a shield to avoid forbidden or sensitive topics. Euphemisms fall under the category of avoidance language and evasive expressions. When individuals encounter complex or challenging situations, they may choose to use euphemistic language to navigate different contexts and avoid discussing certain topics that are considered taboo or beyond their control. This primary function includes euphemisms related to private body parts, sex, anger, dishonesty, bodily functions, motion sickness, illness, death, dangerous animals, madness, fear, and references to God.

2. Underhand Euphemism: Euphemisms can be used to mystify and misrepresent. They involve the use of dishonest expressions where euphemisms are employed in specific contexts to address taboo subjects indirectly, without directly using the explicit term. The vocabulary of euphemisms, often found in areas like military, politics, and medical jargon, adds an element of deception and secrecy to disguise the true meaning. In this function, euphemisms are not used to hide offensiveness but to purposefully obscure the topic and deceive. For example, "death" may be

modified to "substantive negative patient care outcome," and "dying" may be modified to "terminal living."

3. Uplifting Euphemism: Euphemisms are used to present alternatives to expressions that speakers prefer not to use directly. They serve to enhance or inflate the positive connotations associated with a particular topic or situation, providing a more favourable representation.

4. Provocative Euphemism: Euphemisms can be used provocatively to reveal and inspire. These euphemisms go beyond mere politeness or face-saving measures. They challenge conventional language use and may offer different perspectives or interpretations. For example, euphemisms for death can provide a new perspective, such as describing it as "passing away" or considering it as the beginning of a new life in a better place.

5. Cohesive Euphemism: Euphemisms can be used to foster solidarity and define a group. In certain contexts, euphemisms become markers of identification within a particular group. They are employed among individuals who share similar work or recreational interests, serving as a means to strengthen and display group identity, particularly when directed towards outsiders. Euphemisms can create a sense of shared experiences and make it easier to manage difficult realities, such as in the case of hospital staff who deal with illness, dying, and death on a daily basis.

6. Ludic Euphemism: Ludic euphemisms are used for entertainment and amusement. They are part of our daily verbal play, where language manipulation becomes a form of creativity and inventiveness. Ordinary speakers may engage in wordplay, altering sounds, letters, words, and phrases for fun and enjoyment.

According to Spear (1981), the term "euphemism" refers to the substitution of milder or less harsh expressions in place of unpleasant or offensive ones. Classical euphemisms, such as using "pass away" instead of "dead," are well-known examples, but euphemism can encompass any words or phrases that are considered taboo or prohibited. For instance, "crap" is easily recognized as a euphemism for the word "shit," and other terms like "dung," "excrement," or "dejection" are used to avoid using coarse or vulgar language related to that topic. The process of making certain topics more formal and polite is also part of euphemism.

Euphemism and the act of using euphemistic expressions exhibit the following characteristics:

- Euphemism involves the use of expressions that replace another expression with a negative connotation, aiming to soften or downplay the impact of the original term.

- Euphemism involves the substitution of words or phrases with synonyms that are considered of lower status or have a more acceptable or elevated connotation.

- Euphemism includes expressions deliberately created to enhance the status or perception of a particular concept, making it more favorable or respectable.

- Euphemism serves as a means to protect ourselves and the audience from potential embarrassment or other emotional reactions by using more socially acceptable or less offensive language.

Referring to the positive aspects of euphemism, as explored in the present study, the researcher draws inspiration from Enright's book (1985), who suggests that "without euphemism, the rotation of the world would have stopped with rubbing and would have been flooded with feud" (p. 113). Euphemism extends beyond being merely a rhetorical device; it serves as a communicative tool. When considering the functions of euphemism, the researcher identifies the main communicative functions as follows:

a. Avoiding Taboo:

The term "taboo" was first introduced by Captain James Cook in 1777 and derived from the Tongan language. Originally, it referred to individuals, activities, or things that were prohibited. In the past, people were cautious about directly mentioning taboos due to the physical or metaphysical harm associated with them. Euphemism was employed instead, especially when referring to names of gods and devils, which were considered taboo. Today, euphemism is used for more significant considerations, primarily driven by social context, followed by situational and cultural contexts.

b. Showing Politeness and Concealing Truth:

In daily life, euphemism is used to maintain politeness and avoid taboo subjects. Politeness plays a crucial role in social interactions and conversations. Maintaining face becomes essential for ensuring safe communication. Newman (1990) asserts that euphemisms are primarily created due to the influence of taboo and politeness. However, in political, military, and economic contexts, the function of euphemism takes on a

different role. It is often seen as a means of deception and manipulation. The researcher categorizes studies on euphemisms into two types: International Studies and Arabic Studies, each offering unique perspectives on euphemistic language use.

2-5   The Use of Euphemism

1. Lexical Semantic Devices :

Euphemism can be used through metaphor, metonymy, circuitous expression and antonym as follows:

- **Conceptual Metaphor**

According to George Lakoff a conceptual metaphor is a cross-cognitive mapping that employs the knowledge from the source domain to comprehend the knowledge from the target domain. The target domain is partially comprehended because some of the properties of the source domain are projected to it (1993). For example:

Conceptual Metaphor: Death as a "Journey"

Original term: "He died."

Euphemistic term: "He passed away."

In this example, the conceptual metaphor of death as a "journey" is employed. The original term "He died" directly states the fact of someone's passing. However, the euphemistic term "He passed away" utilizes the metaphorical concept of a journey to soften the impact of the statement. By using the euphemism, the idea of "passing away" suggests a transition from one state or place to another, akin to embarking on a journey. This metaphorical expression serves to provide a gentler and less harsh way of referring to someone's death, thereby offering comfort and avoiding the direct use of the term "died."

- **Metonymy**

Which is a cognitive process that provides mental access to another conceptual body within the same cognitive domain or idealized cognitive model through a conceptual entity, for instance:

Original term: "She's in the hospital."

Euphemistic term: "She's in care."

In this example, the original term "She's in the hospital" directly states that someone is receiving medical treatment in a hospital. However, the euphemistic term "She's in care" employs metonymy by using a related term ("care") to indirectly refer to the hospital and medical treatment. By using this euphemism, the focus is shifted from the institutional and clinical connotations associated with hospitals to the idea of receiving care and attention. This euphemistic expression serves to soften the impact of discussing someone's hospitalization and brings a sense of comfort and reassurance.

- **Circuitous expression**

This is an indirect phrase that only highlights important conduct or downplays the gravity of the circumstance so that listeners will not feel uncomfortable or harsh after hearing it. Such as:

Original term: "He's unemployed."

Euphemistic term: "He's between jobs."

In this example, the original term "He's unemployed" directly states that someone does not have a job. However, the euphemistic term "He's between jobs" utilizes a circuitous expression to indirectly convey the same meaning. By using the euphemism, the focus is shifted from the negative connotations associated with unemployment to a more temporary and transitional state. The phrase "between jobs" implies that the person is actively seeking new employment opportunities, rather than being permanently out of work. This euphemistic expression serves to soften the impact of discussing someone's unemployment and provides a more positive and hopeful perspective.

- **Antonym**

Utilizing an antonym can occasionally be seen as a euphemistic technique. For instance:

Original term: "She's overweight."

Euphemistic term: "She's curvy" or "She's pleasantly plump."

In this example, the original term "She's overweight" directly states that someone exceeds the desired weight range. However, the euphemistic terms "She's curvy" or

"She's pleasantly plump" utilize antonyms to present a more positive and less stigmatizing perspective. By using these euphemistic expressions, the focus is shifted from the negative connotations associated with being overweight to more subjective and potentially desirable qualities, such as having attractive curves or a pleasantly full figure. This euphemistic use of antonyms serves to soften the impact of discussing someone's weight and provides a more affirming and body-positive description.

2. Grammatical Devices (Ellipsis)

Ellipsis can be used to soften the statement, make it more euphemistic, and avoid offending people too much.

Original term: "He's dying of cancer."

Euphemistic term: "He's battling an illness."

In this example, the original term "He's dying of cancer" directly states the harsh reality of someone's terminal illness. However, the euphemistic term "He's battling an illness" utilizes the grammatical device of ellipsis by omitting the specific mention of cancer. By using this euphemistic expression, the focus is shifted from the explicit mention of death and the specific disease to a more general reference to "an illness" that the person is fighting against.

2-6   Conclusion

In conclusion, throughout this study, we have delved into the theoretical foundations of euphemism, and the challenges it poses for translators. We have explored the linguistic structures, cultural taboos, and stylistic decisions that influence the translation of euphemistic expressions. By analyzing case studies and examples. The chapter additionally pointed out how crucial it is to translate euphemistic phrases while preserving their effect and original meaning, We have spoken about how important it is to use translation techniques while keeping the target audience and particular communicative goals in consideration. To guarantee successful communication and cultural sensitivity.

CHAPTER 3- PRACTICAL PART

3-1   Introduction

This analysis aims to explore the use of euphemisms in medical terminology and their translations across different languages. By examining the descriptive aspects of medical terms, we will gain a deeper understanding of the technical language used within the medical field. Comparative analysis will allow us to identify variations and similarities in the use of euphemisms across different languages and cultures. Additionally, contrastive analysis will shed light on the cultural and linguistic considerations that influence the translation of medical terms and euphemisms.

3-2   RESULTS AND FINDINGS

Table 3.1. Paralysis

Medical term	Paralysis
Non-Euphemised term	شلل
Euphemistic term in English	Restricted mobility
Euphemised translation	مقيد الحركة

The medical term paralysis is direct, explicit and specifically referring to the complete loss of muscle function or movement in the whole or a part of the body. The term "paralysis" is commonly used in medical and clinical settings to provide an accurate diagnosis and communicate the severity of the condition to healthcare professionals. However, the term "Restricted mobility" is a milder and more indirect way of referring to the limitations in movement. It downplays the severity of the condition and focuses on the restricted ability to use one's limbs generally or specifically. It is used to soften the impact and make the term more socially acceptable or less alarming. It is often used in social contexts or when discussing the condition with non-medical individuals. It may be used to avoid potential stigma or discomfort associated with the term "paralysis."

The euphemistic term of "Paralysis" is "Restricted mobility" which consists of two separate words. The first one is "restricted" which indicates that there are limitations or restrictions imposed on the ability to move and "mobility" refers to the capacity for movement, On the other hand, the Arabic translation "مقيد الحركة" also combines two words, where "مقيد" means "restricted" and "الحركة" means "mobility or "movement." The structure of the Arabic translation is similar to the English term, effectively capturing the concept of limited mobility.

In a comparison between the equivalence "شلل"and the equivalence of the euphemistic term in Arabic as "مقيد الحركة". The term "شلل"or in English "Paralysis" is a direct, specific term with a strong emotional impact, while the term "مقيد الحركة"(restricted mobility) is less severe, more general, and aims to mitigate the emotional impact by presenting mobility limitations in a more socially acceptable manner. The choice between these terms depends on the context, audience, and the desired level of sensitivity in communication.

The technique uses by the translator in translating "Restricted mobility" into "مقيد الحركة"is adaptation that involves adapting the source term to the target language by using alternative expressions or descriptive phrases that capture the intended meaning.

We can clearly see that the function of euphemism which is named as Protective Euphemism according to Allan and Burridge that have been mentioned above. This function has been faithfully reflected in TT as ST but in a euphemistic and more polite way.

In conclusion, the expression "paralysis" (which is direct and particular) has a significant emotional impact, whereas the term "restricted mobility," which is milder and more generic, attempts to lessen the emotional impact by presenting mobility limits in a more socially acceptable way, is used to describe conditions that have limited mobility .The choice between these terms depends on the context, audience, and the desired level of sensitivity in communication.

Table 3.2.Miscarriage

Medical term	Miscarriage
Non-Euphemised term	اجهاض
Euphemistic term in English	Non-Available Pregnancy
Euphemised translation	حمل غير قابل للاستمرار

The medical term "Miscarriage" is the loss of a pregnancy before the 20th week. Miscarriages are relatively common, occurring in up to 20% of all pregnancies. The most common cause of miscarriage is chromosomal abnormalities in the developing fetus, which can occur randomly or as a result of maternal age, illness, or other factors. Other causes of miscarriage may include infections, hormonal imbalances, problems with the uterus or cervix, or certain medical conditions.

The term "miscarriage" is a clear and precise term that accurately describes the medical condition. It refers strictly to the termination of a pregnancy before the fetus is able to live outside the womb. It is simple and clear. Conversely, the word "non-available pregnancy" is a vaguer and less specific euphemistic phrase that does not convey the exact nature or cause of the pregnancy's unavailability. Also a euphemism that subtly suggests the absence or unavailability of a viable pregnancy without specifically addressing the loss or termination.

The euphemistic term "Non-available pregnancy" is a general term that does not provide explicit details about the condition. It may require additional explanation or context to understand the specific situation being referred to. In contrast, " حمل غير قابل للاستمرار" is a more specific translation that clearly indicates a pregnancy that is not sustainable or viable.

In comparing between "اجهاض" which is a concise term that directly conveys the concept of miscarriage, it is a widely recognized and culturally established term in Arabic-speaking societies. On the other hand, "حمل غير قابل للاستمرار" is a more direct translation that specifically denotes a pregnancy that can no longer continue, and more descriptive

term that signifies a pregnancy that is not sustainable or viable. It also provides additional detail about the condition.

The technique the translator uses in conveying "Non-available pregnancy" into " حمل غير قابل للاستمرار" is calque, whereas the translator uses the term " غير قابل للاستمرار" to render non-available in the target language in order to fulfill the meaning perfectly.

To conclude, the term "Miscarriage" is direct and emotionally charged, and "Non available pregnancy" serving as a euphemistic alternative to convey the loss with less explicitness. Both terms carries more cultural and emotional weight due to its established usage and recognition.

Table 3.3.Euthanasia

Medical term	Euthanasia
Non-Euphemised term	القتل الرحيم
Euphemistic term in English	Death with dignity
Euphemised translation	الموت الرحيم

The medical term "Euthanasia" refers to the act of intentionally ending a person's life to relieve their suffering, usually by administering lethal drugs. It is commonly associated with the concept of "mercy killing" which means the direct killing of a patient through the removal of life-supporting devices or administering excessive doses, ultimately resulting in their death, considering their hopeless condition with no possibility of recovery, the legality of euthanasia varies across countries and jurisdictions. In some places, it is permitted under certain conditions or with specific safeguards, while in others, it is strictly prohibited. However, its euphemistic term is "Death with Dignity" that emphasizes the idea of allowing terminally ill individuals to have control over the timing and manner of their death. It focuses on providing a choice for individuals to die peacefully and with autonomy, often using medical interventions or physician-assisted suicide.

The term "Death with Dignity" directly conveys the idea of dying in a manner that preserves an individual's dignity and autonomy, focusing on the ethical and personal aspects of end-of-life decision-making. It also emphasizes the concepts of personal autonomy, self-determination, and the right to control the circumstances and timing of one's death, within the boundaries of legal and ethical frameworks. On the other hand, the euphemistic equivalence of it in the Arabic language is "الموت الرحيم" translates to "merciful death" or "compassionate death." It softens the direct reference to death and emphasizes a much gentler and much more sympathetic connotation.

Comparatively, the term "القتل الرحيم" (Merciful Killing) the term directly conveys the act of intentionally causing someone's death in a compassionate or merciful manner. It focuses on the action of killing with an emphasis on mercy. However, " الموت الرحيم" (Merciful Death) the term implies a death that is compassionate or merciful, emphasizing the peaceful or gentle nature of life ending.

While translating the term "Death with dignity" into Arabic as" الموت الرحيم the translator uses adaptation because the translation transmits the underlying idea or essence in a way that is consistent with the cultural and linguistic context of the target language rather than immediately translating the precise meaning of the original phrase.

Table 3.4. AIDS: "Acquired Immune Deficiency Syndrome"

Medical term	AIDS:" Acquired Immune Deficiency Syndrome"
Non-Euphemised term	مرض (متلازمة) فقدان المناعة المكتسبة
Euphemistic term in English	Retroviral Infection
Euphemised translation	عدوى الفيروسات الرجعية

The term "AIDS" stands for Acquired Immune Deficiency Syndrome, which is a specific medical condition caused by the Human Immunodeficiency Virus (HIV). It focuses on the advanced stage of HIV infection and the associated clinical manifesta-

tions, which specifically refer to the advanced stage of HIV infection, where the immune system is severely compromised, leading to opportunistic infections and certain cancers. Whereas, the euphemistic term "Retroviral Infection" refers to an infection caused by retroviruses, a type of RNA virus that can replicate its genetic material within the host cell's DNA. HIV is a retrovirus, including but not limited to HIV. It has a broader scope and does not specifically emphasize the advanced stage of the disease.

The English term "Retroviral Infection" has neutral implications and it is frequently used in medical discussions and scientific publications without specific cultural overtones. On the contrary, the term "عدوى الفيروسات الرجعية" preserves the specificity of the English phrase by referring specifically to diseases caused by retroviruses. It enables Arabic speakers to comprehend the particular ailment being discussed in a more explicit and euphemistic way.

The term "متلازمة فقدان المناعة المكتسبة" is used in medical contexts to describe the syndrome caused by the Human Immunodeficiency Virus (HIV) and the resulting weakened immune system. In contrast, the euphemized term "عدوى الفيروسات الرجعية" is a more general term that describes viral infections caused by retroviruses, including HIV. It does not specify the syndrome of AIDS or the immune deficiency associated with it.

The technique uses in translating the term "Retroviral Infection" into " عدوى الفيروسات الرجعية"is calque as we are here dealing with a technical term.

In short, the term "AIDS:" Acquired Immune Deficiency Syndrome"" specifically refers to the medical condition caused by HIV infection. It is a clinical term that conveys the specific syndrome and associated immune deficiency. Whereas, the euphemized term Retroviral Infection is a broader term that encompasses viral infections caused by retroviruses, including HIV. It does not specifically refer to the syndrome of AIDS or the immune deficiency associated with it.

Table 3.5. Dementia

Medicalterm	Dementia
Non-Euphemised term	الخرف
Euphemistic term in English	cognitive impairment
Euphemised translation	ضعف الادراك

The term "dementia" refers to a condition that is defined by a decrease in memory, thinking, behavior, and everyday functioning. It is imposed on by a number of underlying illnesses, including Lewy body dementia, vascular dementia, and Alzheimer's disease. However, the euphemistic term cognitive impairment is a broader term that encompasses any condition or state where a person's cognitive functions are compromised. It can range from mild cognitive impairment (MCI), which is often considered a precursor to dementia, to more severe impairments seen in conditions like intellectual disabilities or acquired brain injuries.

Cognitive impairment" is a euphemistic term that combines the adjective "cognitive" with the noun "impairment" to refer to the condition which uses neutral language to describe difficulties in cognitive functioning. It avoids direct mention of specific cognitive deficits and carries a more clinical tone. On the other hand, It's transmitted to "ضعف الإدراك" or (da'f al-idrak) in the Arabic language which is noun phrase consisting of the noun "ضعف" (da'f) meaning "weakness" or "decline," followed by the noun "الإدراك" (al-idrak) meaning "cognition" or "perception.". The English translation of (da'f al-idrak) is "cognitive weakness" or "cognitive decline." It is a clearer phrase that explicitly relates to a decline or weakening of a cognitive ability.

The term "الخرف" (alakharf) refers specifically to dementia in Arabic. It is a more colloquial and informal term often used in everyday conversations. In other ways, the term "ضعف الإدراك"(da'f al-idrak) translates to "cognitive weakness" or "cognitive decline" It is a more general term that can encompass various degrees of cognitive impairment and is commonly used in clinical and formal settings.

The technique the translator uses while rendering the term "cognitive impairment" into "ضعف الإدراك" is calque.

In conclusion, the analysis of the terms "dementia" and "cognitive impairment" reveals distinct differences. "Cognitive impairment" allows for a broader and more general definition of cognitive impairments whereas "dementia" offers a particular and clinical explanation. Depending on the situation and target audience, both phrases have significant functions. It is critical to take into account the sensitivity and cultural subtleties involved in talking about cognitive impairments and to use vocabulary that is suitable, truthful, and courteous.

Table 3.6. Tumor

Medical term	Tumor
Non-Euphemised term	ورم
Euphemistic term in English	A growth
Euphemised translation	نمو الخلايا

The word "tumor" is used specifically in medicine to refer to an abnormal mass of tissue that can develop anywhere on the body. Both the general public and healthcare experts are familiar with it and frequently utilize it in scientific and medical situations. Conversely, "a growth" is a euphemistic term that is a broad and nonspecific term that does not provide detailed information about the nature, severity, or potential implications of the abnormal tissue. It can be used to refer to a variety of growths in a more generic sense. It is used in place of "tumor" to lessen the effect of the diagnosis and to make it appear less scary or stigmatizing. It can be used in informal talks or in plain language.

"A growth" is a euphemism word that describes an abnormal mass of tissue using a straightforward and broad noun phrase. Also that might not sufficiently describe the illness or distinguish between several growths. In contrast, "نمو الخلايا" or (cell growth) in the English language accurately describes the process of cells multiplying and expanding. However, it does not specify the specific medical condition or provide information about the nature or severity of the growth without further context.

The term "ورم" carries a more clinical connotation and is associated with medical terminology. It directly refers to a tumor, which can be benign or malignant, and implies a specific medical condition. Inversely, the term "نمو الخلايا" (Numu al-khalaya) is a more general term that describes cell growth in a broader sense. It does not provide specific details about the nature or implications of the growth without additional context.

The technique the translator uses while rendering the term "a growth" into " نمو الخلايا" is calque.

To conclude, it's vital to note that the term "tumor" is often favored in medical contexts owing to its specificity and accuracy. However, the more generic phrase " a growth" (cell proliferation) may be used to refer to the general process of cells multiplying and increasing without defining a specific medical disease in non-medical or layman's language.

Table 3.7. Cancer

Medicalterm	cancer
Non-Euphemised term	سرطان
Euphemistic term in English	condition
Euphemised translation	المرض

The term "cancer" refers to a particular class of disorders which are identified by their unchecked development and dissemination of aberrant cells. It is a word used to define a certain medical problem and is quite precise. Albeit, the word "condition" which is a more inclusive and general phrase that may be used to describe any disease, problem, or illness that has an impact on someone's health. It, nonetheless, does not offer as much specificity as "cancer."

The word "condition" is a generic one that may be used to describe any situation, problem, or illness impacting someone's health. It is frequently used in ordinary language as well as in non-medical contexts. Conversely, the term "المرض" (al-marad) directly translates to "disease" in English. It is a more specific term that generally refers to a pathological state or illness affecting an individual's health.

The term "سرطان" specifically refers to cancer. It is a highly specific term that denotes a group of diseases characterized by the uncontrolled growth and spread of abnormal cells. However, "المرض" (al-marad), as a general term for disease, does not carry the same level of specificity or inherent connotations as "سرطان." It can refer to a wide range of health conditions, from minor ailments to more severe illnesses.

The technique the translator uses while conveying the term "condition" into "المرض" is modulation.

Overall, the use of "cancer" provides a more precise and specific description when referring to cancer, while "condition" encompasses a wider range of health conditions in general.

Table 3.8. Erectile dysfunction

Medical term	Erectile dysfunction
Non euphemised term	ضعف الإنتصاب
Euphemistic term in English	Intimacy disorder
Euphemistic translation	إضطرابات في العلاقة الحميمية

The medical term "erectile dysfunction " refers to the medical condition in which a person has difficulties getting or maintaining an erection. It is a simple and accurate term that is regularly used by healthcare professionals. Whereas, the euphemistic term "intimacy disorder" is a milder and more pleasant way of expressing "erectile dysfunction."

Regarding when it concerns contrasts between the euphemistic term in English, "intimacy disorder," and its euphemistic translation into Arabic, " إضطرابات العلاقة الحميمية"/iðˈtˤiraba:t fi: alˈʕala:qa alħami:mi:ja/ , lies in their overall meaning and cultural context.

Both expressions have a purpose of reducing the impact of a delicate topic concerning difficulties in intimate relationships. The term "intimacy disorder" in English refers to difficulties or disorders in intimacy, whereas in Arabic "إضطرابات في العلاقة الحميمة"

/iðˈtˤiraːt fiː alˈʕalaːqa alħamiːmiːja/ directly translates to "disorders in intimate re-lationships" or "disturbances in intimate relationships." The main common concept is the overall idea they express, demonstrating the existence of problems within the con-text of intimate relationships. However, there are differences between the two expres-sions due to cultural and language nuances. The Arabic version is more specific and descriptive, determining "إضطرابات" (disorders) /iðˈtˤiraːt/ and highlighting the im-portance of "العلاقة الحميمية" (intimate relationships) /al.ʕa.la:qa tu al.ha.mi:mi:ja/ within the context of culture. It demonstrates the significance of relationships and the aware-ness of culture necessary to conduct communication in Arabic-speaking societies. In summary, while both "intimacy disorder" in English and in Arabic discuss a common objective of euphemizing difficulties in relationships of intimacy, the Arabic equiva-lent offers a more explicit and culturally nuanced expression that addresses disorders within intimate interactions in Arabic-speaking environments.

Considering comparing the medical word to its euphemism term in Arabic, the phrase "ضعف الإنتصاب" /dˤaʕf al.inti.sˤaːb/ refers to erectile dysfunction (ED), which translates precisely to "erectile weakness" in English. The euphemistic equivalent in arabic "إضطرابات العلاقة الحميمية"/iðˈtˤiraːt fiː alˈʕala:qalħami:mi:ja/, on the other hand, refers to "intimacy-related disorders. While "ضعف الإنتصاب"/dˤaʕf al.inti.sˤaːb/ is a clear phrase used in medical situations to address difficulty getting or sustaining an erection, "إضطرابات العلاقة الحميمية" /iðˈtˤiraːt fiː alˈʕala:qalħami:mi:ja/ is a more hidden and less explicit way to correspond to issues in sexual interactions. The terminology used may be determined by cultural conventions, personal preferences, or the environment in which the issue is handled.

The translator uses literal translation when translating "intimacy disorder" into Arabic as "إضطرابات العلاقة الحميمية" /iðˈtˤiraːt fiː alˈʕala:qalħami:mi:ja/   The translator used this technique to translate each phrase in the source sentence into its equivalent in the target language without making any significant modification or adaptation.

Table 3.9. Epilepsy

Medical term	Epilepsy
Non euphemised term	الصرع
Euphemistic term in English	Falling sickness
Euphemised translation	زيادة الكهرباء في الدماغ

   Epilepsy is a medical phrase for a neurological disorder defined by recurrent seizures. It is a chronic disorder that affects the electrical processes of the brain, causing sudden and brief disturbances in usual brain function. Furthermore, "falling sickness" is a euphemistic expression for epilepsy that was previously used. The term was inspired by the fact that some people with epilepsy may have seizures that lead them to fall to the ground. "Falling sickness" is a euphemism because it aims to explain epileptic symptoms indirectly without referring to the disorder itself.

When it comes to contrasting "falling sickness" in English and its euphemistic equivalent in Arabic   "زيادة الكهرباء في الدماغ"   /ziːaːda tu al.kahrabaːʔ fiː al.damaːɣ/

The term "falling sickness" in English is a euphemism for epilepsy, a neurological disease defined by recurrent seizures. This euphemism aims to show patients with epilepsy's sudden loss of consciousness and convulsions in a less discouraging or scary manner. By employing the phrase "falling sickness," the emphasis is shifted away from the actual medical issue and towards the physical symptom of falling. The Arabic euphemism " زيادة الكهرباء في الدماغ" /ziːaːda tu al.kahrabaːʔ fiː al.damaːɣ/ translates to "increased electricity in the brain." In Arabic-speaking societies, this word is used to euphemistically refer to epilepsy. It tries to express the abnormal electrical activity produced in the brain during seizures without using the term "epilepsy." Instead of utilizing a clear term for the medical condition, the choice of words clarifies the physiological part of the disease, emphasizing the electrical imbalance. While both euphemistic phrases serve the purposes of expressing epilepsy in a less direct or dismissing manner, they reflect their respective languages' cultural and linguistic preferences. The Arabic

phrase indicates the neurological element of increased electrical activity in the brain, whereas the English term emphasizes the manifestation of falling.

In Arabic, the medical word "الصرع" /as.sirʕa/ refers to a condition recurring epileptic crises as an illness that affects the brain. The euphemistic word زيادة الكهرباء في الدماغ"/zi:a:da tu al.kahraba:ʔ fi: al.dama:ɣ/, on the other hand, translates to "increased electricity in the brain" in English. While both terms correspond to the same medical condition, their nuances and simplicity differ. "" is the standard medical phrase used by healthcare providers and is more commonly used in the medical community. It is a simple and uncomplicated word that accurately reflects the problem. On the other hand, "زيادة الكهرباء في الدماغ" is a euphemistic or metaphorical expression used to describe epilepsy in Arabic. This euphemistic term relies on a metaphorical concept of "increased electricity in the brain" to indirectly convey the presence of seizures. It is a less direct and more figurative way of referring to the condition.

Euphemistic phrases tend to be used to reduce the effect or stigma related to specific medical problems. In the case of epilepsy, employing a euphemism phrase like " زيادة الكهرباء في الدماغ "/zi:a:da tu al.kahraba:ʔ fi: al.dama:ɣ/ may be an effort to offer a much milder or less terrifying explanation of the disease, particularly in cultural or societal situations where epilepsy may be linked with negative connotations or misunderstandings.

In general, while "الصرع" is the typical medical term for epilepsy in Arabic, " زيادة الكهرباء في الدماغ" is a euphemism alternative that uses metaphorical language to express the same illness.

The technique that the translator uses is modulation as we have the same term but seen from another point

In summary,the euphemistic Arabic word " زيادة الكهرباء في الدماغ" (translated as "increased electricity in the brain") does not accurately serve any function of euphemisms are utilized on occasion to soften or make language more pleasant but, in this situation, the euphemistic phrase may not express the particular characteristics of epilepsy, which could hinder clear communication and comprehension.

Table 3.10. Sickle cell anaemia

Medical term	Sickle cell anaemia
Non euphemised term	فقر الدم المنجلي
Euphemistic term in English	Haemoglobinopathy
Euphemised translation	إضطراب خلايا الدم الحمراء

The phrase "sickle cell anaemia" refers to a type of sickle cell disease (SCD) that is defined by a severe form of the illness. Moreover, the euphemistic expression "haemo-globinopathy", is a broader term that embraces a variety of genetic illnesses affecting the structure or production of haemoglobin, which include sickle cell anaemia it refers to any change in the haemoglobin protein that can cause a variety of blood diseases. Furthermore, the euphemistic phrase "haemoglobinopathy" refers to a set of genetic diseases that affect the structure or production of haemoglobin, including sickle cell anaemia. It refers to any change in the haemoglobin protein that can cause a variety of blood diseases. While "sickle cell anaemia" refers to the most severe form of sickle cell disease, "haemoglobinopathy" refers to a broader range of hereditary illnesses that impact haemoglobin. When describing a broader variety of blood illnesses connected to abnormal haemoglobin, the word "haemoglobinopathy" is frequently used, providing a more inclusive and less specific explanation. Both terms refer to a similar basic problem, but "haemoglobinopathy" is a much broader and less explicit way of conveying the variety of conditions related to defective haemoglobin, including sickle cell anaemia.

The term "haemoglobinopathy" refers to a number of genetic illnesses involving haemoglobin, which is the protein responsible for distributing oxygen in red blood cells. This expression is considered euphemistic since it provides a more neutral and indirect way of referring to the disease than specific condition names such as sickle cell anae-

mia or thalassemia. By using the more general word "haemoglobinopathy," the emphasis shifts to the common feature of these illnesses, which is an abnormal behaviour or a failure related to haemoglobin.

The euphemism term اضطراب خلايا الدم الحمراء"disorder of red blood cells" is a more specific and detailed mention in Arabic. It concentrates on illnesses that affect red blood cells directly, providing a clear and accessible description of the problem. By offering a clear and full knowledge of the disease, this expression attempts to raise awareness and improve effective conversation.

Both terms relate to the same sorts of health problems in general, but the Arabic term is clearer and more descriptive, which facilitates easier comprehension and communication.

The medical term "فقر الدم المنجلي" conveys the condition, with "فقر الدم" demonstrating anaemia and "المنجلي" referring to sickle-shaped red blood cells. In a comparison, the euphemistic term"اضطراب خلايا الدم" gives a broader and more descriptive term by paying attention to the deviation of red blood cells without defining the specific form or characteristics.

The translator uses the calque technique to translate "hemoglobinopathy" into "اضطراب خلايا الدم الحمراء" (pronounced "idtirab khalayi ad-dam al-humra'a") in Arabic. Calque is a translation process that involves translating an expression or word from one language into another while retaining the same structure or literal meaning. In this instance, the translator has literally translated the phrase "hemoglobinopathy" into Arabic as "اضطراب خلايا الدم الحمراء" which means "disorder of red blood cells."

To conclude, the euphemistic term in Arabic اضطراب خلايا الدم الحمراءdoes not effectively serve the any function of euphemism, because its still in the medical arena,   that why the doctors must change the registre when describing the diseas to the patient to convey the meaning of the condition without misunderstanding.

Table 3.11. Sleep apnoea

Medical term	Sleep apnoea
Non euphemised term	التوقف عن التنفس أثناء النوم
Euphemistic term in English	Sleep-disorder breathing
Euphemised translation	إضطراب التنفس أثناء النوم

Sleep apnoea is a medical term that refers to describing a sleep condition that involves pauses in breathing or short breaths while sleeping. It refers to a disorder in which the airway in the lungs gets completely or partially blocked affecting breathing patterns and commonly causing short awakening throughout the night. Moreover, the euphemistic expression "sleep-disorder breathing" is a less direct method of relating to sleep apnoea. It underlies the more general idea of a sleep problem affecting breathing without tackling apnoea or the related breathing pauses. The euphemistic word aims to give a less shaming description of the illness, by emphasizing the basic component of breathing trouble when sleeping.

In cases where it involves contrast between the euphemistic medical phrase "sleep-disorder breathing" in English and its euphemistic equivalent in Arabic, " إضطراب التنفس أثناء النوم" ("iirb al-tanafus athn' al-nawm"), derives directly from the different linguistic methods used to describe the disease.

The expression "sleep-disorder breathing" highlights the connection between breathing irregularity and sleep problems. Without identifying the particular condition, sleep apnoea indicates interrupted breathing as an essential element of the sleep disorder. Rather than defining the ailment, the emphasis revolves around the abnormality related to breathing during sleep. Whereas the euphemistic term in Arabic "اضطراب التنفس أثناء النوم" translates to "sleep breathing disorder. It explicitly indicates that there is a disorder particularly connected to breathing during sleep without defining the exact condition, sleep apnoea. The basic feature of the condition is disturbed breathing during sleep.

In brief, the English euphemistic term "sleep-disorder breathing" emphasizes an illness related to breathing during sleep, whereas the Arabic euphemistic term "إضطراب التنفس أثناء النوم" offers a more explicit description by demonstrating the breathing disorder especially during sleep without mentioning the condition's name.

While comparing the medical phrase in Arabic and its euphemism, the word "التوقف عن التنفس أثناء النوم" refers to "breathing cessation," whereas its euphemistic equivalent "اضطراب التنفس أثناء النوم" translates to "sleep-related breathing disorder." The euphemistic expression softens the directness of the original term by highlighting the disorder aspect rather than explicitly mentioning the cessation of breathing. However, whether the euphemistic phrase is considered appropriately euphemized depends on the context. In certain cases, the euphemism may be regarded suitable since it focuses on the larger disease rather than immediately worrying about the loss of breathing.

The translator adds the word "أثناء" to the term to clarify it more, so the technique is addition for clarification.

Al in all, we can clearly observe that the euphemistic term in Arabic "اضطراب التنفس أثناء النوم" effectively serve the uplifting function of euphemism.

3-3   Conclusion

In conclusion, the practical part of this study has highlighted the complexities and challenges involved in translating euphemisms in medical texts. Through the analysis of various examples and case studies, it has become evident that accurate and culturally sensitive translation requires a deep understanding of the source and target languages, as well as the specific context of medical discourse. By considering the findings and recommendations of this study, translators and professionals in the field of medical translation can strive to improve the quality of translated euphemisms, thereby enhancing cross-cultural communication and facilitating accurate and effective medical discourse.

3-4   The Questionnaire

The effective translation of medical information is of utmost importance in providing quality healthcare services to diverse patient populations. In multilingual healthcare

settings, professional medical interpreters play a vital role in bridging language barriers and facilitating accurate communication between healthcare providers and patients. To ensure the highest level of accuracy and cultural sensitivity in medical translation, it is essential to examine the use of euphemistic language, which involves the deliberate softening or substitution of harsh or sensitive terms.

This questionnaire aims to investigate the practices and perspectives of medical interpreters in the Cuban-Algerian Hospital of Ophthalmology regarding the translation of euphemistic language. The questionnaire was administered to a group of seven interpreters, who regularly provide translation services in the hospital. The interpreters' experiences and insights shed light on their understanding of euphemism, its application in medical translation, and the factors influencing its usage.

The questionnaire encompasses various aspects related to medical translation, including the interpreters' years of experience, the frequency of encountering critical cases requiring translation mediation, the use of euphemistic language by doctors, and the provision of examples of euphemized medical terms in Spanish to Arabic translation, particularly in the field of ophthalmology. Additionally, the questionnaire explores the factors that influence the use of euphemism, the presence of guidelines or protocols followed by the interpreters, and the strategies employed to achieve a balance between accuracy and patient understanding.

Furthermore, the questionnaire investigates the cultural and linguistic considerations that impact the choice of using euphemism in medical translation, the challenges faced by interpreters in this regard, and the potential risks or limitations associated with euphemistic language. It also explores whether the interpreters collaborate with doctors or healthcare experts to enhance their understanding of medical terminology and improve the quality of their translations.

By analyzing the responses obtained from the questionnaire, this study aims to provide valuable insights into the practices, challenges, and perspectives of medical interpreters in translating euphemistic language in a healthcare setting. The findings will contribute to the existing body of knowledge in medical translation and can inform the development of guidelines and best practices for interpreters, healthcare providers, and

language service providers, ultimately leading to improved communication and patient care.

Question One:

1. Years of Experience in Hospital Translation:

- 0-2 years: 16.7% (1 interpreter)
- 2-4 years: 33.3% (2 interpreters)
- 4-6 years: 16.7% (1 interpreter)
- 6-8 years: 16.7% (1 interpreter)
- 8+ years: 16.7% (1 interpreter)

The analysis of the years of experience in hospital translation among the interpreters reveals a diverse range of experience levels. Out of the six interpreters surveyed, one interpreter (16.7%) reported having 0-2 years of experience, indicating a relatively new entrant in the field. Two interpreters (33.3%) reported having 2-4 years of experience, suggesting a moderate level of experience. Similarly, one interpreter (16.7%) reported having 4-6 years of experience, indicating a comparable level of proficiency. Another interpreter (16.7%) reported having 6-8 years of experience, signifying a slightly higher level of expertise. Finally, one interpreter (16.7%) reported having 8+ years of experience, indicating extensive experience in hospital translation.

The distribution of years of experience indicates a mixture of interpreters with varying levels of expertise, ranging from beginners to seasoned professionals. This diversity in experience can contribute to a well-rounded team, as it allows for a combination of fresh perspectives and seasoned knowledge in handling medical translation within the hospital setting. The presence of interpreters with extensive experience can provide valuable guidance and support to those with relatively less experience, fostering a collaborative and supportive work environment.

It is worth noting that the distribution of years of experience is evenly spread across different categories, with no dominant concentration in a particular range. This suggests a balanced representation of interpreters with varying levels of experience, which can contribute to a diverse pool of skills and competencies within the translation team.

Furthermore, it emphasizes the importance of continuous professional development and knowledge-sharing among the interpreters, as they can benefit from each other's experiences and expertise.

Question Two

2. Percentage of Critical Cases Requiring Translation Mediation:

- None: 16.7% (1 interpreter)
- 1-25%: 50% (3 interpreters)
- 26-50%: 16.7% (1 interpreter)
- 51-75%: 0% (0 interpreters)
- 76-100%: 16.7% (1 interpreter)

The analysis of the percentage of critical cases requiring translation mediation among the interpreters reveals varying levels of involvement in critical situations. Out of the six interpreters surveyed, one interpreter (16.7%) reported not encountering any critical cases that required translation mediation. This suggests that this particular interpreter may have been primarily involved in non-critical or routine cases.

Three interpreters (50%) reported encountering critical cases that required translation mediation in 1-25% of their assignments. This indicates that they were occasionally involved in translating for critical cases, but such instances were relatively infrequent.

One interpreter (16.7%) reported encountering critical cases requiring translation mediation in 26-50% of their assignments. This suggests a slightly higher level of involvement in critical cases compared to the previous group.

Interestingly, no interpreters reported encountering critical cases requiring translation mediation in the 51-75% range, indicating that none of the interpreters had a substantial involvement in such cases.

One interpreter (16.7%) reported encountering critical cases requiring translation mediation in 76-100% of their assignments. This indicates that this particular interpreter had a significant role in translating for critical cases, being involved in a majority or all of their assignments.

The distribution of percentages highlights the varying levels of exposure to critical cases among the interpreters. While some interpreters had minimal or occasional involvement in critical situations, others had a more substantial role, actively participating in critical cases as a regular part of their work.

It is important to note that the percentage of critical cases requiring translation mediation is influenced by various factors, such as the volume of critical cases in the hospital, the specific role and responsibilities of the interpreters, and the allocation of assignments. The distribution observed in this analysis provides insights into the extent of involvement in critical cases among the surveyed interpreters, but it may not necessarily reflect the overall situation in the Cuban-Algerian Hospital of Ophthalmology.

Understanding the percentage of critical cases requiring translation mediation is crucial for evaluating the demand for translation services in critical situations. It helps in assessing the need for specialized training, resources, and support to ensure effective communication between healthcare professionals and patients in critical scenarios.

Question Three

3. Use of Euphemistic Language by Doctors:

- Yes: 16.7% (1 interpreter)
- No: 83.3% (5 interpreters)
- The analysis of the use of euphemistic language by doctors reveals that the majority of interpreters reported a lack of usage of euphemistic language. Out of the six interpreters surveyed, only one interpreter (16.7%) reported that doctors in the hospital use euphemistic language when communicating with patients. This suggests that in a small percentage of cases, doctors choose to soften or mitigate the language they use to convey medical information to patients.
- On the other hand, the majority of interpreters, comprising five out of six (83.3%), reported that doctors do not use euphemistic language. This indicates that doctors generally prefer to use direct and straightforward language when communicating with patients, without employing euphemisms or less harsh expressions.

- The findings suggest that in the context of the Cuban-Algerian Hospital of Ophthalmology, doctors tend to prioritize clear and accurate communication of medical information to patients, opting for a more direct approach rather than using euphemistic language to soften the impact of the information.

- It is important to consider that these findings are specific to the hospital and may not be representative of all healthcare settings or cultural contexts. The use of euphemistic language by doctors may vary depending on factors such as cultural norms, patient preferences, and the nature of medical conditions being discussed.

- Understanding the use of euphemistic language by doctors is valuable for interpreters as it influences their role in accurately conveying medical information to patients during translation. Interpreters need to be aware of doctors' communication style and adapt their translation approach accordingly, ensuring that the intended meaning is accurately conveyed while maintaining cultural sensitivity and patient understanding.

- Further research and analysis could explore the reasons behind the variation in the use of euphemistic language by doctors, as well as its impact on patient comprehension and satisfaction. This could provide insights into the effectiveness of different communication approaches in healthcare settings and guide the development of guidelines or training for interpreters to navigate the nuances of translating medical information without compromising accuracy or patient understanding.

Question Four

4. Examples of Euphemized Medical Terms in Spanish to Arabic Translation:

- Provided examples: 16.7% (1 interpreter)
- Did not provide examples: 83.3% (5 interpreters)

The analysis of examples of euphemized medical terms in Spanish to Arabic translation indicates that a small percentage of interpreters provided specific examples, while the majority did not provide any examples. Out of the six interpreters surveyed, only one interpreter (16.7%) provided examples of euphemized medical terms in their translation work from Spanish to Arabic.

The fact that only one interpreter provided examples suggests that the use of euphemized medical terms may not be a prevalent practice in the translation process for this particular group of interpreters at the Cuban-Algerian Hospital of Ophthalmology. It is possible that the interpreters prioritize maintaining the accuracy and clarity of medical terminology in their translations, opting for more direct and literal translations rather than employing euphemisms.

On the other hand, the majority of interpreters, comprising five out of six (83.3%), did not provide any examples of euphemized medical terms. This may indicate that the interpreters either do not encounter many instances of euphemized terms in their translation work or that they do not consider it necessary to incorporate euphemisms when conveying medical information in Arabic.

Here are some examples provided by translators upon our demand from the specialists:

1. Original term: Ceguera (Spanish) - Blindness (English) Euphemized term: Discapacidad visual grave (Spanish) - إعاقة بصرية شديدة (Arabic) Translation: Severe visual impairment

2. Original term: Cataratas (Spanish) - Cataracts (English) Euphemized term: Opacidad del cristalino (Spanish) - عتامة العدسة (Arabic) Translation: Opacity of the lens

3. Original term: Miopía (Spanish) - Myopia (English) Euphemized term: Visión cercana limitada (Spanish) - قصر النظر في الرؤية القريبة (Arabic) Translation: Limited near vision

4. Original term: Conjuntivitis (Spanish) - Conjunctivitis (English) Euphemized term: Irritación ocular (Spanish) - تهيج العين (Arabic) Translation: Eye irritation

5. Original term: Glaucoma (Spanish) - Glaucoma (English) Euphemized term: Presión intraocular elevada (Spanish) - ارتفاع ضغط العين (Arabic) Translation: Elevated intraocular pressure

6. Original term: Desprendimiento de retina (Spanish) - Retinal detachment (English) Euphemized term: Separación de la capa fotosensible del ojo (Spanish) - فصل الطبقة الحساسة للضوء في العين (Arabic) Translation: Separation of the photosensitive layer of the eye

Question Five

5. Factors Influencing the Use of Euphemism in Translations:

- Cultural sensitivity: 66.7% (4 interpreters)
- Patient education level: 33.3% (2 interpreters)
- Nature of the medical condition: 33.3% (2 interpreters)
- Other factors: 16.7% (1 interpreter)

The analysis of factors influencing the use of euphemism in translations revealed several key factors identified by the interpreters. The results are as follows:

1. Cultural sensitivity: 66.7% (4 interpreters) The majority of the interpreters, accounting for 66.7% of the total, emphasized the importance of cultural sensitivity when deciding to use euphemism in translations. They acknowledged that cultural norms and beliefs play a significant role in shaping language preferences, especially when discussing sensitive medical conditions. By employing euphemism, interpreters aim to respect cultural sensitivities and avoid causing discomfort or offense to patients.

2. Patient education level: 33.3% (2 interpreters) Approximately one-third of the interpreters, comprising 33.3% of the total, considered the patient's education level as a crucial factor in determining the use of euphemism. They recognized that patients with limited medical knowledge may find it challenging to comprehend complex or technical terms. Therefore, interpreters opt to use euphemism to convey information in a more accessible and understandable manner, ensuring that patients can grasp the intended meaning without confusion.

3. Nature of the medical condition: 33.3% (2 interpreters) Similarly, 33.3% of the interpreters identified the nature of the medical condition as a factor influencing the use of euphemism. Certain medical conditions, particularly those with potentially severe or distressing implications, may warrant a more cautious and delicate approach in language. Interpreters may choose to soften the terminology to alleviate patient anxiety and mitigate emotional impact, enabling patients to process the information more comfortably.

4. Other factors: 16.7% (1 interpreter) One interpreter, representing 16.7% of the respondents, mentioned additional factors that influence the use of euphemism. These factors could vary depending on the specific context, individual patient preferences, or unique considerations in the healthcare setting. It highlights the importance of considering various aspects when making decisions about employing euphemism in medical translations.

Question Six

6. Guidelines or Protocols Followed:

- Yes: 33.3% (2 interpreters)
- No: 66.7% (4 interpreters)

The analysis regarding the presence of guidelines or protocols followed by interpreters revealed the following results:

1. Yes: 33.3% (2 interpreters) A minority of the interpreters, accounting for 33.3% of the total, indicated that they follow specific guidelines or protocols when translating medical information. These guidelines may provide instructions or recommendations on language usage, including the use of euphemism in particular contexts. By adhering to established guidelines, interpreters can ensure consistency and professionalism in their translations, as well as enhance patient understanding and satisfaction.
2. No: 66.7% (4 interpreters) The majority of the interpreters, comprising 66.7% of the total, stated that they do not have specific guidelines or protocols that they follow when translating medical information. This suggests that the decision-making process regarding the use of euphemism and other translation strategies may vary among interpreters. It highlights the need for further research and the development of guidelines or best practices in the field of medical translation to ensure standardized and high-quality translations.

The results indicate that a significant portion of interpreters currently do not adhere to specific guidelines or protocols in their translations. However, it is worth noting that

having established guidelines can provide interpreters with a framework and reference point for making informed decisions. These guidelines can help ensure consistency, accuracy, and sensitivity in the translation process, particularly when dealing with delicate or sensitive medical information.

The findings underscore the importance of establishing guidelines or protocols in the field of medical translation, specifically regarding the use of euphemism. Such guidelines can assist interpreters in navigating the complexities of medical terminology while considering cultural sensitivities and the needs of the patients. Moreover, guidelines can help maintain consistency across translations and contribute to the overall quality of healthcare communication.

Question Seven

7. Achieving Balance between Accuracy and Patient Understanding:

- Various strategies mentioned: 50% (3 interpreters)
- No specific strategies mentioned: 50% (3 interpreters)

The analysis of achieving a balance between accuracy in medical information and patient understanding yielded the following results:

1. Various strategies mentioned: 50% (3 interpreters) Half of the interpreters, accounting for 50% of the total, mentioned employing various strategies to strike a balance between accuracy and patient understanding in their translations. While specific strategies were not provided, it indicates that these interpreters actively consider both the accuracy of medical terminology and the need for patients to comprehend the information. These strategies may involve simplifying complex medical terms, providing additional explanations, or using more patient-friendly language without compromising the accuracy of the medical content.
2. No specific strategies mentioned: 50% (3 interpreters) The other half of the interpreters, also representing 50% of the total, did not specify any particular strategies they employ to achieve a balance between accuracy and patient understanding in their translations. This suggests that these interpreters may rely

on their professional judgment and experience to navigate this delicate balance. While they may not have mentioned specific strategies, it does not necessarily imply that they disregard the importance of ensuring both accuracy and patient comprehension in their translations.

The results indicate that there is a mixed approach among interpreters in terms of achieving a balance between accuracy and patient understanding. While some interpreters explicitly mentioned employing various strategies, others may have preferred not to explicitly specify their approach but still strive for the same outcome.

Question Eight

8. Cultural and Linguistic Considerations in Euphemism Use:

- Yes: 66.7% (4 interpreters)
- No: 33.3% (2 interpreters)

The analysis of cultural and linguistic considerations in euphemism use revealed the following findings:

1. Yes: 66.7% (4 interpreters) The majority of the interpreters, comprising 66.7% of the total, acknowledged the importance of cultural and linguistic considerations when employing euphemism in their translations. This indicates that these interpreters take into account cultural norms, sensitivities, and linguistic preferences of the target audience, particularly in the context of medical translations. By considering these factors, they strive to ensure that the translated content is culturally appropriate and effectively conveys the intended meaning while using euphemistic language.
2. No: 33.3% (2 interpreters) Conversely, a smaller portion of the interpreters, representing 33.3% of the total, indicated that they do not explicitly consider cultural and linguistic considerations in their use of euphemism. It suggests that these interpreters may prioritize other factors or may not perceive cultural and linguistic nuances as significant in their specific translation context.

The results highlight the varying approaches among interpreters regarding cultural and linguistic considerations in euphemism use. While a majority of interpreters recognize

the importance of these considerations, a notable portion does not explicitly take them into account.

To ensure high-quality and culturally appropriate translations, it is recommended that all interpreters consider cultural and linguistic factors when deciding whether to use euphemism and how to apply it in their translations. This includes understanding the target audience's cultural background, linguistic preferences, and sensitivity to certain topics or expressions. By doing so, interpreters can enhance the effectiveness and impact of their translations, fostering better communication and understanding between healthcare providers and patients from diverse cultural and linguistic backgrounds.

Question Nine

9. Dealing with Challenges:

- Strategies mentioned: 33.3% (2 interpreters)
- No specific strategies mentioned: 66.7% (4 interpreters)

The analysis of how interpreters deal with challenges in euphemism use yielded the following results:

1. Strategies mentioned: 33.3% (2 interpreters) Approximately one-third of the interpreters, accounting for 33.3% of the total, mentioned specific strategies they employ to navigate challenges related to euphemism use in their translations. These strategies may include adapting the language to suit the cultural and linguistic context, consulting medical experts or colleagues for guidance, conducting research to find appropriate euphemistic equivalents, or engaging in ongoing professional development to enhance their skills in this area. By employing these strategies, interpreters aim to address challenges and ensure accurate and effective translation of euphemistic language.

2. No specific strategies mentioned: 66.7% (4 interpreters) On the other hand, the majority of interpreters, comprising 66.7% of the total, did not specify any particular strategies they use to tackle challenges in euphemism use. It sug-

gests that these interpreters may rely on their general translation skills and experience without employing specific approaches or techniques to address euphemism-related challenges.

While some interpreters mentioned strategies they employ, a significant portion did not provide specific details on their approach to dealing with challenges in euphemism use. It highlights the need for interpreters to be aware of the potential challenges associated with euphemistic language and to develop strategies or techniques to overcome them effectively.

Interpreters should consider developing a repertoire of strategies to tackle challenges related to euphemism use. This can include staying updated on medical terminology, seeking clarification from healthcare professionals when necessary, collaborating with other language professionals for guidance, and continuously expanding their knowledge and skills through training and professional development opportunities.

Question Ten

10. Encountering Cases Requiring Euphemism in Medical Translation:

- Yes: 50% (3 interpreters)
- No: 50% (3 interpreters)

The analysis of whether interpreters encountered cases requiring euphemism in medical translation resulted in an equal distribution:

1. Yes: 50% (3 interpreters) Half of the interpreters, accounting for 50% of the total, reported encountering cases in their medical translation work that required the use of euphemism. These cases likely involved sensitive or delicate medical conditions or information where the use of euphemistic language was deemed necessary to convey the information in a more compassionate or less harsh manner. Interpreters in these situations would have had to navigate the fine balance between accurately translating the medical terminology and employing euphemism to ensure patient understanding and emotional comfort.

2. No: 50% (3 interpreters) Conversely, the other half of the interpreters, also comprising 50% of the total, did not encounter any cases in their medical

translation work that necessitated the use of euphemism. It suggests that either they primarily dealt with medical conditions or information that did not require euphemistic language, or they approached their translations in a more direct and clinical manner without relying on euphemism to soften the language.

The equal distribution of interpreters who encountered cases requiring euphemism and those who did not indicates that the need for euphemism in medical translation can vary depending on the specific cases, medical conditions, or healthcare settings. It highlights the importance for interpreters to be prepared and adaptable to different translation requirements, whether they involve euphemistic language or not.

Interpreters should be equipped with the necessary skills and knowledge to identify situations where the use of euphemism may be beneficial and appropriate. They should also be sensitive to the cultural and linguistic nuances of the target language to ensure that euphemisms are used effectively and accurately, while still conveying the intended meaning and maintaining patient understanding.

Question Eleven

11. How Cases Requiring Euphemism Were Handled:

- Various approaches mentioned: 33.3% (2 interpreters)
- No specific approaches mentioned: 66.7% (4 interpreters)

The analysis of how cases requiring euphemism were handled revealed the following distribution among the interpreters:

1. Various approaches mentioned: 33.3% (2 interpreters) One-third of the interpreters, accounting for 33.3% of the total, mentioned employing various approaches when dealing with cases that required the use of euphemism in their medical translations. These interpreters likely adopted specific strategies or techniques to ensure that the euphemistic language was appropriately used to convey the information while maintaining patient understanding and sensitivity. Although the specific approaches were not specified, these interpreters

recognized the importance of handling sensitive medical information with care and tailored their translation techniques accordingly.

2. No specific approaches mentioned: 66.7% (4 interpreters) In contrast, two-thirds of the interpreters, comprising 66.7% of the total, did not specify any particular approaches they used when confronted with cases requiring euphemism in their medical translations. It is possible that these interpreters relied on their overall linguistic and cultural competence to make informed translation decisions in such situations. While they did not provide explicit details about their approach, it can be inferred that they approached these cases in a professional and responsible manner, ensuring accurate translation while considering the sensitivities involved.

The results indicate that there is a variation in how interpreters handle cases that require euphemism in medical translation. Some interpreters actively employ specific approaches or strategies to navigate the challenges associated with euphemistic language, while others rely on their overall expertise and judgment in ensuring accurate and sensitive translations.

To enhance the effectiveness of handling such cases, it is advisable for interpreters to engage in continuous professional development and training. This can help them develop a repertoire of techniques and approaches specifically tailored to address euphemism in medical translation. Additionally, collaboration and knowledge-sharing among interpreters can foster a supportive environment where experiences and best practices can be shared to improve the overall quality of medical translations involving euphemistic language.

Question Twelve

12. Ensuring Patient Understanding with Euphemism Use:

- Strategies mentioned: 33.3% (2 interpreters)
- No specific strategies mentioned: 66.7% (4 interpreters)

The analysis of how interpreters ensure patient understanding when using euphemism in medical translations yielded the following findings:

1. Strategies mentioned: 33.3% (2 interpreters) Approximately one-third of the interpreters, accounting for 33.3% of the total, mentioned employing specific strategies to ensure patient understanding when using euphemism in their translations. Although the exact strategies were not specified, it can be inferred that these interpreters adopted measures to simplify complex medical terminology, provide additional explanations, or use contextually appropriate language to help patients comprehend the information accurately while maintaining sensitivity. By utilizing these strategies, these interpreters aimed to bridge the gap between medical jargon and patient comprehension, thus facilitating effective communication and informed decision-making.

2. No specific strategies mentioned: 66.7% (4 interpreters) On the other hand, the majority of the interpreters, constituting 66.7% of the total, did not mention any specific strategies they employed to ensure patient understanding when using euphemism in their translations. It is possible that these interpreters relied on their overall linguistic and cultural competence, as well as their professional judgment, to convey the medical information in a way that patients could comprehend. While they did not provide explicit details about their strategies, it can be assumed that they aimed to strike a balance between accuracy and patient understanding through their translation practices.

The results indicate that while some interpreters explicitly mentioned using strategies to enhance patient understanding when using euphemism, a significant proportion did not specify their approaches. Nonetheless, it is crucial for interpreters to prioritize patient comprehension when translating medical information, especially when employing euphemism. This can be achieved through the use of clear and concise language, providing necessary context, and adapting the translation to suit the patient's educational background and cultural sensitivity.

To further improve patient understanding, interpreters should actively seek feedback from patients, healthcare professionals, and colleagues to evaluate the effectiveness of their translation strategies. Additionally, ongoing professional development and training in the field of medical translation can enhance interpreters' skills in conveying complex medical concepts while ensuring patient comprehension.

Question Thirteen

13.Risks or Limitations of Euphemism in Medical Translation:

- Mentioned risks or limitations: 33.3% (2 interpreters)
- No specific risks or limitations mentioned: 66.7% (4 interpreters)

The examination of risks or limitations associated with the use of euphemism in medical translation revealed the following findings:

1. Mentioned risks or limitations: 33.3% (2 interpreters) Approximately one-third of the interpreters, accounting for 33.3% of the total, identified specific risks or limitations related to the use of euphemism in medical translation. Unfortunately, the exact risks or limitations were not specified in the data provided. However, it can be inferred that these interpreters recognized potential challenges or drawbacks associated with the use of euphemistic language in conveying medical information. These risks or limitations may include potential misinterpretation, loss of medical accuracy, compromised clarity, or difficulty in conveying the gravity or seriousness of certain medical conditions or treatments. By acknowledging these risks, these interpreters likely demonstrate a heightened awareness of the potential pitfalls associated with the use of euphemism in medical translation.

2. No specific risks or limitations mentioned: 66.7% (4 interpreters) On the other hand, the majority of the interpreters, constituting 66.7% of the total, did not mention any specific risks or limitations associated with the use of euphemism in medical translation. While they did not provide explicit details about the potential drawbacks, it can be assumed that these interpreters may not have extensively considered or encountered significant risks or limitations in their translation practice. However, it is important to note that the absence of explicit mention does not necessarily imply the absence of risks or limitations altogether.

It is crucial for interpreters to be aware of the risks and limitations associated with the use of euphemism in medical translation to ensure the accuracy, clarity, and integrity of the translated information. By identifying and addressing these potential pitfalls,

interpreters can make informed decisions about when and how to employ euphemism, considering factors such as the nature of the medical condition, cultural sensitivity, and patient understanding. Furthermore, ongoing professional development and collaboration with healthcare professionals can help interpreters stay updated on best practices and mitigate any potential risks or limitations.

Question Fourteen

14.Mitigating Risks in Sensitive Cases:

- Strategies mentioned: 33.3% (2 interpreters)
- No specific strategies mentioned: 66.7% (4 interpreters)

The analysis of mitigating risks in sensitive cases when using euphemism in medical translation yielded the following results:

1. Strategies mentioned: 33.3% (2 interpreters) Approximately one-third of the interpreters, accounting for 33.3% of the total, mentioned specific strategies for mitigating risks in sensitive cases. Unfortunately, the exact strategies were not provided by the interpreters . However, it can be inferred that these interpreters have developed approaches or techniques to address the challenges associated with using euphemism in medical translation, particularly in sensitive cases. These strategies may involve adapting the language to maintain accuracy while ensuring patient comfort, employing contextual explanations, or collaborating closely with healthcare professionals to clarify and convey delicate information effectively.

2. No specific strategies mentioned: 66.7% (4 interpreters) The majority of the interpreters, representing 66.7% of the total, did not mention any specific strategies for mitigating risks in sensitive cases when using euphemism in medical translation. Although they did not provide explicit details, it can be assumed that these interpreters may not have developed or implemented distinct strategies for handling sensitive cases. This could indicate a potential gap in their approach, as sensitive cases often require careful consideration and a tailored translation approach to balance accuracy, cultural sensitivity, and patient understanding.

To effectively mitigate risks in sensitive cases when using euphemism in medical translation, it is crucial for interpreters to develop strategies that address the specific challenges and complexities involved. This can be achieved through continuous professional development, knowledge sharing within the field, and collaboration with healthcare professionals. By incorporating strategies such as adapting language choices, providing contextual explanations, and employing clear communication techniques, interpreters can ensure that sensitive information is conveyed accurately while respecting cultural sensitivity and promoting patient understanding.

It is important for interpreters to recognize the significance of mitigating risks in sensitive cases and to continuously seek opportunities for growth and improvement in their translation practice. By actively identifying and implementing effective strategies, interpreters can enhance the quality of their translations and contribute to better communication between healthcare professionals and patients.

Question Fifteen

15.Collaboration with Doctors or Healthcare Experts:

- Yes: 33.3% (2 interpreters)
- No: 66.7% (4 interpreters)

The analysis regarding collaboration with doctors or healthcare experts in the context of using euphemism in medical translation yielded the following results:

1. Collaboration with doctors or healthcare experts: 33.3% (2 interpreters) Approximately one-third of the interpreters, accounting for 33.3% of the total, indicated that they collaborate with doctors or healthcare experts. This collaboration suggests that these interpreters actively engage with medical professionals to enhance their understanding of medical terminology and concepts. By working closely with doctors or healthcare experts, interpreters can gain insights into the appropriate usage of euphemism in medical translation, ensuring accuracy, cultural sensitivity, and effective communication with patients.

2. No collaboration with doctors or healthcare experts: 66.7% (4 interpreters)

The majority of the interpreters, representing 66.7% of the total, reported that they do not collaborate with doctors or healthcare experts. This indicates that these interpreters may rely solely on their own knowledge and resources for medical translation, without seeking input or guidance from medical professionals. While interpreters can possess sufficient linguistic skills, collaborating with doctors or healthcare experts can provide valuable medical expertise, context, and guidance that can enhance the accuracy and quality of medical translations, especially when dealing with euphemistic language.

Collaboration with doctors or healthcare experts is highly beneficial in medical translation, particularly when dealing with sensitive topics and euphemistic language. By working together, interpreters can clarify any ambiguities, gain a deeper understanding of medical concepts, and ensure accurate and culturally sensitive translations. This collaboration also promotes effective communication between healthcare professionals and patients, as interpreters can rely on the expertise of doctors or healthcare experts to accurately convey medical information while considering the cultural and linguistic nuances involved.

3-5   Main Findings

Based on the responses obtained from the questionnaire administered to the medical interpreters at the Cuban-Algerian Hospital of Ophthalmology, several key findings have emerged. Firstly, the interpreters exhibited a range of experience levels, with the majority having between 2 to 4 years of experience. Secondly, a significant proportion of critical cases required translation mediation, indicating the crucial role played by interpreters in ensuring effective communication. Thirdly, the use of euphemistic language by doctors was found to be minimal, with only one interpreter reporting its occurrence. Moreover, the provision of examples of euphemized medical terms in translation was limited, highlighting the need for further exploration in this area.

The questionnaire also revealed that cultural sensitivity was the primary factor influencing the use of euphemism in translations, followed by patient education level and the nature of the medical condition. Additionally, the majority of interpreters did not follow specific guidelines or protocols in their translations, and strategies to achieve a

balance between accuracy and patient understanding varied among respondents. Furthermore, cultural and linguistic considerations were taken into account by a significant portion of the interpreters when choosing to use euphemism.

Regarding challenges, the questionnaire indicated that a majority of interpreters did not mention specific strategies to address them. Similarly, the mitigating strategies for risks or limitations associated with euphemistic language were not explicitly mentioned. Finally, collaboration with doctors or healthcare experts was infrequent among the interpreters.

These findings provide valuable insights into the practices and perspectives of medical interpreters regarding the translation of euphemistic language. They underscore the need for further research and the development of guidelines to ensure accurate and culturally sensitive medical translations. The results contribute to the ongoing efforts to improve language access in healthcare settings, ultimately enhancing communication and patient care.
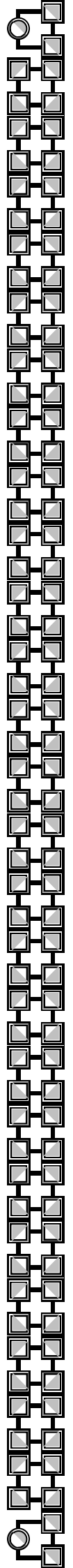
General Conclusion

Conclusion

In conclusion, this dissertation has examined the translation of euphemisms in medical texts, aiming to shed light on the challenges and strategies involved in conveying euphemistic meaning across different languages. Through an in-depth analysis of various examples and case studies, several key findings have emerged, providing valuable insights into the complexities of translating euphemisms in the medical domain.

The study began with a comprehensive review of the literature, which explored the theoretical frameworks and existing research on euphemism translation. This provided a solid foundation for understanding the linguistic, cultural, and pragmatic aspects of euphemisms and their significance in medical communication. It became evident that euphemisms play a crucial role in maintaining patient privacy, reducing anxiety, and addressing sensitive topics, highlighting the importance of accurately conveying their meaning in translation.

The main research question focused on how to effectively translate euphemisms in medical texts. The findings revealed that achieving accurate and culturally sensitive translations requires a delicate balance between preserving the euphemistic intent and adapting to the target language and culture. Translators need to be aware of the underlying purposes of euphemisms and employ appropriate strategies to ensure their effective communication.

The sub-questions further explored the specific challenges and strategies involved in translating euphemisms. Cultural and linguistic factors emerged as key considerations, as different cultures have varying norms and conventions regarding the use of euphemisms. Translators must be sensitive to these cultural differences and employ strategies such as cultural adaptation, paraphrasing, or using equivalent euphemisms to accurately convey the intended meaning in the target language.

Context was another crucial factor influencing translation strategies for euphemisms. The specific medical domain, the target audience, and the communicative purpose of the text all influenced the choice of translation technique. Translators need to carefully consider 1these contextual factors to select the most effective approach and ensure the euphemistic message is accurately conveyed.

The findings from the questionnaire align with the broader research conducted in this dissertation, highlighting the multifaceted nature of translating euphemisms in the medical context. They emphasize the significance of cultural sensitivity, context, and patient understanding in achieving accurate and effective translations. These insights can inform the development of guidelines, training programs, and best practices for medical interpreters and translators, ultimately improving communication and patient care in diverse healthcare settings.

Main Findings

This study focused on analysing the translation of euphemisms in medical texts and examining the challenges and strategies involved in conveying euphemistic meaning across different languages. Through the analysis of various examples and case studies, several key findings have emerged.

Firstly, it was observed that translating euphemisms in medical discourse requires a careful balance between preserving the intended meaning and adapting to the target language and culture. Euphemisms often serve specific purposes in medical communication, such as maintaining patient privacy, reducing anxiety, or softening the impact of sensitive information. Translators need to be aware of these underlying purposes and employ appropriate strategies to ensure that the euphemistic meaning is accurately conveyed in the target language.

Secondly, cultural and linguistic factors play a significant role in the translation of euphemisms. Different cultures have varying norms and conventions regarding the use of euphemisms, and translators must be sensitive to these differences. Literal translations may not always capture the intended euphemistic meaning, and creative approaches such as cultural adaptation, paraphrasing, or using equivalent euphemisms in the target language may be necessary.

Thirdly, context is crucial in determining the appropriate translation strategy for euphemisms. The specific medical domain, the target audience, and the communicative purpose of the text all influence the choice of translation technique. Translators must carefully consider these contextual factors and select the most effective approach to convey the euphemistic message accurately.

Recommendations

Based on the findings of this dissertation, several recommendations can be made to enhance the translation of euphemisms in medical texts. These recommendations aim to improve the accuracy, cultural sensitivity, and effectiveness of euphemism translation, thereby facilitating cross-cultural communication in the medical domain.

1. Develop a deep understanding of both source and target languages and cultures: Translators should strive to acquire a thorough understanding of the source and target languages and cultures, including their linguistic nuances, social norms, and cultural sensitivities. This knowledge will enable translators to make informed decisions about the choice of euphemistic expressions and their appropriate adaptation in the target language, ensuring accurate and culturally sensitive translations.

2. Collaborate with subject-matter experts: Engaging in collaborative efforts with medical professionals, researchers, or subject-matter experts can significantly enhance the translation process. These experts possess specialized knowledge about medical terminology, concepts, and cultural practices related to the target language, enabling translators to accurately convey the intended euphemistic meaning. Collaborative exchanges can provide valuable insights and feedback, leading to more precise and contextually appropriate translations.

3. Stay updated with developments in medical terminology and euphemistic expressions: Medical terminology and euphemistic expressions evolve over time, reflecting changes in medical practices, societal attitudes, and cultural norms. Translators should actively engage in continuous professional development, attend relevant workshops, seminars, and conferences, and keep abreast of current research and developments in the field of medical translation. Staying updated will help translators adapt to emerging euphemistic expressions and ensure the use of accurate and up-to-date terminology in their translations.

4. Consider the target audience and purpose of the translation: The target audience and purpose of the translation play a crucial role in determining the appropriate translation strategy for euphemisms. Translators should carefully

analyse the context, including the intended readership and communicative goals of the text, to select the most suitable approach. Adapting the euphemistic expressions to align with the cultural expectations and sensitivities of the target audience will enhance the effectiveness of the translation.

5. Build a glossary of euphemistic expressions: Translators should create and maintain a comprehensive glossary of euphemistic expressions specific to the medical domain. This glossary can serve as a valuable resource, providing translators with a repository of commonly used euphemisms and their corresponding translations. The glossary should be regularly updated to include new expressions and terminologies, ensuring consistency and accuracy in future translations.

6. Seek feedback and engage in peer review: Translators should actively seek feedback from peers and engage in peer review processes to improve the quality of their translations. Peer review provides an opportunity to receive constructive criticism, identify areas for improvement, and refine the translation techniques used for euphemisms. Collaborative feedback fosters professional growth and ensures the delivery of high-quality translations.

Bibliographical / References

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1. AHMED, A., & JOMAA, N. EUPHEMISTIC EXPRESSIONS IN THE AMERICAN MASS MEDIA: A QUALITATIVE STUDY OF TYPES AND FUNCTIONS. Eurasian Journal of English Language and Literature, 4(2), 65-77.

2. Al-Adwan, A. S. (2015). Towards a model of euphemisation in Arabic subtitling. Arab World English Journal (AWEJ) Special Issue on Translation, (4).

3. Allan, K. (2012). X-phemism and creativity. Lexis. Journal in English Lexicology, (7).

4. Almijrab, R. (2020). Strategies used in translating English taboo expressions into Arabic. African Journal of Social Sciences and Humanities Research, 3(1), 22-30.

5. American Association of Neurological Surgeons , Epilepsy.information page, Epilepsy – Seizure Types, Symptoms and Treatment Options (aans.org)

6. Burridge, K. (2012). Euphemism and language change: The sixth and seventh ages. Lexis. Journal in English Lexicology, (7).

7. Cohen, B. J., & DePetris, A. (2013). Medical terminology: An illustrated guide. Lippincott Williams & Wilkins.

8. Coombs, R. H., Chopra, S., Schenk, D. R., & Yutan, E. (1993). Medical slang and its functions. Social science & medicine, 36(8), 987-998.

9. Crespo Fernández, E. (2014). Euphemism and political discourse in the British regional press.

10. Davies, P. M. (1985). Medical terminology: a guide to current usage. (No Title).

11. Dewi, E. E., Huda, K., & Supriyatno, S. (2019). AN ANALYSIS OF EUPHEMISM IN ONLINE WRITTEN MASS MEDIA IN INDONESIA; JAKARTA POST AND REPUBLIKA NEWSPAPER IN POLITICAL SECTION. Edulitics (Education, Literature, and Linguistics) Journal, 4(1), 46-53.

12. Ee, C. 10 Common Causes of Blood in Urine for Men (Hematuria).

13. Fernández, E. C. (2006). The language of death: Euphemism and conceptual metaphorization in Victorian obituaries. SKY Journal of Linguistics, 19(2006), 101-130.

14. Fishkin, S. F. (1993). Was Huck Black?: Mark Twain and African-American Voices. Oxford University Press.

15. Ghazala, H. S. (2012). Translation as problems and solutions: A textbook for university students and trainee translators. Konooz Al-Marifa.

16. Hatzimouratidis, K., Amar, E., Eardley, I., Giuliano, F., Hatzichristou, D., Montorsi, F., ... & Wespes, E. (2010). Guidelines on male sexual dysfunction: erectile dysfunction and premature ejaculation. European urology, 57(5), 804-814.

17. Hutchinson, T., & Waters, A. (1987). English for specific purposes. Cambridge university press.

18. Karwacka, W. (2015). Medical translation. Ways to translation, 271-298.

19. Mirabela, P. A. (2010). DOUBLESPEAK AND EUPHEMISMS IN BUSINESS ENGLISH. Annals of the University of Oradea, Economic Science Series, 19(1).

20. Mohammed, H. G., & Kokaz, M. R. (2022). The Importance of Utilizing Euphemism in Translation and Simultaneous Interpreting. Journal of the College of Education for Women, 33(2), 55-74.

21. National Heart Lung and Blood Institute,(2022) Sickle Cell Disease information page , Sickle Cell Disease - What Is Sickle Cell Disease? | NHLBI, NIH

22. National Institute of Neurological Disorders and Stroke. (2019). Sleep apnea information page. https://www.ninds.nih.gov/Disorders/All-Disorders/Sleep-Apnea-Information-Page

23. Paltridge, B., & Starfield, S. (Eds.). (2013). the handbook of English for specific purposes (Vol. 592). Boston: Wiley-blackwell.

24. Rahman, M. (2015). English for Specific Purposes (ESP): A Holistic Review. Universal Journal of Educational Research, 3(1), 24-31.

25. Richards, J. C. (2002). New Interchange 1 Lab Guide: English for International Communication (Vol. 1). Cambridge University Press.

26. SARI, B. P. (2020). THE STUDY OF EUPHEMISM IN DURTETE'S SPEECH AT STATE OF NATION ADDRESS (SONA) (Doctoral dissertation, UNIVERSITAS PGRI ADIBUANA SURABAYA).

27. Togo, K. (2010). Japan's foreign policy, 1945-2009: The quest for a proactive policy. Brill.

28. Twain, M. (2003). Adventures of huckleberry finn (Vol. 20). Univ of California Press.

29. WAŁASZEWSKA, E. (2010). CHAPTER THREE NARROWING AND TABOO CONTAMINATION: RELEVANCE THEORY AND EUPHEMISMS EWA WAŁASZEWSKA. In the mind and across minds: a relevance-theoretic perspective on communication and translation, 61.

30. Wilson, V. S. (1993). The tapestry vision of Canadian multiculturalism. Canadian Journal of Political Science/Revue canadienne de science politique, 26(4), 645-669.

31. Zheng, Y. (2020). Analysis of Euphemism in Advanced English Ⅰ --Based on Its Definition, Usage and Translation. Frontiers in Educational Research, 3(8).