Translating Two Respiratory Chinese Patent Medicine Package Inserts Based on Western Orientation of Theory and Methodology

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Abstract
The export of Chinese patent medicine (CPM) has thrived, particularly amidst the past three years of pandemic. This study focuses on the translation of package inserts (PIs) for two respiratory Chinese patent medicines, namely Lianhua Qingwen Jiaonang and Xuanfei Baidu Keli. These medicines have been extensively utilized in China’s efforts to prevent and treat Covid-19 during the epidemic period, garnering significant acclaim owing to their efficacious therapeutic properties. Drawing on Snell-Hornby’s theory of an integrated approach to translation and employing a comparative analysis method between leaflets of western medicine and Chinese patent medicine, this study aims to firstly examine the package insert formats of both western medicine and Chinese patent medicine. Secondly, it seeks to determine the translation strategies employed in these two types of package inserts. Lastly, it aims to identify translation errors at both lexical and syntactical levels. Through analysis, it has been determined that the PI formats of CPM and western medicine are congruent with each other, as they both fall within the realm of medical introduction. A distinguishing feature of this textual genre lies in its specialized utilization of professional and culturally loaded.

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terminologies and pattern sentences. Consequently, the translation strategy encompasses a taxonomy that strikes a balance between domestication and foreignization by employing methods such as calque, borrowing, and transliteration. The identification of lexical and syntactical errors in the translation of two package inserts has led to an enhanced English version that is more reliable and comprehensible.

**Keywords:** Chinese Patent Medicine, Western Medicine, Package Insert, Translation Strategies, Integrated Approach

**Introduction**

Chinese patent medicines, processed from Chinese herbal medicines according to prescribed methods, are approved by the National Drug Regulatory Authority of China based on traditional Chinese medicine (TCM) theory (Zhuang et al., 2020). The package insert of CPM refers to the informational leaflet accompanying this medication. Globally, licensed and marketed batches of vaccines and medicines targeting Covid-19 have been introduced. For instance, Poxlovid, developed by Pfizer, an American pharmaceutical producer (Wu et al., 2023, p.354), is among them. However, Chinese patent medicines, derived from TCM prescriptions, have a long history of existence and were available prior to the pandemic. They are utilized for the development of complementary and alternative medicines aimed at combating the pneumonia.

Despite the long history of clinical practice in TCM, a major barrier to its modernization and globalization is the lack of solid scientific evidence. This includes data that clearly elucidate the chemical composition, reveal the mechanism of action, validate effectiveness through double-blind clinical trials, and enable practical quality control for safety, efficacy, and consistency using modern biomedicine tools (Yang et al., 2017). Therefore, Chinese patent medicine possesses distinctive attributes that will be exemplified in its package insert, based on diverse practical theories distinct from western pharmaceuticals.

The translation of respiratory CPM holds immense significance (Li et al., 2021), particularly in the current pandemic era and the subsequent years, as it plays a pivotal role in disease prevention and control during sudden outbreaks of public health emergencies (Pritzker and Hui, 2014). This becomes even more crucial when specific antiviral medications are unavailable or unaffordable due to their exorbitant costs. In the long term, a proficient translation of package inserts contributes to enhancing the readability, modernization, and globalization of Chinese patent medicine (Zhang et al., 2023). Simultaneously, overcoming cultural barriers in traditional Chinese medicine during the translation process facilitates a better understanding of TCM theories among medical users.

**Problem Statement**

Theoretically, when translating product package inserts, western researchers often consider text genre and linguistics as a starting point (Askehave and Zethsen, 2001). In domestic translation of CPM package inserts, theories such as text typology (Tu, 2018), theory of translation action (Chen and Yang, 2019), relevant translation theory (Wang, 2021), and eco-translatology (Pan, 2021) serve as guiding principles. A fully satisfactory theory of translation should transcend a mere compilation of empirical guidelines that translators have generally relied on to produce reasonably adequate renditions of source texts (Nida, 1991). The target text presented to the audience is based on a norm.

In terms of methodology, contemporary machine translation relies primarily on its vast memory capacity and terminology resources. The trados-based (Zhang, 2023) or
"PE+MT+CAT+PE" model (Liu, 2021) of CPM package insert translation represents an achievement in translation technology. The utility of machine translation in CPM package insert leads to its translation research on the basis of established corpora. For the sake of formality, objectivity, preciseness, conciseness and logicality of drug package insert (Lin and Zhou, 2010), one strength of corpus analysis is that translation errors are usually classified by taxonomy, hence demonstrating translation homogeneity and providing a holistic solution for errors in the same category.

Nonetheless, there remains a lack of consensus regarding translation theories that comprehensively encompass context genre, both source and target text features, areas of concern in translation, and translation strategies specifically applicable to drug package inserts. Moreover, it should be noted that the majority of CPM package insert corpora are unidirectional in nature, indicating a lack of contrast between Western and CPM formats where both forms and contents exhibit similarities in their descriptions.

This paper will adopt Snell-Hornby's integrated approach to translation, which offers a comprehensive overview of the translation of package inserts for CPM drugs. It considers various aspects such as contextual genre, features of the source text, translation criteria, target text function, and areas of linguistics that relevant for translation. This theoretical framework investigates CPM package insert translation at both macro and micro levels, providing a systematic analysis of medical translation approaches and allowing for the assessment of potential errors within this integrated approach. Additionally, the author introduces Paxlovid's package insert—a western medicine used in combating Covid-19—as reference data and benchmark to facilitate comparison with two respiratory CPM package inserts. The western orientation embedded in this theory and methodology provides a novel perspective for determining strategies in CPM package insert translation.

Previous Researches on CPM Package Insert Translation
Instead of using everyday language, one distinguishing feature of terminology in a particular field is that it represents identified knowledge (Yunusova, 2022). Medical terminology comprises a macro-terminology system consisting of subsystems, each with its own characteristics (Abidova and Guzacheva, 2020), and different clinical fields have diverse classifications for their terminologies. From an inclusive perspective, there are certain similarities in the terminologies used in CPM package inserts and western medicine PI. In western medical leaflets, these terminologies can be categorized as single-word terms, morpheme-structured terms, and abbreviations (Azimbayevna and Vohidovna, 2021). In a CPM package insert, terminologies primarily consist of commonly used terms (such as mouth and stomach), western medical terminologies (such as symptoms of emesis and nausea), and TCM terminologies (such as yin, yang, and patterns). And some of these terminologies exhibit polysemy, frequent utilization of four-character structure phrases, and imprecise wording with non-specialist language proficiency (Zuo, 2015; Tu, 2018).

However, there are notable variations in the structures of package inserts across traditional medicine and modern medicines, as well as CPM and western medicine. Furthermore, patient information leaflets (package inserts) have been subject to distinct laws and regulations governing their content, leading to divergent macrostructural developments in different cultural contexts (Faya-Ornia, 2018).

During the translation of CPM package inserts, certain Chinese scholars may have recognized its distinctive characteristics, leading to an increased focus on discussions regarding the stakeholders involved in the translation process. These stakeholders typically include medical
regulators, CPM manufacturers, personnel responsible for foreign registration and authentication of CPMs, medical practitioners, and professional translators specializing in medical translations (Chen and Yang, 2019). The aforementioned viewpoint is arguably supported by translation theories, such as the theory of translation action (Chen and Yang, 2019), relevant translation theory Wang (2021), and eco-tran­slatology Pan (2021), all of which underscore the pivotal role played by translators. As the cornerstone of translation activities, translators should adeptly employ appropriate translation strategies in accordance with authentic contexts.

In general, translators employ strategies to address lexical or syntactic challenges encountered during the translation process (Owji, 2013). In contemporary translation studies, the term "translation strategy" is frequently employed to delineate the process of translation (Kudratovich, 2023, p.15), encompassing a comprehensive range of linguistic and extralinguistic factors: initial settings; the selection of an overarching approach that guides translators in making specific decisions; and the determination of the nature and sequence of actions (Komissarov, 2022, p.356). However, literal translation serves as the fundamental approach to translation (Newmark, 1988, p. 70), and is commonly employed by translators until they encounter any challenges with the translated text (Tirkkonen-Condit, 2005).

Katharina Reiss proposed a text typology based on Karl Buhler's three functions of language, namely the informative function, expressive function, and appellative function. Product instructions are primarily characterized by their informative nature (Reiss, 1989). However, New Mark (1988) categorizes leaflets or product introductions as vocative texts, which differs from Reiss’ classification. According to Tu Wen (2018), four translation principles can be proposed based on text typology for translating CPM indications into English, namely the principles of conciseness, faithfulness, interpretation, and integrity. Kena and Liu Aijuan (2021) further employ text typology theory to examine the translation of 10 respiratory CPM indications from five perspectives, encompassing section title translation, treatment and pathogenesis terminology, symptom and disease terms translation, incomprehensible term handling, as well as discourse translation.

Currently, the primary challenge in translation lies in the inevitable influence of distinct cultural norms between the source and target languages. It is incumbent upon translators to prioritize certain norms over others (Janfaza et al., 2012). However, Newmark (1988) argued that the cultural differences between languages may result in the loss of certain semantic meanings. In addition to cultural barriers, the application of PI translation goes beyond experts and practitioners. The skopos theory, with its principles of skopos, coherence, and fidelity, provides a fresh perspective for non-specialists to directly comprehend drug information and make informed decisions regarding their purchase and usage (Liu, 2017).

In the digital era, translation is intricately intertwined with computers and Copra. Drawing upon a parallel corpus, Lin and Zhou (2010) contended that the translation of CPM package inserts exhibited various lexical and grammatical errors, encompassing formal inaccuracies, semantic discrepancies, interlingual mistakes, as well as communication strategy-based errors. The utilization of machine translation for advancing CPM package insert translation and standardization continues to grow steadily. The "PE+MT+CAT+PE" model (Liu, 2021), incorporating tools such as Trados (Zhang et al., 2023), represents an efficacious approach to ensuring precise and harmonized translations, which is crucial in maintaining consistency in medical terminology.

The aforementioned studies offer diverse perspectives on the translation of CPM package inserts. To achieve a comprehensive and effective English translation, an integrated approach
is urgently needed. Marry Snell-Hornby (1988) has dynamically identified text types and criteria for translation into five levels from macro to micro sequentially, with medical translation belonging to the special language category. Within this group, relevant areas of linguistics for translation include syntax, terminology, and documentation (standardization). These three areas provide a perspective that includes the entire process of translating CPM package inserts.

Table 1
Snell-Hornby’s text-types and Criteria for Translation

<table>
<thead>
<tr>
<th>Level A</th>
<th>Conventional area of translation:</th>
<th>Special language translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level B</td>
<td>Prototype of the basic text-types:</td>
<td>Medicine</td>
</tr>
<tr>
<td>Level C</td>
<td>Non-linguistic disciplines:</td>
<td>Studies of special subjects</td>
</tr>
<tr>
<td>Level D</td>
<td>Important aspects and criteria governing the translation process:</td>
<td></td>
</tr>
<tr>
<td>D 1</td>
<td>Understanding the source text:</td>
<td>Conceptual identity</td>
</tr>
<tr>
<td>D 2</td>
<td>Focal criteria for the envisaged translation:</td>
<td>Invariance</td>
</tr>
<tr>
<td>D 3</td>
<td>Precision of target text:</td>
<td>Informative function</td>
</tr>
<tr>
<td>Level E</td>
<td>Areas of linguistics that relevant for translation:</td>
<td>LSP syntax, terminology, documentation/standardization</td>
</tr>
<tr>
<td>Level F</td>
<td>Phonological aspects of specific relevance for certain areas of translation:</td>
<td>/</td>
</tr>
</tbody>
</table>

Methodology
Data collection and processing are discussed in this section, then a qualitative method is adopted to analyse the data.

Package Insert Collection
In successive editions of China’s diagnosis and treatment plan for Covid-19, two CPM medicines are included for the treatment of mild and moderate cases who have contracted novel coronavirus pneumonia, namely Lianhua Qingwen Jiaonang (over-the-counter or OTC) and Xuanfei Baidu Keli (prescription). These medicines are respectively manufactured by Yiling Pharmaceutical and Buchang Pharma, two esteemed medical producers in the Chinese CPM industry. The English leaflet of Lianhua Qingwen Jiaonang was obtained from the website of Global Sources, while the Chinese package insert was acquired from its medicine box. Additionally, the Chinese-English package insert of Xuanfei Baidu Keli was provided by the company's export merchandiser via WeChat, a prominent Chinese social media platform. Lastly, the English package insert of Paxlovid was sourced from Pfizer (Malaysia) Sdn Bhd's official website.

Data Processing
The package inserts underwent a comprehensive review prior to processing, with the aim of identifying both similarities and differences among them in order to determine the scope of
data analysis. Specifically, sections pertaining to descriptions, indications, contraindications, usage, and dosage were investigated within the package inserts. Regarding the two CPM package inserts, the process involved data cleansing (converting PDFs into Word using ABBYY Fine Reader software, followed by manual formatting), data alignment (creating parallel pairs in Excel tables), and importing the data into Tmxmall Yicorpus, a translator-friendly digital platform developed by a Chinese high-tech firm. This platform offers localized monolingual and bilingual analysis functions such as concordance, word frequency analysis, word cloud mapping, and other translation-related services. Additionally, for analyzing translation strategies employed in the package inserts of both respiratory CPMs, monolingual data from Paxlovid was introduced into Excel as a peer benchmark.

Findings and Results
This section provides a contrast between the PI formats of CPM and western medicine, employing the translation strategy of dichotomy between foreignization (calque and transliteration) and domestication (borrowing). Additionally, lexical and grammatical errors in both English versions of the package inserts are identified.

Package Formats Comparison Between CPM and Western Medicines
The Package Insert Format of Traditional Chinese Medications and Natural Medicines and the Specification of Instructions for OTC Drug Package Insert both were established by China's National Medical Products Administration (NMPA) in 2006, which specifically delineated the package contents of Chinese patent medicine (including over-the-counter drugs and prescriptions). Interestingly, the American Food & Drug Administration (FDA) also introduced a novel prescription drug information format during the same year.

<table>
<thead>
<tr>
<th>中文项 (NMPA)</th>
<th>Corresponding English Items (FDA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>药品名称:通用名</td>
<td>Drug Name</td>
</tr>
<tr>
<td>汉语拼音</td>
<td>Ingredients (Compositions)</td>
</tr>
<tr>
<td>成分</td>
<td>Descriptions (medicine properties)</td>
</tr>
<tr>
<td>性状</td>
<td>Indications</td>
</tr>
<tr>
<td>功能主治/适应症</td>
<td>Strengths</td>
</tr>
<tr>
<td>规格</td>
<td>Usage and Dosage</td>
</tr>
<tr>
<td>用法用量</td>
<td>Adverse Reactions</td>
</tr>
<tr>
<td>不良反应</td>
<td></td>
</tr>
</tbody>
</table>
Table 2 presents a comprehensive comparison of the package insert formats between Chinese patent medicines and western medicines, effectively highlighting the distinction between over-the-counter drugs and prescription medications. The consistent alignment of items in both Chinese patent medicine and western medicine package inserts facilitates their regulated equivalence for translation purposes.

Characteristics of Terminologies
Drug package inserts (leaflets) serve as a valuable source of medical information, encompassing a range of unique terminologies and common words that cater to the diverse needs of both healthcare professionals and lay users (Lin and Zhou, 2010). Chinese patent medicine shares certain terminologies with western medicine, such as "流感" corresponding to "flu," and "心悸- palpitation." However, CPM medicine also exhibits distinctive characteristics in its terminology. Rather than describing specific diseases, therapeutic methods, patterns (syndromes), and symptoms are indicated through terminologies that predominantly take the form of four-character phrases, reflecting the essence of traditional Chinese medicine culture and philosophy. For example, the package inserts feature patterns like "热毒袭肺 (证)" and "湿毒郁肺 (证)," indicating an invasion of pathogens (heat or dampness) in the lungs.

In addition to the aforementioned terminological features, synonymy and polysemy frequently manifest in CPM package inserts due to their origins in traditional Chinese medicine classics. Taking the therapeutic terminology "清瘟解毒" as an example, the functional verbs "清" and "解" form a synonymous pair, denoting the action of clearing away or removing. This type of term exemplifies the poetic aesthetics inherent in eastern medical science.
Terminology Translation

The nomenclature of Chinese patent medicines in China is standardized. In 2020, the Chinese medical authority revised the *Pharmacopoeia of the People's Republic of China*, stipulating that TCM medicines should be transliterated into Pinyin for their English names, such as "Lianhua Qingwen Jiaonang." Additionally, transliteration is also employed for TCM terms that lack direct equivalents in Western culture, such as "阴阳-yin and yang". In terms of TCM culture, one major challenge in translating Chinese terms into English lies in the existence of a single concept in Chinese but multiple synonyms in English. For instance, take the Chinese character "泄" as an example; it can be translated as the functional verbs "disperse," "repel," and "clear," or even as the symptom "diarrhea" depending on the context.

The CPM package insert stands out for its utilization of four-character phrases in indications, which are derived from traditional Chinese medical classics and practices spanning thousands of years. These expressions possess the distinctive features of TCM language, embracing poetic pair styles while emphasizing symmetry and balance. In CPM package insert, these Chinese culture-loaded short phrases mainly depict therapeutic methods, syndromes and symptoms. To better preserve traditional Chinese medicine, bilingual and multilingual TCM terminologies have been issued by the World Health Organization (WHO) and Chinese medical authorities. These include WHO's *International Standard Terminologies on Traditional Medicine in the Western Pacific Region* (2007), *WHO International Standard Terminologies on Traditional Chinese Medicine* (2022), as well as the *International Standard Chinese-English Basic Nomenclature of Chinese Medicine* (2008), among others. According to these reference tools, calque translation emerges as a primary approach for transferring the theory of traditional Chinese medicine, effectively capturing and conveying its conceptual essence (Wiseman and Xu, 2004).

The linguistic structure and internal logic of the phrases should be taken into consideration. For example, "热毒袭肺" is a biased phrase that denotes the etiological factor of heat toxin attacking the lung. The verb-object phrase "扶正固本" has been translated by WHO as "reinforce healthy qi to strengthen the body". In this context, "扶正" represents immune system enhancement, serving as a manner, while "固本" signifies improving the body's anti-disease capability and reflects the purpose of reinforcing healthy qi. The translation of disease
names and symptoms often incorporates direct borrowings from western terminologies, such as "心悸-palpitation" and "肌肉酸痛-muscular soreness". Additionally, the translation of general terms representing body tissues and organs remains faithful to their original forms, such as "胃-stomach" and "心-heart".

### Table 3

<table>
<thead>
<tr>
<th>CN</th>
<th>EN</th>
<th>Modified version based on reference tools</th>
</tr>
</thead>
<tbody>
<tr>
<td>清瘟解毒</td>
<td>to clear scourge and remove toxin</td>
<td>clear epidemic pestilence and remove toxin</td>
</tr>
<tr>
<td>宣肺泄热</td>
<td>diffuse the lung and discharge heat</td>
<td>disperse the lung and clear heat</td>
</tr>
<tr>
<td>热毒袭肺</td>
<td>heat toxin assailing the lung</td>
<td>heat toxin attacking the lung</td>
</tr>
<tr>
<td>清瘟解毒</td>
<td>clear heat and detoxify</td>
<td>/</td>
</tr>
<tr>
<td>宣肺泄热</td>
<td>remove lung hotness</td>
<td>/</td>
</tr>
<tr>
<td>宣肺化湿</td>
<td>promote the dispersing function of the Lung and transforming dampness</td>
<td>disperse the lung and transform dampness</td>
</tr>
<tr>
<td>清热透邪</td>
<td>heat-clearing to remove pathogenic factors</td>
<td>clear heat and remove pathogenic factors</td>
</tr>
<tr>
<td>泻肺解毒</td>
<td>lung-purging and detoxication.</td>
<td>clear heat in the lung and remove toxin</td>
</tr>
<tr>
<td>湿毒郁肺</td>
<td>dampness toxin depressing lung</td>
<td>dampness toxin accumulating in the lung</td>
</tr>
<tr>
<td>(证)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In table 3, the illustration showcases four-character phrases representing therapeutic methods and patterns in Traditional Chinese Medicine. These culturally significant terms contain a wealth of information pertaining to TCM theory, making them crucial for interpreting and promoting TCM culture abroad. When translating these phrases into English, it is essential to prioritize identifying their semantic meaning within the given context. Currently available English editions often lack terminological and grammatical accuracy. The translation of "清瘟解毒" as "to clear scourge and remove toxin" is inadequate in accurately conveying its intended meaning due to the ambiguous nature of "scourge", which can refer to either a whip used for punishment or something causing great trouble or suffering. Lianhua Qingwen Jiaonang is indicated for the treatment of "epidemic pestilence", particularly as an alternative medicine for Covid-19. Therefore, a modified version is introduced as a point of reference to enhance the accuracy and comprehension of these cultural terms. The utilized reference tools include the WHO International Standard Terminologies on Traditional Chinese Medicine (2022) and the International Standard Chinese-English Basic Nomenclature of Chinese Medicine (2008).

**Sentence Translation**
Previous studies have primarily focused on the syntactic features of CPM package inserts, such as tense, voice, and sentence patterns (Cheng, 2021). Some researchers have concentrated on syntactic translation errors in texts (Luo and Shi 2009; Lin and Zhou 2010). However, limited attention has been given to contrastive texts, specifically the western medicine package inserts of peer disciplines.

The package insert contains numerous pattern syntax expressions, particularly in over-the-counter medicine package inserts. Taking the Paxlovid leaflet as a benchmark, modifications were made to the pattern sentence translation of the two respiratory CPM package inserts, thereby enhancing consistency and readability of the target texts. By incorporating sentence patterns derived from western medicine, consistent syntactic translations can be applied across indications, adverse reactions, contraindications, precautions, and other sections. This approach not only ensures the accuracy of the English version but also facilitates standardization in package insert translation.

Table 4
_Bilingual edition of pattern syntax in the CPM package inserts_

<table>
<thead>
<tr>
<th>Items</th>
<th>CN</th>
<th>EN</th>
<th>Contrastive version based on PI of PAXLOVID approved in Malaysia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indications</td>
<td>用于湿毒郁肺所致的疫病。症见发热，咳嗽等......</td>
<td>It is applicable to the disease caused by dampness toxin depressing lung. <strong>Symptoms:</strong> fever, cough, pharyngeal discomfort...</td>
<td>It is indicated for the treatment of epidemic disease in adults due to dampness toxin accumulating in the lung, <strong>manifested with</strong> symptoms of fever, cough...</td>
</tr>
<tr>
<td>Adverse Reactions</td>
<td>证明临床实践中，偶见胃脘不适、心悸。</td>
<td>It is proved that in clinical practice, occasionally found stomach discomfort, heart palpitations.</td>
<td>Gastric duct discomfort and palpitation have been occasionally observed in clinical practice.</td>
</tr>
<tr>
<td>Contraindications</td>
<td>孕妇、哺乳期妇女、婴幼儿禁用。</td>
<td>Pregnant women and infants during lactation are prohibited.</td>
<td>It is contraindicated in infants and women who are at period of Fertility, pregnancy or lactation.</td>
</tr>
<tr>
<td>Precautions</td>
<td>肝功能异常者应在医师指导下使用......</td>
<td>Patients with abnormal liver function should be taken under the guidance of doctor...</td>
<td>Patients with hepatic impairment should take medicine under the guide of their healthcare providers.</td>
</tr>
</tbody>
</table>
Errors and Correction

The analysis presented in tables 3 and 4 has identified several lexical and syntactic errors. From the perspective of a professional translator, these errors primarily arise from deficiencies in terminology retrieval capabilities and bilingual competence.

Lexical Errors

Example 1: 宣肺化湿, 清热透邪, 泻肺解毒
English version: Promote the dispersing function of the Lung and transforming dampness, Heat-clearing to remove pathogenic factors, lung-purging and detoxication.
Analysis: The initial step involves comprehending the significance of the three therapeutic method terms prior to commencing with the translation process. The paraphrase suggests that external pathogenic factors, such as heat, invade and accumulate in the lung along with dampness. Consequently, the medicine’s role is to disperse both heat and dampness from the lung in order to eliminate pathogens. For translating these functional terms of traditional Chinese medicine, reference can be made to WHO International Standard Terminologies on Traditional Chinese Medicine (2022), which emphasizes accurate and concise translation principles. To minimize redundancy present in the source text, a modified translation could be "dispersing lung and transforming dampness," "clearing lung heat and removing pathogens".

Example 2: 舌质暗红, 苔黄腻或黄燥
English version: dark red Tongue, yellow greasy or yellow dry fur
Analysis: Literal translation is applied in the English version, causing the target text lack of readability and coherence. Semantically, the source text is a symptom description of the tongue, which has a texture of dull-red colour that caused by exuberant heat damaging yin. While coating stuck on the tongue is greasy or dry both with yellow colour. To enhance the coherence of translation, the reference version can be dull-red tongue with greasily or dryly yellow coating.

Example 3: 脉滑数或弦滑
English version: slippery-rapid or taut-slippery pulse
The book Pulse Classic, authored by Wang Shuhe, a medical official and TCM practitioner during the West Jin Dynasty (266-316 AD), stands as the pioneering work in classifying pulse patterns. Within this seminal text, the author identified 24 distinct patterns, which were further expanded upon by Li Shizhen in his Ming Dynasty (1564 AD) publication titled Binhu's Sphygometry. According to the database of the Encyclopedia of China and WHO International Standard Terminologies on Traditional Chinese Medicine (2022), the translation for the three terms are as follows: "滑脉-slippery pulse," "数脉-rapid pulse," and "弦脉-stringy pulse." These pulse patterns should be identified through palpation, which is one of the four diagnostic methods in TCM. It is common for a patient to exhibit multiple pulse patterns. In the source text, two specific combinations of pulse patterns were illustrated. Therefore, a more appropriate modified translation would be slippery-rapid pulse or stringy-slippery pulse.

Syntactic Errors

Example 4: 本品为棕黄色至棕褐色的颗粒; 气微香, 味微苦。
English version: Hard capsules containing brown-yellowish to dark-brownish powder and granules; odour, slightly aromatic; taste, slightly bitter.
The target text employed strategies of amplification and explicit translation. In the source text, "Hard capsule" does not have a direct Chinese equivalent, while the other terms were translated word-for-word to ensure comprehensive representation. However, in line with the concise principle of medical instruction, it is necessary to provide a succinct delineation of the medication’s properties. In the Paxlovid leaflet, the drug description is presented as discrete words rather than coherent clauses. To effectively convey the attributes of the medication, a straightforward and explicit translation should be utilized. The modified English version can be:

Claybank to tan, granules, with a faint herbal aroma and bitter taste.

Example 5: 用于新型冠状病毒肺炎的常规治疗中, 可用于轻型、普通型引起的发热、咳嗽、乏力。

English version: Also indicated for the symptoms of fever, cough, and fatigue caused by the mild and moderate coronavirus disease 2019 (COVID-19) in combination with standard of care. The sentence structure in the target text does not adhere to English grammar rules, as it lacks a formal subject. Moreover, the World Health Organization has identified the specific term novel coronavirus pneumonia or Covid-19 during the pandemic. In medical English, "常规治疗" can be translated as "routine treatment". In the source text, "轻型、普通型" actually refers to patients with less severe symptoms. According to the Diagnosis and Treatment Protocol for COVID-19 Patients (Trial Version 9) released by the National Health Commission & National Administration of Traditional Chinese Medicine (2022), "轻型、普通型" can be translated as "mild and moderate cases of COVID-19." Therefore, a modified English version can be that it is also indicated for symptoms such as fever, cough, and fatigue in mild and moderate cases of Covid-19 during routine treatment.

Example 6: 不要超量、长时间、反复使用本品。

English version: Do not overdose for a long time repeated use of this product. The sentence in the source text is an imperative clause in the precautions, and "超剂量、长时间、反复" are three adverbs that modify the only verb "使用". After analyzing the sentence structure and seeking balance, it can be translated as "Do not overdose, repeatedly use or abuse this medicine for a long time." In the modified English version, the adverb "超剂量" is transformed into a verb "overdose", while the only verb "使用" in source text are changed to three specific forms of "overdose, use and abuse".

Example 7: 用药后注意休息、忌生冷油腻等。

English version: After taking the medicine, pay attention to rest, avoid raw, cold and greasy food, etc. The strategy employed in the target text is merely a literal translation, which fails to adhere to the syntactic structure and idiomatic expressions of English. In order to effectively convey precautionary messages to drug users, an enhanced version could be formulated as follows: "Take more rest and avoid raw, cold and greasy food after taking the medicine."

Example 8: 肝功能异常者应在医师指导下使用，用药期间应监测肝功能。

English version: Patients with abnormal liver function should be taken under the guidance of doctor, and liver function should be monitored during medication. The first clause in the source text lacks an object, while the second clause lacks a subject. In the English version, the core of the sentence is "Patients should be taken...", which may evoke horror among readers. Such mistakes should be completely avoided. According to Paxlovid’s Patient Information Leaflet (2022) approved for the Malaysian market, "hepatic impairment" refers specifically to abnormal liver function. Additionally, healthcare provider is a more professional title than doctor in general. By balancing sentence structure and incorporating
professional terminologies, an improved version could be: "Patients with hepatic impairment should receive this medication under the guidance of their healthcare providers, with regular monitoring of liver function during treatment."

Conclusion
The integrated approach offers a fresh perspective on the translation of CPM package inserts into English, by identifying crucial textual features and areas of linguistics that are relevant for effective translation from macro to micro levels. Both CPM and Western drug formats demonstrate consistency with each other. Terminologies embedded with TCM culture and philosophy pose significant barriers to overcome in translation, while strategies are classified lexically and syntactically, encompassing transliteration, borrowing, and calque. The utilization of authorized reference tools, both domestically and internationally, is crucial for terminology translation. To enhance the accuracy of pattern sentence translation, a comparative analysis is presented using data from the peer package insert of Paxlovid approved in Malaysia. Additionally, this paper proposes suggestions for lexical and syntactic errors and presents modifications accordingly. However, it is important to acknowledge that the data is limited to only two respiratory CPM package inserts and one leaflet of western medicine Paxlovid. Further textual analysis may reveal additional linguistic characteristics and inform translation strategies. This study aims to shed light on future research related to CPM related translation and contribute towards standardizing package inserts.
Reference


