

THE LANGUAGE OF MEDICAL SCIENCE IN THE MODERN WORLD: ORIGIN, PROCESS AND TERMINOLOGY

Nasirdinova Yorkina Abdumukhtarovna

PhD, associate professor Andijan branch of Kokand University

Faculty of Medicine Department of Natural and Medical Sciences

Abstract: The field of clinical science depends vigorously on exact phrasing to proficiently impart complex thoughts and guarantee precise comprehension between specialists. The language of medication has developed fundamentally over the long run through a cautious course of normalization to portray new disclosures and medicines. This article will analyze the beginning and advancement of clinical phrasing, investigate how new terms enter normal utilization, and talk about a few vital viewpoints and elements of this particular language in the present globalized universe of medical services.

Keywords: Globalization, developing era, medical science, technology, advancements, new terms.

Introduction: There is no perceived discipline called clinical phonetics, however maybe there should be one. The language of medication offers charming difficulties both to clinical history specialists and to etymologists. Old style researchers have examined the items and language of the most antiquated clinical records exhaustively, yet the later improvement of clinical wording has gotten considerably less consideration.

The most seasoned composed wellsprings of western medication are the Hippocratic works from the fifth and fourth hundreds of years bc, which cover all parts of medication around then and contain various clinical terms. This was the start of the Greek time of the language of medication, which endured even after the Roman success, since the Romans, who had no comparative clinical custom, imported Greek medication. A large portion of the specialists rehearsing in the Roman Domain were Greek, and the works by Galen of Pergamum, from the second century promotion, were for a really long time esteemed as profoundly as the Hippocratic ones. Our Greek heritage involves various names of infections and side effects, like catarrh (downflow), looseness of the bowels (throughflow), dyspnea (terrible breathing), melancholic (relating to dark bile) and podagra (a foot trap).

Greek era

Toward the start of the main century promotion, when Greek was as yet the language of medication in the Roman world, a significant improvement occurred. Around then a Roman blue-blood from Narbonne's (presently Narbonne in the South of France) by the name of Aulus Cornelius Celsus composed *De Medicine*, which was an all-encompassing outline of clinical information in view of Greek sources. He is at times called *Cicero medico rum* (the Cicero of specialists) by virtue of his rich Latin. Celsus confronted the trouble that most Greek clinical terms had no Latin reciprocals, and how he tackled this issue is of extensive interest according to an etymological perspective. In the first place, he imported a couple of Greek terms straightforwardly, in any event, saving their Greek linguistic endings. He included, for example, the Greek words pylorus (presently pylorus) and eileos (presently ileus), composed with Greek letters in his Latin message.

Besides, he latinized Greek words, thinking of them with Latin letters and supplanting Greek endings by Latin ones — for example stomachus and brachium. Thirdly, and in particular, he held the striking symbolism of the Greek physical wording by making an interpretation of Greek terms into Latin, for example, dentes canini from Greek kynodontes (canine teeth) and caecum from Greek typhlon (the visually impaired [gut]).

In this way, we can in any case partake in the old Greek practice of comparing the state of physical designs to, for example, instruments (for example tuba=trumpet, tibia= woodwind), protection (thorax=breastplate, galea=helmet), instruments (fibula=needle, falx=sickle), plants (uvea=grape, glans=oak seed) and creatures (helix=snail, concha=mussel, musculus= mouse, tragus=goat so named in light of the fact that that piece of the outside ear might be covered with hair, looking like the tuft on a goat's jaw). A portion of these words are the first Greek ones, while others are Latin counterparts presented by Celsus and his replacements.

Latin language

During the Medieval times a third language acquired significance as large numbers of the old style Greek clinical tests were converted into Arabic. Researchers from the Middle Easterner world likewise made unique commitments to clinical writing, and a couple of Arabic terms (for example nucha) tracked down their direction into western medication. Be that as it may, at the hour of the renaissance, when Greek was not generally broadly perceived, both Greek and Arabic works were converted into Latin, and the time of clinical Latin started.

Celsus' De Medicina showed up on paper as soon as 1478, years and years after the presentation of the print machine, and it was trailed by Latin versions of Galen. During the ensuing hundreds of years practically exceptionally significant clinical works were distributed in Latin (for example those by Vesalius, Harvey and Sydenham); the clinical jargon extended yet fundamentally didn't change. Clinical Latin kept on being customary Latin with the admixture of various Greek and Latin clinical terms. Slowly, nonetheless, the public dialects made progress to the detriment of Latin, and in England William Heberden's Commentarii was presumably the last eminent clinical work to be written in Latin. It showed up in 1802 and Dr Johnson alluded to the creator as ultimus Romanorum (the remainder of the Romans). In different nations clinical Latin endure somewhat longer: in Denmark, medical clinic specialists composed patients' notes in Latin until 1853.

Public Clinical Dialects

Then, at that point, followed the period of the public clinical dialects, like clinical English (for example standard English with the admixture of clinical terms), clinical French, clinical German, clinical Italian and numerous others. A couple of these, particularly French, German and English, traded Latin as vehicles for global correspondence, however a large portion of the others were just utilized broadly. The public clinical dialects shared a lot of practically speaking since a large portion of the clinical terms were gotten from clinical Latin, yet there were precise contrasts that actually endure.

In Germanic dialects, for example, the German, Dutch and Scandinavian ones, physical terms and sickness names are frequently imported straightforwardly with their right Latin endings, for example nervus musculocutaneous and ulcus ventriculi, while similar terms in Sentiment dialects are generally 'naturalized' as per the standards of every specific language, for example le nerf musculo-cutané and ulcère gastrique in French, and il nervo musculocutaneo and ulcera gastrica in Italian. English is a Germanic language yet a portion of its jargon is of Sentiment beginning, and clinical English will in general follow the Sentiment design besides in putting the descriptor before the thing, for example the musculocutaneous nerve and gastric ulcer. In Slav dialects it is standard to decipher the terms, for example Russian kozhno-myzhechny nerv ('skin-muscle nerve') and jasva zheludka ('ulcer of stomach').

Current Greek is essential in permitting just Greek terms, including large numbers of those that Celsus converted into Latin two centuries prior. The musculocutaneous nerve, for example, is to myodermatiko neuro. Be that as it may, the differentiation depicted here between a Germanic, a Sentiment and a Slav example is something like a propensity with various exemptions. English-speaking specialists additionally acknowledge direct credits with Latin endings (for example medulla oblongata

and diabetes mellitus), and German specialists might naturalize the Latin expressions (for example Coronararterien for arteriae coronariae) or make an interpretation of them into German.

Today, every one of the most persuasive clinical diaries are written in English, and English has turned into the language of decision at worldwide meetings. We have entered the time of clinical English, which looks like the period of clinical Latin in that, by and by, clinical specialists have picked a solitary language for worldwide correspondence.

While in previous times new clinical terms were gotten from traditional Greek or Latin roots, presently they are frequently, somewhat or entirely, made out of words acquired from common English — for example sidestep activity, freedom, base overabundance, screening, filtering — and specialists from non-English-speaking nations presently have the decision between bringing in these English expressions straightforwardly and making an interpretation of them into their own language. The term sidestep, for example, is acknowledged in German, Dutch, Scandinavian, Italian and Romanian, though the French, who don't incline toward anglicisms, made an interpretation of it to pontage.

The Shafts picked pomostowanie, which has a similar significance as pontage (most being an extension), and the Russians use shuntirovanie, which is simply one more anglicism, being gotten from English shunt. Naturalization of the English words is additionally very normal in certain dialects: in Danish, we utilize the action words at screene and at skanne (to screen and to filter). English abbreviations, for example, Helps, CT, MR and PCR present the trouble that typically the initials at this point not fit when the English expression is deciphered, yet, generally speaking, such inconsistencies are essentially disregarded. Helps, for example, is generally acknowledged and has nearly turned into a thing by its own doing, however in French and Spanish it is SIDA and in Russian SPID, mirroring the request for the same words in these dialects.

For etymologists the language of medication is entrancing for the progression of ideas and words starting with one tongue then onto the next. For clinical specialists, an enthusiasm for the set of experiences and unique significance of words offers another aspect to their expert language.

Conclusion: From its underlying foundations in antiquated texts to the present all around the world composed process, the language of clinical science has advanced immensely yet held center qualities. Through cautious normalization of new terms, it satisfies crucial elements of exact correspondence, association of information, and distinguishing proof as an observational discipline. The specific phrasing represents medication's equilibrium of custom, advancement and overall collaboration in the consistent quest for better treatment, counteraction and comprehension of human science.

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