A Survey of Researches in Medical Workers' Language

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1. The duty of medical workers is to prevent and cure diseases. This special profession makes it possible that the language of medical workers is not only a medium of communication with patients, but also a most important tool for medical treatment. Recent study and development of medical psychology have proved that medical workers' language can affect the physiological reaction of patients; And the cerebral cortex of patients can be stimulated by different words of medical workers. Suitable words can not only give patients much warmness and a feeling of being at home, prevent them from mental collapse, help them to be confident of getting rid of illness, and encourage them to give full cooperation with medical workers. It can also be of great use to bring every factor of patients' organism into play, to strengthen patients' resistance to disease and to let organism enter the best state for treatment.

On the contrary, unsuitable words often cause harmful stimuli to patients, making them get angry, worried, hopeless, even causing patients' condition from bad to worse. For example, a patient who had got an incurable disease had been in hospital for several months and was quite eager to go home. One day he asked a young nurse when he could recover and be able to leave hospital. The nurse answered: "You should be patient and not be so eager to look forward to leaving, as there has been no one who lived in this isolation ward to leave it alive before." On hearing this, the patient got entirely disappointed and committed suicide by jumping from a tall building that night.

In the medical history of both China and abroad, there are a lot of examples that medical workers' language helps patients to recover from illness or causes sickness from bad to worse. Almost all medical workers have such experiences as being embarrassed or troubled primarily because of language. Sometimes they speak to patients with good intentions but get the opposite results. Sometimes the same words are understood and responded to variously by different kinds (age, sex, character, profession, educational level etc.) of patients. Even in some cases patients
committed suicide on hearing improper words from doctors.

Take Michael Faraday, a well-known British chemist, for example. It was said when he was young, he often overworked himself and gradually got a bad neurasthenia. After a long period of treatment, there was only little curative effect. Later a famous doctor was sent for. Taking a thorough examination and a detailed inquiry, the doctor did not give any prescription but only a few words "A clown's playing is better than a dozen of doctors". M. Faraday considered the doctor's words carefully and soon got to know the implied meaning of the words. From then on, he tried to strike a proper balance between work and rest, often going to seashore and the outskirts for holidays, watching circuses, comedies and funny performances, and always keeping himself happy. In this way he soon got fully recovered.

Another example is that while a Russian physician was going the rounds of the wards, he didn't stop before the bed of a supposed cancer patient and told his followers in Latin: "This is a case of fatal sickness." The physician thought the patient didn't know Latin and could not understand what he said. But, unfortunately, his extra-ordinary behavior had already revealed that there must be something unusual about the patient's illness. Hence the patient became more suspicious and tried to find out the secret. Not long after he got the real reason did the patient commit suicide. But when his body was dissected, no malignant tumour was found at all. What a pity.

From all these we can see the special function of language in medical treatment. Just as it was said by Zhang Shiwan, a famous doctor in Qing Dynasty: "A doctor should pay much attention to his speaking and behavior as well as to his medical skill. Only in this way could he hope to win the trust, the cooperation from patients and to make success in his medical practice." An ancient Greek doctor Hippocrates, Father of Medicine, has also strongly pointed out: "A doctor has two tools to cure diseases; one is medicine, the other is language." It is thus clear that a qualified doctor in modern society should have not only skillful medical technique, but also excellent proficiency and mastery of arts for speech communication with patients.

2. However, patients come from a wide variety of background, including men and women, old and young, workers and farmers, etc. When they go to doctor, they may have various kinds of intentions, requirements or purposes. Some may really want to seek for medical
service; some may only hope to have a thorough examination to prevent sickness; some may just hope to have a talk with doctors about the troubles in their families, the problems in their work, even the difficulties in their love affairs, in order to win the sympathy of doctors and get psychological satisfaction; ......to name only a few. These different intentions must affect their desires and requirements. How to find out patients' real intentions and take effective measures to help them are often the difficulties for medical workers in their work.

There is a well-known saying by Hippocrates,"It is more important to make it clear what kind of persons falls sick than to know what disease he gets. "This viewpoint implies the close relation of social factors with disease and the necessity for doctors to seek the connection of patients' background to their diseases and their exact purposes of seeing doctors. But whether a doctor can find out patients' real demands or not mostly depends on whether the patients are willing to reveal their innermost feelings. However, if a doctor want to induce a patient to speak out what he thinks, he must pay more attention to his speaking and behavior during the interviews with the patient. We know that language is the main medium of communication between doctors and patients. People often say: "If you drink with a bosom friend, a thousand cups are too few; if you argue with a man, half a sentence is too much." That is quite similar to doctor-patient interviews. If doctors can use language in accordance with different characteristics and psychological requirements of patients, the interviews will probably be very pleasant and smooth. Generally speaking, pleasant interviews often make patients be happy and become confident in doctors. Once patients place confidence in doctors, they will be willing to pour out their hearts and give cooperation. Through proper interviews, doctors can obtain sufficient information about patients' intentions, anxiety, troubles or sickness and then take effective measures to treat them. Otherwise, unpleasant interviews often give patients ill feelings, then they would probably conceal their innermost feelings and put no trust in the doctors. It is needless to say that without a good master of what patients are feeling and thinking, without patients' energetic cooperation, doctors can by no means hope to find out effective measures to treat the patients. So, language is like a tie to link up the hearts of doctors and patients and play an important part both in their communication and in medical treatment.

The various kinds of characteristics of patients
will surely affect their linguistic competence. As the saying goes: "The writing mirrors the writer and it is the same the other way round." That is to say, from one's speaking we can judge his age, profession, character and educational level. And in turn, one's age, profession, character and educational level certainly confine his competence of speaking and understanding. Sometimes the same words are comprehended quite differently by different patients. For instance, when a doctor told a woman farmer: "You are lacking in calcium", the patient felt puzzled and explained promptly: "Why? It is not possible. I always cover my body well with quilt while sleeping." The reason of her misunderstanding was partly because of her educational level, as the pronunciation of the word "calcium" in Chinese sounds "gai", which is quite same with that of the word "to cover with something (gai)".

Different kinds of patients often have different kinds of characters, and patients of different characters always have different ways of expressing their demands and requirements. Generally, the aged patients often have a strong desire to be respected and to control others. They like to use imperative sentences themselves, but dislike medical workers to use the same mood to them. Farmer patients in general lack in good education. They often have difficulties to express their thought and desire quite exactly. Instead of being in a frank way, female patients always express their demands with some reservation. But intellectual patients often hope to play a part in making the plans for their treatment. So medical workers should know something about the differences of linguistic competence and the characteristics of speaking of different patients.

Another chief factor that causes barriers in speech communication is the difference of cultures, as different cultures often have different customs and idiomatic ways to express the same things. When an Englishman says "I have a stomachache", he may not exactly mean he has a stomach trouble. In some cases he may mean there is some trouble in his abdomen. However, in Chinese, there is a distinction between the phrases "to have a stomachache "and" to have an ache in abdomen". Only when young women want to express the ache in abdomen mildly would they say "to have a stomachache". But in the dialect of Sichuan Province of China, the expression is very interesting and exceptional. No matter inner surface part of belly suffers pain, the people there would say "wo de du pi teng" which means "to have a pain in the skin of abdomen". Therefore, medical workers should pay