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BOOK OF ABSTRACTS

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INCLUSIVITY AND DIVERSITY IN HEALTHCARE COMMUNICATION
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PATIENT NARRATIVES IN LANGUAGE TEACHING: A PATHWAY TO INCLUSIVE HEALTHCARE COMMUNICATION

Abstract:
Teaching French as a foreign language to medical students presents an opportunity to integrate the concepts of narrative medicine in order to develop linguistic and cultural competencies. Patient narratives, as authentic representations of their experiences, facilitate the learning of empathetic and inclusive communication. This study explores the potential of narrative medicine and intercultural communication theories within courses designed for specific purposes (in this case, medical French), focusing on a group of students aiming to participate in internships or pursue specialization in francophone hospitals during or after their university studies.
The study is in an exploratory phase, with objectives, including improving French communication skills through simulations based on real cases (rooted in patient stories), fostering empathy and intercultural abilities via medical story analysis, and creating an educational model grounded in inclusion and diversity. The aim is to examine how authentic and simulated narratives of patients from diverse francophone communities (immigrants, marginalized groups, among others) can be integrated into medical education. To date, activities conducted include narrative analysis, simulations, and guided reflection sessions designed to support the development of students' linguistic and cultural skills, as well as identifying communication barriers and addressing them through empathetic solutions.
Preliminary findings suggest an increase in intercultural sensitivity and a greater ability among students to adapt language use to diverse patient contexts. Observations from the activities carried out so far indicate heightened awareness of cultural diversity and promising development of empathetic communication skills. These insights provide a foundation for further exploration of the role of narrative medicine in teaching French to medical students.
Conclusion:
The study highlights the potential of narrative medicine in teaching French to medical students, suggesting that this approach could contribute to the development of linguistic and cultural competencies. While preliminary results are promising, further exploration and refinement of this model are essential to validate its relevance in medical education.

Methodology
Participants: 20 medical students enrolled in a specialized medical French course selected based on their intermediate level of proficiency in French (B1/B2 on the CEFR) and their interest in pursuing internships in francophone healthcare institutions.
Patient narratives: authentic narratives were sourced from publicly available health archives, anonymized patient interviews and documented experiences from diverse francophone communities. These stories represent patients from various sociocultural backgrounds, including immigrants, elderly individuals, marginalized groups and include specific challenges: cultural misunderstandings and differing health beliefs.
The study involves three key stages:
1.   patient narrative analysis in order to identify key cultural and linguistic challenges relevant

to medical interactions;

2.   simulations and role-playing: allow students to practice medical consultations, emphasizing empathetic and culturally sensitive communication strategies;

3.   reflection and feedback: students examine their communication approaches, identify barriers and propose solutions.

The study uses a mixed-methods approach to measure outcomes. Quantitative data are gathered through pre- and post-course surveys assessing linguistic proficiency (focused on medical terminology and patient interaction) and intercultural sensitivity using validated scales. Qualitative data include student essays, observations, and group reflections.

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PATIENT-DIRECTED POLITENESS STRATEGY PREFERENCES IN CLINICAL VISITS SETTING IN KUWAIT

Keywords:
patient-directed speech, Kuwaiti Arabic, linguistic-politeness strategies, general practitioner (GP), age and gender

Abstract:
The vital context of doctor–patient communication is being abundantly researched to improve its outcomes. However, existing studies either focus on the doctor's perspective and pay little attention to the patient or focus on patients' satisfaction in relation to biomedical aspects, such as the doctors' clinical skills and the services provided in the healthcare institution. Research focusing on doctors' communicative skills provides a generalized discussion, under friendly attitude and communication style, lacking affiliation to a language-related theory. The current study investigates patients' politeness perceptions of utterances produced by general practitioner (GP) doctors elicited in a previous study (Alduaij et al., 2024a, 2024b) in clinical visits setting in Kuwait. Using a multiple-choice questionnaire, it assesses the preferences of a large sample of 848 Kuwaiti patients in relation to three linguistic politeness strategies: direct, positive-politeness, and negative-politeness, as delineated in Brown and Levinson's renowned politeness theory (1987). The current study further investigates the effect of sociolinguistic variables such as age and gender on patients' preferences. Overall, patients preferred negative politeness in situations where the doctor instructs, proposes a referral visit, delivers potentially worrying news, or proposes changes to patient's care plan. In situations requiring medical advice or psychological support, the patients preferred positive politeness. The direct approach was relatively least preferred.

References:
· Alduaij, N., Almuoseb, A., & Alotaibi, B. (2024a). Uncovering linguistic strategies in Kuwaiti doctor's patient-directed communication. *Theory and Practice in Language Studies, 14*(11), 3332–3346.
· Alduaij, N., Almuoseb, A., & Alsharhan, E. (2024b). Patient-directed politeness strategy preferences in clinical visits setting in Kuwait. *Forum for Linguistic Studies, 6*(5).
· Brown, P., & Levinson, S. (1987). *Politeness: Some Universals in Language Usage*. CUP.

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DDL & GenAI: Teaching Dental Collocations Through Task-Based and Communicative Approaches

Keywords:
collocational competence, ChatGPT, corpus-assisted language learning, dentistry, English for Specific Purposes (ESP)

Abstract:
Corpus-assisted data-driven learning (DDL) has been used for more than 20 years in order to "promote language acquisition through exposure to the frequency and salience of patterns of language in use, whether individually through constructivist learning, or socioculturally when used in classroom contexts as learners, peers and teachers complete scaffolded activities involving corpus data (O'Keeffe, 2021)" (Crosthwaite & Baisa, 2023: 1–2). For the purposes of maximising classroom convenience and ensuring smooth implementation of corpus-based in-class activities, a need has arisen to merge DDL and GenAI to remove potential impediments such as learners' lack of technical know-how, inadequate user interfaces and/or corpus data, no options for monitoring learners' progress (Crosthwaite & Baisa, 2023: 3).
Therefore, the current study focuses on how such methodological synergy may turn beneficial in terms of enabling research-backed and corpus-informed language practice to students of dental medicine at a tertiary level. Drawing on our corpus analysis of 419 dental research abstracts conducted using AntCorGen and Sketch Engine software tools, the presentation provides practical implications of using evidence-based collocational input to create ChatGPT-powered exercises for task-based and communicative teaching of collocations that align with Bloom's Taxonomy Cognitive Domain Model (Bloom et al., 1956; Anderson & Krathwohl, 2001; as cited in Ka Yuk Chan and Colloton, 2024). In this manner, collocations can be practised at different levels of cognitive complexity (remembering, understanding, applying, analysing, evaluating, and creating), which is expected to facilitate the overall improvement of dental terminology, and language and higher-order thinking skills.

References:
· Chan, C. K. Y., & Colloton, T. (2024). Generative AI in Higher Education: The ChatGPT Effect. Routledge.
· Crosthwaite, P., & Baisa, V. (2023). Generative AI and the end of corpus-assisted data-driven learning? Not so fast!. *Applied Corpus Linguistics,* 3(3), 100066.

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A GENDERED ANALYSIS OF INTERPERSONAL GRAMMATICAL METAPHOR IN HISTORICAL MEDICAL WRITING

Keywords:
interpersonal grammatical metaphor, medical discourse, gender, historical linguistics, corpus analysis, Systemic Functional Linguistics (SFL)

Abstract:
Medical technical discourse has long been a site of negotiation between authoritative knowledge and patient engagement, with interpersonal grammatical metaphor (IGM) playing a key role in shaping communicative strategies (Halliday & Matthiessen, 2014). Although considerable study has investigated grammatical metaphor in scientific literature, limited studies have addressed its interpersonal uses in historical medical discourse (Taavitsainen & Pahta, 2011), especially from a gendered viewpoint. This study fills this gap by examining IGM in 18th- and 19th-century medical texts inside the Corpus of Women's Instructive Texts in English (CoWITE) and a corresponding comparable compilation of male-authored medical texts, used as a reference corpus.
This study used Systemic Functional Linguistics as an analytical framework to examine how male and female authors employed IGM to establish authority and convey modality in technical specialised texts in written interaction (Martin & White, 2005). The analysis is expected to reveal significant gender differences: female-authored texts use more metaphorical realisations of obligation and possibility (e.g., "it is necessary to consider" vs. "one must consider"), implying a greater emphasis on involvement and indirect persuasion (Wodak, 1997) to avoid potential criticism in a male-dominated discipline. Male-authored texts, on the other hand, tend to favour less hedged statements, maintaining the disparity in medical authority.
The findings seek to add to our knowledge of interpersonal positioning in historical medical discourse by indicating that gender influenced the linguistic strategies used to engage with patients and fellow practitioners. This study has implications for both historical sociolinguistics and the evolution of professional medical communication and wants to demonstrate the long-term impact of gendered discourse patterns on medical authority and reader- and user-centered discourse.

References:
· Halliday, M. A. K., & Matthiessen, C. M. I. M. (2014). *Halliday's Introduction to Functional Grammar* (4th ed.). Routledge.
· Martin, J. R., & White, P. R. R. (2005). *The Language of Evaluation: Appraisal in English.* Palgrave Macmillan.
· Taavitsainen, I., & Pahta, P. (2011). *Medical Writing in Early Modern English.* Cambridge University Press.
· Wodak, R. (1997). *Disorders of Discourse.* Longman.

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GENDER DIFFERENCES IN THE FORM AND USE OF BOOSTERS AND DOWNTONERS IN 18TH AND 19TH CENTURY MEDICAL INSTRUCTIONAL TEXTS

Keywords:
boosters, downtoners, medical discourse, gender, corpus linguistics, stance analysis, historical linguistics, metadiscourse

Abstract:
Medical writing in Late Modern English (1700–1899) reflects evolving rhetorical strategies for establishing authority, particularly through boosters (e.g., certainly, undoubtedly) and downtoners (e.g., perhaps, somewhat). While Hyland's (2005) model of stance and metadiscourse has been extensively applied to modern academic writing, its role in historical medical discourse—especially from a gendered perspective—remains underexplored. This study examines the use of boosters and downtoners in the 18th- and 19th-century sections of the Corpus of Women's Instructive Texts in English (CoWITE), comparing them to a reference corpus of male-authored medical texts.

Through a corpus-based analysis of stance markers, this study reveals distinct gendered rhetorical strategies. Female writers tend to use downtoners more frequently, softening assertions and introducing epistemic caution ('it may be beneficial to consider...'), a strategy in line with broader patterns of politeness and reader engagement (Hyland, 1998). In contrast, male-authored texts show a preference for boosters, reinforcing certainty and medical authority ('it is unquestionably the best method...'), positioning the writer as a more authoritative voice (Hyland, 2005). These results suggest that women writers managed credibility differently, often adopting mitigative strategies to balance expertise with social expectations.

This study seeks to contribute to historical research on gendered persuasion in medical technical discourse, highlighting how linguistic choices reflected epistemic authority, professional boundaries, and engagement with readers and peers. Findings offer new insights into the historical evolution of medical communication, informing both diachronic studies of metadiscourse and gendered professional rhetoric.

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THE PROBLEMS OF MEDICAL TRANSLATION AND INTERPRETATION IN HEALTH SECTOR: A COMPARATIVE STUDY BETWEEN ARABIC AND ENGLISH

Abstract:
This research tackles the translation problems in the medical sector between Arabic and English. It is a contrastive study that sheds light on the translation and interpretation mistakes in the medical texts between these two languages.
The documents and texts are medical reports and receipts written in Arabic and English.
The methodology is a translation error analysis in Arabic and English. The author presents common incorrect translation committed by translators and gives correct translation solutions. These mistakes are analyzed and categorized into three semantic groups.
The translation strategies identified in the medical texts through the process of translation are direct translation, transliteration, paraphrasing and footnotes. The author recommends a semantically unambiguous medical dictionary that can be used in the Arab region where it is in lack of this type of dictionaries. In conclusion, the translators and interpreters must have background knowledge in medicine and must be aware of the fixed terminologies to fend off the serious mistakes.

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INTERPRETING PAIN: A COMPARATIVE STUDY OF INTERPRETERS' AND HEALTHCARE PROVIDERS' UNDERSTANDING OF PAIN EXPRESSION

Abstract:
Cultural background is a key component in the way patients express pain and seek treatment for it, since different cultures hold particular beliefs on the origin of pain and may experience different inhibitions to express it and cope with it. These variations affect the diagnosis and treatment of pain for migrant patients, compromising their access to equal healthcare provision and proper care.

Within this context, the following research analyses the pain expression patterns of the migrant population and compares them with the experiences of healthcare providers when dealing with patients of different cultural backgrounds. A cross-sectional comparative study will be conducted using two questionnaires aimed at healthcare interpreters (n=25-30) and healthcare providers (n=25-30) from various departments of a public Spanish hospital. By using two different surveys, we aim to determine the subtleties of pain expression identified by interpreters, as well as the cultural competence healthcare providers have when dealing with pain communication. The questionnaire will assess verbal and non-verbal pain communication, cultural interpretations of pain severity and other expressive patterns in the Arab, Chinese, Sub-Saharan, and East-European cultures. Data analysis will focus on identifying the knowledge gaps between the interpreting experience and the cultural competence of healthcare workers.

This study will contribute to enhance cross-cultural pain assessment through the creation of culturally sensitive pain assessment tools, and it hopes to improve healthcare providers' cultural competence in pain management. Additionally, this type of interdisciplinary work will also increase interpreting skills by considering real experiences in the healthcare contexts, which ultimately would lead to a higher quality healthcare provision across cultures.

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TRANSLATION AND ANALYZING SHORT EXCERPTS OF LATIN MEDICAL TEXTS AS LEARNING ACTIVITY FOR MEDICINE STUDENTS

Keywords:
Latin, medical texts, translation, learning activity, medical terminology

Abstract:
Teaching and studying Latin for medical purposes could be an exhausting and difficult process for both the lecturer and the students, unless it is facilitated by the usage of different didactic methods and techniques.

The present article describes the idea of an optional course, designed to supplement and enrich the knowledge acquired by medicine students during their first year of study. It could be used as an optional upgrading course from the second semester of the first year, but its appropriate place in the curriculum and the greatest benefit from its conducting are in the second year of studies and/or later. The learning material is variable and upgradable, which is convenient if the course must be adapted to various target groups.

The main learning activity planned is the translation and analysis of short excerpts from Latin medical texts from Antiquity to the end of the 18th century. Additionally, there are discussions and individual assignments provided, related to the historical and cultural context of the texts. These excerpts have been selected for their brevity and level of difficulty for the students and are not necessarily arranged in chronological order. The aim of the project is rather to provide students with a variety of sources that reflect different medical concepts over the centuries and thus to help them acquire an additional knowledge of the history of medicine.

At the end of the course, the students should prepare their own presentations using a brief text from authors they have already read or select a suitable excerpt from an author of their choice. In this way, the study of Latin by medical students will not only be strictly focused on the utilitarian goal of mastering anatomical and clinical terminology but will have the added value of cultural and historical knowledge of medicine as a science.

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THE ROLE OF NARRATIVE MEDICINE IN APHASIA REHABILITATION AND AWARENESS: A CORPUS-BASED STUDY

Keywords:
corpus analysis, narrative medicine, aphasia, communication disorders, story telling

Abstract:
This study centres on the application of a narrative-medicine (NM) based approach (Charon, 2001) in aphasia rehabilitation, as a tool that allows speech therapists to reflect on their professional role on one hand and empowers patients and caregivers to raise public awareness of aphasia on the other. In people living with aphasia (PLWA), the abilities to speak, understand language, read and write are impaired to varying degrees (Rose et al., 2021). So, in addition to the complex factors at play in healthcare communication, aphasia affects the performance of the most basic task in medical interviews: expressing how one feels to the doctor. Besides, although this communication disorder affects about 15 million people worldwide (Ivanova, 2022) and specific patient-reported outcome measures (e.g. AIQ by Swinburn et al., 2023) are designed to assess the quality of life of PLWA, awareness of the issue is still low according to a recent international survey (Bennington et al., 2024).

In this project, 135 aphasia stories collected by the American Aphasia Association (AAA) were analysed in a corpus-based study. Besides, a thematic analysis approach (Braun & Clarke, 2006) supported research on the figurative language used in these stories to describe aphasia experiences and the speech therapists' efforts to address the communication challenges aphasia poses to their job. The study reveals the misconceptions and stigma that PWLA and their caregivers have to face in social interactions, as well as the limits and potential of therapeutic pathways. The narrative prompts designed for PWLA, professionals and caregivers involved in this project may inspire NM practices in other medical areas.

References:
· Bennington, C., Shiggins, C., Isaksen, J., Beesley, E., Beesley, K., & Wallace, S. J. (2024). What does it mean to be aphasia aware? An international survey of stakeholder perspectives and experiences of aphasia awareness. *Aphasiology, 38*(12), 1916–1939. https://doi.org/10.1080/02687038.2024.2330145
· Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa
· Charon, R. (2001) Narrative Medicine: A Model for Empathy, Reflection, Profession, and Trust. *JAMA 286*(15):1897–1902. doi:10.1001/jama.286.15.1897
· Fioretti, C., Mazzocco, K., Riva, S., Oliveri, S., Masiero, M., & Pravettoni, G. (2016). Research studies on patients' illness experience using the Narrative Medicine approach: a systematic review. *BMJ open*, 6(7), e011220. https://doi.org/10.1136/bmjopen-2016-011220
· Ivanova, M. V., & Dronkers, N. F. (2022). Aphasia: how our language system can "break". *Frontiers for young minds*, *10*, 626477. https://doi.org/10.3389/frym.2022.626477
· Rose, M. L., Pierce, J. E., Scharp, V. L., Off, C. A., Babbitt, E. M., Griffin-Musick, J. R., & Cherney, L. R. (2021). Developments in the application of Intensive Comprehensive Aphasia Programs: an international survey of practice. *Disability and Rehabilitation*, *44*(20), 5863–5877. https://doi.org/10.1080/09638288.2021.1948621
· Swinburn, K., Porter, G., Howard, D. (2023). *Comprehensive Aphasia Test*, Routledge.

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META LLAMA 3.3 70B PASSES HUNGARIAN MEDICAL FINAL EXAM

Keywords:
artificial intelligence, large language model, medical examination, llama, English

Abstract:
Theoretical background
The rapidly advancing large language models (LLMs) can generate human-like texts and create the impression of real intelligence bringing a revolutionary shift across various fields, including medicine. Since the ChatGPT-3 model became the first to successfully pass the USMLE exam, surpassing the average human performance, LLMs have demonstrated their advanced capabilities in various medical exam settings. Alongside these remarkable achievements, however, their limitations have also become evident, including inaccuracies in responses and linguistic biases, which pose challenges in their medical applications.
To date, no research has been reported on the application of LLMs in medical examinations in Hungary.
Research methods and materials
We evaluated the capabilities of the open-source Meta Llama 3.3 70B model on the English version of the Hungarian medical final exam tests from May 2024. Each question was tested without prompts, as a separate conversation, and in an independent context. The model answered 157 of 180 questions and declined to answer 23 questions.

Results
Meta Llama 3.3 70B model provided correct answers to 119 out of 180 questions (66.1%) successfully passing the exam. However, this score was below the average performance of medical students.
Discussion
In this study, we were the first to demonstrate that a large language model is capable of passing the Hungarian medical final exam. Our future plans include evaluating the performance of multiple models not only on the English version but also on the Hungarian and German test versions.

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ACHIEVING UNDERSTANDING: A COMPARISON OF THE INTERVIEWING STYLES OF ENGLISH L1 AND TAMIL L1 PSYCHIATRIC NURSES IN THE UK NATIONAL HEALTH SERVICE

Abstract:
Due to global migration, many nurses work in situations where their language of work is not their mother tongue. Since language barriers can increase risk of burnout and potentially impact patient care, language support for migrant nurses is thought to improve outcomes for nurses, patients and employers. Yet there is little empirical linguistic research to underpin such support. Addressing this gap, the present study uses sociolinguistic methods to compare discourse strategies of native and non-native speaker nurses in healthcare communication.

Three native speakers of English and three of Tamil, all psychiatric nurses practising in the UK, participated individually in a simulated interview in English with a patient's relative, played by an actor. They were matched for age, sex and length of nursing experience, but had trained in the UK and India, respectively. The nurses' conversational turns were categorised and analysed for quantitative differences between the two groups, then explored in follow-up discussions with them using stimulated introspective recall.

The English speakers used significantly more metadiscursive comments e.g. 'I'm going to ask a question', while the Tamil speakers volunteered significantly more information about treatment. The English speakers asked more questions, but there was a more significant difference in the types of question asked: the Tamil speakers asked for clarification, while the English speakers asked questions to encourage elaboration.

The variation in discourse between the groups can be partly attributed to cultural differences. But it also reflects a need of non-native speaker professionals to carefully control the conversation and avoid eliciting large amounts of unconstrained information, which might be difficult to understand. Language support would usefully include training in listening comprehension strategies and active listening.

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Assisting Individuals with Hearing Impairment: Exploring PHONICSOFT, Speech Recognition Software in the Healthcare system

Keywords:
speech recognition software, clinical communication, patients' diversity, hearing impairment, text-to-speech

Abstract:
Globalization and migratory movements have had an impact on the way conversations between patients and healthcare providers, and communication in the medical field in general, take place (Brookes & Hunt, 2021). In the case of hearing impairment, there is a pressing need for Automatic Speech Recognition (ASR) technology that can expedite the transcription of medical appointments. Medical transcription originated in the early 20th century with stenographers. The adoption of single-speaker ASR technology became prevalent in the healthcare system around the mid1990s, facilitated by the proliferation of ASR and Natural Language Processing (NLP) technologies (Chiu et al., 2017). This study seeks to design and develop an app, PhonicSoft, for the improvement of clinical communication and the optimisation of medical treatments for patients with hearing impairment. The app is to be tested with a pre-selected group of patients with hypoacusis. The study, carried out in the Valencian Community, is concerned with the bilingual condition of the regional area, where both Spanish and Catalan are co-official languages and should be taken into consideration when developing the PhonicSoft software. Interviews will be conducted throughout the whole process to assess its weaknesses as well as the patients' satisfaction. Participation can contribute to improving and expanding the features of a beta version of the app. This ASR technology can be a tool applicable to other pathologies within hypoacusis, such as aphasia. Doctor-patient communication can be enhanced in clinical environments since it favors the progression of quality, the understanding and inclusion of patients with auditory functional diversity, both in the medical consultation, other clinical interventions, or environments.

References:
· Brookes, G., & Hunt, D. (2021). Discourse and Health Communication. In G. Brookes and D. Hunt (Eds.), *Analysing Health Communication: Discourse Approaches* (pp. 1–17). Palgrave.
· Chiu, C.-C., Tripathi, A., Chou, K., Co, C., Jaitly, N., Jaunzeikare, D., Kannan, A., Nguyen, P., Sak, H., Sankar, A., Tansuwan, J., Wan, N., Wu, Y., & Zhang, X. (2018). Speech Recognition for Medical Conversations. *Proc. Interspeech,* 2972–2976. doi: 10.21437/Interspeech.2018–40.

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Cognitive stimulation through reading strategies in people prone to Alzheimer's disease

Abstract:
Alzheimer's is recognized as one of the most significant health crises of the 21st century, it is part of the progressive brain syndromes that cause the deterioration over time of a variety of different brain functions such as: memory, thought, recognition, language, planning and personality. Due to its incidence on the quality of life of those who suffer from it, it has been verified that actions directed at people with a predisposition to Alzheimer's can be implemented to prevent or delay its appearance. The objective of this research is to use reading as a means to enhance the development of memory and its cognitive reserve in young people with a predisposition to Alzheimer's from the cast "Abel Santamaría Cuadrado" in Santiago de Cuba. Encouraging and maintaining the habit of reading has been found to help preserve the activity and cognitive functions of people with this condition. From the diagnosis applied to a sample of 15 young adults with a predisposition to Alzheimer's and the scientific observation, it was possible to know the insufficiencies in the cognitive processes of memory, and the presence of forgetfulness in the sphere of the intellectual that these subjects possessed. Theoretical and empirical methods, techniques and instruments were applied that allowed gathering the necessary information for the study. The research proposal focuses on the use of narrative texts and poetry books by national and foreign authors to improve memory reserve in young people with a predisposition to Alzheimer's. The proposal demonstrated that reading is an important tool for stimulating the capacities and memories of these people, that the tastes, preferences and needs and interests of the person with Alzheimer's must be taken into account, in order to make reading attractive to them. and even that allows them to remember vital aspects or emotions of their personal life.

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LANGUAGE BARRIERS IN ACCESSING MENTAL HEALTHCARE: A SPOTLIGHT ON LINGUISTIC CLARITY

Abstract:
Language barriers in mental healthcare for refugees and migrants manifest in two key ways: (1) the availability of interpreting services or technologies and (2) the clarity and accessibility of the language used in communication. While much attention is given to the first issue, the second—linguistic quality—remains underexplored. Refugees and migrants often rely on a second language, have lower literacy levels, or face cultural barriers. This paper draws on findings from the 3-year MHealth4All project (https://www.mhealth4all.eu/), in particular surveys and in-depth interviews with patients and healthcare providers, which have highlighted significant challenges related to understanding medical language, especially terminology, in mental healthcare communication. If communication is unclear, the risks of information loss, misunderstandings, and inadequate support increase significantly.

The objective of this paper is to overview initiatives and documents promoting clear and plain language, as well as generative artificial intelligence tools intended for language simplification and information visualization, in order to propose implications for policymaking in mental healthcare. For this purpose, content analysis will be used. Traditionally, plain language principles have been applied to legal and administrative contexts. We argue that plain language principles and user-centered designs are highly applicable to the mental health context and should be integrated in policymaking. Addressing not only the availability of language support but also linguistic quality of communication will improve accessibility and equity in mental healthcare services, particularly for vulnerable groups, such as refugees and migrants.

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The achievement of early palliative care through interaction: from internal interactional organization to phase shifts

Abstract:
The achievement of early palliative care through interaction: from internal interactional organization to phase shifts

Early palliative care (EPC) treatment for advanced cancer patients involves attending to five main objectives: symptoms management, building rapport, coping, deepening prognostic awareness (DPA) and acknowledging end of life (AEL) (Potenza et al. 2024). These objectives are distributed along three main phases in the EPC trajectory, which are marked by the achievement of three goals in particular: assessment of symptoms (initial EPC visits); assessment of patients' prognostic awareness (middle visits); end-of-life planning (final visits).
The challenging nature of these conversations has been addressed, and strategies have been devised to support clinicians in leading such conversations (e.g., Childers et al 2017). However, fewer studies rely on research on spoken language, in particular on insights from interaction and dialogue analysis. More specifically, it would be interesting to understand how EPC objectives are achieved interactionally: whether it is possible to observe recurrent interactional patterns in each phase, and if it possible to identify markers of phase-shifts in these conversations.

In our paper we present initial results from a study addressing these research questions through the qualitative analysis of a sample of transcripts of audio-recordings of EPC consultations. After identifying focal themes (Dall & Sarangi 2018) in visits distributed along the typical EPC patient journey, we focused on the interactional development of one specific theme for each phase, namely: the description of disease (first visits), the discussion of expectations about progression of illness (middle visits), talking about death and end of life (final visits). For each theme, we observed in particular the functions of questions and the use of other interactional phenomena such as disfluencies, figurative language and intentionally vague structures in relation to the themes at issue. The analysis reveals the peculiarity of EPC treatments, which can be realized only through a very careful co-construction of dialogue and could be described as an effort at supporting patients and caregivers in the difficult task of "speaking the unspeakable".

References:
· Childers, J. W., Back, A. L., Tulsky, J. A., & Arnold, R. M. (2017). REMAP: a framework for goals of care conversations. *Journal of Oncology Practice,* 13(10), e844–e850.
· Dall, T. & Sarangi, S. (2018). Ways of 'appealing to the institution' in interprofessional rehabilitation team decision-making. *Journal of Pragmatics,* 129, 102–119.
· Linell, P. (2010). Communicative activity types as organisations in discourses and discourses in organisations, in Tanskanen, S.-K. – Raitaniemi, M. – Johansson, M. – Helasvuo, M.-L. (eds.),

Discourses in interaction, 203, Amsterdam/Philadelphia, John Benjamins Publishing, pp. 33–59.

· Potenza L., Luppi M., Zimmermann C., Bandieri E. (2024). Early palliative care in haematological malignancies. *BMJ Supportive & Palliative Care,* 14, 230–232.

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ADVANCING INCLUSIVITY IN A MEDICAL TERMINOLOGY RESOURCE CONCERNING THE GUT-BRAIN INTERPLAY: INSIGHTS FROM THE HEREDITARY PROJECT

Abstract:
The popularization of specialized medical knowledge related to the gut-brain interplay is among the aims of the multidisciplinary European-supported project HEREDITARY (HetERogeneous sEmantic Data integratIon for the guT-bRain interplaY) (Menotti et al. 2025; Nentidis et al. 2025; Pellegrini & Lovati 2025). Within this project, terminology concerning the gut-brain axis and related health conditions is examined, particularly focusing on mental health-related states and neurodegenerative disorders. The conceptual and the linguistic dimensions of the analyzed medical concepts and terms are specifically represented through the development of a multilingual terminology resource, based on the FAIR Terminology paradigm (Vezzani, 2022). The adoption of this paradigm ensures Findability, Accessibility, Interoperability, and Reusability of terminological data.

For popularization purposes, the resource is aimed at categories of users with different levels of knowledge of the medical domain: physicians, patients and language professionals. In particular, the resource we present is intended for patients affected by a range of neurodegenerative disorders, who experience varying levels of cognitive decline. In light of this, the terminology resource is designed to ensure inclusivity in the representation of medical knowledge. This objective is achieved by supplementing the specialized definitions of concepts with patient-centered explanations. Within the resource, the formulation of explanations is tailored to the differing levels of cognitive decline affecting patients, ensuring their access to specialized medical knowledge and fostering a precise understanding of medical concepts related to the gut-brain interplay.

With a view to investigating strategies for achieving inclusivity in the formulation of patient-centered explanations, we plan to conduct a focused preliminary study. This study will specifically build on work addressing: 1) text simplification to enhance the understanding of medical concepts by non-experts (Giovagnoli et al. 2024), and 2) the inclusion of popular terms within medical terminology resources to foster the popularization of medical knowledge (Vezzani, 2021; Vezzani, 2022). Additionally, the study will involve administering questionnaires based on the "free association" method (Dany et al. 2015) to patients affected by different neurodegenerative disorders, to assess user needs.

References:
· Dany, L., Urdapilleta, I., & Lo Monaco, G. (2015). Free associations and social representations: Some reflections on rank-frequency and importance-frequency methods. *Quality & Quantity,* 49, 489–507. https://doi.org/10.1007/s11135-014-0005-z
· Giovagnoli, A., Vezzani, F., & Di Nunzio, G. M. (2024). *Doctor–patient communication:*

Terminological and simplification analysis in the domain of female oncology. Umanistica Digitale, 8(17), 143–164. https://doi.org/10.6092/issn.2532-8816/19265

· Menotti, L., Silvello, G., Cazzaro, M., Gut, I. G., & Rueda, M. (2025). *HERO-Genomics: An Ontology for Integration and Access of Multicenter Genomic Data.* Zenodo. https://zenodo.org/records/14936065

· Nentidis, A., Katsimpras, G., Krithara, A., Krallinger, M., Ortega, M. R., Loukachevitch, N., Sakhovskiy, A., Tutubalina, E., Tsoumakas, G., Giannakoulas, G., Bekiaridou, A., Samaras, A., Di Nunzio, G. M., Ferro, N., Marchesin, S., Menotti, L., Silvello, G., & Paliouras, G. (2025). BioASQ at CLEF2025: The Thirteenth Edition of the Large-Scale Biomedical Semantic Indexing and Question Answering Challenge. In C. Hauff, C. Macdonald, D. Jannach, G. Kazai, F. M. Nardini, F. Pinelli, F. Silvestri, & N. Tonellotto (Eds.), *Advances in Information Retrieval* (pp. 407–415). Springer Nature Switzerland. https://doi.org/10.1007/978-3-031-88720-8_61

· Pellegrini, G., & Lovati, C. (2025). Stakeholders' engagement for improved health outcomes: A research brief to design a tool for better communication and participation. *Frontiers in Public Health,* 13, 1536753. https://doi.org/10.3389/fpubh.2025.1536753

· Vezzani, F. (2021). La ressource FAIRterm : entre pratique pédagogique et professionnalisation en traduction spécialisée. *Synergies Italie*, 17, 51–64.

· Vezzani, F. (2022). *Terminologie numérique: conception, représentation et gestion.* Peter Lang International Academic Publishers. https://doi.org/10.3726/b19407

· 1https://hereditary-project.eu

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BUT IS IT NEWS? CONSTRUCTING NEWSWORTHINESS IN UNIVERSITY PRESS RELEASES ABOUT MEDICAL RESEARCH

Keywords:
medical research, dissemination, press releases, institutional communication, health communication

Abstract:
University communication departments have a vital role in disseminating and promoting research. One of the main genres used for this is the press release, which is designed to attract media attention and invite further media coverage, thereby generating positive publicity. Press releases must simultaneously attract readers, persuade journalists to include them in their publication, and achieve promotional goals.
Given these multiple aims, they have to be skillfully constructed. They have to recontextualize complex information to be comprehensible to the non-specialist reader. To ensure media coverage, they also need to show that the information they provide is newsworthy. One way to approach this is through "discursive news values" (DNVs), that is, values that make an item topical, important, and likely to attract the interest of the reading public. These DNVs include aspects such as novelty, proximity, eliteness, timeliness, etc., each of which tends to be characterized by the use of specific linguistic patterns in media genres (Bednarek & Caple, 2017).
This paper examines two corpora of 70 press releases issued by the major UK research university, UCL, on research into serious disease (DIS) and mental health (MH). For the purposes of comparison, a corpus of 70 press releases on education (Edu) was used. Corpus linguistics was used to detect patterns in the use of DNVs in each corpus. Results showed, for example, that "novelty" was more strongly associated with DIS, whereas "impact", "negativity" and "positivity" were more prominent in press releases about MH.
The conclusions reflect on possible consequences of the way press releases shape public awareness of researchers' work.

References:
· Bednarek, M., & Caple, H. (2017). The discourse of news values. OUP.

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Linguistic and Regulatory Variations in Magistral Prescriptions: A Comparative Analysis

Abstract:
In the pharmaceutical terminology courses of the German-language pharmacy training program in Hungary, students must be prepared for the German and Hungarian practices of magistral prescriptions, which are still predominantly written in Latin. To identify potential generic, intercultural, and linguistic differences and to develop practice-oriented teaching materials, we conducted a qualitative, contrastive terminological pilot study based on authentic magistral prescriptions collected from both countries.

Seventeen magistral prescriptions written by physicians were obtained from pharmacies in Germany and Hungary. These were manually compared, along with the structure and nomenclature of prescriptions included in the latest Hungarian and German standardized prescription formularies (Formulae Normales VIII, 2020; Deutscher Arzneimittel-Codex, 2025; Neues Rezeptur-Formularium, 2025). Our analysis revealed that while the overall structure and terminology of the prescriptions were similar, there were significant differences in grammatical structure and abbreviations.

In Germany, ingredients are listed in German, whereas instructions for pharmacists are provided in Latin. Hungarian prescriptions, by contrast, have preserved the most traditional Latin terminology, even specifying quantities in Latin. Additionally, we identified several terminological inaccuracies.

Our goal is to make students aware of these differences and to emphasize the importance of terminological accuracy in magistral prescriptions, helping to prevent potential misunderstandings that could impact medication preparation.

References:
· Bundesapothekerkammer. (n.d.). *Neues Rezeptur-Formularium (NRF)*. Deutscher Apotheker Verlag. https://www.dac-nrf.de
· Bundesapothekerkammer. (n.d.). *Deutscher Arzneimittel-Codex (DAC)*. Deutscher Apotheker Verlag. https://www.dac-nrf.de
· Országos Gyógyszerészeti és Élelmezés-egészségügyi Intézet. (2020). *FoNo VIII: Formulae Normales VIII: Szabványos magisztrális gyógyszerkészítmények gyűjteménye* (8th ed.). Medicina Könyvkiadó.

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INTERPRETING IN MULTILINGUAL HEALTH COMMUNICATION

Abstract:
Interpreting, as a form of 'translational action' (Kade, 1968, 1980), serves to overcome language barriers in multilingual communication. In this respect, the use of interpreters can be understood as a form of 'inclusive multilingualism' (Backus et al., 2013), particularly in the healthcare sector. However, interviews with interpreters and with medical staff, as well as the analyses of interpreted conversations in hospitals and therapeutic institutions, make it clear that it is worthwhile to examine more closely the conditions under which interpreting takes place in multilingual healthcare communication, and what demands and opportunities are confronted by the people involved in the conversation (Bührig & Meyer, 2005, Hanft-Robert et al., 2020, Meyer 2021, Bührig & Wamprechtshammer, 2024, Gartner et al. 2024). Insights into this complex of question will be presented from the perspective of linguistic action theory and conversational linguistics (Bührig & Rehbein 2000, Wadensjö, 1992). Concrete findings from various authentic, interpreted medical communications will be presented from the field of internal medicine and different therapeutic settings in Germany. The talk will conclude by highlighting some perspectives for the further training of interpreters in selected areas of multilingual health communication.

References:
· Backus, A., Gorter, D., Knapp, K., Schjerve-Rindler, R., Swanenberg, J., ten Thije, J. D., & Vetter, E. (2013). Inclusive multilingualism: Concept, modes and implications. *European Journal of Applied Linguistics*, *1*(2), 179–215. https://doi.org/10.1515/eujal-2013-0010
· Bührig, K., & Meyer, B. (2004). Ad hoc interpreting and achievement of communicative purposes in briefings for informed consent. In J. House & J. Rehbein (Eds.), *Multilingual communication* (pp. 43–62). John Benjamins.
· Bührig, K., & Rehbein, J. (2000). *Reproduzierendes Handeln: Übersetzen, simultanes und konsekutives Dolmetschen im diskursanalytischen Vergleich* (Arbeiten zur Mehrsprachigkeit, Reihe B 2). Universität Hamburg.
· Bührig, K., & Wamprechtshammer, A. (2024, September). *Interpreting in psychotherapy: Reflecting language and self-understanding* [Conference presentation]. 6th Joint European and UK SPR Chapters Conference "Psychotherapy in a Fast-Changing World," Brno, Czech Republic.
· Gartner, K., Mösko, M., Becker, J. C., & Hanft-Robert, S. (2024). Barrier to use of interpreters in outpatient mental health care: Exploring the attitudes of psychotherapists. *Transcultural Psychiatry*. Advance online publication. https://doi.org/10.1177/13634615241239428
· Hanft-Robert, S., Pohontsch, N. J., Uhr, C., Redlich, A., & Metzner, F. (2020). Die therapeutische Beziehungsgestaltung in der dolmetschergestützten Psychotherapie aus der Perspektive geflüchteter Patienten: Ergebnisse qualitativer Interviews. *Verhaltenstherapie*, *30*(3), 200–209. https://doi.org/10.1159/000497784
· Hanft-Robert, S., Römer, M., Morgenroth, O., Redlich, A., & Metzner, F. (2018). Handlungsempfehlungen für die dolmetschergestützte Psychotherapie mit Flüchtlingen und Asylbewerbern: Ergebnisse qualitativer Interviews mit Psychotherapeuten und Dolmetschern

zu Chancen und Herausforderungen in der Triade. *Verhaltenstherapie*, *28*(2), 73–81. https://doi.org/10.1159/000480667

· Kade, O. (1968). *Kommunikationswissenschaftliche Probleme der Translation*. Akademie-Verlag.

· Kade, O. (1980). *Die Sprachmittlung als gesellschaftliche Erscheinung und Gegenstand wissenschaftlicher Untersuchung*. Akademie-Verlag.

· Meyer, B. (2021). Entwicklungslinien der deutschen Forschung zum Dolmetschen im soziokulturellen Kontext. In S. Pöllabauer & M. Kardic (Eds.), *Entwicklungslinien des Dolmetschens im soziokulturellen Kontext: Translationskultur(en) im DACH.Raum* (pp. 113–126). Narr Francke Attempto Verlag.

· Wadensjö, C. (1992). *Interpreting as interaction*. Longman.

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INTERCOMSALUD: Intercultural communication guide for healthcare professionals

Keywords:
Interculturality, intercultural communication, interpreter, healthcare, patient care

Abstract:
Interculturality plays a crucial role in promoting effective communication in healthcare settings (Taylan, 2022). Misunderstandings due to cultural misalignments can disrupt therapeutic relationships and negatively impact patient outcomes. This study focuses on the creation of a specialized tool in the form of a survey, which will be assigned different values according to the respondents' answers that will measure the intercultural sensitivity, awareness and behavior of healthcare professionals, based on Chen and Starosta's (2000) Intercultural Sensitivity Scale.

The research investigates the underrepresentation of intercultural education in healthcare training programs and its implications for communication. By analyzing both professional attitudes and patient experiences, the study explores how cultural differences manifest in behaviors, non-verbal communication, and beliefs during consultations. The survey will be distributed in a mostly face-to-face manner, which will benefit the research for the observation of such attitudes. Particular attention is given to interpreters' challenges in mitigating cultural conflicts, emphasizing their pivotal role in maintaining effective communication.

Grounded in a framework incorporating key concepts such as health imaginaries, culturally shaped emotional responses, and behavioral norms, the developed tool serves as a diagnostic and training resource. It enables healthcare providers to assess and enhance their intercultural competence, addressing gaps in current ethnocentric training approaches. This tool is especially crucial in consultations with migrant patients, where cultural disparities are more pronounced.

References:
· Taylan, C., & Weber, L. T. (2023). "Don't let me be misunderstood": communication with patients from a different cultural background. *Pediatric Nephrology,* 38(3), 643–649.
· Chen, G. M., & Starosta, W. J. (2000). The development and validation of the intercultural sensitivity scale. *Human Communication*, 3, 1–15.

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BALANCING THE GOOD AND THE BAD IN INFORMING SEQUENCES – CONTRASTING PRACTICES IN GERMAN AND RUSSIAN ONCOLOGICAL CONSULTATIONS

Abstract:
When delivering bad news, interactants tend to go to great lengths in order to shroud the negative valence of their messages by drawing on different interactional strategies. As research in medical communication reveals, this especially applies to oncological consultations where, for instance, grammatical resources such as the German "zwar...aber (... but...)"-construction are used to juxtapose a 'bad' piece of information with a 'good' one.

However, as our data exhibit, doctors do not only try to mitigate negative news by highlighting their positive aspects. They are also confronted with the challenge of making clear nonetheless that the patient's illness is not to be taken lightly. In a comparative analysis of 56 German and 54 Russian audio-recorded oncological consultations, we aim at deepening our understanding of how doctors use certain practices to balance respective contrast the negative and the positive features of the diagnosis and the recommended therapy in response to the varying communicative involvement of the patients in the two data sets.

Using an interactional-linguistic approach, we will discuss contrasting patterns that are found in both corpora, such as pronominal ascriptions ("они нашли плохие клетки – у вас добрый рак (they found bad cells – you have the good cancer)"), as well as language-specific practices. In this regard, we will show that while the Russian doctors, for instance, construct animated scenarios, anticipating the patients' perception of the information given, the German doctors adapt their perspectivation of the illness to the affective stance displayed by the patients in questions and evaluative comments ("A: ...Prognose gut. P: Sehr gut. A: Aber leider... (D: ...good prognosis. P: Very good. D: But unfortunately, ...)").

The results highlight that the construal of a diagnosis as 'bad' or 'good' is a delicate matter of ongoing interactional adjustment and that there are routinized linguistic means that are employed in navigating this process.

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Toward a Harmonized Terminology for Blunt-Force Injury Documentation: A Case Study

Abstract:
Accurate injury documentation is vital in both clinical and forensic contexts, particularly when records may later serve as legal evidence. Prior studies (Fogarasi, 2015; Gergely et al., 2018; Németi, 2018) have shown that vague or inconsistent injury descriptions and diagnoses compromise the reliability of medical documentation. This issue is especially acute in the case of soft tissue injuries, where retrospective assessment is limited by the natural healing process. Although photographic documentation may be available, the written report remains the primary basis for forensic expert opinion (Schneider et al., 2018). In Hungary, clinical records of blunt-force trauma often reflect terminological ambiguity and lack sufficient characteristics of primarily blunt-force injuries not requiring medical treatment. To support the development of more efficient clinical documentation standards, in this case study, we examined the primary documentation of blunt-force injuries in the UK, with the aim of aligning Hungarian terms with those considered standard in the UK. We analyzed 25 autopsy reports prepared by forensic pathologists and 15 forensic medical reports on living patients, obtained from Forensic Healthcare Services Ltd, UK. Using statistical methods (IBM SPSS Statistics 22 software), we assessed the level of detail in the injury descriptions, followed by manual analysis of the related diagnoses, in lexical semantic comparison (L'Homme& Bae, 2006) with the forensic literature (Stark, 2011; Payne-James, 2023). Preliminary findings indicate widespread use of generalized terms such as bruise, a practice explicitly discouraged in expert sources (Payne-James et al., 2005). Important characteristics – such as the age, color, and precise location of injuries – were often omitted. However, injury terminology related to skin continuity disruption showed consistency with Hungarian terminology use. These findings may serve as a reference point for developing a harmonized, English-informed terminology standard for injury documentation.

References:
· Fogarasi, K., & Schneider, P. (2015). How the incorrect use of a medical genre and terminology can result in erroneous legal judgments. *CASALC Review,* 5(1), 121–133.
· Gergely, P., Schneider, P., Bán, Á., Fogarasi, K., Boda, R., & Patonai, Z. (2018). The role of clinical documentation in forensic and criminal legal assessment of tooth loss and other dental injuries. In M. Kubat, D. Mayer, & M. Baković (Eds.), *26th International Meeting on Forensic Medicine Alpe-Adria-Pannonia – Abstract Boo*k (p. 46). Pula, Croatia.
· L'Homme, M.-C., & Bae, H. S. (2006). A methodology for developing multilingual resources for terminology. In N. Calzolari, K. Choukri, A. Gangemi, B. Maegaard, J. Mariani, J. Odijk, & D. Tapias (Eds.), *Proceedings of the Fifth International Conference on Language Resources and Evaluation (LREC'06).* European Language Resources Association (ELRA)
· Németi, B. (2018). *Baleseti sebészeti ellátás során rögzített és az igazságügyi orvosszakértői*

véleményekben szereplő sérülések leírásának összehasonlítása (MSc thesis). Faculty of Medicine, University of Debrecen.

· Payne-James, J., Crane, J., & Hinchliffe, J. A. (2005). Injury assessment, documentation, and interpretation. In J. Payne-James, R. W. Byard, T. Corey, & C. Henderson (Eds.), E*ncyclopedia of forensic and legal medicine* (Vol. 2, pp. 127–136). Elsevier. https://doi.org/10.1385/1-59259-913-3_14

· Payne-James, J. (2023). Injury documentation & assessment. In J. Payne-James & R. Byard (Eds.), *Forensic and legal medicine: Clinical and pathological aspects* (pp. 712–726). CRC Press. https://doi.org/10.1201/9781003138754-78

· Schneider, P., Patonai, Z., Gergely, P., & Fogarasi, K. (2018). Testi sértés vagy emberölési kísérlet? *Belügyi Szemle,* 66(9), 147–163. https://doi.org/10.38146/bsz.2018.9.8

· Stark, M. M. (Ed.). (2011). *Clinical Forensic Medicine: A Physician's Guide* (3rd ed.). Humana Press.

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DEVELOPMENT OF CLINICAL AND ANATOMICAL MEDICAL LANGUAGE PROFICIENCY IN INTERNATIONAL STUDENTS: OPPORTUNITIES, APPROACHES, AND OUTCOMES IN TERMINOLOGY COURSES

Keywords:
medical terminology, medical documentation, clinical terms, code switching, discharge summary, written simulation exercises

Abstract:
Modern terminology courses integrate authentic medical documentation to provide students with real linguistic contexts based on CLIL methodology at an increasing rate (Sirokmány, 2023). This approach enhances students' understanding and correct use of medical terminology while preparing them for the complex linguistic environment of clinical settings (Fogarasi et al., 2019; Sharabi et al.; Delbó et al., 2024).

Our study examines first-year Semmelweis University students enrolled in the English- and German-language medical programs during the 2024/25 spring term, in the courses „Terminology of the Clinical Specialties," „Dental Medical Terminology," „Terminologie der klinischen Fachgebiete," and „Zahnmedizinische Terminologie". It focuses on observing and analyzing how language development based on medical documentation influences students' terminological proficiency. It also compares the English and German groups to identify key differences. Approximately 150 students participate in the study, with roughly equal representation from both programs. A hematology discharge summary written by a German physician in German and English was adapted into a gap-fill exercise and used as an instrument, which students completed at the beginning and the end of the semester. Hematology was chosen because of its frequent use of terms familiar in everyday language (e.g., leukemia, anemia). The results were analyzed using automated data extraction within Moodle's self-assessment system and statistically compared between the pre- and post-test.

Initial results indicate students have limited prior knowledge of clinical terminology. Differences emerged between the German- and English-language groups in recognizing medical terms, likely due to language-specific characteristics. While German has distinct lay and professional registers (Sharabi et al.), English integrates Greek and Latin medical terminology into everyday usage. Understanding these linguistic variations can refine terminology instruction, enhancing curriculum design in terminology-oriented courses.

References:
· Fogarasi, K., Schneider, Ph., & Patonai, Z. (2019). Die Rolle von Diagnosen im medizinischen Fachsprachenunterricht: Eine interdisziplinäre Analyse deutscher, österreichischer und ungarischer klinischer Diagnosen. In P. Vičič, N. Gajšt, & A. Plos (Eds.), *10th International Language Conference on "The Importance of Learning Professional Foreign Languages for Communication between Cultures": Conference Proceedings* (pp. 107–120). University of Maribor Press.
· Delbó, K. L., Gyenes, G., & Fogarasi, K. (2024). Medical documentation in terminology courses: Ways to improve the terminology skills of German medical students. In J. García Laborda, K. Fogarasi, J. Császár, & D. Mány (Eds.), *22nd AELFE Conference 2024: Challenges of LSP teaching and research in the era of the language technological revolution* (p. 16). Semmelweis University,

Institute of Languages for Specific Purposes.

· Sharabi, O., Gyenes, G., Fogarasi, K., & Altdorfer, K. (in press). Fostering proficiency in medical history documentation through case simulations in German medical terminology courses. In *A MANYE Kongresszusok Előadásai – HAALLT Congress Publications*. Akadémiai Kiadó.
· Sirokmány, V. (2023). CLIL in tertiary education – Developing material for the course, scientific writing in English. *Porta Lingua,* 1, 127–136.

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Consumer-Centered Technology-Assisted Review: Insights and Challenges from the CLEF eHealth Tasks

Keywords:
Technology-Assisted Review (TAR), consumer health information retrieval, Terminology Augmented Generation (TAG), inclusive healthcare communication, CLEF eHealth tasks

Abstract:
This paper explores the potential of technology-assisted review (TAR) systems to promote inclusivity in healthcare communication, drawing on findings from the CLEF eHealth tasks on Technology-Assisted Review (TAR) (Kanoulas et al., 2017, 2018, 2019) and Consumer Health Search (CHS) (Goeuriot et al., 2017; Kelly et al., 2019; Suominen et al., 2018). These tasks simulate real-world scenarios in which lay users seek reliable biomedical information under conditions of linguistic and conceptual mismatch. We examine how TAR technique - originally developed for high-recall expert domains - adapt to consumer health contexts where queries are often vague, emotionally charged, or framed in non-specialist language. We highlight the role of Terminology Augmented Generation (TAG) as a promising strategy to align retrieved content with user-understandable language. TAG allows systems to dynamically generate or re-rank responses using domain-specific lexical resources, offering a controlled yet flexible way to mediate between expert precision and lay comprehensibility.

In particular, our analysis focuses on the opportunities and limitations in the current approaches, particularly around issues of terminology mapping, sensitivity to health literacy, and the handling of multilingual and culturally diverse content. We will argue that future TAR systems for consumer health should integrate linguistic models attuned to semantic variation, user intent, and accessibility constraints (Di Nunzio et al., 2020; Di Nunzio & Vezzani, 2022). Additionally, evaluation frameworks must evolve to better reflect the diversity of real-world users and their communicative practices. By proposing ways to extend existing task designs, this paper contributes to the development of information access systems that are not only effective in performance metrics but also equitable and responsive to the realities of healthcare communication.

Our analysis is based on a qualitative review of ranked retrieval outputs submitted to CLEF by participating systems, with a focus on query reformulation, document selection, and terminology mediation strategies. We applied manual annotation to identify recurring mismatches between query terms and document language, and we tested a small-scale implementation ofTAG using consumer health vocabularies such as the Unified Medical Language System (UMLS) and the Consumer Health Vocabulary (CHV). Preliminary results show that TAG can improve the alignment between user queries like "Can turmeric help with joint pain?" and biomedical content that uses technical terms such as "anti-inflammatory effects of curcumin." Similarly, TAG-enabled reranking helped surface relevant documents in multilingual settings where terms like "pressure in the head" mapped more effectively to "intracranial hypertension."

References:
· Di Nunzio, G. M., Marchesin, S., & Vezzani, F. (2020). A Study on Reciprocal Ranking Fusion in Consumer Health Search. IMS UniPD ad CLEF eHealth 2020 Task 2. In L. Cappellato, C. Eickhoff, N. Ferro, & A. Névéol (Eds.), *Working Notes of CLEF 2020—Conference and Labs of the Evaluation Forum,* Thessaloniki, Greece, September 22-25, 2020 (Vol. 2696). CEUR-WS.org. https://ceur-ws.org/Vol-2696/paper_128.pdf
· Di Nunzio, G. M., & Vezzani, F. (2022). Did I Miss Anything? A Study on Ranking Fusion and Manual Query Rewriting in Consumer Health Search. In A. Barrón-Cedeño, G. Da San Martino, M. Degli Esposti, F. Sebastiani, C. Macdonald, G. Pasi, A. Hanbury, M. Potthast, G. Faggioli, & N. Ferro (Eds.), *Experimental IR Meets Multilinguality, Multimodality, and Interaction* (pp. 217–229). Springer International Publishing. https://doi.org/10.1007/978-3-031-13643-6_17
· Goeuriot, L., Kelly, L., Suominen, H., Névéol, A., Robert, A., Kanoulas, E., Spijker, R., Palotti, J., & Zuccon, G. (2017). CLEF 2017 eHealth Evaluation Lab Overview. In G. J. F. Jones, S. Lawless, J. Gonzalo, L. Kelly, L. Goeuriot, T. Mandl, L. Cappellato, & N. Ferro (Eds.), *Experimental IR Meets Multilinguality, Multimodality, and Interaction* (pp. 291–303). Springer International Publishing. https://doi.org/10.1007/978-3-319-65813-1_26
· Kanoulas, E., Li, D., Azzopardi, L., & Spijker, R. (2017). CLEF 2017 Technologically Assisted Reviews in Empirical Medicine Overview. In L. Cappellato, N. Ferro, L. Goeuriot, & T. Mandl (Eds.), *Working Notes of CLEF 2017—Conference and Labs of the Evaluation Forum* (Vol. 1866). CEUR. https://ceur-ws.org/Vol-1866/#invited_paper_12
· Kanoulas, E., Li, D., Azzopardi, L., & Spijker, R. (2018). CLEF 2018 Technologically Assisted Reviews in Empirical Medicine Overview. In L. Cappellato, N. Ferro, J.-Y. Nie, & L. Soulier (Eds.), *Working Notes of CLEF 2018—Conference and Labs of the Evaluation Forum* (Vol. 2125). CEUR. https://ceur-ws.org/Vol-2125/#invited_paper_6
· Kanoulas, E., Li, D., Azzopardi, L., & Spijker, R. (2019). CLEF 2019 Technology Assisted Reviews in Empirical Medicine Overview. In L. Cappellato, N. Ferro, D. E. Losada, & H. Müller (Eds.), *Working Notes of CLEF 2019—Conference and Labs of the Evaluation Forum* (Vol. 2380). CEUR. https://ceur-ws.org/Vol-2380/#paper_250
· Kelly, L., Suominen, H., Goeuriot, L., Neves, M., Kanoulas, E., Li, D., Azzopardi, L., Spijker, R., Zuccon, G., Scells, H., & Palotti, J. (2019). Overview of the CLEF eHealth Evaluation Lab 2019. In F. Crestani, M. Braschler, J. Savoy, A. Rauber, H. Müller, D. E. Losada, G. Heinatz Bürki, L. Cappellato, & N. Ferro (Eds.), *Experimental IR Meets Multilinguality, Multimodality, and Interaction* (pp. 322–339). Springer International Publishing. https://doi.org/10.1007/978-3-030-28577-7_26
· Suominen, H., Kelly, L., Goeuriot, L., Névéol, A., Ramadier, L., Robert, A., Kanoulas, E., Spijker, R., Azzopardi, L., Li, D., Jimmy, Palotti, J., & Zuccon, G. (2018). Overview of the CLEF eHealth Evaluation Lab 2018. In P. Bellot, C. Trabelsi, J. Mothe, F. Murtagh, J. Y. Nie, L. Soulier, E. SanJuan, L. Cappellato, & N. Ferro (Eds.), *Experimental IR Meets Multilinguality, Multimodality, and Interaction* (pp. 286–301). Springer International Publishing. https://doi.org/10.1007/978-3-319-98932-7_26
· 1https://clefehealth.imag.fr/
· 2https://www.gala-global.org/events/events-calendar/turning-linguistic-assets-knowledge-genai-applications

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Gender stereotypes and linguistic variations in the clinical description of mental health: A study of medical records from the Psychiatric Hospital of Girifalco (Italy)

Keywords:
gender stereotypes, clinical description, mental health, World War I, linguistic strategies

Abstract:
This study explores divergent linguistic strategies in the descriptions of similar pathologies in male and female patients' medical records, aiming to identify gender stereotypes and biases in psychiatric and long-term care settings. Differences are reflected in the use of adjectives (more often for male pathologies), verbs, syntactic structures, and metaphors (mainly for female patients), suggesting potential discrimination. Examples from male (1) and female (2) patients illustrate these phenomena:

(1)	Megalomane		iperbolico,	loquace,		incontentabile	trova
	megalomaniac		hyperbolic	loquacious		insatiable	finds
	da ridire	su	tutto	e	su	tutti.	È	però
	to say again	about	everything	and	about	everyone	is	however
	innocuo	e	frivolo.				
	harmless	and	frivolous				

'Hyperbolic megalomaniac, loquacious, never satisfied, finds fault with everything and everyone. However, he is harmless and frivolous.'

(2)	Ha	una	logorrea	meravigliosa,	con	le sue	ciarle
	(she) has	a	logorrhea	wonderful	with	her	rumours
	introna	le	orecchie	e	riesce	noiosa.	
	deafens	the	ears	and	becomes	boring is	
	È		un'esposta	e	analfabeta.		
	(she) is an abandoned child		and	illiterate			

'She has a wonderful logorrhea, with her prattling she deafens the ears and becomes boring. She is an abandoned child and illiterate.'

Gender differences are often linked to social status (Dovetto 2019). At the Psychiatric Hospital of Girifalco (Italy), part of this study's sample, about 50% are farmers, 15% are weavers/spinners, and over 70% are illiterate. Only 12.9% can read and write, mostlu men (78.8%) and a few women (21.2%), most of whom are housewives or in civil professions, except one higher-status "lady". Wealthier patients tend to have more detailed pathology descriptions compared to those from humbler backgrounds (Chiaravalloti et al. 2020; Taverniti et al. 2023).
The analysis is part of the PRIN 2022 PNRR project "DIgital preservation, LInguistic analysis and valorization of historical archive of the former psychiatric hospital of GirifalcO (DILIGO)", aiming to digitize, transcribe, and annotate the medical records of the former sychiatric Hospital of Girifalco (CZ). The corpus includes 890 medical records (488.799 tokens and 842 types) from World War I, showing how language reflects gendered views in the perception and treatment of psychiatric disorders. These documents can be primarily classified as institutional medical-administrative

records, characterized by a marked historical dimension and the presence of narrative components. Predominantly monologic, factual, and formally codified, the records reflect the standardized discursive practices of psychiatric institutions in the late 19th and early 20th centuries. However, they also include subjective and narrative elements, particularly evident in clinical diaries and patient-authored correspondence, which introduce heterogeneous discursive layers. The overall textual organization follows a chronological and procedural structure, conforming to the bureaucratic and institutional norms of the period, and is shaped by the specialized medical terminology and sociocultural paradigms of historical psychiatry. Due to their multidimensional and multimodal nature, these records constitute a diachronic corpus of high relevance for linguistic, historical, medical, and sociological analysis, offering insight into both clinical practices and the broader epistemological frameworks of mental health care in the given historical context.

References:
· Chiaravalloti, M. T., Dovetto, F. M., & Taverniti, M. (2020). Le cartelle dell'ex ospedale psichiatrico di Girifalco. Lessico, strumenti e terapie. In F. M. Dovetto (Ed.), *Lingua e patologia. I sistemi instabili*. Aracne.
· Dovetto, F. M. (2019). I marginali dell'ex Ospedale psichiatrico di Girifalco e il lessico delle malattie di nerve alla testa. In D. Poli (Ed.), *In limine. Frontiere e integrazioni* (pp. 137–161). Il Calamo.
· Riccio, A. (2014). Analyzing specialized verbs in a French-Italian-English medical corpus: A frame-based methodology. In A. Abel, C. Vettori, & N. Ralli (Eds.), *Proceedings of the XVI EURALEX International Congress: The user in focus, 15–19 July 2014, Bolzano/Bozen* (pp. 1049–1058). Eurac Research.
· Riccio, A. (2016). Argument realization patterns of verbs across multilingual medical texts. In B. Bierwiaczonek & J. Paszenda (Eds.), *Polysemy in language and translation* (pp. 131–153). University of Occupational Safety Management in Katowice.
· Taverniti, M., Chiaravalloti, M. T., & Dovetto, F. M. (2023). Uno sguardo sociolinguistico sui pazienti dell'OP di Girifalco. In F. M. Dovetto (Ed.), *Lingua e patologia. Parole dentro, parole fuori* (pp. 227–265). Aracne.

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ENHANCING MEDICAL ENGLISH THROUGH ARGUMENTATION AND BIOETHICAL CASE STUDIES

Keywords:
argumentation skills, medical English, ethical dilemmas, bioethical principles, language competence

Abstract:
To improve the language competence of medical English students, with a particular focus on their argumentation skills, we have developed a innovative double-unit that integrates argumentation techniques into the study of ethical dilemmas in medicine. This unit is structured around the exploration and application of the four major bioethical principles—autonomy, beneficence, non-maleficence, and justice—through the analysis of a case study. The students engage deeply with these principles, examining their implications and weighing conflicting perspectives before crafting a brief, creative conclusion to the case study. This conclusion is designed not only to reinforce their understanding of bioethics but also to enhance their ability to articulate nuanced arguments in English.

The presentation will outline the structure and goals of the unit in detail, showcasing its pedagogical approach to combining linguistic development with the cultivation of medical reasoning skills. Additionally, it will present findings from a survey of 60 first-year students, exploring their perceptions of argumentation as a key skill. It highlights how students view argumentation as a critical tool not only for improving their English language proficiency but also for enriching their competence in medical practice. These insights will underscore the dual benefits of this integrated approach, demonstrating its potential to bridge the gap between language learning and professional development in the medical field.

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BARRIER-FREE COMMUNICATION FOR PEOPLE WITH COMPLEX COMMUNICATION NEEDS (CCN) USING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION (AAC)

Keywords:
augmentative and alternative communication (AAC), symbol-based communication, patents with complex communication needs (CCN), multilingual communication, healthcare

Abstract:
Augmentative and Alternative Communication (AAC) is not only important in the daily life, learning, and work of people with Complex Communication Needs (CCN), but is also an important means of reducing communicative barriers in healthcare. The target groups include people with congenital or acquired disabilities, as well as people from different cultures and languages.
Thus, AAC provides the foundation for patient safety through patient-centered augmentative communication (e.g. regarding physical conditions and planned examinations and treatments) for these target groups. Improved communication between patients and doctors or nursing staff leads to better compliance. Experiencing self-efficacy and self-control contributes to enhanced emotional well-being and stress reduction, leading to better recovery. Therefore, the use of AAC is also an ethical issue, ensuring that patients with linguistic challenges can equally exercise their right to self-determination.
For that reason, the AAC-Med project at the University of Oldenburg developed picture symbol-based communication aids in healthcare. Currently, it consists of the following subprojects: AAC-Pharmacy, -Nursing, -Emergency, -Oncology, -Pulmonology and Allergology, -Neurology.
This project is unique in
·   focussing on a broad target group
·   addressing specific communication needs in different medical contexts
·   developing and evaluating each communication aid within the framework of interprofessional research together with practical experts and people with CCN
The presentation will introduce the project, the current developments and results, including the freely accessible multilingual apps.
In every subproject, we followed the three steps of design thinking:
1.   Conducting interviews and observations in the field to identify communication barriers and needs.
2.   Developing an initial communication board.
3.   Testing - revising - testing again - revising - finalizing.
Currently, two boards and applications have been completed: AAC-Pharmacy and AAC-Nursing. AAC-Emergency will be available soon. We are working to finalize the other boards as quickly as possible. In the meantime, we are researching how these aids can be integrated into healthcare systems. To that end, we are preparing interviews and observations in collaboration with Bethesda Children's Hospital in Budapest.

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ENHANCING HEALTH COMMUNICATION THROUGH TERMINOLOGICAL INFOGRAPHICS

Keywords:
health communication, infographic, health literacy, medical terminology, comprehension

Abstract:
Communication between healthcare professionals and patients, as well as their families, is not always effective. In response to this challenge, various initiatives have emerged in recent decades to bridge the gap between medical language and the general public. Under the umbrella of graphic medicine, infographics in the healthcare field have been recognized as an innovative resource aimed at patients, facilitating comprehension and enhancing learning capacity. One of the most significant barriers to effective communication is medical terminology, which, paradoxically, serves as the vehicle for conveying specialized knowledge. To address this issue, we propose bringing medical terminology closer to patients through terminologically based infographics. The infographics we create are based on basic terminology, which is often difficult to understand. This terminology is defined with the patient in mind, and from the terminological structure, the discursive narrative of the infographic is built. Our contribution presents three distinct scenarios in which we have developed digital terminological infographics to facilitate specialized communication between healthcare professionals and patients: breast cancer treatments for women diagnosed with breast cancer, assisted reproductive treatments for individuals facing fertility challenges, and COVID-19-related information for children and adolescents. The evaluation of these infographics conducted by Vidal-Sabanés (2021) yielded highly positive results in terms of terminological comprehension. The fact that they stem from real terminological needs and that there is control over the terminology in the discourse facilitates the understanding and management of a health topic, as well as subsequent effective communication with health professionals. Furthermore, they contribute to improving health literacy and overall quality of life.

Source (infographics):
- Covid-19 for children and adolescents: https://www.diccionaridemedicina.app/web/es/covid-19/
- Breast cancer treatments: https://laiavidalsabanes.com/infografia_tractaments/
- Assisted reproductive treatments: https://www.neotermed.org/inforgrafias

Reference:
· Vidal-Sabanés, L. (2021). *La terminologia en els textos mèdics per a pacients: el cas d'una comunitat virtual de dones amb càncer de mama*. Universitat Pompeu Fabra. [Tesis doctoral]. https://www.tdx.cat/handle/10803/672627

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DIXIMED: REDEFINING HOW CHILDREN UNDERSTAND MEDICAL CONCEPTS

Keywords:
knowledge evolution, medical linguistics, terminology, health communication, lexicography

Abstract:
Explaining medical concepts to children can be challenging. DIXIMED (https://www.diximed.com) is an interactive pediatric dictionary bridging this gap. It
provides clear, school-level definitions for primary and secondary students, making medical terminology more accessible. Originally developed in Spanish and Catalan, it is
now being adapted into English and Basque. At its core, DIXIMED is an innovative approach in which linguists and pediatric experts work with definitions created by
children, identifying noteworthy observations, children's natural speech patterns, and common misconceptions.

Various multimodal learning strategies and linguistic adaptations are employed in Diximed to ensure both scientific accuracy and accessibility. A key part of this approach is addressing frequent misconceptions in children's definitions, such as the belief that cancer is always fatal, causes hair loss, or is contagious. Definitions are carefully restructured to match children's cognitive development (e.g., a virus is described as "a tiny germ that can make you sick" instead of "a microscopic agent that infects living cells"). To support diverse learning needs, Diximed integrates audio recordings of children reading definitions, allowing auditory learners to engage more effectively.
Additionally, drawings made by children accompany entries, reinforcing understanding through visual association.

Another key strategy is the Construction-Deconstruction-Reconstruction (C-D-R) model. A frequent misconception observed in children's definitions is the belief that cancer directly causes hair loss. Many define it as "the contagious disease that makes your hair fall out", rather than understanding that alopecia is a side effect of treatment, not the disease itself, which, besides, is not contagious. In Diximed, this misunderstanding is corrected by explicitly distinguishing the concepts, explaining clearly that some medicines used to treat cancer can make hair fall out, but cancer itself does not do this and is not contagious at all. This ensures a balance between clarity, accuracy, and accessibility.

DIXIMED has been recognized with multiple awards and is currently used in pediatric settings to facilitate communication between doctors and young patients. This presentation will explore the dictionary's development process, its linguistic and pedagogical strategies, as well as its potential to improve health literacy. By making medical terminology more understandable for children, DIXIMED helps young patients become more informed and confident in their healthcare experiences.

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ENGLISH FOR SPECIFIC PURPOSES AT INDONESIAN UNIVERSITIES: CURRENT PRACTICES, CHALLENGES AND TEACHERS' PERSPECTIVES

Abstract:
English for Specific Purposes (ESP) instruction has gained increasing significance in non-English speaking countries due to the global demand for domain-specific English proficiency. In Indonesia, however, there is limited research on how ESP is implemented in higher education, particularly within health-related disciplines. Previous studies have largely emphasized syllabus design and material development, yet less attention has been given to the lived experiences and professional development of ESP instructors. This study investigates the current practices, challenges, and perspectives of Indonesian ESP instructors through semi-structured interviews with 9 (nine) teachers in Indonesian universities.

The findings reveal that ESP teaching in this context relies heavily on external resources such as educational videos and classroom discussions to engage students and supplement limited institutional materials. A major challenge identified is managing classrooms with widely varying English proficiency levels while tailoring content to meet the specialized needs of health curriculum students. Despite a lack of institutional support, instructors demonstrate resilience and adaptability, drawing significant strength from professional peer communities. These communities provide crucial support in developing teaching strategies, fostering professional identity, and encouraging ongoing self-directed learning.

This study contributes to ESP literature by addressing several underexplored areas: the geographic gap in Southeast Asian contexts, the effects of institutional support limitations, the evolving roles and identity of ESP instructors, and the intersection of pedagogy with professional development. By shedding light on the realities of ESP instruction in Indonesia, the study underscores the importance of professional collaboration and self-driven growth in advancing ESP practices.

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KILI…MOUNJARO® A DIACHRONIC LEXICOLOGICAL ANALYSIS OF THE BRAND NAMES OF PRESCRIPTION DIABETES DRUGS APPROVED BY THE FDA FROM 1984 TO 2024

Abstract:
Diabetes is recognized as the world's fastest growing chronic condition. The increasing prevalence of diabetes and more specifically of type 2 diabetes makes the diabetes drugs market particularly attractive to pharmaceutical companies. Yet, to come up with a good brand name for their novel products, they face challenges such as a fiercely competitive market that is already overcrowded with diabetes generic and brand-name drugs, and a stringent regulatory environment imposed by the American Food and Drug Administration (FDA). The present paper investigates the changing brand names of prescription diabetes drugs that were approved by the FDA from 1984 to 2024. This diachronic lexicological study provides an opportunity to review the different naming strategies used by the pharmaceutical industry and to examine how they have evolved over time.

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Disciplinary writing frameworks for inclusion and diversity

Abstract:
This presentation introduces a study which proposes a pedagogical framework to bridge the space between writing instruction at thesis level and the expectations of disciplinary writing, in order to create an inclusive support system which acknowledges the diversity of writers involved in thesis writing in English.

The study investigates the expression of criticality in the writing of doctoral students' Literature Review chapters, in medical and health sciences. The study focuses on two disciplines, chosen for their contrasting scientific research paradigms. Cardiovascular Sciences is a laboratory-based discipline; Nursing, Midwifery and Social Work, grouped together as one discipline in this study, is a patient-facing discipline that explores ways of contributing to health care. Two 30,000-word unique corpora were constructed from student writing for analysis in this study. Theses from 2013-2017 were selected and prepared for sampling. The annotation tool used was brat v1.3 (Stenetorp et al., 2012), an open source annotator available online. Textual investigation of the dimensions of knowledge types, source use and epistemic certainty levels was carried out.

Findings show that writers use an interplay of the dimensions examined to present themselves as having developed a scientific critical faculty and as having a disciplinary voice. The thesis compares and contrasts the extent to which the two disciplines employ these dimensions, showing differences in the extent of the use of the different dimensions in each corpus. This is linked to epistemological differences in the two disciplines.

Reference:
· Stenetorp, P., Pyysalo, S. G., Ohta, T., Ananiadou, S., & Tsujii, J. (2012). BRAT: A web-based tool for NLP-assisted text annotation. In *Proceedings of the 13th Conference of the European Chapter of the Association for Computational Linguistics* (pp. 102–107). Association for Computational Linguistics.

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ADVANCED MEDICAL PHRASEOLOGY IN CLINICAL RECORDS: A PEDAGOGICAL ANALYSIS FOR T&I TRAINING

Abstract:
In the field of medical translation and interpreting (T&I), terminology constitutes one of the greatest areas of specialisation. In comparison, phraseology is more often neglected, despite posing equally, if not more, difficult challenges. The following research stems from the knowledge gaps T&I trainees have in relation to the advanced medical phraseology that characterises medical documents and encounters, due to their limited exposure to authentic clinical texts during training.

To tackle this problem, we propose a corpus-based analysis of complex medical phraseology found in clinical records. Through the analysis of these texts, we aim to develop phraseological training resources for T&I trainees, contributing to their professional development and bridging the gap between academic training and real clinical practice. The methodology employed is a qualitative, corpus-based analysis of clinical records in two medical settings: Emergency Department (n=15) and Obstetrics and Gynaecology (n=15). The analysis will focus on areas such as technical terminology, medical colloquialisms, abbreviations and context-specific phraseology, which will lead to the creation of a glossary, in this case bilingual for the ES-EN language pair, that includes a contextualised and comprehensive list of terminological challenges for translators and interpreters.

With this project, we hope to contribute to the T&I training field by introducing resources created with real life, clinical texts that are typically difficult to access and employ in training. The study of clinical records constitutes a unique look into the particularities of medical discourse that contributes to an improvement in T&I practical skills. Additionally, the comparison of records from two different departments is a fruitful strategy to gather context-specific information that could bring about broader phraseological studies concerning an array of medical specialties.

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CUTTING THROUGH AMBIGUITY: THE ROLE OF TERMINOLOGY IN VERIFYING WOUNDS IN HUNGARIAN CRIMINAL COURTS

Keywords:
sharp-force injury, terminology, Hungary, forensic assessment, clinical documentation

Abstract:
In Hungary, clinical documentation of injuries plays a critical role in criminal proceedings. However, approximately 14% of clinical reports contain terminological errors or incomplete descriptions, which hinder the forensic assessment of soft tissue injuries (Fogarasi, 2012). These deficiencies often obscure the mechanisms of injuries (Schneider et al., 2018) and lead to inconsistencies, limiting or excluding their utility in criminal cases. Many terms have been shown to have different meanings in clinical and forensic contexts (Fogarasi, 2011), reflecting the polyhedral nature described by Cabré (2023), which explains cases of denotative variation with cognitive consequences. Other terms are subject to determinologization processes due to the diachronic changes in the Hungarian language.
This study aims to bridge the gap between clinical and forensic documentation by exploring the alignment of forensic conceptual frameworks with clinical injury descriptions. A corpus of 790 Hungarian medical diagnostic reports of injuries (MDRIs) is analyzed to identify the terms used to diagnose and morphologically describe sharp-force injuries through both descriptive statistical analysis and manual terminological review. Using the Sketch Engine software, terminological patterns (3- and 4-grams) are revealed in the recorded characteristics of external injury descriptions.
Preliminary findings highlight significant gaps in morphological descriptions and inconsistencies in terminological usage, which impair forensic evaluations of injury mechanisms and locations. Ambiguous documentation, particularly in connection with incised and chop wounds, was found, with these terms being used alternately for the same injury. This inconsistency may affect the forensic assessment of the weapon involved, the severity of the injury, and the classification of bodily harm. The results underscore the need for terminological harmonization between clinical and forensic contexts. This harmonized approach promises to enhance the reliability and interpretability of injury documentation, facilitating more effective collaboration between the clinical and forensic domains.

References:
· Cabré, T. (2023). *Terminology: Cognition, language and communication.* John Benjamins Publishing Company.
· Fogarasi, K. (2011). Sebtípusok és sebjellemzők terminológiája az igazságügyi orvostanban. In I. K. Boda & K. Mónos (Eds.), Az alkalmazott nyelvészet ma: Innováció, technológia, tradíció: *MANYE XX: A XX. Magyar Alkalmazott Nyelvészeti Kongresszus* (pp. 320-327). Debreceni Egyetem, Magyar Alkalmazott Nyelvészek és Nyelvtanárok Egyesülete (MANYE).
· Fogarasi, K. (2014). *Limited forensic assessability of soft tissue injuries: Contrastive terminological analyses of Hungarian, Austrian, and German medical diagnostic reports* (PhD dissertation). University of Pécs.

· Schneider, P., Patonai, Z., Gergely, P., & Fogarasi, K. (2018). Testi sértés vagy emberölési kísérlet? Pontatlan orvosi szakkifejezések használatának hatása a büntetőeljárás kimenetelére. *Belügyi Szemle / Academic Journal of Internal Affairs:* A Belügyminisztérium Szakmai Tudományos Folyóirata, 66(9), 147-163.

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MENTAL ILLNESS: THE IMPACT OF MEDICAL LANGUAGE ON PATIENT IDENTITY AND STIGMA

Keywords:
medical linguistics, psychiatric discourse, mental health stigma, patient identity, ethics in healthcare communication

Abstract:
Language is central to the conceptualisation, diagnosis and treatment of mental health conditions. The manner in which psychiatric conditions are described carries profound ethical and psychological implications. This presentation, theoretical in nature, provides a conceptual framework for understanding how medical terminology, diagnostic labels, and metaphors shape patient identity, public perception, and stigma in mental health discourse. In fact, the language used by healthcare professionals, the media, and social platforms can reinforce or challenge stereotypes, influencing treatment adherence and self-concept.
This session will critically examine key linguistic and ethical issues, including:
The role of psychiatric labels in shaping patient identity and agency.
The impact of metaphors in mental health discourse (e.g., "battle with depression" vs. "chemical imbalance").
The influence of media and social platforms on public attitudes towards psychiatric diagnoses.
The ethical tensions between clinical precision and empathetic communication in psychiatric practice will also be examined.
The discussion will be informed by interdisciplinary research in medical linguistics, psychology, and bioethics, with a focus on how shifts in language, for example, the transition from "schizophrenic" to "person with schizophrenia" reflect evolving attitudes toward mental health. The presentation's overarching objective is to provide a theoretical foundation to support future qualitative and quantitative research in this domain.
The objective of this discussion is to foster a more profound comprehension of the ethical obligations in psychiatric communication, underscoring the necessity for language that is both clinically precise and sensitive to the lived experiences of individuals with mental health conditions.

References:
· Sontag, S. (1978). *Illness as Metaphor*. McGraw-Hill Ryerson Ltd., Toronto.
· Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. Penguin Books
· Sartorius, N. (2002). Iatrogenic stigma of mental illness. *BMJ,* 324(7352), 1470–1471., 10.1136/bmj.324.7352.1470
· Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology,* 27, 363–385. https://doi.org/10.1146/annurev.soc.27.1.363

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EXPLORING MEDICAL RESIDENTS' ATTITUDES TOWARD INCLUSIVITY, DIVERSITY AND EMPATHY: FIRST STEPS INTO A SURVEY DESIGN AND ANALYSIS

Abstract:
Nursing education has long emphasized principles of inclusivity, diversity, and, more generally, empathy, as fundamental professional values of nursing practice (Bas-Sarmiento et al., 2017; Moorley & West, 2022), providing valuable frameworks for medical curricula. However, while medical schools in the US and the UK have been explicitly incorporating inclusivity, diversity, and empathy in their curricula, medical programmes in Italy are still striving to integrate these elements. This calls for more research-informed interventions, which find a natural place within Language for Specific Purposes (LSP) courses, due to their focus on communication skills. Drawing from the scarce and recent available literature (Heidari et al. 2024; Shah et al. 2024), the paper presents 1) the design process that went into a survey of medical doctors' attitudes toward empathy, inclusivity, and diversity, targeting 359 medical and surgical residents from 29 different specialties and years at a medical school in Milan, and 2) preliminary results of the piloting phase. The survey aims to test residents' knowledge and awareness of key concepts, e.g., diversity, their experience in medical education and clinical practice, their attitude towards relationship-driven healthcare, and understanding of professionalism in relation to these concepts. It is hoped that the discussion of the survey items and the insights gained during this piloting phase can help translate empathy, inclusivity and diversity to the LSP classroom (e.g. English for Medicine) and ultimately to specific training. The survey also poses the basis for interprofessional research and collaborative teaching, particularly with engineering schools, where awareness of the importance of empathetic education is growing (Afroogh et al. 2021).

References:
· Afroogh, S., Esmalian, A., & Donaldson, P. (2021). Empathic design in engineering education and practice. *Sustainability,* 13(7), 4060. https://doi.org/10.3390/su13074060
· Bas-Sarmiento, P., Fernández-Gutiérrez, M., Baena-Baños, M., & Romero-Sánchez, J. M. (2017). Efficacy of empathy training in nursing students: A quasi-experimental study. *Nurse Education Today*, 59, 59–65. https://doi.org/10.1016/j.nedt.2017.08.012
· Heidari, A., Joshi, S., Ahmed, M. H., Mahmoud, I., O'Dowd, J., Selway, J., Phillips, O., & Taha, M. H. (2024). Student perspectives of equity, diversity, and inclusion in the curriculum of a UK medical school: A mixed-methods study. *Journal of Education and Health Promotion,* 28(13), 484. https://doi.org/10.4103/jehp.jehp_297_24
· Moorley, C., & West, R. (2022). Inclusivity in nurse education. Evidence-Based Nursing, 25(3), 75–76. https://doi.org/10.1136/ebnurs-2022-103570
· Shah, D., Behravan, N., Al-Jabouri, N., & Sibbald, M. (2024). Incorporating equity, diversity and inclusion (EDI) into the education and assessment of professionalism for healthcare professionals and trainees: A scoping review. *BMC Medical Education,* 24, 991. https://doi.org/10.1186/s12909-024-05981-3

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(MIS)USE OF MACHINE TRANSLATION IN U.S. PUBLIC HEALTH DEPARTMENT WEBSITES

Keywords:
healthcare translation, machine translation, translation quality, public health translation, website translation

Abstract:
In our digitalized world, it is not uncommon for departments of Public Health in the U.S. to make information of interest readily available on their websites. In attempts to reach linguistic minorities, some of these departments offer partially or totally translated websites, but the non-English versions are often created with machine translation (usually Google Translate).

While machine translation offers undeniable advantages in terms of cost, time and efficiency, it can also lead to target texts that are unnatural, incorrect, difficult to understand or hard to navigate, which invalidates the whole purpose of the webpage. This presentation will share the main findings of a study undertaken in the U.S. that used the MQM/DQF model (Lommel, 2018) to assess the quality of the Spanish texts published on the websites of 25 departments of Public Health at the state level. In terms of typology, most of the errors encountered signaled accuracy and fluency problems. In terms of severity, minor and major errors were the most frequent. By reviewing some of the findings and examples of this study, we will discuss what the main issues are when machine translation is used in the context of public health websites and potential strategies that could be used to mitigate them.

References:
· Lommel, A. (2018). Metrics for translation quality assessment: A case for standardising error typologies. In J. Moorkens, S. Castilho, F. Gaspari, & S. Doherty (Eds.), *Translation quality assessment* (pp. [insert page range if known]). *Machine Translation: Technologies and Applications* (Vol. 1). Springer. https://doi.org/10.1007/978-3-319-91241-7_6

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HEALTH AND COMMUNICATION: A COMPARISON BETWEEN ITALIAN AND SPANISH

Abstract:
Communication about an exceptional public health situation, such as the COVID-19 pandemic, represents a very interesting field of investigation for linguists, as in that circumstance the scientific strictness had necessarily to be balanced with the effectiveness and persuasiveness of the information transmitted to the population to contain and prevent the diffusion of the virus.
Starting from these premises, we propose an analysis concerning the affinity/diversity in health communication between two European countries, Spain and Italy, developed on two levels:
1. examine the official (written) instrument, of legal-administrative nature, with which the national state of emergency was sanctioned, the Real Decreto 463/2020 of 14 March 2020 and the Italian Prime Minister Decree of 9 March 2020;
2. explore the (oral) speech with which President Conte and President Sánchez illustrated to their respective parliamentary assemblies in the first quarter of 2020 the emergency situation of their respective countries, to justify the necessity of launching containment measures.
By comparing written and oral modes, our objective is to bring out the discursive affinities and differences between the selected texts, with which authorities tried not only to explain the virus and its effects, but also to persuade the two populations of unavoidable restrictive measures of the individual and collective freedoms.
From a methodological point of view, the proposal is divided into two main phases: 1) analysis of the legal-administrative language (written documents) according to the criteria of textual structure, technical vocabulary, legal expressive system; 2) analysis of the political discourse (oral) according to the criteria of rhetorical strategies and emotional style.
The underlying hypothesis is that the possible differences in health communication are not only a linguistic and stylistic issue, but also the consequence of the different cultural and political traditions and government strategies of Italy and Spain. These differences could have influenced the way in which the respective populations perceived and reacted to the containment measures.

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EXPLORING A WEB-BASED LANGUAGE LEARNING TOOL FOR IMPROVING ISIZULU DOCTOR-PATIENT COMMUNICATION

Keywords:
isiZulu clinical communication skills, doctor-patient communication, language barriers, LSP, students' perception

Abstract:
IsiZulu is an official South African language spoken by 62% of the KwaZulu-Natal (KZN) population. At the Nelson R Mandela School of Medicine, University of KwaZulu-Natal (UKZN), a mandatory medical-specific isiZulu module is offered to Year 1 Bachelor of Medicine and Bachelor of Surgery (MBChB) students to equip them with essential language skills for doctor-patient communication. However, students struggle to communicate with isiZulu-speaking patients during their clinical years (Years 4-6). This paper presents the development of a three-year web-based isiZulu learning tool to enhance clinical communication skills. The tool was based on analysing students' language and technological needs. The needs analysis confirmed a lack of clinical isiZulu content and the urgent need for such resources in Years 4-6. This study explores the role of technology in improving and sustaining isiZulu clinical communication skills. The tool design draws on second language (L2), computer-assisted language learning (CALL), and language for specific purposes (LSP) principles. This qualitative study investigated students' perceptions of the tool during the clinical years relating to language barriers. Using data from a pilot study, participants (Year 2-6 MBChB students who completed the Year 1 isiZulu module) voluntarily completed a Google Forms questionnaire. Ethical clearance was obtained to conduct the study. Despite a low response rate (n=66/338), the data highlighted the scarcity of isiZulu clinical resources. Further evidence was provided by participants expressing the need for learning more in-depth isiZulu for communication with patients at the final year level. Given that the Year 1 module covers the basic history-taking and examination, the needs analysis indicated that the doctor-patient consultation must include investigations, management and follow-up consultations. Additionally, participants highlighted the need for more specific advanced vocabulary related to the different systems, such as cardiovascular and endocrine systems.

The respondents further emphasised the need to continue isiZulu within the clinical years of study through more quizzes and simulated doctor-patient simulations. Regarding the technological needs, participants preferred using their laptops to access the online resources. However, the web learning tool is also mobile-friendly.

Based on the findings of this project, more research in isiZulu medical translation, and content development are warranted to strengthen isiZulu clinical communication in health sciences.

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PRECISELY IMPRECISE: THERAPEUTIC MISCONCEPTION IN PRECISION ONCOLOGY TRIALS

Abstract:
Theoretical Background:
The language surrounding precision medicine shapes both its perceptions and practical applications. The National Cancer Institute (NCI) defines precision medicine as "a form of medicine that uses information about a person's genes, proteins, environment, and lifestyle to prevent, diagnose, or treat disease."
However, contemporary precision oncology trials primarily rely on next-generation sequencing (NGS) to match cancer therapies to specific genetic profiles, reducing "precision" to a genetic focus while neglecting the broader biological and environmental factors described in the definition above. This semantic narrowing creates a linguistic misalignment between the term's intended meaning and its clinical application, leading to potential therapeutic misconception, where patients, clinicians, and researchers overestimate the accuracy and individualization of treatments. How "precision" is used, misused, and interpreted in medical discourse is a critical ethical concern in modern oncology trials.
Research Methods and Materials:
We analyze the evolving discourse of "precision" in oncology, following its conceptual shifts from early personalized medicine frameworks to modern NGS-driven trials. A detailed examination of key NCI-led precision trials provides insight into how trial design and terminology influence stakeholder expectations. We assess inconsistencies in trial definitions, ethical implications, and the potential for misleading interpretations.
Results:
NGS-based trials claim to personalize treatment but often fail to encompass cancer's full complexity, contributing to an illusion of clinical certainty. The NCI trial series demonstrates the evolving yet inconsistent application of "precision," revealing how language shapes both scientific practice and generates ethical challenges. Over time, precision trial designs have improved, yet the rhetorical framing of precision medicine may continue to generate misconceptions that warrant further scrutiny. We propose a clearer classification of these trials, recommending terms like "genomic-guided" or "mutation-driven" to represent current precision oncology approaches more accurately, and without overstating their potential.

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PAIN TALK AS IDENTITY WORK: CHRONIC MIGRAINE SUFFERERS' DISCOURSE

Abstract:
Pain is a complex physical and mental experience, carrying profound meanings for both individuals and society. While acute pain is usually perceived as physically objective, chronic pain is a culturally marked category, blurring the boundary between the 'healthy' and the 'sick'. As such, it is endowed with moral judgments and entangled with questions of social recognition, shame and stigma, raising profound identity issues. Taking pain, like emotions in general, as a cultural construct, we examine chronic pain as a channel of constructing personal and group identities. Particularly in the absence of biological markers, culturally available discursive resources are central to communicating chronic pain. Focusing on accounts of women suffering from chronic migraine, we analyze their discursive identity work as 'a person in pain'. The present analysis is based on nine long in-depth interviews (lasting ca 75 minutes each) with Israeli participants of urban and semi-urban residence places, of different ages (between 26—63) and occupational and familial backgrounds, with the only criterion for participation being a chronic migraine diagnosis of at least two years. We employ conversation and narrative analysis techniques, notably interactionist analyses of identity talk, focusing on natural talk moral appraisals.

Analysis reveals that participants assign considerable meaning to chronic pain as a key means of navigating complex (negative and positive) identity strategies, oscillating between acceptance and rejection of the 'sick person' role in their immediate and broader social environments (family, work, etc.). It points at the existence of a shared repertoire of a 'chronic migraine sufferer' identity – despite the absence of a distinctly identified group that would orchestrate and disseminate it through personal ties. Participants report ambiguity surrounding the socio-cultural position of migraine as an invisible illness, confronting de-legitimization of their pain experience and coping with mistrust of their self as sufferers.

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A COMPARATIVE ANALYSIS OF AUTOPSY TERMINOLOGY IN AUSTRIA AND HUNGARY

Keywords:
comparative terminological analysis, injury, forensic autopsy reports, clinical findings, medical documentation

Abstract:
Research has shown that medical records often lack sufficient detail for accurate forensic assessment of injury mechanisms and weapons, particularly for soft tissue injuries in Hungary, Austria, and Germany (Fogarasi, 2012; Walz et al. 2023; Gyenes et al. 2024). To identify best practices in injury documentation, we analysed forensic autopsy reports, which provide more detailed descriptions of injuries than clinical records due to time constraints in medical settings. Although autopsy reports document injuries postmortem, the types and characteristics of injuries remain consistent with those observed in living patients.

Our study examined 79 forensic autopsy reports from the University of Graz and 100 reports from the Department of Forensic Medicine, University of Pécs. Using IBM SPSS Statistics 22, we conducted a comparative analysis of injury descriptions, focusing on the number of details recorded and the terminology used. We assessed whether the level of detail in the forensic autopsy report is consistent across cultures by injury type. The results reveal country-specific differences in injury documentation, particularly in terminology and the level of detail provided. This study identifies standardized terminology for soft tissue injuries and their defining characteristics. The results suggest that the number of characteristics per injury is higher in Hungarian reports and in Austrian reports, more synonyms are used to describe soft tissue injuries than in Hungarian.

Knowing the standards of each country makes it easier to conclude what level of detail would be expected in clinical documentation in order to standardise the diagnostics at European level. If implemented, these findings could enhance the quality of clinical documentation for forensic purposes, bridging the gap between medical and forensic assessments.

References:
· Fogarasi, K. (2012) *Limited Forensic Assessability of Soft Tissue Injuries. Terminological Analyses of Hungarian, German and Austrian Medical Diagnostic Reports*. PhD dissertation, University of Pécs, Faculty of Health Sciences
· Walz, C., Schwarz, C. S., Imdahl, K., Steffan, C., & Germerott, T. (2023). Comparison of the quality of clinical forensic examination of victims of physical violence conducted by clinicians and forensic examiners. *International journal of legal medicine,* 137(6), 1777–1786.
· Gyenes, G., Patonai, Z., Germerott, T., Walz, C., Fogarasi, K. (2024) Comparative Terminological Analysis of Injury Descriptions Created by Clinicians and by Forensic Experts Based on Clinical Photographs in Germany. *Semmelweis Medical Linguistics Conference 2024: Book of Abstracts: Implementation of Patient-centered Research Trends*, 17–17.
· Gyenes, G., Császár, J., Fogarasi, K., Simon, G., Patonai, Z. (2023) Comparative Terminological Analysis of Injury Descriptions in Hungarian Clinical Records and Forensic Medical Autopsy

Reports. *Semmelweis Medical Linguistics Conference 2023: Impact of Sociocultural Factors on Health Communication Hybrid Conference.* 30.

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OPTIONS IN THE DIAPHASIC INTRALINGUAL TRANSLATION OF MULTI-WORD MEDICAL TERMS: FUNCTIONALIST AND PEIRCEAN PERSPECTIVES COMBINED

Keywords:
diaphasic intralingual translation, multi-word terms, medicine, paradigmatic options, systemic-functional linguistics

Abstract:
Situated at the crossroads between Intralingual Translation Studies and terminological research, this paper investigates the reformulation of English multi-word medical terms into layman's expressions. While a case of diaphasic, or interregisterial, intralingual translation, the rewriting in many cases features an interlingual aspect also, since the majority of medical terms originate in either Latin or Greek but are replaced by items on the target side that (in most cases) belong to a core English vocabulary. Theoretically, the investigation combines a functionalist approach to (the study of) translation with Meylaerts and Marais' (2023) Peircean translation theory. Based on the functionalist emphasis on the centrality of choice in translation, the investigation charts the translational options, i.e. the micro-level strategies at the intralingual translator's disposal, deducible from a sample of around 250 paired source-target items. The sample originates, not in actual texts, but in a single document entitled Medical Terms Simplifier, published by the European Medicines Agency (EMA) (2022). The document is a kind of glossary offering intralingual plain-language translations of specialized terms related to medicines use. The Simplifier's translations are thus ready-made expressions that may be used by EMA communication specialists when drafting lay-oriented materials, such as Patient Information Leaflets.

  Using notation from Systemic-Functional Linguistics, the translational options charted in the sample will be diagrammed as interrelated paradigmatic sets. From Meylaerts and Marais' Peircean translation theory is adopted the key notion of translational orientation, which holds that translation may be oriented towards the representamen (the vehicle or 'surface' of the source sign), the interpretant (meaning) or the object (the 'external reality' referred to by the sign). The investigation charts how two basic options, viz. representamen and interpretant translation, underpin the more specific options identified in the corpus. At the representamen level, a number of micro-level strategies familiar from Translation Studies are identified, such as literal translation, synonymy and superordination. At the interpretant level, the translational options identified are shown to primarily consist in the specification of circumstantial elements and semantic participants.

References:
· Meylaerts, R., & Marais, C. (Eds.). (2023). *The Routledge Handbook of Translation Theory and Concepts*. Routledge.
· European Medicines Agency. (2022). *Medical Terms Simplifier*. <https://www.ema.europa.eu/en/documents/other/ema-medical-terms-simplifier_en.pdf> Accessed 14-01-2025.

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MULTIFOCAL DIDACTIC APPROACH TO ESP TEACHING AT THE FACULTY OF MEDICINE IN PILSEN

Abstract:
As teachers of medical English at the Faculty of Medicine in Pilsen, we face multiple challenges concerning the didactics of teaching and the design of teaching materials. In our workshop, we would like to give you some practical examples of typical classroom activities focused on medical English and present our teaching materials specially designed for the needs of our students. Our main objectives are to present and illustrate our multifocal approach to language teaching and share and discuss our findings and experiences with other ESP teachers. Workshop activities include: spelling and pronunciation exercises, describing organ shapes, medical communication and history taking, active listening, usage of medical and lay terms, medical abbreviations, role play – taking medical history and making diagnosis.

As 75% of medical terminology is of ancient Latin or Greek origin, we also have to rely on our students' knowledge of Latin and explain the correct usage of this terminology in the English language. Apart from teaching English, we also teach some medical content, as most of our students are freshmen with little knowledge of anatomy or other medical topics. At the same time, we need to integrate the training of other basic language skills.

It has been our goal to improve the language skills of our students in such a way that enables them to reach a C1 level of the Common European Framework of Reference for Languages by the end of the course. As future doctors, our students need to be able to communicate on a global scale and also need to develop good communication skills for doctor-patient interaction.

Taking into consideration the growing tendency toward globalization, we also try to integrate sociocultural information into our teaching and materials to boost our students' intercultural competence. Based on our needs analysis and in order to integrate all the above-mentioned aspects and requirements, we have prepared tailor-made textbooks and specially designed e-courses for studying and practising grammar skills in a medical context.

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DISCURSIVE RECONSTRUCTION OF TRAUMATIC EXPERIENCES: INSIGHTS FROM YOUNG REFUGEES' LANGUAGE BIOGRAPHIES

Keywords:
language, trauma, multilingualism, migration, narration

Abstract:
In this talk, I explore how young refugees from Afghanistan discursively reconstruct their traumatic experiences. My analysis draws on data from 32 language biographical interviews I conducted between 2018 and 2020. These interviews, while primarily focused on participants' language biographies, also revealed significant insights into the traumatic experiences they endured during their journeys of displacement.

Adopting a discourse psychology perspective, I examine how these traumatic events are recounted. I argue that the oral reporting of such experiences adheres to distinct linguistic patterns at both macro-linguistic and micro-linguistic levels (cf. Luno et al., 2013; Scheidt et al., 2015; Stukenbrock, 2015). This argument is supported through case studies of discursive reconstructions provided by two Afghan refugees from my interview corpus.

In the analysis, I focus on several linguistic features: the surface structure of the discourse, the linguistic linkage between individual episodes, and the lexical and semantic choices (cf. Luno et al., 2013: 2957). Particular attention is given to the participants' formulation processes in German, the target language, and the communicative strategies they employed.

One key finding is the strategic use of linguistic oppositions, such as spatial and temporal deictic juxtapositions, to highlight the relevance of specific moments in the traumatic event. From the perspective of discursive structure and discourse psychology, the reconstruction often centers around reminiscences of periods preceding and following the traumatic event itself.

Through this talk, I aim to shed light on the intricate relationship between migration-related trauma and linguistic strategies in the discursive reconstruction of traumatic experiences, particularly in the context of learning and using a new language.

References:
· Luno, J. A., Beck, J. G., & Louwerse, M. (2013). Tell us your story: Investigating the linguistic features of trauma narrative. *Proceedings of the Annual Meeting of the Cognitive Science Society, 35*. https://escholarship.org/uc/item/95n9p15n
· Scheidt, C.-E., Lucius-Hoene, G., Stukenbrock, A., & Waller, E. (2015). *Narrative Bewältigung von Trauma und Verlust*. Schattauer.
· Stukenbrock, A. (2015). Verlustnarrative im Spannungsfeld zwischen erzählter Situation und Erzählsituation: Linguistische Fallanalysen. In C.-E. Scheidt, G. Lucius-Hoene, A. Stukenbrock, & E. Waller (Eds.), *Narrative Bewältigung von Trauma und Verlust* (pp. 76–93). Schattauer.

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The Medical Terminology Teaching Rhapsody: Problems Observed by Classicists in North America

Abstract:
In North America, medical terminology is typically taught at the undergraduate level by classicists, people like us, who teach Ancient Greek and Latin. Most courses, whether taught by classicists or scientists, focus too much on memorizing and not enough on understanding the formulaic logic and structure underlying these terms. However, our approach presents students with the most important roots from which the vocabulary of medicine has been made, and demonstrates to them the predictable patterns by which these roots combine in English clinical terminology.

Another problem is that most medical terminology courses in North America do not teach students the Latin anatomical terminology of the TA. Here, again, our teaching approach does things differently, for we are advocating for bringing the TA back into the classroom.

This presentation will show examples of how we teach medical terminology in the classroom and will include a discussion of problems that we, as classicists, have observed both in the in terminology itself and in the way it is taught in North America.

One of the first things that we need to teach is the distinction between adjectives and nouns, since both students and even some specialists lack a basic knowledge of this important concept, leading to mistakes in translation and interpretation.

Our main guiding principle is that we teach formulas for putting words together logically. Take the phrase pseudoalcoholic hepatitis – we translate this as "the inflammation of the liver, falsely pertaining to alcohol". Here, a carefully constructed formulaic approach clarifies the abstract meaning of the adjective, while a seemingly possible alternate interpretation, "pertaining to false alcohol", is wrong.

A particular challenge that we all face is how to balance the Greek forms used in clinical terminology with the Latin used in anatomical terminology (i.e. rhin/o & nas/o). The Latin anatomical noun nasopharynx provides another example our methods. Very often people transliterate this term without appreciating how it is built and what it means: "the part of the pharynx involving the nose". Literal transliteration is one of the major problems we work toward remedying, since surprisingly far too many students do not know the meaning of certain combing forms. This is especially seen with a comparative locative such as anterior, which is misunderstood as "back/rear" by students who have never been invited to use the more colloquial English "front".

One particular problem that exists within English medical terminology is the reckless use of the terminations -genic and -genous. They used to have distinct and opposing meanings (active v. passive, respectively), but now they are seemingly used interchangeably.

We look forward to hearing about the challenges that you face with respect to medical language education, and we hope to build connections between all of us involved in teaching medical language – from all levels and specializations.

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EST-CE QUE VOUS PARLEZ TA2? TRANSLATING ANATOMICAL TERMINOLOGY INTO FRENCH

Abstract:
Despite its significance, no officially recognized French translation as of yet exists for the Terminologia Anatomica 2. To fill this gap, our pan-Canadian team of anatomists (including one Latinist – me) has embarked on a two-year project to establish French equivalents for all 7,113 Latin terms of the TA2.

Until recently (1976) French had its own system, the Classic French Nomenclature, which favoured using Greek roots over Latin ones for anatomical terminology. In creating our current French equivalents of the TA2, we are striving for alignment with Latin and English, but sometimes long-established French terms still prevail due to their deep-rooted usage.

Here is an example of the problematic terminology we encounter. At the center of the anterior arch of the atlas (the vertebra C1), there is a pit that accommodates a projection from the vertebra below (the C2 or axis), which is called the fovea dentis in Latin and the "facet for dens" in English. Frequently, English anatomical terminology would simply transliterate fovea—which literally means "pit" or "hole"—whereas "facet" is more commonly a translation of facies. In contrast, the French equivalent of fovea dentis is "fossette articulaire odontoïde" (literally, "small articular pit resembling a tooth"). This discrepancy is significant, because a "facet for dens" refers to a surface, whereas "fossette articulaire odontoïde" designates a cavity.

Moreover, in the French term "fossette articulaire odontoïde", the adjective "odontoïde" qualifies "fossette" (the fovea), implying that the hollow itself resembles a tooth, which is an inaccurate description. In reality, "odontoïde" refers to the dens axis, or "la dent de l'axis", which is the part that protrudes into the atlas. In older French anatomical nomenclature, this structure was called "apophyse / processus odontoïde" (literally, "a projection resembling a tooth"). The French term is therefore poorly constructed and should be fully modernized as "fosse articulaire pour la dent de l'axis" (literally, "articular fossa for the dens of the axis"). This revised term correctly designates the dens axis as "la dent de l'axis", avoids the unnecessary diminutive "fossette" (which would be foveola in Latin), and accurately represents the grammatical relationship between fovea and dens using a dative construction ("pour la dent"). The Atlas d'anatomie humaine by Netter already employs "fossette pour la dent", but unfortunately not all anatomical reference books follow suit. Latin anatomical terminology only allows for nouns and adjectives in the nominative and genitive cases, and vernacular equivalents tend to mirror these constraints, which create a challenge for constructing French equivalents.

Another difficulty lies in the numerous doublets and triplets that are unique to French terminology. For example, crus can be translated into French as "racine", "pilier", or "branche", yet "branche" also corresponds to the Latin ramus, and "racine" to radix. Additionally, French diverges from English with respect to certain forms such as the use of "appareil" instead of "système" in some TA2 titles, while Latin and English both consistently use the word system.

A final example that illustrates some of these problems involves the terms "rétinaculum patellaire latéral" and "aileron rotulien externe", both of which are commonly used as equivalents for retinaculum laterale patellae. The French "rétinaculum" replaces what is still often called an "aileron", but sometimes it also replaces what used to be called "un ligament". The updated Latinized "patellaire" should replace "rotulien", even though both adjectives are still used in the

real world, contrary to the biunivocity rule of terminology.

In this paper, I review some of the pitfalls we have encountered, some of my proposed solutions as a Latinist, and the role of Latinists in general within anatomical terminology – especially with respect to the French-speaking world.

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A Critical Study of the Nomina Anatomica Veterinaria (the Latin Anatomical Naming System for Animals)

Abstract:
Theoretical Background: This study explores the anatomical naming system used in veterinary medicine (Nomina Anatomica Veterinaria, NAV) and its comparison to the system used in human anatomy (Terminologia Anatomica, TA2). While the TA2 is known for its precise, structured terminology, the NAV offers a less standardized approach and leaves out important aspects such as vernacular (English) equivalents. Our investigation delves into the inconsistencies, individual variability, and curious differences between these two systems, particularly with terms like "cranial" and "caudal," which seem conceptually similar but are applied differently.

Research Methods and Materials: We conducted an analysis of the NAV (6th edition) and a review of the limited critical literature published on the theme.

Results and Discussion: No critical review of the Latin used in the NAV seems to be in existence, and our study focuses on inconsistencies and curiosities that need to be resolved such as the use of bucca and mala, and the use of rostrum. Addressing these inconsistencies is critical, not only for veterinary professionals but also for broader medical communication, ensuring a clear, standardized understanding of anatomical terminology. This investigation serves as an initial exploration into the complexities and potential gaps within veterinary anatomical language, with a call to move toward a more structured and cohesive naming system.

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Hedges with verba dicendi et sentiendi in oncological doctor-patient interactions

Keywords:
oncological interaction, doctor-patient communication, hedges, cross-linguistic analysis, (un)certainty

Abstract:
The planned poster will present the result of a collaboration between Hungarian, Russian and German researchers in medical communication, who have collected comparative data of Hungarian, Russian and German oncological doctor-patient interactions. On the basis of an empirical analysis of these data, we will show how often doctors, patients and accompanying persons to these patients (sons and daughters, parents, husband or wife) use hedging formulae of the type I think, I hope, I assume etc. in (uro-)oncological consultations, comparing doctors' hedging practices in German (199,182 tokens), Russian (72,199 tokens), and Hungarian (46,051 tokens). The concept of hedges was introduced by Lakoff (1973) to describe linguistic structures with which to mark "degrees of truth" (Lakoff 1973) as well as epistemic certainty ("weaker than knowledge"; van Elswyk, 2024). One common means for hedging is the use of attitude verbs like think or guess, evidential verbs like seem or hear or speech act verbs like conjecture or propose (van Elswyk, 2024) and also modal verbs such as can (not) or must (not). In medical interactions, such hedges with verbs in the first person singular are often regularly by doctors to stress the uncertain nature of future events such as the success of the therapy, the extent of side-effects or the accuracy of the diagnosis, but also to express subjectivity, i.e. to mark conjectures, 'educated guesses' or personal wishes. Our data show that all three languages show similar patterns of doctors' hedging in comparable situations. It will be shown that the hedging formulae are used differently in the three languages, and a cross-linguistic comparison will offer insights for both researchers in medical communication and communication organization in general as well for those working in the field of medical translation.

References:
· Lakoff, G. (1973). Hedges: A study in meaning criteria and the logic of fuzzy concepts. *Journal of Philosophical Logic, 2*, 458–508.
· van Elswyk, P. (2024). Hedging in discourse. *Synthese, 204*, 1–31.

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KIDNEY DISEASES, IN PARTICULAR THE DIAGNOSES AND SYMPTOMS OF BRIGHT'S DISEASE (MORBUS BRIGHTII), IN 19TH-CENTURY AUTOPSY REPORTS

Keywords:
historical and modern autopsy reports, morbus Brightii, kidney diseases, neologism, terminological necrology

Abstract:
In our interdisciplinary diachronic research, we examine the state of pathological terminology in the 19th century from linguistic, terminological, and medical perspectives, and explore its relationship with contemporary medical documentation. Our focus lies both on the changes in medical language and on those features that have remained consistent over the centuries.
In the current phase of our project—building on earlier investigations into the anatomical and pathological descriptions of the brain, liver, and lungs (Ittzés et al., 2024a, 2024b, 2023)—we have turned our attention to the terminology related to kidney diseases. Our analysis is based on the manual examination of 337 historical autopsy reports from the Archives of Semmelweis University, dating back to the 1800s.
A central aspect of our investigation is the comparison between Latin diagnoses and Hungarian-language pathological descriptions. This method allowed us to focus in particular on the historical description of Bright's disease, a 19th-century umbrella term for various nephritic conditions of differing origins and courses (Peitzman, 2015). These conditions have since been reclassified under distinct diagnostic categories, and the terms Bright's disease, Bright's kidney disease, and Bright-type nephropathy are no longer in use in modern medical practice (Larson, 2008).
We provide selected examples to illustrate this terminological shift in 20th- and 21st-century medical documentation. Our study also addresses the role of eponymous terms in Latin pathological nomenclature, and the occurrence of Bright's disease in Hungarian texts. Notably, the autopsy reports we analyzed predate the previously known earliest Hungarian reference to Bright's disease (1870), thus contributing new data to the history of the disease's documentation in Hungary.
As nephrology has advanced, so too has its terminology. In addition to examining terminological neologisms, we address the phenomenon of controlled formal necrology (Picton, 2014), illustrating how shifts in terminology mirror broader transformations in medical knowledge and classification systems.

References:
· Ittzés, D., Szabó, M., Zalatnai, A., & Fogarasi, K. (2024a). A májjal kapcsolatos érzékszervi észleletek terminológiája 19. századi és jelenkori kórboncolási jegyzőkönyvekben. In K. Fogarasi, D. Ittzés, & D. Mány (Eds.), *Tudásmegosztás, információkezelés, alkalmazhatóság: I. Nyelvhasználat* (pp. 89–99). Akadémiai Kiadó.
· Ittzés, D., Szabó, M., Fogarasi, K., & Zalatnai, A. (2024b). Depiction of the brain then and now: Synchronic and diachronic terminology of 19th and 21st century Hungarian autopsy reports. In K. Fogarasi & D. Mány (Eds.), *Semmelweis Medical Linguistics Conference 2024: Book of abstracts. Implementation of patient-centered research trends.*
· Ittzés, D., Szabó, M., Zalatnai, A., & Fogarasi, K. (2023). Hungarian-English-German comparative

terminological analysis of descriptions and diagnoses of lung alterations in autopsy reports. In K. Fogarasi & D. Mány (Eds.), *Semmelweis Medical Linguistics Conference 2023: Impact of sociocultural factors on health communication hybrid conference* (p. 32).

· Larson, D. (1993). Glomerulonephritis (Bright's disease). In K. F. Kiple (Ed.), T*he Cambridge world history of human disease* (pp. 746–749). Cambridge University Press.

· Peitzman, J. (2015). From Bright's disease to chronic kidney disease. In P. L. Kimmel, M. E. Rosenberg, & S. Steven (Eds.), *Chronic renal disease* (Chapter 2, pp. 7–19). Academic Press.

· Picton, A. (2014). The dynamics of terminology in short-term diachrony: A proposal for corpus-based methodology to observe knowledge evolution. In R. Temmerman & M. Van Campenhoudt (Eds.), *Dynamics and terminology* (pp. 159–182). John Benjamins Publishing Company.

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RELATIONAL PRACTICES IN DOCTOR-PATIENT INTERACTION: INSIGHTS FROM PERSIAN OUTPATIENT SECONDARY CARE

Keywords:
doctor-patient interaction, Persian, relational connection and separation, conversation analysis, interactional pragmatics

Abstract:
Doctor-patient interaction (DPI) is the heart of medical consultation visits, playing a central role in medical interviews as a social institution. Talk in this context is organized around goal-oriented activities, with expected constraints and affordances as well as inferences imposed by the medical institution (Drew & Heritage, 2005). While research on DPI is very long-standing (Heritage & Maynard, 2006), the attention to the relational accounts in DPI is very recent (Scarvaglieri et al., 2022). Interactional pragmatics provide insights into the ways relational phenomena are co-constituted in talk-in-interaction (Arundale, 2010, 2020). Arundale´s theory of communicating and relating (2020), specifically, foregrounds how the two omnipresent constructs of relational connection and separation are conjointly co-constituted in interaction. Drawing upon conversation analyses and communicating and relating (Arundale, 2020), this study offers insights into a variety of ways doctors and patients orient to pragmatic actions and meanings and demonstrates how patients' and doctors ' institutional practices are shaped and influenced by their relational practices, particularly relational connection and separation. Evidence is adduced from data in Iranian doctor-patient interactions in secondary outpatient care, representing 150 medical consultations visits, which were audio-recorded and transcribed. The analyses reveal the participants' orientation to normative practices in terms of both pragmatic meaning and action and relational connection and separation. The study offers implications for language and pragmatics of health communication.

References:
· Arundale, R. B. (2010). Constituting face in conversations. Face and facework and interactional achievement. *Journal of Pragmatics*, 42, 2078-2105.
· Arundale, R. B. (2020). *Communicating and relating*. Oxford University Press.
· Heritage, J. (2005). Conversation analysis and institutional talk. In *Handbook of language and social interaction*, R. Sanders, K. Fitch, K. (Eds.) pp. 103–47. Erlbaum.
· Heritage, J., & Maynard, D. W. (2006). Problems and prospects in the study of physician-patient interaction: 30 years of research. *Annual Review of Sociology*, 32(1), 351–374.
· Scarvaglieri, C., Graf, E. M., & Spranz, F. (2022). *Relationships in organized helping: Analyzing interaction in psychotherapy, medical encounters, coaching and in social media* (Ed.), John Benjamins.

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COMMUNICATION AS A KEY COMPONENT IN THE 'TRIANGLE OF TRUST' WITHIN HEALTH SYSTEMS

Abstract:
Concept of trust forms the foundations for medical professionalism, understood as "a set of values, behaviours and relationships underpinning the trust the public has in doctors". In this lecture, we will present three key components of trust, being "evidence", "education" and "communication", indicating core competences of the health and care workforce. Communication can effectively support the decision-making process and the resulting patients' adherence, only if based on reliable evidence and parallelled with education understood as health literacy. The current pace of change, processes of globalisation and migration, health and socio-political emergencies often identified as permacrisis require focusing special attention on effective communication competence at individual and societal levels, aiming at reinforcing One Health understood as health of people, animals and planetary ecosystems.

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Intersections of Verbal, Paraverbal, and Nonverbal Healthcare Communication

Keywords:
healthcare communication, trust, verbal, nonverbal, paraverbal communication

Abstract:
This workshop will further expand the "Communication as a Key Component in the 'Triangle of Trust' within Health Systems" topic, specifically focusing on complexities of verbal, paraverbal and nonverbal communication, seen via the intersectional lens. Workshop participants will discuss the provided case studies and share own experiences related to communication with health professionals at the primary care and hospital settings. We will also reflect on communication in emergencies and on complexities of communication in digital setting. Furthermore, good practice examples of educational interventions in communication in health systems will be shared, with invitation to co-create new curricula in this domain.

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CROSS-CULTURAL COMMUNICATION IN HEALTHCARE

Keywords:
healthcare communication, cross-cultural communication, trust, cultural humility paradigm, prejudice

Abstract:
This workshop will further expand the "Communication as a Key Component in the 'Triangle of Trust' within Health Systems" topic, specifically focusing on complexities of cross-cultural communication. Workshop participants will discuss the development of the cultural humility paradigm as opposed to postcolonial approaches to communication based on harmful stereotypes and prejudice. We will analyse how diverse approaches to feedback giving and receiving, conflict solving, decision making and leading require effective communication from the perspective of elaborated and restricted codes and how to facilitate communication between the low- and high-context cultures.

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How do medical students regulate patients' emotions in medical simulation? A pragmalinguistic study conducted at a Polish medical university

Abstract:
Doctors often perform interpersonal emotion regulation (IER), that is, intensify or reduce emotions in their patients through interaction (see Horton et al., 2022). This helps to, inter alia, build trust between the parties and secure a smooth course of care delivery. Thus, IER is an important doctor's skill and, as such, is taught to medical students, also in simulated training. Students' performance, however, has not been sufficiently investigated in this context. Accordingly, the aim of the current study was to explore the locutionary, illocutionary and perlocutionary aspects of IER-related speech acts in medical simulation.
Each of simulated doctors (n = 12), who were recruited among students at a Polish medical university, completed a simulation session and an interview on their IER performance therein. Both simulations and interviews were audio-recorded. The former were subjected to pragmatic, whereas the latter to thematic analysis.
The analyses revealed that simulated doctors adopted various speech acts, for example, they acknowledged the doctor – patient relationship, warned against the consequences of emotional behaviour and asserted the staff's good expertise to perform IER. We identified lexical (e.g., metaphors) and grammatical (e.g., comparative constructions) features that were often part of relevant speech acts. Medical students also relied on non-propositional communication to facilitate emotional contagion, for instance, they adopted a steady voice to reduce anger in simulated patients (see Wharton and de Saussure, 2023).
In conclusion, the implications for medical education will be discussed

References:
· Horton, A., D. Holman, & Hebson, G. (2022). Occupational and physical therapists' use of intrapersonal and interpersonal emotion regulation strategies during patient interactions: A qualitative study. *The American Journal of Occupational Therapy* 76(5), 7605205010. https://doi.org/10.5014/ajot.2022.048199
· Wharton, T., & de Saussure, L. (2023). *Pragmatics and emotion.* Cambridge University Press.

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INVESTIGATING OMISSION IN THE THE ARABIC TRANSLATION/ADAPTATION OF ENGLISH PATIENT INFORMATION LEAFLETS (PILS): A CASE STUDY

Abstract:
The study aims to show that the official patient information leaflets (PILs) in Arabic have some serious errors compared to their English originals, and these findings will hopefully draw the attention of authorities in Arab countries.

The study has sampled conveniently 21 PILs, checked their Arabic translations against their English original texts and found misinformation or some missing information due to some omissions. These omissions are serious errors and amount to 52% of the total errors found in these PILs. Two types of omissions were identified in the PILs: full omissions and partial omissions. The study observed that these omissions were recurrent between 1 and 8 times in a single PIL. Examples of both types were given and discussed. In addition to missing translations, other serious errors identified in the PILs, and subsequently classified were incorrect equivalents and sense. The study found that there were 71 % missing translations and/or incorrect equivalents and/or sense errors. Furthermore, 'cultural filtering' as defined by House (2015), the study found, can be used through paraphrasing.

The current study argues that any lack of information in the Arabic target text (TT) can result in potential consequences for the patient's health, this was confirmed by a bilingual pharmaceutical expert. It is likely that 'adaptation' which is rightly described as "an abusive form of translation" by Vandal-Sirois & Bastin (2021), is used. Under this strategy, the techniques of summarising, paraphrasing and omission were used, and they were earlier identified by Bastin (2020); however, the current study focused on omission and found it to be unreliable because it would provide Arabic-speaking patients with misinformation or lack of information; therefore, the study suggests a formal body needs to review the accuracy of the Arabic PILs.

Further research can focus more on summarising and paraphrasing under 'adaptation'. Also, future research can examine other linguistics issues such as grammar, style and typos which were also found in the PILs, but were not considered because they were minor errors.

References:
· Bastin, G. L. (2020). Adaptation. In M. Baker & G. Saldanha (Eds.), *Routledge encyclopedia of translation studies* (pp. 10–13). Routledge.
· House, J. (2015). *Translation quality assessment: Past and present*. Routledge.
· Vandal-Sirois, H., & Bastin, G. L. (2012). Adaptation and appropriation. In L. Raw (Ed.), *Translation, adaptation and appropriation* (pp. 21–41). Bloomsbury.

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THE CONSTRUCTION OF EXPERT AND AGENTIVE IDENTITIES IN DIABETIC CONSULTATIONS

Keywords:
doctor-patient consultations, asymmetry, expert-patients, diabetes, greeting exchanges

Abstract:
Research on doctor-patient interactions suggests asymmetry and dominance by doctors resulting in unsatisfactory outcomes for patients. For several decades, there have been efforts to address this imbalance, including through doctor-patient partnership initiatives. This study analyses doctor-patient discourse in diabetic clinics following the disease specific Expert Patients Programme, intended to empower patients to better self-manage and communicate with doctors.

Fifteen type 2 diabetic consultations were observed, audio recorded and transcribed using conversational analysis conventions. The conversations were analysed using interactional sociolinguistic methods, focusing on greeting exchanges and delivery of the HbA1C test result, an indicator of blood glucose levels over the three months preceding the consultation.

In previous doctor-patient communication studies, greeting exchanges (e.g., how we [you] doing?) in consultation openings, have be shown to indicate familiarity/ inclusivity/partnership between doctors and patients. In the current study, such greetings also functioned to elicit patients' self-assessment, implicating them as having a shared role with doctors in the management of their diabetes. But as an objective marker of diabetes control, the HbA1C test result was used to denote patients' knowledge as subordinate to medical knowledge, hence, to question and undermine the patient's self-evaluation of good self-management, and thus their status as agentive expert patients.

Despite having trained as 'experts', the power asymmetry persisted for these patients, not least because of disparities in access to information and medical knowledge. Technological advances that enhance patient access to healthcare information may therefore lead to more favourable outcomes.

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Exploring the Reliability of Translation Tools in Translating English Medical Scholarly Texts into Slovak

Keywords:
medical translation, CAT tools, software translation reliability, syntactic challenges, translation errors

Abstract:
As English is the major language for publishing medical research, to secure access to the latest findings, medical practitioners need to be fluent in the language, hire a translator, or rely on translation software. The last option may raise doubts regarding the accuracy of information, especially in the English-Slovak language pair, as Slovak is a minor language for which the translation memory of a translation tool may be inadequate. The research into medical translation is not new – different areas have been tackled (terminology, stylistics). However, the syntactic aspect has not been covered. A corpus of 10 research papers (Methodology section) was compiled based on three criteria: database journal, thematic diversity, and comparable text length. The texts were uploaded to three translation tools – DeepL, Google Translate, and Matecat. The original and translated versions were subjected to the syntactic and translation analyses. The research questions were stated: 1) What are the tendencies in the complexity of the syntactic structure of the original texts and those of the translated texts? 2) What is the ratio of reliability of meaning transfer in certain syntactic structures? Preliminary results suggest Matecat has the least developed database for translating medical texts into Slovak. The English source tends to use long sentences, brackets mid-sentence, and passive voice. These tendencies, along with the confusing translation of general academic vocabulary (e.g., translating "interest" as a financial term), may also lead to serious miscommunication. The presentation will demonstrate these inaccuracies.

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'WHO IS RESPONSIBLE FOR THE HEALTH OF YOUR TEETH?' – AGENT HIDDEN IN GRAMMATICAL STRUCTURES IN PATIENT INFORMATION LEAFLETS

Keywords:
agency, modulation, responsibility, grammatical structures, patient information texts

Abstract:
Who is responsible for the health of your teeth: the dentist, the patient, an implant, or the natural processes in your oral cavity? Every action is performed by an actor, the agent responsible for the action or its consequences. Expressing the agent is not just a grammatical issue but can impact the participants in communication. Making a conscious choice allows (1) directing attention, (2) emphasizing information, and (3) assigning and shifting responsibility. The form of expressing agency is important in patient information texts. The more the agent is eclipsed, the less we know who is acting, which may weaken the trust in the patient-physician dynamic.

My study aimed to gain insight into how different languages express agency. I was looking for grammatical structures available to express the agent and challenges a medical translator faces when translating a patient information text on the Internet. I used mixed methods – both quantitative and qualitative – to map the different structures used in authentic texts. The study was carried out on two corpuses, both the English (1683 words) and the Hungarian text (698 words) describing dental implantation procedures that were chosen from the website of an oral surgery clinic.

To analyze the texts, I manually labelled the structures for expressing or 'hiding' the agent and assigned each structure to the specific agent. Based on the figures, I found that deverbal nominatives were the most frequently used grammatical structure in both the English and Hungarian texts: their share of usage was 29% and 48%, respectively.

The results revealed that the frequency and type of grammatical structures are closely related to the systemic properties of the languages and the specific features of the genre analyzed. The results serve as a good basis for a comparative analysis on a larger corpus.

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FIRST-PERSON CONSTRUCTIONS IN DOCTOR-PATIENT INTERACTIONS

Abstract:
The use of 1st person singular and plural linguistic constructions has been a prominent issue of pragmatics in a range communicative contexts. In the study of doctor-patient communications, several findings suggest that efficiency of communication may correlate with the use of 1sg and 1pl constructions.

The goal of the present paper is to survey the usage patterns and functioning of 1st person constructions in Hungarian doctor-patient interactions, focusing on their link with interactional roles and action types. The empirical data of this research comes from the audio recording and transcription of 16 Hungarian doctor-patient consultations (4 G.P. consultations; 12 dental appointments). The material is supplemented by eight educational videos which contained simulated doctor-patient interactions. The study adopts a functional pragmatic perspective on language use. In the sample, all first person constructions have been annotated in MAXQDA. While the software-assisted analysis adopts predominantly qualitative criteria, it also supplies frequency data. The paper focuses on the following questions:

1) What functional patterns do 1st person constructions exhibit as a function of participant roles?
2) What action types are these 1st person constructions related to?
3) What is their correlation with participant activity?

Initial results suggest that in addition to giving further evidence of schematic patterns of I and WE (patient-I–'I suffer'; doctor-I–'I think'; patient+doctor-WE–'We will act') that have already been reported in the literature, at several data points the material under study also establishes a clear link between 1st person constructions and participant agency.

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LINGUISTIC RIGHTS IN HEALTHCARE: THE EVOLUTION OF PATIENTS' RIGHT TO INFORMATION IN MULTILINGUAL AND MIGRANT CONTEXTS

Abstract:
The right to information—ensuring that individuals can understand and be understood—is internationally recognized, but its implementation has been primarily examined in judicial contexts, with healthcare remaining underexplored. Since the Charter of Fundamental Rights of the European Union (2000), Member States, including Spain, are required to ensure healthcare access for all individuals, including documented and undocumented migrants.

A crucial element of this right is informed consent (IC), grounded in the principle of patient autonomy. Patients must receive essential information in a language they understand, as failure to do so may constitute a violation of their right to information. This requirement is especially relevant in multilingual healthcare settings, where patients may communicate in co-official languages, foreign languages, or languages of lesser diffusion (LLDs). While legal frameworks at the European and Spanish levels acknowledge this obligation, real-world implementation often fails to meet legal standards.

This study adopts a diachronic and interdisciplinary approach, combining legal analysis with linguistic and sociopolitical perspectives, to investigate how the right to information in healthcare has evolved over time in Spain. The corpus includes:
•	Legislative texts from EU law, Spanish national law, and regional statutes (particularly from Madrid and other autonomous communities),
•	Case law involving healthcare communication failures,
•	Policy documents, and
•	Selected testimonies or reports from patients and healthcare professionals when available (secondary sources or qualitative research from NGOs and ombudsman reports).

The methodology involves textual analysis of legal documents, jurisprudential analysis of case law, and contextual interpretation based on political, economic, and social developments. The study also considers whether language-related communication failures have led to civil, administrative, or criminal liability, exploring gaps between legal commitments and institutional practices.

By bridging legal and healthcare domains, this paper aims to provide a nuanced account of how linguistic rights in healthcare are framed, interpreted, and enforced—offering a focused lens on Spain's current legal and institutional landscape.

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Reception of multilingual information in Estonian healthcare. What is the role of translation?

Abstract:
Language barriers in communication between healthcare providers and patients are widely recognized as a significant challenge in the delivery of public services (Escudero & Maadla, 2023; Jacobs & Diamond, 2017). Understanding the migration-driven demand for language services and the role of translation and interpreting in multilingual healthcare settings is crucial for providing universal health coverage and meeting the basic human right to health.

This paper examines multilingual communication in Estonian healthcare and its perception by non-Estonian language communities. The study uses a four-step approach: (1) an analysis of policies related to translation and interpreting in healthcare; (2) social listening in migrant and expat Facebook groups to explore discussions on healthcare linguistic accessibility; (3) questionnaires (3) and focus groups (4) identifying barriers faced by non-Estonian speakers. A mixed-methods approach is used for data analysis. Social listening (Lohiniva et al., 2022) was conducted within 3 months in 2024. More than 100 questionnaire responses, collected via Qualtrics software, were analyzed using Chi-square tests and factor analysis (Frey, 2022). Additionally, thematic analysis (Braun & Clarke, 2022) was applied to data from three focus groups comprising seven informants.

The findings reveal gaps between policy and practice, highlighting challenges non-Estonian speakers face in accessing healthcare services. These findings aim to provide a baseline understanding of multilingual healthcare communication in Estonia, and serve as a platform for future research to improve accessibility of healthcare services for linguistically diverse communities.

References:
· Braun, V., & Clarke, V. (2022). *Thematic analysis: A practical guide*. SAGE Publications, Inc.
· Escudero, T., & Maadla, J. (2023). Vaccination narratives in a multilingual society. On intercultural communication and trust. In K. Kerremans & C. Declercq (Eds.), *The Routledge Handbook of Translation, Interpreting and Crisis*. Routledge.
· Frey, B. B. (2022). *The SAGE Encyclopedia of Research Design*. SAGE Publications, Inc. https://doi.org/10.4135/9781071812082
· Jacobs, E. A., & Diamond, L. C. (Toim). (2017). *Providing health care in the context of language barriers: International perspectives*. Multilingual Matters.
· Lohiniva, A.-L., Sibenberg, K., Austero, S., & Skogberg, N. (2022). Social Listening to Enhance Access to Appropriate Pandemic Information Among Culturally Diverse Populations: Case Study From Finland. *JMIR Infodemiology,* 2(2), e38343. https://doi.org/10.2196/38343

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THE TRIADIC MODEL OF INCLUSIVITY IN HEALTH CARE COMMUNICATION

Abstract:
Inclusive language use is central in healthcare communication, as the inevitable interculturality of medical situations can be made effective only if providers aim to consciously monitor their language use with a consistent inclusive approach in line with their institutional policies and based on principles guiding the selection of appropriate words in patient care. General approaches, institutional policies, and pragmatic principles on inclusive language use interact in a complex system, informing and influencing one another continuously. Our goal is to construct this complex, triadic model and formulate non-prescriptive and non-restrictive recommendations on inclusive language use for Hungarian healthcare institutions. In this phase of our investigation, we analyzed a larger corpus of online inclusive language guides (ILGs) of healthcare facilities in English (N=32) using qualitative content analysis with the MAXQDA 2020 software. For the analysis, we identified the main concepts (n=21), topics (n=19), and language use recommendations (n=18), as well as the main types of ILGs (concise (n=16) and quick help (n=16) guides). The coded segments (N=12 274) of the three levels of approaches, policies, and principles were examined from the perspective of their relations with language use recommendations and the topics addressed – their co-occurrence and intersections are explored within each guide. The present study provides an outline of how approaches, policies, and principles of inclusive language use are formulated in the different types of ILGs and how their interconnectedness surfaces in their recommendations on language use with special focus on inconsistencies that should be avoided when constructing ILGs. This triadic model of inclusivity can inform the creation of new language guides, as well as the everyday education practices in medical universities.

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BRIDGING LINGUISTIC AND CULTURAL GAPS: TEACHING MEDICAL ENGLISH TO HUNGARIAN-SPEAKING STUDENTS IN ROMANIA

Keywords:
medical English, multicultural classroom, multilingual teaching strategies, intercultural education, content-based instruction

Abstract:
Teaching medical English to Hungarian-speaking students in Romania presents a unique set of challenges, especially when instructors do not share the students' native language. These challenges include navigating language barriers, addressing diverse cultural expectations, and comprehending complex medical terminology. This paper explores an intercultural and multilingual approach to overcoming these obstacles, integrating theoretical frameworks in second-language acquisition, intercultural competence, and content-based instruction (CBI).

Drawing on Krashen's Input Hypothesis, Vygotsky's Sociocultural Theory, and the principles of English for Specific Purposes (ESP), we emphasize the importance of providing comprehensible input, fostering collaborative learning, and contextualizing instruction within real-world medical scenarios.

This study focuses on 65 Hungarian-speaking second-year students enrolled in a General Medicine programme, whose English proficiency ranges from intermediate to upper-intermediate. To address the specific needs of this group, a structured lesson plan on the skeletal system and related diseases was implemented. The lesson incorporates multilingual glossaries, visual aids, and interactive activities like role-playing doctor-patient conversations to create an inclusive and engaging learning environment.

In addition to the structured lesson plan, a questionnaire was employed to gather feedback from students, providing insights into their learning experiences and the effectiveness of the teaching strategies. The feedback helped refine the approach and emphasized the importance of integrating theory with practice.

The expected results of this approach include improved comprehension of medical terminology, greater confidence in spoken and written communication, and enhanced cultural awareness. These outcomes align with the broader goals of fostering inclusivity and accessibility in medical education, equipping students to navigate the demands of a multilingual and multicultural healthcare landscape. This research demonstrates that educators can effectively prepare students for the global medical community by integrating theory, practical strategies, and cultural sensitivity.

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INTERPERSONALITY IN THE DISCOURSE OF SEXUAL TRAUMA WITHIN THE ONLINE PEER SUPPORT COMMUNITY

Abstract:
As Van der Kolk (2014) stated, trauma changes one's perception and understanding. Trauma survivors attempt to make sense of their experiences through oral and written discourses (Thompson, 2004). Trauma discourse may be referred to as a "discourse of the unsayable" (Coupland & Coupland, 1997, p. 117), as it is still considered a social taboo. To avoid ostracization, people form self-help groups on the Internet, where they can remain anonymous. This study will analyse how people who have experienced child sexual abuse (CSA) engage on social media such as Reddit to form epistemic communities (Miller & Fox, 2001) and share experiential knowledge (Borkman, 1976). It adopts the concepts of stance and engagement (Hyland and Tse, 2004) and draws on linguistic studies of trauma markers (Matei, 2013) to analyse 26 posts from Reddit forum r/adult survivors to identify linguistic elements that (1) classify the posts as trauma discourse and (2) construct an interpersonal relationship between the poster and the readers.

The present study sets out to test the hypothesis that individuals who share their trauma within self-help groups employ language to construct interpersonal relationships between the poster and the reader. To this end, the study adopts the concepts of stance and engagement as proposed by Hyland and Tse and subsequent studies by Hyland.

Based on the results of the study, it seems that members of online self-help forums share their traumas in the form of a post to either share their experiential knowledge with the community or to practice emotional regulation. Despite the goal of the post, both categories have consisted of interpersonality markers. Posts that ought to ask for help were characterised by dominance of engagement markers and posts that were used to position the author towards their own trauma and to acknowledge it represented a high level of stance markers.

References:
· Borkman, T. (1976). Experiential Knowledge: A New Concept For The Analysis Of Self-Help Groups. *Social Service Review,* 50(3), 445–456
· Coupland, N., & J. Coupland. (1997). Discourses of the unsayable: Death-implicative talk in geriatric medical consultations. In Jaworski, A. (Ed.), S*ilence: Interdisciplinary Perspectives.* Mouton de Gruyter, 117–152
· Hyland, K. & Tse, P. (2004). Metadiscourse In Academic Writing: A Reappraisal. *Applied Linguistics,* 25(2), 156–177. https://Doi.Org/10.1093/Applin/25.2.156
· Matei, M. G. (2013). The Linguistic Mechanisms of Trauma Discourse. Procedia. *Social and Behavioral Sciences,* 92, 517–522. https://doi.org/ 10.1016/j.sbspro.2013.08.711
· Miller, H. T., & Fox, C. J. (2001). The Epistemic Community. *Administration & Society,* 32(6), 668–685. https://doi.org/10.1177/00953990122019613
· Thompson, R. (2004). Trauma And The Rhetoric Of Recovery: A Discourse Analysis Of The Virtual Healing Journal Of Child Sexual Abuse Survivors. *Jac,* 24(3), 653–677.

https://Www.Jstor.Org/Stable/20866647

· van der Kolk, B. A. (2014). The Body Keeps The Score: Brain, Mind, And Body In *The Healing Of Trauma*. Viking.

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SPECIALIZED LEXICOGRAPHY WITH LLMs: THE PHARMACEUTICAL DOMAIN

Abstract:
The increasing demand for processing vast amounts of textual data has driven rapid advancements in natural language processing (NLP) technologies. Large language models (LLMs) have demonstrated strong performance across a range of NLP tasks, including text summarization, translation, and generation. However, their potential application in the compilation of specialized dictionaries has received relatively little attention. Despite significant progress technological progress, this process remains both time-consuming and labor-intensive. The present study focuses on the capabilities and limitations of modern LLMs in the context of their application to specialized lexicography, particularly within the pharmaceutical domain. Using a single-prompt zero-shot approach, several online and local LLMs are evaluated for their ability to extract terminology from pharmaceutical texts and generate draft dictionary entries. A comparison between the LLMs and traditional terminology extraction methods reveals several advantages of the former. However, the completeness of task execution varies significantly across models.

The results obtained in the dictionary entry drafting task show that LLMs with high parameter count are capable of following a template, providing part of speech, definitions, and other requested information about the headword term with sufficient accuracy and consistency. However, smaller, local, non-fine-tuned LLMs are prone to output errors. Moreover, all tested models lack specific, in-depth knowledge of the domain, which leads to inaccuracies in definitions and examples. Overall, modern LLMs have the potential to serve as powerful tools for lexicography.

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TEACHING ESP FOR RADIOLOGY ASSISTANTS ACROSS BORDERS

Keywords:
ESP, radiology assistance, intercultural competence, communication, students' feedback

Abstract:
During their studies at the Faculty of Health Sciences at Palacký University, students of Radiology Assistance have only limited opportunities to participate in internships abroad. For the past three years we have offered students the opportunity to participate in the Czech-Austrian workshop called Radiography English Across Borders. The project funded by AKTION Czech Republic - Austria is an example of international cooperation in English language teaching and brings together Palacký University and the Austrian Fachhochschule Wiener Neustadt. It consists intensive workshop focused on professional English and its use in practice. The workshop was attended by students and teachers from both countries, who participated in a short-term stay at both institutions. In this presentation, we will show the content design from theoretical background, pre-teaching activities, materials used, preparing scenarios to the final role-playing exercise in a simulation room. The areas covered include history taking, patient positioning, and shielding options that need to be communicated between the radiologist and the patient before and during an x-ray procedure. Intercultural competence plays an important part in the process, as well as communication aspects of patient-centred care (namely questioning and listening skills, verification) in a multi-national setting (Austrian, Czech, and other ethnic and religious backgrounds). Subsequent feedback from the students was collected using an anonymous online survey with open questions and Likert scales. Content analysis and the data collected over the three years indicate that the experience (among other aspects) boosts students' confidence in using English, helps acquire language competence for practice, and improves intercultural skills. The project was short-listed for an Internationalization award by the Czech National Agency for International Education and Research.

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A CORPUS-BASED ANALYSIS OF PHRASAL VERBS IN MEDICAL ENGLISH

Keywords:
medical English, language teaching, vocabulary, phrasal verbs, corpus analysis

Abstract:
Phrasal verb (PV) use in general English discourse has been well-documented in the literature via the lens of corpus linguistics (Liu, 2011). The research shows that PVs are very common, with a small number of constructions constituting large proportions of occurrences in corpora. It has also identified notable differences in PV use across registers and found that, in addition to formulaic uses, the word class is subject to creativity. These insights are significant for language teaching, allowing instruction to draw on empirical data as opposed to educators' intuition. However, one might question whether these insights are entirely applicable to the teaching of medical English. To the best of my knowledge, no published research has explored PV use in this field, and only a small amount exists concerning other specific disciplines (Campoy Cubillo, 2002; Trebits, 2009). These previous studies did indeed find variances in PV use in relation to general discourse. Thus, the present study explores PVs in a 700,000-word corpus of medical English. Three genres of medical texts were collected (research articles, practice articles, and patient forum entries), mined for verb-particle constructions via concordance software, then contrasted with the PHaVE list (Garnier & Schmitt, 2015). The analysis reveals that the most frequent PVs in medical and general discourse overlap, but with notable differences in meaning. Variations are also found among the medical genres in the frequency and forms of PV use, most notably with higher degrees of PV use in patient and practice-oriented texts. These findings are discussed and pedagogical implications for the teaching of medical English are considered.

References:
· Campoy Cubillo, M. (2002). Phrasal and prepositional verbs in specialised texts: a creative device. *Ibérica, 4*, 95–111
· Garnier, M., & Schmitt, N. (2015). The PHaVE List: A pedagogical list of phrasal verbs and their most frequent meaning senses. *Language Teaching Research,* 19(6), 645–666.
· Liu, D. (2011). The most frequently used English phrasal verbs in American and British English: A multicorpus examination. *TESOL Quarterly,* 45(4), 661–688
· Trebits, A. (2009). The most frequent phrasal verbs in English language EU documents: a corpus-based analysis and its implications. *System,* 37, 470–481.

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THE EMPHATIC VALUE OF VERBAL AND NON-VERBAL NARRATIVE AND STORYTELLING IN HEALTHCARE COMMUNICATION

Keywords:
storytelling, pantomime, universal stories, empathy, storytelling as therapy

Abstract:
In recent years, the application of narrative competence has gained increasing recognition in the field of healthcare education. Stories are essential for understanding and creating our own self-interpretation. Patients will present a story through articulating the history of their illness and using metaphors to express their sensations and symptoms. Healthcare professionals need to activate narrative competencies when analyzing patients' stories: with their changing tones, nuances, and physical expressions. These competencies are applied to ensure empathetic, compassionate, patient-centred care and aesthetic value.

This 45-minute workshop will begin by using three universal and classical tales to illustrate how metaphor is used to build commonality between people. Together we shall dissect the text in how it can apply to your modality of healthcare and discuss how Verbal and Physical narrative, together, elevate our perceptions and human communication.

"Eternal Love" traces a character's journey from youth to old age, encouraging reflection on age-related challenges. This story supports providers' sensitivity to the evolving needs and narratives of patients at different stages of life.

"The Preacher and the Coachman" prompts discussion on authenticity, assumptions, and the risks of judging others based on appearances or social roles. Its theme resonates with current concerns about bias, patient misperception, and the importance of clinical decision-making in the cyber world of the avalanche of mis- and disinformation.

The story of "The Cracked Pot" reflects the reality that each of us has our own unique flaws, but it's the cracks and flaws we each have that make our lives together so very interesting and rewarding. You have just got to take each person for what they are, and see the good in them.

"A Day at the Circus" (pantomime) engages participants in physical storytelling by embodying archetypal roles. This activity supports non-verbal communication skills, critical for healthcare providers working with patients who experience language barriers, cognitive impairment, or emotional distress. It is a valuable technique when working with children and people with special needs.

Working in small groups, participants will explore how the Simulated Patient is applied in the healthcare practitioner-patient relationship. They will then enact roles as both the healthcare professional and the patient, practicing narrative competence, active listening, and the articulation of emotion through verbal and physical cues.

This workshop will culminate with reflections and a question-and-answer period.

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USE OF GREEK TERMS IN ANATOMICAL TERMINOLOGY

Abstract:
The teaching of Latin with medical terminology in Bulgarian medical universities is part of the unified state requirements for acquiring the specialties of Medicine, Dentistry, and Pharmacy, as well as bachelor's programmes in the faculties of public health and medical colleges. On the one hand, this requirement ensures the inclusion of Latin in the curricula of these specialties; on the other hand, it remains a subject of discussion regarding different approaches to curriculum development, textbooks, and teaching methods.

Anatomical terminology has predominantly Latin origins, and students must master the basics of Latin grammar to effectively use anatomical terms. Additionally, many nouns and adjectives of Greek origin appear in anatomical terminology, some of which have retained their Greek characteristics, while others have been completely Latinised.

Methods and data. This study focuses on an etymological analysis of anatomical terms to uncover their original meanings throughout history. Using the comparative-historical method, the grammatical features of these terms are analyzed, and the study also examines the methodology used to teach Greek terms to medical students. The works of ancient authors such as Hippocrates, Herophilus, and Erasistratus are studied, along with the textbooks on Latin language and medical terminology used in Bulgaria.

The results of the study reveal the development and use of Greek terms in modern anatomy, as well as their etymology. The findings contribute to a better understanding and acquisition of medical terminology for medical and dental students, aiding in its application in practice.

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DIFFICULTIES WHEN TRANSLATING HEALTHCARE RESEARCH: A SYSTEMATIC REVIEW

Abstract:
Background: The medical field is associated with specific discourse structures and argumentative patterns, hence why healthcare research translation poses a challenge for most translators. Its specificity often requires thorough investigation, and some problems seem to occur across languages. With the breakthrough of artificial intelligence and its impact on translation practices, many concerns have risen among the community within this field. Therefore, the aim of the present analysis was to systematically identify the most frequently occurring problems when translating medical research texts and to qualitatively assess the impact of these occurrences on research practice in health sciences and on the perception and interpretation of these texts by specialized audiences.
Methods: A systematic review of the literature was conducted in 4 databases: MEDLINE, Cochrane Library, Scopus and EBSCOhost. The search was restricted to articles published between 2013-2024, in English or Portuguese, mentioning translation within medical research. Information regarding texts' characterization, methods and translation problems was collected. The PRISMA guidelines were followed.
Results: After applying the search QUERY, 3052 studies were identified. Out of these, eight studies met the inclusion criteria, comprising 4 original articles and 4 translation students' reports. More than 200 texts were examined in the studies, including 6 languages: English, Portuguese, Spanish, German, Russian and Swahili. The most frequently addressed translation issues included concerns related to terminology, abbreviations and acronyms, syntactic over-simplification, text complexity and cultural nuances. Despite the recognisable challenge when translating medical information, there seems to be a consensus on which factors most influence the translators' performance. However, care should be taken as, sometimes, patient safety may be at stake due to misinterpretation.

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READABILITY, FLUENCY AND ERROR IDENTIFICATION WHEN USING MACHINE TRANSLATION AND AI TO TRANSLATE MEDICAL RESEARCH TEXTS

Keywords:
machine translation, artificial intelligence, medical research, readability, translation quality

Abstract:
Background: With the improvements in the algorithms used to develop online machine translation tools and the growing relevance of AI there is a raising concern related to the quality of these tools' outputs. Therefore, we sought to evaluate the readability of the results of machine translation and AI for the translation of medical research texts from English into European Portuguese.
Methods: A total of 16 original manuscripts encompassing case reports, systematic reviews and meta-analyses, observational studies and randomized controlled trials were collected for the main corpus. Two translations of each source text were obtained, using Google Translate and ChatGPT, (n=32). Several readability formulas and indexes were calculated from samples of the texts. Qualitatively, text accuracy, intelligibility and linguistic errors' occurrence were assessed.
Results: An analysis according to the selected translation tool revealed no significant differences between the results originated in Google Translate and ChatGPT, with regards to the quantitative readability analysis, meaning that their performance was similar despite the perceived fluency and adequacy differences after human review. However, discourse errors were more common in the texts originated from ChatGPT, (p<0.001). Regarding the split analysis according to study design, we observed a significant increase in total error count for the machine translation outputs of systematic reviews and meta analysis, (p=0.003). When comparing the results across science fields, oncology showed higher readability scores, namely: Flesch-Kincaid Grade Level, ARI, Coleman Liau Index, Lix Readability Formula and Rix Readability Grade Level (all p<0.001). These results are encouraging and support the use of machine translation tools and AI to translate medical research texts, however, human review and post-editing can not be ruled out since the algorithms' results largely depend on text complexity.

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Health literacy from a linguistic perspective: understanding cancer

Abstract:
A person's level of health literacy reflects their ability to make health-related decisions, adopt preventive and self-care habits and behaviours, and follow prescribed treatments (Juvinyà-Canal et al., 2018). A high level of health literacy can translate into an increase in patients' control over their own health, which can be helpful in promoting adherence to treatment. Conversely, a low level of health literacy may reflect a lack of understanding of disease-related concepts, which has a direct negative impact on disease management and the adoption of self-care routines and treatment adherence (Moser et al., 2015; Navarro-Rubio et al., 2016).

According to research, low levels of health literacy appear to be an alarming issue worldwide. In the case of Spain, around half of the population shows health literacy problems, which seems to be more worrying in the case of chronic and older patients (Sørensen et al., 2015). These data are especially relevant in the case of cancer, which one of the main causes of mortality in the world and the main cause of mortality in Spain. Such relevance is due to two reasons: In the first place, we should highlight that cancer may become a chronic disease. In the second place, although cancer affects people of all ages, it is more common in people over 60, with the average age of diagnosis being 66 years, according to the National Cancer Institute.

This research aims to explore cancer health literacy from a linguistic approach, focusing on the population's understanding of commonly-used specialised terminology, which is often a barrier in doctor-patient communication. For such purpose, this study builds on previous research examining how medical terminology interferes with the understanding of disease, (Quérin, 2011) for which a questionnaire showing different cancer patient situations has been designed. Some of the situations have been explained using medical terminology, while others avoid such terms. Participants have been asked to rate from 1 to 5 the seriousness of the proposed situations. The main objective of the study is to explore how the general population in Spain, including patients and caregivers, understand some concepts related to cancer.

References:
· Juvinyà-Canal, D., Bertran-Noguer, C. & Suñer-Soler, R. (2018). Alfabetización para la salud, más que información. *Gaceta Sanitaria,* 32(1), 8–10. https://doi.org/10.1016/j.gaceta.2017.07.005.
· Moser, D., Robinson, S., Biddle, M., Southard, J., Cooper, L. & Dracup, K. (2015). Health Literacy Predicts Morbidity and Mortality in Rural Patients With Heart Failure. *Journal of Cardiac Failure,* 21(8), 612–618.
· Navarro Rubio, M. D., Rudd, R., Rosenfeld, L. et al. (2016). Health literacy: Implications for the health system. *Medicina Clínica*, 147(4), 171–175.
· Quérin, S. Clermont, M.J. Dupré-Goudable, C. & Dalmon, P (2011). La communication médecin-malade en néphrologie. *Nephrol Ther.* 7(4), 201–206.
· Sorensen, K., Pelikan, J.M., Rothlin, F., Ganahl, K., Slonska, Z. & Doyle, G. (2015). Health literacy in Europe: comparative results of the European health literacy survey (HLS-EU). *Eur. J. Publ. Health* 25, 1053–1058.

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PANDEMIC PROPAGANDA AND VACCINATION DISCOURSE IN FRANCE

Keywords:
Covid-19, vaccination, vaccine propaganda, France, narratives

Abstract:
Introduction
The present study is grounded in Herman and Chomsky's propaganda model (1988), which posits that all media outlets, irrespective of their political orientation, function as vehicles for propaganda. According to this model, media organizations shape public opinion by employing a range of persuasive techniques, thereby fostering the acceptance of propagandistic content.
This research seeks to examine the extent to which selected French media adhered to government narratives on COVID-19 vaccination, and to identify the specific propaganda strategies deployed within French media discourse during the pandemic, with particular attention to vaccine-related coverage.
Methodology
The corpus of analysis comprises textual material relating to the COVID-19 pandemic and vaccination, published between January 2020 and December 2022. Articles were retrieved using the keywords "covid-19," "vaccin," and "vaccination" from the archives of three major French newspapers:
· Le Monde (characterized by a center-left editorial stance): 933 articles available without subscription;
· Le Figaro (which identifies as a center-right to right-wing publication) : 1,200 articles;
· Libération (widely recognized as France's leading left-wing newspaper): 1,519 articles.
The analytical process consisted of two stages. First, a quantitative analysis was conducted to assess the frequency and distribution of vaccine-related lexical items in each sub-corpus, utilizing tools such as Python, Iramuteq, and Sketch Engine. Second, a qualitative assessment was undertaken, drawing upon a typology of 22 propaganda techniques as defined in the existing theoretical literature, in order to identify their presence and usage across the three media outlets.
Results
Preliminary findings suggest that a variety of propaganda techniques were mobilized during the pandemic and the associated vaccination campaign. These included strategies designed to delegitimize dissenting voices and to construct favorable representations of the pro-vaccination narrative (e.g., name-calling, glittering generalities, plain folks appeals), as well as mechanisms grounded in social psychology and symbolic association (e.g., bandwagon appeals, testimonial endorsements, transfer, and the use of slogans or catchphrases). Techniques intended to elicit fear or compliance—such as references to mortality statistics, restrictive public health measures, and the risks of infection—were particularly prevalent in Le Figaro, a newspaper broadly supportive of the government.
Discussion
A notable limitation of this study is its omission of a systematic distinction between state-affiliated and independent media sources—an analytical angle that could yield additional insights into the construction of pandemic-related discourse. Despite this, the findings indicate that the French government leveraged the public health crisis, and particularly the vaccination campaign, as an opportunity to disseminate political propaganda via mainstream media channels. The data further reveal a disproportionate reliance on political figures as sources, relative to public health experts or scientific authorities, thereby suggesting a predominance of political discourse over

scientific communication in media coverage. Overall, the evidence supports the conclusion that French media played an instrumental role in reproducing and amplifying government propaganda during the COVID-19 pandemic.

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Terminological Challenges in Hungarian Maxillofacial Diagnostic Reports: A Follow-Up Study on Documentation Practices

Keywords:
dental injuries, documentation, forensic interpretation, soft tissue injuries, oral cavity

Abstract:
In the continental legal system, accurate clinical documentation of maxillofacial injuries is essential for forensic interpretation in legal proceedings. This study evaluates current documentation practices in Hungary by analyzing 216 anonymized Hungarian Maxillofacial Diagnostic Reports of Injuries (MADRI) from a central university clinic and 75 reports from a regional university clinic. The findings are compared with those of a 2018 study by Bán et al., which identified inconsistent terminology in Hungarian maxillofacial reports, particularly regarding dental and soft tissue injuries. Using Microsoft Excel and SPSS, injury descriptions and diagnoses were extracted and statistically analyzed. The comparative analysis revealed significant differences ($p < .005$) between the documentation of dental injuries and other bone injuries in terms of information content—mirroring the findings of the 2018 study. Physicians were most consistent in describing bone injuries, while documentation of tooth injuries was found to be less precise. Vague terminology was particularly associated with the polysemous term tooth luxation, aligning with previous findings (Fogarasi, 2020; Pálinkás, 2024). The documentation of wounds and other soft tissue injuries was insufficient in 89.2% of cases, with fewer than two injury characteristics recorded. Harmonizing dental injury terminology with international standards (Andreasen et al., 2019; Pagadalas & Tadikonda, 2015), along with more consistent and detailed soft tissue injury documentation, would enhance forensic interpretability and support the alignment of Hungarian clinical reporting with international practice.

References:
· Andreasen, F. M., Andreasen, J. O., Tsukiboshi, M., & Cohenca, N. (2019). Examination and diagnosis of dental injuries. In J. O. Andreasen, F. M. Andreasen, & L. Andersson (Eds.), *Textbook and color atlas of traumatic injuries to the teeth* (5th ed., pp. 295–326). Wiley Blackwell. https://onlinelibrary.wiley.com/doi/full/10.1111/edt.12578
· Bán, Á., Patonai, Z., Fogarasi, K., Schneider, P., Boda, R., & Gergely, P. (2018). Fogászati sérülésekről készült látleletek komplex terminológiai, fogászati és igazságügyi orvosszakértői elemzése. *Orvosi Hetilap,* 159(51), 2154–2161.
· Fogarasi, K. (2020). Fogsérülések megnevezéseinek terminologizáltsági foka fogorvosi-szájsebészeti látleletekben. *Porta Lingua,* 2020, 111–122.
· Pagadalas, T., & Tadikonda, D. C. (2015). An overview of classification of dental trauma. *International Archives of Integrated Medicine,* 2(9), 157–164.
· Pálinkás, M., Patonai, Z., Németh, Zs., & Fogarasi, K. (2024). Forensic significance of soft tissue injury terminology in maxillofacial documentation: A linguistic analysis. In K. Fogarasi & D. Mány (Eds.), *Semmelweis Medical Linguistics Conference 2024: Book of Abstracts – Implementation*

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PUBLIC HEALTH COMMUNICATION: A CASE STUDY ON TEXTUAL REPHRASING STRATEGIES IN INSTITUTIONAL AND NEWS TEXTS DIRECTED TO CITIZENS

Abstract:
This paper examines public health texts addressed to citizens from institutional and journalistic sources. A specific analytical lens is set on Restatement and Summary relations [1], which serve to rephrase or briefly restate something and can be understood as particular textual strategies to reformulate a statement in order to make it more comprehensible. The analysis is based on two corpora. The first collects 234 institutional texts from the ISSalute website of the Italian National Institute of Health, which targets the general population. The second collects 106 texts from the Health section of Focus.it, an online science magazine. Although the corpora differ in the number of texts considered, they are balanced in number of words: the first corpus has 64,054 words, and the second has 64,643 words. First, a quantitative analysis compares the connectives that introduce an instantiation or rewording listed in LICO [3] with those that serve the same function in the two corpora. Then, a qualitative analysis is conducted to identify other connective devices that serve the same function. Preliminary results shows that Restatement and Summary relations are both employed in both corpora, but with notable differences. Connectives are more frequent in the institutional corpus, making the relations more explicit, compared to the journalistic corpus. These textual strategies can be further understood by exploring the role that text organisation and connectives play as support devices for text comprehension [4].

References:
· [1] Mann, W. C., & Thompson, S. A. (1988). Rhetorical structure theory: Toward a functional theory of text organization. *Text-interdisciplinary Journal for the Study of Discourse,* 8(3), 243–281.
· [2] Zeldes, A. (2016, June). rstWeb— a browser-based annotation interface for Rhetorical Structure Theory and discourse relations. In *Proceedings of the 2016 Conference of the North American Chapter of the Association for Computational Linguistics: Demonstrations* (pp. 1–5).
· [3] Feltracco, A., et al. (2016). Lico: A lexicon of Italian connectives. In *CLiC-it* (p. 141).
· [4] Hoek, J., et al. (2017). Cognitive complexity and the linguistic marking of coherence relations: A parallel corpus study. *Journal of Pragmatics,* 121, 113–131.

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WHAT A COMPARATIVE METAPHOR ANALYSIS OF PREGNANCY CAN TELL US ABOUT LIVED EXPERIENCE AND MEDIA DEPICTIONS OF PREGNANCY

Abstract:
The metaphors we use about health can reflect our attitudes towards these experiences. Previous literature has found that metaphors are a powerful resource for supporting people through new and/or difficult times and helping them understand their circumstances (see Demjén & Semino, 2017; Gibbs Jr & Franks, 2002; Littlemore & Turner, 2019). Metaphors can also provide insight into the attitudes and conceptualisations a person has about their experiences. It is therefore important to consider the metaphors used to talk about pregnancy and how they may influence and provide insight on lived experiences.
My research aims to expand on previous research by considering the language used by pregnant people at various gestational stages and how it differs from more general media discussions. Two corpora of Mumsnet posts and newspaper articles were analysed using a linguistic metaphor analysis to create a comparison between the metaphors used by those with lived experience and those found in mainstream British media. The most salient topics of pregnancy as an overall experience, the pregnant body, and the relationship between parent and baby were found to differ depending on whether they were written by a pregnant person or a journalist. This research highlights the importance of recognising how pregnancy may be framed by those experiencing it and how this may differ from more generalised depictions and conceptualisations of pregnancy in the media.

References:
· Demjén, Z., & Semino, E. (2017). Using Metaphor in Healthcare: Physical Health. In *The Routledge Handbook of Metaphor and Language.* Ed. Semino, E. and Demjen, Z. (pp. 385–399). Routledge.
· Gibbs Jr, R. W., & Franks, H. (2002). Embodied metaphor in women's narratives about their experiences with cancer. *Health Communication*, 14(2), 139–165.
· Littlemore, J., & Turner, S. (2019). What Can Metaphor Tell Us About Experiences of Pregnancy Loss and How Are These Experiences Reflected in Midwife Practice? *Frontiers in Communication, 4*, 42.

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MEDICAL TERMS AND TERMINOLOGICAL ELEMENTS - ESSENCE AND CHARACTERISTICS.
SURGICAL TERMS AND TERMINOELEMENTS - ESSENCE AND CHARACTERISTICS.

Abstract:
Introduction.
The surgical terminology is a subsystem in the lexical system of the medical terminology. It exists as a separate system alongside the medical language. It represents a specific terminological vocabulary. Its formation and functioning is a subject to the word-formation and morphological norms of a given medical language. So it is the one of the most important layers which is the core of the medical language.
Goal.
The goal of this article is to analyze the results of a survey conducted the opinion of the medical students about the use of the different types of surgical terms, their meaning, their formation and their parameters during the educational process.
Tasks.
In the connection with the achievement of the objectives of the study, the tasks are aimed at:
1.Study of the literary sources related to the considered problem.
2.Conducting a standardized survey to examine the opinion of the medical students regarding the problem.
3.Processing by appropriate statistical methods of the researched results.
4.Analysis of the results and drawing conclusions and recommendations.
Material.
For the purposes of the present study, a survey was conducted of the opinion of the first year students regarding the use, formation, and parameters of the surgical terms. The respondents study a foreign language for 2 semesters - once a week - 60 classes.
Methods.
For determining the essence and the characteristics of the surgical terms, the following researched methods are applied:
1.Rewiew and analysis of the scientific literature on the researched problem. The scientific grounds are highlighted for choosing the researched question in the methodological and linguistic sources.
2.Method of empirical researched - survey. The questions in it provide better observation and inquiry of the different types of surgical terms, their formation and parameters.
Results.
The survey was conducted on a voluntary basis among 40 students studying Master's degree in Medicine, at the Medical University of Sofia in January 2025. A questionnaire, containing 10 closed-ended questions was developed.
Discussion.
The medical - surgical terms and its terminoelements are at the heart of many medical disciplines. They are rediscovered equally in the technical editing, in documentary editing and in textbooks which are used, in automatic translations and in everything which is called the heart of the knowledge and the science of being. This is in fact the relation between the surgical term

name and its terminological meaning, as far as the definition of the surgical terms and terminoelements is a description or a model of meaning of the surgical term. "

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"I'm not a doctor, but…": Uncovering the language practices of patients with chronic illnesses for better-tailored medical communication

Keywords:
patient expertise, terminology, variation, chronic illnesses, corpora

Abstract:
Patient expertise refers to all the knowledge patients with chronic illnesses acquire over time through their lived experiences, their interactions with the healthcare system, and their relationship with medical professionals (Sanderson, Angouri 2013, Flora 2015, Tomasky 2023). From a linguistic perspective, this expertise can be seen in the way patients appropriate the terminology typically used by medical experts, be it specific to one illness or to the medical field in general (Fage-Butler, Niesbeth Jensen 2016, Bellander, Landqvist 2020, Delavigne 2021).
In a preliminary study based on the transdisciplinary lexicon (particularly Drouin et al. (2018) in the environment), we semi-automatically identified a layer of lexicon shared by patients with different chronic illnesses in a 3.2-million-word comparable corpus of texts from French medical experts and patient forums (Humbert-Droz, Picton 2024). This layer comprises medical terms as well as more general units, 82% of which are shared by patients and experts and 18% by patients only. They cover three main topics: health in general, expressions of support, and daily chronic illness management.
Building on these results, we propose to further describe these units in the corpus. First, we characterize the specificities of patient discourse on chronic illnesses by analyzing the distribution of the units shared by patients only. Second, we adopt a contrastive perspective and compare the distribution of the units shared by patients and medical experts. These observations allow us to better understand how patients appropriate the terminology and develop their own expertise, while more effectively accounting for diastratic variation. Our results suggest that examining corpora of patient forum exchanges can significantly change the way we perceive patients' terminological and medical information needs. They will also provide insights to better support patients, particularly in their role as expert patients.

References:
· Bellander, T., & Landqvist, M. (2020). Becoming the expert constructing health knowledge in epistemic communities online. Information, *Communication & Society,* 23(4), 507–522.
· Delavigne, V. (2021). Phraséologie et didacticité dans les discours de vulgarisation médicale : Une ergonomie discursive. *PHRASIS | Rivista di studi fraseologici e paremiologici,* 5, 108–129.
· Drouin, P. (2003). Term Extraction Using Non-Technical Corpora as a Point of Leverage. *Terminology,* 9(1), 99–117.
· Drouin, P., L'Homme, M.-C., & Robichaud, B. (2018). *Lexical Profiling of Environmental Corpora. 11th edition of the Language Resources and Evaluation Conference (LREC 2018),* 3419–3425.
· Egbert, J., & Biber, D. (2019). Incorporating Text Dispersion into Keyword Analyses. *Corpora,* 14(1), 77–104.
· Fage-Butler, A. M., & Nisbeth Jensen, M. (2016). Medical terminology in online patient–patient communication: Evidence of high health literacy? *Health Expectations,* 19(3), 643–653.
· Flora, L. (2015). Du patient « passif » au patient expert. In C. Déchamp-Le Roux & F. Rafael (Eds.), *Santé mentale : Guérison et rétablissement* (p. 109–119). John Libbey Eurotext.

· Humbert-Droz, J., & Picton, A. (2024). Révéler l'expertise partagée par les patientes atteintes de diabète et d'endométriose : Une analyse exploratoire de forums médicaux. In A. Dister & D. Longrée (Éds.), *17es Journées internationales d'Analyse statistique des Données Textuelles,* 409–418.

· Sanderson, T., & Angouri, J. (2013). 'I'm an expert in me and I know what I can cope with': Patient expertise in rheumatoid arthritis. *Communication & Medicine,* 10(3), 249–261.

· Scott, M. (1997). PC Analysis of Key Words—And Key Key Words. *System*, 25(2), 233–245.

· Tomasky, S. I. (2023). *Patient Expertise & Self-Management. Master's thesis.* The University of Texas at Austin.

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THE COMMUNICATION SKILLS ATTITUDE SCALE: A COMPREHENSIVE REVIEW OF ITS VALIDATION AND APPLICATION IN MEDICAL EDUCATION

Abstract:
Effective communication is a crucial component of medical education, significantly influencing student learning and patient care. This presentation reviews a series of investigations into medical students' attitudes toward learning communication skills, utilizing the Communication Skills Attitude Scale (CSAS). Preliminary results from our ongoing study will be presented, focusing on gender differences and shifts in attitudes throughout the academic journey.

Our research involved a population of three hundred fifty medical students and employed a mixed-methods approach to analyze how attitudes were shaped by educational experiences, cultural contexts, and demographic variables. Factor analysis revealed underlying dimensions of the attitudes assessed, and we evaluated the internal consistency and test-retest reliability of identified subscales. Initial analyses indicated a dual structure of both positive and negative attitudes among medical students, with an increase in positive attitudes observed as students progressed through their training. Findings suggest a growth in emotional engagement among more experienced students.

This research underscores the importance of effective communication skills training in medical education and highlights the need for longitudinal studies to monitor changes in attitudes over time, particularly in light of cultural factors that may necessitate adaptations of the CSAS in various educational contexts.

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QUESTIONING STRATEGIES TO UNCOVER THE UNDERLYING CAUSES OF DRY MOUTH

Abstract:
Dry mouth often stems from systemic (immunological or geriatric) or subjective (psychological) causes (Thakkar & Lane 2022). In most cases, however, dentists rely primarily on patient interviews to obtain information about the individual's medical history, as in Hungary they mostly do not have access to comprehensive medical records. For the interview to effectively uncover the underlying causes of dry mouth, clinicians must take into account two critical considerations: first, patients may be unaware of the extent to which their psychological or emotional state influences their symptoms; and second, direct inquiries into emotional or psychological health may yield limited or counterproductive responses, as individuals are often reluctant to discuss such issues. Consequently, the clinician's approach to questioning must be both subtle and strategically designed to elicit relevant information without causing discomfort or resistance.

Following a previous case study of 10 consultations, in this study, we investigated 45 dental consultations with patients presenting at the Dry mouth specialist consultation, Department of Public Dental Health, Faculty of Dentistry, Semmelweis University with subjective xerostomia. Research suggests that soliciting the full spectrum of patients' concerns and illness explanations improves differential diagnosis and treatment (Heritage – Maynard 2006, Brown et al., 2003; Cayley, 2018), so our aim was to answer two research questions: which interview questions most effectively elicit patient responses that may indicate underlying psychological contributors to xerostomia; and what interviewing techniques facilitate the disclosure of emotional states—such as sadness, stress, or anxiety—by patients during dental consultations? Our hypothesis was that standardized interview questions are insufficient for eliciting comprehensive information about a patient's emotional and psychological state; therefore, additional strategies or encouragement are necessary to facilitate the expression of emotions contributing to dry mouth. To identify the communication strategies employed by dentists to gather differentially relevant information, we conducted a linguistic analysis of medical history taking. We recorded fourty-five dentist-patient consultations on dry mouth symptoms, transcribed them with the help of the Alrite speech-to-text software, and coded them using the MAXQDA software, and analyzed them manually.

The quantitative analysis showed that out of a total of 3259 questions asked, 1572 questions were standard, yes-no questions, which were complemented with 443 other, open-ended questions (Kwame – Petrucka 2021), chosen by the dentist and based on patients' answers ("Did anybody have cancer in the family? Who and what type?"). Direct questions (Oliver 2020) addressing life events that could have induced the beginning of symptoms ("Did something happen one month ago?") were only asked in 6 consultations (18 questions altogether). All responses were analyzed with particular attention to verbal indicators of psychological and emotional distress, and only those containing such indicators were selected for further examination. The majority – 20 out of a total of 84 – of such answers were given to standard questions ("I had to beg for a referral to the Immunology, so I was so worn out emotionally."), but complementary questions ("my husband died a year ago and I collapsed then.") and the discussion of past and present medical history ("I told her, doctor, I cried a lot in the past six months.") yielded almost as many answers respectively: 18 (complementary questions) and 19 (discussion).

The result of the qualitative, manual analysis is that similar structures can be identified in the consultations, although there are slight differences, which also lead to differences in information gained: verbal indicators of emotional and psychological distress of patients are substantially less (or none) in consultations which focus more on standard questions and less on complementary questions or discussing past and present medical history. Questions that address life events appear to be efficient in collecting information about patients' emotional and psychological background, however, with the help of complementary questions and encouragement, standard questions and questions about current medical history also provide relevant information. In the recorded interviews, the patients' subjective descriptions of their diseases, patient path, symptoms and emotions, guided by a successful questioning technique, could be contextualized within a diagnostically meaningful framework by the dentists and more readily identified with the patients' cooperation.

References:
· Brown, J. B., & Ryan, B. L. (2003). Outcomes of patient-provider interaction. In T. Thompson, A. Dorsey, K. Miller, & R. Parrott (Eds.), *Handbook of health communication* (pp. [insert page range if known]). Lawrence Erlbaum.
· Cayley, W. (2018). Four evidence-based communication strategies to enhance patient care. *Family Practice Management, 25*(5), 13–17.
· Heritage, J., & Maynard, D. W. (2006). *Communication in medical care: Interaction between primary care physicians and patients* (Studies in Interactional Sociolinguistics, No. 20). Cambridge University Press.
· Kwame, A., & Petrucka, P. (2021). A literature-based study of patient-centered care and communication in nurse-patient interactions: Barriers, facilitators, and the way forward. *BMC Nursing, 20*, Article 158. https://doi.org/10.1186/s12912-021-00688-0 *(added DOI for completeness)*
· Oliver, S. M. (Ed.). (2020). Assessing the patient: History taking and clinical examination. In S. M. Oliver (Ed.), *Oxford handbook of musculoskeletal nursing*. Oxford University Press.
· Thakkar, J. P., & Lane, C. J. (2022). Hyposalivation and xerostomia and burning mouth syndrome: Medical management. *Oral and Maxillofacial Surgery Clinics of North America, 34*(1), 135–146. https://doi.org/10.1016/j.coms.2021.08.002

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DIGITAL COMMUNICATION IN HEALTHCARE: LINGUISTIC CHOICES AND DISCOURSE STRATEGIES IN DOCTOR-PATIENT INTERACTIONS ON LANGUAGE DISORDERS

Keywords:
digital health communication, doctor-patient interactions, linguistic, metalinguistic and textual analysis, discourse strategies

Abstract:
This study investigates the linguistic dynamics present in Italian digital texts written by patients within the context of doctor-patient communication, focusing specifically on language disorders. As healthcare communication increasingly shifts to digital platforms, patients often turn to online forums to describe their health issues. This shift generates a corpus of texts that display unique linguistic and communicative features (Violi & Coppock, 1999; Barocco, 2002; Garcea & Bazzanella, 2002; Pistolesi, 2014, 2018).

The primary aim of this research is to examine the linguistic choices patients make when describing symptoms, disorders, and perceptions related to language production and comprehension. For example, one patient writes: Quando parlo la mia voce trema o si abbassa di tono, mi esprimo male, provo un (anomalo) senso di soggezione e tendo a sorridere o comunque a tenere contratti i muscoli della bocca per vari minuti ('When I speak, my voice trembles or lowers in pitch, I express myself poorly, I experience an (abnormal) sense of subjugation, and I tend to smile or keep the muscles of my mouth tense for several minutes') (medicitalia.it). A comparative analysis is conducted between the patient's lexicon and the technical language of medical linguistics (Cassandro, 1994; De Mauro, 1996; Serianni, 2005; Puato, 2009; Gensini, Lippi, & D'Elios, 2012).

To analyze these texts, qualitative linguistic methods, including content and discourse analysis, were employed. The texts were collected from online medical consultations on platforms, such as Medicitalia.it, an Italian free web platform for online medical consultations and authoritative medical-scientific dissemination (Riccio 2024). The corpus comprises 320 written medical consultations, spanning 30 thematic areas, from neurology to learning disabilities, with a total of 249,562 word-tokens. The data were extracted using keywords related to linguistic activity, such as the lemmas 'word', 'language', 'sentence', 'discourse', and verbs associated with linguistic activities, such as 'speak', 'pronounce', 'read', 'write', etc.

A corpus-based analysis using SketchEngine identifies recurrent linguistic patterns and thematic elements related to patients' expressions of symptoms, emotions, and self-perceptions, contrasting them with the formal language used by medical professionals. Early findings suggest that patients tend to describe their symptoms in metaphorical or emotive terms, in contrast to the technical language used in medical discourse. For example, patients frequently use sensory and emotional language (e.g., senso di soggezione 'sense of subjugation') rather than clinical terms (Riccio 2024). Emotion-related words are particularly frequent in the corpus, including paura 'fear' (213 occurrences), senso 'sense' (187), sensazione 'sensation' (159), stress 'stress' (131), controllo 'control' (149), sconforto 'discomfort' (64), preoccupazione 'worry' (60), tensione 'tension' (24), among others. The comparison of this emotional language with medical terminology reveals a significant gap in specificity and structure, which could affect the clarity and precision of communication.

Furthermore, the study explores how doctors respond to these texts, focusing on their strategies for reformulating patient-provided information to ensure clarity and preserve diagnostic

accuracy. Special attention is given to how doctors bridge the linguistic asymmetry between themselves and patients who lack technical expertise (Gotti, 1991).

References:
· Barocco, A. (2002). La comunicazione mediata dal computer. In C. Bazzanella (Ed.), *Sul dialogo. Contesti e forme di interazione verbale* (pp. 253–267). Guerini e Associati.
· Cassandro, M. (1994). Aspetti sintattici e lessicali della lingua medica contemporanea. In T. De Mauro (Ed.), *Studi sul trattamento linguistico dell'informazione scientifica* (pp. 71–89). Bulzoni.
· De Mauro, T. (Ed.). (1996). *Studi sul trattamento linguistico dell'informazione scientifica.* Bulzoni.
· Garcea, A., & Bazzanella, C. (2002). Discours rapporté et Courrier Electronique. *Faits de Langues,* 19, 233–246.
· Gensini, G. F., Lippi, D., & D'Elios, J. P. (2012). *I medici e le parole.* Università degli Studi di Firenze.
· Gotti, M. (1991). *I linguaggi specialistici. Caratteristiche linguistiche e criteri pragmatici.* La Nuova Italia.
· Pistolesi, E. (2014). Scritture digitali. In G. Antonelli, M. Motolese, & L. Tomasin (Eds.), *Storia dell'italiano scritto* (Vol. III, pp. 349–375). Carocci.
· Pistolesi, E. (2018). L'italiano in rete: usi, varietà e proposte di analisi. *Aggiornamenti*, 13, 17–26.
· Puato, D. (2009). *La lingua medica. Tecnicismi specifici e collaterali nella traduzione dal tedesco in italiano.* La Sapienza.
· Riccio, A. (2024). Second opinion medica online: emozioni, sistemi e narrative. *Le conversazioni del GSCP, III CICLO 2023-24,* 19 aprile 2024 (oral presentation)
· Serianni, L. (2005). *Un treno di sintomi. I medici e le parole: percorsi linguistici nel passato e nel presente.* Garzanti.
· Violi, P., & Coppock, J. (1999). Conversazioni telematiche. In R. Galatolo & G. Pallotti (Eds.), *La conversazione: un'introduzione allo studio dell'interazione verbale* (pp. 319–364). Cortina.

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Ghost Terms: locating missing anatomical terms from matching opposite pairs

Keywords:
Latin, anatomy, terminology, language, adjectives

Abstract:
In 1956, the IANC established seven rules for Latin anatomical nomenclature, all of which remain in place, of which rule six states: "That differentiating adjectives shall be, in general, arranged as opposites."

This paper focuses on a phenomenon within the standardized list of Latin anatomical nomenclature, the Terminologia Anatomica (TA2), in which one part of a paired name has been changed so that it no longer accounts for the other half, leaving the original name of the pair holding a seemingly useless descriptor. An example of this phenomenon is the name facies posterior humeri [TA2 1196]. In English, this name translates to "the rear face of the humerus". If we say "the rear face" of anything, it implies that there should be a "front (or anterior) face" of that thing; otherwise, the adjective posterior serves no purpose. However, there is no facies anterior humeri, thus seemingly breaking rule six, and our research examines what happened to these missing, or "ghost", terms.

Having isolated all the terms in the TA2 which contain comparative locatives in the nominative case, we then further grouped the ones for which there is no respective opposite. Then we searched for the missing (or "ghost") term and what its new name is.

This paper discusses our surprising results, for we have discovered that many theoretically opposing terms lack their logical opposite terms, which in turn creates a great many inconsistencies in the terminology, rendering rule six somewhat null and void.

Anatomical names are supposed to be helpful. When the rule of opposing adjectives is broken, the nomenclature becomes harder to use for everyone involved.

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A Proposed Systematic Nomenclature for Muscular Variants: a Collaboration between Anatomists and Latinists

Keywords:
variants, anatomy, nomenclature, Latin, muscles

Abstract:
Introduction: This project, a collaboration between anatomists and Latinists, introduces a newly developed systematic approach to naming upper limb muscular variants in Latin, consistent with conventional principles guiding the major anatomical nomenclatures.

Materials and Methods: Bergman's Comprehensive Encyclopedia of Human Anatomic Variation was used as a reference source to compile our extensive list of muscular variants of the shoulder, arm, forearm and hand, and we propose a corresponding Latin name for each one.

Results: We are proposing over 400 new Latin names for the muscular upper limb anatomical variants identified in Bergman's Encyclopedia. For each variant, we propose an identifying number that corresponds to an existing anatomical term in the TA2, an English equivalent describing the key features of the variant structure, a Latin name to distinguish the variant from all other structures, and a literal English translation of the Latin name.

Discussion: Since there is no widely accepted system for naming anatomical variants, we are proposing one. New variants are being continuously documented, but without consistent, accurate, and unique names, and a reliable system for organizing those names, this valuable knowledge will not reach its widest possible audience. Furthermore, much of it risks being lost due to the haphazard and unsystematic way it is currently being recorded and discussed.

Significance and Implication: Since this is a complete and systematic proposed Latin naming system for anatomical muscle variants, we hope and believe it will serve as a foundation upon which names can be developed for many other anatomical variants.

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Internal medicine resident accent and assessment by physicians, nurses, and patients: A randomized, deception design study

Keywords:
accent discrimination, medical training, assessment of medical residents, deception-design study, equity, diversity and inclusion in medicine

Abstract:
Medical trainees from underrepresented backgrounds may experience discrimination. One potential source of discrimination is accent, with speakers whose pronunciation features differ from local norms being judged as less competent. In this study, we focus on speakers with second language, or foreign, accents, which can influence perceptions of credibility, intelligence, confidence, and ambition. We sought to understand whether resident accent was associated with assessment of resident performance by physicians, nurses, and patients.
Participants—26 physicians, 33 nurses and 55 patients—were randomized to listen to an audio recording of a male resident physician with a Cantonese or Canadian accent. Each participant listened to the same two clinical vignettes: one representing an above average performance and one presenting a below average performance by the resident. Participants rated the resident's performance for each vignette using a standard evaluation scale (physicians) and a sliding scale from 1 (worst performance) to 1,000 (best performance) to rate likeability (nurses and patients), competence, professionalism, communication, and comprehensibility. The primary outcome was the mean difference in performance ratings between the Canadian- and Cantonese-accented resident.
There were no significant rating differences between Cantonese-accented and Canadian-accented male medicine residents by nurses and patients. There was no difference in rating by physicians between Canadian- and Cantonese-accented residents with an above borderline performance. Nonetheless, physicians rated the Canadian-accented resident's communication as superior to that of the Cantonese-accented resident on the below borderline performance vignette. While the results of this study point in general to a lack of accent bias, this last finding is indicative of a preference for Canadian-accented speech. We will discuss the real-world implications for physician EDI-training.

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STRENGTHENING WORKFORCE READINESS: THE IMPACT OF OET ON INTERNATIONALLY TRAINED NURSES IN THE NHS

Abstract:
As international recruitment continues to play a vital role in sustaining healthcare systems, the need for effective language proficiency assessments has never been greater. This presentation will explore key findings from the OET Impact Report, which highlights the pivotal role of the Occupational English Test (OET) in supporting internationally trained nurses as they transition into healthcare roles in the UK's NHS. Findings indicate that OET's healthcare-specific content not only enhances candidates' chances of achieving required scores more efficiently but also boosts their professional confidence and workplace readiness.

This session will examine how OET's focus on real-world clinical communication prepares candidates for workplace challenges, ultimately improving patient safety and integration into healthcare teams. Insights from test takers and recruiters will illustrate how OET supports career progression and successful adaptation to NHS roles. This presentation will also provide valuable takeaways for educators, recruiters, and healthcare leaders on the role of targeted language assessment in workforce development. Attendees will gain a deeper understanding of how OET helps build a more confident and communication-ready nursing workforce, ultimately improving patient care and professional outcomes.

Methodology:
The study aims to answer one overarching research question: What has been the social impact of introducing OET in the UK healthcare sector? To answer the overarching research question, the following more targeted research questions are addressed:

RQ1. How has the introduction of OET impacted candidates' recruitment and registration journey?

RQ2. How has OET test preparation benefited candidates in their NHS clinical practice?

RQ3. What has been the most significant change for key OET stakeholders since the test was introduced in the UK?

RQ4. What would have been the outcomes if the intervention (i.e. introduction of OET) had not taken place? To what extent can the observed changes be attributed to the introduction of OET, considering the counterfactual scenario? (Causal impact assessment)

The research presented in this paper was conducted from an exploratory perspective and employed a qualitative design. Additionally, this study borrows principles and tools from social impact evaluation, namely a joint causal attribution framework model (Rogers, 2014). A purposive sampling strategy was used in this study. The final sample size was dictated once theoretical saturation had been reached and therefore no new or relevant data was emerging, and the research questions had been answered (Corbin & Strauss, 2008). Semi-structured interviews were conducted with healthcare recruiters, clinical educators and pastoral care providers, test preparation providers and candidates between February and July 2023 and were recorded with consent from the participants.

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METAPHORS AND VACCINES: OPPORTUNITIES AND CHALLENGES

Keywords:
metaphor, vaccines, vaccine attitudes, vaccine hesitancy, public health messaging

Abstract:
What do memories, raincoats and snakes have in common? They have all been used as metaphors for vaccines by people with different views and communicative goals.

This talk is concerned with how, why and with what potential consequences metaphors are used to communicate about vaccines by different people in different contexts, including popular science books, public health campaigns, parents writing online, and podcasts by celebrity anti-vaxxers. It shows how different metaphors are used to achieve different communicative goals, from explaining how rapidly developed vaccines are safe, to suggesting that vaccines are part of a large-scale conspiracy at the expense of ordinary people.

Both opportunities and challenges arise from a consideration of these patterns in metaphor use and an appraisal of the world in the mid-2020s (e.g. a vaccine hesitant government in the USA). First, metaphors can be one of the tools to be deployed to address the loss of confidence in vaccines caused by the pandemic-related experience of being repeatedly infected by a virus after one or several vaccinations. Second, pro-vaccination metaphors by scientists and public health agencies tend to be clear and accessible but do not usually match the high emotional valence of anti-vaccination metaphors, nor the way in which anti-vaccination metaphors fit into a broader terrifying narrative of which vaccines are a part. An awareness of this mismatch may be helpful in crafting metaphorical and non-metaphorical future public health messages about vaccinations.

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DOCTORS' QUESTIONS IN MEDICAL ENCOUNTERS: A DISPLAY OF POWER OR A PATH TO DIAGNOSIS?

Keywords:
questions, doctor-patient communication, medical encounter, institutional communication, discourse analysis

Abstract:
Questions are not only one of the most frequently researched aspects of medical encounters but also among the most crucial, as they clearly reflect the positions and rights of interlocutors in institutional interactions. Numerous studies have demonstrated that the institutional representative (the doctor in this case) holds the privileged right to ask questions and direct the course of the encounter, creating a visible asymmetry in power (Mishler, 1984; Ainsworth-Vaughn, 1998; Ainsworth-Vaughn, 2001; Cordella, 2004; West, 1984, Klikovac, 2008).
This study examines the role of doctors' questions in 110 recorded medical encounters conducted in three tertiary institutions in Belgrade, Serbia, between May 2013 and April 2015. The corpus includes interactions between six doctors and their patients across five specialties: pulmonology (37 recordings), pediatrics (43), psychiatry (4), otorhinolaryngology (10), and cardiology (16). Following a theoretical overview and a classification of question types considered in the analysis, we present findings from previous relevant studies, with particular attention to the motivations behind doctors' questions.
A total of 886 doctor-initiated questions were identified, with yes-no questions being the most frequent, followed by restrictive WH-questions and rising intonation-pattern questions. Examples illustrating each type are provided. Additionally, the findings are analyzed in relation to gender and the type of encounter (initial consultation vs. follow-up visit). The study concludes with some insights and recommendations for future research.
Key words: questions, doctor-patient communication, medical encounter, institutional communication, discourse analysis

References:
· Ainsworth-Vaughn, N. (1998). *Claiming power in doctor-patient talk.* Oxford University Press.
· Ainsworth-Vaughn, N. (2001). The discourse of medical encounters. In D. Schiffrin, D. Tannen & H. E. Hamilton (Eds.), *The handbook of discourse analysis* (pp. 453-469). Blackwell Publishers.
· Cordella, M. (2004). *The dynamic consultation: A discourse analytical study of doctor-patient communication.* John Benjamins Publishing Company.
· Klikovac, D. (2008). Prilog kritičkoj analizi konverzacije: diskurs moći u lekarskoj ordinaciji. *MSC Naučni sastanak slavista u Vukove dane,* 38(3), 33-80.
· Mishler, E. (1984). *The discourse of medicine: Dialectics of medical interviews.* Ablex Publishing Corporation.
· West, C. (1984). *Routine complications: Troubles with talk between doctors and patients.* Indiana University Press.

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AI-SUPPORTED DISCOURSE ANALYSIS OF VACCINE SKEPTICISM IN A POST-TRUTH CONTEXT: ARGUMENTATION STRATEGIES OF VACCINE SKEPTICS IN HUNGARY

Abstract:
In an era frequently described as "post-truth"—a label used to characterize contexts where personal beliefs and emotions heated by online discourses often override objective facts—, vaccine skepticism poses a significant challenge to public health communication. In Hungary, over 5,000 health visitors serve as frontline professionals, counseling parents on child immunization amid a landscape increasingly influenced by online misinformation and conspiracy theories.

The current study, which is part of a broader research project that employs both qualitative and quantitative methods to address the phenomenon of vaccine skepticism, focuses on a critical discourse analysis of online vaccine-skeptical narratives. For our study, we gathered anonymised data through scraping social media contributions shared by users, mainly in YouTube comment streams, complemented by posts on X and Reddit, and employed thematic analysis using generative AI, manual coding and thematic analysis in Nvivo. The study aims to uncover the argumentation strategies, emotional appeals, and misinformation tactics prevalent in Hungarian vaccine-hesitant and anti-vaccine online communities. The insights derived from this analysis will inform the design of quantitative survey instruments and will be also translated into evidence-based communication recommendations. Ultimately, this research contributes to the development of inclusive and culturally sensitive messaging strategies for health visitors, fostering trust and enhancing diversity in healthcare communication.

Our results suggest that vaccine skepticism in Hungary is driven by a strong opposition frame that portrays public health measures as control rather than protection. From a social constructionist perspective, vaccine hesitancy is rooted in broader distrust toward institutional authority, reinforced by narratives linking medical interventions to political coercion.

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DESCRIPTIVE QUALITY OF PEDIATRIC INJURY REPORTS: A RETROSPECTIVE ANALYSIS FROM HUNGARY

Abstract:
Pediatric injuries, whether involving open wounds or presenting as bruises, hematomas, or suffusions without skin disruption, are central to assessing the nature of trauma. Accurate documentation at the point of first medical contact is not only essential for clinical care but also forms the evidentiary basis of later forensic evaluation (Manan et al., 2022). Since physical signs may heal before legal proceedings begin, early records often become the only reference (Swoboda & Feldman, 2013). Previous studies have also shown that Hungarian MDRIs often contain inconsistent or insufficient terminology, which may compromise both treatment and child protection efforts (Fogarasi et al., 2025).
The aim of the present study is to evaluate the descriptive accuracy of pediatric injury documentation from a Hungarian hospital, with special attention to injuries with and without skin continuity disruption.
We analyzed a total of 138 anonymized MDRIs containing 441 individual injury entries. We evaluated documentation of injury characteristics, anatomical location, and semantic equivalence between Latin and Hungarian diagnostic terms. Differences in descriptive detail were compared between injuries with (N=42) and without (N=233) skin continuity disruption. Our preliminary results show that in the cases of skin continuity disruption ('wounds') the documentation of wound edges and bases was missing in 90.5% and depth in 57.1%. Among injuries without skin continuity disruption, such as hematomas, only 1.3% of reports included color or age, and only 5.6% included reference to the shape of the injury. Laterality was absent in 74.1% of all entries. Complete equivalence of the Latin and Hungarian diagnoses was detected in 32.7%, whereas it was only present in a mere a 39% of the documented locations of injuries. Our results are consistent with international findings on insufficient clinical documentation of pediatric injuries involving risks of clinical and forensic misclassification (Abantanga et al., 2020; Sirokmány et al., 2023).
Our findings reveal critical inconsistency in primary clinical documentation of pediatric injuries. Addressing these terminological ambiguities and improved training for clinicians, clearer terminology, and structured reporting tools (Sirokmány et al., 2023) may enhance the forensic applicability of pediatric reports. Accurate documentation at first contact is essential for protecting children and preserving crucial information for potential legal proceedings.

References:
· Abantanga, F. A., Lodwick, D., & Nwomeh, B. C. (2020). *Pediatric Injury Scoring and Trauma Registry* (pp. 279–290). Springer, Cham. https://doi.org/10.1007/978-3-030-41724-6_26
· Fogarasi, K., Simon, G., Gátos, A., Gyenes, G., Gergely, P., & Patonai, Z. (2025). Head or skull injury?

Consequences of using mistranslated ICD diagnosis category: Multicenter, blinded, randomized controlled analysis. *Journal of Forensic and Legal Medicine,* 110, 102815. https://doi.org/10.1016/j.jflm.2025.102815

· Manan, M. R., Rahman, S., Komer, L., Manan, H., & Iftikhar, S. (2022). A multispecialty approach to the identification and diagnosis of nonaccidental trauma in children. *Cureus,* 14(7), e27276. https://doi.org/10.7759/cureus.27276

· Sirokmány, V., Fogarasi, K., & Patonai, Z. (2023). Accident or child abuse? Terminological requirements for clinical documentation of child injuries. *Porta Lingua* 65–78. https://doi.org/10.48040/pl.2023.2.6

· Swoboda, S. L., & Feldman, K. W. (2013). Skeletal trauma in child abuse. *Pediatric Annals,* 42(11), 236–243. https://doi.org/10.3928/00904481-20131022-11

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PREJUDICES AND STEREOTYPES IN HEALTH COMMUNICATION

Keywords:
prejudices, norms, awareness, health, communication

Abstract:
Communication between healthcare professionals and patients is a key element of quality healthcare. Prejudices and stereotypes influence the perception of the other person, the way of interaction and the quality of information transfer. This paper focuses on the role of biases in health communication, their impact on the healing process and ways to eliminate them.
The concept of "normality" is shaped by cultural, social and institutional factors. People automatically judge others based on first impressions; the resulting image shapes the view of the other person and influences the way we communicate with them. Prejudices can cause an underestimation of a person's communication and cognitive abilities and lead, for example, to "elderspeak" in the elderly.
As part of the Breaking Fences project, which aims to raise awareness of prejudice through educational programmes for students and healthcare staff, pilot research has been carried out into patients' prejudices towards young healthcare and social care staff. Methods: Young health and social care workers were encouraged to reflect on the perceived prejudice against them in work and its intensity, which they expressed through their signatures for each type of prejudice. Data: Data were collected from 79 individuals aged 20-25 years and analysed. Results: The highest level of prejudice was perceived in the area of young professionals' low age and lack of experience (92% of respondents). Prejudice towards their ability to express themselves verbally and communicate effectively was felt by 45% of respondents, and prejudice due to dialect or accent was identified by 35% of respondents.
The need for health professionals to self-reflect, validate their own impressions and respect individual patient preferences may contribute to the development of more effective and empathetic health communication.

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CANCER IN RUSSIAN PUBLIC DISCOURSE: METAPHORS AND MESSAGES

Abstract:
Cancer metaphor studies have been motivated by the need of conceptual mapping of the diseases which can possibly correlate with improving health communication and treatment. Some researchers [Semino et al. 2015] suggest that violence metaphors for cancer narrative may have a negative impact on patients' health outcomes. There is limited data on cancer language in the Russian public discourse, therefore we attempted to examine what cancer metaphors are common there and whether they are culturally specific.
The research corpus included internet interviews, reviews, blogs in which people diagnosed with cancer tell their stories. The material (7 000 words) was collected in 2024 from the websites of popular magazines, charity organizations and healthcare departments. We used contextual and semantic analysis to interpret cancer related vocabulary and to attribute it to various metaphoric groups.
Our findings show that a typical feature of Russian cancer narrative is avoidance of naming the diseases by the word cancer and its replacement by oncology. The patients are commonly labelled as oncopatients. The results suggest that violence metaphors are most common in patients' narratives. The conceptual mapping is represented by war vocabulary, e.g. battle, fight, win, lose, give up, step back, winner, enemy, victory. Another group of metaphors is represented by punishment vocabulary, e.g. death penalty, verdict, sentence to death. We have also identified clear reference to sin, used for feelings' and attitudes description, e.g. shame, did something wrong. We have made a conclusion that cancer is a rather sensitive and stigmatized issue for Russian public discourse.

Reference:
· Semino, E., Demjén, Z., Demmen, J., Koller, V., Payne, S., Hardie, A., & Rayson, P. (2017). The online use of Violence and Journey metaphors by patients with cancer, as compared with health professionals: a mixed methods study. *BMJ supportive & palliative care*, 7(1), 60–66. https://doi.org/10.1136/bmjspcare-2014-000785

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THE APPLICATION OF TELEHEALTH IN HEALTH SCIENCES AND ITS INTEGRATION INTO LSP EDUCATION

Keywords:
telehealth, students of health sciences, skills for telehealth, international healthcare settings, LSP

Abstract:
Due to the recent global challenges of our age and the growing demand for information technology, internet-based and AI-assisted tools (Davids et al., 2021), questions concerning the possibilities of their application in healthcare have gained increasing attention. (Bouamra et al., 2021; Keller et al., 2023)
Our research is intended to explore the extent to which healthcare students are exposed to telehealth during their clinical practice and their experiences and perceptions regarding its use. A key focus was also placed on identifying the skills students may need to navigate such tools effectively. This cross-sectional study used an online self-report questionnaire with qualitative and quantitative items to assess students' experiences.
A total of 140 Hungarian respondents – physiotherapy, speech and language therapy, nursing, and health visitor students – participated in our survey. 22.9% responded that they have already used infocommunication tools with patients. However, 57.1% of the students observed such tools being used during their practice, suggesting that their future application will likely become more widespread. 76.1% believed that telemedicine cannot fully replace in-person care. In relation to the skills required for telehealth applications, students emphasized the significant role of communication besides IT knowledge. Regarding the applied tools, the use of translation apps was also mentioned during communication with foreign patients. The development of telehealth-related competencies in international healthcare contexts could partially be supported within LSP (Language for Specific Purposes) classes. The results of our questionnaire would provide input for preparing these materials.

References:
· Bouamra, B., Chakroun, K., Medeiros De Bustos, E., Dobson, J., Rouge, J. A., & Moulin, T. (2021). Simulation-based teaching of telemedicine for future users of teleconsultation and tele-expertise: Feasibility study. *JMIR Medical Education, 7*(4). https://doi.org/10.2196/30440
· Davids, J., Lidströmer, N., & Ashrafian, H. (2021). Artificial intelligence for physiotherapy and rehabilitation. In N. Lidströmer & H. Ashrafian (Eds.), *Artificial intelligence in medicine*. Springer Nature Switzerland. https://doi.org/10.1007/978-3-030-58080-3_339-1
· Keller, V., Kis, L., & Printz-Markó, E. (2023). Digitalizáció az egészségügyben: Telemedicina megítélése egy empirikus magyar kutatás alapján. *Polgári Szemle: Gazdasági és Társadalmi Folyóirat, 19*(1–3), 197–212. https://doi.org/10.24307/psz.2023.0913

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MULTILINGUAL COMMUNICATION IN MENTAL HEALTHCARE: INSIGHTS FROM INTERVIEWS WITH MIGRANTS AND INTERPRETERS (MENTAL HEALTH FOR ALL PROJECT)

Abstract:
With increasing global migration, ensuring equitable access to mental healthcare for migrants who experience mental health issues due to displacement, trauma, and social exclusion is an urgent priority. A major barrier to accessing mental health services is linguistic and cultural discordance between migrants and mental healthcare providers. Interpreters play a crucial role in overcoming this barrier, yet the challenges they and migrants face remain underexplored.

This study, part of the EU-funded Mental Health for All project spanning nine European countries, examined language barriers in mental healthcare through a qualitative analysis of 117 semi-structured interviews with migrants (n=46) and interpreters/intercultural mediators (n=71) working in mental healthcare settings across Europe. Interviews were collected by partner institutions and analysed thematically using MAXQDA software.

Findings reveal distinct challenges for each group. Migrants report systemic barriers to accessing mental healthcare, inconsistent language support, and communication difficulties due to cultural differences in understanding mental health. Interpreters face blurred professional boundaries, a lack of emotional support and training, and the risk of vicarious trauma. Both groups highlight trust, confidentiality, and face-to-face interactions as critical components of effective mental health communication.

Our findings underscore the need for policies that improve interpreter availability, integrate culturally responsive mental healthcare services, and provide training and emotional support for interpreters to enhance the accessibility and effectiveness of mental healthcare for migrant populations.

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UNDERSTANDING CANCER IN PLAIN LANGUAGE: A PATIENT-FRIENDLY DICTIONARY

Abstract:
This study explores the development of a multimodal medical dictionary focused on oncology, primarily intended for patients. It is part of the third phase of the OncoTRAD project, titled OncoTRAD II: An Accessible Dictionary for Oncology Patients. Additionally, it serves as a valuable resource for translators, particularly in the area of heterofunctional medical translation. The study begins by outlining the methodology used for compiling terminology, which draws from medical articles, dictionaries, and specialized glossaries. In the first phase of the project, with the approval of the oncology team, a series of medical articles were selected to be adapted to multimodal formats such as comics, illustrations or infographics. In parallel to the development of these materials, the translators carried out the terminological extraction of those specialized terms that made the text difficult to understand. In the second phase, we were able to verify that the selection of terms was incomplete due to the lack of general terms. For example, the term sentinel lymph node had been collected, but not the term node. Therefore, we extracted terms related to cancer from Spanish dictionaries and glossaries specialized in medicine. It then presents the model for terminological entry adopted in this research, detailing its structure and key components. This model has been elaborated. This model card has been designed according to the purpose of the dictionary and contains the following fields: term, adapted and technical definition, categories, acronyms, English term, German term, synonyms, sources and illustrations. In addition to the basic fields found in the terminology card models, the principles of Graphic Medicine are maintained, and an image is provided to aid understanding of the term. A significant innovation of this resource is the inclusion of two types of definitions: technical and adapted. Technical definitions are sourced from specialized references and contain a high density of medical terminology. In contrast, adapted definitions are rewritten in plain, accessible language to enhance patient understanding. For example: the NCI Dictionary of Cancer Terms defines the sentinel lymph node as "The first lymph node to which cancer is likely to spread from the primary tumor. When cancer spreads, the cancer cells may appear first in the sentinel node before spreading to other lymph nodes". The adapted definition that we have include is "First lymph node into which the cancer cells move". To ensure consistency in the adaptation process, a set of guidelines on plain language in health communication has been developed, incorporating strategies for effectively conveying specialized knowledge in an easy-to-understand manner. Furthermore, this study introduces the digital platform used for categorizing and storing the compiled data. Finally, it presents the first version of the dictionary, which is publicly available through the project's website. This project aims to improve patient and caregiver comprehension of medical information provided by healthcare professionals. By developing a multimodal dictionary tailored for patients, it offers a reliable and accessible resource for understanding terminology related to diagnosis, treatment, and disease management.

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SEMANTIC SPACE OF MULTIMODAL TEXTS IN HEALTH EDUCATION DISCOURSE

Abstract:
The aim of the study was to analyze semantic space of multimodal texts in health education discourse.

Health education defined as an activity providing individuals with the information about their health, thus resulting in constructive lifestyle changes, is believed to be a type of mass communication nowadays. Multimodal texts involving more than one semiotic system are widely used in health education discourse, as they help adapt the medical content to the receptive skills and cognitive capabilities of the target population. The study of multimodal texts allows identifying the national and cultural specificity of the language of health education.

We performed psycholinguistic experiment involving 67 first-to-fourth-year undergraduate medical students. The study cohort was linguistically and ethnically diverse, since more than 20% of respondents were students from the Caucasian republics where there are over 15 official languages and 14 ethnic groups; however, Russian is the primary language. All respondents study English as their foreign language. The study corpus included seven texts on COVID-19 vaccine published on the WHO site, section multimedia, multimedia type video, under general title 'Pandemica series'. All texts were in English; all texts were 15 or 30 seconds long. Osgood's semantic differential was used to study the semantic space of multimodal texts. At the first stage of the experiment, we identified factors to evaluate the semantic field of the multimodal text. At the second stage, respondents evaluated the semantic content of communication applying the bipolar scales specified by antonymous adjectives: 'straightforward – complicated', 'emotional – rational', 'interesting – boring', 'abstract – real', 'moving – slow', 'extraordinary – conventional', 'optimistic – pessimistic', 'credible – deceptive', 'motivating – hindering'.

The results of the experiment provide understanding of how the respondents rate the topic and to which extend it is compliant to their expectations. Our findings also allow evaluating the contents associated with personal meaning, social attitudes, stereotypes, and other emotionally significant and poorly manifested forms of generalization.

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Evidentiality in Academic Writing through the Lens of Construction Grammar

Keywords:
academic writing, cognitive linguistics, construction grammar, discourse analysis, evidentiality

Abstract:
The limitless potential for analyzing academic writing has always piqued the interest of linguists. This presentation aims to tap into that potential by integrating methods from cognitive linguistics, construction grammar, discourse analysis, and corpus linguistics to examine evidentiality in academic discourse. Following the framework presented in Groom (2019), the study investigates the use of the Evidence "V that" construction in the British Academic Written English (BAWE)[*1] corpus, a 6.9-million-word collection of texts written by university students, published in 2019 and available for free with a Sketch Engine subscription. Four disciplinary areas were taken into consideration: arts, humanities and social studies; technical and technological sciences; natural sciences and mathematics; and medical science. It was found that the construction is key in the academic register on the whole, with high relative frequency in natural sciences and mathematics and a lower prevalence in medical science. Upon qualitative examination of the concordance lines, it was concluded that the sensory meaning variant of the construction dominates in "hard" sciences, while the verbs imply and suggest, indicative of inferred evidentiality, exhibit high relative frequency counts in the "soft" fields. The overarching pedagogical implication of this investigation is to illuminate the highly conventionalized and sometimes gatekept discourse structure and register-specific lexis of various academic disciplines.

- [*1] The data in this study come from the British Academic Written English (BAWE) corpus, which was developed at the Universities of Warwick, Reading and Oxford Brookes under the directorship of Hilary Nesi and Sheena Gardner (formerly of the Centre for Applied Linguistics [previously called CELTE], Warwick), Paul Thompson (formerly of the Department of Applied Linguistics, Reading) and Paul Wickens (Westminster Institute of Education, Oxford Brookes), with funding from the ESRC (RES000-23-0800).

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Lost in Comparison? The Role of Similes in Hungarian Forensic Autopsy Reports on Asphyxial Deaths

Abstract:
Earlier research (Jámbor-Hegedüs & Fogarasi, 2024) identified parallels in the use of metaphors for asphyxia-related causes of death in Hungarian, German, and English forensic literature. Building on this, our study examines similes reflecting empirical perceptions in Hungarian forensic autopsy reports on asphyxial deaths. Descriptions of color, texture, and tissue consistency in these reports rely on differential-diagnostically relevant adjectives that constitute key terminological elements. These expressions form so-called "units of understanding" (Temmerman, 2000), as their meanings cannot be strictly defined but are comprehended through empirical experience. Our objective is to explore which realia serve as reference points for these comparisons and whether they exhibit cultural specificity based on different causes of death.

To achieve this, we analyzed 84 anonymized autopsy reports from the Institute of Pathology, Forensic and Insurance Medicine at Semmelweis University Budapest. The dataset included 11 cases of drowning, 8 cases of homicide, 45 cases of hanging, and 20 cases of carbon monoxide poisoning. Using Maxqda software, supplemented by manual examination, we focused on the similes employed for differential diagnostic purposes in each category.

Our findings reveal that several of these realia no longer exist in contemporary Hungarian. Some referents—such as "horsehair pillow haptics" or "scarlet-fever-like color"—are unfamiliar to modern language users. Nevertheless, these highly specific similes provide unambiguous forensic evidence for certain injuries. This case study will contribute to a broader comparative analysis, in which we aim to contrast our results with German, Austrian, and English forensic autopsy reports.

Understanding and systematically analyzing these terms is crucial for effectively teaching forensic medicine to students who speak modern Hungarian. Moreover, cross-linguistic comparisons of such expressions may uncover intercultural differences and contribute to the development of internationally standardized forensic diagnostic documentation.

References:
· Jámbor-Hegedűs, P., & Fogarasi, K. (2024). Metaphors survive us: Pictorial terms used in forensic medicine for morphological alterations in death by asphyxia in a Hungarian-German-English comparison. In J. García Laborda, K. Fogarasi, J. Császár, & D. Mány (Eds.), *22nd AELFE Conference 2024: Challenges of LSP teaching and research in the era of the language technological revolution* (p. 25). Semmelweis University, Institute of Languages for Specific Purposes.
· Temmerman, R. (2000). *Towards new ways of terminology description.* John Benjamins Publishing Company.

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Bridging Feeling and Fact: A Lexicographic Analysis of Patient Perceptions in Reporting Cardiovascular Symptoms

Abstract:
Deciphering and categorizing patients' subjective symptom narratives remains a key challenge in the early stages of medical diagnosis (Albarran et al., 2007; Chun et al., 2004; Jones et al., 2010). This process is further complicated by the fact that patients frequently employ figurative–metaphorical or metonymical–language to describe their symptoms (Qiu et al. 2024). In medical practice, organizing symptoms into clusters—such as physical symptom clusters, cognitive dysfunction clusters, mood disturbance clusters, etc.—can facilitate the diagnostic process of cardiovascular conditions (Zhou et al. 2025).

This study investigates symptom perception in patients seeking advice about cardiovascular problems in the "Ask the Doctor" section of the Hungarian health website Webbeteg.hu. A text corpus was compiled from approximately 100 patient-asked questions concerning cardiovascular diseases, collected between January 2023 and December 2024. The selection and qualitative analysis of expressions describing patients' subjective symptoms were carried out using MAXQDA software and manual coding.

According to the findings, in their symptom reports, patients do not use formal medical terminology but instead describe their subjective experiences, which are often grounded in folk models of illness. For example, they describe feeling symptoms such as *mintha sok hangya menne* 'as if many ants were walking,' *mintha enyhe vákum lenne a mellkasomban* 'as if there were a slight vacuum in my chest,' *sokszor majd kiugrik a szívem a helyéről* 'often, my heart almost jumps out of its place' or *mintha egy boxütés érné a mellkasomat* 'as if a boxer's punch hit my chest.'

Our analysis provides a solid basis to categorize these perceptions based on the location and nature of the symptoms for comparing lay descriptions of symptoms with professional medical terminology, offering potential insights for use in medical diagnosis and communication.

References:
· Albarran, J. W., Clarke, B. A., & Crawford, J. (2007). "It was not chest pain really, I can't explain it!" An exploratory study on the nature of symptoms experienced by women during their myocardial infarction. *Journal of Clinical Nursing,* 16(7), 1292–1301.
· https://doi.org/10.1111/j.1365-2702.2007.01620.x
· Chun, A. A., & McGee, S. R. (2004). Bedside diagnosis of coronary artery disease: A systematic review. *American Journal of Medicine,* 117(5), 334–343.
· Jones, M. M., Somerville, C., Feder, G., & Foster, G. (2010). Patients' descriptions of angina symptoms: A qualitative study of primary care patients. *The British Journal of General Practice,* 60(579), 735–741.
· Qiu, A. H., Tay, D., & Watson, B. (2024). Metaphorical language and psychopathological

symptoms: A case study of trauma victims' metaphor use. *BMC Psychology,* 12, 57.

· Zhou, S., Yin, D., He, H., Li, M., Zhang, Y., Xiao, J., Wang, X., Li, L., & Yang, D. (2025). Differences in symptom clusters based on multidimensional symptom experience and symptom burden in stroke patients. *Scientific Reports,* 15, 11733.

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The Epidemiological Terminology of COVID-19 in Today's Hungarian Online Media

Abstract:
During the COVID-19 pandemic, due to epidemiological measures, medical, mainly epidemiological, infectological, and immunological terminology, which had previously been used only in narrower professional discourse, flooded into standard language. Earlier research (Varga et al. 2022, Biró et al. 2022, Varga et al. 2023) focused on neologisms of specialized linguistic origin, disseminated through the media in 2020–21 and started on the path of determinologization into lay language. Three years after the pandemic, examining the current presence of epidemiological terms in today's public discourse has become relevant.

This research aims to map the presence of epidemiological terms in the language use of today's online press.

For the analysis, we extracted narrowly specialized epidemiological terms (cf. Doraiswamy et al., 2022) using keyword search – in Sketch Engine corpus management software – from a text corpus built from specialist news content on the Epidemiology and Surveillance Center of Semmelweis University's website. We then manually selected 50 terms that appeared in the subcorpus compiled from news articles under the tag "coronavirus" and published by the Hungarian Index online news portal during 2020–21, as part of the COVID corpus (Varga et al. 2022). The current media presence of the selected 50 terms was examined in their concordances using the Index news portal search engine.

As a result of our research, we concluded that although there have been epidemics in the last two years (e.g. measles, or whooping cough) and epidemiological terms continued to appear in epidemiology-related news, the usage of COVID-specific terms was substantially less frequent compared to the pandemic period, even in relation to the later waves of COVID. Some of the terms have not occurred since 2022: primarily those related to epidemic control (kontaktuskutatás 'contact tracing', megbetegedésszám 'number of cases', átfertőzöttség, 'infection rate'), to infected individuals (ellenanyagszint 'antibody levels', átvészeltség 'seroprevalence'), and to vaccination (vakcinatípus 'vaccine type', egykomponensű 'single-component', oltópont 'vaccination sites').

References:
· Biró, E., Kovács, G., Nagy, I. K (2022). Szókincsváltozások és determinologizáció a Covid19-járvány idején. In Nyelvek, nyelvváltozatok, következmények II. m1020nynyk_135
· Doraiswamy, S., Mamtani, R., Cheema, S. (2022). An in-depth analysis of 10 epidemiological terminologies used in the context of COVID-19. *Scand J Public Health,* 50(6), 819-826.   doi: 10.1177/14034948211057736
· Varga, É. K., Zimonyi, Á., Indig, B., Sárközi-Lindner, Z., & Palkó, G. (2022). Durva influenza vagy veszélyes világjárvány? In *Nyelvek, nyelvváltozatok, következmények II*. m1020nynyk_215
· Varga, É. K., Márton, E., Indig, B., Sárközi-Lindner, Z., & Palkó, G. (2023). Erdélyi és anyaországi orvosi terminológia pandémia idején. Alkalmazott Nyelvtudomány, 1(klsz.), 76–95.

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Exploring Masculine Expertise in the Translation of Over-the-Counter Medicine Advertising

Keywords:
masculine expertise, masculine genericness, over-the-counter medicine advertising, advertising translation, gender-fair language

Abstract:
With the aim to discuss gender (in)equality and inclusivity in healthcare communication, this study focuses on the exploration of masculine expertise in the translation of over-the-counter (OTC) medicine advertising. In this case study, six main texts that promote an OTC medicine by Bayer are analysed. Specifically, I discuss two original German-language advertising spots from 2019, three Greek translated spots from 2019 and 2020, and an English-language translated spot from 2020. In addition to these six spots, I also discuss four parallel texts: an original German language text from 2022 along with its Greek and English-language translations from 2022 and 2020 respectively, which promote the same product as the main texts, and a German language original text from 2018 that promotes a similar product of the same brand. Regarding the methodology, I examine both the main and parallel texts mostly on the verbal level but also on the nonverbal level since advertising spots are audiovisual texts. Through this analysis, I find that expertise, stereotypically linked with men and masculinity, is expressed primarily through masculine genericness. Admittedly, it is very often difficult to avoid masculine genericness, predominantly in synthetic inflecting languages. However, there are increasingly diverse ways to promote gender-fair language, as the Greek texts also suggest. On the whole, this study emphasises the importance of developing literacy on gender topics in order to gradually enable textual modifications that facilitate gender-fair language use in OTC medicine advertising, its translation, and beyond, promoting inclusivity and diversity in healthcare communication.

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INCORPORATING SIGN LANGUAGES INTO TERMINOLOGY SCIENCE: A MULTIMODAL APPROACH FOR INCLUSIVE HEALTHCARE COMMUNICATION

Abstract:
Terminology science deals with the organization, representation, and transfer of specialized knowledge (Vezzani, 2022). Traditionally, it has focused on one main form of knowledge representation, this being the written form (which derives from spoken language: Chafe and Tannen, 1987), analyzing terms used by experts in texts (Thoiron & Béjoint, 2010).
This emphasis reveals a key limitation in the field. Indeed, among the varieties of human languages, ISO 639:2023 specifies three main language modalities – as "the specific medium or channel used for communication" – which can be used as form of communication: the spoken, the written and the signed modalities (the latter being the basic modality for individual sign languages - SLs).
In the medical domain, this gap disproportionately affects deaf SL users, who often lack access to signs for specialized concepts such as cholesterol or side effects (Napier et al., 2015), increasing communication barriers and healthcare disparities. Moreover, without a multimodal theoretical and methodological framework, current terminology resources fail to support inclusive healthcare communication.
This proposal addresses three interrelated goals. First, it investigates the theoretical challenges of integrating SLs into terminology science, focusing on non-verbal concept representation, sign creation, and intermodal equivalence. Second, it proposes a new language-inclusive meta-model that introduces "modality sections" (signed, spoken, written) to extend the ISO 16642:2017 structure. This allows flexible representation of concepts across languages and modalities, including new entities like "object" and "designation." Third, it presents a multilingual, multimodal case study on mental health terminology (Kushalnagar et al., 2019), using data from SNOMED CT, ICD-11, MeSH, and SL repositories. Concepts like depression or anxiety will be documented across modalities to assess the model's inclusivity and practical impact on healthcare communication for deaf communities.

References:
· Chafe, W., & Tannen, D. (1987). The relation between written and spoken language. *Annual Review of Anthropology, 16*, 383–407. https://doi.org/10.1146/annurev.an.16.100187.002123 *(add DOI if known)*
· International Organization for Standardization. (2023). *ISO 639: Code for individual languages and language groups*. Geneva: Author.
· International Organization for Standardization. (2017). *ISO 16642: Computer applications in terminology – Terminological markup framework*. Geneva: Author.
· Kushalnagar, P., Reesman, J., Holcomb, T., & Ryan, C. (2019). Prevalence of anxiety or depression diagnosis in deaf adults. *The Journal of Deaf Studies and Deaf Education, 24*(4), 378–385. https://doi.org/10.1093/deafed/enz011
· Napier, J., Major, G., Ferrara, L., & Johnston, T. (2015). Medical Signbank as a model for sign language planning? A review of community engagement. *Current Issues in Language*

Planning, 16(3), 279–295. https://doi.org/10.1080/14664208.2014.972864

· Thoiron, P., & Béjoint, H. (2010). La terminologie, une question de termes? *Meta: Journal des Traducteurs / Meta: Translators' Journal, 55*(1), 105–118. https://doi.org/10.7202/039430ar

· Vezzani, F. (2022). *Terminologie numérique: Conception, représentation et gestion*. Peter Lang.

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PERSUASIVE MOVE ARRANGEMENT AND GENRE HYBRIDITY IN DIGITAL COMMUNICATION FOR RESEARCH FUNDING

Abstract:
In recent decades, applying for public research funding has become a demanding administrative procedure, and scientists have turned to alternative funding sources such as crowdfunding to raise money for their experiments (Mehlenbacher, 2019). With science crowdfunding, scientists can raise online donations through collaborative platforms that allow posting a crowdfunding proposal. This proposal can include a short video, or science crowdfunding video (hereafter SCV) to promote the research project in need of funding. The SCV is a digital genre (Luzón & Pérez-Llantada, 2022) involving science communication that has been found to produce a persuasive effect on potential donors (Sauermann et. al, 2019). Despite its fundraising potential, to my knowledge, no studies have been reported on what content to include or how to arrange it. Relying on Swales's (2004) move analysis model, this study explores the rhetorical structure of this innovative genre. For this purpose, 50 SCVs from projects in Biology, Ecology, and Medicine were collected from Experiment.com, and their moves were identified and coded with qualitative analysis software Atlas.ti. In addition, contextual inquiries (Hafner, 2018) about the communicative purposes of the SCV and the participants involved in their production and reception were made by examining informative texts from Experiment and conducting three interviews with scientists involved in the production of SCVs. The analysis shows seven compulsory moves, persuasively arranged, through which scientists convey their communicative purposes. Moreover, results show the hybrid nature of this genre, sharing discursive features with other promotional and scientific genres. This ongoing research seeks to contribute to a better understanding of an innovative form of scholarly communication that could be potentially useful for the elaboration of pedagogical materials for ESP and EAP courses.

References:
· Hafner, C. A. (2018). Genre innovation and multimodal expression in scholarly communication. *Ibérica, 36*, 15–42. https://revistaiberica.org/index.php/iberica/article/view/121
· Luzón, M. J., & Pérez-Llantada, C. (2022). *Digital genres in academic knowledge production and communication: Perspectives and practices*. Multilingual Matters.
· Mehlenbacher, A. (2019). *Science communication online: Engaging experts and publics on the internet*. The Ohio State University Press.
· Sauermann, H., Franzoni, C., & Shafi, K. (2019). Crowdfunding scientific research: Descriptive insights and correlates of funding success. *PLOS ONE, 14*(1), e0208384. https://journals.plos.org/plosone/article/file?id=10.1371/journal.pone.0208384&type=printable
· Swales, J. M. (2004). *Research genres: Explorations and applications*. Cambridge University Press.

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FROM PAPER TO APP: ZVEJA.SI, A MULTILINGUAL APP FOR COMMUNICATION IN HEALTHCARE

Keywords:
multilingual app, healthcare, communication, migrants, basic phrases, Slovene

Abstract:
This paper presents a new multilingual app designed to support Slovene healthcare professionals in communicating with migrants and refugees who do not speak Slovene. In a previous project (Pokorn & Lipovec Čebron, 2019), a multilingual phrasebook was developed, however a usability study (Pokorn et al., 2024) showed that while the printed phrasebook was well-accepted by healthcare workers, they would prefer to have an electronic format. This led to the development of Zveja.si, a web and mobile application that provides essential healthcare-related phrases and closed yes-no questions. The app covers ten main topics, including health conditions, women's and children's health, mental health, and dental care. Currently, it supports Slovene, English, French, Italian, and Albanian, with Russian, Chinese, Farsi, Ukrainian, and Arabic to be added soon. A key feature of Zveja.si is the integration of text-to-speech (TTS) conversion, allowing users to hear phrases in multiple languages rather than just reading them. As part of the app's development, we conducted a study to evaluate the quality of text-to-speech (TTS) conversion using ChatGPT, the tool recommended by our app developers. We tested approximately 1000 phrases in English and French to assess the accuracy and usability of the generated speech. Preliminary findings revealed several challenges, including unexpected silences, incorrect intonation, mispronunciations, an overly strong American accent, and occasional unnatural and distorted sounds. These issues highlight the need for further refinements to ensure that the app provides clear and reliable speech output for healthcare communication.

References:
· Pokorn, N. K., & Lipovec Čebron, U. (2019). *Večjezično zdravje: Komunikacijske strategije in večkulturni stiki s tujejezičnimi bolniki v slovenskem zdravstvenem sistemu*. Ljubljana University Press. https://geo.ff.uni-lj.si/publikacije/vecjezicno-zdravje
· Pokorn, N. K., Esih, M., Zelko, E., Hirci, N., Milavec Kapun, M., & Mikolič Južnič, T. (2024). Simulated role plays or field observation? Usability testing of a healthcare phrasebook. *Perspectives: Studies in Translation Theory and Practice*. https://doi.org/10.1080/0907676X.2024.2326965

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Redefining Doctor-Patient Relationship and Communication Patterns in Post-transitional Digitalized Societies: The Case of Public Healthcare in Croatia

Keywords:
public healthcare, digital health communication, doctor-patient relationship, patient agency, medical knowledge

Abstract:
The increasing availability of medical information online is fueling patients' expectations and critiques of public healthcare systems, making them more informed and engaged participants in their own care. This digital (r)evolution has created a new type of patients-consumer who no longer relies solely on doctors for health information. Virtual communities and online platforms allow patients to share experiences and review healthcare services, but also expose doctors to anonymous criticism. While these digital tools can enhance patient knowledge and improve doctor-patient communication, they can also create new tensions within that relationship. This research explores the impact of healthcare digitalization, online health information, and virtual communities on both users and providers within Croatia's post-transitional public healthcare system, while comparing it to similar global trends. It examines how digital communication channels and rising consumerist behavior are reshaping doctor-patient interactions, highlighting the broader implications of these changes for healthcare delivery. A qualitative approach was employed, 62 scholarly publications deemed relevant by the authors and related to the topic were used in the analysis, with an examination of Croatian digital health spaces (e.g. health forums, doctor rating & review sites, medical information sites). This was further complemented by narrative interviews with patients and doctors within the Croatian public healthcare system. The interviews were recorded, transcribed, and coded for analysis. Excerpts from interviews with six patients and four doctors that serve as points for further analysis are used in this research. Findings show that digital platforms have expanded healthcare beyond the physical hospital, challenging traditional boundaries. A key issue now is how to integrate "Dr. Google" into everyday medical practice. Although the patients' firsthand experiences and personal understanding of health and illness cannot be disputed, there is increasing concern about their ability to interpret online health information accurately, especially as they face growing pressure to stay informed and manage their own care.

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POST-EDITING OF NMT AND LLM OUTPUT COMPARED TO HUMAN TRANSLATION: A KEYLOGGING EXPERIMENT IN THE MEDICAL TRANSLATOR TRAINING CLASSROOM

Abstract:
Using the keylogging software Inputlog, this paper compares post-editing and human translation processes based on a recent classroom experiment conducted with four MA students with different language profiles and at various stages of their degree, who rendered a medical text from German into English. In terms of content, the experiment focuses on a short excerpt from a text on contemporary gender medicine published by Alexander Korte in 2022.

During the experiment, half of the participants translated an excerpt form Korte's text into American English without machine assistance, while the other half post-edited what they considered to be the strongest of four automatic translations. As a first step, the students in the post-editing group ranked the automatic translations. The first two were generated with the DeepL next-generation and classic language model respectively, while the other two were produced with ChatGPT, using an unspecific and an enhanced prompt. Once the students had ranked the four automatic translations, they created a full post-edited version from their preferred English text.

Overall, this experiment highlights the main advantages and disadvantages of post-editing as opposed to human translation, showing that time is saved at the expense of stylistic individuality and, sometimes, quality. Other key aims associated with this experiment include outlining the strengths and weaknesses of DeepL compared to ChatGPT as translation tools and analyzing the positive effects of enhanced prompts on the quality of automatic translation output. When examining how automatic translation transforms our work, we are usually limited to analyzing the products of translation. This group experiment, however, allows us to follow the processes of individual translators as they produce their texts. This sheds new light on both the linguistic and the cognitive impact of automatic translation, which has been drastically changing translators' work for almost a decade.

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Giving voice to deaf patients in Wales: Promoting more positive healthcare experiences through first-person narratives

Keywords:
British Sign Language (BSL), Wales, deaf health & wellbeing, healthcare, first-person narratives, deaf community, narratives, thematic analysis

Abstract:
The deaf British Sign Language (BSL) community in Wales faces many challenges in accessing healthcare services and interacting with service providers. The main barrier is language, with little health information available in BSL and BSL-English interpreters present at only a minority of healthcare appointments. As a result, deaf patients are more likely to be underdiagnosed or misdiagnosed or unaware of which medications they should take and why. In this contribution, we use first-person narratives from Welsh deaf BSL signers to explore how healthcare interactions can be improved for this linguistic minority group. First-person narratives allow us to give voice to a patient population that is often not listened to. Following a demographic questionnaire, we asked participants to tell us stories of negative and positive healthcare experiences they have had using open-ended interview questions. For positive experiences, we explored what made the experience positive and for the negative experiences, we asked what can be done to improve their interactions and experiences. Thematic analysis of the narratives then identified common themes and factors that led to positive healthcare experiences. We used these themes and factors to present concrete patient and community-led suggestions that can improve deaf patients' healthcare experiences in Wales.

Number of the participants: (n=10)
Themes: Attitudes; awareness, information and communication; deaf mental health; dignity; access to healthcare; risk to health or life; role of BSL-English interpreters; monolingual services; and other broader challenges.
Negative experiences: Participants expressed frustration with how healthcare providers often perceive being deaf as something to be 'fixed' rather than accommodated, with the challenges posed by a lack of awareness and understanding regarding deaf people's communication needs within healthcare settings, and that interpreters often lack familiarity with medical jargon or the specific needs of deaf patients. These factors and others often left participants feeling dehumanised or ignored within healthcare settings.
Positive experiences: Participants recounted positive experiences when healthcare staff understood BSL and Deaf culture, when an interpreter was arranged for an appointment without having to request one, and when a GP / provider had familiarity with the patient's communication preferences which then contributed to a more comfortable and reassuring experience.

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THE POWER OF WORDS: REDUCING STIGMA AND FOSTERING INCLUSION

Keywords:
person-first language, identity-first language, autism, diabetes, deaf community

Abstract:
In the 1980s, the National People with AIDS Movement rejected stigmatizing terminology, emphasizing their identity as "People with AIDS" rather than "victims" or "patients." This push for person-first language sought to humanize individuals and challenge narratives of passivity, helplessness, and defeat. The adoption of person-first language gained further momentum in 1990 with its inclusion in the Americans with Disabilities Act, shaping communication practices across U.S. healthcare settings.

Through a review of the literature, this presentation will explore the practical and emotional impacts of person-first language on patient care and identity for two distinct patient communities. It will go on to discuss the subsequent 're-introduction' of identity-first language for one of the above patient communities.

Finally, the presenter will provide actionable strategies for international healthcare professionals to navigate the complexities of respectful and inclusive communication. We will brainstorm approaches for advocating person-first and/or identity-first terminology, addressing concerns around communication breakdown, and fostering dialogue that prioritizes empathy, respect, and dignity in healthcare interactions, ultimately contributing to improved patient outcomes, enhanced trust between patients and providers, and the reduction of stigma within healthcare settings.

This session is essentially practical in nature and will equip trainers with the tools to engage thoughtfully with language, ensuring the development amongst their learners of more supportive and inclusive patient-centred care.
https://www.youtube.com/watch?v=ydEi_nmSGmk

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ENHANCING NURSING COMMUNICATION SKILLS: THE ROLE OF ARTIFICIAL INTELLIGENCE IN ENGLISH FOR SPECIFIC PURPOSES EDUCATION

Abstract:
The integration of Artificial Intelligence (AI) into English for Specific Purposes (ESP) courses for Nursing students represents a transformative approach to education, addressing the specialized language and communication needs of future healthcare professionals. Nursing students often require proficiency in medical terminologies, patient communication, and documentation, which differ significantly from general English skills. AI offers personalized and adaptive learning experiences, enabling students to practice context-specific language skills at their own pace. Through AI-driven tools such as chatbots, virtual simulations, and language learning applications, students can engage in realistic, interactive scenarios that mimic real-world healthcare settings. This study employed a mixed-method approach, combining both quantitative and qualitative methodologies to examine the impact of AI tools on language acquisition in ESP courses for Nursing students. Data was collected through surveys, interviews, and pre- and post-course assessments to evaluate improvements in students' linguistic competency and confidence. A total of 120 Nursing students participated in the study, representing intermediate to advanced English proficiency levels, as determined by standardized language placement tests.

AI's capacity to process vast amounts of data and adapt to individual learning trajectories is particularly beneficial in ESP courses for Nursing. By utilizing advanced algorithms, these tools can identify specific areas where students struggle, such as understanding complex medical terms or applying proper communication protocols in patient care. This insight allows for customized instruction and resource allocation, ensuring that learning is both efficient and effective. Moreover, AI tools provide consistent and immediate feedback, enabling students to correct errors and refine their skills in real time, which is critical in mastering the nuanced language used in medical settings.

Furthermore, AI can analyze individual performance and provide targeted feedback, allowing educators to tailor their instruction to address specific gaps in knowledge and skills. This data-driven approach enhances learning outcomes and ensures students are better prepared for professional communication challenges in the healthcare sector. AI also facilitates the integration of multimedia resources, such as videos and case studies, to create engaging and immersive learning environments. Interactive case studies, for instance, simulate real-life scenarios where students must apply their linguistic and clinical knowledge, bridging the gap between theory and practice.

By leveraging AI, ESP courses for Nursing can overcome traditional barriers to effective language acquisition, such as time constraints and varying proficiency levels among students. Additionally, AI fosters collaborative learning through virtual platforms, encouraging peer interaction and the sharing of knowledge. Students can participate in AI-moderated discussions or group activities, where they learn to communicate effectively as part of a healthcare team. This collaborative aspect not only reinforces their linguistic abilities but also prepares them for the interpersonal dynamics of clinical environments.

Moreover, AI contributes to the development of cultural competence, an essential skill in nursing practice. Virtual simulations and role-playing scenarios can expose students to diverse patient

interactions, helping them to navigate cultural sensitivities and provide inclusive care. This feature is particularly important in globalized healthcare settings, where nurses often work with patients from various linguistic and cultural backgrounds.

This technological advancement not only improves linguistic competency but also boosts confidence in using English in critical medical contexts. By simulating high-pressure situations, such as emergency room communications or patient counseling, AI tools help students build the resilience and clarity needed to perform effectively under stress. Ultimately, incorporating AI into ESP courses for Nursing students equips them with the essential communication tools to excel in their field, ensuring both patient safety and quality care. The integration of AI thus represents a significant step forward in aligning language education with the complex demands of modern healthcare.

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ENHANCING COMMUNICATION SKILLS IN HEALTHCARE: THE ROLE OF STANDARDIZED PATIENT SIMULATION IN DELIVERING BAD NEWS

Keywords:
communication skills, simulation, delivering bad news, standardized patient, SPIKES protocol

Abstract:
Background: Delivering bad news is a challenging yet essential skill for healthcare professionals. It requires sensitivity, empathy, and effective communication. Standardized patient (SP) simulations have emerged as a valuable tool for training in this area, providing a realistic and controlled environment for practice. The safe environment to practice communication skills refines the abilities of healthcare providers to deliver bad news and receive constructive feedback on what went well and opportunities for improvement. With this knowledge, the healthcare professional can reflect on how they can improve for the next experience, whether it is in a simulation or actual patient encounter.

Objective: The primary objective is to evaluate the effectiveness of SP simulations in improving the communication skills of healthcare professionals, specifically in the context of delivering bad news. Areas of improvement to consider outside of communication skills include confidence, empathy, and the ability to handle emotionally charged situations.

Methods: A comprehensive review of recent literature was conducted, focusing on studies published within the last five years that examine the use of SP simulations in teaching the delivery of bad news. Additionally, the lived experience of a university educator and an SP will be explored related to their interaction with the learners going through the simulation experience.
The simulations were structured using the SPIKES protocol, a recognized framework for breaking bad news.

Outcomes: The simulations significantly enhanced learners' confidence and competence in delivering bad news. They reported improved comfort in managing emotional responses and demonstrated increased empathy and communication skills. Feedback from SPs emphasized the importance of realistic scenarios in fostering experiential learning. The simulations provided a safe space for learners to practice and receive feedback, leading to better preparedness for real-life clinical encounters.

Discussion: The findings from the literature and lived experiences of the university educator and an SP during simulations underscore the importance of conducting SP simulations in healthcare professional education, particularly in teaching the delivery of bad news. The simulations offer a unique opportunity for healthcare professionals to develop and refine their communication skills in a controlled, supportive environment. However, opportunities for improvement identified by the university educator and SP include pre-work to better prepare the learners to manage through the emotional impact of the experience, coaching during the pre-brief and debrief to build the learners' confidence, and ensuring a skilled facilitator is guiding the simulation from beginning to end. Addressing these opportunities is crucial for maximizing the effectiveness of SP simulations.

Implications for Practice: The integration of SP simulations into healthcare professional education can significantly enhance the communication skills of healthcare professionals, leading to improved patient outcomes and satisfaction. Educators and institutions should prioritize the development and implementation of these simulations, ensuring that healthcare providers are well-equipped to handle the challenges of delivering bad news. Additionally, ongoing research and evaluation are essential to refine simulation techniques and maximize their educational impact.

Conclusion: Standardized patient simulations are a valuable educational tool for improving the communication skills of healthcare professionals, particularly in the context of delivering bad news. By providing a realistic and immersive learning experience, these simulations enhance learners' confidence, empathy, and ability to handle difficult conversations.

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Student Perceptions of AI Translation Tools: Ethical Awareness, Misconceptions, and Implications for Medical Language Education

Abstract:
The integration of Artificial Intelligence (AI) in higher education presents notable challenges and opportunities, even more so in foreign language education for specific (academic) purposes, including medicine. This research draws on theoretical frameworks from Technology-Enhanced Language Learning (TELL) and AI ethics in education. Through a cross-sectional survey (n=186) administered to students from diverse disciplines at the University of Ioannina (Greece), this study explored their patterns of AI tool usage, ethical awareness, and training needs. Participants reported a frequent use of AI tools, notably Google Translate and ChatGPT, mainly for small-scale translation tasks and specific terminology, rather than for translating full documents or grammar correction. Age, foreign language proficiency, and academic year did not predict frequent AI use, whereas medical students had higher odds of daily or weekly reliance. Despite their usage, medical students' trust in AI output and concern about inaccuracy, confidentiality, and bias mirrored those of other faculties. Additionally, medical students expressed a consistently high demand for future structured support and training. The results further underscore critical gaps in students' understanding of a responsible use of AI-powered translation tools and of the various technological distinctions in translation technologies. The evidence therefore calls for foreign-language programmes for specific (academic) purposes that embed core AI-translation literacy, so that graduates can negotiate multilingual academic and workplace settings with confidence.

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