LINGUISTIC FEATURES OF THE MEDICAL DISCOURSE

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Abstract: Nowadays, discourse is of great importance in the study of linguistics. At the same time, linguistics is quite significant in the discourse. It is known that discourse and linguistics are inextricably linked. There are many directions of discourse, including political, pedagogical, religious, journalistic and medical discourses. This article is dedicated to this topic, that is, to clarify the linguistic features of medical discourse.

Key words: context, linguotherapeutic orientation, medical terminology, terminological combinations, eponymous terms, communication, specialized discourse, pragmalinguistic, psycholinguistic, sociolinguistic positions, cognitive-communicative, linguodidactic, therapeutic, metaphor.

Аннотация: В настоящее время большое значение в изучении языкознания имеет дискурс. В то же время лингвистика весьма значима в дискурсе. Известно, что дискурс и лингвистика неразрывно связаны. Существует множество направлений дискурса, в том числе политический, педагогический, религиозный, публицистический и медицинский дискурсы. Данная статья посвящена этой теме, то есть выяснению языковых особенностей медицинского дискурса.

Ключевые слова: контекст, лингвотерапевтическая направленность, медицинская терминология, терминологические сочетания, одноименные термины, коммуникация, специализированный дискурс, прагмалингвистическая, психолингвистическая, социолингвистическая позиции, когнитивнокоммуникативная, лингводидактическая, терапевтическая, метафора.

Medical discourse. A medical discourse is a medical text or discourse that talks about disease, its diagnosis, treatment, prevention, often specialized in medical publishing. Medical discourse refers to medical context about treatment, healing, therapy, medical practices, oral and written discourse that contributes to the medical establishment, social movements, and so on. Medical discourse has characteristics typical of any type of discourse, such as activity character (dynamism, processivity), openness, interactivity, purposefulness, informativeness, consistency, integrity, systematicity, discreteness (segmentation). According to its main characteristics, medical discourse is classified as an institutional or status-oriented type of discursive interaction between people. Medical discourse is the field of professional and communicative interaction of medical professionals, so it has such characteristics as deontological orientation, tolerance, and persuasion. But the main, basic category of medical speech should be recognized as a linguotherapeutic orientation: attention to "treatment with words".

Medical discourse includes a number of communication forms. The term "specialized discourse" is also used to designate, as it is the specialized use of language in contexts specific to a specialized society, covering academic, technical, and professional fields of knowledge and practice.

Medical discourse in linguistics. In modern linguistics, the discourse in the field of medicine is considered from pragmalinguistic, psycholinguistic and sociolinguistic positions. The presented approaches to the comprehension of medicine have determined the leading indications of the study of medical discourse in modern linguistics, which can be conditionally subdivided into the following groups:

•Research of medical discourse from the standpoin of a cognitive-communicative approach, which focuses on the "sublanguage" of medicine, "language for special purposes" (LSP), special language, professional speech.

•Studies of the specifics of the functioning of medical discourse as an institutional one, that is, related to the social institute of medicine.

It should be noted right away that these approaches do not contradict. They focus on certain aspects of medical discourse and, complementing each other, reveal the essence of this phenomenon.

Medical discourse is considered through the following oppositions:

☑scientific worldview (The scientific worldview is the explanation of the facts, and their comprehension in the whole structure of the concepts of the corresponding scientific discipline. From the point of view of scientific medical knowledge, health is defined as complete physical, spiritual and social well -being) vs naive worldview(In naive-linguistic representations, the disease acts as a negative state opposite to health, which brings evil and misfortune to a person, suppressing the strength and fortress of his spirit);

☑ professional speech (Professional speech is a communication interaction specialist with other professionals in the workplace and customers of the organization in the implementation of work activities) vs marginal speech (Marginality in speech - conditions in which myths, symbols, rituals, philosophical systems and works of art are often born);

☑professional (elite) linguistic personality (Elite linguistic personality has a language proficiency and uses various communication resources) vs non-professional linguistic personality (non-professional linguist is for example a bilingual person who thinks that he's got the requirements to be a linguist but is in fact an amateur, with no skills, no studies or no knowledge).

In this regard, special attention is paid to the study of factors determining the use of professional medical vocabulary in medical discourse: this may be emphasizing the objectivity of special information with the help of terms, metaphors, comparisons in speech to achieve a high level of mutual understanding.

The linguotherapeutic direction of medical speech allows medical personnel to:

- use communication directly in the process of diagnosis, treatment, prevention of the disease;

- rid patients of ignorance and errors of judgment;

- reduce the scale of experiences, the level of anxiety and fear;

- to inspire optimistic ideas about the treatment perspective;

 psycho-emotionally and socially activate the patient in the course of treatment, create a favorable psycho-emotional background of the treatment process.

The linguotherapeutic orientation of medical discourse is also ensured by the correct use of discursive tactics of communication harmonization, encouragement, praise, compliment, fascination, etiquette tactics, and empathic listening tactics.

It is generally confesses that the profession of a doctor is one of the most linguistically active professions. Literature, both linguistic and linguodidactic, and special, medical, constantly emphasizes the great importance of communication between a doctor and a patient, researches technologies and methods of consciously influencing a patient for therapeutic purposes: the moral power of reassurance is an important constituent of the healing process.

Communication between a doctor and a patient is an integral component of the process of diagnosing the temper and severity of the pathological condition of the latter. During consultations, the patient receives the urgent recommendations regarding the treatment of the disease. It is equally important to be able to appease the patient during a painful medical or diagnostic procedure. As Ambroise Pare said "the goal of medicine is to cure if possible, to relieve if not, but always to comfort". The doctor will be helped by emotionally setting up tactics that are implemented in the discourse with the help of such linguistic remedies: Don't worry! It's OK! Be patient, please! Everything will be fine! So far, so good! And etc.

Medical linguistic terminology in medical discourse. The language of medicine combines special and non-special medical names that function in the scientific and other subsystems of the language. The main part of it is medical terms. Medical terminology has evolved throughout history medicine and continues to develop even today, in connection with the identification new diseases and ways to treat them. That is why experts in the field of medicine, it is important to follow these changes and to have the ability to operate with new terms and understand their meaning, as well as cause of occurrence.

The interpreter's knowledge of medical English and his writing skills include a range of styles and registers. Broadcast information for patients means avoiding unnecessary jargon, complex syntax, or highly specialized vocabulary. On the other hand, to translate documents written for medical employees, requires specific terminology and discursive markers that are typical for similar texts prepared on the target language. Thus, the linguistic competence of a translator includes general and specialized languages. For medicine, it is important to convey a large amount of information in the most simplified and compacted form, using various abbreviations, combinations of words. For this reason, medical terms consisting of two or more words are the most convenient a means of conveying large and complex concepts in a concise manner. Therefore, in medicine there is such a thing as terminological combinations.

USED LITERATURE:

1. Ageeva A.V., Saratov E. I. Principles of medical terminology formation (comparative analysis of Russian, French and English languages) // Language and Culture (Novosibirsk), 2016. No. 25. pp. 77-81.

2. Artykova G. Sh., Khalmetova S. V. On the question of the formation of some medical terms // In the world of Science and art: questions of philology, art history and cultural studies. 2014, No.34. pp. 85-90

3. Kurylenko, Makarova, Loginova 2012

4. Kochetkova 1999; Bogatikova, Mishlanova, Filippova 2014, Kazakova 2013

5. Karasik 2000; barsukova 2007; sidorova 2008; zhura 2009; heritage, maynard 2006