Medical English: Textbooks and Medical Dramas
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Medical English has been enjoying a good deal of popularity among medical students who wish to be involved in the international medical community. However, textbooks which are currently in use do not always reflect the language applied in medical contexts. In the present article an attempt is made to compare medical English presented in textbooks with medical English spoken in hospital settings.

Keywords: English as a foreign language, Medical English, textbooks, medical context, spoken language

1. Introduction

Medical English has been enjoying a good deal of popularity among doctors and medical students in Hungary for a few years now. As a consequence, a new language examination system (Profex) has been introduced which is designed for health professionals, language schools offer their services to doctors, and bookstores provide medical students with a wide variety of course books on Medical English. There are two very obvious reasons for this phenomenon. Firstly, health professionals cannot afford not to be able to communicate in English if they wish to be integrated in the international academic community, and secondly, the financial temptation of being employed in an English speaking country is too big for a Hungarian doctor to resist, therefore he is naturally expected to have a good command of English in general and Medical English in special. Teachers of English face a huge challenge here since the teacher training curriculum includes only philological and pedagogical subjects. However, teachers are expected to be competent in scientific language. In order to achieve this, they must study medicine, use Medical English textbooks and rely on what modern media, e.g. television can provide, or be present at doctor-patient encounters. However, the latter one does not appear to be a feasible solution because it would involve infringing the privacy rights of the patient who is not willing to consent to a third party present. In the present study, an attempt is made to examine in what ways language use offered in textbooks and medical dramas differ.

2. Background

Medical English textbooks can reflect only a particular and rather narrow segment of what Medical English is like. Films set in hospitals are somewhat more complex in this respect as they give a more realistic and comprehensive picture of what goes on in a hospital and what language there is like. However, the question naturally arises to what extent films or “medical dramas” can be considered as authentic.
BBC has been broadcasting three medical drama series, *Holby City*, *Casualty* and *Doctors* for a long time. The first and the second are set in Holby City Hospital, a fictional National Health Service (NHS) teaching hospital, and the third takes viewers to the Mill Health Centre, where a team of GPs work. Medical dramas have always been fairly popular on television. *Emergency Ward 10*, the first drama series on British Television began as early as 1957 where the NHS was portrayed in a highly positive way and its doctors and nurses appeared to be angels. The episodes had an unbelievably low mortality rate of five per year in order to make the public trust in hospitals and doctors. As to the series *Holby City* and *Casualty*, they belong to the highest rated programmes of BBC with millions of viewers watching them. Filmmakers are trying to do their best to make both series look and sound authentic. The wards look like real NHS wards and filmmakers employ medical advisers to help actors hold instruments correctly, e.g. insert the tube when the patient is prepared for ventilation and actors are taught to pronounce medical terms properly. Actors always receive a glossary of medical terms which appear in the script. These medical dramas are apparently authentic, as it is demonstrated in a report by Rebecca Chellaswamy, a final year medical student at the University of Nottingham Medical School at the time when her article was published in 2006 (Chellaswamy).

3. Findings

Episodes of the two series (*Holby City* and *Casualty*) were watched and carefully studied in order to collect examples of Medical English and then to compare them with what textbooks offer. As the title of the books suggest, *A Course in Communication Skills* focuses on spoken language, *Professional English in Use: Medicine* is a comprehensive guide for students who are interested in Medical English and medicine in Great-Britain, and *English for Doctors* is a most useful book for students who wish to improve their communication skills in Medical English. The material is arranged according to special areas of medicine. Finally, *Nucleus* is a course book on functional anatomy with some hints at spoken Medical English. All four textbooks are intended for learners of English as a second language.

Textbooks and the language used in medical dramas show differences in forms of addressing and the use of abbreviations. Examples are taken from *Holby City* and *Casualty*, two medical dramas broadcast by BBC. Only the most frequently occurring examples are mentioned in the present article.

The above textbooks invariably suggest that the proper way of addressing a patient is by using formal language, i.e. surnames. In contrast, first names are used in medical dramas irrespectively of the age or sex of the patient. When paramedics appear at the scene of an accident, they introduce themselves with their first names, too, and address patients by using first names. Later on, when the patient has been taken to hospital for further assessment and treatment, surgeons always introduce themselves to the patient by calling themselves Mr., Mrs. or Ms. Smith. The title *doctor* is used in the case of representatives of other medical specialties. Few textbooks call the attention of the student to this special usage, and even if they do so, they mention it somewhere at the end of the book, in the appendix or in a footnote. *Professional
English in Use: Medicine appears to be a pleasant exception in this respect: the book mentions this special socio-cultural aspect as early as Unit 5.

Medical texts are well known for the wide-spread use of abbreviations which make medical texts of any kind somewhat difficult to follow for non-professionals. Textbooks deal with abbreviations in connection with formulas to be filled in rather than in the context of spoken language. However, abbreviations are characteristic features of spoken Medical English, too. Textbooks suggest that when the condition of a patient is assessed, and his blood pressure is taken, findings should be worded as The blood pressure in a young man is 120/80 mm/Hg. (Nucleus pp. 36, 37) However, blood pressure is normally referred to as BP and units of measurement are never given: BP is 114 over 70. (Casualty, Series 22 Episode 7) In order to properly assess the condition of the patient, FBC is taken, (full blood count) (Casualty, Series 22 Episode 9; Holby City, Episode 28), and maybe a CT will have to be performed, too: i.e. computer tomography is needed. (Holby City, Series 8 Episode 40) However, the same abbreviation can refer to a region, too: e.g. CT surgery (cardio-thoracic surgery) (Holby City, Series 8 Episode 44). Further tests may also have to be performed, e.g. LFTs (liver function tests) (Casualty, Series 22 Episode 9), RSI (repetitive stress injury) (Casualty, Series 22 Episode 9), INR (international normalized ratio) (Holby City, Series 8 Episode 38) or CRP (C-reactive protein) (Holby City, Series 8 Episode 38). After surgery, the patient may have to be moved to ITU (Intensive Treatment or Therapy Unit) (Casualty, Series 21 Episode 45) for obs (observation) (Holby City, Series 8 Episode 28) from AED (Accident and Emergency Department) (Casualty, Series 22 Episode 9). Names of other departments are also used abbreviated, e.g. PIC (Perinatal Intensive Care) (Holby City, Series 8 Episode 38).

Procedures are also abbreviated, e.g. CPR (cardiopulmonary resuscitation) (Casualty, Series 22 Episode 8) and GA (general anaesthesia) (Casualty, Series 22 Episode 9). The way a medicine is administered is also used abbreviated, e.g. IV Frusomide (intravenous) (Holby City, Series 8 Episode 38). Conditions are also referred to with abbreviations: GCS (Glasgow coma score) (Casualty, Series 22 Episode 7), MS (multiple sclerosis) (Casualty, Series 22 Episode 8).

Abbreviations are not restricted to nouns only, verbs can also be shortened: you ODed the patient (overdosed) (Holby City, Series 8 Episode 39; Casualty, Episode 1). If the condition of a patient has deteriorated so much, he can declare his wish not to be resuscitated: the patient can request a DNR (do not resuscitate) (Holby City, Series 8 Episode 46).

Surgical interventions have a high rate of appearance in Holby City and Casualty, therefore the language use of surgery was also studied. Surgical cases include emergency, abdominal, transplantation and heart surgery.

Three out of the four listed Medical English textbooks deal with surgery. English for Doctors has a chapter on surgery, however, it focuses on doctor-patient communication, leaving doctor-doctor communication out of consideration. Professional English in Use: Medicine also features a unit on surgery where the most important instruments are listed and the most frequently performed procedures are summarized. English in Medicine. A Course in Communication Skills presents surgical treatment from the point of view of doctor-patient communication, discharge summaries and surgical procedures.
Surgical procedures are performed in both series, however, operations are not fully covered which restricts the observer in studying the conversation between members of the operating team.

Names of surgical instruments are mentioned during operations, e.g. graft, clamp, aorto-clamp, suture, by-pass, forceps. (Casualty, Series 21 and 22, Holby City Series 8 and 9). However, the language of surgery also frequently uses abbreviations: What’s his BP like now? (blood pressure) (Casualty, Series 21 Episode 22), BP back to normal (Casualty, Series 21 Episode 23). Units of care are normally referred to in their abbreviated forms: the patient is moved to GS (general surgery) (Casualty, Series 21 Episode 24), Let’s get her to the HDU (high dependency unit) (Casualty, Series 22 Episode 9). Verbs can also be abbreviated: let’s prep the patient for surgery (prepare) (Casualty, Series 21 Episode 27). When the surgeon informs relatives on the outcome of the operation and what further care the patient will need, they conclude that He’ll need physio (physiotherapy) (Casualty, Series 22 Episode 30).

For learners of Medical English it would be useful if surgical procedures could be followed from the first incision to the moment when the patient is closed up. However, this is not what medical dramas are intended for. Therefore, the language used in the operation theatre can only be reconstructed after carefully studying the episodes. It is typical that surgeons give short instructions: Wipe. (Holby City, Series 9 Episode 10), Suction. (Holby City, Series 8 Episode 52), Scissors. (Holby City, Series 8, Episode 47), Scalpel and forceps, please. (Casualty, Series 22 Episode 18). The need for being as short as possible has obvious reasons. Surgeons comment on what they detect during the operation: The left ventricle does not work properly. (Holby City, Series 9, Episode 3), The CT-scan showed a severe scar in the cortex of the kidney. (Casualty, Series 22 Episode 15) Doctors say what they are going to perform as a next step: We’ll connect the new organ now. (Holby City, Series 8 Episode 47), We’ll convert to open surgery. (Holby City, Series 9 Episode 7) and call the attention of the team to any change in the condition of the patient: She has fibrillation. (Holby City, Series 9 Episode 4).

4. Conclusions

Language teachers face a challenging task when they are assigned to teach medical language for the simple reason that they lack medical knowledge. Teaching professional languages involves more than simply language teaching: professional languages are related to special areas of science, therefore they require high standards of accurateness from teachers. It is their responsibility to be best informed about various aspects of language use and they should ideally endeavour to do so. Each textbook covers only a particular segment of Medical English usage. Nevertheless they are obviously reliable sources of information but they are possibly not sufficient when spoken language is taught. A solution might be if language teachers could be present when doctors consult their patients. However, doctor-patient encounters are strictly confidential, thus no third party is allowed to be present. Authentic medical dramas can be of great help for language teachers in this respect since medical dramas have the advantage that they can be recorded and replayed therefore they are ideal for learners of Medical English. Communication is not restricted to doctors and patients only. Since all health professionals are
represented, internal medical communication (i.e. communication between doctors, nurses, director of the nursing services, hospital director and management) can also be studied. It is actually this segment of the communication which is not covered at all by Medical English textbooks for learners of English and which medical students and doctors are supposed to be familiar with.

The examples mentioned in the article are trying to demonstrate that professional languages and Medical English need a good deal of attention. Spoken language shows deviations from what textbooks offer. Future doctors should acquire a solid knowledge of it in order to avoid any confusion which can arise from inappropriate language usage.

References:

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Examples taken from medical dramas:
Holby City: Series 8 Episodes 22 – 52, Series 9 Episodes 1 - 12
Casualty: Series 21 Episodes 45 – 48, Series 22 Episodes 1 - 34

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