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Some metaphorical and metonymic effects in health communication: From the epistemic to the metacommunicative¹

Health practitioners and patients alike make ample use of figurative language, especially conceptual metaphor and metonymy, while discussing all kinds of medical conditions and treatments. Metaphors and metonymies can play a significant epistemic role in bridging the knowledge gap between health practitioners and patients. I illustrate this on the example of the alternate use of two metaphors in endocrinology, specifically in talking about the endocrine system and the role of the pituitary gland, as well as on a cluster of conceptual metaphors used in transplantology.

Figurative expressions can, however, also exhibit some social, i.e. metacommunicative functions. They can be used euphemistically, to cover-up some unpleasant facts, and in that case metaphor can hardly be said to make possible new insights—it actually comes quite close to metonymy in providing alternative means of referring to a phenomenon in a more or less offensive or palatable way. But even more importantly, an understanding of both metaphor and metonymy can have an even more important social function in helping forge closer links between health practitioners and patients. As I demonstrate on the same pair of metaphors used in endocrinology, health practitioners can (consciously) modulate their metaphORIZATION patterns in order to accommodate patients, while patients on their part can also over time adopt some non-layman metaphors. All this “metaphor sharing” shortens the distance between the two groups on the institutional ladder. A similar process can be observed in the use of various medical eponyms, where full eponymic expressions tend to characterize formal encounters, while the use of elliptical, metonymic eponyms, is indicative of informal exchanges of equals or near-equals. Studying such patterns of the effects of figurative expressions in the interaction between health practitioners and patients is of immense practical value as its better understanding can facilitate their communication and increase patient compliance and adherence to therapy, and thus enhance the efficiency of health systems.

Keywords: health communication; language effect; figurative language; metaphor; metonymy; eponym

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1. Introduction

It is one of the pillars of cognitive linguistics that figurative thought and language are ubiquitous. Metaphors and metonymies are very common not only in everyday situations, but also in more specialized contexts. In other words, their lexicalizations, metaphorical and metonymic expressions, can also be found in specialized types of language. Health communication, including various discourse types in which health practitioners and patients interact, is no exception in this respect. Gibbs and Franks (2002) isolated almost 800 individual linguistic metaphors in illness narratives of six female cancer patients during individual interviews lasting between 35 and 75 minutes (each participant producing between 103 and 171 metaphors). Some random examples that follow demonstrate the ubiquity of figurative language in medical discourse.

The lexeme *orphan* is used as the first constituent of the compound terms *orphan drug* and *orphan disease*, where it clearly has metaphorical interpretations. *Oxford English Dictionary* (OED) (<http://www.oed.com>, accessed April 30, 2017) lists the metaphorical use of the noun *orphan* in the sense of ‘a discontinued model or a motor vehicle, or a make which is no longer sold’, attested in the 1940s, while the attributive use of the word (identified by OED as adjectival) in medical contexts, found as originating in the 1970s, is described as meaning ‘designating, or used for the treatment of, diseases that are rare or that affect economically poor groups of people; neglected in terms of research or development funding, esp. by pharmaceutical companies.’

As another example of metaphor consider the conceptualization of heart as a machine in the following examples:

(1)

- a) **Heart repair** with stem cells ‘biggest breakthrough in a generation’. (Retrieved April 25, 2017 from <https://www.nhs.uk/news/heart-and-lungs/stem-cells-may-aid-heart-repair/>)
- b) What is **heart valve repair** or **replacement** surgery? (Retrieved April 25, 2017 from <https://www.urmc.rochester.edu/encyclopedia/content.aspx?contenttypeid=92&contentid=p07975>)
- c) The heart is a **pump** made of muscle tissue. The heart has four pumping chambers: two upper chambers, called atria, and two lower chambers, called ventricles. (Retrieved April 25, 2017 from https://www.hopkins-medicine.org/healthlibrary/test_procedures/cardiovascular/heart_valve_repair_or_replacement_surgery_92,P07975, accessed April 25, 2017)

Examples of metonymies tend to be less conspicuous, but are no less frequent. The phenomenon can be illustrated for introductory purposes on a series of senses of surgery and inflammation, as discussed in Krišković (2016: 113).

surgery

1. a branch of medicine concerned with diseases and conditions requiring or amenable to operative or manual procedures
2. the work done by a surgeon
3. operation
4. a room or area where surgery is performed
5. a physician's or dentist's office (BrE)

inflammation

1. the reaction of living tissue to injury or infection, characterized by heat, redness, swelling, and pain;
2. part of or an area of body or an organ affected by inflammation;

In this article I would like to show that metaphors and metonymies in health communication have a double function. On the one hand, they can both help understanding (although only metaphor is traditionally taken to do so, metonymy being considered as a means of alternative reference), as I show in Section 2. In addition to this epistemic function, both conceptual metaphor and metonymy can have a metacommunicative function, as they can help forge closer links between health practitioners and patients, i.e. establish a close rapport, as discussed in Section 3.

Two explanations are in order at this point so as to avoid any potential misunderstandings. First, when we say that figurative language can help understanding, this is primarily intended in the sense of Lakoff and Johnson (see below). Metaphor and metonymy are thus very often alternative ways of rendering an idea or a concept.

Although we may agree in general with Broyard's (1992) musings:

Metaphors may be as necessary to illness as they are to literature, as comforting to the patient as his own bathrobe and slippers. At the very least, they are a relief from medical terminology. ... Perhaps only metaphor can express the bafflement, the panic combined with beatitude, of the threatened person. (cited in Taylor 2017:)

this article is not concerned with the question whether metaphorical and metonymic non-technical language is used because patients do not (or would not) understand specialist or technical terms used by health practitioners. Cast in the spirit of Lakoff and Johnson, this article refrains from making any claims about figurative language being better than specialist and technical language, if the two can be always neatly separated. The above introductory examples amply show that even specialist and technical terms are very often metaphorical and/or metonymic (this is particularly well demonstrated in Krišković 2008 and 2016, Krišković and

Tominac Coslovich 2016). Secondly, the assumption that health communication is rife with figurative language that makes possible understanding, be it because there is hardly any other lexicalization available (i.e. when medical terms become dead metaphors) or because they offer a special perspective on the medical situation, i.e. that figurative language has epistemic function, is the starting point for the claim that I would like to make in the present article: that figurative language in medical discourse also has a sort of metacommunicative function.

2. Epistemic functions of conceptual metaphors and metonymies in health discourse

Metaphor and metonymy are often said to have different functions. According to Lakoff and Johnson (1980: 36f), metaphor is “principally a way of conceiving of one thing in terms of another, and its primary function is understanding,” while metonymy “has primarily a referential function, that is, it allows us to use one entity to *stand for* another.” Metaphor can indeed play a significant epistemic role in bridging the knowledge gap between discourse participants due to the fact that they offer various framings of human experience, and this also applies to exchanges between health practitioners and patients, where they can “help or hinder communication in particular institutional settings (Semino, Demjén and Demmen 2016: 2, cf. also Babel 2012). I illustrate this point on the example of the alternate use of two metaphors in endocrinology, specifically in talking about the endocrine system and the role of the pituitary gland, as well as on a cluster of conceptual metaphors used in transplantology.

According to Appleton and Flynn (2014: 378), there may be subtle but important differences in professional and lay understanding of metaphors. In endocrinology, two major metaphors are used to talk about the role of the pituitary gland. In one of these, the pituitary is conceptualized as a conductor in an orchestra of glands. Lexicalizations of this metaphor abound, they are found in very many languages, as can be seen in the series of examples that follow:

- (2) *It is often said that the **pituitary gland** is the **conductor** of the endocrine orchestra.*
(Retrieved April 10, 2017 from www.bioscilibrary.com/resource/.../Levy%20M.pdf.)
- (3) *[H]ipofiza je **dirigent**, sve ostale žlijezde su samo sastavnice orkestra,*
Pituitary is conductor all other glands are just components orchestra-gen
ako dirigent ne da pravilne upute određenoj žlijezdi
if conductor neg gives correct instructions particular- dat gland-dat
koji hormon treba lučiti, cijeli orkestar ne valja, jer ako
which hormone-acc should secret whole orchestra neg good-verb because if

nešto nedostaje dionici violine, onda to treba nadopuniti

something is-lacking score-dat violin-gen then this should compensate

dionica violončela (npr) a to baš i nije najsretnije.

score-dat cello- gen e.g. but that exactly and is.not luckiest

‘The pituitary gland is the conductor, all other glands are just members of the orchestra, if the conductor does not give correct instructions to a particular gland which hormone to secrete, the whole orchestra is not good, because if something is missing from the violin score then it should be compensated for in the cello score, and this is not quite most opportune’ (Retrieved April 16, 2017 from <http://www.forum.hr/showthread.php?t=254848&page=12>)

- (4) *Dirigent* der Hormone ist die *Hypophyse* (...).

Conductor def-gen hormones is def pituitary

‘the conductor of hormones is the pituitary’

(Retrieved April 10, 2017 from www.praxiswestermann.de)

- (5) *La glándula pituitaria es “director de orquesta” del sistema endocrino.*

def gland pituitary is conductor of orchestra def-of system endocrine

‘The pituitary gland is the conductor of the orchestra of the endocrine system.’

(Retrieved April 10, 2017 from <http://www.alexisracionero.com/kriya-para-la-glandula-pituitaria>)

The metaphor in question can be classified as a structural one in terms of the classification by Lakoff and Johnson (1980) and Kövecses (2010). This means that there is a rich network of cross-domain correspondences or mappings, which makes it possible for us to better understand the role of the pituitary gland in our body. This can be seen in the Croatian example in (3), where the scores, violin, and cello are mentioned. Very similar to this metaphor is the master metaphor, where the pituitary gland is said to be the master gland that controls many body functions via other glands:

- (6) *The pituitary gland is often called the master gland. It controls many body functions, including growth, metabolism, thyroid function, reproduction and the body’s response to stress.*

(Retrieved April 12, 2017 from <https://www.cedars-sinai.edu/Patients/Programs-and-Services/Pituitary-Center/Patient-Guide/About-the-Pituitary-Gland.aspx>)

The other major conceptual metaphor used to talk about the pituitary gland is a more recent addition to the health communication. This metaphor is not only about the pituitary gland, but also about the hypothalamus and sometimes some other glands (e.g. the adrenal, the thyroid, or gonadal gland), in. The three glands are conceptualized as forming an axis. This is usually abbreviated as *HP(T)A axis*

if the adrenal gland is also involved. Now consider some examples of this metaphor, which is again widespread in different languages, in some of which the axis metaphor is mixed with some other metaphor:

- (7) *The hypothalamic pituitary adrenal (HPA) axis is our central stress response system. The HPA axis is an eloquent and every-dynamic intertwining of the central nervous system and endocrine system.*
(Retrieved April 12, 2017 from <http://www.integrativepro.com/Resources/Integrative-Blog/2016/The-HPA-Axis>)
- (8) *Interakcija hipotalamus–hipofiza (hipotalamo–hipofizna osovina) predstavlja*
interaction hypothalamus-pituitary (hypothalamic-pituitary axis) represents
sustav negativne povratne sprege.
system negative-gen feedback-gen
‘The interaction between the hypothalamus and the pituitary (hypothalamic-pituitary axis) is a system of negative feedback’
(Retrieved April 12, 2017 from <http://www.msd-prirucnici.placebo.hr/msd-prirucnik/endokrinologija/osnove-endokrinologije>)
- (9) *Ein bedeutendes Prinzip – im Grunde einfach und doch raffiniert – ist das der Hypothalamus-Hypophysen-Achse.*
Is that def-gen hypothalamus- pituitary axis
‘An important principle – basically simple and yet refines – is that of the hypothalamus- pituitary axis’
(Retrieved April 13, 2017 from <https://www.lecturio.de/magazin/hypothalamus-hypophyse-achse>)

This second metaphor is far less rich in terms of mappings, and is close to being just an image-schema based metaphor, at best an ontological metaphor. It is also clear that it puts the pituitary gland in a different perspective. Metaphorically speaking, it is one link in a chain, though an important one, i.e. a part of a very complex network with an intricate set of mutual relationships. In other words, the image is less vivid, but also less simplifying from an epistemic point of view, not allowing language users to get carried away with a (playful) use of mappings. I will return to these two metaphors later, showing the differences in the contexts of their use that stem from their different metacommunicative potential.

Conceptual metaphors function in a similar way in transplant surgery or transplantology. The term *organ transplantation* is itself metaphorical. The verb comes from Late Latin *transplantare* ‘plant again in a different place,’ from Latin *trans-* ‘across’ + *plantare* ‘to plant’. It was extended to people (1550s) and then to

organs or tissue (1786), which is now the dominant sense, at least according to the majority of dictionaries. Nevertheless, the link between the literal, botanical sense and the medical one is still alive. The organ/body part is metaphorically conceived as a plant, and the human, i.e. the patient corresponds to a garden. The situation in other languages may be more or less similar, sometimes making the term less (clearly) metaphorical. In German, the noun *Transplantation* is primarily used in the medical sense, the botanical one is recorded in some dictionaries as a secondary sense², but because it is used only as specialized term, native speakers are hardly aware of the metaphorical origin of the medical term. What is more, the corresponding verb, *transplantieren*, is used only in the medical sense. In the past, it was in parallel use with *Überpflanzung*, the literal translation from Latin (*über* 'over' + *Pflanzung* 'planting'). A related nominalization *Verpflanzung* is used to denote grafting of tissue, primarily of skin, in which case another metaphor seems to be involved – the tissue is mapped on a part of a plant, such as a shoot/branch, while the human patient now corresponds to the whole plant.

In the case of the Croatian term *presađivanje organa*, used in parallel with *transplantacija*, the organ/body part is metaphorically conceived as a plant, and the human, i.e. the patient corresponds to the garden. Hungarian more or less mirrors this with its *szervátültetés* (*szerv* 'organ' + *át* 'over' + *ültetés* 'planting'), next to the rarely used *transzplantáció*. The French term *greffe*, used interchangeably with *transplantation*, is derived, just like the English *graft* 'shoot inserted into another plant', which is clearly metonymically motivated, coming from Old French *graiſe* 'grafting knife, carving tool; stylus, pen,' from Latin *graphium* 'stylus,' from Greek *grapheion* 'stylus,' from *graphein* 'to write'. The Polish term *przeszczepianie narządów* 'organ transplantation', is also based on the botanical metaphor of grafting. Turkish *organ nakli* is apparently based on the metaphor of transfer, as is apparently the Finnish term *elinsiirto* (*elin* 'organ' + *siirto* 'transfer').

In addition to these general gardening metaphors, there is a series of conceptual metaphors targeting the transplanted organ. The organ can be conceptualized metaphorically as a living organism, as can be seen in the following examples from Shimazono (2013) and Schweda and Schicktanz (2009).

(10) *When I feel that my kidney is complaining, I stop working.* (Shimazono 2013: 33)

(11) *It's alive! It throbs. If it does not move, your kidney has a problem...when it needs water, it knocks.* (Shimazono 2013: 34)

2 Cf. Duden Deutsches Universalwörterbuch, 2001, or Duden: Das große Wörterbuch der deutschen Sprache in sechs Bänden (Sp-Z), 1981.

A transplanted kidney may be conceptualized as a baby, or as a foster child:

- (12) *Oh yes, it's part of me – it's me, it's me. I even call it my baby....it's really a special part of me! I felt I must be responsible for this other person's kidney.*
(Shimazono 2013: 37)

In some cases, the transplanted organ is seen as spare part, which means that human (body) is metaphorically construed as a machine:

- (13) *Our heart is a pump.* (<https://fhn.org/docs/how-heart-works.pdf>, accessed April 15, 2017)
- (14) *It actually will be just like cars: Well, gosh, the radiator is broken, or won't live long: out with it, put a new one in.* (Schweda and Schicktzanz 2009: 5)

However, not only metaphor, but metonymy too can also help understanding, although in a slightly different manner. According to Lakoff and Johnson (1980: 37ff): metonymy is “naturally suited for focussing”, but they also add that “... metonymy is not merely a referential device. It also serves the function of providing understanding” (Lakoff and Johnson 1980: 36). In some cases, the transplanted organ is seen as a whole car:

- (15) *I want “Mercedes” lungs, or else I want to die (...) I don't want a “Lada”.*
(Schweda and Schicktzanz 2009: 5)

Examples like these may look like cases of metaphors, but they are not pure metaphors, or at least, one figurative conceptual layer is not metaphorical but metonymic. This becomes more evident when we realize the relevance of contrasting two car types – (16) is a comment on the quality of the donated lungs, and not so much stressing their machine-like being. *Mercedes* and *Lada* are in this example used as paragon. According to Lakoff (1987: 87), a paragon is an individual member or a set of individual members of a category “who represent either an ideal or its opposite”. Needless to say, paragon can be based not only on humans, but also on organizations and inanimate objects.

A paragon model is essentially metonymic (just like stereotypes, etc.), as an ideal member of a category stands for the whole category. Barcelona (2003, 2004: 364) improves on Lakoff's analysis as he demonstrates that the model is based on two metonymies, first the name of the bearer of a given outstanding property comes to stand for the property in question, which is followed by the ideal member of a category for the whole category. Thus, the paragon *Shakespeare* stands for the class of writers that have an immense literary talent. As a result, *Shakespeare* becomes a class name and is in part coded as a common noun as far as its grammatical behaviour is concerned. As pointed out in Brdar and Brdar-Szabó (2007), the axiological notions ‘best of’ and ‘worst of’ as the most problematical in the paragon model arise in another metonymic tier due to the imposition of a

scalar model (Israel 1997, 1998) on these contrastive properties. In other words, this is the third metonymy involved here. The scalar model allows the metonymic mappings of the type whole scale for upper/lower end of scale (cf. Kövecses and Radden 1998: 51), whereby the property is interpreted as being exhibited to the maximum, either in the positive or negative sense. Similarly, *Mercedes*, *Ferrari*, etc. are used in the example that follows to express nothing more specific than just the idea of extreme quality resulting in the extreme prestige of the products in question, while the opposite is true of *Lada*:

- (16) *I am busy reading "Principles of Marketing" (the bible of marketing) by Ph. Kotler. Somewhere in the book is mentioned that price is not the dominant factor for some customers. An example is given of a perfume manufacturer who lowered his price and ... lost customers, because the perfume was not perceived any longer as exclusive. It is also mentioned that if brands like Mercedes-Benz, Ferrari or Jaguar make a limited series and put a "hefty" price-tag on these models, rich customers are lining up to buy them.*

Now, if you compare "interpreting" as the equivalent of these brands in the language industry, the usual price-range is €350/day -€600-700/day (Members of A.I.I.C.) and nobody will complain about it.

*However for translation the price-range seems to vary from €0.02/word-€0.19/word (highly specialised technical and medical translations). It seems to be the only segment of the language-industry, where a lot of haggling going on about prices is going on or and where making a mistake (nobody is perfect) is an excuse (for some PMs of some agencies) to haggle even more. Is Translation the **Lada of the language-industry**?*

*... more like a **Volkswagen-rebadged Skoda**... if you know what I mean...*

Teaching is the Lada. *Having been an English teacher for a number of years before raising my status (sic?) to full-time freelance translator, I learned that the fundamental thing in being a language teacher is not pedagogical wizardry but just being there. You can make practically any other mistake and although things may be unpleasant, you can generally stay in the game. Basically a bit like a Lada; it may not start, it may be unattractive and smelly, but it is at least there, and that is what a language teacher is paid for too! In the Internet world, the even sadder thing for translators is that we work for hours on end to meet unreasonable demands but are we really there at all? Perhaps teaching really is better...*

(Retrieved May 1, 2017 from http://www.proz.com/forum/money_matters/1859-the_lada_of_the_industry.html)

These expressions are now clearly apparently applied to a wide range of domains and look like metaphors. They seem even more metaphor-like in those contexts in which various mappings are spelled out, but their foundations are clearly metonymic, as in the previous example. This point is elaborated in more detail in Brdar (2017).

3. On some metacommunicative functions of conceptual metaphors and metonymies in health discourse

Figurative expressions can also exhibit some social, i.e. metacommunicative functions. They can be used euphemistically, to cover-up some unpleasant facts, and in that case metaphor can hardly be said to make possible new insights—it actually comes quite close to metonymy in providing alternative means of referring to a phenomenon in a more or less offensive or palatable way. Euphemisms can be based on both metaphors and metonymies, as shown by Fernandez Crespo (2006), Portero Muñoz (2011), Gradečak-Erdeljić and Milić (2011), Silaški (2011), or by Tanacković Faletar and Kružić (2016), e.g. death may be metaphorically conceived as journey (DEATH IS A JOURNEY), as in *He departed from this world*, or as sleep (death is sleep), as in *fall asleep*. It is also possible to refer to it by metonymic means, e.g. using the metonymy THE PHYSIOLOGICAL EFFECTS OF DEATH STAND FOR DEATH (as in *to breathe ones last breath*). Allan and Burridge (1991: 161) note that euphemistic terminology may function as a soothing strategy for family or friends close to the dying patients who fear isolation and the withdrawal of those around them. Chou et al. (2017) show that the frequent use of euphemisms and hedging by oncologists when discussing prognosis may be due to their feeling that directly addressing this sensitive topic is face-threatening. Generalizing over this, we could agree with Tacheva (2013), who sees euphemisms as “the highest form of lexical diplomacy in medicine”. In such cases we clearly observe metacommunicative effects of metaphor- and metonymy based euphemisms, but whatever takes place here is aimed to produce certain language effects within one of the two groups of participants in health communication, either health practitioners or patients and their relatives.

However, it is possible for both metaphors and metonymies to fulfil an even more important social function. They can help forge closer links between members of the two groups, i.e. health practitioners and patients. In other words, the effect of using figurative expressions can be the impression of a higher degree of solidarity. Effectively, the asymmetry between health practitioners and patients may seem to disappear.

There are, of course many linguistic devices that can be used to achieve this. One of more notorious examples is the use of the pseudo-inclusive first person plural pronoun, i.e. of the so-called medical *we*, by doctors or nurses when talking to patients:

(17) *How are **we** feeling today?*

Although Quirk et al (1985: 350) take this use to be condescending or patronizing, as the patient is still inferior on the social scale, the medical staff nevertheless demonstrates at least some empathy and concern. In order to show more genuine solidarity effects can be achieved by means of figurative language, I present two case studies in the remaining part of this paper.

In the first of these I return to endocrinology and the use of metaphor pair I introduced earlier. It is intriguing that chapter 3 of the Hungarian-language handbook of clinical endocrinology³ opens with a drawing showing an open skull with a human inside it. The human, dressed in a tailcoat, with a wind-blown hair, and waving a stick in front of a picture showing oval forms linked by lines, is riding on a saddle-like structure. The heading above the figure reads: *The endocrine brain and the disorders of the pituitary gland.*

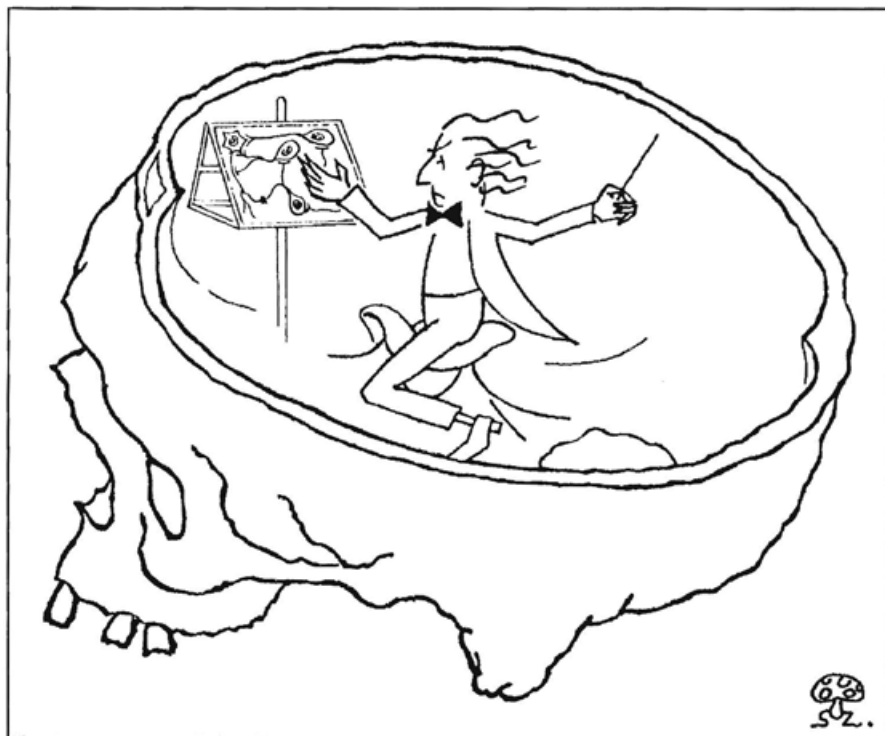


Figure 1. The illustration of the conductor metaphor in Leövey (2011: 127)

Armed with the basic knowledge of anatomy and knowing the title of the chapter, it is easy to recognize that the figure represents the *sella turcica* and the gland that it accommodates, i.e. the pituitary gland. *Sella turcica* is a depression in the base

3 Leövey, András, ed. 2001. *A klinikai endokrinológia és anyagcsere-betegségek kézikönyve*. Budapest: Medicina.

of the skull where the pituitary gland is situated. It was called the *sella turcica* (the Turkish saddle) because of its resemblance to a saddle used by the Turks which had supports in the front and back. The title of the chapter and certain elements present in the figure jointly activate the conceptual metaphor PITUITARY GLAND IS THE CONDUCTOR, which is widely used in certain contexts. The idea of sitting in a saddle additionally indicates effective management. The visual elements present in the male figure dressed in a tailcoat do not by themselves enforce the concept of a conductor: the movement of the stick, i.e. the baton, can metonymically evoke the concept of a conductor, but because there is no orchestra in the picture, the identification of the stick as a conductor's baton is not binding. This metaphor is realized in this chapter only once, as a visual metaphor. The metaphor does not occur once throughout the whole chapter. Throughout the text, we only find lexical realizations of the axis metaphor.

This is also true of comparable texts in other languages as well. In my English corpus (which consists of 34 chapters in two edited volumes⁴ dealing with the topic of endocrine disorders, 15 articles published in medical journals between 1951 and 2010,⁵ as well as of texts published on 17 Internet webpages that advise

- 4 Melmed, Shlomo, ed. 2011. *The Pituitary*. Amsterdam: Elsevier; Sheppard, Michael C., Stewart, Paul M. eds. 2002. New York: Springer Science. The total number of words is 315,833.
- 5 Boscaro, Marco, Luisa Barzon, and Nicoletta Sonino. 2000. "The diagnosis of Cushing's syndrome: Atypical presentations and laboratory shortcomings." *Archives of Internal Medicine* 160 (20): 3045-3053; Brooks, John K., Claire O. Leonard, Joanna K. Zawadzki, Ayub K. Ommaya, Bernard A. Levy, and Jan M. Orenstein. 1998. "Pituitary macroadenoma and cranial osteoma in a manifesting heterozygote with the Opitz G/BBB syndrome." *American Journal of Medical Genetics* 80 (3): 291-293; Heeringa, Jan, E. H. Hoogendoorn, W. M. van der Deure, Albert Hofman, R.P. Peeters, W. C. J. Hop, M. den Heijer, Theo J. Visser, and Jacqueline C.M. Witteman. 2008. "High-normal thyroid function and risk of atrial fibrillation: The Rotterdam study." *Archives of Internal Medicine* 168 (20): 2219-2224; Heim, Christine, Jeffrey D. Newport, Stacey Heit, Yolanda P. Graham, Molly Wilcox, Robert Bonsall, Andrew H. Miller, and Charles B. Nemeroff. 2000. "Pituitary-adrenal and autonomic responses to stress in women after sexual and physical abuse in childhood." *JAMA* 284 (5): 592-759; Kars, Marleen, Ferdinand Roelfsema, Johannes A Romijn, and Alberto M Pereira. 2006. "Malignant prolactinoma: case report and review of the literature." *European Journal of Endocrinology* 155 (4): 523-534; McNicol, Anne Marie. 1997. "Gene expression in pituitary adenomas: New insights." *Microscopy Research and Technique* 39 (2): 182-193; Morley, J. E., N. E. Kay, G. F. Solomon, and N. P. Plotnikoff. 1987. "Neuropeptides: Conductors of the immune orchestra." *Life Sciences* 41 (5): 527-544; Morris, Zoe, William N Whiteley, W T Longstreth, Frank Weber, Yi-Chung Lee, Yoshito Tsushima, Hannah Alphs, et al. 2009. "Incidental findings on brain magnetic resonance imaging: systematic review and meta-analysis." *BMJ* 339: 547-559; Ng, Vanessa S., Ronald W. Ma, Wing-Yee So, Kow Chow Choi, Alice P. S. Kong, Clive S. Cockram, and Chun-Chung Chow. 2010. "Evaluation of functional and malignant adrenal incidentalomas." *Archives of Internal Medicine* 170 (22): 2017-2020; Scott, Lucinda V., Jogin Thakore, Frances Burnett, and Timothy G. Dinan. 1999. "A preliminary study of dexamethasone treatment on pituitary-adrenal responsivity in major depression." *Human Psychopharmacology: Clinical and Experimental* 14 (8): 587-591; Silberstein, L., C. Johnston, A. Bhagat, L. Tibi, and J. Harrison. 2008. "Pituitary apoplexy during induction chemotherapy for

patients and discussions in online forums,⁶ all in all 437,803 words) I have found that the two types of metaphors hardly mix. Rather, they are in a sort of complementary distribution from a synchronic point of view. The former subcorpus can be characterized as doctor-doctor communication, the latter as doctor-patient and patient-patient communication. The metaphor dominant in the specialist/professional type of communication (axis) is more schematic and has a terminological function. It occurs 257 times in the two edited volumes and 29 times in the journal articles (286 times in books and articles). It has not been found at all in the web part of the subcorpus. The conductor metaphor occurs 7 times in the online sources, and only 3 times in the specialist/professional texts (in two articles published in 1951 and 1987, respectively, and in the introductory chapter in Melmed (2011), which is concerned with the history of the research. In other words, the conductor metaphor appears 0.0685 times per 10,000 words in the specialist/professional texts, but 2.594 times per 10,000 words in online lay discourse on the topic in question.

- (18) *For the induction of stress, we used a standardized psychosocial stress protocol that has been shown to reliably induce activation of the hypothalamic-pituitary-adrenal axis and the autonomic nervous system.* (Heim et al. 2000: 594)

However, adopting a more dynamic, diachronic perspective, it can be discerned that the conductor metaphor migrated between genres: it started out in doctor-doctor communication during initial stages of research in a this area of medical science, to be replaced by a more schematic one once certain insights are gained

acute myeloid leukaemia." *British Journal of Haematology* 143 (2):151; Stoika, Rostyslav, Run Yu, and Shlomo Melmed. 2002. "Expression and function of pituitary tumour transforming gene for T-lymphocyte activation." *British Journal of Haematology* 119 (4): 1070-1074; Weiss, Gerson, Joan H. Skurnick, Laura T. Goldsmith, Nanette F. Santoro, and Susanna J. Park. 2004. "Menopause and hypothalamic-pituitary sensitivity to estrogen." *JAMA* 292 (24): 2991-2996. The total number of words is 94,994.

- 6 <https://patient.info/forums/discuss/browse/pituitary-disorders-1811>; <https://www.medhelp.org/forums/Brain-Pituitary-Tumors/show/307>; <https://www.healthboards.com/boards/pituitary-disease/1033851-prolac>; <https://www.healthboards.com/boards/pituitary-disease/1018123-how-...1>; <https://www.drmarinajohnson.com/the-endocrine-symphony/>; <http://www.encognitive.com/node/12845>; <https://www.irishtimes.com/news/health/a-condition-that-s-hard-to-spot-easy-to-treat-1.1048272>; <https://www.healthboards.com/boards/pituitary-disease/>; <https://www.healthboards.com/boards/pituitary-disease/995939-possible-pituitary-tumour.html>; <http://forum.pituitary.org.uk/viewtopic.php?f=11&t=593>; <http://forum.pituitary.org.uk/viewtopic.php?f=11&t=30>; <http://forums.pro-health.com/forums/index.php?threads/pituitary-tumor-anyone.118036/>; <https://www.sciencedaily.com/releases/2005/04/050429125718.htm>; <http://forums.phoenixrising.me/index.php?threads/pituitary-gland.37315/>; http://www alopeciaonline.org.uk/forum/forum_posts.asp?TID=12089; <http://www.biologydiscussion.com/endocrinology/endocrine-gland-definition-development-and-classification/18427>; <https://fuzzyscience.wiki-spaces.com/Pituitary+Gland>. The total number of words is 26,976.

that form the core of a pool of expert knowledge. Cf. what the introduction to a handbook says (Ben-Shlomo and Melmed 2011: 21):

- (19) *Hormones were recognized as chemical messengers in the 1920s, and in the ensuing decade, the pituitary gland emerged as the ‘conductor of the endocrine orchestra’ and the existence of neuromediators was finally established. There has been considerable progress in the knowledge of the anatomical, physiological, and pathophysiological aspects of the hypothalamic pituitary unit since their intimate interaction was recognized almost a century ago.*

In the course of the accumulation of expert knowledge the conductor metaphor has come to be used less and less in expert genres. The same metaphor, freed of its conceptual job for experts, then found its way into doctor-patient communication. The conductor metaphor is perfectly suited to shed more light on the patient’s condition by forming a conceptual bridge between the pool of expert knowledge and the lay/popular knowledge by means of exploiting a rich network of mappings. We could say that doctors using this metaphor in the communication with patients deliberately step down the institutional ladder, reducing the asymmetry between them and thus producing a stronger feeling of solidarity. This explains why this metaphor has a key role in improving patient compliance. In terms of van Rijn-van Tongeren’s (1997: 102) distinction between theory constitutive and didactic function of metaphors in medical discourse, we could say that the conductor metaphor had a theory constitutive function when it was first introduced, but then lost it, and acquired the didactic one.

On a final note, let me just point out that the conductor metaphor may occasionally crop up in recent expert communication, too. It seems to be used as a sort of meta-metaphor to refer to the cutting-edge to research in an area that is still poorly understood. The situation in these areas of research is indirectly compared to the situation in endocrinology in its beginnings. The body of early expert texts on the endocrine disorder functions in a way similar to a metatext, while the role of certain other, typically smaller body parts or tissues is compared to what we thought about the pituitary a century ago. Cf. the titles of two recent medical articles that illustrate this point: Stratakis, Constantine A. (2003). Genetics of adrenocortical tumors: *gatekeepers, landscapers and conductors in symphony*. Trends in Endocrinology & Metabolism 14.9: 404–410; Morley, J.E., N.E. Kay, G.F. Solomon, N.P. Plotnikoff (1987). Neuropeptides: Conductors of the Immune Orchestra. Life Sciences 41.5: 527–544.

I now turn to eponyms in medical discourse and show how they can also be used to try to overcome the asymmetry between doctors and patients. Eponyms are often defined as words derived from proper nouns denoting mostly persons, real or fictitious, or places, as for example in:

- (20) In club *badminton*, this is usually where you stop and choose players for the next game.

Badminton refers to a well-known racquet sport played on a rectangular court by two or four players who hit a feathered object called a shuttlecock across a high net. It may have been created by the British military stationed in India (specifically, in the city of Pune, or Poona, after which the game was first called *poona*) and later introduced to Britain, or invented by the children of the 8th Duke of Beaufort in Badminton House, a large country house in the village of Badminton in Gloucestershire, which was the principal family seat since the 17th century. The new game quickly became popular under the name *the Badminton game*, which was subsequently shortened to *badminton*. The shift from a proper noun to a common noun observed with some eponyms is based on metonymy, in this specific case it is PLACE FOR (SALIENT) ACTIVITY.

Eponyms are used in everyday language (e.g. *sandwich*, *macadam*, *quixotic* or *Ford*), but the majority of them are used as terms in more specialized types of discourse – they are found in science, arts, etc. There are also very many eponyms used in health communication. The link between eponymy and metonymy is very close, on several counts.

It is quite obvious that the prototypical simple eponyms like *diesel* or *badminton* are clear cases of metonymy. Kövecses and Radden (1998) discuss a number of low-level metonymies that produce eponymies, e.g. PRODUCER FOR PRODUCT (*a Ford*), INVENTOR FOR THE THING INVENTED (*macadam*, *Fosbury*, *Pilates*, *doppler*), PLACE FOR PRODUCT MADE THERE (*china*, *cardigan*, *cashmere*, *champagne*), etc.

Eponyms can be realized in a number of ways, ranging from nouns to derived adjectives and verbs. Nominal ones can be realized as simple NPs, i.e. bare nouns consisting of just the proper name, normally the last name in the case of personal names (e.g. *diesel*). However, they can also be realized as more complex noun phrases, with the eponymic part functioning as the possessive part – either the synthetic genitive (e.g. *Pott's fracture*) or following the preposition *of* in the periphrastic variant (e.g. *the circle of Willis*), or functioning as the premodifier part followed by a common noun functioning as the head of the noun phrase (e.g. *Rokitansky–Aschoff sinuses*). Some, but not all, eponyms realized as bare NPs can be interpreted as elliptical constructions, the common noun functioning as the head can often be omitted (e.g. *Alzheimer's* for *Alzheimer's disease*, or *Apgar* for *Apgar test*). These are also taken to be metonymic.

It is extremely interesting to study the relative distribution of these two realization types of eponyms in health communication: X(s') N vs. X. Generally, the more widely an eponym is used, the more likely it is that it will assume the reduced, elliptic form, i.e. be a metonymy. It seems that the tendency to use one or the other realization type also is determined by the power relationship between

the participants, i.e. whether it is doctor-patient, doctor-doctor, or patient-patient exchange. The data are scarce, it is at the moment impossible to get conversational data for doctor-patient, and doctor-doctor situations, the closest we can get to these are various online sources, such as blogs, written by doctors and addressing doctors and patients, respectively, etc. Nevertheless, it seems that doctors are more likely to use metonymic eponyms when writing with other doctors in mind.

In a short interview (656 words) published in *Medscape Medical News* (<http://www.medscape.com/viewarticle/828169>), under the title “A more reliable Babinski test,” the Medscape correspondent Andrew N. Wilner, MD, asked Sayyed A. Sohrab, MD, Assistant Professor, about the traditional neurological exam: the term *Babinski sign* (it also called *plantar response* or *Babinski reflex*) occurs 3 times, but the metonymic eponym *Babinski* is used 7 times:

- (21) **Dr. Wilner:** *When you do the **Babinski** on some people, they just pull away, which makes the whole exercise useless.*

Dr. Sohrab: *Exactly, and the sole of the foot is one of the most sensitive parts of the body to stimulate. We postulated that if ticklishness is suppressed by the cerebellum, and the patient did **the Babinski** on him- or herself, we could abolish the withdrawal reflex. We put it to test with a curved instrument to make it easier for the patient. In people who had no central lesion, the toes curled under (toward the bottom of the foot) when they did the test to themselves. As you can see in the video, the **genuine Babinski sign**, in patients with a proven lesion, persisted, even when it was performed by the patient.*

This pattern seems to prevail even with doctors-to-be, i.e. with medical students, as can be in examples stemming from websites maintained by medical students in which they discuss the *Krukenberg tumor*:

- (22) **Krukenberg** is a tumour which histologically has signet ring forms and ovarian stromal hyperplasia. (Retrieved April 19, 2017 from <https://www.studystack.com/flashcard-511443>)
- (23) *Goljan also mentioned the signet cells in Breast Carcinoma, which can present as bilateral metastasis to the ovaries as well. And here it is good to remember that **Krukenberg** is a wide spectrum and can arise from different parts (but keep in mind that the primary tumor is necessary a carcinoma – epithelial origin):...* (Retrieved April 10, 2017 from <http://www.usmleforum.com/files/forum/2014/1/794509.php>)

On the other hand, web pages on which doctors advise lay people are more likely to have the full form, in this case N + N:

- (24) *In women, adenocarcinoids may also present with ovarian metastases (a **Krukenberg tumor**)* (Retrieved April 22, 2017 from <https://www.uptodate.com/contents/cancer-of-the-appendix-and-pseudomyo-xoma-peritonei>)

While the tumor in question was named after Friedrich Ernst Krukenberg (1871–1946), Hermann von Krukenberg (1863–1935) was the German surgeon who in 1917 developed what is now known as *Krukenberg procedure* or *Krukenberg(s) operation*, a procedure to separate bones in order to convert a below-elbow amputation stump into a sensory forceps. In a booklet *Krukenberg's operation in a child*, apparently intended as a help for patients and relatives and prepared by doctors, (https://global-help.org/publications/books/help_krukenberg.pdf) the procedure is referred to 28 times. It is called *Krukenberg's operation* 7 times, *Krukenberg procedure* 12 times, while it is called just *Krukenberg* 9 times. In addition, we find *Krukenberg amputation* (1), *Krukenberg surgery* (1), and *Krukenberg conversion* (1), next to *Krukenberg arm* (1), and *Krukenberg digits* (6).

It seems that full eponymic expressions tend to characterize formal encounters, while the use of elliptical, metonymic eponyms, is indicative of informal exchanges of equals or near-equals. We might as well say that there is a sort of iconicity at work here, as shortening the form (i.e. using metonymic eponyms) in a manner of speaking shortens the distance between speakers. Conversely, doctors speaking to or writing for patients maintain their power status by using full forms. Note that lay people when addressing other lay people may claim a special status for themselves (as insiders, or illuminati, i.e. almost on a par with a doctor) when using metonymic eponyms, indicating their closeness to the field, as well as their personal involvement.

Thus the author of a blog on the *Fontan operation* (or *Fontan procedure*), also known as *Fontan/Kreutzer operation/procedure* (a palliative surgical procedure used in children with complex congenital heart defects), uses the full form *Fontan operation* 2 times, *Fontan repair* one time, and *Fontan procedure* one time, while the reduced form, *Fontan*, is used 5 times:

- (25) *While Primary Children's touts a respected roster of cardiohoracic surgeons, they are still short a senior surgeon. Word is that the surgeons have met with the cardiologists on some of the more complicated cases such as McKay's and they have asked that, for now, all **Fontan operations** complicated with dextrocardia be referred out. Basically, being referred out means that we get to go shopping for a surgeon. When our card asked if we had preference for hospital, location or surgeon, I just said, "Yes, we prefer you find us the best surgeon." I asked her to find someone who had done the **Fontan** in at least half a dozen dextrocardic kids with a good outcome.* (Retrieved May 2, 2017 from <http://mattandmindy.blogspot.hu/2009>)

4. Concluding remarks

We have seen in the course of all the case studies that figurative expressions can exhibit not only epistemic but also some social, i.e. metacommunicative, functions in health communication. They can help forge closer links between members of the two groups, i.e. health practitioners and patients. In other words, the effect of using figurative expressions can be the impression of a higher degree of solidarity. Effectively, the asymmetry between health practitioners and patients may seem to disappear.

However, we have also seen that occasionally the distance and the different status on the institutional ladder can also be increased by using a certain type figurative expressions. Studying various patterns of the effects of figurative expressions in the interaction between health practitioners and patients is not only intrinsically interesting, but is of immense practical value as its better understanding can remove communication barriers and increase patient compliance and adherence to therapy and thus enhance the efficiency of health systems.

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**Neki metaforički i metonimijski efekti u zdravstvenom diskursu:
Od spoznajnoga prema društvenome**

Zdravstveni djelatnici i korisnici zdravstvenih usluga se obilato služe figurativnim jezikom, posebice konceptualnim metaforama i metonimijama, tijekom razgovora o medicinskim stanjima i tretmanima. Metafora, a i metonimija, mogu igrati važnu epistemološku ulogu u premošćivanju informacijskog jaza između zdravstvenih djelatnika i pacijenata. To se u radu ilustrira na primjeru naizmjenične porabe dvije metafore u endokrinologiji, konkretno kada se govori o endokrinom sustavu i ulozi hipofize te na skupu konceptualnih metafora koje se rabe u transplantologiji.

Figurativni izrazi mogu se rabiti kao eufemizmi kako bi se prikrijele neke neprijatne činjenice, a u tom se slučaju teško može reći da metafora omogućava nova saznanja – zapravo je vrlo bliska metonimiji kao alternativnom sredstvu kojim se može referirati na neku pojavu na manje neprijatan odnosno na podnošljiv način. No još je važnije to da i metafora i metonimija mogu ispunjavati važnu društvenu funkciju u stvaranju bližih veza između zdravstvenih djelatnika i pacijenata. Kao što se pokazujem na primjeru endokrinologije, zdravstveni djelatnici mogu (svjesno) prilagođavati način svoje porabe metafora kako bi se prilagodili pacijentima, dok i pacijenti mogu tijekom vremena usvojiti neke stručne metafore. Takva razmjena i suuporaba metafora skraćuje distancu između dvije grupe u institucionalnoj hijerarhiji. Sličan se proces može uočiti i u uporabi različitih medicinskih eponima: puni oblici eponima karakteriziraju formalne susrete, dok uporaba eliptičnih, metonimijskih eponima odlikuje neformalne susrete rangom jednakih ili skoro jednakih sudionika. Proučavanje ovakvih učinaka figurativnih izraza u interakciji među zdravstvenim djelatnicima i korisnicima zdravstvenih usluga je samo po sebi zanimljivo, no ono može biti od izvanrednog značaja u uklanjanju komunikacijskih barijera te pridobivanju povjerenja pacijenata u pridržavanju terapije, što povećava učinkovitost zdravstvenog sustava.

Ključne riječi: zdravstveni diskurs; jezični učinci; figurativni jezik; metafora; metonimija; eponim