

## **A Study on the English Translation of the Culture-Loaded Term “Qi” in Traditional Chinese Medicine in On Cold Damage**

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### **ABSTRACT**

*With the growing global demand for traditional Chinese medicine (TCM) culture, the cross-linguistic and cross-cultural translation of TCM has become increasingly significant. However, the considerable differences between Chinese and Western languages, cultures, and systems of thought have created substantial challenges for translating TCM, particularly in terms of culture-loaded terms—those expressions carrying unique cultural, philosophical, and medical meanings. This paper investigates the English translation of the culture-loaded term “qi” (气) in On Cold Damage through the lens of cultural translation theory. By analyzing the semantic and cultural connotations of “qi” and applying theoretical insights from cultural translation, the study proposes innovative translation strategies that balance foreignization and domestication. Findings suggest that a culturally grounded translation strategy for “qi” better conveys the conceptual depth of TCM and enhances cross-cultural understanding, thus contributing to the internationalization of Chinese medicine.*

**Keywords:** traditional Chinese medicine; *On Cold Damage*; “qi”; culture-loaded terms; cultural translation theory

### **1. Introduction**

Traditional Chinese medicine (TCM) is widely recognized as a treasure of ancient Chinese science, a key to unlocking the rich heritage of Chinese civilization, and a distinctive cultural emblem representing China’s engagement with the world (赵海滨, 2023). Its theories, diagnostic methods, and therapeutic practices embody millennia of accumulated medical knowledge interwoven with Chinese philosophy, history, and cultural identity. In the new era, the Chinese government has attached great importance to the international dissemination of TCM, issuing a series of policy documents to support and guide its globalization. This policy framework aims

not only to expand the global influence of TCM but also to construct an internationally recognizable discourse system for its communication.

The building of such a discourse system relies fundamentally on a deep, nuanced understanding of TCM's cultural essence and the accurate translation of its core concepts. As Li, Zhao and Guo (2023) point out, if TCM translation functions as the bridge enabling the culture to “go global,” then the translation of TCM terminology serves as the bridge's main beam, and the rendering of culture-loaded terms constitutes its central axis. This central axis is crucial because culture-loaded terms, by definition, encapsulate meanings that are deeply embedded in the source culture and may not have direct equivalents in the target language (蒋继彪, 2015).

With the intensification of globalization and the growing acceptance of TCM in the international medical and wellness sectors, the dissemination and exchange of TCM culture have gained unprecedented significance (Kaptchuk, 2000). Yet, significant challenges persist, arising from the profound linguistic and cultural differences between Chinese and Western traditions. Among these, the translation of culture-loaded terms remains a focal difficulty. *On Cold Damage*, as one of the “Four Great Classics” of Chinese medicine, occupies a pivotal position in the TCM canon, serving both as a clinical manual and a reflection of ancient Chinese cosmology and medical philosophy.

Within *On Cold Damage*, the term “qi” stands out as particularly complex. It embodies a multi-layered concept that extends beyond the notion of a physical substance to encompass philosophical constructs—such as “yin-yang” balance and the unity of man and nature—as well as medical principles regarding physiology, pathology, and treatment (郭霞珍, 2005). Translating “qi” thus requires strategies that go beyond literal rendering, calling for approaches grounded in cultural translation theory (Venuti, 2002).

This study takes Li Zhaoguo's (2017) English translation of *Shang Han Lun(On Cold Damage)* as its primary corpus and applies the theoretical framework of cultural translation to examine the term “qi.” The aim is to explore translation strategies and methods that can preserve the term's rich cultural, philosophical, and medical connotations, thereby offering valuable insights into the broader project of enhancing the international communication and acceptance of TCM.

## **2. Literature Review**

### **2.1 Cultural Translation Theory**

Cultural translation theory underscores the view that translation is far more than the mechanical substitution of linguistic codes; it is, fundamentally, a process of intercultural communication

and negotiation (Lefevere, 2002; Bassnett, 2013). This theoretical perspective foregrounds culture as the primary unit of translation, shifting the focus from purely textual equivalence to the transfer and recreation of cultural meaning. Within this framework, the principle of cultural functional equivalence—that is, reproducing a term’s function and significance within the target culture—is often emphasized (Nida, 1964; Snell-Hornby, 2006).

Susan Bassnett (2013) stresses that translators must retain the cultural characteristics and semantic richness of the source language while ensuring that the target audience can access and interpret the text meaningfully. Lawrence Venuti (2002) expands this discourse by introducing the now widely cited dichotomy of foreignization and domestication. Foreignization maintains the source culture’s distinct elements, allowing readers to experience the “foreignness” of the original, while domestication adapts the content to the cultural expectations and norms of the target audience.

In the context of translating TCM, foreignization is often indispensable for preserving culturally embedded medical concepts such as “qi”, “yin”, and “yang”, which have no direct equivalents in Western biomedical discourse (陈斯歆, 2017). However, domestication—through paraphrase, explanation, or annotation—can enhance comprehensibility for readers unfamiliar with the conceptual framework of TCM (孙致礼, 2002). A balanced application of these strategies aligns with the ultimate goal of cultural translation: to bridge cultural differences without erasing the identity of the source culture.

## **2.2 Culture-Loaded Terms in TCM**

Culture-loaded terms are words, phrases, or idiomatic expressions that encapsulate cultural values, practices, and worldviews unique to a particular society. They often lack precise equivalents in other languages, making them challenging to translate without loss of meaning (蒋继彪, 2015). In TCM, such terms are deeply rooted in a knowledge system that integrates medical theory, empirical practice, and philosophical thought. Their semantic scope frequently extends beyond the biomedical domain into cosmology, ethics, and daily life.

Among these, “qi” stands as one of the most intricate and culturally significant concepts. In classical TCM theory, “qi” denotes the vital energy that animates life, regulates physiological functions, and maintains balance between the human body and the natural world (郭霞珍, 2005). Its meanings range from tangible physiological phenomena to abstract metaphysical principles, making it a term that “resists” direct equivalence in Western medical terminology (李照国, 1995). As Kaptchuk (2000) observes, attempts to render “qi” as “energy” or “vital force” capture only fragments of its conceptual richness, underscoring the necessity for culturally informed

translation strategies.

Given its prominence in TCM theory and practice, the translation of “qi” is not merely a matter of lexical substitution but a process of cultural negotiation that must account for philosophical heritage, clinical application, and the target audience’s cultural and cognitive frameworks. This complexity makes “qi” an exemplary case for examining the application of cultural translation theory to TCM.

### **3. Methodology**

This study adopts a qualitative, corpus-based approach grounded in cultural translation theory. The primary corpus consists of Li Zhaoguo’s English translation of *Shang Han Lun (On Cold Damage)*, a canonical TCM text rich in culture-loaded terms. The study focuses on the term “qi” and its derived expressions, given their centrality in both Chinese medical discourse and philosophical thought.

#### **3.1 Data Collection and Corpus Construction**

All occurrences of “qi” and its related collocations were systematically extracted from the translation. A total of 325 instances were identified. These data were subsequently categorized into four major semantic domains, consistent with the classification of TCM theory:

- Physiological qi – terms that describe vital functions within the human body.
- Pathological qi – terms reflecting disease-causing agents.
- Formula-related qi – occurrences within the names of classical prescriptions.
- Symptom-related qi – expressions indicating clinical manifestation.

This categorization was guided by established scholarship on the semantics of TCM terminology (郭霞珍, 2005).

#### **3.2 Analytical Framework**

The study employs a case-based comparative analysis to evaluate the ten most frequently occurring qi-related compounds. The analysis was conducted in four stages:

- Semantic and Cultural Interpretation

Each source term was analyzed in relation to its broader philosophical and medical context in TCM literature, with reference to classical commentaries and modern interpretations (Kaptchuk,

2000).

- Translation Strategy Identification

The corresponding English renderings were examined in terms of foreignization (preserving qi as transliteration) and domestication (using target-culture equivalents), following Venuti's (2002) frameworks.

- Evaluation of Adequacy and Fidelity

Translations were assessed according to whether they preserved cultural specificity while remaining intelligible to target audiences unfamiliar with TCM (Nida, 1964; Snell-Hornby, 2006). For instance, rendering “短气” simply as “shortness of breath” conveys clinical meaning but omits cultural resonance, whereas “shortness of qi (shortness of breath)” retains both semantic and cultural layers.

- Role of Annotation and Supplementary Explanation

Special attention was given to whether translators employed annotations, glosses, or paraphrastic additions to explicate cultural meanings. For example, “stomach qi” may be supplemented with “(digestive vitality)” to clarify its broader connotation. This aligns with Chen (2017), who stresses that annotations in TCM translation play a key role in bridging cultural gaps.

This micro-level case analysis is particularly suited to the study of “qi”, as the concept's meaning is highly context-dependent and cannot be captured by a single English equivalent. By analyzing representative terms across categories—physiological, pathological, pharmaceutical, and symptomatic—the study seeks to capture the semantic spectrum of “qi” in *Shang Han Lun*. Furthermore, by evaluating translation strategies within a cultural translation framework, the methodology highlights how translators navigate the tension between cultural fidelity and communicative accessibility. This approach not only contributes to the ongoing standardization of TCM terminology in translation (蒋继彪, 2015), but also provides insights into how culturally embedded medical concepts can be effectively communicated to international audiences.

### **3. Methodology**

This study adopts a qualitative, text-oriented approach situated within the framework of cultural translation theory. The corpus is drawn from Li Zhaoguo's English translation of *Shang Han Lun (On Cold Damage)*, a classical TCM text renowned for its complex terminology and high concentration of culture-loaded expressions. Among these, the concept of “qi” is selected as the focal point of analysis due to its frequency, semantic diversity, and cultural significance.

A total of 325 instances of “qi” and its collocations were identified in the translation. Rather than seeking exhaustive treatment of every occurrence, the study focuses on representative and recurrent compounds, such as *wei qi* (胃气), *ying qi* (营气), *wei qi* (卫气), *xie qi* (邪气), and *duan qi* (短气). These examples capture the various dimensions of “qi” in TCM discourse, spanning physiology, pathology, prescription nomenclature, and symptom description.

The analysis employs a comparative reading of the source text and its English rendering. It investigates whether the translator preserves cultural meaning, whether foreignization or domestication strategies dominate (Venuti, 2002; Hermans, 2014), and whether explanatory devices such as annotations or paraphrase are used to bridge cultural gaps. While not statistical in nature, this qualitative approach emphasizes contextualized interpretation, showing how individual translation decisions shape the transmission of medical and cultural knowledge.

By selecting a set of illustrative cases rather than all occurrences, the methodology aligns with Toury’s (2012) descriptive paradigm and Even-Zohar’s (1979) polysystem perspective, highlighting how translation choices are embedded in wider cultural and communicative systems. At the same time, it resonates with scholarship on the international transmission of Chinese medicine, which emphasizes the negotiation between indigenous knowledge and global readerships (Hsu, 1999; Andrews, 2014).

This methodological framework thus enables a nuanced exploration of how “qi”, as a culture-loaded term, is recontextualized in English translation and contributes to the broader project of understanding the intercultural communication of TCM.

#### **4. Analysis of “Qi” in *On Cold Damage***

##### **4.1 The Cultural Connotations of *Qi***

As revealed in the textual analysis, the concept of “qi” in *Shang Han Lun* carries complex layers of meaning that intertwine medical, philosophical, and cultural dimensions. Classical texts underscore its metaphysical significance. For instance, the *Zhuangzi* observes: “Human life is the gathering of “qi”; when it gathers, there is life, when it disperses, there is death.” In ancient Chinese philosophy, “qi” is not only an invisible and omnipresent vital force but also the primordial substance underlying life and the cosmos (郭霞珍, 2005).

Within TCM, *qi* functions both as a physiological force that sustains growth, digestion, and defense, and as a determinant of pathology when disordered. Thus, it simultaneously denotes substance, energy, and functional activity. In *Shang Han Lun*, “qi” is further interwoven with cosmological principles such as *yin-yang* interaction and the Five Phases, reflecting the belief in

the unity of humans and nature. As Laozi explained, “All things carry yin and embrace yang; the blending of qi brings harmony,” while Zhuangzi emphasized that “qi” transforms into form, and form into life. These philosophical reflections reveal that “qi” cannot be reduced to a biomedical equivalent such as “energy,” but rather represents a worldview that links physiology, pathology, and cosmology. Consequently, an adequate translation of “qi” must acknowledge both its clinical relevance and its deep cultural embeddedness. Any attempt to render “qi” solely through Western biomedical terminology risks obscuring the epistemological foundations of TCM.

#### 4.2 The English Translation of *Qi* in *Shang Han Lun*

Building upon this cultural-philosophical framework, the present analysis examines how *qi* is rendered in Li Zhaoguo’s English translation of *Shang Han Lun*. As identified in Table 1, “qi” occurs 325 times, and the ten most frequent compounds were selected for detailed study. These are grouped into four categories—physiological *qi*, formula names, pathological *qi*, and symptomatic *qi*. This classification enables a systematic exploration of whether the translations preserve cultural meaning and how annotation or explanatory strategies are applied.

**Table 1. Occurrences and English Translations of “Qi” in *On Cold Damage***

Category	Frequency	Source Text	English Text
Physiological <i>qi</i>	26	胃气	stomach qi
	9	水气	(retention) of water/ water qi
	9	营气	nutrient qi
	7	卫气	defense qi
Formula names	60	大承气汤	Da Chengqi Decoction (大承气汤, major decoction for harmonizing qi)
	25	调胃承气汤	Tiaowei Chengqi Decoction (调胃承气汤, decoction for regulating the stomach and harmonizing qi)
	24	小承气汤	Xiao Chengqi Decoction (小承气汤, minor decoction for harmonizing qi)
Pathological <i>qi</i>	13	邪气	pathogenic factors
Symptomatic	11	短气	shortness of breath

Excluding single-character occurrences, the top ten compounds were classified into four categories which not only facilitate systematic examination but also highlights how the translator negotiates between cultural preservation and target-language comprehensibility. The following examples illustrate the main translation strategies employed, evaluated in light of cultural translation theory.

### (1) Physiological Qi

#### Example 1

ST:

妇人伤寒，发热，经水适来，昼日明了，暮则谵语，如见鬼状者，此为热入血室，无犯胃气及上二焦，必自愈。

TT: [When] a woman [suffers from] cold damage with fever during the time of menstruation [her mind is] clear in the daytime but [there is] delirium at night like seeing a ghost indicating that heat has entered the blood chamber (uterus) but will not attack **stomach qi** and double energizer. [It will] certainly heal naturally.

Analysis:

The translation “stomach qi” retains the form of the source term but fails to capture its cultural connotation. In TCM, *wei qi* (胃气) symbolizes not only gastric physiology but also the body’s core digestive vitality, considered a prerequisite for self-recovery. According to Nida’s (1964) theory of dynamic equivalence, effective translation requires rendering both linguistic form and communicative effect. Here, annotation such as stomach qi (digestive vitality) would achieve greater functional equivalence. In TCM discourse, translators must mediate between cultural authenticity and biomedical intelligibility.

#### Example 2

ST:

病常自汗出者，此为营气和，营气和者，外不谐以卫气不共营气谐和故尔。以营行脉中，卫行脉外，复发其汗，荣卫和则愈，宜桂枝汤。

TT: Disease with spontaneous sweating indicates [failure of] nutrient qi [to control the internal] and [defense qi] to protect the external, consequently causing disharmony due to imbalance

between **defense qi** and **nutrient qi**. Since nutrient qi flows in the vessels and defense qi flows outside the vessels, perspiration will harmonize the functions of both with Guizhi Decoction (桂枝汤, cinnamon twig decoction).

Analysis:

Rendering ying qi (营气) as “nutrient qi” and wei qi (卫气) as “defense qi” constitutes a foreignization strategy (Venuti, 2002), preserving cultural identity while facilitating comprehension. However, without explanatory notes, the subtleties of their relationship within the yin–yang system may remain opaque to international readers. As Hsu (1999) argues, the epistemological framework of Chinese medicine resists reduction to Western categories. Thus, the translator might consider a hybrid approach: retaining the pinyin qi while providing glosses, e.g., ying qi (nutritive function) and wei qi (protective function).

## **(2) Formula Names**

### **Example 3**

SS:

阳明病，谵语，有潮热，反不能食者，胃中必有燥屎五六枚也。若能食者，但𩚑耳，宜大承气汤下之。

TT: [In] yangming disease, [if there delirium, tidal fever and inability to take food, [it indicates that] there are five or six pieces of hard stool in the stomach [and intestines]. If [the patient is] able to take food, but [there is] hard stool, **Da Chengqi Decoction** ( **大承气汤**, **major decoction for harmonizing qi**) [can be used] to treat it.

Analysis:

The transliteration “Da Chengqi Decoction” is a foreignizing choice that foregrounds cultural specificity. The added gloss “major decoction for harmonizing qi” follows Bassnett’s (2013) suggestion that translators mediate by supplementing cultural terms with functional explanation. In this case, the dual strategy (transliteration + annotation) ensures both the retention of cultural imagery and the intelligibility of therapeutic effect. As Li Zhaoguo (1995) observes, formula names in TCM are semiotic condensations of therapeutic principles; their translation must therefore balance cultural resonance with pragmatic clarity.

## **(3) Pathological Qi**

#### **Example 4**

ST: 伤寒，胸中有热，胃中有邪气，腹中痛，欲呕吐者，黄连汤主之。

TT: Cold damage [disease], [characterized by] heat in the chest , **pathogenic factors** in the stomach , abdominal pain and desire to vomit , [should be]treated by Huanglian Decoction (黄连汤, *coptis decoction*).

Analysis:

Li renders xie qi (邪气) as “pathogenic factors,” which domesticates the term by aligning it with biomedical discourse. However, this risk erasing the cultural dichotomy of xie qi (evil or heteropathic qi) versus zheng qi (righteous qi). Venuti (2002) warns that domestication may obscure cultural values, while foreignization foregrounds them. A preferable solution might be “pathogenic qi (disease-causing influences),” which preserves the metaphoric and cosmological resonance while still signaling biomedical causality. Such an approach aligns with Cheung’s (2014) call for cultural fidelity in TCM translation.

#### **(4) Symptom-related Qi**

##### **Example 5**

ST:

风湿相搏，骨节疼烦，掣痛不得屈伸，近之则痛剧，汗出短气，小便不利，恶风不欲去衣，或身微肿者，甘草附子汤主之。

TT: [The disease, characterized by] conflict between wind and dampness, vexing pain of joints[that makes it] difficult to bend and stretch [the limbs], pain [that is] exacerbated under pressure, sweating, **shortness of breath**, dysuria , aversion to cold without desire to put off clothes, or slight swelling of the body , [should be] treated by Gancao Fuzi Decoction (甘草附子汤, *licorice and aconite decoction*).

Analysis:

The rendering of duan qi (短气) as “shortness of breath” provides biomedical clarity but sacrifices cultural nuance. In TCM, “qi” disturbances encompass both physical and metaphysical imbalance, extending beyond the respiratory system. Culture-loaded terms demand translation

strategies that account for symbolic as well as clinical dimensions. A more balanced rendering could be “shortness of qi (manifested as breathlessness),” combining foreignization and explanatory domestication. This reflects what Sun (2002) calls a “double-layered translation,” wherein the cultural form is preserved but clarified through biomedical terminology.

## **5. Discussion**

The cultural specificity and complexity of Traditional Chinese Medicine terminology necessitate flexible and diverse translation strategies. In particular, the translation of culture-loaded terms such as “qi” requires a delicate balance between cultural preservation and target-language comprehensibility. In this context, the principle of “foreignization as primary, domestication as supplement” (孙致礼, 2002) provides a practical and theoretically grounded approach.

As one of the most essential concepts in TCM, “qi” encapsulates vitality, physiological functions, pathological mechanisms, and therapeutic principles. Translating “qi” merely as “energy” in the biomedical sense risks oversimplification and distortion of its rich cultural and philosophical connotations. By contrast, foreignization strategies—such as retaining *qi* in pinyin—allow the preservation of cultural imagery and medical philosophy. This aligns with Venuti’s (2002) ethics of difference, which emphasizes the importance of maintaining the foreign identity of cultural discourse in translation. In addition, explanatory annotations (e.g., qi [vital force] or stomach qi [digestive vitality]) can facilitate comprehension without sacrificing cultural specificity. Nevertheless, an exclusively foreignizing approach may create comprehension barriers for international readers unfamiliar with the epistemological framework of Chinese medicine. Domestication, as a supplementary strategy, becomes necessary to enhance accessibility and reception (Nida, 1964; Bassnett, 2013). For example, rendering *duan qi* as “shortness of qi (manifested as breathlessness)” blends foreignization and domestication by retaining the original term while situating it within biomedical discourse. Such hybrid strategies correspond to “cross-epistemic mediation,” where translation bridges fundamentally different systems of knowledge.

Therefore, within the framework of cultural translation, the translation of “qi” in *On Cold Damage* should prioritize foreignization while judiciously employing domestication. This dual approach ensures the retention of TCM’s unique worldview while also improving readability and acceptability among global audiences. Moreover, it contributes to the internationalization of TCM by fostering intercultural dialogue and mutual understanding (Andrews, 2014; 张吉、赵海滨, 2024). In sum, “foreignization as primary, domestication as supplement” is not merely a linguistic strategy but also a cultural imperative that safeguards the identity of Chinese medicine in global circulation.

## 6. Conclusion

This study has conducted a systematic investigation into the English translation of “qi” in *Shang Han Lun* from the perspective of cultural translation theory. The findings reveal that traditional translation strategies, when applied mechanically, often fail to capture the multilayered cultural, philosophical, and medical connotations of “qi”. By integrating cultural translation principles, particularly the dynamic balance between foreignization and domestication, the translation of “qi” can more effectively transmit the epistemological foundations of Chinese medicine to global audiences.

The proposed approach demonstrates that translating “qi” is not merely a matter of linguistic substitution but rather a form of cultural negotiation. Retaining “qi” in transliteration while providing explanatory annotations preserves the integrity of TCM’s worldview, while selective domestication strategies enhance comprehensibility for readers unfamiliar with Chinese medical discourse. In this way, the translation of “qi” becomes a cultural bridge that facilitates intercultural dialogue and knowledge exchange between Chinese and Western medical systems.

Looking ahead, the internationalization of TCM will continue to generate new challenges and opportunities for translators and scholars. The case study of “qi” underscores the necessity of adopting flexible and context-sensitive translation strategies that safeguard cultural identity while promoting accessibility. Future research could extend this line of inquiry to other classical TCM texts, such as the *Huangdi Neijing* or *Jin Kui Yao Lue*, thereby enriching the theoretical and practical resources available for the global dissemination of Chinese medical knowledge. Ultimately, the translation of culture-loaded terms like *qi* is not only a linguistic issue but also a cultural imperative, central to building a discourse system for the international communication of TCM.

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