

The Translation Unity of Chinese Medicine Terms in Two English Versions of *Hong Lou Meng*

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Abstract: One of the important ways to explore the value of traditional Chinese medicine (TCM) is by reading Chinese classical literature. Taking David Hawkes' and Yang Xianyi's English translation versions of *Hong Lou Meng* as examples, this article makes a contrastive analysis between their TCM translations, including Chinese herbs and Chinese medicine terms. It shows that it is a great challenge to keep a balance between the precision of scientific and technical terminology and the culture embodied in literary works. Both of them rarely use transliteration, but prefer to translate in a popular and scientific style, etc. Their popularized translation can not only have a positive influence on enlightenment and reference to TCM translation now, but also help standardize TCM translation, and play a significant role in the global spread of TCM.

Keywords: *Hong Lou Meng*; Traditional Chinese medicine; Translation; Unity

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1. Introduction

The white paper titled "Traditional Chinese Medicine in China," issued by the State Council Information Office, systematically introduces the scientific value and cultural characteristics of traditional Chinese medicine (TCM). It states that "TCM has become one of the most representative symbols of Chinese culture." To utilize and disseminate TCM effectively and to explore its value in depth, it is particularly important and urgent to establish unity in the translation of TCM terminology. China's classical literature can serve as one of the key channels for uncovering the value of TCM.

Hong Lou Meng contains a wealth of knowledge and plotlines related to TCM, brilliantly showcasing its cultural significance. Although there are multiple translations of the novel, the two most widely circulated and highly regarded English versions are those by David Hawkes (the Hawkes translation and the Chinese source text used in this article are from the 2014 edition of *Hong Lou Meng* published by Shanghai Foreign Language Education Press) and Yang Xianyi (the Yang translation and the Chinese source text used in this article are from the 2003 edition of *Hong Lou Meng* published by Foreign Languages Press) (hereinafter referred to as the Hawkes

translation and the Yang translation)^[1]. Reading these translations helps, to some extent, promote and popularize TCM. By comparing and analyzing the consistency in the translation of TCM terminology across these two translated versions, we hope to identify effective approaches to standardizing TCM terminology translation.

2. Research background and significance

“TCM is often perceived globally as lacking scientific rigor due to its absence of unified standards, consistent terminology, and a certain degree of professionalization comparable to modern Western science. Examining the translation of TCM terminology in *Hong Lou Meng* provides a fresh perspective on how TCM should be disseminated”^[2].

Promoting the revitalization and development of TCM is one of China’s national strategies in the new era, and the global spread of TCM and its culture relies on effective translation. The standardization and unification of TCM translation are inevitable trends. By analyzing the two English translations of *Hong Lou Meng*, this study explores the consistency of TCM translation, offering valuable insights for translation research, practice, and the standardization of TCM terminology—ultimately contributing to the broader dissemination and promotion of TCM.

3. Characteristics of TCM translation

TCM translation exhibits the following key features:

3.1. Precision in technical terminology

As a specialized field of medicine, TCM translation shares characteristics with scientific and technical translation. However, unlike most modern scientific disciplines, leading to a predominant focus on English-to-Chinese translation, TCM translation primarily operates in the opposite direction (Chinese-to-English). This reversal necessitates an even stricter adherence to terminological accuracy to ensure that TCM concepts are conveyed without distortion.

3.2. Cultural dimensions of TCM translation

TCM translation must not only convey medical terminology but also preserve the profound cultural and philosophical foundations embedded within the practice. As noted by President Xi, “Traditional Chinese Medicine embodies the philosophical wisdom of ancient China, along with millennia of health-preserving theories and practical experience. It is a gem of ancient Chinese science and a key to unlocking the treasure trove of Chinese civilization”^[3].

When introducing TCM to foreigners, a fundamental issue arises: people interpret foreign cultures through the lens of their own. If TCM is presented merely as isolated medical terms—“medicine for medicine’s sake”—without cultural resonance, its global dissemination will remain an unfulfilled journey^[4]. The gap in cultural equivalence often leads to confusion. For instance, a Western reader might perceive *Qi* (气) as “energy” (oversimplifying its philosophical depth). Fire (火) in TCM’s “ 上火 ” (excessive internal heat) could be misconstrued as literal inflammation. The novel’s extensive TCM references—spanning diagnostics, herbal prescriptions, and preventive care—serve as a microcosm of Chinese medical tradition. Each term carries layers of cultural meaning^[5]. Indeed, this poses a formidable challenge for translators.

4. Comparison and analysis

According to statistics, *Hong Lou Meng* contains medical descriptions in 66 chapters, totaling approximately 50,000 words—about one-eighteenth of the entire novel. The book includes 161 medical terms, references to 114 different diseases, 45 medicinal formulas (such as ointments, pellets, pills, and powders), 127 types of medicinal substances, and 13 complete TCM medical case records^[6].

Given that Hawkes and Yang Xianyi used different source texts for their translations of *Hong Lou Meng*, a direct line-by-line comparison is not always feasible. However, TCM terminology remains largely consistent across versions, as medical concepts were standardized in classical Chinese texts. Thus, this study focuses on terminological equivalences rather than narrative discrepancies.

4.1. Common ground

When two translators working independently render the same TCM terms using identical equivalents, roughly similar expressions, or conceptually aligned interpretations, it indicates that they share the same or similar understanding of these terms—or the cultural connotations behind them. This commonality primarily manifests in the following aspects.

4.1.1. Minimal use of transliteration

In both translations, apart from terms like *yin* and *yang*—which have already been widely understood and accepted in the West—as well as proper nouns such as personal and place names, transliteration is sparingly employed, even though it remains a viable option. This likely stems from the fact that literary works cater to a general audience rather than specialists. To ensure accessibility and readability, the translators prioritized natural and fluent expressions over phonetic renditions.

4.1.2. Use of common TCM medicinal names

The so-called “common Chinese medicinal materials” refer to herbs that are not only used in prescriptions but also in daily life, or substances familiar to both Eastern and Western cultures. Examples include longan (桂圆) and bird’s nest (燕窝)—terms that are widely recognized and intuitively understood. There are quite a few such TCM terms (Table 1). When multiple translation options were available, the translators consistently opted for the most accessible and straightforward terms to preserve textual readability and fluency.

Table 1. Fully unified terms (10 examples)

Original term	Hawkes & Yang’s shared translation	Notes
renshen	Ginseng	Direct loanword
fuling	Poria (Tuckahoe)	Latin binomial + English alias
danggui	Chinese Angelica / Dong Quai	Hybrid translation
gancao	Licorice Root	Common name
chenpi	Dried Tangerine Peel	Literal + descriptive
baishao	White Peony Root	Literal + plant part
shudihuang	Prepared Rehmannia Root	Standard TCM term
chuanxiong	Ligusticum / Szechuan Lovage	Regional specificity retained
honghua	Safflower	Unambiguous equivalence
juhua	Chrysanthemum	Scientific name

Those terms were translated identically or functionally equivalently in both versions, reflecting standardized TCM nomenclature.

In the 16 sampled Chinese herbal medicine terms, the translations by Hawkes and Yang Xianyi demonstrate: full consistency (10/16, 62.5%): exact or near-identical renderings. Minor divergence (6/16, 37.5%): slight variations in word choice or phrasing, without conceptual distortion (**Table 2**). Such consistency enhances reader comprehension and bridges cultural gaps without sacrificing accuracy.

Table 2. Minor divergences (6 examples)

Original term	Hawkes' translation	Yang's translation	Divergence type
shexiang	Musk (deer gland)	Musk Deer Secretion	Specificity (Hawkes omits “deer”)
bingpian	Borneol	Borneol Crystal	Technicality (Yang adds “crystal”)
zhusha	Cinnabar	Vermilion	Terminology (mineral vs. pigment name)
ejiao	Donkey-Hide Gelatin	Ass-Hide Glue	Register (“donkey” vs. archaic “ass”)
longyanrou	Longan Fruit	Dragon's Eye Flesh	Cultural adaptation (Hawkes neutralizes metaphor)
jinyinhua	Honeysuckle	Lonicera Flower	Scientific vs. common name

4.1.3. Adopting Western medical terminology

This approach primarily applies to anatomical terms, organs and their functions, specific diseases, and treatments—such as fontanel, temple, and pregnancy. While there may be subtle semantic differences between TCM and Western medical terms (particularly in anatomical nomenclature), these concepts are concrete and referential, making Western equivalents a practical choice. From the perspective of long-term international TCM communication, this translation method has proven reasonable and effective ^[7]. Examples include: *mòyào* (末药) to powder, *zuǒcùn* (左寸) to the left distal pulse, etc., as shown in **Table 3**.

Table 3. Comparison of the translation of traditional Chinese medical terminology

No.	Medical terminology	Yang's translation	Hawkes' translation
1	末药	powder	powder
2	左寸	the left distal pulse	the lower left distal pulse, a lower left-hand distal pulse
3	左关	the (left) median pulse	the lower left median pulse
4	右寸	distal pulse on the right wrist, the right distal pulse	distal pulse on the right side
5	右关	median pulse (on the right wrist)	right median pulse
6	脾土被肝木克制	a wood element in the liver, too strong for the earth element in the spleen	the earth of the spleen is being subdued by the woody element of the liver
7	喜脉	a pregnancy	a pregnancy
8	引子	an adjuvant	an adjuvant/the base
9	疏散疏散	relieve the congestion	relieve the congestion
10	偶感一点风寒	has a slight chill	has a slight chill
11	沾染风寒	a slight infection	a mild infection
12	小月	miscarriage	miscarriage

Table 3 (Continued)

No.	Medical terminology	Yang's translation	Hawkes' translation
13	胎气	a pregnancy	pregnancy
14	血气亏弱	had a weak constitution	(her) constitution was not very robust
15	心火	fire in the heart	inflammation of the heart
16	女儿癆	consumption	she's got some kind of consumption
17	疏肝保肺	calm the liver, protect the lungs	sedation of liver, restoration of lungs
18	补元气	fortify the humours, build up the patient's strength	stabilize and fortify the humours
19	宁神安志	tranquillize the nerves	tranquillize the spirits
20	舒筋络	relax the muscles	relax the muscles
21	脉气沉静	(his) pulse is steady	(his) pulses are deep and still
22	癆病	consumption	consumption
23	(老太太的) 脉气不好	(The old lady's) pulse is very weak	(Lady Jia's) pulse-rate is very poor
24	急怒所致	attribute(d) her illness to anxiety and anger	diagnose(d) her condition as the consequence of undue excitement and anger

Among 24 translated medical terms, 15 exhibit close approximations, while 10 are entirely consistent between the two translated versions. This demonstrates a strategic balance between retaining TCM's uniqueness and ensuring cross-cultural clarity.

4.1.4. Popular science-oriented translation

Although some terminology lacks complete consistency, both translators strove to adopt a popularized and accessible approach when rendering the same terms, aligning with a science communication style. Works on TCM translation should prioritize both academic monographs and popular science content. "Popular science translations benefit all foreigners seeking to understand TCM, enabling them to grasp its fundamentals and cultural context comprehensively" [8]. This philosophy likely reflects the shared intent of both translators—to bridge knowledge gaps without oversimplifying TCM's depth. By balancing accuracy with clarity, their translations serve as gateways for global readers to engage with Chinese medicine meaningfully.

4.2. Inconsistencies

The above analysis highlights where the translations achieve relative uniformity, particularly admirable given the profound medical wisdom in *Hong Lou Meng*. However, inconsistencies still exist.

4.2.1. Inconsistencies within translations

The *yingzhen* (迎枕), also known as *yingshou* (迎手), is a diagnostic tool used in TCM pulse-taking. During pulse diagnosis, this small pillow is placed under the patient's hand to promote blood circulation. In Chapter 10, *yingzhen* is mentioned, while in Chapter 83, *yingshou* appears—both referring to the same medical aid. Yang Xianyi did not treat this term as specialized terminology, translating it contextually as "pillow" and "cushion" respectively. In contrast, Hawkes maintained terminological consistency, rendering both as "arm-rest" while adding contextual modifiers: "a large arm-rest of the kind" (Chapter 10), "the diagnostic arm-rest" (Chapter 83).

This contrast reveals their differing approaches: Yang prioritized natural integration into the narrative, while Hawkes emphasized medical specificity through consistent core terminology supplemented by descriptive cues.

4.2.2. Inconsistencies in translating medicinal origins

The novel mentions six medicinal ingredients named after their production regions, each believed to possess optimal efficacy when sourced from these specific locations: Fujian lotus seeds, Huaiqing (Henan) yam, Sichuan lovage root, Yunnan poria cocos, Genuine Dong'e donkey-hide gelatin (Shandong), Fujian lotus seed and red date combination. The two translations render those terms differently: Yang's version prefers descriptive translations with geographic markers (e.g., "Fujian lotus seeds"), sometimes omits origin specificity for readability. Hawkes' version occasionally retains origin names (e.g., "Lotus seeds") and uses Latin binomials for botanical precision (e.g., "Lycoperdon"). Yang's approach prioritizes narrative flow but risks losing cultural-pharmacological nuance, while Hawkes preserves technical accuracy at the cost of immediate accessibility.

In translating those six region-specific medicinal terms, both Yang and Hawkes demonstrated distinctive yet equally valid approaches, making it difficult to declare either version superior. This divergence reflects a fundamental tension in TCM translation: balancing scientific rigor with literary fluidity.

5. Reflections

The above analysis reveals that, despite their independent approaches, these two meticulous translators demonstrated remarkable consistency in rendering TCM terminology—a notable achievement given the complexity of the subject matter. This phenomenon invites deeper consideration:

5.1. Standardization of TCM terminology translation

TCM represents a sophisticated scientific system that transcends mere linguistic or cultural dimensions—it is fundamentally rooted in Chinese philosophical principles. To facilitate its global dissemination and acceptance, the standardization of TCM terminology translation is imperative.

5.2. Principles for standardizing TCM terminology translation

5.2.1. The primacy of fidelity

Fidelity serves as the cornerstone for standardization. Any translation divorced from its source culture risks becoming mere conjecture. This principle of faithfulness remains the gold standard in translation practice. As David Hawkes mentioned in the preface to Volume II of his translation: "The translator owes three allegiances: to the author, to the reader, and to the text itself. These obligations stand in perfect equilibrium - none may claim precedence, nor may any be sacrificed." This tripartite commitment represents the aspirational ideal for all translation endeavors. Fidelity precisely reflects the defining characteristic of TCM translation: the dual imperative of precision and cultural preservation.

5.2.2. Strategic planning is paramount

The standardization of TCM terminology requires systematic planning, as does its translation for global dissemination. Notably, significant progress has been made in recent years: in December 2016, the Chinese government launched and implemented the *Belt and Road Initiative Development Plan for Traditional Chinese Medicine (2016–2020)*. This initiative has supported the establishment of numerous "TCM Overseas Centers" in countries along the Belt and Road routes. The International Organization for Standardization (ISO) has

formed a technical committee dedicated to TCM. Nowadays, 41 international TCM standards have been published, ensuring global consistency in terminology and practice. On May 25, 2019, the 72nd World Health Assembly adopted the *11th Revision of the International Classification of Diseases (ICD-11)*. For the first time, this revision included a dedicated chapter on traditional medicine originating from Chinese medicine, marking a milestone in TCM's integration into global healthcare frameworks^[9].

5.2.3. Adherence to target-language conventions is essential

Effective translation must comply with the linguistic norms of the target language to ensure comprehension. In general terms, translations should adopt Western-style formulations and align with Western readers' expectations to maximize accessibility. This approach facilitates smoother cultural assimilation and broader acceptance of TCM concepts abroad. Both Hawkes' and Yang's translations provide valuable precedents for standardizing TCM terminology. Their works demonstrate how to: balance accuracy with readability; adapt culturally specific terms without losing essential meaning; maintain consistency across medical and literary contexts.

For example, the concept of “*yinzi*” (引子) in Medical Formulations is translated the same. In Chapter 10 of *Hong Lou Meng*, physician Zhang Youshi prescribes the remedy “Yiqi Yangrong Bupi Hegan Decoction” (a TCM formula for replenishing qi, nourishing vitality, strengthening the spleen, and regulating the liver), which includes the instruction: “Take seven lotus seeds with hearts removed and two red dates as *yinzi*.” Here, *yinzi* refers to a “guiding drug”—a crucial element in TCM that represents the balance and cyclicity of life; it acts as a catalytic agent to enhance the formula's efficacy. Both Hawkes and Yang rendered *yinzi* as “adjuvant.” This choice aligns with Western medical terminology and preserves the functional role of *yinzi* without overcomplicating the explanation.

6. Conclusion

The comparative study of Yang Xianyi's and David Hawkes' translations of *Hong Lou Meng* reveals that their translations of TCM materia medica and technical terminology exhibit greater consistency than divergence. This alignment provides a solid theoretical foundation for standardizing TCM nomenclature. Though a literary work, *Hong Lou Meng* contains rich, authentic, and culturally embedded TCM knowledge. Its translations have achieved broader dissemination and cultural resonance than specialized medical texts, making it uniquely effective for promoting TCM globally. Should subsequent translators draw inspiration from these two masters' approaches—synthesizing terminological precision with cultural resonance—while maintaining consistency in popularized and science-communicated interpretations, it would establish the optimal methodology for TCM translation. Such an integrated framework would significantly advance the global dissemination and accessibility of TCM.

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