MEDICAL JARGON IN HOUSE MD, THE GOOD DOCTOR AND SCRUBS

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Relevance. Jargon constitutes an important part of professional communication when it comes to the medical field as being able to succinctly convey information is paramount in medical setting (especially, in life or death situations). These linguistic peculiarities are widely represented in medical dramas which popularize medical jargon. Being able to understand the nature of these units is thus imperative both for future doctors and for broad public.

Aim of the research. To identify, analyze and classify medical jargonisms that are commonly used in medical practice to promote better understanding of this phenomenon.

Materials and methods. We have examined medical jargonisms represented in popular medical drama series (The Good Doctor, House MD, Scrubs) using observation, descriptive method and analysis.

Results. Medical jargon is a unit of social dialect used by medical professionals. Upon analyzing jargonisms used in medical dramas, we have identified the following ways in which these units may be formed: semantic change: banana – a patient with a jaundice; plumber – a urologist; grapes – hemorrhoidal tumors; compounding: baby catcher – a gynecologist; snowdrop – a patient with frostbite; clipping: a) apocope: hep – hepatitis, bronk – bronchoscopy, quad – quadriplegic; b) apheresis: terns – interns; abbreviation: LOBNH – lights on but nobody home, FLK – funny looking kid; telescopy: fascinoma – an unusual or interesting case or diagnosis, beemer – an obese patient; affixation: lunger (-er), tubed (-ed); conversion: to bag – to apply oxygen mask; conversion is often used along with compounding: to flatline – to die, bounceback – a repeatedly admitted patient.

According to semantics, we have distinguished 6 groups of jargonisms: procedures or actions: finger wave – rectal examination, buff up – to prepare the patient to be discharged; patient designations: blue blower – a patient with severe pulmonary pathology, transformer – patient with an amputated and prosthetic limb, canary – a patient with parenchymal jaundice; diseases or symptoms: bugs in the rug – pubic lice, old-timer's disease – Alzheimer's disease; medical specialists: fanger – dental surgeon, gasser – anesthetist, blade – surgeon, Freud squad – psychiatrists;parts of the hospital: pit – emergency room; vegetable garden/C&T ward – a room with comatose patients; ward X – morgue. medications: bug juice – antibiotic; oids /roids – steroids; MTX – methotrexate.

Conclusion. We have analyzed and classified medical jargon units used in popular medical dramas according to two criteria (semantics and word formation) thus providing a better understanding of the phenomenon of medical jargon.

SUICIDAL THOUGHTS AND BEHAVIOURS AMONG TRANSGENDERS: WHO'S TO BLAME?

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Relevance. The latest revision of ICD, ICD-11, will come into effect on January 1st, 2022. One of the changes was a complete removal of F. 64 (Transsexualism) group, now classifying its prior content as "gender incongruence" under "conditions related to sexual health". This, being the part of the global effort in destigmatizing transgenderism, leads to more people, specifically of younger age, attempting to rethink their identity and coming out as 'non-binary' persons. The "risk group" is growing bigger by the day; thus it is relevant to study the problem in the title urgently to save as many human lives as possible.

Aim of the research. This paper set its goal in comprehensive analysis of statistical data available in order to find any possible patterns and set the vector for researches.

Materials and methods. This is an empirical applied research project of qualitative type based on the review of transgender demographics statistics and the results of surveys, in which transgender respondents answered whether they have ever considered killing or harming themselves.

Results. The number of transgenders having suicidal thoughts and behaviours is indeed extremely high. Different surveys offer the information that up to 85% of respondents had ever thought about suicide and up to 50% – ever attempted it. The main reason of such behaviours is commonly associated with the distress trans-person feels cause of mismatch between their identity and biological sex – the so-called gender dysphoria – and the prevalence of hostility, discrimination and transphobic attitude in the society. The transition surgeries aim to solve these problems, yet, unfortunately, studies show that post-surgery suicide attempt, though lower than before-, is still way above the median. The conclusion is that, clearly, not everyone is satisfied with the outcome of the irreversible procedure. Transgender demographics allow us a glance at some interesting patterns: the amount of Male-to-Female individuals usually relates 3:1-4:1 to Female-to-Male, except for Japan and Poland, where the numbers are reversed; additionally, the newer the report, the more is the percentage of transgenders in the total population. These irregularities mean that there are abundance of false positives and lack of clear criteria within "gender incongruence" field. Gender dysphoria diagnosis criteria are vague and can be faked in self-lie, which originates from the period of depression and is basically a defensive mechanism to improve self-esteem and find a purpose in life. Doctors have no means to distinguish this state from 'real' dysphoria and the therapy is started; when the real feelings return, they can be devastating.

Conclusion. Transgender people suffer gender dysphoria and society transphobia, these lead them on the verge of mental breakdown and definitely contributes to suicidal behaviour; the scientific community must find a way to make out definite gender incongruence diagnosis from false positive.