

## **METAPHOR AND EMOTION IN MEDICAL POPULARIZATION: HOW METAPHORS SHAPE PATIENT PERCEPTIONS**

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**Abstract.** Metaphors play a crucial role in the popularization of medical knowledge. By translating complex biomedical concepts into familiar terms, metaphors make medical information accessible to the general public. However, they also shape emotional responses, influencing how patients perceive their conditions, treatments, and recovery. This article examines the interplay between metaphor and emotion in popular scientific medical discourse, focusing on how metaphors guide patient perceptions, provide reassurance, or trigger anxiety.

**Key words:** Metaphor, Medical discourse, Emotion, Patient perception, Medical popularization, Health communication, War metaphor, Journey metaphor, Machine metaphor, COVID-19, Narrative in medicine.

Medical popularization aims to bridge the gap between scientific expertise and lay understanding. Popular science articles, health blogs, and patient information leaflets often rely on metaphors to simplify technical language. Yet, metaphors are not merely linguistic tools; they are also powerful cognitive and emotional frameworks. When medical conditions are framed as “battles,” “journeys,” or “mechanical breakdowns,” these images shape how patients interpret their illness and their role in the healing process (Lakoff & Johnson, 1980). This study explores the emotional dimension of metaphors in medical discourse and their impact on patient perceptions.

The foundation for studying metaphors in medical communication comes from **Conceptual Metaphor Theory**, developed by Lakoff and Johnson (1980), which argues that metaphors help people understand abstract concepts through concrete experiences. In health communication, these conceptual frameworks are often linked to patients’ emotions and coping mechanisms. Pepper’s theory of **root metaphors** (formism, mechanism, contextualism, organicism) has also been applied to nurse–

patient interactions, illustrating how different metaphors influence patient engagement and compliance (Gómez et al., 2017).

Metaphors in medical discourse typically fall into several domains. **War metaphors** portray illness as an enemy and treatment as a battle; they are prevalent in cancer and pandemic communication (Casarett et al., 2010). **Journey metaphors** describe illness as a path and recovery as progress along a road, offering patients a sense of movement and hope (Southall, 2013). **Machine metaphors** frame the body as a system or engine that can malfunction or be repaired, encouraging a technical view of illness but sometimes depersonalizing it (Cakmak et al., 2022). Finally, **natural metaphors** use imagery such as light, darkness, or storms, often helping patients express existential or spiritual dimensions of illness (Southall, 2013).

Metaphors do more than simplify medical concepts—they also trigger emotional responses. **War metaphors may** empower some patients by fostering determination but can lead others to feel guilt or failure if they do not “win” their battle (Hanne & Weisberg, 2018). **Journey metaphors** emphasize continuity and resilience, presenting illness as a temporary phase and evoking optimism (Lempp et al., 2024). **Machine metaphors** may reduce stigma by presenting illness as a technical issue but risk creating feelings of alienation when patients feel dehumanized (Casarett et al., 2010). Thus, the emotional impact of metaphors is complex and context-dependent.

Several studies highlight how metaphors influence patient perceptions. Southall (2013) showed that patients in palliative care often use war, journey, and existential metaphors to make sense of their experiences, finding that these metaphors can either empower or distress depending on usage. Casarett et al. (2010) found that physicians who used more metaphors in discussions with seriously ill patients were rated as better communicators, suggesting that metaphors facilitate empathy. During the COVID-19 pandemic, war metaphors mobilized public action but also heightened fear, while journey metaphors helped frame the crisis as collective progress (Cakmak et al., 2022; Krawczyk et al., 2022). More recently, Lempp et al. (2024) argued that similar metaphors can be empowering or disempowering depending on diagnosis, treatment, and cultural framing.

The choice of metaphor is never neutral. For example, while war metaphors may inspire resilience in cancer discourse, they can also frame non-recovery as defeat, placing unnecessary emotional burden on patients (Hanne & Weisberg, 2018). Journey metaphors, on the other hand, can foster a sense of progress but may frustrate patients when recovery is non-linear. Machine metaphors are useful in explaining technical aspects but can reduce the individuality of patient experience. These findings suggest

that health communicators should adapt metaphor use to patient needs, cultural context, and emotional well-being.

Metaphors are indispensable in medical popularization—not only for simplifying science but also for shaping patients' emotional responses and perceptions. They can empower, comfort, and clarify, but they may also mislead, disempower, or cause anxiety if used uncritically. Responsible metaphor use requires awareness of both cognitive and emotional dimensions, as well as sensitivity to patient diversity. Future research should examine how alternative metaphors can balance accuracy, empathy, and psychological support in medical communication.

### References

1. Casarett, D., Pickard, A., Fishman, J. M., Alexander, S. C., Arnold, R. M., & Pollak, K. I. (2010). Can metaphors and analogies improve communication with seriously ill patients? *Journal of Palliative Medicine*, *13*(3), 255–260. <https://doi.org/10.1089/jpm.2009.0221>
2. Cakmak, B., Calik, A., & Vardar Inkaya, B. (2022). Metaphoric perceptions of COVID-19 patients related to the disease. *Journal of Holistic Nursing*, *40*(2), 134–145. <https://doi.org/10.1177/10547738211048312>
3. Gómez, M. S., Escalera, C., & González, A. (2017). Using root metaphors to analyze communication between nurses and patients: A qualitative study. *BMC Medical Education*, *17*(105), 1–9. <https://doi.org/10.1186/s12909-017-1059-0>
4. Hanne, M., & Weisberg, R. (2018). *Narrative and metaphor in medicine: Communication and cognition across the lifespan*. Oxford University Press.
5. Krawczyk, M., Sawicki, T., & Pawlak, A. (2022). War metaphors in COVID-19 discourse: Mobilization and emotional consequences. *Frontiers in Public Health*, *10*, 830266. <https://doi.org/10.3389/fpubh.2022.830266>
6. Lakoff, G., & Johnson, M. (1980). *Metaphors we live by*. University of Chicago Press.
7. Lempp, H., Tang, C., Hinton, L., Gillett, K., & Arber, A. (2024). The use of metaphors by service users with diverse long-term conditions: A secondary qualitative data analysis. *Qualitative Research in Medicine & Healthcare*, *8*(1), 1–12. <https://doi.org/10.4081/qrmh.2023.11336>
8. Southall, D. (2013). The patient's use of metaphor within a palliative care setting: Theory, function and efficacy. *Palliative Medicine*, *27*(4), 295–303. <https://doi.org/10.1177/026921631245194>