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**A DISCOURSE ANALYSIS
OF MEDICINE ADVERTISEMENTS
IN ENGLISH AND VIETNAMESE**

**Field: THE ENGLISH LANGUAGE
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(A SUMMARY)**

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CHAPTER 1 INTRODUCTION

1.1. RATIONALE

One aspect of human activities which employs language is advertising. Advertising has its own importance, especially from the economic, sociological and psychological points of view. Through using advertisements, someone or a company can communicate and inform the society of messages of some products or services. Advertisements are one of the real forms of communication activities which can not be separated from language use.

Most of products including medicine are advertised by many ways through mass medium such as magazines, television, newspapers, the internet, radio, etc. However, medicine advertisements have their own characteristics due to their language and their readers or listeners. Moreover, the language used in medicine advertisements must not be opaque. In other words, all pharmaceutical companies use language that is very clear and understandable to the general public. Especially, all risks of medicine are enumerated in advertisements so as to help people avoid unexpected reactions and allergies. Nevertheless, it is sometimes difficult to express medical terms in simple ways without changing their meanings.

As a teacher at the Technical College of Medicine who is in charge of teaching students in the Pharmaceutical Department, I realize that the use of language in medicine advertisements is an important matter for pharmacist assistants who will work at sales departments as well as drugstores of pharmaceutical companies.

Therefore, “A Discourse Analysis of Medicine Advertisements in English and Vietnamese” is the title of the master thesis I wish to carry out. I do hope that this study’s results will provide some useful

knowledge of advertising language in medicine for English teachers and learners at my medical college, especially for students majoring in Pharmacist Assistant Training.

1.2. AIMS AND OBJECTIVES

1.2.1. Aims

The aim of the research is to carry out a discourse analysis of English and Vietnamese medicine advertisements in order to find out their features in terms of layout, lexis, syntax and cohesive devices and help Vietnamese learners grasp the distinctive characteristics of medicine advertisements.

1.2.2. Objectives

- To describe the discourse features of medicine advertisements in English and Vietnamese in terms of their layout, lexical features, syntactic structures and cohesive devices.

- To find out and explain the similarities and differences between English and Vietnamese medicine advertisements.

- To suggest some implications for teachers and learners of English, especially students trained to become pharmacist assistants.

1.3. SCOPE OF THE STUDY

There are many factors contributing to the success of a medicine advertisement, but the focus of this thesis is just put on the layout, lexical features, syntactic features and the cohesion of medicine advertisements in the two languages. In spite of various means of medicine advertising, our scope of investigation is limited to advertisements in the magazines.

1.4. RESEARCH QUESTIONS:

1. What are the layout features of medicine advertisements in English and Vietnamese?

2. What are the lexical features, syntactic structures and cohesive devices of medicine advertisements in English and Vietnamese?

3. What are the similarities and differences between English and Vietnamese medicine advertisements in terms of their layout, lexical features, syntactic features and cohesive devices?

4. What are some possible suggestions for teaching and learning English as well as using English by students majoring Pharmacist Assistant Training to create effective medicine advertisements?

1.5. ORGANIZATION OF THE STUDY

The research includes five chapters: Chapter 1(Introduction), Chapter 2 (Theoretical Background), Chapter 3 (Methods and Procedure), Chapter 4 (Discussion and Findings) and Chapter 5 (Conclusions and Implications).

CHAPTER 2

THEORETICAL BACKGROUND

2.1. LITERATURE REVIEW

Up to now there have been a lot of books in which discourse and discourse analysis are mentioned by well – known scholars such as Halliday and Hasan (1976), Brown and Yule (1983), Widdowson (1994), Cook (1989) , David Nunan (1993), Joan Cutting (2002).

In Vietnam, there are also many linguists having great contribution to the study of discourse analysis. Tran Ngoc Them (1999), Diep Quang Ban (2003), Nguyen Hoa (2003) and Nguyen Thi Viet Thanh (2001).

As regards advertising and discourse analysis, some books and related studies have discussed a lot such as “The Discourse of Advertising” by Cook (2003), “Language of Advertising” by Sells and Gonzalezz (1998).

Besides, from different views, some linguists approached advertising and advertising language such as “Ngon ngu quang cao – Phuong phap sao phong” (Nguyen Duc Dan, 1994), “Doi net ve

quang cao o Viet Nam” (Vo Thanh Huong, 2000), “Cac dac diem cua ngon ngu quang cao duoi anh sang cua ly thuyet giao tiep” (Mai Xuan Huy).

Moreover, many master theses related to discourse analysis and advertising language have studied such as the studies on Directives, Lexical choices, Stylistic devices in Advertising in English and Vietnamese by Ngo Thi Nhu Ha (2005), Ngo Thi Hong (2004), Phan Thi Uyen Uyen (2006).

However, to the best of my knowledge, there is no evidence that any research on the discourse features of medicine advertisements has been conducted up to now. Therefore medicine advertisements in English and Vietnamese are chosen as the subject area of our master thesis.

2.2. THEORETICAL BACKGROUND

2.2.1. Discourse and Discourse Analysis

2.2.1.1. Concepts of Discourse

Discourse in this thesis is viewed as (1) language in use, for communication, (2) a language unit which has meaning, unity and purpose, (3) a unit which may vary in length and inextricably related to the context in which it is used, (4) a process and its linguistic product is text.

2.2.1.2. Concepts of Discourse Analysis

Brown and Yule (1983) states that discourse analysis is the study of language use with the reference to the social and psychological factors that influence communication.

2.2.2. Kinds of Discourse Processing

According to Brown and Yule [7, p.234], there are two discourse processing: top-down and bottom-up processing. In this thesis I use both of processings simultaneously because medicine advertisements is the product of the process of studying language. These two kinds of discourse processing serves as a

theoretical framework to help me illuminate the nature of medicine advertisements.

2.2.3. Written and Spoken Discourse

Although many linguists make a distinction between spoken and written discourse, Burgarski (1993) remarks “spoken and written language are viewed as separate but that related”. The types of discourse that are dealt with in this thesis belong to written discourse that are well-planned and orderly.

2.2.4. Cohesion and Coherence in Discourse

2.2.4.1. Cohesion

Cohesion is formal links between sentences and between clauses are known as cohesive devices. Halliday and Hasan [16] identify two types namely grammatical cohesion and lexical cohesion and they are categorized into five groups: *reference*, *substitution*, *ellipsis*, *conjunction* and *lexical cohesion*.

2.2.4.2. Coherence

Coherence has been applied to the concepts and relations underlying its meaning and to some general overall, interrelatedness in the text. In other words, *coherence* has been defined as continuity in meaning and context in a discourse.

2.2.5. Overview of Advertising

2.2.5.1. Definition of Advertising

According to the particular fields, we can find the different definitions of advertising. However, the sole purpose of advertising is to sell something—a product, a service, or merely an idea through effective communication in each definition.

2.2.5.2. Language of Advertising

Because of the purpose of advertising is to get people to think about or react to the product or the company in a certain way, advertising messages must be imaginative, entertaining and

rewarding to their audience. Effective advertising message should be meaningful, believable and distinctive.

2.2.5.3. Means of Advertising

The chief advertising media are newspapers, television, direct-mail advertising, radio, magazines, outdoor advertising. Among them, newspaper, magazines and television are the most popular means of advertising.

2.2.5.4. Classification of Advertising

Basing on the aims, Vestergaard and Schorder [34, p.1] divide advertising into two main types : Commercial and Non-commercial advertising.

2.2.6. Overview of Medicine Advertising

2.2.6.1. Definition of Medicine

From the different definition of Wikipedia [49], Medical dictionary [24], the circular [51], etc. I can draw out some noticeable points: (1) medicine is a chemical substance or a mixture of chemical substances, (2) medicine can be either taken by mouth or injected into a muscle, the skin, a blood vessel, a cavity of the body, or applied topically and (3) medicine is used to treat, cure, prevent diseases and enhance physical and mental well-being.

2.2.6.2. Definition of Medicine Advertisements

According to the FDA’s Examination Measures of the United States [50], the term “Medicine Advertisement” refers to all advertisements which are published through various media or in various forms and contain medicine names, indications or other medicine-related contents. All advertisements of medicine products need to be pre-approved by the government.

2.2.6.3. Regulations of Medicine Advertisements

Drug Advertisements Standards prescribe that certain information must appear in a medicine advertisement: Advertising Licence, Medicine production licence number, The generic name of

the medicine, The statement “*Only for the professionals of medicine and pharmacy*” if the product is a prescription one, and the statement “ *Please purchase and use in accordance with the instructions or under the guidance of pharmacist*” if the product is a non-prescription one, and the name of the manufacturer.

In other words, the content of medicine advertisement must be accurate, scientific, objective, truthful, clear, and must not lead to misunderstanding, balance the risk and benefit information, be consistent with information approved by FDA. Finally it only include information that is supported by strong evidence from clinical studies.

2.2.6.4. Layout of Medicine Advertisements

Following Leech’s categorization which is still widely accepted today, modern advertisements consist of five elements: the Headline, the Body Copy, the Illustration, the Signature Line and the Standing Details.[21, p.59]

CHAPTER 3

METHODS AND PROCEDURE

3.1. RESEARCH DESIGN

The thesis design is based on the combination of both qualitative and quantitative approaches.

3.2. RESEARCH METHODS

With the aim of achieving the set goal, several methods are simultaneously employed such as the descriptive method, the analytic method, the contrastive method, the inductive method. Among them, the descriptive and contrastive methods are the dominant ones which are most frequently used in the thesis.

3.3. DESCRIPTION OF SAMPLE

120 samples of medicine advertisements (60 EMAs and 60 VMAs) collected from magazines (from 2001 to 2010) must have 4

parts: the Headline, the Body Copy, the Illustration, the Signature Line and Standing Details in which the average length of the Body Copy ranging from 100 to 200 words.

3.4. DATA COLLECTION AND DATA ANALYSIS

For the English data source I selected from four magazines: AFP (American Family Physicians), BMJ (British Medical Journal), JAMA (The Journal of American Medical Association) and Reader’s Digest.

For the Vietnamese data, I selected mainly from three popular magazines: Duoc hoc, Suc khoe va Doi song, Thuoc va Suc khoe.

These advertisements include different forms of medicine such as tablets, capsules, ointment, solution. With the collected data, we carry out analyzing EMAs and VMAs in terms of their layout, lexical feature, syntactic structure and cohesive devices. Finally, the analysis results of EMAs and VMAs would be examined and compared in each category in an attempt to find out the similarities and differences between the two languages.

3.5. RELIABILITY AND VALIDITY

CHAPTER 4

FINDINGS AND DISCUSSION

4.1. LAYOUT IN EMAs AND VMAs

4.1.1. The Headline

With regard to the functions of the Headline, both Rowse and Fish [13, p.145] state that its function is to attract the readers’ attention, to arouse the readers’ interest to continue reading the remaining body text and to make advertisements more attractive and readable. Advertising legend David Ogilvy said “ On the average, five times as many people read the headline as read the body copy. If you haven’t done some selling in your headline, you have wasted 80% of your money”. The study “How to write headlines that

get attention”[52] show that we can classify effective advertising headlines into five basic categories: benefit headline, provocative headline, news/information headline, question headline, and command headline.

The Headlines of these medicine advertisements want to help readers quickly understand the effects of the new medicines by displaying the unknown information of the advertised products. Therefore more than 50 % news headlines are used popularly in both EMAs and VMAs (68.4% in EMAs and 81.7% in VMAs). While the second-rank in EMAs is question headlines with 13.3% that in VMAs is less than twice (6.7%). Both command and provocative headlines take the small percentage in EMAs (10% and 8.3%).

4.1.2. The Body Copy

In a medicine advertisement, the Body Copy is where the writer gives, in great detail, all of the facts about the medicine such as clinical studies, indications, contraindications of use, warnings and precautions, side-effects and dosage.

120 standard medicine advertisements in both English and Vietnamese have been analyzed. It is found that the Body Copy in each language has its own features. Basically, the general layout of the body copy in EMAs includes the following sections:

- **Introduction:** *Disease Information/ Evidences of clinical trial and Indications*

- **Important safety information:** *Contraindications/ Precautions, Side-effects, Dosage and Imperative Doctor Talk*

Meanwhile, the Body Copy in VMAs often consists of **Introduction** and **Medicine Information** such as *Ingredients, Indications, Contraindications, Side-effects, Dosage or Interaction*. These important information in Medicine information is often printed in small fonts, so it makes the readers feel difficult to read a medicine advertisement. On the other hand, in some VMAs the Body Copy

only focus on the introduction and indication without other important information such as risks, side-effects.

Unlike other products, medicines are chemicals which affect the human body and human life, so the Body Copy in any EMAs and VMAs always consist of such sentences as: “*Please see Patient Product Information on the the adjacent page*” or “*Please see brief summary of prescribing information on next page*” in English and “*Đọc kỹ hướng dẫn trước khi dùng*” in Vietnamese so that the readers always obey or conform to the doctor’s orders and the directions for using medicine. Moreover, typography is applied to writing sentences in the Body Copy by dropping a line and putting dashes in front of noun phrases to make information more obvious and the readers can remember the important points longer. This is one distinctive features in writing sentences of medicine advertisements in English and Vietnamese.

4.1.3. The Illustration

O’Guinn, Allen and Semenik [33, p.408] state that “The Illustration in the context of print advertising is the actual drawing, painting, photography, or computer-generated art that form the pictures in an advertisement”. The Illustration in medicine advertisements are photograph or pictures showing subjects, parts of the human body or things so that the reader can understand more what illness the medicine is used for treatment.

4.1.4. The Signature line and The Standing Details

The Signature Line and The Standing Details in medicine advertisements are often placed at the bottom. The Signature Line shows the brand name accompanied with a slogan. Meanwhile, the Standing Details provides the address of website/pharmaceutical company or phone number for readers to contact in case they have problems or concerns about this medicine.

4.1.5. Summary

4.2. LEXICAL CHOICES IN EMAs AND VMAs

4.2.1. Weasel Words

A weasel word is defined as “a word in order to evade or retreat from a direct or forthright statement or position” according to *Webster Dictionary* (Philip Babcock Gove, 1976). Weasel words make people hear things that aren't being said, accept as truth that have only been implied, and believe things that have only been implied and suggested.

The study reveals that nearly all medicine advertisements in English and Vietnamese make use of the weasel word “*help*”/“*giúp*”. Apart from using popularly the word “*help*”, there are some commonly used as weasel words such as *relieve*, *provide*, *improve*, *reduce*, *work*, *up to* in EMAs and *giảm đau*, *cải thiện*, *làm giảm*, *phục hồi* in VMAs. This is one of the techniques for lexical choice which are often employed by advertisers.

4.2.2. Words Denoting Side-Effects

Medicine is a collection of chemicals, so no matter what medicine the patients take, side-effects such as *dizziness*, *diarrhoea*, *insomnia*, *nausea*, etc. are almost inevitable. In any medicine advertisements, the advertisers often list the kinds of experiences of patients who have taken the medicine. This thing helps the users know in advance all risks without feeling worried or anxious when taking medicine. This is a special feature which the readers cannot find in any other trade advertisements.

4.2.3. Evaluative Adjectives

Positive adjectives are frequently used in the creation of advertising, as Leed (1966) observed “Advertising language is marked by a wealth of adjective vocabulary”. As the focus of information in medicine advertisements is the description of the product's ingredients, its effects, the use of adjectives is an effective

and important device to make advertisements more impressive to readers. The readers often pay more attention to effects of the medicine than their designs or forms. These is the reasons why evaluative adjectives are mainly used in medicine advertisements.

Another prominent characteristic in English and Vietnamese advertisements of medicine is the use of comparatives and superlatives. By using these two forms of evaluative adjectives, the advertisers intend to convey the position of their products in the market in order to emphasize the quality of the products advertised and to persuade the customers to buy them. Nevertheless, the total number of adjectives found in EMAs is far fewer than that in VMAs (46 versus 108). This shows that English advertisers are very cautious in using adjectives in medicine advertisements.

4.2.4. Modal Verbs

In the English language, a modal verb is an auxiliary verb that can be used to change the modality of a sentence – the attitude of the speaker to the action indicated by a verb, especially with regard to necessity, desirability or probability. The common modal verbs which share the same grammatical characteristics are: *can-could* / *may-might* / *will - would* / *shall - should* / *must* and *ought to* (Alexander) [1, p.207]. With regard to meaning, Quirk et al (1985) divided the contrasting factors of meaning in modal verbs may be divided into two types: those such as “permission”, “obligation” and “volition” which involved some kind of intrinsic human control over events and those such as “possibility”, “necessity” and “prediction” which typically involve extrinsic human judgment of what is or is not likely to happen. In EMAs, two modal verbs are used commonly are *may* and *should*. As the classification of meaning mentioned above, *may* and *should* in medicine advertisements are often termed extrinsic modality respectively. Therefore, the most common meaning category of *may* is **possibility** and that of *should* is **necessity**.

(4.1) *Taxotere may cause you to fall asleep without any warning, even while doing normal daily activities such as driving. When taking Taxotere, hallucinations may occur and sometimes you may feel dizzy, sweaty or nauseated upon standing up.* [77]

(4.2) *Một vài trường hợp cá biệt có thể gặp vài xáo trộn đường tiêu hóa nhẹ như nôn, ói..mà không cần thiết phải ngưng điều trị.*[135]

The producers have to list possible reactions in medicine advertisements so as to help the users feel secure about medicines they will be likely to take. However, based on the scale of certainty by Alexander [1, p.221], *may* can be used to express the degree of uncertainty the speakers/writers feels about a possibility. Therefore, depending on each patient's body, given reactions as well as risks can occur or not.

To help consumers avoid unwanted reactions, the advertisers used “*should*” in medicine advertisements. This verb expresses the basic modality of “necessity”. Here are some instances of “*should*” in EMAs and its equivalent in VMAs:

(4.3) *Patients should wash their hands thoroughly and immediately with soap and water after application of Testim* [84]

(4.4) *Thuốc nên uống vào các buổi sáng hoặc trước khi ăn* [116]

By using the modal verb “*should*”, the advertisers point out necessary precaution measures for the consumers to implement.

In the collected EMAs 209 instances of modal verbs and in the VMAS there are 40 instances. This implies that in medicine advertisements, the English advertisers tend to use modal verbs in showing side-effects, risks as well as precaution measures.

4.2.5. Summary

4.3. SYNTACTIC FEATURES

4.3.1. Passive Voice in EMAs and VMAs

Quirk et al [29, p.166] stated that the passive is more commonly used in informative than in imaginative writing, and is notably frequent in the objective, impersonal style of scientific article and news reporting. This explains why the passive voice takes up the highest percentage in medicine advertisements. Here is the construction of a passive sentence

Subject_{passive} + **Verb passive (be/get + PP)** + **Optional Agent**

(4.5) *Zovirax cream 5% is indicated for the treatment or recurrent herpes labialis in adults and adolescent.* [73]

Especially, most passive sentences in EMAs are used with the simple present tense. This is a very important factor in advertisements because the advertisers want to emphasize its reliability and to make advertisements sound up-to-date. Moreover, apart from the popular construction above, the passives in EMAs sometimes go with modal verbs such as “*should*”, “*must*”. They make the readers pay more attention to the precautions in using the medicine.

According to Do Viet Hung [43, p29] passive sentences are realized by three main constructions :

Goal + Vtransitive (1)

Goal + bị/được + Vtransitive (2)

Goal + bị/được/do + Agent + Vtransitive (3)

(4.6) *Thuốc được uống trước bữa ăn 15 phút* [102]

As stated by Diep Quang Ban, with the position of auxiliary verbs, the words “*bị*” and “*được*” still expresses the modality sense of *active/ negative* meaning ” or the word “*bị*” only expresses negative meaning for the whole sentence, mainly for the subject of the passive sentence [39, p.65]. Therefore, one hundred percent of passive sentences found in VMAs use the auxiliary verb “*được*”.

4.3.2. Conditional Sentences in EMAs and VMAs

According to “Longman English Grammar” of Alexander [1,p.275], the construction of real conditional sentences in English can be realized by three following forms:

If + present + modal (1)

If + should/present + imperative (2)

Imperative + conjunction + clause (3)

Most of conditional sentences found in our data belong to the first two forms. Here are some examples:

(4.7) *You **may** need a lower dose of Chantix if you **have** kidney problems or get dialysis.* [80]

(4.8) *You **should** not take TriCor if you **have** serious liver disease, kidney disease or gallbladder disease.*[93]

(4.9) ***Talk** to your doctor if you **are** allergic to Effexor XR or any of its ingredients.* [66]

In Vietnamese, Diep Quang Ban [39, p.221] states that the Compound Conditional sentence is a sentence in which the subordinate clause is called as conditional clause with the words such as *nếu, hễ, miễn (là), giá.....* and main clause is called as consequence clause with the word *thì*. The most common structure of conditional sentences found in VMAs is *Nếuthì...*, however the words *thì* is often eliminated and the main clause is imperative. For instance

(4.10) *Nếu bạn gặp phải những tác dụng không mong muốn khi dùng thuốc, hãy báo ngay cho thầy thuốc.* [136]

Although this conditional construction does not take up a high rate in VMAs, it proves to be similar to the English construction of conditional sentence “**If + present + imperative**”.

In sum, putting conditional sentences in medicine advertisements is very necessary for the safety of using medicine.

The conditional sentences help the readers/ users know in advance all risks of medicine which can happen to them.

4.3.3. Imperative Sentences in EMAs and VMAs

Together with the imperatives in the Headline, the imperative in the Body Copy of medicine advertisements also have its own features. According to Quirk et al [29, p.830] and Alexander [1,p.184], one of the most common structure of imperative is the subjectless 2nd person imperative. These are two main forms of imperatives:

- Affirmative imperative : **V (Base form of the verb)**

- Negative imperative : **Don't + V (base form)**

Here are some examples found in EMAs:

(4.11) ***Tell** your doctor about any changes in your eyesight, muscle pain along with a fever or tired feeling.* [74]

(4.12) ***Don't drink** alcohol while taking Lyrica.*[68]

In the affirmative imperative sentences perform the function of directly ordering and suggesting consumers to note some important points in the process of using the products. Meanwhile, negative imperative sentences are employed only for the purposes of expressing admonishment or warning.

In Vietnamese, the function of imperative sentences is that the speaker/writers want the hearers/readers to do something. The common structures are often used in Vietnamese imperatives are:

- Affirmative imperative: **Hãy/Phải + Verb**

Verb + đi/thôi/nào.

- Negative imperative: **Đừng/Chớ/Không + Verb**

(4.13) ***Hãy thông báo** cho bác sỹ khi có bất kỳ tác dụng phụ nào.* [108]

(4.14) ***Không dùng** cho phụ nữ có thai ở 3 tháng đầu thai kỳ và cho con bú.* [104]

Hãy thông báo and *không dùng* make the consumers pay more attention to the risks of the medicine in order to take necessary precautions. The imperatives above are also considered as doctors' instructions or orders.

4.3.4. Summary

4.4. COHESIVE DEVICE IN EMAs AND VMAs

4.4.1. Grammatical Cohesion in EMAs and VMAs

Table 4.8. Grammatical Cohesion in EMAs and VMAs

Grammatical Cohesion	English		Vietnamese	
	Occ	Rate	Occ	Rate
Reference	75	84.3%	44	33.1%
Substitution	0	0	0	0
Ellipsis	0	0	0	0
Conjunction	14	15.7%	89	66.9%
Total	89	100%	133	100%

With regard to grammatical cohesion, the similarity in EMAs and VMAs is that no cases of substitution and ellipsis are found in any advertisements. Meanwhile, the use of reference in EMAs dominates with the highest percentage (84.3%) and it is opposed to that in VMAs (33.1%). Vice versa, the use of conjunction in EMAs only takes up 15.7%, that in VMAs is more than four times (66.9%). This is a big difference between EMAs and VMAs in using grammatical cohesive devices.

4.4.1.1 Reference in EMAs and VMAs

According to Halliday and Hasan [16], reference is the specific nature of the information that is signaled for retrieval and the cohesion lies in the continuity of reference whereby the same thing enters into the discourse a second time.

The use of reference in EMAs takes the largest proportion (84.3%), it is outnumbered by that in VMAs (33.1%). Anyway, there is a similarity that no cases of comparative reference was found in

EMAs and VMAs. Among the three sub-categories of reference devices, the English advertisers have a strong tendency to use personal pronouns with high percentage (61.8% versus 15%), meanwhile demonstrative is used with a low frequency in both EMAs and VMAs with 22.5% and 18.1% respectively.

4.4.1.2. Conjunction in EMAs and VMAs

Conjunction signals systematic connection between what is to follow and what has gone before. Halliday and Hasan [16] group these conjunctive elements into 4 categories, each of which highlights different aspects of the relations namely Additive, Adversative, Causal and Temporal. The findings indicate that conjunction in EMAs is much less than that in VMAs (15.7% versus 66.9%). It can be said that conjunction is not dominant in marking the relationship between sentences in EMAs.

While additive conjunction is not used in any EMAs, it is quite abundant in VMAs (22.6%) with common phrases like *ngoài ra, hơn nữa, thêm vào đó*. With additive conjunction, some information of medicine is added and this helps readers understand more about the medicine. Unlike EMAs, adversative conjunction appeared with the highest frequency in VMAs (27.1%). The words *tuy nhiên, nhưng* help the readers pay more attention to the risks of the medicine so that they can be more careful in preventing their bodies from suffering unexpected diseases.

Similar to adversative conjunction, in EMAs causal conjunction is only found in 5 instances (5,6%) while that in VMAs is 23 instances (17,2%). When the use of “so” in EMAs and “*nhờ vậy, do đó, nhờ đó, vì vậy*” in VMAs, the relation between cause-and-effect is established. It means that the former is the cause or reason, the latter was the result.

4.4.2. Lexical Cohesion in EMAs and VMAs

Regarding the semantic tie, reiteration is considered the main kind of lexical cohesion. Reiteration is either restating a word in the subsequent sentences of the discourse by direct repetition or reasserting its meaning by using synonyms and super-ordinates. These three categories of reiteration are exploited in medicine advertisements through statistics in the table and the figure below

Table 4.11. Reiteration in EMAs and VMAs

Reiteration	Type	English		Vietnamese	
		Occ	Rate	Occ	Rate
	Repetition	328	91%	246	79.6%
	Synonym	21	6.0%	37	12.0%
	Super-ordinate	12	3.0%	26	8.4%
Total		361	100%	309	100%

It is noticeable that almost all of the lexical reiteration ties belongs to repetition. Repetition is very commonly employed with 91% in EMAs and 76.6% in VMAs, followed by synonyms (6% versus 12%) and super-ordinates (3% versus 8.4%)

In summary, cohesive devices including reference, conjunction and reiteration are important ones which enable advertisers to establish the relationship across sentence boundaries, and help to tie sentences in the Body Copy together.

CHAPTER 5

CONCLUSIONS AND IMPLICATIONS

5.1. CONCLUSIONS

Discourse analysis is really a new method to investigate how texts are structured beyond the sentence level. This thesis is the study of how medicine advertisements are written in English and Vietnamese so as to get a full understanding of the typical features of this kind of advertisements in both languages. With this aim, I have

set up major goals for the thesis; i.e. to investigate and find out the similarities and differences between EMAs and VMAs in terms of layout, lexical features, syntactic features and cohesive devices. The findings presented below are drawn from the major differences and similarities between EMAs and VMAs.

In terms of the layout feature, both EMAs and VMAs share a similar frame. In general, a medicine advertisement contains 4 parts: the Headline, the Body Copy, the Illustration, the Signature Line and the Standing Details in which the Headline and the Body Copy are the main parts. With regard to the Headline, the similarity is that “news headlines” are used commonly in both EMAs and VMAs (68.4% versus 81.7%) and no “benefit headlines” found in both languages. However, their main difference is shown in the arrangement of information in the Body Copy. The result of the analysis shows that the common structure in EMAs is as follows: **Introduction** (*Disease Information or Evidence of clinical trial / Indications*) - **Important safety information** (*Contraindications or Precautions/ Side-effects/ Dosage/ Imperative Doctor Talk*) in which *Introduction* and *Imperative Doctor Talk* sometimes may be omitted, but the readers still have a sufficient overview about the medicine. Meanwhile, the common Body Copy in VMAs are commonly arranged as follows: **Introduction** and **Medicine Information** (*Ingredients, Indications, Contraindications, Side-effects, Dosage*). However, in VMAs this important information in **Medicine information** is often printed in small fonts, so it makes the medicine advertisement unintelligible to the reading.

With regard to the lexical features, there are many similarities between EMAs and VMAs. The first one is weasel words which are very common in medicine advertisements. With the use of weasel words, the advertisers not only convince the readers that they are trying to offer help with their products but also make it possible to

catch the attention of customers. The second similarity involves words denoting side-effects because any medicines can cause some effects such as *nausea*, *dizziness*, *diarrhoea*, etc. The third similarity is evaluative adjectives which are used in three forms namely base-form adjectives, comparative adjectives and superlative adjectives. These adjectives play an important role in describing the functions and effects of medicines. In addition, evaluative adjectives give orientation to the customers and health workers in making a good choice for their health as well as the treatment of their diseases. As regards the lexical choice, modal verbs (*should/ may*) are used with the aim of showing side-effects, risks as well as precautionary measures in using medicine. This helps the advertisers ensure the balance risks and benefit information in medicine advertisements. Nevertheless, the number of modal verbs found in EMAs and VMAs is completely different (209 instances in EMAs and 40 instances in VMAs). This means that medicine advertisements which provide risk information more accurately and sufficiently, will convince and attract more consumers.

As regards the syntactic structures, there is a great similarity: both English and Vietnamese advertisers have a strong tendency to use the passive sentences in medicine advertisements (60.8% versus 61.7%). Together with modal verbs, Conditional sentences and Imperative sentences are also used to express all risks and necessary precautions. However, the use of Conditionals and Imperatives in EMAs is more common than in VMAs because safety is always considered to be the most important content in English medicine advertisements. Another point should be noticed here that typography is applied to writing sentences in medicine advertisements by dropping a line and putting dashes in front of noun phrases. This makes the information in the Body Copy more obvious and enables the readers to remember the important points longer.

Finally, cohesion is a linguistic device by which text elements such as clauses, sentences, and paragraphs are linked together. The findings show that EMAs and VMAs show some similar tendencies in using cohesive devices. Firstly, in medicine advertisements, lexical cohesion is more popular than grammatical cohesion. Secondly, in grammatical cohesion, reference and conjunction are dominant; whereas no cases of substitution and ellipsis are found in any medicine advertisements. Lastly, regarding lexical cohesion, the repetition of the names of the products in both EMAs and VMAs takes up the very high percentage (91% versus 79.6%). Thanks to repetition, the names of medicines can be engraved in the readers' minds.

Apart from the similarities mentioned above, there are certain differences between EMAs and VMAs. In terms of grammatical cohesion, while English advertisers tend to use reference than Vietnamese ones (84.3% versus 33.1%), the Vietnamese advertisers use conjunction over four times as much as the English (66.9% versus 15.7%). Among the three sub-categories of reference devices, the English advertisers have strong tendency to use personal pronouns with "*it*" and "*they*". Besides, in conjunction, additive conjunction creates a big difference in EMAs and VMAs. While no cases of additive conjunction is found in EMAs yet, in VMAs it takes up a quite high rate with 30 instances, occupying 22.6%. In addition, the number of adversative and causal conjunctions found in VMAs is also many more than in EMAs.

5.2. IMPLICATIONS

On carrying out this research, I do hope this thesis will make some contribution to the field of teaching English, learning English and writing medicine advertisements in magazines.

Firstly, the findings of the study will probably be a useful reference resource for anyone who is keen on studying language,

especially advertising language. In fact, there have been quite a lot of researches on the language of advertising in general, but the studies on language in medical advertisements are still very few. Therefore, this research hopefully will be of some help for students majoring the English language or language researchers when they conduct a piece of scientific research on the advertising language related to medical topics.

Secondly, the typical discourse features of EMAs and VMAs as well as the similarities and differences between two languages can make a considerable contribution to the teaching and learning English for specific purposes, especially English for Medicine and English for Business and Marketing. In addition, when teaching students of Pharmaceutical Department, the teachers of English should pay more attention to vocabulary as well as grammar in EMAs so that students can have an exact and deep understanding of the way of using words and writing sentences in medicine advertisements. Similarly, for students majoring in Business and Marketing or for pharmacist assistants working at sales departments of pharmaceutical companies, advertising is considered an effective business strategy, so writing a medicine advertisement requires students a good knowledge of not only vocabulary and grammar but of discourse as well. This helps them create attractive and effective advertisements in English in case their products are exported to overseas markets or they want to write English advertisements on the websites of their own companies.

5.3. LIMITATIONS OF THE STUDY

As far as I know, discourse analysis itself is a broad field comprising a large number of subfields, including speech act theory, conversation analysis, pragmatics, etc. However, this study only focus on some discourse features in terms of the layout, lexical features, syntactic features and cohesive devices in medicine advertisements.

Due to the lack of time, reference material as well as limited linguistic knowledge, the study has got certain restrictions. Firstly the samples selected for analysis are only taken from magazines. Secondly, the slogan in the Signature Line is quite an interesting matter for the researcher; however, this study can not cover such an appealing domain. Thirdly, the researcher does not explain the similarities and differences in the discourse features in Vietnamese and English advertisements based on the cultural differences because this is not the focus of the thesis.

5.4. SUGGESTIONS FOR FURTHER RESEARCH

For the sake of further investigation into the medicine field, I would like to offer some suggestions for further research:

1. An investigation into stylistic devices used in medicine advertisements.
2. A study on the advertisements of medical equipment, or of medicinal food.