

LEXICAL METAPHORICAL REPRESENTATION OF DOCTORS AND PATIENTS IN MEDICAL INTERACTIONS

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Abstract

Previous studies explore patients' metaphorical descriptions of illness and doctors' mechanistic explanations. Lexical metaphors are not only used to present disease or treatment options in medical consultations, but also to conceptualise doctors and patients, and their roles in clinical settings. Participants in medical encounters rarely know how they are perceived and construed by their co-interlocutors. Drawing on Conceptual Metaphor Theory by Lakoff and Johnson (1980), this study conducts an exploratory quantitative analysis of the distribution of lexical metaphors in doctor-patient interactions at Alex Ekwueme Federal Teaching Hospital, Abakaliki. One hundred questionnaires are distributed; seventy valid responses are received—twenty-five from doctors and forty-five from patients. Results reveal metaphorical asymmetries: doctors view themselves as service providers, experts, helpers, or saviours, while patients additionally describe doctors as angels or, occasionally, enemies. Patients are framed as clients, helpless individuals, or the needy. These metaphorical frames reflect emotional versus professional orientations and underlying power dynamics in doctor-patient communication.

Keywords: lexical, Metaphor, Representation, Doctor-Patient, medical Interactions

1.0 Introduction

Communication is one of the key concerns in any discourse. This explains why several strategies and elements shape discourse. These strategies involve various ways of structuring speech, that is, both spoken and written communication (Krolova, 2005). The social context, participants, and their roles in conversation, such as doctors-patients conversation, also contribute to determining the shape and structure of discourse and life realities. Discourse participants share both social knowledge and meanings developed in their minds in building communication. Meaning framed in the human mind could be exploited in discourse, especially medical discourse, through metaphor. Metaphors are powerful cognitive instruments that enable individuals to understand and explain abstract or complex concepts with familiar terms. According to Kövecses (2020), metaphor is a

complex, embodied, and context-sensitive cognitive mechanism operational in discourse. It is used to share or request information that would be harder to describe or understand in a literal language. Therefore, metaphor involves mental interaction with linguistic components as well as contextual factors. Cameron & Maslen (2022) see metaphors as dynamic interactional tools that co-construct meaning in discourse. In other words, metaphors frame people's thoughts and influence how they perceive others and situations, such as health conditions.

In institutional discourse, as medical discourse, metaphors are important discursive strategies of indirectness. Patients use metaphors to describe their emotional states, especially those that convey fear, isolation, and unpredictability (Deng, Yang, wang & Cheng, 2022), while doctors often employ metaphors to explain physiology and

pathology issues to patients to foster positive relationship and avoid misconceptions (Declercq, Vermeulen, De Sutter, & Deveugele, 2023). This highlights the significance of metaphors in medical interactions.

Earlier studies on metaphors in institutional contexts focus on how teachers conceptualise teaching, strategies, and professional roles in classroom discourse. Bullough and Stokes (1994) demonstrate that personal metaphors in pre-service teacher education facilitate professional growth. This study supports the view that effective use of metaphor is a key communication skill in interaction. Similarly, Zapata and Lacorte (2007) highlight metaphors as vital tools in training both pre-service and in-service second-language teachers. However, in medical encounters, certain experiences could be used to explain certain health conditions by interlocutors. Metaphors assist in revealing the hidden, distinctive features of an object or phenomenon that is well known to human consciousness and make it possible to transfer them to the field of medicine (Mukhammadzhonovich 2022). Apart from that, patients' beliefs and perceptions of doctors and their roles in medical encounters will largely contribute to shaping the medical process and response to medical treatment. A doctor's conception of patients, on the other hand, will determine the interpersonal and mutual relationship and the general outcome of medical consultations. According to Fabrizio and Rossi (2019:103), "Metaphors are regarded as tools for enhancing healthcare providers' ability to communicate effectively, emphatically, and clearly, and serve as strategies for patients to explain and make sense of their illness". How patients conceptualise doctors via metaphor and how doctors represent patients using metaphor will, without a doubt, contribute to constructing meaning in doctor-patient interactions.

Studies have shown that a great deal of research on medical discourse suggests that metaphors are powerful tools for both communication and misunderstanding in medical interactions. Again, over time, there have been major changes in the role of doctors and their

metaphorical perception by patients, which tend to foster empathy, insight, therapeutic clarity, and disseminate misunderstanding or reinforce epistemic authority (Jinya Cao, 2014). This heightens the importance of training in metaphor awareness in medical education (Kövecses, 2022), especially in places like Ebonyi State, where the culture allows certain sensitive issues like illness to be metaphorically discussed.

2.0 Conceptual Review

2.1 Metaphors in Discourse

Metaphors are essential tools in discourse. In the early literary world, metaphors were viewed as purely figurative language or a matter of words or linguistic expressions (used for direct comparisons of two things), rather than as thoughts or mental states (Zhang, 2021). However, studies have proved that metaphors permeate thoughts of everyday conversations, not just for special literary beauty but to create a reality of vast socio-cultural backgrounds. This is supported by Lakoff and Johnson (2003:157):

Metaphors may create realities for us, especially social realities. A metaphor may thus be a guide for future action. Such action will, of course, fit the metaphor. This will, in turn, reinforce the power of the metaphor to make the experience coherent.

This assertion implies that metaphors have properties that can reveal or explain actions that will take place in future. They are significant linguistic devices that construe one concept or element into another to facilitate communication and understanding in interactions. Lakoff and Johnson (2003:5) see metaphors as "understanding and experiencing one kind of thing in terms of another". They explain that experience that emerges from an immense background of religious and socio-cultural assumptions. This suggests that metaphors are preserved in culture and pervade everyday conversation in a way that they are readily available for anyone to use. Johnson (2007:33-34) agrees with this, as he quotes Lakoff and Turner (1989):

Metaphors are tools so ordinary that we use them unconsciously and automatically, with so little effort that

we hardly notice them. It is omnipresent: metaphor suffuses our thoughts, no matter what we are thinking about. It is accessible to everyone; as children, we automatically, as a matter of course, acquire a mastery of everyday metaphors. It is an integral part of our everyday thought and language, which is irreplaceable. Metaphor allows us to understand ourselves and our world in ways no other modes of thought can.

The crux of this argument is the conceptual properties of metaphors in conveying understanding in complex discourse and explaining the unknown with the known.

In educational settings, most facilitators explore metaphors to explain complex ideas. New concepts and theories are formed with the instrument of metaphors. The study conducted by Meng, Ma, and Yue (2018) shows that metaphors engage the cognition of college students and facilitate their understanding and perceptions, especially in Mobile Assisted Language Learning Situations (MALLS). Beyond educational settings, metaphor is important in medical discourse and can shape the communication between patients and health practitioners.

2.1.1 Metaphor in Medical Interaction

Metaphors are crucial elements in medical communication. They have unique manifestations and perform different functions in medical dialogue (Semino, 2008). Metaphors form important tools for conceptualising illness in medical interactions. Patients liken chronic pain to "burning wires" or "shards of glass," as a way of evoking the intensity of their suffering (O'Sullivan et al, 2022). There is a robust literature on metaphors in medical communication, but there is an extremely insufficient one on metaphors of doctors, patients and doctor-patient relationships. Paying attention to the role of metaphor in mental health interviews, Charon et al. (2020) disclose that metaphorical expressions such as "a fog in the head" or "emotional earthquakes" help to convey the psychological disorientation of a patient. Hence, these metaphors offer doctors insights into

patients' worlds and experiences. Again, adapting a Thematic Analysis Approach to examine patients' presentation of pain, Munday, Newton-John, and Kneebone (2023) show that metaphors provide doctors with insight into patients' presentation of pain, type of pain and psychopathology. Their study further highlights that while metaphors can increase clarity, they may also strengthen doctor-centred communication patterns, distancing patients from shared decision-making in medical consultations. Fatehi et al.'s (2022) analysis of metaphors used by orthopaedic and trauma specialists identifies that 35 out of 157 metaphors have the potential to reinforce uncooperative cognitive patterns that limit patients' involvement in the medical process. However, the study concludes that surgeons can intentionally design and use metaphors to promote patients' mental, social, and physical well-being. A similar study is Liu's (2025) review of physician-patient interactions. The study shows that metaphors accelerate rapport-building, enhance comprehension, and support shared decision-making, but also disseminate misinterpretation or reinforce negative thinking if misused. The work suggests a multimodal approach in evaluating the efficacy of metaphors in communication.

Rees, Knight, and Wilkinson (2007), working on the perception of doctor-patient relations, notice that patients, students, and educators interpret doctor-patient relations using metaphors such as war, hierarchy, market, machine, and theatre. This is based on their social and cultural orientations. Cultural beliefs significantly mediate how metaphors are inferred within medical interactions (Fabrizio and Rossi, 2019), as they invoke strong and symbolic feelings. Investigating different metaphors used by patients and healthcare providers, Rossi, Macagro, and Bigi (2021) reveal distinct dialogical purposes and communicative needs that metaphors address. Remarkably, patients usually employ metaphors to express concepts related to lifestyle, self-monitoring, and personal health practices, while physicians use metaphors to explain technical terms. These realisations and perceptions of metaphors suggest that metaphors can ensconce

power imbalances within medical interactions as each participants explore metaphors from their areas of strength and knowledge.

Conversely, Deng et al. (2022) prove that COVID-19 infection significantly influences patients' metaphorical constructions of the self, the body, and interpersonal relationships. The study indicates that COVID-19 patients tend to employ metaphors related to physical experiences, spatial and temporal dimensions, and behaviour in negative contexts, while those that relate to war, family, temperature, and light demonstrate positive attitudes. This applies to metaphorical perceptions in health conditions. The present study, however, investigates how doctors and patients construe themselves and medical interactions.

2.2 Theoretical Framework

This study leans on Conceptual Metaphor Theory (CMT) as a framework and model of analysis. CMT came to the fore with the publication of George Lakoff and Mark Johnson's book, *Metaphors We Live By* (1980), and is geared towards emphasising how cognition plays an important role in the way discourse is interpreted and how extra-linguistic features and knowledge of them have a direct bearing on linguistic structure (Ezeifeka, 2018). This theory affirms that metaphor is not only a composition of language but also of thought. Lakoff (1993) describes Conceptual Metaphor as a "metaphorical mappings that preserve the cognitive typology of the source domain, in a way consistent with the inherent structure of the target domain."

In discourse, metaphorical language shapes individuals' mental organisations and governs the

way they recognise, act, think and describe new entities in the world coherently. The process of creating a coherently organised experience through metaphors involves the use of a source domain shared by interlocutors to understand a target domain (Johnson, Hudson and Ryan, 2023). CMT is significant for the analysis of data collected in this study because it provides a ground to offer a new way of understanding doctors and patients in medical interactions.

2.2.2 Methodology

This study adopted a quantitative research design. The data for this study were collected using a questionnaire survey for comparative analysis of doctors' and patients' perceptions of metaphors in medical encounters. The subjects in the questionnaire are divided into doctors and patients. The questionnaires meant for the doctors were transmitted and collected in electronic versions, which will simplify and aid the collection procedure. The data can be processed automatically through the application of a questionnaire collection. This is also due to doctors' busy schedules in the hospital. One hundred (100) questionnaires were distributed to the respondents. Fifty (50) were meant for doctors and fifty (50) for patients. This is due to time constraints and the difficulty involved in getting the consent of patients and doctors who were willing to respond to the questionnaires. However, seventy valid responses were received—twenty-five from doctors and forty-five from patients. The data were presented in tables and charts, and analysed using the Theory of Conceptual Metaphor by Lakoff and Johnson (1980).

3.0 Data Presentation

Table 1: The conceptual metaphors of doctors in doctor-patient interactions

Doctors' perception	Number	Patients' perception	Number
Service provider	8	Service provider	8
Experts	8	Expert	8
Helper	5	Helper	10
Saviour	4	Angel	10
Angel	0	Saviour	5
Enemy	0	Enemy	4
Total	25	Total	45

Table 1 above gives a summary of the doctors' and patients' perceptions of metaphors of doctors. Eight (8) doctors use the metaphor of a *service provider* to describe themselves in medical encounters. Eight (8) doctors also perceive doctors as *experts*. While five (5) doctors see themselves as *helper* and four (4) construe doctors as *Saviours*. On the part of patients, eight (8) respondents use the metaphor of a *service provider* to describe doctors. Eight (8) patients also see doctors as *experts*. Ten (10) patients perceive doctors as *helpers*. The metaphor of *an angel* is also used to qualify doctors by ten (10) patients. While five (5) patients use the metaphor of *saviour* to qualify doctors, four (4) construe them as *enemies*.

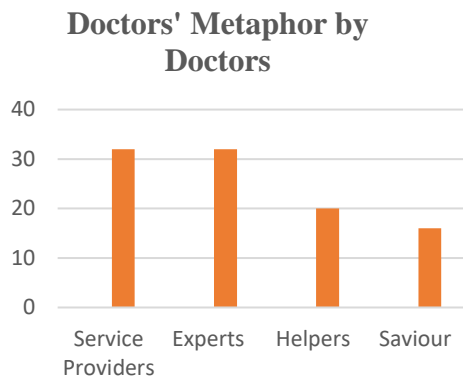


Fig. 1.0

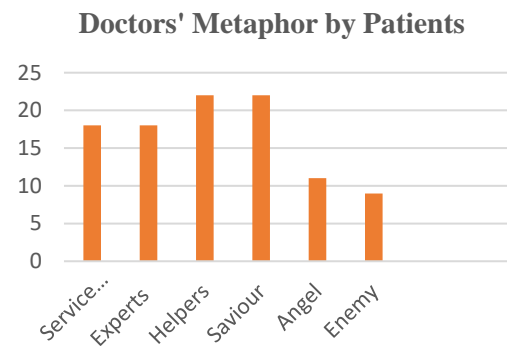


Fig. 1.1

The bar charts above show different percentages of doctors' and patients' perceptions of metaphors of doctors. Thirty-two percent (32%) of doctors conceptualise doctors as service providers. Thirty-two percent (32%) of doctors as well construe themselves as *experts*. Twenty percent (20%) of doctors see doctors as *helpers*, whereas sixteen percent 16% see doctors as *saviour*. Eighteen percent (18%) of patients classify doctors as service providers. Eighteen percent (18%) of them as well describe doctors as *experts*. Twenty-two (22%) of patients classify doctors as *helpers*. Likewise, twenty-two (22%) see doctors as *angels*. While eleven percent (11%) of patients see doctors as *saviour*, nine percent (9%) consider them *enemies*.

Table 2: The Metaphorical Representation of Patients in Doctor-Patient Interactions

Doctors' Perception	Number	Patients' Perception	Number
Client	8	Client	10
Helpless	8	Helpless	15
Friend	3	Needy	15
Needy	6	Friend	5
Total	25	Total	45

Table 2, above, presents the metaphors of patients in both doctors' and patients' perceptions. Both the patients and doctors construe patients with the following metaphors: *client*, *helpless*, *friend* and *needy*. Eight (8) doctors construe patients as clients and eight (8) as well see patients as helpless. Three (3) doctors view patients as friends and six (6) as needy. Also, ten (10) patients perceive themselves as client. Fifteen (15) patients view themselves as helpless. Fifteen (15) patients also see themselves as friends in their interaction with doctors. Five (5) construe themselves as needy.

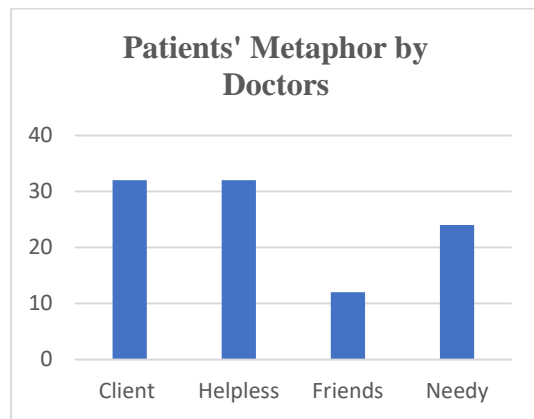


Fig. 1.2

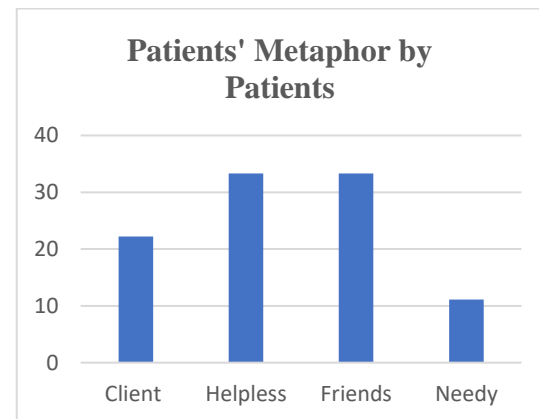


Fig. 1.3

Thirty-two percent (32%) of doctors see patients as clients. Thirty-two percent (32%) also view them as helpless. Twelve percent (12%) of doctors use the metaphor of a friend to represent patients in medical conversations. Twenty-four percent (24%) of them view patients as needy. Twenty-two percent (22%) of patients represent themselves as client. Thirty-three percent (33%) of patients view patients in doctor-patient interviews as helpless. Also, thirty-three percent (33%) of patients use the metaphor of friends to describe patients in medical interactions. Eleven percent (11%) of patients represent themselves as needy in doctor-patient communication.

Table 3: **The Conceptual Metaphor of Doctor-Patient Relationship**

Doctors' perception	Number	Patients' perception	Number
Service provider-customer relationship	12	Service provider-customer relationship	20
Mother-child Relationship	3	Mother-child Relationship	10
Friend-Friend	2	Friend-Friend	10
Partner-collaborator	8	Partner-collaborator	5
Total	25	Total	45

The table above shows the metaphorical perceptions of the doctor-patient relationship by doctors and patients. Twelve (12) doctors view their relationship with patients as a service provider. Three (3) see it as a mother-child relationship; two (2) perceive it as a friend-friend relationship, and eight (8) see it as a partner-collaborator. On the part of patients, twenty (20) of them conceptualise the doctor-patient relationship as a service provider-customer relationship. Ten (10) patients attribute their relationship with doctors to a mother-child relationship. Ten (10) patients also see it as a friend-friend relationship, and five (5) classify it as a partner-collaborator relationship.

The percentage of the distribution of metaphors of doctor-patient relationships is shown in the bar charts below:

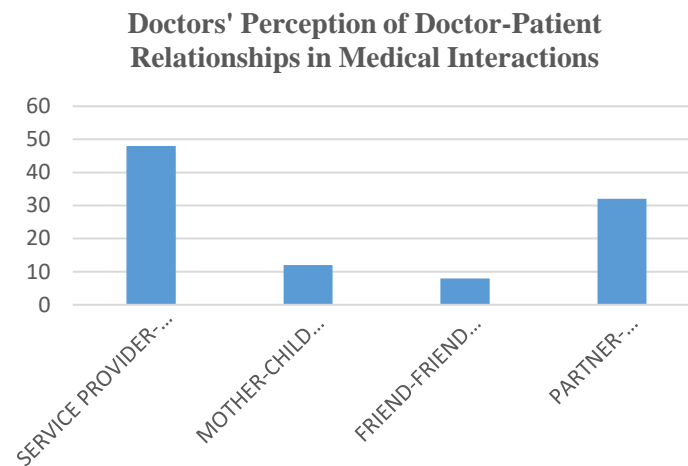


Fig. 1.4

Forty-eight percent (48%) of doctors view their relationship with patients in medical interactions as a service-provider-customer encounter. Twelve percent (12%) of doctors likened their relationship with patient to a mother-child relationship. Eight percent (8%) of doctors consider their relationship with patients as a friend-friend relationship, and thirty-two percent (32%) as a partner-collaborator relationship.

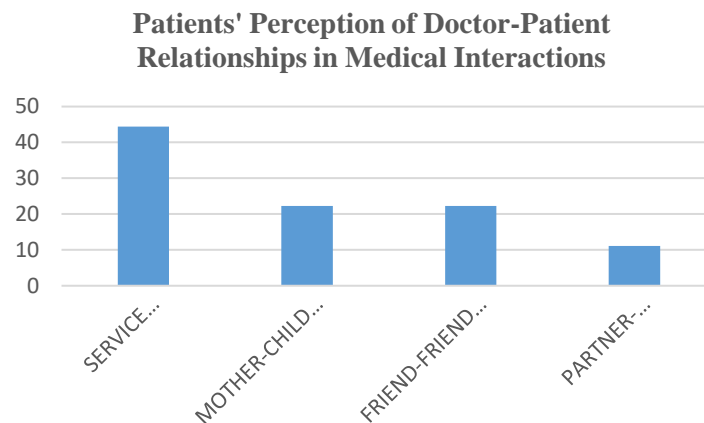


Fig.1.5

Fifty-five percent (55%) of the patients see their interactions with doctors as a service-provider-customer relationship. Twenty percent (22%) of patients construe doctor-patient relationships as mother-child relationships. Twenty per cent (22%) of patients also perceive their relationship with doctors as a friend-friend association. Eleven per cent (11%) of patient's attribute doctor-patient interviews to partner-collaborator relationships.

4.0 Discussion and findings

The findings of this study show that a prominent lexical metaphor used to describe doctors by both doctors and patients is a *service provider*. Eight doctors and eight patients (approximately 32% and 18% respectively) construe doctors as service providers. Drawing from Lakoff and Johnson's (1980) Conceptual

Metaphor Theory (CMT), this metaphor maps hospital or healthcare settings as a business or transactional domain where doctors supply service and patients receive or consume it. This mapping aligns with Loffler-Stastka et al. (2020)'s opinion that attributes healthcare to a commoditised system that involves expertise. This metaphor may project professionalism, but it reduces

interpersonal relationships between doctors and patients.

Similarly, eight doctors and eight patients conceptualise doctors as experts, which reflects power relations. This metaphoric schema presents doctors as people with specialised and reliable knowledge (medical information), while patients are recipients of doctors' services. Invariably, patients assume a passive role while doctors take an active position, sustaining hierarchical structures within medical interactions (Semino, 2010). Although this metaphor affirms doctors' dependability in diagnosis and treatment, it also limits patients' participation in decision-making. Five doctors and ten patients adopt the metaphor of a *helper* to describe doctors. This metaphor shows a relational attribute and maps doctors into the domain of *caregivers*. This form of metaphoric construction encourages mutual and collaborative engagements. Thus echoes the argument of Hauser and Schwarz (2021) that metaphors of assistance and guidance can enhance therapeutic agreements, increase satisfaction, and mutual trust in doctor-patient interactions.

The *saviour* metaphor, conjured by four doctors and five patients, as well as the *angel* metaphor, used by ten patients to construe doctors, maps doctors into the domain of the *divine*, implying patients' dependency and devotion in times of difficult health concerns. This kind of representation, according to Bleakley (2017), presents doctors as heroic beings who can rescue someone in trouble. The choice of metaphor of the enemy by four patients in describing doctors reveals a relationship failure in doctor-patient interactions. Framing doctors as enemies by patients demonstrates the nature of the encounter, probably an unfriendly or dehumanising one. The patients' perception of doctors as *experts*, *helpers*, *angels* and *enemies* indicates doctors' control and the kind of influence they have on patients and medical conversations. This is akin to Charteris Black, (2004:21) view on conceptual and linguistic metaphor, as "any word that causes semantic tension and imbues strong persuasive influence on the cognitive, pragmatic and linguistic levels, resulting in a shift in domain use"

While lexical metaphors such as *expert*

and *service provider* in doctor-patient interaction reflect institutional and professional models, metaphors like *angel*, *helper*, or *enemy* reveal participants' personal experiences in healthcare settings. The foregoing, however, answers research question 1: What are the conceptual metaphors of doctor and patient in medical interaction in Alex Ekwueme Federal Teaching Hospitals, Abakaliki?

This study also shows that in medical interviews, metaphors such as *client*, *helpless*, *friend*, and *needy* are used to identify patients by both doctors and patients. However, eight doctors (32%) use metaphors of clients and the helpless to describe patients in medical interactions. Ten patients (22%) attribute patients with the metaphor of clients, and 35% of patients construct patients as helpless. Framing patients as clients positions them as consumers in the domain of commercial interaction. On the other hand, the metaphors of the *helpless* and *needy* highlight the susceptibility and reliance of patients on doctors, hence reinforcing asymmetry in medical communication (Semino, Demjén & Demmen, 2018) and assigning roles to another. Thus, responds to the research question 2: How do patients and doctors use metaphors to show their roles and relationships in doctor-patient discourse?

In contrast, the metaphor of *friends* is often used by patients to describe who they are in their interaction with doctors, suggesting their quest for intimacy and assistance. Although this metaphor is significant for building a close relationship between doctors and patients, it could distort professionalism when abused (Hauser & Schwarz, 2021). Metaphoric mappings of doctor-patient relationships embody socio-cultural experience. The *service-provider-customer* metaphor used to explain doctor-patient interviews by 48% of doctors and 55% of patients reflects a *market domain*, interpreting healthcare services as a transactional bid that patients pay for. Again, the metaphors of *mother-child* and *friend-friend* relationships used by doctors (12% and 8% respectively) to frame medical interactions, though less common, demonstrate nurturing and compassionate behaviour expected in the healthcare environment. To a great extent, the

perception of the doctor-patient relationship with these metaphors challenges dominance in medical discourse but risks professional boundaries (Lupton, 2012). 32% of doctors, however, embraced the metaphor of *partner-collaborator* in describing doctor-patient interactions. This aligns with the contemporary approach of patient-centred model interactions.

Patient perspectives of medical interactions reveal how metaphor shapes expectations in healthcare encounters. 55% of patients who perceive their interactions with doctors as a *service-provider-customer relationship* expect to receive quality healthcare services commensurate with what they have to pay. The choice of the metaphor "service provider-customer relationship" indicates that in the cognitive domains of patients' and doctors', medical treatment is mapped as service, so it is reasonable to conclude that doctors are "service providers" while patients are "customers or service receivers". This is in line with the argument that the mapping advocated in Conceptual Metaphor Theory is grounded in our sensorimotor, cultural and social experience of the world around us (Ibaretx-Antunano, 2013).

Also, the patients (22% each) construe doctor-patient relationships as *mother-child relationships* and *friend-friend* relationships. Here, doctors' roles are framed within the domain of motherhood, whereas patients are construed as children. Therefore, doctors are expected to show a high level of emotional support and quality medical treatment while rendering professional services. This answers the research question 2: How do patients and doctors use metaphors to show their roles and relationships in doctor-patient discourse? 11 % of patients adopt the *partner-collaborator* metaphor to describe doctor-patient relationships. The low percentage adoption of this metaphor contrasts with clinical ideals of shared decision-making (Hauser & Schwartz, 2020), hence implying a possible gap between institutional discourse and patients' perception. The *service provider-customer* relationship metaphor is predominantly used to conceptualise doctor-patient interactions by both doctors and patients, though not without discrepancies. The

majority of doctors would not want medical treatment to go beyond a service-provider relationship, as that might devalue them. On the part of patients, doctors are professionals who have special skills they seek; hence, health settings are construed as *service centres*. Again, patients expect trust from doctors as people with professional authority in a complex technical domain (Berger et al., 2020).

5.0 Conclusion

It has been shown that metaphors are effective communication strategies that doctors and patients use to describe one another and their relationships in medical interviews. Both doctors and patients construe doctors as professionals. The institutional role of doctors as professionals in medical interviews inspires most doctors to project themselves as experts and helpers. Patients view doctors in six ways: experts, service providers, saviours, angels, helpers and enemies. Metaphors of service providers and experts used to represent doctors by patients suggest that doctors are the suppliers of healthcare services, while patients are the receivers. However, both doctors and patients perceive patients as clients, needy, helpless and friends. These findings demonstrate that the common metaphorical framing between doctors and patients is motivated by shared sociocultural beliefs and personal experiences.

Patients' construal of themselves as needy and helpless is a strategy to attract sympathy and empathy in healthcare settings. The metaphors of needy and helpless reinforce patients' quest for medical attention and care. Individuals' experience and socio-cultural exigencies facilitate the use of multiple metaphors in describing doctor-patient relationships in medical interactions. The metaphors of the service provider-customer relationship and partner-collaborator relationship are attributed to doctor-patient interactions during diagnosis. Metaphors of mother-child and friend-friend relationships exist during the medical advice stage of medical interviews. Doctors adopt the metaphors of experts, service providers, to assume control and professional status, and relegate patients to passive roles as recipients of doctors' advice and services. Ultimately, institutional authority and experience

of previous medical encounters influence the metaphorical perceptions of doctors and patients about one another in medical consultations. Therefore, the low adoption of the metaphor of partner-collaborator in describing doctor-patient interaction by patients indicates a relationship and institutional gap.

This study, therefore, concludes that adopting a more friendly perception of patients and doctors during medical consultations will likely enhance effective doctor-patient communication and foster stronger mutual relationships.

6.0 Recommendations

This study examined metaphorical representations of doctors, patients, and doctor-patient interactions and how they assign roles and frame attitudes in medical discourse. Based on the findings, the paper recommends that doctors and healthcare institutions should cultivate more empathetic and collaborative communication practices rooted in metaphorical awareness. A comparative approach should be used to study different metaphorical construal of doctors and patients in other regions of Nigeria.

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