Guest editor's preface

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This is the second issue of *Lexicography* featuring contemporary research on bilingual medical terminology and lexicography, continuing the special theme of *Lexicography* 3:2. Most of the papers were originally presented at an international symposium hosted by Fudan University in Shanghai from 7 to 8 November 2016. The research presented comes from four continents, from Canada, Asia (China), Italy and Australia, offering bilingual insights into the uses of scientific and medical terminology and wider issues in terminography in the electronic era.

The first paper by L'Homme discusses the value of examining bilingual sets of terms that share in a given knowledge area according to the methods of Frame Semantics. Focusing on the vocabulary of environmental science in English and French, she analyses the semantic and syntactic properties of selected terms to see how far their “frames” are aligned in parallel scenarios, and showing how they construct the key concepts of a scientific discipline.

In each of the following three papers, a specialised medical corpus is central to the identification and analysis of terms, though the corpora vary considerably in size. Sun's paper describes the creation of a giant corpus of recently published medical texts from four of the world's major medical journals, from which he and his colleagues are extracting new English medical terms. He also sets out principles for translating these neologisms into Chinese for the Fudan English–Chinese termbase. Canziani and Mungra use a much smaller corpus of digitised clinical case reports, to identify the higher frequency English lexical verbs that challenge Italian students of medicine. The authors' semantic classification of over 200 verbs helps to show how they support the key rhetorical moves in different sections of the case report. Smith's research focusing on the semi-technical term *intervention* uses a small corpus of audiology texts as well as large general reference corpora (British

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National Corpus and the Corpus of Contemporary American), to demonstrate the polysemy of *intervention* in medical contexts which is not evident in general English.

The final paper by Dahm takes an experimental approach to the polysemy of English medical terminology, in the different conceptualizations of terms by doctors and patients, and by first- and second-language speakers of English. Using Australian data from individual interviews and constructed vignettes of medical consultations, she finds marked differences in the scope of definitions used by first- and second-language doctors, as well as between doctors and patients generally.

Despite their different approaches, the five papers present common themes in the semantic complexities of the technical and semi-technical terms discussed. They raise fundamental questions about how such details can be accommodated in bilingual dictionaries and terminographic references, and how second-language learners can be alerted to them in professional education. All contribute to ongoing issues in the theory and practice of specialised lexicography.