

全国医学院校医学英语规划教材

实用

医学英语

Practical Medical
English Textbook

教程



◎ 主编 / 李永安
◎ 主审 / 白永权

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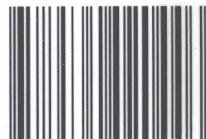
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Practical Medical English Textbook

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序

对于广大医学院校的学生来说，学英语的最高目标就是以英语为工具，获取医学专业知识，进行对外学术交流。因此，医学院校的学生必须学好医学英语。

《实用医学英语教程》正是基于上述的需求而编写。教材共 20 个单元，每单元两篇课文。第一篇课文后有生词、医学英语构词法练习、针对课文的阅读理解练习和翻译练习；第二篇课文后有生词、针对课文的阅读理解练习和有关医学英语方面的一篇实用补充知识材料。

这样的编写结构保障了学生对医学英语学习的需求。这样的编排经济、实用、针对性强，确实为近年来医学英语教材编写上的一种创新。

李永安教授 1990 年从西安外国语学院毕业后，从事医学英语的教学和医学翻译活动近 20 年之久。1997 年，他考入西安医科大学外语系（后合并于西安交通大学），攻读硕士学位，系统学习了医学英语教学理论和医学翻译。

2000 年毕业后，李永安教授继续在高校从事医学英语教学和翻译。由于他勤奋好学，具有扎实的医学基础和良好的医学英语功底，他的医学英语教学先后获得校级以上优秀教学成果奖 5 项；先后主编、副主编、主译、副主译医学英语教材 11 部。其中，卫生部“十一五”规划教材两部。一部翻译的教材荣获 2005 年“陕西省高等学校人文社科研究优秀成果二等奖”；主编、副主编医学英语词典 5 部。

我相信，由李永安教授主编的《实用医学英语教程》会以其较高的质量、创新的编写结构、实用而新颖的素材等，得到大家的认可，并且能够很快被广泛使用。

中华医学会医学外语分会主任
原西安交通大学外国语学院院长
白永权教授

2010 年 3 月 9 日于西安

前言

本教材是为适应全球化背景下日益增长的对外医学学术交流的需求，供全国医学院校本专科学生在学完大学英语之后，进行医学英语学习而编写的。本教材也适于医学院校研究生进行医学英语学习以及广大医务工作者学习医学英语之用。

教材共 20 单元，每单元两篇课文。第一篇课文后有生词、医学英语构词法练习、针对课文的阅读理解练习和翻译练习；第二篇课文后有生词、针对课文的阅读理解练习和有关医学英语方面的一篇实用补充知识材料。

书后共有 5 个附录。附录 1 《常用医学信息检索网站》，供广大医学生和医务工作者查阅医学文献时使用；附录 2 《常用处方拉丁文缩写》，为广大医学生和医务工作者书写处方提供方便；附录 3 《常用医学英语词缀》，为快速学习和牢固记忆医学英语词汇提供指导；附录 4 《历届诺贝尔医学（生理学）奖获得者及其贡献名单》，让广大医学生和医务工作者了解医学史上重要科学家及其贡献；附录 5 《课文阅读理解练习参考答案》，便于学生自查练习结果。

全书材料选自国外医学教材、医学杂志、医学网站等。所有课文是英美国家从事医学工作和研究的专家书写。所选文章语言地道，风格各有特色。大部分单元中的两篇课文内容有联系。例如，第 11 单元的课文 1 为 *Hot Topic — Avian Flu (Bird Flu)*，课文 2 为 *From Asia to Europe to Africa, Trying to Stop the Spread of Deadly Bird Flu*。文章选材新颖、实用、针对性强。例如，选入了备受关注的禽流感、SARS、H1N1 流感等热门话题。

教材的难易程度定位为初、中级医学英语。通过本教材的学习，广大医学学生从初级医学英语学起，掌握最常用的 2 000 个和较常用的 1 000 个医学英语名词术语，以及大约 200 个常用医学英语词缀，最终达到中级医学英语程度，为学习高级医学英语打下良好的基础。

中华医学会医学外语分会主任、西安交通大学外国语学院前任院长、著名的医学英语专家白永权教授主审本教材并写了《序》。

本教材与其他同类教材相比，最突出的特点就是“实用”二字。

(1) 教材将医学各科内容糅合为一体，作为一本教材，针对性和实用性很强。这适合医学院校学生在学完大学英语后，进行医学英语学习之用。而目前市面上许多医学英语教材为系列丛书。有的多达 10 多个分册（分为《解剖学》《生理学》《病理学》等分册），少则 3 个分册（《西医基础》《西医临床》和《西医听说》）。这样的教材针对性差，学生经济能力有限，无法作为有限课时的课堂教学之用。一般医学院校医学英语课大都在 80 课时以内。本教材适合医学英语课程的必修课或者选修课的课堂教学使用。根据学生英语基础，可在 54 ~ 80 课时完成。

(2) 编写的阶梯性。全书的编写呈阶梯性：① 语言难度由浅入深；② 每篇课文后生词



从 30 多个过渡到 60 多个；③ 课文长度从 700 ~ 800 个单词过渡到 2 000 个单词左右。

(3) 课文体裁多样，内容涉及医学各科，实用性强。这避免了目前市面上同类教材在编写上千篇一律地选用专业性过窄、趣味性差、学生无兴趣学的问题。本教材课文体裁有科学报告、医学评论、实验研究、临床实践等，内容涉及解剖、生理、病理、微免、内、外、妇、儿、传、护理、五官科以及公共卫生学等。

(4) 语言简洁地道。所有文章为英美国家从事医学研究的专家撰写。语言纯正地道。同时，通过学习教材，学生还将学会用普通英语词汇和一定数量的医学英语词汇表达复杂的医学知识，学会医学文章的行文特点和写作知识，提高利用英语获取医学知识和对外医学交流的能力。

(5) 课后附有 20 篇实用医学英语补充知识材料。例如，《英语医学词汇的来源》《常用检验学英汉对照词汇》《心血管医疗器械名称（中英文对照）》《医学英语论文文题写作》《医生、护士与病人的口语会话》等。这些知识是广大医学专业的学生今后学习和工作中经常会用到的实用知识。

本教材的编写得到北京大学、西安交通大学、西安医学院、延安大学、陕西中医学院等十余所医学院校的专家和教授的大力支持和帮助。另外，北京理工大学出版社的孙留伟先生对教材的编写和出版做了大量的工作，在此谨致以真诚的感谢！

由于我们水平有限，教材难免存在不当和错误之处，恳请广大读者批评指正，以便于我们对本教材进行修订。

《实用医学英语教程》编委会
2010 年 3 月



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Unit 1 ● ● ●

Text 1 Seasonal Influenza

Seasonal influenza is an acute viral infection caused by an influenza virus.

There are three types of seasonal influenza — A, B and C. Type A influenza viruses are further typed into subtypes according to different kinds and combinations of virus surface proteins. Among many subtypes of influenza A viruses, currently influenza A1 (H1N1) and A3 (H3N2) subtypes are circulating among humans. Influenza viruses circulate in every part of the world. Type C influenza cases occur much less frequently than A and B. That is why only influenza A and B viruses are included in seasonal influenza vaccines.

Signs and Symptoms

Seasonal influenza is characterized by a sudden onset of high fever, cough (usually dry), headache, muscle and joint pain, severe malaise (feeling unwell), sore throat and runny nose. Most people recover from fever and other symptoms within a week without requiring medical attention. But influenza can cause severe illness or death in people at high risk (see below). The time from infection to illness, known as the incubation period, is about two days.

Who Is at Risk?

Yearly influenza epidemics can seriously affect all age groups, but the highest risk of complications occur among children younger than age two, adults age 65 or older, and people of any age with certain medical conditions, such as chronic heart, lung, kidney, liver, blood or metabolic diseases (such as diabetes), or weakened immune systems.

Transmission

Seasonal influenza spreads easily and can sweep through schools, nursing homes or businesses and towns. When an infected person coughs, infected droplets get into the air and another person can breathe them in and be exposed. The virus can also be spread by hands infected with the virus. To prevent transmission, people should cover their mouth and nose with a tissue when coughing, and wash their hands regularly.

Treatment

Antiviral drugs for influenza are available in some countries and effectively prevent and treat



the illness. There are two classes of such medicines: 1) adamantanes (amantadine and remantadine), and 2) inhibitors of influenza neuraminidase (oseltamivir and zanamivir). Some influenza viruses develop resistance to the antiviral medicines, limiting the effectiveness of treatment. WHO monitors antiviral susceptibility in the circulating influenza viruses.

Seasonal Epidemics

Influenza epidemics occur yearly during autumn and winter in temperate regions. Illnesses result in hospitalizations and deaths mainly among high-risk groups (the very young, elderly or chronically ill). Worldwide, these annual epidemics result in about three to five million cases of severe illness, and about 250,000 to 500,000 deaths. Most deaths associated with influenza in industrialized countries occur among people aged 65 or older. In some tropical countries, influenza viruses circulate throughout the year with one or two peaks during rainy seasons.

Disease Effects

Influenza can cause serious public health and economic problems. In developed countries, epidemics can result in high levels of worker absenteeism and productivity losses. In communities, clinics and hospitals can be overwhelmed when large numbers of sick people appear for treatment during peak illness periods. While most people recover from a bout of influenza, there are large numbers of people who need hospital treatment and many who die from the disease every year. Little is known about the effects of influenza epidemics in developing countries.

Prevention

The most effective way to prevent the disease or severe outcomes from the illness is vaccination. Safe and effective vaccines have been available and used for more than 60 years. Among healthy adults, influenza vaccine can prevent 70% to 90% of influenza-specific illness. Among the elderly, the vaccine reduces severe illnesses and complications by up to 60%, and deaths by 80%.

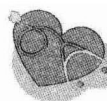
Vaccination is especially important for people at higher risk of serious influenza complications, and for people who live with or care for high risk individuals.

WHO recommends annual vaccination for (in order of priority):

- Nursing-home residents (the elderly or disabled).
- Elderly individuals.
- People with chronic medical conditions.
- Other groups such as pregnant women, health care workers, those with essential functions in society, as well as children from ages six months to two years.

Influenza vaccination is most effective when circulating viruses are well-matched with vaccine viruses. Influenza viruses are constantly changing, and the WHO Global Influenza Surveillance Network (GISN), a partnership of National Influenza Centres around the world, monitors the influenza viruses circulating in humans. WHO annually recommends a vaccine composition that

targets the three most representative strains in circulation. (731 words)



New Words

- influenza /,ɪnflu:'enzə/ *n.* 流行性感
acute /ə'kju:t/ *adj.* 急性的
virus /'vaɪərəs/ *n.* 病毒, 病毒性疾
viral /'vaɪərəl/ *adj.* 病毒的, 病毒引起的
subtype /'sʌbtaɪp/ *n.* 亚型
current /'kʌrənt/ *adj.* 现在的, 现行的; *n.* 水流, 气流
currently /'kʌrəntli/ *adv.* 当前, 目前, 眼下
currency /'kʌrənsi/ *n.* 流通, 通用; 流行
vaccine /væk'si:n, 'væk'si:n/ *n.* 疫苗, 痘苗; *adj.* 疫苗的, 疫苗的
vaccination /,væksə'neɪʃən/ *n.* 种痘, 接种
onset /'ɒn, set, 'ɔ:n-/ *n.* 攻击, 袭击; 爆发, 发生
malaise /mæ'leɪz, -'leɪz/ *n.* 不适, 不舒服
severe /si'viə/ *adj.* 严重的, 剧烈的
incubation /,ɪnkju'beɪʃən/ *n.* 潜伏期; 繁殖
epidemic /,epɪ'demɪk/ *n.* 流行病
complication /,kɒmplɪ'keɪʃən/ *n.* 并发症
chronic /'krɒnɪk/ *adj.* 长期患病的, 慢性的
metabolic /,metə'bɒlɪk/ *adj.* 代谢作用的, 新陈代谢的
metabolism /mi'tæbə,lɪzəm/ *n.* 新陈代谢
diabetes /,daɪə'bi:tɪs, -ti:z/ *n.* 糖尿病
droplet /'drɒplɪt/ *n.* 小滴, 飞沫
tissue /'tɪʃju:/ *n.* 组织
adamantane /ædə'mænteɪn/ *n.* 金刚烷
amantadine /ə'mæntədi:n/ *n.* 刚(烷)胺, 三环癸胺
remantadine /ri'mæntədi:n/ 金刚乙胺
inhibitor /ɪn'hɪbɪtə/ *n.* 抑制剂, 抑制者
neuraminidase /,njuə'mɪnədeɪs/ *n.* 神经氨(糖)酸苷酶, 唾液酸苷酶
oseltamivir /əu'zeltæ,mɪvə/ *n.* 奥司他韦 <抗病毒药>
zanamivir /zə'næmɪvə/ *n.* 扎那米韦
suscept /sə'sept/ *n.* 感病体, 病主
susceptibility /sə'septə'bɪlɪti/ *n.* 易受影响或损害的状态, 易感性
temperate /'tempərɪt/ *adj.* 饮食有节制的, 克己的, 气候温和的 (~region, 温带)
hospitalization /,hɒspɪtlɪ'zeɪʃən/ *n.* 医院收容, 住院治疗
absenteeism /,æbsən'ti:zəm/ *n.* 旷工, 旷课
bout /baut/ *n.* 一段(工作), 一次(训练), 一场(疾病), (疾病)发作