

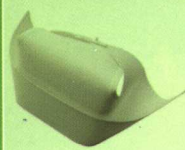
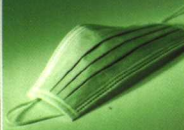
全国高等医药教材建设研究会·卫生部规划教材

全国高等学校教材

供 **本科护理学类专业** 用

护理专业英语

主 编 宋 军



人民卫生出版社

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供本科护理学类专业用

护理专业英语

Nursing English

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全国高等学校本科护理学类专业第四轮卫生部规划教材

修订说明

为适应我国高等护理学类专业教育发展与改革的需要，经过全国高等医药教材建设研究会和护理学专业教材评审委员会的审议和规划，卫生部教材办公室决定从2004年9月开始对原有教材进行修订。

在调查和总结第三轮卫生部规划教材质量和使用情况的基础上，提出了第四轮教材的规划与编写原则：①体现“三基五性”的原则：“三基”即基本理论、基本知识、基本技能；“五性”即思想性、科学性、先进性、启发性、适用性。②力求作到“四个适应”：适应社会经济发展和人群健康需求变化，护理的对象从“病人”扩大到“人的健康”；适应科学技术的发展，教材内容体现“新”；适应医学模式的变化与发展，教材内容的选择和构建从传统的“生物医学模式”转变为“生物-心理-社会模式”，体现“以人的健康为中心，以整体护理观为指导，以护理程序为主线”；适应医学教育的改革与发展，以学生为主体，注重学生综合素质和创新能力的培养，把教材编写成为方便学生学习的材料——“学材”。③注重全套教材的整体优化，处理好不同教材内容的联系与衔接，避免遗漏和不必要的重复，并在整体优化的基础上把每本教材都努力编写成同类教材中最权威的精品教材。④为辅助教师教学和学生学习，本套教材进行立体化配套，根据不同教材的特点，分别编写了相应的《学习指导及习题集》和（或）配套光盘。

经研究确定第四轮本科护理学类专业教材共33种，包括医学基础课程、护理专业课程和相关人文学科课程。在原有教材的基础上增加了《护理礼仪》、《人际沟通》、《社会学基础》、《护理专业英语》、《护理美学》。根据调查使用意见，《护理学基础》课程编写了两种版本的教材：①《新编护理学基础》；②《护理学导论》、《基础护理学》。以上教材供有不同教学需求的学校根据实际情况选用。《急危重症护理学》和《临床营养学》为与高职高专共用教材。

全套教材于2006年9月前由人民卫生出版社出版，以供全国高等学校本科护理学类专业使用。

卫生部教材办公室

2006年6月

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前 言

娴熟的医学专业英语是医学科学研究和情报咨询工作的基本功之一。随着护理专业人才培养国际化进程的加快,我国护理界国际学术交流日益频繁,对护理专业人员具备基本的外语交流能力和专业信息接受能力的要求进一步提高,由此对培养高层次护理人才的高等医药院校英语教学提出了更高的要求。根据教育部“本科教育要创造条件使用外语进行公共课和专业课教学”的有关精神,全国高等医药教材建设研究会、卫生部规划教材办公室组织编写了《护理专业英语》教材,适用于护理专业本科层次的教学。为了兼顾学生对医学护理一般知识的了解和阅读专业文献的不同要求,本书每个单元均包括一篇与护理专业有关的文章(Reading A)和一篇与常见疾病有关的文章(Reading B)。课文有一定长度,从阅读量上保证了提高阅读能力的基本需要。该教材突出选文的科学性、可读性和趣味性,内容力求新颖、完整,注重护理新知识、新理论与新方法的介绍。增强了本书的实用性和对临床护理实践的指导价值。本教材可供护理专业本科生及护理专业教师使用,也可以作为临床护理人员自学专业英语的参考书。

《护理专业英语》共包括16个单元和2个附录,主要介绍了护理基本知识理论与,各专科护理操作技能,以及常见疾病和护理措施。本书还针对课文内容编写了综合练习题,内容覆盖了所有课文,并提供参考答案和课文译文,以便让读者测试自己对文章的理解程度。

本教材主编为宋军,副主编为桂丽,四川大学的谢红担任1、2单元的编写;第二军医大学的沈洁担任3、4单元的编写;第二军医大学的桂丽担任5、6单元的编写;广东嘉应大学的何崇明担任7、8单元的编写;青岛大学的杨秀玲担任9、10单元的编写;大连医科大学的于馨担任11、12单元的编写;大连医科大学的徐岩担任13、14单元的编写;吉林大学的赵风君担任15、16单元的编写。全体编委参与了本教材的策划、选材和审定。本教材配有教学光盘,光盘的制作由大连医科大学田亮等负责完成。

护理专业英语的教学尚在起步阶段,没有很成熟的经验。因此我们真诚地欢迎使用本书的师生提出宝贵意见和建议,使本教材在使用中得到不断更新和完善。书中不当之处,敬请指正。

宋 军

2006年6月

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Unit 1

Reading A

Development of Nursing

Nursing has been called the oldest art and the youngest profession. When looking at the historical development of nursing, most nurse historians agree that nursing, or the care of the ill and the injured, has been done since the beginning of human life. However, modern nursing was not developed until Florence Nightingale established professional nursing. Its original desire was to keep people healthy and to provide comfort, care, and assurance to the sick. Although these general goals of nursing have remained relatively stable over the centuries, the practice of nursing has been significantly influenced by the advance of science and changing needs of the society, and nursing has gradually evolved into a modern profession.

The history and origin of nursing may be traced back to ancient civilizations whose artifacts provided evidence that attempts were made to systematically treat certain illness and injuries. At that time, the caregiver was usually the mother who cared for her family during sickness. This caring role of the nurse has continued to the present. Many ancient societies did not value human life in the same way we do today, and the caregivers were less respected.

With the advent of Christianity in the early centuries, men and women with church affiliations (deacons and deaconesses) were organized into groups to care for the sick and the poor. Care of the sick was seen as a church responsibility. It was during this time that nursing became a respected vocation and the practice of nursing expanded, though roles of nurses were still subservient to the direct supervision of physicians.

In the Middle Ages, as the Christian churches evolved, hospitals were set up to care for the orphans, the aged, sick and poor. Wars and the growth of cities, which led to certain health problems and an increased need for health care, were stimuli for the expansion of nursing. Religious orders, most of which being military nursing orders, were formed for men and women to provide care for the sick and the injured. While the religious orders predominated in nursing in the period, many secular orders independent from the church developed. These were the forerunners of modern hospitals and nursing systems. However, at this time, there was still no formal education or training for nurses. Nursing skills and knowledge were generally passed on by experienced nurses.

The Renaissance and reformation (1400 to 1600) saw a society changed from one with a religious orientation to one that emphasized warfare, exploration, and expansion of

knowledge. Religious orders were disbanded, resulting in a lack of people to care for the sick. To meet the needs of nurses, women of questionable moral character, often prisoners or prostitutes, were recruited into nursing. Because of this, the images of nurses were, in most cases, bound to the dregs of society.

The industrial and intellectual revolutions which brought about burgeoning knowledge in medicine as well as social and political unrest in the eighteenth century had a major impact on nursing. Even with the advances in medicine, the maternal and infant mortality rate continued to be high. Crowded conditions, unsanitary facilities, long working hours, poor diet, and general conditions of poverty led to widespread epidemics and poor health. Upon this gruesome scene entered Florence Nightingale.

Florence Nightingale was born into a wealthy and intellectual family in 1820. She was very well educated and her education included several ancient and modern languages, literature, philosophy, history, science, mathematics, religion, art and music. Interested in caring for the sick and alleviating suffering from her childhood, Nightingale received three-month training in nursing in Kaiserswerth Institute in Germany in secret because nursing was not considered for an up-class woman like her to do at that time. She became active in developing nursing and health care reform. The outbreak of the Crimean War provided Nightingale an opportunity for achievement.

She brought about major reforms in nursing when caring for the wounded and the ill. Nightingale's reforms included providing cleanliness and comfort in hospitals, meeting the basic needs of the ill, and educating the ill and their families about health and health promotion. Through her efforts, Florence Nightingale made a great difference in the care of the British soldiers, and her efforts were largely responsible for dramatic reductions in the death rate of soldiers from 42 percent to 2 percent. This great success changed the prejudices against women and elevated the status of all nurses. After the war, she founded the Nightingale Training School for Nurses at St. Thomas' Hospital in London based on her knowledge of what was effective nursing to deliver formal nursing educational programs. Eventually, many schools in Europe and America used the Nightingale model for nursing education. As a reflection of her far-reaching influence on nursing, many people also named the late nineteenth century as Nightingale Era.

Modern nursing has been developed rapidly since Florence Nightingale established professional nursing. Nursing education and nursing practice were both expanded. In the early twentieth century, the hospital-based system of educating nurses was under increasing criticism. In 1923, the Rockefeller Foundation funded a survey on nursing education, and the survey suggested that the nursing schools be independent of hospitals and at a college level. As a result, schools of nursing were set up at two universities. At present, nurses worldwide can receive nursing education of different levels through various channels and routes. The educational levels include secondary professional nursing education (intended to training personnel to perform basic nursing skills in the hospitals), associate degree education in nursing (intended to training personnel for the work of clinical nursing, supervision, and teaching for the students in the clinical practice and nursing management), baccalaureate education in nursing (intended to training personnel to carry out nursing instruction in the nursing schools or colleges, management and direct client care in

hospitals), master degree education in nursing (preparing personnel for clinical nursing, nursing management, nursing research, and nursing education), and doctoral degree education (preparing personnel to act as nursing educators and nursing researchers).

In the same period, a movement toward a scientific, research-based defined body of nursing knowledge and practice was seen. A number of nurse theorists developed their own theoretical definitions of nursing. The roles, functions and aims of nursing were also defined. Nursing theories can provide a rationale and knowledge reason for nursing actions, improve and facilitate nurses to communicate with other professionals, and to improve autonomy in the practice of nursing.

This period also saw the expansion and standardization of nursing practice. As nursing started to establish its status as a scientific, specialized profession, it required the staff have necessary professional education and get licensure. Nowadays, graduates of all programs should obtain the licensure and be a registered nurse before they can have clinical practice. On the other hand, in the early decades of the 20th century, hospitals started to segregate patients according to their disease process, nurses were called on to acquire expert knowledge in the care of specific patient types, such as the care of newborn infants, maternity patients, or the mentally ill, or for duties in the operating room. Nursing specialization was occurring and the concept of the clinical nurse specialist arose. Since then, nursing has broadened in all areas, which can be classified as clinical nursing, community-based nursing, nursing education, nursing management, and nursing research. In the 1970s, the concept of Advanced Practice Nurses occurred. Advanced Practice Nurses, including nurse practitioners (NP), clinical nurse specialists (CNS), certified nurse-midwives (CNM), and certified registered nurse anesthetists (CRNA), are registered nurses with advanced training and education, mostly with Master's degrees in nursing. They work in a variety of settings, including hospitals, nursing homes, businesses, private practices, schools, and community centers. Some Advanced Practice Nurses have their own practices, but most work in collaboration with a physician. Many Advanced Practice Nurses can prescribe medications.

From its early days to the present, nursing has undergone major changes in every area. Rapid strides have been made in nursing education programs and in a wide variety of hospitals and community nursing services. Throughout these changes, nursing has continued to provide a stable service for people. With the development of science and technology as well as the improvement of people's living standards, nursing practice scopes will be expanded gradually, setting higher requirements for nurses.

(1369 words)

New Words and Expressions

artifact /'ɑ:tɪfækt/

n. 手工艺品

affiliation /ə'fɪli'eiʃən/

n. 关系; 从属关系

deacon /'di:kən/

n. 执事; 神职人员

deaconess /di:kə'nes/

n. 女执事; 女耶稣教徒

supervision /,sju:pə'vɪʒən/

n. 监督; 指导

order /'ɔ:də/

n. 宗教团体

predominate /prɪ'dɒmɪnɪt/	v. 掌握, 控制, 支配
disband /dɪs'bænd/	v. 解散; 裁减
secular /'sekjʊlə/	a. 不受宗教约束的; 非宗教的
burgeon /'bɜ:dʒ(ə)n/	v. 萌芽; 发展
mortality /mɔ:'tælɪtɪ/	n. 死亡率
unsanitary /ʌn'sænɪtəri/	a. 不卫生的
epidemic /,epɪ'demɪk/	n. 疫疾流行; 流行病
gruesome /'gru:səm/	a. 可怕的; 可憎的, 令人厌恶的
alleviate /ə'li:vɪeɪt/	v. 使(痛苦等)易于忍受; 减轻
baccalaureate /,bækə'lɔ:rɪət/	n. [美] 学士学位
autonomy /ɔ:'tɒnəmi/	n. 自主; 独立
licensure /'laɪsənʃə/	n. 许可证, 执照
segregate /'segrɪgeɪt/	v. 分开, 隔离
maternity /mætə'nɪtɪ/	a. 产妇的; 产科的
practitioner /præk'tɪʃənə/	n. 从业者, 开业者
midwife /'mɪdwaɪf/	n. 助产士, 接生员
anesthetist /æ'ni:sθetɪst/	n. 麻醉师

Exercises

I. Reading Comprehension Questions

- It is generally agreed that nursing, or the care of the ill and injured, has been done since _____.
 A. early 1980s
 B. the beginning of human life
 C. the beginning of the 20th century
 D. late 19th century
- _____ was not developed until Florence Nightingale established professional nursing.
 A. Nursing
 B. Good nursing
 C. Advanced nursing
 D. Modern nursing
- What had stimulated the expansion of nursing in the Middle Ages?
 A. Wars and the growth of cities.
 B. The advent of Christianity.
 C. The advances in medicine.
 D. The standardization of nursing practice.
- It was because of _____ that changed the prejudices against women and elevated the status of all nurses in the nineteenth century.
 A. Nightingale's far-reaching influence on nursing
 B. women's bravery at the battle field
 C. the dramatic reduction in the death rates of soldiers in the Crimean War
 D. the elevated educational level of the people
- Nightingale founded the Nightingale Training School for Nurses at _____ in London which became a model for many schools in Europe and America for nursing education.
 A. a hospital
 B. a university
 C. a medical university
 D. a church
- The survey on nursing education funded by the Rockefeller Foundation led to _____.
 A. hospital-based nursing schools

- B. nursing schools being cancelled forever
 C. nursing schools being independent of hospitals
 D. nursing schools combined with the medical schools
7. Nurses acting as nursing educators and nursing researchers usually possess _____.
- A. associate degree B. baccalaureate degree
 C. master degree D. doctoral degree
8. Before the graduates of nursing programs have clinical practice, they should obtain _____.
- A. a Master's degree of nursing B. working experience
 C. an agreement of the hospital D. the licensure
9. In the 1970s, the concept of _____ occurred.
- A. Advanced Practice Nurses B. Advanced Nursing
 C. Developed Practice Nurses D. Advancing Practice Nurses
10. Which of the following does not belong to the practice settings for Advanced Practice Nurses?
- A. Schools. B. Community centers.
 C. Shops. D. Nursing homes.

II. Words to Practice

Fill in the blanks with the words or expressions given below. Change the form where necessary.

psychological	maternal	alleviate	model	prescribe
professional	segregate	expand	maintain	epidemic

- In Europe, Jews were forced to live in _____ ghettos from the mid-1 500s to the late 1 800s.
- The new system _____ the role of family doctors.
- A psychologist is one who is trained and educated to perform _____ research, testing, and therapy.
- Obstetricians regularly _____ bed rest for women with complicated pregnancies.
- There was a(n) _____ outbreak of influenza in Europe last year.
- Vitamin C supplementation _____ the symptoms of the common cold.
- Health promotion means helping people develop resources to _____ or enhance their well-being.
- It is reported that the African region has the highest _____ mortality in the world.
- There is a close relationship between the level of _____ nursing ability and the quality of nursing service.
- The Nightingale Training School for Nurses at St. Thomas' Hospital served as a _____ for other training schools in Europe and Americas.

III. Translation

A. Translate the following sentences into Chinese.

- In the early decades of the 20th century, hospitals started to segregate patients according

- to their disease process, nurses were called on to acquire expert knowledge in the care of specific patient types, such as the care of newborn infants, maternity patients, or the mentally ill, or for duties in the operating room.
2. Although these general goals of nursing have remained relatively stable over the centuries, the practice of nursing has been significantly influenced by the advance of science and changing needs of the society, and nursing has gradually evolved into a modern profession.

B. Translate the following sentences into English.

1. 医生给肺炎患者开了一些抗生素。(prescribe)
2. 在中国,所有的护理专业的毕业生必须取得护士执照才能从事临床护理工作。(licensure)
3. 近年来欧美国家护士一直较为缺乏。
4. 过去,护士的主要角色和功能就是为护理对象提供照护和舒适。
5. 随着科学技术的发展以及人们生活水平的提高,护理实践的范畴仍将继续扩大。

Reading B

Antibiotics

Antibiotics, also known as antimicrobial drugs, are chemical substances that kill or suppress the growth of microorganisms, but will not seriously harm the person taking it. For centuries before the antibiotic was discovered, infections like pneumonia and tuberculosis caused by bacteria were the leading causes of diseases and death. Lots of doctors and scientists had devoted themselves to finding a method to treating wound infections, but in vain. One day in 1928, when Alexander Fleming came back from a vacation, he noticed that something had "grown" on one of the culture plates which he left unwashed. It was mould, and the staphylococci were not growing around it! Apparently, the mould was secreting a substance which prevented these harmful bacteria from growing. The substance was named penicillin, because the fungal contaminant was identified as *Penicillium notatum*. This remarkable discovery was the beginning of the antibiotic era which revolutionized medical care and made it possible to cure diseases caused by bacteria such as pneumonia, tuberculosis, and meningitis-saving the lives of millions of people around the world.

There are several kinds of antibiotics, including penicillins, cephalosporins, tetracyclines, erythromycin, aminoglycosides, and antifungal antibiotics. The various antibiotics differ in antibacterial spectrum, mechanism of action, pharmacokinetic properties, potency, and toxicity. Therefore, it is essential for the nurses to understand the general principles of antibiotic therapy. In addition, before administering antibiotics, nurses must be familiar with particular drugs and their actions and effects.

Penicillin was one of the first antibiotics to be used in clinical medicine and remains the drug of choice today. It is also considered to be the safest drug available. Clinically, there are now about twenty penicillin antibiotics which are used to treat such common infections as tonsillitis, strep throat, urinary tract infections, and boils, as well as some very serious

infections such as meningitis, pneumonia, and typhoid fever. Penicillins are not thought to have any adverse effect when used in pregnant or breast-feeding women. While the penicillin antibiotics are generally very safe, about 15% of the population is allergic (usually a rash) to this class of antibiotics. In addition to allergic reactions, other possible adverse effects of penicillin may include one of the following: gastrointestinal upset, liver disease, kidney reactions (very rare); and neurotoxicity from very high dose treatment (very rare).

Cephalosporins are very similar to penicillins in their chemical structures. They are usually effective against a broader range of bacteria than the penicillins and are often used in cases of allergies to the penicillin. Cephalosporins are used in treating skin infections, bone infections, upper respiratory tract infections, gonorrhea, genitourinary tract infections and acute prostatitis. The cephalosporins are available to treat both adults and children. Common side effects involve mainly digestive system, such as mild stomach cramps or upset, nausea, vomiting, and diarrhea. More serious but infrequent reactions include allergic reactions, especially when people have a penicillin allergy, skin rashes, and serious colitis. If this happens, it is important to contact the doctor immediately.

The tetracycline antibiotics called "broad spectrum" antibiotics because they are effective against a wide variety of bacterial infections, including pneumonia and other respiratory tract infections, infections of skin, a variety of sexually transmitted diseases (STD), Rocky Mountain Spotted Fever, acne, and for the treatment and prevention of anthrax (after inhalational exposure). The tetracyclines should not be taken by pregnant women or by children younger than 8 years old because they will discolor (darken) the developing teeth of the infants and children. Do not take tetracycline with food, especially dairy products because their effectiveness will be greatly diminished.

Erythromycin belongs to the macrolide group of antibiotics and is probably the second safest antibiotic after penicillin G. It is a good alternative for people who are allergic to penicillins. Erythromycin is indicated in the treatment of infections such as diphtheria, pneumonia, Legionnaires' disease, strep throat, nongonococcal urethritis, and pertussis (whooping cough).

Aminoglycosides, including gentamicin, streptomycin, tobramycin and the like, are particularly active against aerobic and gram-negative bacteria. Aminoglycosides are used in the treatment of severe infections of the abdomen and urinary tract, as well as bacteremia and endocarditis. They are also used for prevention, especially against endocarditis. The toxicities of aminoglycosides include nephrotoxicity and ototoxicity.

Fungal infections such as athlete's foot, ringworm, and vaginal yeast infections are usually localized, slow to spread, but also take longer to cure. They are usually treated by the application of antifungal drugs to the affected area. There are many synthetic antifungals which are very effective against topical fungal infections but there are very few drugs available to effectively treat systemic infections which are often present in immune compromised patients like those suffering from AIDS.

Although antibiotics stop some infections and save lives, they must be taken wisely. When antibiotics aren't used the right way, they can do more harm than help. Nowadays, people use antibiotics for preventative use to prevent future occurrence of an infection. In doing this, the chance of resistance increases. Antibiotic resistance is now a worldwide

public health issue due to improper use and abuse of antibiotics. To make antibiotics work best, it is important to follow the instructions.

First of all, antibiotics only work against infections caused by bacteria and viral diseases are not cured by antibiotics. Do not take an antibiotic for a viral infection like a cold or the flu. Secondly, it is very important to follow the special instructions for certain antibiotics exactly in order to get the maximum benefit of the antibiotic. Be sure to take the right amount for each dose. Thirdly, to help clear up the infection completely, keep taking this medicine for the full time of treatment, even if the symptoms improve after only a few days. This is a point which cannot be overemphasized. How long and how much antibiotic will be required to completely cure the infection is based on a knowledge of the infection. Failure to comply with the prescribed dose and duration of therapy will often result in a relapse and may lead to a more resistant strain of the bacterium. At last, if there is any antibiotic remaining at the end of the prescribed therapy, discard it. Do not save it and attempt to use it another time because many antibiotics will degrade over time and cause unwanted side effects or simply will not be effective.

(1046 words)

New Words and Expressions

antibiotic /æntɪbaɪ'ɒtɪk/	<i>n.</i> 抗生素
antimicrobial /æntɪmaɪ'krəʊbɪəl/	<i>n.</i> 抗菌剂; 杀菌剂
	<i>a.</i> 抗菌的
microorganism /maɪkrəʊ'ɔ:gənɪz(ə)m/	<i>n.</i> 微生物; 微小动植物
pneumonia /nju:'mæʊniə/	<i>n.</i> 肺炎
tuberculosis /tju:bɜ:kju'ləʊsɪs/	<i>n.</i> 结核病; 肺结核 (简称: TB)
culture /'kʌltʃə/	<i>n.</i> (微生物、组织细胞或其他生物的) 培养
mould /məʊld/	<i>n.</i> 真菌
staphylococcus /stæfɪləʊ'kɒkəs/	<i>n.</i> (<i>pl.</i> staphylococci) 葡萄球菌
penicillin /penɪ'sɪlɪn/	<i>n.</i> 青霉素
contaminant /kən'tæmɪnənt/	<i>n.</i> 致污物, 污染物
meningitis /menɪn'dʒaɪtɪs/	<i>n.</i> 脑膜炎
cephalosporin /sefələʊ'spɔ:rɪn/	<i>n.</i> 头孢菌素
tetracycline /tetrə'saɪklɪn/	<i>n.</i> 四环素
erythromycin /ɪrɪθrəʊ'maɪsɪn/	<i>n.</i> 红霉素
aminoglycoside /æmɪnəʊ'glɑɪkəsəɪd/	<i>n.</i> 氨基苷
antifungal /'æntɪfʌŋɡəl/	<i>a.</i> 抗真菌的; 杀真菌的
pharmacokinetics /fɑ:mə'kəʊkɪ'netɪks/	<i>n.</i> 药物动力学
property /'prɒpəti/	<i>n.</i> 性能, 特性
potency /'pəʊtənsi/	<i>n.</i> 效力, 效能
tonsillitis /tɒnsɪ'lɑɪtɪs/	<i>n.</i> 扁桃体炎
typhoid /'taɪfɔɪd/	<i>n.</i> 伤寒症
	<i>a.</i> 伤寒的; 斑疹伤寒症的
allergic /ə'lɜ:dʒɪk/	<i>a.</i> 过敏的