

专门用途英语“十三五”全国规划教材



博学·当代医学英语系列
总主编 陈社胜

English Course of Contemporary Medicine II

—Eye on Health

当代 医学



英语综合教程 II

——关注健康 (第二版)

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序

高等教育需要创新驱动、转型发展，这正成为越来越多大学教育工作者的共识。大学阶段的英语教育也同样面临创新和转型发展的问題。大学英语教育创新，是指教育观念要创新，要从更宽广的视野来认识大学阶段的英语教育是专业人才教育和培养的一部分，而不仅仅是单纯狭隘的语言教学。大学英语教育转型发展，是指大学英语教育要从一般的语言局限型教学模式转变到语言-学科-思维-人文综合型教育模式，以促进学生语言习得、科学素质培养、创新思维发展和人文情怀提升。大学阶段的英语教育创新和转型，是社会和时代发展对高等教育培养各层次专业人才的要求。

作为高等教育重要组成部分的医学教育，目的是培养合格的各类医药卫生人才，推进医药卫生事业发展，促进公众健康水平提升。各类不同人才的培养，要求有不同类型的教育。不言而喻，医学院校的英语教育要围绕培养各层次的医药卫生人才来展开，这是医学院校对英语教育的要求。但在过去很长一段时期里，医学院校的英语教育走的是与一般院校英语教育同质化的路径，教学内容缺乏与医药卫生学科专业的联系，缺乏与社会发展的联系，缺乏信息量和时代感。显然，这样的教学是无法适应和满足医药卫生学科专业人才培养的特殊需求。

医学院校的英语教育模式转型应通过更新教育观念、健全教学体系、充实教学内容、创新教学形式，始终面向学生、面向世界、面向未来；使学生为自己职业发展做准备。因此，医学院校的英语教育应是学科性强的专门英语教育。在教育内容上应具有医药卫生专业学科特色，在教学形式上也应避免传统单一的平面化做法。应尽可能应用现代技术，将视、听、说、读、写、译多种教学方式综合于一体，符合现代学生立体化接受信息和知识的需求。

教之所需，学以致用，是《当代医学英语综合教程》系列的最大特色。教材编者来自国内医学院校英语教育第一线，既有丰富的英语教学经

验,又把握医药卫生学科发展的脉搏,编写了适用于医学院校英语教育的专门用途教材(English for Medical Purpose, EMP)。教材内容突出了医药卫生类学生今后从事职业所需的专业基础知识和基础理论,同时又反映当代医药卫生发展的新理念、新成果,将医学知识获取、创新思维发展、国际视野拓展融入英语教育,使学生学之有味、学之有获、学之有用。

《当代医学英语综合教程》的编者为医学院校英语教育创新和转型发展作出了值得称道的努力,同时也为大学英语教育的可持续发展提供了值得借鉴的范例。

以此,作序致敬。

总主编



于复旦大学上海医学院枫林园

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前言

《当代医学英语综合教程——关注健康》是涉及当代医学的专门用途英语教材。专门用途英语第一代教材注重读写，教学限于传统的生物医学内容。第二代教材虽然在内容上转向生物-心理-社会医学，但在编写体例上依然注重传统型的读写形式。本教材是第三代专门用途英语综合教材，不仅体现医学学科及其内容的综合性，而还体现英语教学上视、听、说、读、写、译的方法综合应用。

当代医学的发展模式是生物-心理-社会医学模式(bio-psycho-social medical model)，有别于既往的生物医学模式(biomedical model)。生物医学模式仅仅从生物学的角度去研究人的健康和疾病，只注重人的生物属性，忽视了人的心理功能及心理社会因素的致病作用，而生物-心理-社会医学模式不仅仅包括对疾病的生理(生物医学)解释，还包括了解患者(心理因素)、患者所处的环境(自然和社会因素)和帮助治疗疾病的医疗保健体系(社会体系)。因此，“当代医学”与“综合”是本教材区别于其他教材的最大特色。

本系列教材于2009年出版以来，受到使用者的好评。由于信息社会中当代医学不断发展，知识更新的速度加快，所以教材中必须注入新的内容，保持与当代医学发展同步的时代感。此外，信息技术革命使人们学习和认知的方式发生变化，教材的一些编排方式也应作相应的改变，以适应变化中的学习和认知心理。总之，第二版坚持第一版教材的宗旨：“用英语来学习，在学习用英语”，提升学生的英语交际能力、促进专业科学素养、发展评判性思维能力、培育国际视野及人文精神。

第二版教材中调整了阅读的篇幅，更新了视听内容，删减了部分练习，增加了主题阅读的译文，更便于学习者自主学习。第一版教材的作者和编辑为本教程的编写和出版倾注了大量的精力，第一版教材的使用者也对本教材再版提出了很好的建议。在此编者表示诚挚的谢意。对被入选本

教材的文本和影音材料的作者和机构，编者同样深表感谢。正是通过接触这些真实的材料，学习者能从更多角度、更深层面来认识健康和了解当代医学发展，也能在医学学术英语应用能力提升方面受益匪浅。

医学院校英语教育的四位一体目标是：提升英语交际能力、获取学科专业知识、发展创新思维、培育医学人文精神。第二版的编者力求在编写第三代专门用途英语教材中体现这一目标，也希望这些努力为大学阶段的英语教育不断创新发展作出贡献。

编者

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Chapter 1

Dietary Culture and Health

Section I. Asking, Listening and Watching

A. Write down three questions on the topic which you find interesting to explore.

1. _____
2. _____
3. _____

B. Listen to a passage "Dietary Guidelines and Calorie Intake Control" and choose the best answer to each of the following questions.

Dietary Guidelines and Calorie Intake Control

1. Which of the following organizations conducted the research?
 - A. The Department of Agriculture
 - B. The Food and Drug Administration
 - C. The Dietary Guidelines Advisory Committee
 - D. The Department of Health and Human Services
2. The guidelines express all of the following messages EXCEPT _____.
 - A. "Increase daily intake of fruits and vegetables."
 - B. "Reduce low-fat milk and milk products."

- C. "Choose fats wisely for good health."
D. "Be physically active every day."
3. The guidelines has directly advised Americans to _____.
A. limit their amounts of sugar
B. eliminate sugar from their diet
C. increase their intake of carbohydrates
D. reduce their consumption of carbohydrates
4. Which of the following statements is FALSE?
A. Most people do not read the full report.
B. The dietary guidelines often appear in schools.
C. The advisory committee provides explanations in its full report.
D. The dietary guidelines are not used to develop educational guides.
5. Why should people limit their intake of sugar?
A. Sugar cannot meet their energy requirement.
B. Sugar contributes to their weight gain.
C. Sugar is not considered a nutrient.
D. Sugar is already added to drinks.

C. Watch a video clip "Right Start" twice and decide whether each of the following statements is true (T) or false (F).

Right Start

- _____ 1. Dr. Nancy Snyderman's talking is to do with calories and breakfast and how not to put on weight.
- _____ 2. Skipping breakfast would be a good step toward body weight control.
- _____ 3. Julie Angle's daily morning routine includes having breakfast at 6:30.
- _____ 4. A new study says that skipping breakfast can reduce the risk for obesity.
- _____ 5. The study investigated the breakfast habit of 2,000 kids in 1998 and 2003 respectively.
- _____ 6. Findings surprise the doctors who work for teenagers.
- _____ 7. Eating breakfast makes teenagers focus on healthy eating habits all day long.

D. Watch a video clip three times and give a short answer to each of the following questions in about SIX words.

Trans Fat Ban

1. What is considered to be the basic role of trans fats?

2. Why did the US Food and Drug Administration take such a bold move to eliminate artificial trans fats from the American diet?

3. What does Dr. Tara Narula say about the effects of trans fats intake?

4. How did the New York City respond to the proposal from the US Food and Drug Administration?

5. What is the goal of alternative formulations that scientists put forward?

Section II. Theme Reading

Why We Eat?

By Alice Park

For human beings, eating has never been a simple matter. To a frog **snagging** a fly or a **pelican nabbing** a fish, food is fuel and nothing more. To a human, the **ritual** of eating — the act of **pulling up** and

snag /snæg/ v.

pelican /'pelɪkən/ n.

nab /næb/ vt.

ritual /'rɪtʃʊəl/ n.

pull up

戳，阻碍

(鸟类)鹈鹕

捉住

例行公事，习惯，仪式，典礼

拿起

tucking in, of passing around and helping oneself — is one of the most
 5 **primal** of shared activities. We eat together when we celebrate, and
 we eat together when we **grieve**; we eat together when a loved one is
 preparing to leave, and we eat together when the loved one returns. We
 solve our problems over the family dinner table, conduct our business
 over the **executive** lunch table, and **entertain** guests over cake and
 10 **cookies** at the coffee table.

“Interaction over food is the single most important feature of
socializing,” says Sidney Mintz, professor of **anthropology** at Johns
 Hopkins University. “The food becomes the **carriage** that conveys
 feelings back and forth.”

15 It's not just families that define themselves through foods. Whole
 cultures do so too. Muslims eat **halal** and **Jews** eat **kosher** and Roman
Catholics forgo meat on Fridays. **Moroccans** don't eat what Swedes
 eat, who don't eat what the Japanese eat, who don't eat what **Croatians**

tuck /tʌk/ v.

卷起塞进

primal /'praɪməl/ a.

重要的

grieve /gri:v/ v.

为……感到悲伤

executive /'ɪɡzekjʊtɪv/ n.

主管人员

entertain /,entə'teɪn/ vt.

款待

cookie /'kʊkɪ/ n.

饼干

socialize /'səʊʃəlaɪz/ vi.

与……交往，联谊

anthropology /,ænthrə'pɒlədʒɪ/ n.

人类学

carriage /'kærɪdʒ/ n.

车辆，车厢，四轮马车

halal /hɑ:lɑ:l/ n.

（伊斯兰教的）合法食物

Jew /dʒu:/ n.

犹太人

kosher /'kəʊʃə/ a.

犹太教规定饮食

Catholic /'kæθəlɪk/ n.

天主教徒

forgo /fɔ: 'gəʊ/ vt.

放弃

Moroccan /mə'rɒkən/ n.

摩洛哥人

Croatian /krəʊ'eɪʃ(ə)n/ n.

克罗地亚人

eat. When families leave their home countries and settle elsewhere, the cultural **feathering** they bring with them — language, dress, music — is often shed within a generation. But the foods **linger**. “The last part of a culture that gets lost is the food ways,” says Barrett Brenton, a **nutritional anthropologist** at St. John’s University in New York City. “We find comfort in our cuisines.” 20

Although that has long been the way food works, it is becoming less so — at least in the developed world, where **scarcity** has been replaced by **overabundance** and **undernourishment** by obesity. Increasingly, the connection between eating and ritual is becoming **unhinged**. We turn too much to food for **solace** and celebration, and we do it with less and less reference to traditions or even formal mealtimes — to the **detriment** of our figure and our health. 25 30

There’s no question that some pretty strong social, emotional and behavioral forces play a part in determining what, when and how much we eat. But if you really want to know why some people are fat and others aren’t, you have to take a good look at biology as well. **Mother Nature** simply can’t afford to leave anything so important to human survival as 35

feathering / 'feðərɪŋ / *n.*

羽毛

linger / 'lɪŋɡə / *v.*

继续存留，拖延

nutritional / nju: 'trɪʃənəl / *a.*

营养的

anthropologist / ,ænthrə'pɒlədʒɪst / *n.*

人类学家

scarcity / 'skæəsɪtɪ / *n.*

缺乏

overabundance / ,əʊvərə'bʌdəns / *n.*

过剩

undernourishment

营养不良

/ ,ʌndə'nʌrɪʃmənt / *n.*

unhinged / ʌn'hɪndʒɪd / *a.*

分离的，分开的，错乱的

solace / 'sɒləs / *n.*

安慰

detriment / 'detrɪmənt / *n.*

损害

Mother Nature

自然的力量

eating to the **whims** of cultural fashion. Ten years after the discovery of the first obesity gene, scientists are only beginning to understand just how **hardwired** our desire for food — and lots of it — truly is.

40 What they are finding is an **exquisitely fine-tuned** system of chemical and **neurological** checks and balances that regulates both what we eat and how much our bodies store as fat. The average American consumes about 1 million **calories** a year — and, under normal circumstances, burns almost exactly that amount. The body achieves
45 that balance by automatically increasing or decreasing the efficiency with which it performs various tasks, thus consuming fewer or more calories. (Most of the calories we expend are used to breathe, maintain body temperature, keep the brain **chugging** along, etc. Depending on how much you move, physical activity typically accounts for 15% to 30% of the
50 total.) If you pack on a couple of pounds over the course of the year, your body's error rate is still less than 1%.

Accomplishing that feat requires a lot of communication and coordination among the fat cells, the liver, the muscles, the brain, the stomach and the **gastrointestinal** tract. Sometimes the signal is a
55 molecule. Other signals are actually conducted along nerve paths. There are even mechanical signals, like the stretching of the stomach, which is one way the body says, "I'm full."

As if all that weren't complicated enough, the body must also regulate

whim / wɪm / *n.*

奇想，忽起的念头

hardwired / 'hɑ:d,waɪəd / *a.*

固有的，无法改变的

exquisitely / ɪks'kwɪzɪtli / *adv.*

精巧地

fine-tuned / faɪn,tu:nd / *a.*

有规则的，调整的

neurological / njʊərəʊ'lɒdʒɪkəl / *a.*

神经学的

calorie / 'kæləri / *n.*

卡路里（食物产生的能量单位）

chug / tʃʌg / *v.*

（发动机的）突突声

gastrointestinal / ,gæstrəʊɪn'testɪnəl / *a.*

胃肠的

its food **intake** and manage its weight over time. “There are short-term signals and long-term signals,” says Judith Korner, an **endocrinologist** at Columbia University in New York City. “Some signals are both short-term and long-term, and then there are medium-term signals.” 60

As you might expect, the short-term signals are involved mostly with the **initiation** and completion of meals. **Ghrelin**, a hormone produced by the stomach, tells the brain, “It’s time to eat!” When enough food leaves the stomach and reaches the small intestine, another hormone, called **cholecystokinin**, signals that the meal is over — and **triggers** the release of **enzymes** in the **gallbladder** and the **pancreas**. 65

The hormones **leptin** and insulin are longer-term signals. Produced by fat cells, leptin helps manage just how much fat you store around your organs and under your skin through a complex **feedback loop**. If your fat **deposits** start to shrink — for example, when you lose weight — the amount of leptin in your body falls, a situation that the brain interprets as a result of **starvation**. The whole system of chemicals and neurological 70

intake / 'ɪnteɪk / *n.*

摄取量

endocrinologist / ˌɪndəʊk'rɪːnələdʒɪst / *n.*

内分泌学家

initiation / ɪˌnɪʃɪ'eɪʃən / *n.*

开始

ghrelin / 'ɡreɪlɪn / *n.*

(胃肠道内) 促食欲素

cholecystokinin / 'kɒlɪsɪstə'kaɪnɪn / *n.*

缩胆囊素

trigger / 'trɪɡə / *vt.*

触发, 引起, 促使

enzyme / 'enzɑɪm / *n.*

酶

gallbladder / 'ɡɔːlblædə / *n.*

胆囊

pancreas / 'pænkriəs / *n.*

胰腺

leptin / 'leptɪn / *n.*

消瘦素, 瘦蛋白

feedback / 'fiːdbæk / *n.*

反馈

loop / luːp / *n.*

循环

deposit / dɪ'pɒzɪt / *n.*

沉淀物

starvation / stɑː'veɪʃən / *n.*

饥饿