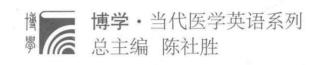
A Mini-Course of English on Medical Development & Humanistic Care

医学发展与人文关怀





主 编 杨克西 张宏斌 副主编 和霁晓 于 洋



A Mini-Course of English on Medical Development & Humanistic Care

当代医学英语微课程——医学发展与人文关怀

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《当代医学英语微课程IV——医学发展与人文关怀》是创新型的专门用途英语教材,其创新之处凸显在以下4个方面。

一、形式新

这是全新的第4代(4.0版)教材,形式区别于前3代教材,如下所示。

专门用途英语教材	形式特征
第1代(1.0)版	单一平面文字、读写型
第2代(2.0)版	单一平面文字+录音带、读写译型
第3代(3.0)版	平面+数字化、读写听说综合型
第4代(4.0)版	互联网+影像+平面、视听说写译综合型

英语学习的信息先以影像声形式输入,颠覆了传统的文字形式输入方式,但又兼顾了传统的平面文字做法。当学习者一开始不习惯影像声信息输入形式,可通过与传统的文字阅读相结合来适应。传统的读写型学习变成了视听说写译综合+互联网学习。影像视听等资源可从互联网云盘下载到移动设备终端,适合个性化学习。

二、内容新

第4代(4.0版)医学类英语专门教材,在总体内容上区别于前3代教材,如下 所示。

医学类专门英语教材	内容特征
第1代(1.0)版	生物医学
第2代(2.0)版	学科专业类医药卫生学
第3代(3.0)版	医药卫生健康社会医学
第4代(4.0)版	医学前沿、问题及医学文化

正如教材目录所示,内容涉及当代医学发展与医学人文关怀及其相互关系问题。通过对医学典型案例与事件的了解,从人文关怀角度观察医学发展的新成就,理解医学、健康、生命及人文之间的关系及其复杂性,从而培育和提升医学人文情怀。

三、教学方式新

《当代医学英语微课程IV——医学发展与人文关怀》在教学方式上运用微课教学法。顾名思义,微课(mini-lesson, mini-course)是指时间短的一堂课或一门小课程,其主要特征是利用微视频获取信息和学习某个知识要点,然后在课堂上问学互动交流,课后练习巩固。

微课是一种可视化课程,以视频(影像声)形式输入英语学习信息,改变了传统单一的文字阅读的输入方式。微视频综合了图像、色彩、声音、图表、文字等要素,有声有色,使学习具有多维性、直观性和动态性。

基于案例的微视频教学是"以点带面"的教学法运用。学习者通过一个案例来"学新知故""识此思彼"及"举一反三"。视频微课学习活动以"案例观察→要点概述→细节理解→意义探索"的模式展开。这些活动重点在于学,而不在教。由教师讲授为主的传统模式转变成由学生学习、讨论、评论和互动交流为主及教师讲授为辅的模式,实现由教向学的反转。学生在主动学习中提高观察能力、理解能力和语言表达能力。

四、教学理念新

大学阶段的英语教育转型和创新,正在成为英语教育界的共识,因而专门用途 英语教学也正在成为大学阶段英语教育的主流。然而,转型和创新不只是教学形式、教学内容和教学方法的改革,更是教学理念的创新。

国务院办公厅在"关于深化高等学校创新创业教育改革的实施意见"(国办发[2015]36号)中指出,高等教育中存在一些不容忽视的突出问题,主要是"创新创业教育理念滞后,与专业教育结合不紧,与实践脱节;教师开展创新创业教育的意识和能力欠缺,教学方式方法单一,针对性实效性不强"。医学院校的英语教育,应当是高等医学教育的一部分,是医学专业人才教育和培养的一部分,应围绕培养各层次的医药卫生人才来展开,而不仅仅是与学科专业教育无关、狭隘的语言教学。大学阶段的英语教育更多是"使用"英语,即用英语获取学科专业知识、发展创新

思维能力和培育全球视野及人文精神,在使用英语的过程中提升英语交际技能。

《当代医学英语微课程IV——医学发展与人文关怀》是编者们教学理念创新的体现,也是编者们对专门用途英语教学理论研究及实践的新成果。

为此,欣然以序祝贺。

复旦博学·当代医学英语系列 总主编 陈社胜 2017年4月 《当代医学英语微课程IV——医学发展与人文关怀》(A Mini-Course of English on Medical Development & Humanistic Care)是创新型高校专门用途英语教材,适用于医药卫生健康等相关学科专业的中高级英语水平的本硕博学生教学使用。

本教材以"医学发展与人文关怀"为主要内容,旨在通过"案例观察→要点概述→细节理解→意义探索"四位一体学习活动,提高观察能力、理解能力和语言表达能力。

教材内容涉及当代医学发展与人文关怀及其相互关系问题,由 20 个主题单元组成。每个主题单元包含内容各有侧重、总体连贯的 3 节微课,整个课程共 60 节微课。每节微课都基于一个典型案例或重大事件,以微视频的形式概述了案例或事件的原因、过程、结果、问题及意义等。因此,这里的微课教学也是可视化案例教学。原汁原味的英语微视频,体现了语言材料的真实性、内容的丰富性、影像声的综合性、学习的直观性和动态性。学习者通过对医学典型案例与事件的了解,从人文关怀角度去观察医学发展的新成就,以广阔的视野去深化理解医学、健康、生命及人文之间的关系及其复杂性,从而培育和提升医学人文情怀。

每节微课分成课前、课中、课后3个学习时段。课前和课后时段是学生预习和复习时段。课中是课堂学习、口述报告、问答讨论的互动交流时段,一般用时30分钟左右。因此,在传统的90分钟两节课时里,可完成三节微课教学。

在专门用途英语教学中应用微课,不仅带来了一种全新的课程教学资源组织方式,更是一种新的教学理念、教学方式和教学方法的应用。编者希望通过案例视频微课教学,实现医学英语教育的宗旨:用英语获取学科专业知识、发展创新思维能力、培育全球视野及人文精神,在使用英语的过程中提升英语交际技能。

《当代医学英语微课程IV——医学发展与人文关怀》教材由教学用书(纸质)、电子版教师参考、互联网视频资源三部分组成。教学所需影像视听等资源可从互联网云盘下载到移动设备终端,方便随时随地教与学的需要。互联网云盘登入名和密码可向复旦大学出版社或本教材编者询问索取。

编者要感谢复旦大学出版社在推动大学英语教育转型创新过程中持续的努力 以及为专门用途英语教学理论研究的成果转化与应用提供机会,还要感谢更多的 本教材使用者对微课教学的体验及建设性意见,使微课能更完善地应用于大学专 门用途英语教学中。

> 编 者 2017年4月

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Ever-developing Medicine

Lesson 1

New Approach to Beating Diabetes



Pre-class Session

Activity 1 Vocabulary Work

Get familiar with the following glossary and complete each sentence with a proper word or phrase from the grid.

epidemic n. /adj.

diabetes n.

gastric adj.

rival v.

bariatric n.

constrict v.

insulin n.

suspect v.

流行病,流行的

糖尿病

胃的,胃部的

比得上,与……竞争

肥胖病学,外科减肥

收缩,压紧,阻碍

胰岛素

猜疑是,怀疑有

caution v.	警告,劝告	
obese adj.	肥胖的,肥大的	

1.	People with excess body fat have a greater risk for such illnesses as
	and hypertension.
2.	Diabetes occurs when the body cannot make enough, the
	hormone needed to convert food into energy.
3.	Your doctor might heart failure based on your medical history, symptoms, and a physical exam.
4.	Currently medical treatment options for and overweight people are limited.
5.	Pain caused by a ulcer is often made worse by eating.
6.	It speeds the heart rate, blood vessels, and can raise blood
	pressure to dangerous levels.
7.	He that all examples of behaviors that benefit individuals in the
	modern world are not necessarily products of evolution.
8.	Their many restaurants are sophisticated and serve dishes the
	best to be found in Europe.
9.	The World Health Organization is preparing for a global flu
10.	Most patients who present for evaluation for surgical procedures
	are self-referred, determined to achieve change, and willing to make
	personal lifelong sacrifices to achieve their goals.
In	-class Session
	ivity 2 Event Observation
Obs	erve an event by watching the video three times, and outline five main points of
the	event as the following.
1.	
2.	
2	

4.	- version amonthe arms in primitive
· .	and one
ct	ivity 3 Detailed Understanding
	derstand details by watching the video once again. Give an oral or written responsible of the following questions.
	How many Americans suffer from type 2 diabetes?
	What's the conventional way to beat type 2 diabetes?
3.	What evidence did Laura Beth' case provide in terms of beating diabetes
	What are three approaches used by researchers at Cleveland Clinic in the clinical study?
).	What do some doctors caution about the weight loss surgery?
) .	How much does a weight loss surgery cost?

Activity 4 Discussing and Commenting

Discuss and comment on the following questions or statements.

1. What is type 2 diabetes? What are common symptoms and signs of type 2 diabetes? What is the cause of type 2 diabetes?

7. What is the cost to treat type 2 diabeties for life other than surgery?

- 2. How many people in China are diabetics? How is type 2 diabetes treated conventionally? What is gastric bypass surgery? What is sleeve gastrectomy?
- Some doctors claim that there isn't any therapy that can rival bariatric surgery in terms of weight loss and controlling diabetes, but some others caution that the surgery alone is not a quick fix. What do you think of such a

warning in terms of humanistic care?

Post-class Session

Activity 5 Written Expression

Translate the following passage into English.

发展中的医学,不断地	· · · · · · · · · · · · · · · · · · ·
为促进公众的健康水平提	
供新方法,采用减肥手术治	
疗2型糖尿病就是明证。	
糖尿病的常规治疗是用药	
物,但临床研究表明,在帮	
助战胜糖尿病方面,减肥手	
术比用药物要有效得多,而	
且比一生服用药物治疗的	FARTA ATAMA
费用要少得多。尽管有医	
生警告说,仅靠手术不是一	
条捷径,但费用少、效果好	
的治疗难道不是医学人文	The Propriet Acta Higher Business for The Pro-
关怀的体现吗?	

Reference Reading

New Approach to Beating Diabetes

There is encouraging news to report in the fight against the epidemic of diabetes. About 24 million Americans have type 2 diabetes, the kind caused by being overweight among other factors.

Researchers have found that weight loss surgery for these people can be more effective than taking medication in beating this disease. Our report tonight from our chief medical editor Dr. Nancy Snyderman.

We first met Laura Beth Shower two years ago the day she had a gastric

bypass surgery. She weighed 361 pounds, struggled the walk and had type 2 diabetes. Now this 33-year-old new mom transformed inside and out.

"After the surgery, I was off all my medications that include my diabetes medicine," said Laura.

Her dramatic results along with today's report provide stronger evidence that weight loss surgery is much more effective than medication alone in helping people beat diabetes.

"There isn't any therapy that can rival bariatric surgery in terms of weight loss and controlling diabetes," said Dr. Sangeeta Kashyap, Cleveland Clinic.

Researchers at Cleveland Clinic studied 150 overweight and obese type 2 diabetics. They were divided into 3 groups. The first got gastric bypass, reducing the stomach to about the size of an egg. The second group got a sleeve gastrectomy, constricting the stomach by more than a half. The last group received medication alone and insulin as needed.

Three years later, both groups that got surgery had more weight loss, lower blood sugars, and the majority were able to stop taking insulin and other diabetes medication.

While doctors don't know exactly why the surgery is so effective, they suspect hormonal changes kicking almost immediate following the procedure. But some caution that the surgery alone is not a quick fix.

"This is a cut-option for people who just cannot respond to medical treatment, have very poorly-controlled diabetes that isn't responding to anything else," said Dr. Michael Jensen, Mayo Clinic.

As for Laura Beth, she lost 181 pounds and now in addition to carefullyplanning meals, she exercises every day with her toddler Keenslay.

"I'm just excited in life in general. I don't know what's else gonna come, but I'm ready for anything," said Laura Beth.

Currently insurance companies only cover surgery for morbidly obese patients, but today's report may prompt them to cover people who are just obese or overweight. Surgery turns around \$25,000, and that's a lot less than \$300,000, the cost to treat type 2 diabetics for life. Big economic difference.