

English Readings in

现代医学

Modern Medicine

英语文选

(第二集)



临床医学新进展

主 编 洪班信



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English Readings in Modern Medicine

现代医学英语文选

第二集

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前 言

阅读是我们学习英语的主要目的之一，也是我们英语运用能力的基本表现。作为医学生、医生和医学科研人员，医学阅读是我们在专业领域里的重要活动，是我们希望能掌握的一项有用工具。但是，如何才能培养较为熟练的英语阅读能力呢？常言说，“从游泳中学游泳”，同样，我们也要“从阅读中学阅读”，实践出真知。学过基础英语，通过了大学英语四、六级考试，具备了英语阅读的初步能力，在这个关键时期，用一把力就上去了，进入一个更高境界，一旦停滞下来，就有可能前功尽弃。这时最重要的就是大量阅读。它不仅可使你的阅读逐步熟练，而且也可带动听说和写作能力的提高，如果你有这些方面要求的话。在具有一般阅读初步能力的基础上，及时转向医学专业阅读，让自己慢慢积累医学术语，熟悉医学英语的语言结构特点，经过一段坚持和努力，必然会在医学阅读能力上取得飞跃进展。

本书提供的大量阅读材料全部选自近两三年国外期刊、报纸和个别专著，反映了医学和医疗在全世界的最新进展。文体兼有报道和论述，文章有长有短，文字有易有难，读者通过多种形式的接触可以提高今后阅读国外不同文献的适应能力。系统阅读本书不仅可在语言上得到提升，而且在专业上也可同时获得大量最新信息，真是一举两得。

本套书共分三集，每集收有文章 80 篇，共 240 篇。每集均有一个主题，第一集：环境、健康、疾病预防；第二集：临床医学新进展；第三集：生物医学、新技术。每一集里的文章又有一个大致的归类，每类设有小标题，方便读者了解选材的全貌，或者寻找与自己专业有关的及感兴趣的部分。每课后面均编有词汇练习和理解练习，读者如能系统去做，必将有助于词汇的巩固和对文章的深入理解，进一步提高学习效果。

这套文选的计划 and 编写得到了华中科技大学同济医学院院长田玉科教授的支持和鼓励；得到了人民卫生出版社的认可和支 持，并对全书的总体安排提出了宝贵意见；我院鲁文清教授和孙奕副教授在选材上提供过帮助；在此一并表示衷心的感谢。编者在编写过程中虽然尽了很大努力，但仍不免存在缺点和错误，敬希同行和读者指正。

编 者

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心脏病 1~8

1. Regular Milk Consumption May Reduce Risk of Stroke, Myocardial¹ Infarction²

Regular milk consumption reduces the risk of stroke and possibly of ischemic³ heart disease events, according to the results of a representative population cohort⁴ study published in the May issue of the *Journal of Epidemiology⁵ and Community Health*.

“Concern about an adverse effect of milk consumption on vascular disease risk has been raised by two findings,” write P. C. Elwood from the University of Ulster in Coleraine, Northern Ireland, and colleagues. “Firstly, the drinking of milk raises cholesterol⁶ level. Secondly, ecological studies show a positive relation between the average per capita⁷ milk production in a number of countries and heart disease mortality⁸ in the same countries.”

The Caerphilly cohort⁹ is a representative population sample of men in South Wales, aged 45 to 59 years when first seen in 1979-1983. A representative 3:10 subsample¹⁰ of the men in the cohort was asked to weigh and record their food intake for seven days. Of those approached, 665 men (87%) returned satisfactory seven-day diet diaries, from which total milk consumption was determined. During the following 20 years, the investigators collected details of all deaths, ischemic strokes, and vascular events diagnosed by standard criteria.

Compared with patients with lower intakes of milk, the men whose milk consumption was the median¹¹ or higher (a pint¹² or more) had adjusted relative odds¹³ of 0.52 (95% confidence interval[CI]¹⁴, 0.27 - 0.99) for an ischemic stroke and 0.88 (95% CI, 0.56 - 1.40) for an ischemic heart disease event. Both groups had similar rates of deaths from all causes (relative odds, 1.08; 95% CI, 0.74 - 1.58).

“These results give no convincing evidence of an increased risk of vascular disease from milk drinking,” the authors write. “Rather, the subjects who drank more than the median amount of milk had a reduced risk of an ischaemic stroke, and possibly a reduced risk of an ischaemic heart disease event. These conclusions are in agreement with the results of a previously reported overview of 10 large, long term cohort studies based on food frequency intake records.”

Study limitations include possible residual¹⁵ confounding¹⁶. Men who drank the least milk tended to drink the most alcohol.

“The present perception¹⁷ of milk as harmful, in increasing cardiovascular¹⁸ risk, should be challenged, and every effort should be made to restore it to its rightful place in a healthy diet,” the authors conclude.

Notes to the text

1. myocardial [ˌmaɪəʊˈkɑːdiəl] a. 心肌的; myo- 表示“肌肉”之义

2. infarction [in'fɑ:kʃən] *n.* 梗死
3. isch(a)emic [is'kimik] *a.* 缺血性的
4. cohort [kəu'hɔ:t] *n.* 一群人; 同党, 同事 cohort study 群组研究
5. epidemiology [ˌepiːdiːmi'ɒlədʒi] *n.* 传染病学, 流行病学
6. cholesterol [kə'lestərəʊl] *n.* 胆固醇
7. per capita [pə:'kæpɪtə] 人均 (的)
8. mortality [mɔ:'tælɪti] *n.* 死亡数目; 死亡率
9. Caerphilly [keə'fɪli] *n.* 卡尔菲利干酪 (一种威尔士全脂白干酪) Caerphilly cohort 食用卡尔菲利干酪的人群
10. subsample ['sʌb.sɑ:mpl] *n.* 子样品 *v.* 二次抽样
11. median ['mi:dʒən] *a.* 中央的, 中间的, 正中的 *n.* 中动脉, 中位数, 中值
12. pint [paɪnt] *n.* 品脱
13. relative odds 相对几率, 相对比值
14. confidence interval (CI) 可靠区间, 置信区间
15. residual [ri'zɪdʒuəl] *a.* 残余的, 剩余的
16. confounding [kən'faundɪŋ] *a. & n.* 混淆
17. perception [pə'sepʃən] *n.* 感觉, 感知; 认识, 观点, 看法
18. cardiovascular [ˌkɑːdiəʊ'veɪskjələ] *a.* 心血管的

Increase your vocabulary

Write "S" if the words are the same in meaning or "O" if they are opposite.

- | | | |
|---------|-------------|--------------|
| () 1. | consumption | intake |
| () 2. | positive | negative |
| () 3. | mortal | immortal |
| () 4. | relative | irrelative |
| () 5. | adverse | favorable |
| () 6. | previously | subsequently |
| () 7. | standard | criterion |
| () 8. | interval | break |
| () 9. | adjust | condition |
| () 10. | agreement | concord |

Check your understanding

Give brief answers to the following questions according to what you have read in the passage.

1. According to the passage, what did the population cohort study find?
2. What raised the concern about the adverse effect of milk consumption?
3. Who were taken as a representative population sample in the cohort study?
4. What did the study results suggest about the risk of vascular disease from milk drinking?
5. According to the researchers, what should people do about milk?

2. Some Heart Drugs May Provide Added Benefits

Taking prescription beta-blockers¹ or statin² drugs may boost the chances of having only mild chest pain instead of a heart attack as the first symptom of heart disease, U. S. researchers reported on Monday.

The scientists studied 1,400 patients newly diagnosed with heart disease to try to pinpoint³ why some had heart attacks while others experienced chest pain, known as exercise-induced angina⁴, which is far less dangerous.

Twice as many of the chest pain patients had filled prescriptions for a beta-blocker or a statin during the previous five months, they found. Previous studies have shown that these drugs reduce overall heart disease, but the new research is the first to demonstrate they may reduce the chances of someone having a sudden heart attack without earlier symptoms.

“If there are warning symptoms like angina with exercise, there is enough time to see a doctor and get started on effective treatments that reduce risk,” said Dr. Mark Hlatky, one of the study’s authors and a professor of cardiovascular medicine at Stanford University in California. “Having a heart attack causes permanent damage, even if it doesn’t kill you,” he added.

Heart disease is the leading killer of Americans.

Statins, which reduce artery-clogging⁵ cholesterol, include Pfizer Inc.’s Lipitor, Merck & Co. Inc.’s Zocor and Bristol-Myers Squibb Co.’s Pravachol. Beta-blockers, prescribed to lower high blood pressure, include GlaxoSmithKline Plc’s Coreg and several generic⁶ drugs such as sotalol⁷.

The study involved patients enrolled in a Kaiser Permanente health insurance plan in Northern California. Men were between the ages of 45 and 74, and women between 55 and 74.

Among 916 patients whose first heart disease symptom was a heart attack, 20 percent were taking statins. In a group of 468 patients with chest pain, 40 percent took statins. Nineteen percent of heart attack patients were on beta-blockers, compared with 48 percent of those with chest pain only.

Researchers also reviewed use of hormone therapy for women and drugs called alpha-blockers, ACE⁸ inhibitors and angiotensin⁹ II receptor blockers in men and women.

“We looked at all the medications used to prevent heart disease, but only statins and beta blockers lowered the risk of heart attack,” said Dr. Alan Go, the study’s lead author and a researcher at Kaiser Permanente of Northern California.

He said more study is needed to confirm these findings. The health records did not specify¹⁰ in all cases whether patients were taking aspirin, which also protects the heart and could have influenced cardiac¹¹ outcomes, they said.

Side effects of statins include liver or muscle problems. Beta-blockers can lower blood pressure and slow the heart rate, causing fatigue¹², Go said.

Notes to the text

1. beta-blocker *n.* β 受体阻滞剂
2. statin ['stætin] *n.* 他汀类药物, 抑制素 (目前广泛应用于临床的降脂药物)
3. pinpoint ['pinpoint] *v.* 精确地确定
4. angina [æn'dʒaɪnə] *n.* 心绞痛, 狭心症; 咽峡炎
5. clog [klog] *v.* 阻塞 (粘住, 塞满)
6. generic [dʒi'nerik] *a.* 一般的, 普通的, 共有的; 非商标的, 非专利的
7. sotalol ['səʊtələʊ] *a.* [药] 索他洛尔, 心得怡 (β 受体阻滞剂)
8. ACE (= angiotensin-converting enzyme) 血管紧张素转化酶
9. angiotensin [ændʒiəu'tensin] *n.* 血管收缩素, 血管紧张素, 血管紧张肽; angiotensin II receptor blocker 血管紧张素 II 受体拮抗剂
10. specify ['spesifaɪ] *v.* 具体指定, 详细说明
11. cardiac ['kɑ:diæk] *a.* 心脏的, (胃) 贲门的
12. fatigue [fə'ti:g] *n.* 疲乏, 疲劳 *v.* (使) 疲劳

Increase your vocabulary

Complete the following sentences with the words listed below.

specify boost mild pinpoint overall fatigue

1. The health record _____ the side effects of statins.
2. Aspirin is a(n) _____ analgesic.
3. The _____ clinical picture was compatible with pernicious anemia.
4. The number of men and women experiencing _____ for six months or longer was about equal.
5. "Messages" from the brain may _____ or impair the immune system.
6. CT scanners _____ disease, but there are indications that they will be overused.

Check your understanding

Choose the best answer for each question or unfinished statement.

1. Beta-blockers or statin drugs _____.
 - a. may cause heart attacks
 - b. can reduce heart risks
 - c. boost the chances of having a sudden heart attack
 - d. may cause permanent damage to the heart
2. Exercise-induced angina is _____.
 - a. less dangerous than heart attacks
 - b. more dangerous than heart attacks
 - c. a warning symptom of a sudden heart attack
 - d. is the leading killer of Americans
3. Which of the following statement is true about the recent study?
 - a. Researchers reviewed all the medications for heart disease.
 - b. It showed that heart disease drugs reduce overall heart disease.
 - c. It involved all the senior people in Northern California.

- d. 1,400 patients were diagnosed with heart disease in the study.
4. _____ could lower the risk of heart attacks.
- | | |
|------------------------------|-------------------------------------|
| a. Statins only | b. Angiotensin II receptor blockers |
| c. Statins and beta-blockers | d. ACE inhibitors |
5. What is the side-effect of statins?
- | | |
|--------------------|-------------------------|
| a. Liver problem | b. Fatigue |
| c. Slow heart rate | d. Lower blood pressure |

3. New Heart Treatment Costs Fall after 1 Year

A new and potentially revolutionary cardiovascular¹ treatment about to hit the U. S. market will cost only fractionally more than the conventional treatment when longer-term health costs are considered, a study showed on Sunday.

A study that examined the cost of using so-called drug-eluting² stents³ — tiny wire mesh tubes designed to prop⁴ open surgically cleared arteries and deliver drugs to the site to prevent relogging⁵— found that the initial cost difference of about \$ 2,800 per patient shrank to about \$ 300 after 12 months.

The findings of the study were presented at the American College of Cardiology⁶ meeting here, where doctors reviewed data from several clinical trials involving different drug coatings⁷ for stents.

The cost of using this new class of devices, the study found, dropped because they reduced the need for repeat procedures, hospitalization and other expenses, said Dr. David Cohen, of Beth Israel-Deaconess Medical Center in Boston. “The most significant difference was when we carried out costs between hospital discharge and 12 months,” added Cohen, who led the study.

Bare metal stents have been used for years to prop open coronary⁸ arteries following angioplasty⁹, but with only limited success. A common problem is that scar tissue forms near the site of the implanted stent, often causing the artery to relog after just four to eight months. Reclogging, a condition known as restenosis¹⁰, occurs in about 30 percent of stenting procedures.

Johnson & Johnson, which paid for the study, is expected to win regulatory approval for its drug-eluting stent, called Cypher, next month.

Boston Scientific Corp. is in advanced trials for its version of the device, called Taxus. Other companies are racing ahead with their own studies to get a product on the market. In an unprecedented move, Medicare¹¹ last year agreed to pay for Cypher even before it received regulatory approval. Medicare usually waits until a product is on the market before making a decision to pay.

Dr. Brian Firth, vice president of medical affairs for Johnson & Johnson, said the company has met with almost every payer in the United States about the new product and reimbursement. “One payer told me that they’re planning for 100 percent conversion,” Firth said in an interview. “It’s all a question of reimbursement, and the story is compelling.”

The study showed that patients who received drug-eluting stents benefited with significantly reduced risk of death, heart attack or repeat stenting or bypass surgery¹² for the same artery.

In the study, researchers assumed the cost of the Johnson & Johnson product was \$ 2,000 more than its bare metal counterpart, which sells for about \$ 1,000.

This new class of stents is expected to drive sales growth in the stent market, with some analysts estimating the market will more than double to \$ 5 billion by 2005.

Notes to the text

1. cardiovascular [ˌkɑːdiəʊ'veɪskjələ] *a.* 心血管的
2. elute [i'ljʊ:t] *v.* 流出; 洗脱
3. stent [stent] *n.* 支架 (保持管道通畅)
4. prop [prɒp] *v.* 支撑, 维持
5. reclog [ri'klog] *v.* 再阻塞
6. cardiology [ˌkɑːdi'ɒlədʒi] *n.* 心脏病学
7. coating ['kəʊtɪŋ] *n.* 涂层, 衣料
8. coronary ['kɒrənəri] *a.* 冠的, 花冠的; 冠状的
9. angioplasty ['ændʒiəʊ,plæsti] *n.* 血管成形术
10. restenosis [ri:sti'neʊsis] *n.* 再狭窄
11. Medicare ['medikæə] *n.* [美、加] 老年保健医疗制度
12. bypass surgery 搭桥手术

Increase your vocabulary

Complete the following sentences with the words listed below.

shrink discharge unprecedented compelling conversion

1. New antibacterial products are appearing at a(n) _____ rate.
2. The _____ of the uterine mucosa into decidua occurs in pregnancy.
3. Chemotherapy can be used before surgery to _____ a large tumor and after surgery to destroy remaining cancer cells.
4. *Nursing for Women's Health*, a clinical practice journal, publishes the most recent and _____ health care information on women's health, newborn care and professional nursing issues.
5. Patients were _____ from hospital because the beds were needed by other people.

Check your understanding

Choose the best answer for each question or unfinished statement.

1. Recent study found that _____.
 - a. the new treatment device will cost only a little more than the conventional device
 - b. as long as longer-term health costs are concerned, the new treatment is less expensive than the conventional treatment
 - c. the cost of using drug-coated stents considerably dropped after 1 year
 - d. the new treatment is welcomed by users
2. The drug-eluting stents _____.
 - a. are made of tiny wire mesh tubes
 - b. help to link coronary arteries in a surgery
 - c. help to form reclogging

- d. are commonly used in cardiovascular surgery
3. What is not true about bare metal stents?
- They prop open cleared arteries during angioplastic surgery.
 - They have limited success.
 - They often cause the artery to relog a few months after the surgery.
 - They are implanted in coronary arteries.
4. Medicare _____.
- agreed to pay for Cypher after it is on the market
 - never makes a decision to pay before a product is on the market
 - didn't wait until Cypher received regulatory approval
 - promised to convert 100 percent of the cost
5. What is implied in the passage?
- Though the new stent costs more than its conventional counterpart, the long-term cost will drop considerably.
 - Drug-eluting stents will drive sales growth in the stent market.
 - Medicare will pay less money for the new product.
 - Drug-eluting stents are the optimal choice for angioplasty.

4. New Study Further Links Ephedrine¹ with Heart Attacks

New animal research being published later this month more closely links the dietary supplement² ingredient ephedrine with sudden death from heart attacks.

Dr. Philip Adamson, an associate professor of physiology and cardiovascular disease at the University of Oklahoma Health Science Center, reported on the findings Thursday during a science news conference presented by the American Medical Association.

The federal Food and Drug Administration(FDA) banned the ingredient from store shelves last spring after it was linked to more than 150 sudden heart attack deaths in recent years, many of them among younger adults with no symptoms of heart disease.

"Ephedrine mimics the sympathetic nervous system³, the part of the nervous system that makes the heart beat stronger and faster. In past experiments on obese⁴, otherwise healthy individuals, ephedrine did not raise their heart rates when they were either at rest or exercising," Adamson said.

"When we gave healthy animals ephedrine, we found exactly the same thing. But the moment they developed a blockage⁵ in their heart artery, which we are able to cause reversibly in the lab, their heart rates went through the roof," the researcher said. "It was the response to ischemia⁶, a condition where there is a blockage of the heart's blood supply that was exaggerated by ephedrine."

The experiment is being detailed in an upcoming issue of the *Journal of the American College of Cardiology*.

In ischemic heart disease, blood vessels to the heart become constricted⁷, causing damage to