

UNIVERSITE TUNIS EL MANAR  
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**DCEM1**

# MEDICAL ENGLISH WORKBOOK

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**UNIT ONE**  
**WELCOME TO THE**  
**CLINICAL COURSE**



**MATCH EACH COURSE WITH ITS CORRESPONDING SPAN:**

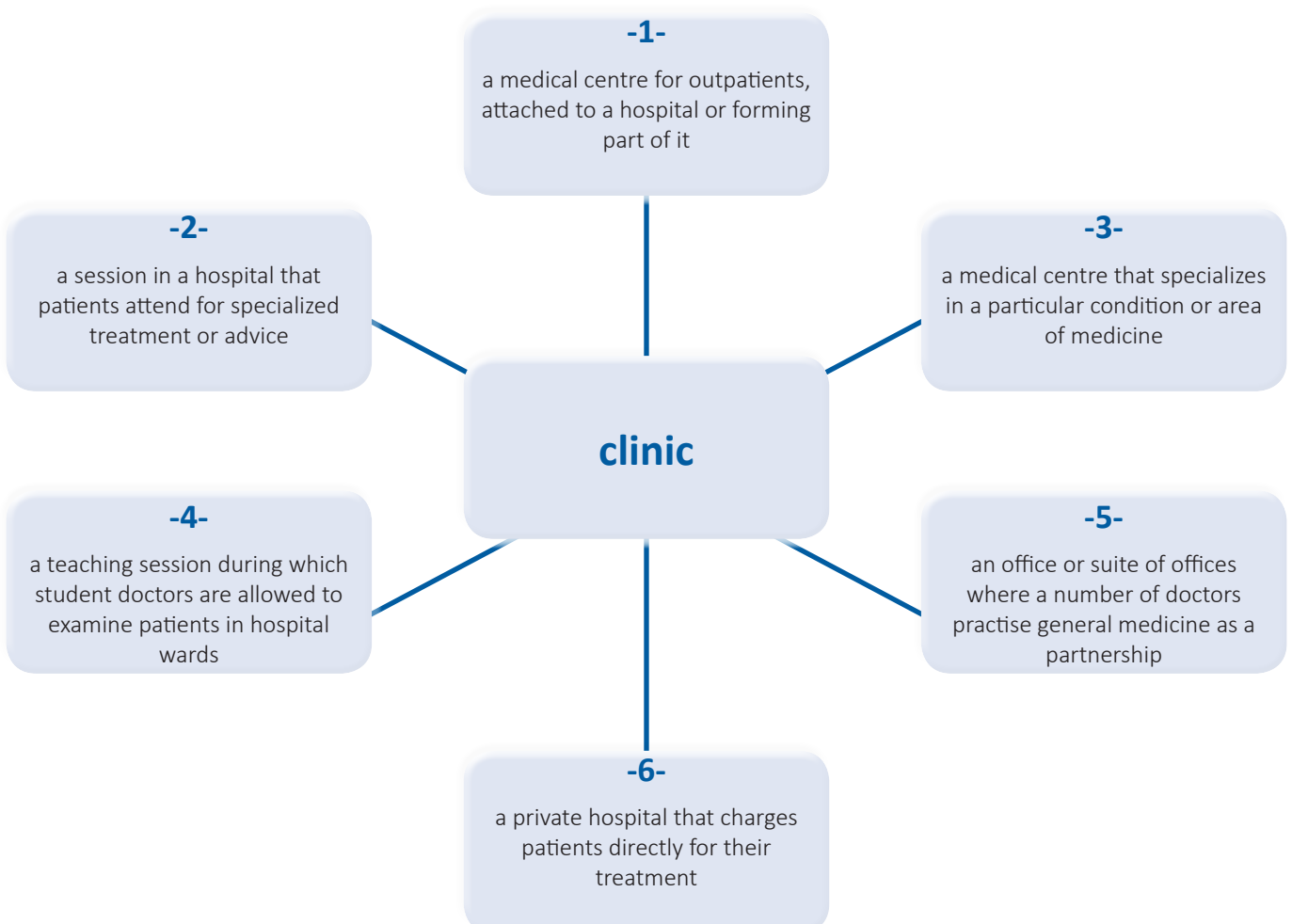
- 1. preacute
- 2. subacute
- 3. acute
- 4. intermittent
- 5. chronic
- 6. recurrent

- a. 1 or 2 days
- b. periods of normality of weeks to months
- c. periods of normality of a few minutes or hours
- d. up to a week
- e. a few hours
- f. more than 1 week

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

**MATCH THE DEFINITION WITH THE CORRESPONDING EXAMPLE:**

- . \_\_\_\_\_ A patient who does not need to stay in hospital overnight can see the hospital specialist as an outpatient and will be given an appointment to attend the clinic.
- . \_\_\_\_\_ If you live in a rural area, visit a health clinic to find out if malaria is a problem in your area and where you can get a free treated bed net.
- . \_\_\_\_\_ The maloclinic SPA (paid service) offers a range of facilities and treatments that have been carefully chosen with the patient’s well-being in mind.
- . \_\_\_\_\_ In some cases, a woman in the early stages of labor could receive enough information after arriving at the clinic to decide to have a post-placental IUD insertion.



## HISTORY TAKING

Look at the patient's answers and try to guess the questions asked by the doctor:

### Some Troubling Symptoms

**Patient:** Good afternoon.

**Doctor:** Good afternoon. Have a seat. So, \_\_\_\_\_ ?

**Patient:** Thank you. I'm feeling ill. I've got quite a bad cough, but I don't seem to have a fever.

**Doctor:** I see. \_\_\_\_\_ ?

**Patient:** Oh, I've had the cough for two weeks, but feeling ill just these past few days.

**Doctor:** \_\_\_\_\_ ?

**Patient:** Well, I've got a headache. I've also had a little bit of diarrhea.

**Doctor:** \_\_\_\_\_ ?

**Patient:** Sometimes, but it's usually pretty dry.

**Doctor:** \_\_\_\_\_ ?

**Patient:** Yes, a few cigarettes a day. Certainly no more than a half a pack a day.

**Doctor:** \_\_\_\_\_ ? (allergies)

**Patient:** Not that I'm aware of.

**Doctor:** \_\_\_\_\_ (stuffy head)

**Patient:** Yes, for the past few days.

**Doctor:** OK. Now let's have a look. Could you please open your mouth and say 'ah'?

## Pain that Comes and Goes

**Doctor:**

---

**Patient:** My stomach hurts after some meals, but not always.

**Doctor:**

---

**Patient:** It started in June. So for more than five months now..

**Doctor:** You should have come in earlier. Let's get to the bottom of this.

---

**Patient:** No, not really. Well, that's not true. I'm eating the same foods, but less. You know, the pain seems to come and go.

**Doctor:**

---

**Patient:** Well, I'd say the pain is about a two on a scale of one to ten. Like I say, it's not really bad. It just keeps coming back...

**Doctor:**

---

**Patient:** It comes and goes. Sometimes, I hardly feel anything. Other times, it can last up to half an hour or more.

**Doctor:**

---

**Patient:** Hmmm ... heavy foods like steak or lasagna usually brings it on. I've been trying to avoid those.

**Doctor:**

---

**Patient:** No, it just hurts here.

**Doctor:**

---

**Patient:** Ouch! Yes, it hurts there. What do you think it is doctor?

**Doctor:** I'm not sure. I think we should take some X-rays to find out if you've broken anything.

**Patient:** Will that be expensive?

**Doctor:** I don't think so. Your insurance should cover routine X-rays.

## Joint Pain

**Patient:** Good morning. Doctor Smith?

**Doctor:** Yes, please come in.

**Patient:** Thank you. My name is Doug Anders.

**Doctor:**

---

?

**Patient:** I've been having some pain in my joints, especially the knees.

**Doctor:**

---

?

**Patient:** I'd say it started three or four months ago. It's been getting worse recently.

**Doctor:**

---

?

**Patient:** Well, I've certainly felt under the weather.

**Doctor:** Right.

---

?

**Patient:** Some. I like to play tennis about once a week. I take my dog on a walk every morning.

**Doctor:** OK. Let's have a look. Can you point to the area where you are having pain?

## STARTING AN INTERVIEW

Note how the doctor starts the interview: "What's the problem?"

Put the words below in the right order to obtain other alternatives to starting an interview:

**a-** seems – be – problem – what – to – the

---

**b-** for – can – what – I – do – you

---

**c-** today – along – you – brought – 's – what

---

**d-** trouble – be – seems – the – what – to

---

## EXPRESS THE SAME THING DIFFERENTLY IN ENGLISH

**a-** Fiche administrative : nom / prénom / âge / date de naissance / situation de famille (marié / célibataire) / profession

---

---

**b-** Antécédents personnels:

---

**c-** Traitements suivis :

---

**d-** Motif de consultation :

---

**e-** Histoire de la maladie :

---

**f-** Examen clinique :

---

**g-** Examens complémentaires :

---

**h-** Avez-vous eu toutes les maladies infantiles ?

---

**i-** Avez-vous subi des opérations ?

---

**j-** Avez-vous souffert, souffrez-vous de diabète / hypertension artérielle / rhumatisme articulaire aigu / goutte / asthme / tuberculose ?

---

---

**k-** Avez-vous tendance à saigner facilement?

---



**l-** Avez-vous été hospitalisé ?

---

**m-** Prenez-vous des médicaments ?

---

**n-** Êtes-vous à jour dans vos vaccinations contre la diphtérie/ le tétanos/ la coqueluche/ la polio/ la typhoïde/ l'hépatite ?

---

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**TRANSLATE THE SENTENCES INTO ENGLISH:**

**a-** Je vais vous examiner

---

**b-** Ce n'est pas la peine de vous déshabiller.

---

**c-** Pouvez-vous vous déshabiller?

---

**d-** Pouvez-vous vous déshabiller en ne laissant que vos sous-vêtements?

---

**e-** Pouvez-vous vous mettre torse nu?

---

**f-** Pouvez-vous enlever votre slip / votre soutien-gorge ?

---

**g-** Veuillez vous assoir bien droit / croiser les jambes / vous lever.

---

**h-** Veuillez vous lever et vous tenir bien droit.

---

**i-** Veuillez vous allonger sur le dos / sur le ventre.

---

**j-** Tournez-vous sur le dos / sur le ventre.

---

**k-** Pliez les jambes / Fléchissez les genoux.

---

**RE-ORDER THE FOLLOWING ITEMS TO GET INTRODUCTORY SENTENCES FOR REPORTS OF CASES:**

1. that / male / in an emergency shift / is / the patient / I have seen recently / clerk / a 27-year old / from Ariana

---

---

2. 2 months prior for unstable angina / presented / a man in his 70s / and right coronary (RCA)/ to the emergency department / with / after an episode of presyncope / stent placement / and palpitations / a sense of chest tightness / hypertension /coronary artery disease (CAD)

---

---

---

---

3. a serum uric acid of 0.2/dl / to have / was found / a 33-year old male / on a routine medical investigation /

---

---

4. this morning / late-stage Alzheimer’s / complaining of / was brought in / an upset stomach / female / with / a 78-year-old

---

**FILL IN THE BLANK WITH THE SUITABLE ADJECTIVE:**

---

peritoneal	amoebic	underlying immunological	inborn ileal	curable infective	irreversible precancerous	sensitive	pulmonary
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- 1- An \_\_\_\_\_ or acquired defect in renal tubular handling of xanthine has been suggested as a mechanism for this type of xanthinuria.
- 2- Since the introduction of antibiotics in clinical practice, there has been a marked increase in the frequency of Gram-negative septicaemia and a decrease in that of penicillin-\_\_\_\_\_streptococci.
- 3- The fifth patient was infected during \_\_\_\_\_dialysis as a result of \_\_\_\_\_perforation.
- 4-Strept. viridans was isolated from 5 patients with \_\_\_\_\_endocarditis and four with \_\_\_\_\_ tuberculosis.
- 5- \_\_\_\_\_ liver abscess may extend and/or rupture into the abdomen or chest, or disseminate and cause a brain abscess.
- 6- Bowel cancer is 90 per cent \_\_\_\_\_ when diagnosed early and can be prevented by removing \_\_\_\_\_ polyps. Therefore, a suitable screening test has the potential to save many lives.
- 7- Clubbing is potentially reversible if the \_\_\_\_\_ condition is treated early enough but the changes may be \_\_\_\_\_ once collagen deposition has set in.
- 8- Patients should be closely monitored and all cases of IARs, delayed reactions and possible \_\_\_\_\_ reactions should be reported.

**MATCH THE ENGLISH WORDS WITH THEIR EQUIVALENTS.  
WRITE THE LETTERS IN THE GRID BELOW:**

1. mole
2. wart
3. breast
4. neck
5. groin
6. bladder
7. axilla
8. mucosa
9. bowel
10. seizure
11. sore
12. discharge
13. hoarseness
14. wasting
15. GI bleeding
16. vaginal bleeding

- a. amaigrissement
- b. muqueuse
- c. sein
- d. grain de beauté
- e. aine
- f. intestin
- g. cou
- h. vessie
- i. plaie
- j. écoulement
- k. enrrouement
- l. aisselle
- m. verrue
- n. convulsion
- o. métrorragie
- p. hémorragie digestive

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_ 8. \_\_\_\_\_

9. \_\_\_\_\_ 10. \_\_\_\_\_ 11. \_\_\_\_\_ 12. \_\_\_\_\_ 13. \_\_\_\_\_ 14. \_\_\_\_\_ 15. \_\_\_\_\_ 16. \_\_\_\_\_

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# **UNIT TWO**

# **HYPERTENSION**

## LISTENING PRACTICE – A –

### 1/ Complete these statements:

"I've been \_\_\_\_\_ the weather."

What does it mean? \_\_\_\_\_

"There is nothing I can really \_\_\_\_\_"

What does it mean? \_\_\_\_\_

### 2/ What do the underlined words refer to?

- I want to get it sorted out \_\_\_\_\_

- Is it anything in particular? \_\_\_\_\_

- That hasn't happened to me since \_\_\_\_\_

- Anything like that? \_\_\_\_\_

- No problem with that \_\_\_\_\_

- When I think about it \_\_\_\_\_

### 3/ How often does the patient get headaches?

\_\_\_\_\_

### 4/ How often does he suffer nosebleeds?

\_\_\_\_\_

### 5/ For what has the doctor treated his patient before?

\_\_\_\_\_

### 6/ As you listen to the recording make brief notes on the patient's replies to each of the following question topics:

a) digestion \_\_\_\_\_ b) bowels \_\_\_\_\_

c) weight \_\_\_\_\_ d) tobacco \_\_\_\_\_

e) alcohol \_\_\_\_\_ f) sex \_\_\_\_\_

g) anxiety \_\_\_\_\_

### 7/ which question topic is missing from the list?

\_\_\_\_\_

### 8/ What does the doctor ask his patient to do? What for?

\_\_\_\_\_

## LANGUAGE STUDY

1/ Do the crossword puzzle:

### DOWN

1. bleeding from broken blood vessels into surrounding tissue

2. a tender area of skin discoloration caused by blood leaking from blood vessels damaged by pressure or impact

### ACROSS

3. swelling on the body caused by an impact

4. an injury to the body in which skin and bone are not broken but damage is done to tissues under the skin, causing a bruise

	1							
				2				
			3					
4								

## 2/ FILL IN THE BLANKS WITH THE SUITABLE ADJECTIVE:

bruised   large   reddish   effective   frozen   elevated   instructed  
over-the-counter   affected   taken

The treatment for a bruise is most \_\_\_\_\_ right after the injury, while the bruise is still \_\_\_\_\_

- A cold compress such as an ice pack or a bag of \_\_\_\_\_ vegetables should be applied to the \_\_\_\_\_ area for 20-30 minutes in order to speed healing and reduce swelling. Do not apply ice directly to the skin. Wrap the ice pack in a towel.
- If the bruise takes up a \_\_\_\_\_ area of the leg or foot, the leg should be kept \_\_\_\_\_ as much as possible during the first 24 hours after the injury.
- Acetaminophen may be \_\_\_\_\_ for pain as \_\_\_\_\_ on the bottle. Avoid aspirin or ibuprofen because they slow the blood from clotting and may, in fact, prolong the bleeding.
- After about 48 hours, heat in the form of a warm washcloth applied to the bruise for 10 minutes or so two to three times a day may increase blood flow to the \_\_\_\_\_ area, allowing the skin to reabsorb the blood more quickly. Ultimately, the bruise will fade in color.

### Medical Treatment for a Bruise

Doctors have no special treatment for bruises other than the techniques described above: ice packs and later heat, \_\_\_\_\_ medications for pain, and elevation of the bruised area, if possible.

(source: <http://www.webmd.com/skin-problems-and-treatments/guide/bruises-article>)

## SHORT QUESTION FORMS

### Examples:

Are you having any diarrhea?                      *Diarrhea?*  
Have you lost any weight?                         *Lost any weight?*  
Have you had anything like that?                *Anything like that?*

### Now make the following groups of related questions shorter:

**a-** Are you having any problems at work? Are you having any problems with your friends? Are you having any problems at home?

---

---

**b-** Does it hurt when I press here? And does it hurt when I press here? And does it hurt when I press down here?

---

---

**c-** Are you taking the medicine that I have prescribed for you?  
Have you been eating well? Have you been sleeping all right?

---

---

**d-** Have you done what I have advised you to do? Have you followed the diet that I have prescribed for you? Have you cut down on the salt on your food? Have you tried to take things easy?

---

---



1/ As you listen to the recording complete the sentences:

- a) Would you \_\_\_\_\_ your wrist, please?
- b) Would you \_\_\_\_\_ a bit for me?
- c) Breathe \_\_\_\_\_, breathe \_\_\_\_\_, hold \_\_\_\_\_, breathe \_\_\_\_\_
- d) Would you \_\_\_\_\_ your left side, please?
- e) Lie \_\_\_\_\_ f) lean \_\_\_\_\_ g) Breathe \_\_\_\_\_ quietly through your mouth.

2/ Explain what the underlined words refer to?

- a) Doctor: “ \_\_\_\_\_ fix this around you here...” \_\_\_\_\_
- b) Mr. Peter: “ \_\_\_\_\_ is it normal?” \_\_\_\_\_
- c) Mr. Peter: “That won’t happen...?” \_\_\_\_\_
- d) Doctor : “Just one or two other things.” \_\_\_\_\_
- e) Mr. Peter: “How is it now, doctor?” \_\_\_\_\_

3/ Answer the questions:

- a) What is the patient instructed to do while waiting for the results of the tests?  
\_\_\_\_\_
- b) Say which of the following areas of examination are not mentioned on the tape: (**ankle – heart – blood pressure – chest – eyes – pulse**)  
\_\_\_\_\_
- c) How important is the family history? Put the following words into order to answer the question: **complications – families – hypertension – and – its – run – in**  
\_\_\_\_\_

## LANGUAGE STUDY

### 1/ Polite request / instruction

**Imperative:** Hold out your wrist.

**Polite form:** Would you hold out your wrist, please?

Now use the same expressions to give polite instructions for the following:

a) Sit up a bit more me \_\_\_\_\_

b) Turn on your left side \_\_\_\_\_

c) Roll up your sleeve \_\_\_\_\_

d) Get me the patient's chart \_\_\_\_\_

e) Show in the next patient \_\_\_\_\_

### 2/ "It may be that" possibility (past reference)

Notice how the doctor expresses the idea that the possible cause of the patient's nosebleed was his blood pressure: *"It may be that the high blood pressure caused your nosebleed."*

Now use the same phrase to express possible causes:

a) He may have taken an overdose.

\_\_\_\_\_

b) You may have set the fracture incorrectly.

\_\_\_\_\_

c) Perhaps the pain was due to hysteria.

\_\_\_\_\_

d) Perhaps the cause of the raised blood pressure was arteriosclerosis.

\_\_\_\_\_

e) The patient may have damaged her skin deliberately, as sometimes happens in neurodermatitis.

\_\_\_\_\_

### 3/ REVIEW PHRASAL VERBS:

1. A thirteen year old girl is being treated after breathing \_\_\_\_\_ smoke.
  - away
  - out
  - in
2. This 13C can be detected in the carbon dioxide that you breathe \_\_\_\_\_ of your lungs.
  - away
  - out
  - in
3. She had a high temperature and then broke \_\_\_\_\_ a rash.
  - in to
  - up of
  - out in
4. Thomas came..... chickenpox at the weekend.
  - down with
  - round by
  - about by
5. Every single organ in your body has a cell population that's ready to take \_\_\_\_\_ at the time of injury.
  - up
  - over
  - out
6. A medical office isn't always able afford the latest devices that come \_\_\_\_\_.
  - up
  - over
  - out
7. He was taken to the hospital and wired \_\_\_\_\_ to a heart monitor after complaining of feeling unwell.
  - up
  - down
  - in
8. Susan had a mental breakdown and was diagnosed \_\_\_\_\_ schizophrenia.
  - of
  - for
  - with
9. It's time for your bandages to come \_\_\_\_\_.
  - off
  - down
  - out
10. As many as one in five youngsters with asthma may grow \_\_\_\_\_ the respiratory condition as they age.
  - away from
  - up with
  - out of
11. Angina pectoris should completely ruled \_\_\_\_\_.
  - out
  - up
  - away
12. When I came \_\_\_\_\_, I was on the kitchen floor.
  - up
  - down
  - round
13. Many people are trying to come \_\_\_\_\_ tranquilizers.
  - down
  - off
  - out

1/ WHAT DO THE UNDERLINED WORDS REFER TO?

- a) Mr. Peters: "Does that mean they are normal?" \_\_\_\_\_
- b) Mr. Peters: "You get heart attacks..." \_\_\_\_\_
- c) Mr. Peters: "I don't want that happening to me." \_\_\_\_\_
- d) Doctor: "Let me explain this to you" \_\_\_\_\_
- e) Doctor: "... and this does require treatment." \_\_\_\_\_
- f) Doctor : "..... the newest ones don't seem to ruin it." \_\_\_\_\_
- g) Doctor: "Do you think it will be difficult?" \_\_\_\_\_
- h) Doctor: "Let's see how you get on with it?" \_\_\_\_\_

2/ ANSWER THE QUESTIONS:

- a) What is the doctor attempting to achieve by using the expression "**to all intents and purposes**"  
\_\_\_\_\_
- b) What does the doctor say the patient's cardiogram shows?  
\_\_\_\_\_
- c) What regimen does the doctor advise?  
\_\_\_\_\_

3/ LISTEN CAREFULLY AND COMPLETE:

Now look, you have a mild \_\_\_\_\_ definite increase in your blood pressure, and this does require treatment. If the treatment is \_\_\_\_\_ you will be no more \_\_\_\_\_ than someone \_\_\_\_\_ is normal. \_\_\_\_\_ drugs, the newest ones don't seem to ruin your \_\_\_\_\_, although some of the old ones \_\_\_\_\_ did ruin it. Anyway I'm going \_\_\_\_\_ a lot simpler.

## LANGUAGE STUDY

1/ Notice how the doctor uses the emphatic “do” to give emphasis to his statements:

Example: “..... this does require treatment”

“.....some of the old ones certainly did ruin it”

Use the same structure to give emphasis to the following statements:

a) I believe she will recover completely, Dr. Murray.

---

b) I warned you what would happen.

---

c) The results of the test indicate a mild hypertension.

---

d) There seems to be some improvement since your last visit.

---

2/ Notice how the doctor expresses the idea that, possibly, a salt-free diet will bring the patient’s blood pressure back to normal:

*“It may be that cutting out most of the salt will be all the treatment you will need.”*

Now follow the example to express possibilities with future reference:

a) Perhaps the treatment I’ve prescribed will be enough.

---

b) A skull x-ray and CT scan may give us all the information we will need.

---

c) The diet I have devised for you will get your blood pressure back to an acceptable level without drugs.

---

d) With time and patience, the condition may cure itself.

---

e) Perhaps the tablets will make you feel a bit drowsy.

---

## CHECK OUT THE USE OF DETERMINANTS:

- Your blood pressure needs to be brought back to \_\_\_\_\_
  - its normal
  - the normal
  - normal
- He was shot through \_\_\_\_\_
  - his heart
  - the heart
  - heart
- The window was smashed and the girl received pieces of glass in \_\_\_\_\_
  - her head
  - the head
  - head
- This is a new medical treatment for \_\_\_\_\_
  - blinds
  - the blinds
  - the blind
- Efforts were made for many years to rehabilitate \_\_\_\_\_
  - disabled
  - the disabled
  - a disabled
- All of \_\_\_\_\_ in the study had a very early stage of breast cancer.
  - women
  - the women
  - woman
- I got an MD and a PhD in \_\_\_\_\_
  - Neurosciences
  - the Neuroscience
  - Neuroscience
- You can have \_\_\_\_\_ for years without any symptoms.
  - hypertension
  - the hypertension
  - a hypertension
- Do you have \_\_\_\_\_ of high cholesterol, high blood pressure or heart disease?
  - family history
  - the family history
  - a family history

## PRESENT PERFECT VS SIMPLE PAST:

Fill in the blanks with verbs from box. Put them in the simple past or present perfect:

---

**bring - be - reach - take - not indicate - do - have - suggest - work - diagnose**

---

- A few people with high blood pressure may have headaches, shortness of breath or nosebleeds, but these signs and symptoms aren't specific and usually don't occur until high blood pressure \_\_\_\_\_ a severe or life-threatening stage.
- Doctors should recommend more frequent readings, if the patient (already \_\_\_\_\_ with high blood pressure or has other risk factors for cardiovascular disease.
- During the last checkup, Mr Peters \_\_\_\_\_ a list of the over-the-counter cold medicines he \_\_\_\_\_ His doctor \_\_\_\_\_ a 24-hour blood pressure monitoring test
- When (you – last \_\_\_\_\_ your blood pressure checked? What \_\_\_\_\_ your blood pressure measurement then?
- The study suggested that diuretics or calcium channel blockers \_\_\_\_\_ better for older people than \_\_\_\_\_ angiotensin-converting enzyme (ACE) inhibitors alone.
- Until recently, medical literature \_\_\_\_\_ a connection among many genetic disorders, both genetic syndromes and genetic diseases, that are now being found to be related.

## TRANSLATION

### FINGER CLUBBING

Enlargement of the terminal digital phalanges with loss of the nail bed angle.

Clubbing of the finger is seen in a variety of conditions, cyanotic congenital heart disease and a number of pulmonary diseases. It also appears on occasions to be congenital and unassociated with any diseases. The findings in finger clubbing vary, perhaps pending on the rapidity with which clubbing develops. One measurement suggested as an indication of clubbing is the ratio between the anteroposterior diameter of the finger at the nail bed and the anteroposterior diameter at the distal interphalangeal joint. If the ratio is  $< 1$ , clubbing may be considered to be present. Fluctuation of the nail bed and beaking of the finger nail are often found in clubbing. Recently, it has been suggested that clubbing is associated with changes in the vasculature at the nail bed, as seen by capillaroscopy. Capillaries at the base of the nail can be seen readily by applying a drop of immersion oil to the finger and examining it with a dissecting microscope. Changes in the configuration of the normal capillary loops are seen in those with finger clubbing. In pulmonary diseases clubbing of fingers is most commonly seen in patients with tumors or with chronic septic conditions (eg. bronchiectasis or lung abscess). Shunting in the lung (eg. that associated with arteriovenous fistula) has been reported as the cause of clubbing. Tumors associated with finger clubbing are usually malignant, but it has been reported in patients with benign fibroma of the lung or of the pleura.

Finger clubbing is not commonly seen in patients with chronic obstructive pulmonary disease or chronic pulmonary TB, and if it should appear in patients with these conditions, it may lead to suspicion of the development of the tumor.

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## LISTENING PRACTICE - D -

1/ As you listen to the recording write brief notes on the following items.

Age \_\_\_\_\_ Symptoms \_\_\_\_\_ BP \_\_\_\_\_  
Chest X-ray \_\_\_\_\_ Family history \_\_\_\_\_  
MSU \_\_\_\_\_ U& Es \_\_\_\_\_ ECG \_\_\_\_\_  
Weight \_\_\_\_\_

2/ Explain what the underlined words refer to:

- a) Consultant: "This one" \_\_\_\_\_  
b) Consultant: "anxious about things" \_\_\_\_\_  
c) Doctor: "That's what I wanted to know" \_\_\_\_\_

3/ What do the following abbreviations stand for?

- a) MSU: \_\_\_\_\_  
b) U&E: \_\_\_\_\_  
c) U/A: \_\_\_\_\_  
d) CSF: \_\_\_\_\_  
e) CVA: \_\_\_\_\_  
f) D&C : \_\_\_\_\_  
g) D&V: \_\_\_\_\_  
h) DVT: \_\_\_\_\_  
i) EEG: \_\_\_\_\_  
j) FSH: \_\_\_\_\_  
k) IUD: \_\_\_\_\_  
l) CPK: \_\_\_\_\_  
m) IVP: \_\_\_\_\_  
n) RBC: \_\_\_\_\_  
o) SC: \_\_\_\_\_



## LANGUAGE STUDY

**Asking for advice:** \_\_\_\_\_ **whether you would** \_\_\_\_\_

**Example:** "I'd like to know whether you would investigate him further".

**Follow the example to construct similar requests for advice in the exercise below:**

a) Advise an IVP at this stage?

---

b) Prescribe a vasodilator or an adrenergic neurone blocker?

---

c) Recommend sympathectomy in a case such as this?

---

d) Give the patient potassium supplement?

---

e) Choose pempidine or one of the veratrum supplements?

---

f) Recommend an increase in dosage?

---

## GIVING CONDITIONAL ADVICE (FUTURE REFERENCE)

\_\_\_\_\_ **wouldn't unless** \_\_\_\_\_

Notice how the consultant advises against an IVP, on condition that the doctor controls patient's BP with simple measures:

*"I wouldn't recommend an IVP unless you fail to control his BP with simple measures".*

**Give a conditional advice in the exercise below, using the verbs given:**

a) A diuretic is advisable only if the patient develops heart failure (**suggest**)

---

b) Sulphonylurea treatment is advisable in non-obese patients only if they have been at least 30 days on a restricted diet without satisfactory results (**advise**)

---

c) Cinoxacin in a smaller dose than at present is inadvisable until clinical trials establish that it has a true advantage over nalidixic acid. (**suggest**)

---

d) The use of antibiotic in combination is advisable only if the patient is suffering from severe undiagnosed sepsis (**recommend**)

---



**DCEM1**

**UNIT THREE  
MYOCARDIAL  
INFRACTION**

1/ What do the underlined words refer to?

- a- "stick this X-ray up there." \_\_\_\_\_
- b- How can you be sure of that?" \_\_\_\_\_
- c- "...patients I've seen like this." \_\_\_\_\_
- d- "...might be the exception." \_\_\_\_\_
- e- "...respond to this last line of treatment." \_\_\_\_\_

2/ Complete the sentences with words from the conversation.

The patient's heart is \_\_\_\_\_ and there is fluid \_\_\_\_\_ of his lungs. There's also \_\_\_\_\_ congestion of his \_\_\_\_\_ blood vessels. The patient's \_\_\_\_\_ shows that he's had an \_\_\_\_\_ and from this it's clear that if he develops \_\_\_\_\_ disturbance, he will have to go to the \_\_\_\_\_

You'd better tell his wife the truth. Tell her that he's very \_\_\_\_\_ ill and that his condition is \_\_\_\_\_

LANGUAGE STUDY

Conditional question (future reference)

What if \_\_\_\_\_ ?

Doctor B: *What if he does not respond to the treatment?*

This is a short way of expressing the question:

**What will happen if he does not respond to the treatment?**

Now follow this example to make conditional questions in the exercise below:

I (suffer) side effects from the pills?

*What if I suffer side effects from the pill?*

or

*What will happen if I suffer side effects from pills?*

- a) The patient's asthma (not respond) to treatment by inhaler?  
\_\_\_\_\_
- b) My husband (refuse) to let me have the baby?  
\_\_\_\_\_
- c) The pain (continue) after I have taken the medication?  
\_\_\_\_\_
- d) We (discover) that the patient's vomiting is self-induced?  
\_\_\_\_\_
- e) The patient (exhibit) an adverse reaction to the treatment?  
\_\_\_\_\_

**Conditional answer (future reference) “ should “**

**Doctor A:** *Should that happen, he will have to go on an external support system.*

Another way of expressing a conditional answer of this type is:

Should he fail to respond, \_\_\_\_\_

Now look at the questions you asked in exercise 1 and follow this example to make conditional answers in the exercise below:

What if I suffer side effects from the pills? (*put you on a lower dosage*).

Should you suffer side effects from the pills, I'll put you on a lower dosage.

a) Give him a short course of systemic steroids.

---

b) Have a word in private with him.

---

c) Refer you to a specialist.

---

d) Refer him to a psychiatrist.

---

e) Try to manage it by hyposensitisation.

---

**Note: Other ways of expressing the same type of conditional answer are:**

*If he fails to respond, \_\_\_\_\_ (strong possibility)*

*If he should fail to respond, \_\_\_\_\_ (less strong possibility)*

**Translate into English using “should”**

a) Si par hasard il vient, faites le moi savoir.

---

b) Si je suis libre, je viendrai.

---

c) Et s'il refusait, que feriez-vous?

---

d) le cas échéant

---

e) en cas de besoin

---

f) Et si elle l'apprenait ?

---

g) Je prends un kit de secours, pour le cas où il y aura un accident.

---

h) Et si elle l'apprenait ?

---

**Express the same thing differently in English**

- a- Evolution de la douleur: \_\_\_\_\_
- b- La douleur est-elle d'emblée maximale? \_\_\_\_\_
- c- La douleur s'aggrave-t-elle / diminue-t-elle progressivement ?  
\_\_\_\_\_
- d- Qu'est ce qui calme cette douleur ? \_\_\_\_\_
- e- Y'a-t-il d'autres facteurs calmants / aggravants associés ?  
\_\_\_\_\_
- f- Est-ce que la douleur irradie ? \_\_\_\_\_
- g- Avez-vous au même temps que la douleur des nausées ? des vomissements ? des sueurs ? une sensation de malaise ?  
\_\_\_\_\_
- h- Êtes- vous essoufflé après un effort ? au repos ?  
\_\_\_\_\_
- i- Vous réveillez-vous la nuit parce que vous êtes essoufflé ?  
\_\_\_\_\_
- j- Avez-vous déjà craché du sang ?  
\_\_\_\_\_
- k- Avez-vous les chevilles / les jambes enflées ?  
\_\_\_\_\_
- l- Est-ce que les œdèmes diminuent si vous vous allongez ?  
\_\_\_\_\_
- m- Avez-vous des crampes dans les jambes ?  
\_\_\_\_\_
- n- Quel est le siège exact de la douleur ?  
\_\_\_\_\_
- o- Quelles positions calment la douleur ?  
\_\_\_\_\_
- p- Avez-vous des fourmis (picotement, fourmillement) dans les pieds ?  
\_\_\_\_\_

**1/ Read through the following, then listen and complete:**

- a- In order to minimize the patient’s anxiety, the doctor describes the heart attack as \_\_\_\_\_
- b- In order to indicate that the crisis has passed, the doctor says that the most dangerous thing is \_\_\_\_\_
- c- In order to calm the patient, the doctor tells him twice not to \_\_\_\_\_

**2/ Answer the following questions:**

- a) How long will Mr. Robert be detained in the coronary care unit? What reasons does the doctor give for this?

---



---

- b) What is the doctor trying to achieve by saying “leave everything to us”

---

- c) Complete this list:

1- The doctor begins by telling the patient calmly and simply what has happened to him.

2- Next, \_\_\_\_\_

3- After that, \_\_\_\_\_

4- Then, \_\_\_\_\_

5- Finally, \_\_\_\_\_

**3/ Explain what the underlined words said by the doctor refer to:**

a) “you’re over that” \_\_\_\_\_

b) “...close eye on matters” \_\_\_\_\_

c) “You’re over the worst now” \_\_\_\_\_

d) “...after that I’ll ...” \_\_\_\_\_

e) “...we can talk about things...” \_\_\_\_\_

**LANGUAGE STUDY:**

**Ways of expressing purpose:**

“so that”                      “in order to”

**Example:** *We are going to keep you in the coronary care unit so that we can make the necessary observations.*

**We are going to keep you in the coronary care unit in order to make the necessary observations.**

**Construct sentences using the following items from A & B**

- |   |   |
|---|---|
| 1. Surgery was undertaken                   | a. the rhythm of your heart can be monitored              |
| 2. We are going to give you an injection    | b. get a second opinion                                   |
| 3. The patient received intravenous heparin | c. obliterate the aneurysm before it rebleeds             |
| 4. I want to refer you to a colleague mine  | d. ascertain their function in the production of migraine |
| 5. These electrodes have been attached      | e. we can ease the pain                                   |
| 6. We are studying kinins                   | f. blood formation can be prevented                       |

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

**Express the same thing differently in English:**

**a)** Avez-vous des palpitations?

---

**b)** Ces palpitations débutent-elles brutalement? progressivement?

---

**c)** Qu'est-ce qui les déclenche habituellement ? des émotions ? un effort ?

---

**d)** Est-ce que l'épisode / l'accès diminue au repos ?

---

**e)** Combien de temps ces épisodes de palpitations durent-ils ?

---

**f)** Depuis combien de temps vous plaignez-vous de palpitation ?

---

**g)** Avez-vous des douleurs dans la poitrine ?

---

**h)** La douleur est-elle en barre entre les deux seins ?

---

**i)** La douleur est-elle localisée à la région mammaire gauche ?

---

**j)** La douleur vous oblige-elle d'arrêter vos activités ?

---

**k)** Vous oblige-elle à vous coucher ?

---

**l)** Vous réveille-elle la nuit ?

---

**m)** Est-ce une douleur modérée ? une douleur continue ?

---

**n)** Est-ce une douleur battante, pulsative ?

---

**o)** Avez-vous l'impression de recevoir un coup de poignard ?

---

**p)** Avez-vous l'impression de crampe ?

---

**q)** Avez-vous l'impression d'une décharge électrique ?

---





1/ Explain:

- a) He won't listen: \_\_\_\_\_
- b) ..... to take it easy: \_\_\_\_\_
- c) I wish I could believe you: \_\_\_\_\_
- d) ..... in a manner of speaking: \_\_\_\_\_
- e) .....you have been through a very worrying experience: \_\_\_\_\_

2/ What do the underlined expressions refer to?

- a) Mrs. Roberts: "I knew this would happen." \_\_\_\_\_
- b) Doctor: "The most dangerous part is over." \_\_\_\_\_
- c) Doctor: "...unpredictability in this sort of things..." \_\_\_\_\_
- d) Mrs. Roberts: "Does that mean he'll.....?" \_\_\_\_\_
- e) Doctor: "...this initial period....." \_\_\_\_\_
- f) Doctor: "...talk about things again..." \_\_\_\_\_

3/ Read through the following statements and say whether they are true or false:

- a) Mrs. Roberts has been worried for some time about her husband's health.
- b) Mr. Robert's condition is critical.
- c) The doctor's main objective in this conversation is to calm and reassure the patient's wife.
- d) The doctor here gives direct answer to Mr. Robert's questions.
- e) The patient has recently gone against his GP's advice.
- f) Mrs. Roberts seems to be more disturbed at the end of the conversation than she was at the beginning.

LANGUAGE STUDY

**Expressing likelihood or possibility: "should"**

Notice how the doctor uses the word "should" to avoid making a direct comment on the certainty of the patient's recovery.

*Doctor: "He should make a very good recovery indeed."*

Now follow this example to express similar ideas of likelihood or possibility and to avoid expressing certainty in the exercise below.

- a) The results of the tests (be) ready in ten days.  
\_\_\_\_\_
- b) These tablets (relieve) the tension.  
\_\_\_\_\_
- c) If you follow the instruction I've given, we (notice) an improvement in your condition soon.  
\_\_\_\_\_

d) With proper rest and attention, Mrs. Roberts (be) feeling better tomorrow.

---

e) If there are no further complications, the patient's beat (remain) stable.

---

f) We (have) a clearer idea of what caused the accident when the patient regains consciousness.

---

**Translate English using the words given:**

1. Il est probable qu'il guérira.

(likely)

---

(chances)

---

2. Il est peu probable qu'il vienne.

(unlikely)

---

(chances)

---

3. Il a dû avoir un accident.

(must)

---

(doubtless)

---

4. Il est possible qu'il vienne.

(may)

---

5. Je crois bien.

(should)

---

6. Pourquoi me soupçonnerait-il ?

(should)

---

7. Il a dû arriver à l'heure qu'il est.

(should)

---

8. Il est possible qu'il n'en ait pas été informé.

(possible)

---

9. On dirait que quelqu'un a saigné ici.

(look)

---

1/ Listen and complete: fill in the missing words

The doctor tells Mr. Roberts that his heart is \_\_\_\_\_ at about \_\_\_\_\_ of its normal \_\_\_\_\_ and that as a result of the \_\_\_\_\_ they can expect a \_\_\_\_\_ to form in about \_\_\_\_\_

The doctor suggests then that Mr. Roberts should avoid \_\_\_\_\_ anything that might \_\_\_\_\_ on a scar like \_\_\_\_\_ upstairs, \_\_\_\_\_ about, \_\_\_\_\_ lifting or unnecessary \_\_\_\_\_

2/ Complete with the suitable words.

- Mr. Roberts is \_\_\_\_\_ splendid today.
- Mr. Roberts' heart has \_\_\_\_\_ an excellent recovery.
- Mr. Roberts is \_\_\_\_\_ to going back home.
- The doctor is \_\_\_\_\_ a few suggestions to Mr. Roberts.
- Mr. Roberts promises to \_\_\_\_\_ the suggestion over.
- The conversation is \_\_\_\_\_ place on the day Mr. Roberts is \_\_\_\_\_ to leave hospital.

3/ Explain what the underlined words refer to:

- Mr. Roberts: "so glad to hear you say that" \_\_\_\_\_
- Doctor: "whether or not you ought to go back to it" \_\_\_\_\_
- Doctor: "put a strain on it" \_\_\_\_\_
- Doctor: "nothing at all like that." \_\_\_\_\_
- Mr. Roberts: "...think that one over" \_\_\_\_\_

LANGUAGE STUDY

Making suggestion and recommendation:

1. **Suggesting:** It might be .....if.....

Example: "It might be a good idea if you didn't drive the car for a while."

Make suggestions following the example above and using the words given:

- a- advisable/ \_\_\_\_\_ run a couple of tests.  
\_\_\_\_\_
- b- wise / \_\_\_\_\_ you don't have a child right away.  
\_\_\_\_\_
- c- better \_\_\_\_\_ if he doesn't play any form of strenuous sport.  
\_\_\_\_\_

d- simple and easier/ \_\_\_\_\_ you go on a salt-free diet.

---

e- a good start/ \_\_\_\_\_ she agrees to see me at least once a week.

---

f- a good idea/ \_\_\_\_\_ we ask for a second opinion.

---

g- sensible/ \_\_\_\_\_ we avoid doing an IVP, while he's so anxious.

---

## 2. **Recommending: ought / oughtn't**

**"ought to" can be used to change direct commands into recommendations.**

***Example: Think seriously about retiring. (direct command)***

***You ought to think seriously about retiring. (recommendation)***

**Follow the example above to make similar recommendations from these direct commands:**

a- Don't ignore the child's complaint.

---

b- Be more considerate of your husband's condition. Don't be so impatient with him when he forgets things.

---

c- Reduce your dependency on the tablets as soon as possible.

---

d- Don't think you know better in these matters than your doctor does.

---

e- Don't stay in bed so much. Get more exercise.

---

f- Don't worry about things unnecessarily. Take things easier.

---

**Express the same thing differently in English:**

- a-** Examen cardiaque: \_\_\_\_\_
- b-** Palpation / percussion / auscultation \_\_\_\_\_
- c-** Qualité du choc de pointe: \_\_\_\_\_
- d-** Matité cardiaque \_\_\_\_\_
- e-** Bruits du cœur: \_\_\_\_\_
- f-** Dédoublement / Rythme à trois temps: \_\_\_\_\_
- g-** Insuffisance mitrale: \_\_\_\_\_
- h-** Rétrécissement mitral: \_\_\_\_\_
- i-** Persistance du canal artériel: \_\_\_\_\_
- j-** Communication interauriculaire/interventriculaire: \_\_\_\_\_
- k-** Frottement péricardique: \_\_\_\_\_
- l-** ECG de repos / d'effort: \_\_\_\_\_
- m-** Enregistrement holter: \_\_\_\_\_
- n-** Radiographie des poumons/ du thorax \_\_\_\_\_
- o-** Le pontage coronarien: \_\_\_\_\_



**DCEM1**

# **UNIT FOUR**

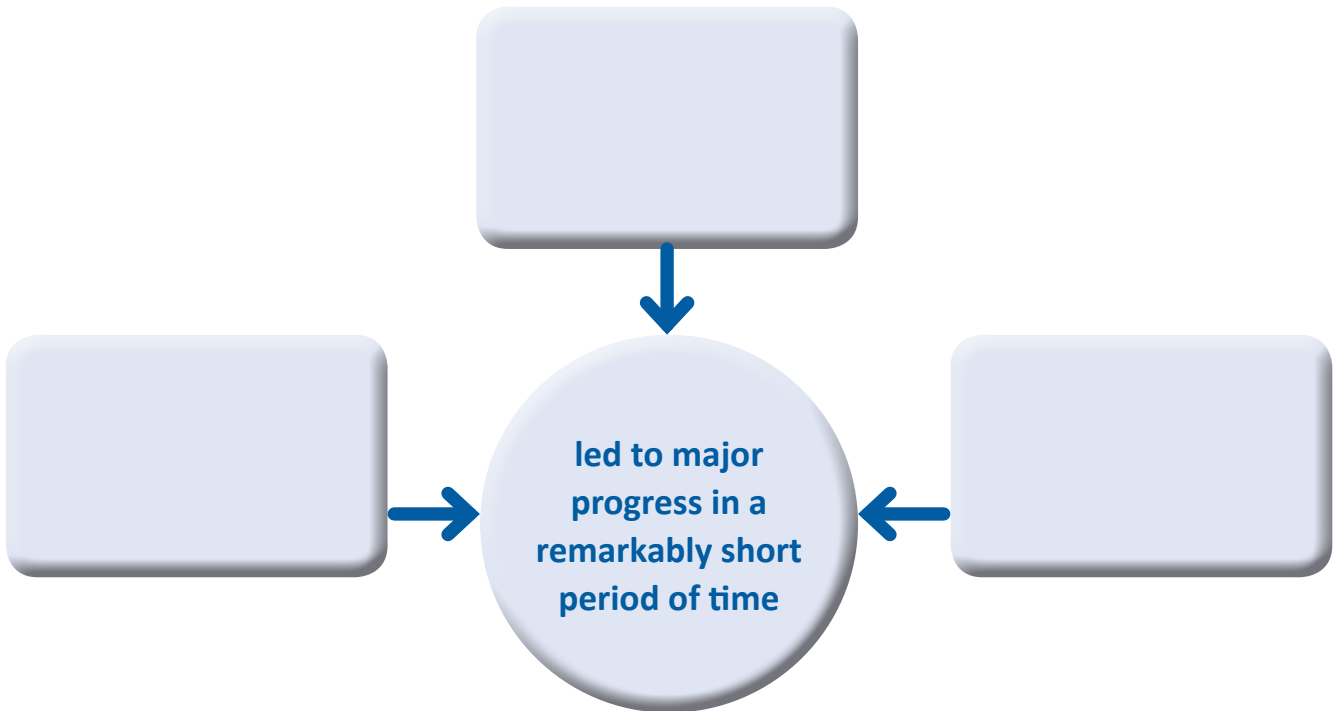
## **HIV /AIDS**



**I WATCH THE VIDEO SEQUENCE THEN DO THE TASKS:**

1- The beginning of the epidemic \_\_\_\_\_

**2-Complete the diagram:**



3-... and soon they were seeing it in other populations \_\_\_\_\_ and people who had had \_\_\_\_\_

4-What does "it" refer to? \_\_\_\_\_

5- \_\_\_\_\_ and \_\_\_\_\_  
\_\_\_\_\_ were paralysing progress

6-"It wasn't comfortable for a lot of Americans" because people began to see that \_\_\_\_\_

7- "The \_\_\_\_\_ represented the swing point. Our clinic was a clinic where \_\_\_\_\_ then we moved in to an era where the clinic shifted almost immediately in 1996 where \_\_\_\_\_"

*Dr. John Bartlett, Johns Hopkins University School of Medicine*

8- 23 refers to \_\_\_\_\_

9- 86 refers to \_\_\_\_\_

10- "We're living in this \_\_\_\_\_ and we just don't want to believe that we're at risk and that \_\_\_\_\_ could render us \_\_\_\_\_ and pay such a high price."

Kenneth Cole, chairman of amfAR

11- Latest AIDS statistics (2006) \_\_\_\_\_

**12- Find the word that means:**

• remain informed about something: \_\_\_\_\_

• made temporarily speechless with astonishment: \_\_\_\_\_

• investigates: \_\_\_\_\_

• an important new discovery: \_\_\_\_\_

• important event: \_\_\_\_\_

• cause; campaign: \_\_\_\_\_

• sign of social unacceptability: \_\_\_\_\_

• strength of medicine: \_\_\_\_\_

**13- Choose the right synonym to the underlined word(s):**

• No one could have known the enormity of the coming epidemic. atrocity / kindness

• The death rate has gone way down. slightly / extremely

• no patient left behind. abandoned / retained

• I will dispute that vehemently. strongly / impassively

**14- Find the English equivalent:**

• centre hospitalier général: \_\_\_\_\_

• apportsanguin: \_\_\_\_\_

• subir un test de dépistage: \_\_\_\_\_

• un médicament contre le cancer renoncé: \_\_\_\_\_

• les taux d'infections les plus élevés: \_\_\_\_\_

**15- Write in full letters:**

• HIV: \_\_\_\_\_

• AIDS: \_\_\_\_\_

• IV: \_\_\_\_\_

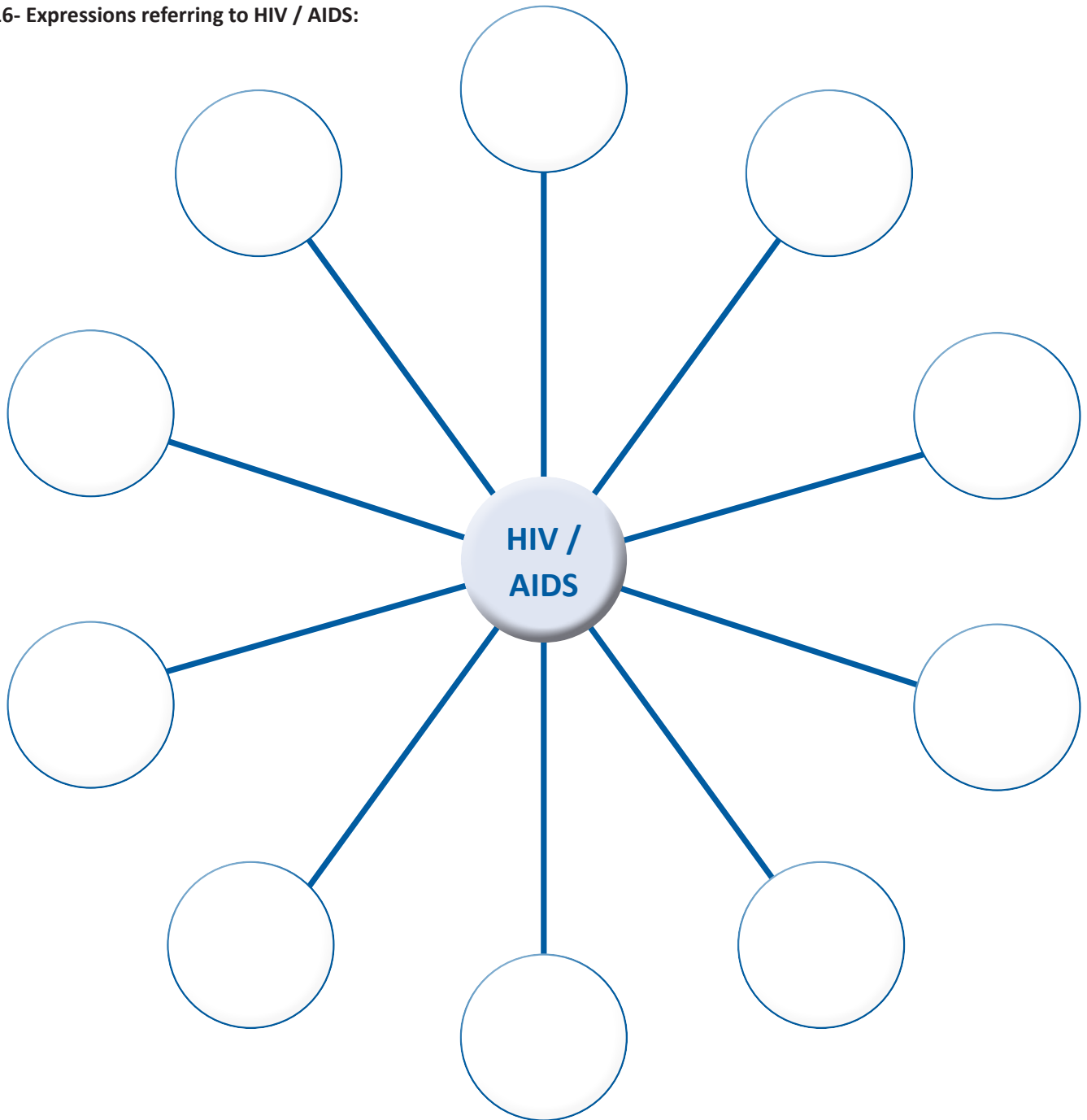
• CDC: \_\_\_\_\_

• FDA: \_\_\_\_\_

• AZT: \_\_\_\_\_

• amfAR: \_\_\_\_\_

16- Expressions referring to HIV / AIDS:



Date/Period	Event
June 1981	a report of _____ with _____, a condition typically found in people with _____
1984	_____ _____
1985	_____ approval of the first _____
1986	_____ _____
"In the early years	every drug we threw at HIV learned to _____ and every one of them had kind of _____"
In less than 5 years	_____ _____
Early 1990's	_____ took a substantial step forward when doctors learned to _____ _____ to create so-called _____
After a decade of struggle	a new class of drugs _____ treatment by attacking a key _____ _____
2006	Some can even treat their HIV with _____ thanks to the incredible success of the combined efforts of _____ against this fierce enemy in such a short time.
Each year in the U.S.	thousands of people _____ and many of _____ _____ don't even know they have it.
"Today,	we're in a position where _____ should be an absolutely _____ _____ for almost all adults." Dr. Julie Gerberding / Director, CDC
Right now	that includes men _____ _____

## II LANGUAGE STUDY:

### 1- CAUSE/EFFECT RELATIONSHIP:

**Cause/effect relationship can be expressed in different ways. Look at these examples from the video sequence:**

- All of medicine now has changed as a result of their presence and their protest.
- Not comfortable because people began to see that anyone could get HIV.

**There are verbs which can be used to express cause/effect relationship:**

- They had no idea what was causing this strange disease in gay men.
- The combination of scientific advances, policy changes and the activist movement led to major progress in a remarkably short period of time.

**These verbs can be used to express cause/effect relationship:**

cause	bring about
produce	result in
lead to	

**In the last sentence, for example, expressing the effect can precede expressing the cause:**

- Major progression a remarkably short period of time was due to the combination of scientific advances, policy changes and the activist movement.

**These verbs can be used to express effect/cause relationship:**

be caused by	be brought about by
be produced by	result from
be due to	occur as a result of

**Express differently as indicated:**

1/Influenza results in a dry cough.

•Adrycough \_\_\_\_\_

2/A prolonged lack of vitamin c leads to scurvy.

•Scurvy \_\_\_\_\_

3/Pellagra is caused by niacin deprivation.

•Niacindeprivation \_\_\_\_\_

4/ Lack of hygiene causes infectious diseases.

•Infectiousdiseases \_\_\_\_\_

5/HIV infection can lead to loss of muscle strength.

•Lossofmusclestrength \_\_\_\_\_

6/An increase in heart rate is likely to be brought about by emotional excitement.

•Emotional excitement \_\_\_\_\_

**Combine using «so...that:»**

1/Food intake was excessive. It caused an increase in body weight.

---

2/Most bacteria are small. They can only be seen by using a microscope.

---

3/Hopes have been raised high. The placebo effect was negative.

---

**Combine using «too...to:»**

The crude penicillin was weak. It couldn't be injected.

---

**2- REVIEW YOUR TENSES:**

**Put the verbs/words in parentheses in the correct tense or form:**

**OUR IMMUNE SYSTEM: THE WARS WITHIN**

Every minute of every day wars rage within our bodies. The combatants (be) \_\_\_\_\_ too tiny to see. Some, like the infamous virus that (cause) \_\_\_\_\_ AIDS, or acquired immune deficiency syndrome, are so small that 230 million (fit) \_\_\_\_\_ on the period at the end of this sentence. Yet they employ tactics that (can - vanquish) \_\_\_\_\_ the much larger cells they swarm upon.

Usually we never even notice the battles in the incessant wars within us. We (evolve) \_\_\_\_\_ legions of defenders, specialized cells that silently rout the unseen enemy. Sometimes these warriors mistake harmless invaders, such as pollen, for deadly foes, and they (mount) \_\_\_\_\_ an allergic reaction. Sometimes our defenders (catch) \_\_\_\_\_ unprepared, and we develop a cold, the flu, or worse. Occasionally some of our own cells (begin) \_\_\_\_\_ the mutinous proliferation of cancer and manage to evade the surveillance of our body's defense forces. But for every successful penetration of our defenses, thousands of attempts (repel) \_\_\_\_\_ We sleep securely, trusting the invisible vigilantes of our immune system.

For decades immunology—the study of the immune system—was a backwater of medicine. In reality we (not - have) \_\_\_\_\_ the instruments to explore the battlefields within us. In the past 20 years, however, powerful microscopes and improved laboratory techniques (help) \_\_\_\_\_ detail the strategies of both defenders and foes. By 1980 it (become) \_\_\_\_\_ clear that immunology (hold) \_\_\_\_\_ great promise for treating diseases as diverse as cancer and arthritis.

Then suddenly there (be) \_\_\_\_\_ AIDS—a new, virulent scourge that relentlessly disarms the immune system. Into our peaceful sleep (creep) \_\_\_\_\_ a nightmare, putting the quest to understand the body's defenses on a crisis footing.

We may never know for certain how it (begin) \_\_\_\_\_ The source was probably the green monkey of central Africa, which for centuries (harbor) \_\_\_\_\_ a harmless virus in its bloodstream. Then, perhaps no more than 15 years ago, nature apparently (alter) \_\_\_\_\_ the genetic code of the virus through the kind of random mutations it (use) \_\_\_\_\_ to evolve all species. Just as the influenza virus (once - do) \_\_\_\_\_, this new virus crossed the boundary from animal to man.



## PART TWO: A CASE HISTORY

### A

1/ While listening to the recording, complete the table:

Name and surname	
Age	
Occupation	
Date of first visit	
Past symptoms	
Past medical facts	
Appetite	
Weight	
Symptoms and signs on first visit	
Special investigations	
Time of second visit	
Symptoms and signs on 2nd visit	

2/ Use the information in the table to write a paragraph:

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3/ What do you think Dr. Young should suggest?

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**B**

Dr. Young is talking to Dr. Janet White. **Listen to the recording and complete the sentences below.**

- We should exclude \_\_\_\_\_ such as \_\_\_\_\_  
and \_\_\_\_\_

- I'd like to order \_\_\_\_\_ and \_\_\_\_\_

- Depending on the results we may need to consider \_\_\_\_\_ and/ or \_\_\_\_\_

**C**

Dr. White is talking to Mr. Baker.

**1/ Bearing in mind the case history in part 1 and the instructions just given by Dr. Young which questions should you ask the patient?**

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**2/ Complete the table about the topics Dr. White considers and the answers the patient gives:**

Family diseases	
Ecchymosis	
Clotting disturbances	
Blood transfusions	
Jaundice	
Hepatitis	

**3/ Complete:**

"The only other question I need to ask, and it's quite a routine is \_\_\_\_\_

**4/ What was the answer to the question?**

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**5/ What did Dr. White suggest doing then?**

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**D**

Five days later Dr. White is talking to Dr. Young.

**1/ Use the information to write a paragraph about the clinical features found on examining Mr. Baker:**

- pale but not clinically anemic
- two lymph nodes palpable in right axilla
- chest X-ray: clear
- ultrasound: mild mesenteric lymphadenopathy

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**2/ Answer the questions:**

- How was the HIV test? \_\_\_\_\_
- What did Dr. Young suggest doing? \_\_\_\_\_
- What for? \_\_\_\_\_

**LANGUAGE STUDY A**

**1/ Fill in the blanks with the words / expressions below:**

- 1/ John was feeling \_\_\_\_\_ (*tired, unhappy, depressed*) after his long illness.
- 2/ I \_\_\_\_\_ (*explained in a general way*) my reasons for making this decision.
- 3/ I'm getting \_\_\_\_\_ (*bored*) with this arrogant attitude.
- 4/ His new job was to \_\_\_\_\_ (*deal with and find a solution to*) the difficulties in the research department.
- 5/ A tendency to heart disease can be hereditary. So it \_\_\_\_\_ (*tends to occur from one generation to the next*) in the family.
- 6/ I walk to the office every morning to keep \_\_\_\_\_ (*healthy and able to do physical activities without getting tired*).
- 7/ She had a \_\_\_\_\_ (*ecchymosis*) on her leg where the ball hit her.
- 8/ He used to drink heavily but he's \_\_\_\_\_ now (*he will never drink again*).
- 9/ It took a few minutes for my words to \_\_\_\_\_ (*become fully understood*).
- 10/ \_\_\_\_\_ (*I regret to say*) the results are negative.

**put it behind him - fed up - run down - bruise - sink in - sort out - outlined - fit - runs - I'm afraid.**

**2/ Now complete the sentences taken from the case history with the same words. Check your answers by listening to the recording.**

- 1/ I'll send a formal referral letter \_\_\_\_\_ everything that' happened so far.
- 2/ When the news \_\_\_\_\_ a bit, we will have to offer her a test as well.
- 3/ When I met my wife I managed to \_\_\_\_\_
- 4/ Do you get \_\_\_\_\_ easily or do cuts go on bleeding.
- 5/ My wife is getting \_\_\_\_\_ about it.
- 6/ He came to see me a couple of months ago complaining that he was feeling \_\_\_\_\_
- 7/ We don't really know at the moment, but that what we are going to try and \_\_\_\_\_ while you are here.
- 8/ Are aware of any particular diseases that tend to \_\_\_\_\_ in your family
- 9/ Oh dear, \_\_\_\_\_ the HIV test is positive.
- 10/ My parents are both fairly \_\_\_\_\_ as far I know.

## **LANGUAGE STUDY B**

**1/ Ask a question to which the given answer would be a reasonable one in this particular context.**

Dr: white: \_\_\_\_\_? **(appetite)**

Mr. Baker: Not very good at all, I'm afraid. I just don't feel like eating at this moment.

Dr. White: \_\_\_\_\_? **(weight)**

Mr. Baker: Yes, almost 3 kilos I think.

Dr. White: \_\_\_\_\_? **(other symptoms)**

Mr. Baker: Nothing else that I am aware of.

Dr. White: \_\_\_\_\_? **(past serious illnesses)**

Mr. Baker: Not really, I have never been in hospital before.

Dr. White: \_\_\_\_\_? **(family diseases)**

Mr. Baker: No, I'm an only child, and my parents are both fairly fit as far as I know.

Dr. White: \_\_\_\_\_? **(bruises easily)**

Mr. Baker: No.

Dr. White: \_\_\_\_\_? **(blood transfusion/Jaundice)**

Mr. Baker: No, I have never had blood transfusion or jaundice.



**Requesting description: WHAT.....LIKE ?**

**“What are the headaches like?”**

**Ask similar questions to request description.**

**a-** Describe the taste \_\_\_\_\_

**b-** Describe the stomach pain \_\_\_\_\_

**c-** Describe his appetite \_\_\_\_\_

**d-** Describe the child’s breathing \_\_\_\_\_

**e-** Describe your first pregnancy (use the past) \_\_\_\_\_

**f-** Describe the baby’s cough \_\_\_\_\_

**TRANSLATION**

**SYMPTOMS AND SIGNS OF AIDS**

A broad spectrum of sequential clinical problems may occur after infection with HIV. Immediately after infection and after a prolonged period (several years in a small number of persons), there may be an antibody-negative asymptomatic carrier state during this time, the virus may be truly latent or reproducing so slowly that it is not recognized by the immune system. However, highly sensitive techniques for amplifying HIV nucleic acids (the polymerase chain reaction) can detect the infection even when no antibody to HIV is detectable. Within 2 to 4 weeks after infection, a minority of patients have a 3-to-14-day acute mononucleosis-like syndrome (primary HIV infection) with fever, malaise, rash, arthralgias and generalized lymphadenopathy, usually followed in 1 to 3 months by seroconversion for antibody to HIV. Subsequently, these manifestations disappear (although lymphadenopathy usually persists) and the patients may become antibody-positive asymptomatic carriers. During the asymptomatic, seropositive stage, most patients have reduced numbers of CD4 + lymphocytes. Some of these patients develop mild, remittent symptoms and signs that do not meet the definition of AIDS or AIDS-related complex (e.g. persistent generalized lymphadenopathy).

The AIDS–related complex (ARC) is a constellation of chronic symptoms and signs manifested by HIV-infected persons who have not had the opportunistic infections or tumors that define AIDS. These symptoms, signs and laboratory abnormalities include generalized lymphadenopathy, weight loss, intermittent fever, malaise, fatigue, chronic diarrhea, leucopenia, anemia, immune-mediated thrombocytopenia, and oral thrush (candidiasis). A severe manifestation of ARC is the wasting syndrome (called the slim disease in Africa), which is characterized by progressive weight loss < than 15% of body weight.

AIDS is defined by the development of opportunistic infections and/or certain secondary cancers known to be associated with HIV infection such as Kaposi’s sarcoma and non-Hodgkin’s lymphoma, especially primary lymphoma of the brain. Many patients are first seen with a life-threatening opportunistic infection or malignancy without the preceding symptoms of ARC.

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**DCEM1**

**UNIT FIVE**  
**RESPIRATORY**  
**MEDICINE**

## LISTENING PRACTICE

### 1/ Answer the questions:

a- Who is Dr Fisher?

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b- Who is Dr Fisher with? Where?

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c- What are according to Mr. Austin the major symptoms of respiratory diseases?

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d- What are the two remarks Dr Fisher makes about clubbing and dyspnea?

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e- What remark does Mrs Jones make about the pain as a symptom?

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### 2/ Complete the text below by reference to the conversation:

a- The history in a patient with chest disease should start with a history of \_\_\_\_\_ then come other things including a history of \_\_\_\_\_ to diseases like \_\_\_\_\_ or occupational risk factors such as exposure to \_\_\_\_\_ and other \_\_\_\_\_

b- The length of the history is important because a short history may suggest diseases such as \_\_\_\_\_

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c- It is important to know whether the cough is \_\_\_\_\_ or not, and if so what \_\_\_\_\_ and how much \_\_\_\_\_ is being produced.

d- The relationship of the symptoms to \_\_\_\_\_ is essential. If the patient complains of orthopnea, then \_\_\_\_\_ is more likely. If wheezing starts during or at the end of exercise, then the patient may be suffering from \_\_\_\_\_

e- Drugs such as \_\_\_\_\_ may precipitate asthma in some patients and so can \_\_\_\_\_ and the \_\_\_\_\_ sometimes.

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**3/ While listening to the recording, complete the table below:**

Name + Age + Occupation	
Past medical facts	
Present complaint	
Other symptoms	
Habits	
Drugs	

**4/ Use the information to write a paragraph:**

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**5/ Fill in the blanks with the words / expressions from the case history:**

Mrs Rose looks \_\_\_\_\_ she is slightly \_\_\_\_\_ at rest, but I didn't think she was particularly \_\_\_\_\_ nor did I think she was \_\_\_\_\_  
On examining the chest there were reduced \_\_\_\_\_ to percussion and markedly reduced \_\_\_\_\_ Tactile \_\_\_\_\_ and \_\_\_\_\_  
were also reduced in the \_\_\_\_\_ area. Mrs Rose also has quite marked \_\_\_\_\_

**6/ Answer the questions**

**a-** What clinical signs and symptoms may lead the physicians to make the diagnosis of a pleural effusion?

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**b-** What do the students see on the chest X-rays?

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**c-** What sign is present on the chest X-ray that the two students do not see immediately and what diagnosis does it lead to?

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**7/ True or false? Correct the false statements:**

- a- Mrs. Rose's story is rare \_\_\_\_\_
- b- Mrs. Rose's husband used to work with asbestos \_\_\_\_\_
- c- Mrs. Rose was contaminated because she worked with her husband \_\_\_\_\_
- d- Mrs Rose was x-rayed at the time of her husband's illness \_\_\_\_\_
- e- Dr Fisher asks the students to think of the rare conditions before diagnosing the common things \_\_\_\_\_

**LANGUAGE STUDY**

**A/ Fill in the blanks with the words / expressions below:**

- Analysis of the patient's \_\_\_\_\_ is necessary to make the diagnosis of TB. (*expectoration*)
- Fever is one of the first signs that an infection may be \_\_\_\_\_ (*starting*)
- \_\_\_\_\_ to percussion of the chest wall suggests that a pleural effusion might be present. (*unclear sound*)
- The incision is probably infected if the \_\_\_\_\_ is red and swollen. (*border*)
- We haven't got time to study the results in details, so I'll just \_\_\_\_\_ the important findings. (*read quickly*)
- It's always difficult to \_\_\_\_\_ of a patient's cancer. (*tell*)
- An exercise bicycle is often used to measure the cardiac response to \_\_\_\_\_ (*effort*)
- For economic reasons, the health authority is very \_\_\_\_\_ preventive measures. (*find it very interesting*)
- A psychiatrist was called in to determine the \_\_\_\_\_ causes of the patient's depression. (*basic*)
- If the liquid is viscous, it may be difficult to \_\_\_\_\_ (*drain off by surgical puncture*)
- Even in the healthy people, .....is common after climbing stairs very quickly (*hissing or whistling sound during breathing*)
- Always merry and bright is a good \_\_\_\_\_ to remember for those who tend to be pessimistic (*phrase used as a guide or rule of behavior*)

**coming on - sputum - underlying - keen on - tap - wheezing - exertion - motto - dullness - edge - break the news - run through**

**B/ Now complete the sentences taken from the text with the same words / expressions:**

- We will \_\_\_\_\_ the essential in the next few minutes.
- I suppose the main ones are cough, hemoptysis, dyspnea and \_\_\_\_\_
- I'm not very \_\_\_\_\_ using the term dyspnea.
- We need to ask what color and how much \_\_\_\_\_ is being produced.
- The relationship of the symptoms to \_\_\_\_\_ and other things is essential.
- And if wheezing \_\_\_\_\_ during or at the end of exercise, then the patient may be suffering from exercise-induced asthma.
- On examining the chest, there were reduced movements with \_\_\_\_\_ to percussion.
- Well, she has had her effusion \_\_\_\_\_, it was much larger when she first came in.
- Is there a pleural plaque just at the \_\_\_\_\_ and slightly above the effusion?
- Now I have the unpleasant task of \_\_\_\_\_ this \_\_\_\_\_ to her and her daughter.
- It was the history and the chest X-ray which really gave the important information that led to the \_\_\_\_\_ cause being found.
- "*Common things occur commonly*" is a good \_\_\_\_\_ to remember.





**DCEM1**

# **UNIT SIX**

## **CANCER**



**II/ C - Tick TRUE or FALSE:**

- 1- The lump in Betty's neck was growing fast.  TRUE  FALSE
- 2- Betty's father died of a 4th stage prostate cancer.  TRUE  FALSE
- 3- Betty's tumor was misdiagnosed as benign.  TRUE  FALSE

**D - Give the accurate medical term:**

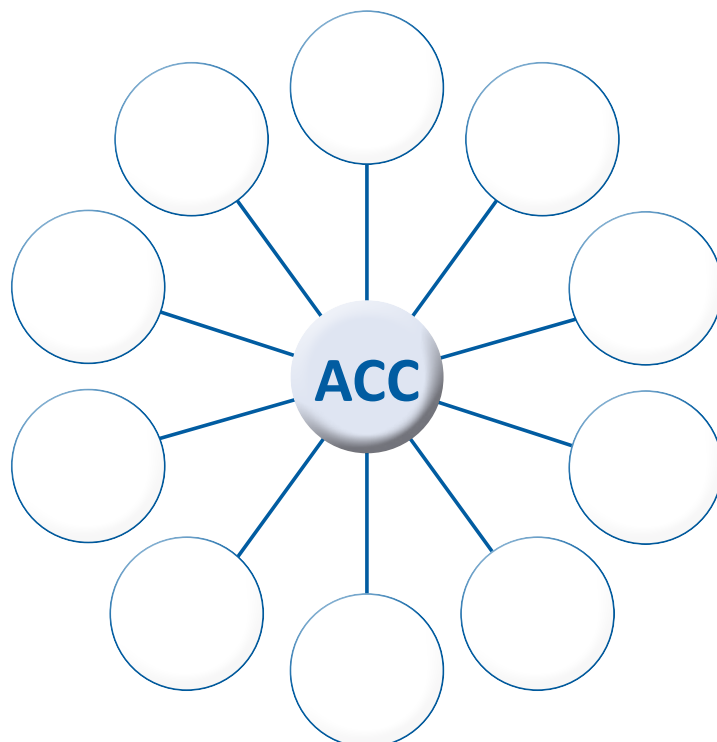
- 1- ACC: \_\_\_\_\_
- 2- a medical document written by a pathologist, a doctor who specializes in interpreting laboratory tests and evaluating cells, tissues, and organs to diagnose disease: \_\_\_\_\_
- 3- a treatment planning approach in which a number of doctors who are experts in different medical specialties review and discuss the medical condition and treatment options of a patient. Also called a multidisciplinary opinion: . \_\_\_\_\_
- 4- hardening of the arteries: \_\_\_\_\_
- 5- sensory receptors on the surface of the tongue or in the mouth that send signals to the brain when stimulated by specific chemicals, producing the sense of taste: \_\_\_\_\_

**E - Fill in the blanks:**

At the second operation, we remove the muscles immediately \_\_\_\_\_ to where her original removal was, the \_\_\_\_\_ in the area and then the \_\_\_\_\_ well beyond that original area; try to remove as much \_\_\_\_\_ as we could that could without hurting Betsy with a surgical dissection.

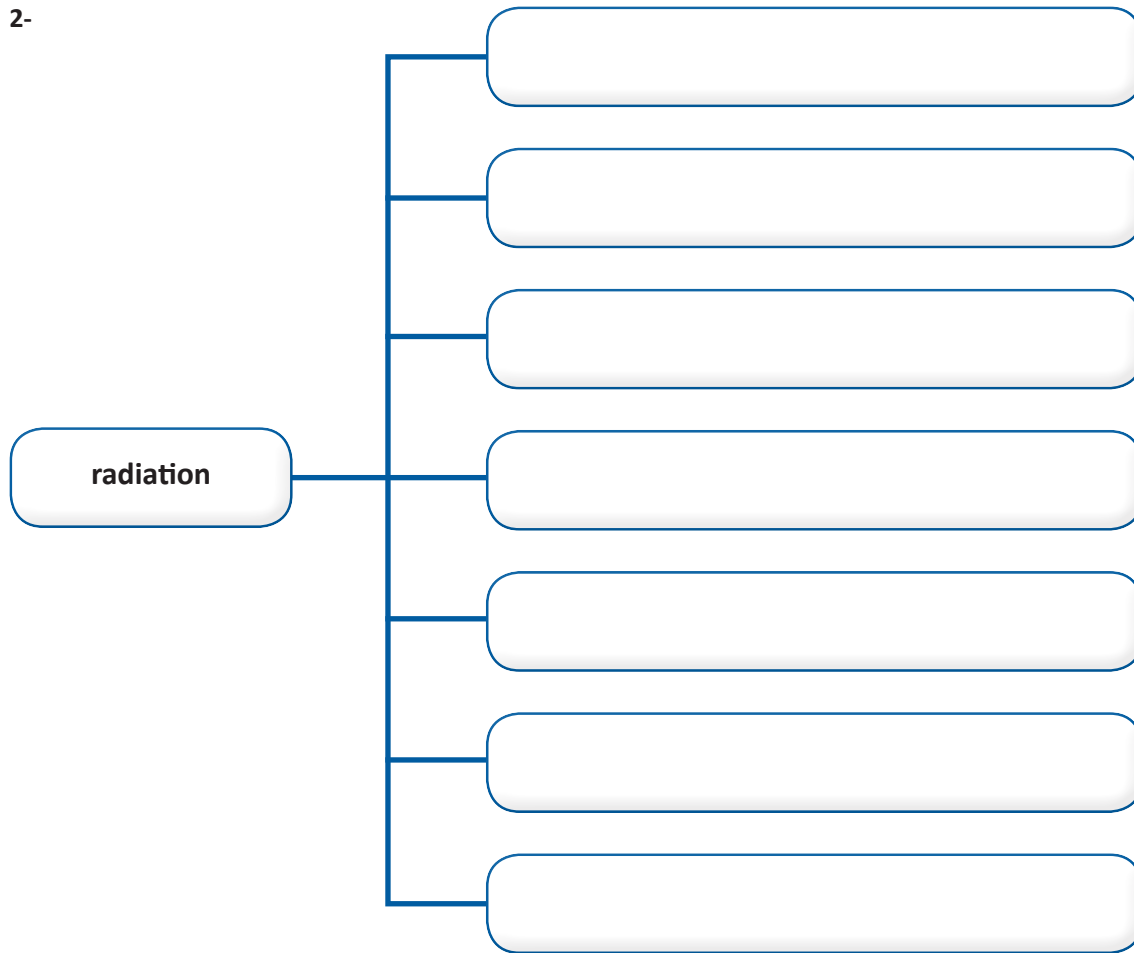
**F - Fill in the diagrams:**

1-





2-



**A - PRESENTATION**

**Answer the questions**

1- What's the subject of today's talk?

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2- How is epidemiology defined?

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3- What are the different types of epidemiology? What are they concerned with?

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4- How common is cancer in the U.S.A.?

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5- Complete the statements about the incidence and mortality of cancer in the U.S.A.

\*Lung cancer is today \_\_\_\_\_ and has gone up \_\_\_\_\_ since 1950.

\*Deaths from breast cancer and cancer of the colon and rectum \_\_\_\_\_

\*Deaths from prostate cancer and melanoma \_\_\_\_\_

\*Deaths from stomach cancer and cancer of the uterus \_\_\_\_\_

6- What do the patterns of cancer incidence depend on?

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7- Complete the statements about the benefits that can be obtained from epidemiology:

- Epidemiological studies provide \_\_\_\_\_

e.g. Asbestos \_\_\_\_\_

Cigarette smoking \_\_\_\_\_

- Epidemiological studies of migrant populations indicate that environmental factors

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- Epidemiological studies show that cancer is to some extent

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**Review: Listen again and pick out the expressions used by the speaker to introduce his subject:**

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## B - QUESTIONS SESSION

1. Listen to the first question and try to anticipate the lecturer's answer.

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2. Can you repeat Pr. Crawley's own definition.

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3. What does the number 80 represent?

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4. Complete the table

Type of cancer	Countries of high Incidence	Countries of low incidence

5. What do the numbers 8 and 15 represent?

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## LANGUAGE FOCUS

In the question session we heard different ways of giving examples. Listen to the tape again and pick them out.

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### Introducing visuals

On the slide I have summarized the first phase.

The next slide illustrates the features of phase II studies.

As shown on the next slide, they should not be terminally ill.

If you look at this chart, you can see that these studies.....

Notice that the new treatment is sometimes added on.

### Marking transition

Having said that, let me turn to the question of diagnosis.

The next point I'd like to talk about is laboratory tests.

Moving on to the next topic, blood tests.

Let's go on now to the next topic, blood tests.

This brings me to my final point which concerns diagnosis.

Ce poly a ete telechargé depuis [med-tmss.blogspot.com/2016/08/cours.html](http://med-tmss.blogspot.com/2016/08/cours.html) | Page Fb : [www.facebook.com/Faculte.de.Medecine.TMSS](https://www.facebook.com/Faculte.de.Medecine.TMSS)

### **Generalizing**

Generally speaking cancer presents in three different ways.  
As a rule, this will produce symptoms.  
These symptoms commonly include seizures, headaches.....  
By and large, these can be grouped under one heading.  
So, on the whole, cancer presents in three different ways.

### **Adding information and indicating hierarchy**

Furthermore, early results are encouraging.  
In addition, the gene has produced regression in mice.  
More importantly, true gene therapy is also getting under way.  
The evidence is convincing, but, I would add, fairly modest.  
What is more, hairy cell leukemia is a rare condition.

### **Stalling**

I'm glad you brought that up. It certainly deserves attention.  
Yes that's a very good question.  
I think you raised a good point.

### **Interrupting**

Excuse me. Do you think you could see the microphone?  
If I may just make a comment, I agree for myelotoxic drugs.  
Sorry, could you just interrupt for a moment.

### **Avoiding giving an answer**

I haven't got enough information to develop this point.  
I'm afraid there isn't time to go into the details.  
That's an interesting question, but it's a separate issue.  
If you like, we could perhaps discuss this after the session.

### **Making suggestions**

Why don't you send him a copy of your CV.  
What about putting an ad in CII?  
I think you should target your search.  
If I were you, I'd write up a list of ten universities.  
It will be better if you wait six weeks from now.

### **Referring back**

We'll recall this morning we talked about viruses.  
And we also mentioned the Rous sarcoma virus.  
..... the viral oncogenes which we talked about a moment ago.  
The oncogene, which I'm sure you remember, we call v-src.  
.... the DNA damaging agents which we discussed earlier.

### **Indicating degrees of certainty**

What we believe is that they come about by recombination.  
It's likely that a relatively harmless retrovirus infected a cell.  
Chromosomal breakage may possibly involve proto-oncogenes.  
And there could be quantitative amplification.

### **Summarizing and concluding**

To sum up this session, let me say that there are two methods....

To conclude the session, I'll say a word about other agents.

By way of conclusion, .....

Finally I'd like to summarize by saying that.....

Finally, in conclusion, we can say that .....

### **Ending a conversation**

Anyway, I's been nice talking to you, Dr. Cohen.

I won't keep you any longer. I'm sure you've got things to do.

May be we should get going. Dr. Raids is ready to start.

I'm meeting my sister so I'd better be on my way.

### **Arranging to meet**

Let's meet at 7.00 in the lobby of your hotel

I'm expecting a call. So we could make it quarter to eight?

I'll meet you there at around 8.00

Ok then, I'll see you two in the lobby at 7.00

Shall we say 7.45, in the lobby then?

### **Inviting**

Why don't you come and see me at the institute?

What about coming on Thursday?

I wondered if you would be interested in visiting us.

Would you like to come and visit us sometime?

Can I invite you to attend?

**A-PRESENTATION**

1. *The chairman introduces to his audience the last session of the day.*

The following speaker will be Dr. Nathan Cohen who as planned will give a brief overview of the clinical manifestations of cancer.

**Using the information above try to reconstruct the chairman’s intervention.**

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2. Then, Dr. Cohen speaks. He thanks the chairman then says that in general the physician discovers cancer in three different ways.

Can you reconstruct Dr. Cohen introduction of the subject?

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3. Listen and find out the three ways Dr. Cohen is alluding to?

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4. In general an asymptomatic tumor is discovered in three different ways. Listen and tell what they are:

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5. The second way in which cancer presents is called “a physical mass effect” listen and tell what is meant by that.

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6. Depending on the examples given by Dr. Cohen, complete the table below.

Clinical features	Cough		Dysuria		Pain		Haematuria & Hemoptysis
Related organs		Esophagus		common bile duct		CNS	



## B/ QUESTION SESSION

You are the chairman, you are opening the question session. You want also to say that unfortunately you have time for one or two quick questions. What would you say? Now listen and compare.

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1/ Listen to Dr. Sinh's question. What is meant by that?

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2/ Does Dr. Cohen answer the question straight away?

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3/ Listen to Dr. Sinh's explanation. What is meant by that?

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4/ Listen to Dr. Cohen's answer. What is it like?

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5/ Listen to the second question. What is it about?

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6/ How does Dr. Cohen's answer it?

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7/ What is the problem raised by the chairman about?

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8/ Does Dr. Cohen have an answer to the question?

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**Now time is up. You are the chairman. This is the last session in the afternoon. Everybody will meet back in the same place the following day at 9.00 a.m. Speak. Now listen and compare.**

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## LANGUAGE FOCUS

Dr. Cohen did not answer the questions straight away. Listen again focusing on the expressions used to avoid giving a clear answer or to play for time.

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## TRANSLATION

### PROCEDURES UTILISEES POUR LE DIAGNOSTIC ET LE CLASSEMENT PAR STADE DES NEOPLASIES

Un traitement anticancéreux ne doit en aucun cas être utilisé sans diagnostic anatomopathologique certain, p.ex. par une cytologie par aspiration ou une biopsie, ou par une biopsie-exérèse, par une biopsie endoscopique ou une biopsie médullaire. Le classement par stade histologique nécessite des échantillons de tissus, et il est utile pour mieux définir l'étendue de la maladie.

Une fois le diagnostic établie avec certitude, le classement par stade aide à la décision thérapeutique et peut également fournir des éléments pronostiques. Aucune approche unique n'est applicable à tous les cancers. Dans les classements par stade clinique. Les classifications actuellement utilisées sont fondées sur les connaissances de l'évolution naturelle et de la physiopathologie des différents types de tumeurs, associées aux données de l'anamnèse du patient, de son examen clinique et des études non invasives.

Procédures chirurgicales ; La médiastinoscopie a une valeur dans le classement par stades du cancer du poumon non à petite cellule ; si elle montre une atteinte d'un ganglion lymphatique médiastinal controlatéral, le patient ne pourra généralement pas tirer bénéfice d'une thoracotomie et d'une résection pulmonaire.

La biopsie médullaire osseuse est utile pour différencier les métastases médullaires de certains cancers tels que les lymphomes malins ou les cancers bronchiques à petite cellule. La biopsie médullaire est positive dans 50 à 70 % des cas de lymphome malin (nodulaire lymphocytaire peu différencié ou diffus), et détecte une atteinte médullaire dans 15 à 18 % des cas de métastases d'un cancer pulmonaire à petites cellules métastatique.

Le curetage ganglionnaire axillaire lors d'une chirurgie mammaire pour cancer aide à déterminer le risque de récurrence et le bénéfice potentiel des traitements adjuvants.

La laparotomie dans le cancer du colon permet l'acte thérapeutique et la classification préopératoire (laquelle fournit des éléments pronostiques) et est utile pour les décisions thérapeutiques. La classification par stade anatomique permet d'identifier les patients à risque élevés de récurrence, avec invasion de la séreuse par la tumeur (stade B2) ou atteinte lymphatique (stade C). Les patients ayant une atteinte hépatique microscopique (stade D) sont légèrement identifiés.

La laparotomie avec splénectomie fait également partie intégrante du classement par stade de la maladie de Hodgkin lorsque des décisions thérapeutiques sont nécessaires.

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**DCEM1**

**UNIT SEVEN**  
**NEUROLOGY**

**1/ While listening to the recording try to complete the table below:**

<b>Age of patient</b>	
<b>Surname</b>	
<b>First name</b>	
<b>Present complaint</b>	
<b>Past medical facts:</b>	
–Surgical:	
–Psychiatric:	
–Other:	
<b>Family past medical facts</b>	
<b>Physical examination:</b>	
–General appearance:	
–Temperature:	
–Pulse:	
–BP :	
–Tone & power in four limbs:	
–Sensation:	
–Coordination:	
–Reflexes:	
–Cranial nerves:	
–Visual acuity:	
–Visual field:	
–Eye movement:	
<b>Other useful investigations</b>	
<b>Suspected diagnosis</b>	

**2/ Complete the text below with the information taken from the table:**

The patient is a \_\_\_\_\_ year-old girl who was admitted during the night complaining of \_\_\_\_\_ and \_\_\_\_\_, initially in her \_\_\_\_\_ but then spreading to the whole of her \_\_\_\_\_. She has always been very \_\_\_\_\_ and there's certainly no relevant pat medical, surgical or psychiatric \_\_\_\_\_. However, she did have about \_\_\_\_\_ months ago a strange episode of unexplained \_\_\_\_\_ in her right eye. She was \_\_\_\_\_ to an ophthalmologist, but she did not \_\_\_\_\_ her appointment because the symptoms had completely \_\_\_\_\_.

On examining her, Dr. John found that she looked \_\_\_\_\_, but very tense and was \_\_\_\_\_ . Her pulse was \_\_\_\_\_, regular and her BP was slightly \_\_\_\_\_ at \_\_\_\_\_. Cardiovascular respiratory and abdominal examinations were all \_\_\_\_\_. Neurologically, tone and power in all four limbs were \_\_\_\_\_. Nevertheless, there was \_\_\_\_\_ sensation to light touch, pinprick, vibration and \_\_\_\_\_ in her left lower limb. Her coordination was notably \_\_\_\_\_, but her reflexes appeared to be \_\_\_\_\_ and intact. The cranial nerves seemed all \_\_\_\_\_. The patient's \_\_\_\_\_ still have to be examined properly. A \_\_\_\_\_ will have also to be done, but only after checking some of the other possibilities and excluding a \_\_\_\_\_ lesion. It may be interesting to notice that the patient's mother has got severe \_\_\_\_\_ because it appears that there is a degree of genetic \_\_\_\_\_ to the condition and there certainly is an \_\_\_\_\_ risk of \_\_\_\_\_ in the first degree \_\_\_\_\_ of patients with the disease.

## LANGUAGE STUDY

### IMPERSONAL CORRECTION AND CRITICISM

(Past reference): .....should have + past participle

**Notice how the doctor criticizes the fact that his patient did not receive an explanation of the need to continue prophylaxis:**

*Well it certainly should have been explained that way.*

**Use the same passive construction to express the following more impersonally.**

**a-** The person concerned should have told you to continue taking the drug for at least four weeks after leaving Bangladesh.

---



---

**b-** You shouldn't have broken the news to her so abruptly.

---

**c-** The person responsible should have treated her with oral tetracycline for two weeks or four.

---

**d-** The nurse should have sent the film directly to the ward.

---

**e-** The doctor should not have prescribed the personal Fansidar for her without supplementary folic acid.

---

**Expressing habituation**

**“.....get used to.....”**

**Notice how the doctor advises his patient to acquire the habit of taking the antimalarial drug at regular intervals:**

**Doctor: *Start on the pills a few days before you leave, so that you get used to taking them regularly.***

**Use “get used to” to give the idea of habituation in the exercise below:**

**a-** Acquiring the habit of self-injection is much easier with the new “jet apparatus”.

---

**b-** The procedure may seem a little strange at first, but you will become accustomed to doing it our way.

---

**c-** Although the lipoma is enormous. The patient has become accustomed to it and she categorically refuses treatment.

---

**d-** Let this upset tummy be a reminder to you to acquire the habit of taking your daily dose regularly after meals.

---

**e-** If I speak to your husband privately, perhaps I can help him to become accustomed to the idea that you are determined to have this baby.

---

**f-** Since the death of his wife, the patient is having great difficulty in becoming accustomed to living alone.

---

**Sequencing past events: ..... had/d + past participle**

**Put the verbs between brackets in the simple past or the past perfect:**

A 29-year-old housewife (present) \_\_\_\_\_ to her family doctor with the complaint that for the last two weeks she (notice) \_\_\_\_\_ a retrosternal pain of increasing severity. The symptom (start) \_\_\_\_\_ following an upper respiratory tract infection with headache, nasal congestion and a sore throat. She (describe) \_\_\_\_\_ the pain variously as stabbing or sore. There was no dysphagia, but she (felt) \_\_\_\_\_ unwell during this time. She (take) \_\_\_\_\_ her temperature on several occasions but it (be) \_\_\_\_\_ normal. In the past she (enjoy) \_\_\_\_\_ good health. She had two children, and (be) \_\_\_\_\_ on the contraceptive pill for three years without any side effects.





**DCEM1**

# **APPENDIX**

## VOCABULARY OF MEDICAL SIGNS AND SYMPTOMS

### MORPHOLOGICALLY DISSIMILAR

#### FRENCH - ENGLISH EQUIVALENTS

- Absent breath sounds: silence respiratoire
- Absolute dullness: matité franche
- Ache: douleur continue
- Addiction : dépendance
- Angular stomatitis : perlèche
- Asthmatoid wheeze : sifflement pseudo-asthmatique/ sibilance asthmatique
- Bachache : dorso-lombaire
- Bald area : plaque (tache) alopecique
- Baldness : cavité
- Barking cough : toux aboyante
- Barrel chest: thorax en tonneau (globuleux)
- Belching (eructation) : éructation (rot)
- Bell's phenomenon : signe de bell
- Blackout : voile noir
- Blindness : cécité
- Blink reflex : reflexe optico-palpébral
- Blister : phlyctène
- Bloating: ballonnement
- Blood-stained sputum: crachat sanguinolant
- Blood-streaked sputum: crachat strié de sang
- Blurred vision: vision trouble
- Board-like rigidity: ventre de bois
- Bigginess: empatement
- Brassy cough: toux rauque
- Brawny oedema: oedeme dur
- Bulging: voussure / bombement
- Butterfly rash: erytheme en papillon
- Caput succedenum: bosse sero-sanguine
- Cardiac murmur: souffle cardiaque
- Chest pain: douleur thoracique / algie thoracique
- Chief complaint : motif de consultation
- Chilblain : engelure
- Chill : frisson
- Choking : suffocation
- Cloudy urine : urine trouble
- Clubbing: hypocratisme digital
- Cold intolerance: frilosité
- Collapse / circulatory collapse: collapsus (cardio-vasculaire)
- Congenital defect / abnormality / anomaly: malformation (anomalie) congenitale
- Continuous fever: fièvre continue / en bateau
- Cranial bruit: souffle intracranien
- Dandruff: pellicule
- Day blindness: nyctalopie
- Deafness: surdité
- Death rattle: rale agonique
- Deep reflex: reflex tendineux
- Delusion: idées délirantes
- Dementia : démence
- Diaper rash : érythème papulo-érosif (érythème fessier du nourrisson)
- Diaphoresis (profuse sweating) transpiration (sudation) profuse
- Dimpling : capitonage
- Discharge : écoulement (perte)
- Dislocation : luxation
- Distended bladder : globe vésical
- Dizziness (giddiness) : étourdissement (sensation vertigineuse)
- Drowsiness : somnolence
- Dullness : matité
- Dull pain : douleur sourde
- Earache (otalgia) : otalgie

- Effusion : épanchement
- Elation : exaltation
- Exquisite pain : douleur exquise
- Faintness : lipothymie
- Fine rale : râle crépitant
- Flail arm : épaule battante
- Flail chest : volet costal (volet thoracique)
- Focal seizure : crise épileptique partielle / focale
- Girdle pain : douleur en ceinture
- Guarding : défense (musculaire)
- Halitosis : mauvaise haleine
- Heatburn : aigreur / brûlures gastriques
- Hemiplegic gait : démarche en fauchant
- Herniation : protrusion herniaire (formation d'une hernie)
- Hoarseness : enrouement (raucité de la voix)
- Hot flush : bouffée de chaleur
- Hyperventilation : hyperpnée
- Ileus : occlusion intestinale (ileus)
- Impaired resonance : (impaired percussion note) : submaté (matité relative)
- Impotence : impuissance
- Intestinal angina : angor intestinal (angor abdominal)
- Inverted nipple : invagination du mamelon
- Jaundice (icterus) : ictère (jaunisse)
- Joint stiffness : raideur articulaire
- Knee-chest position : position genou-pectorale
- Knifelike pain : douleur en coup de poignard
- Kopliks spots : taches de koplik (signe de koplok)
- Lacrimation : larmolement
- Lagophthalmos : lagophthalmie
- Lameness (limp) : boiterie (claudication)
- Lightning pain (shooting pain) : douleur fulgurant (douleur en éclair)
- Light palpation : palpation superficielle
- Light reflex : réflexe photomoteur
- Locked knee : blocage du genou (genou bloqué)
- Low back pain : lombalgie
- Machinery murmur: soufflé tunellaire
- Medium rale: rale sous-crépitant
- Mental retardation : arriération mentale (oligophrenie)
- Mittlesmerchz : syndrome intermenstruel
- Molding : modelage du crâne
- Mood : humeur
- Moon face : faciès lunaire
- Mottling : marbrure
- Muscle weakness : diminution de la force musculaire
- Nail biting : onychophagie
- Night sweats : sueurs nocturnes
- Nocturia: polyurie nocturne
- Nuchal rigidity (neck rigidity; neck stiffness): raideur de la nuque
- Numbness: engourdissement
- Ostipation: constipation opiniâtre
- Obtundation: obnubilation
- Oligomenorrhea: spaniomenorrhée (allongement pathologique du cycle au delà de 35 jours)
- Patellar reflex (knee jerk) : réflexe rotulien (réflex quadriceps)
- Phlegm : mucosité
- Pleural friction rub : frottement pleural
- Premenstrual tension : syndrome prémenstruel
- Productive cough , (loose cough : moist cough) : toux productive grasse
- Projectile vomiting : vomissement en jet, en fusée
- Referred pain : douleur projetée (douleur rapportée)
- Relapsing fever : fièvre récurrente
- Renal colic : colique néphrétique
- Rest pain : douleur en decubitus (douleur au repos)
- Restrained breathing : respiration pleurétique

- Rest tremor :tremblement de repos
- Retraction : tirage
- Ronchus : rale continu
- Rigor : frisson solennel
- Rusty sputum : crachat rouillé
- Scratch mark : lésion (trace) de grattage
- Shifting dullness : matité mobile
- Sloughing : escarrification
- Slough: escarre
- Smooth tongue: langue dépapillée
- Splitting of the heart sound : dedoublement d'un bruit du cœur
- Striae: vergetures
- Systolic murmur: souffle systolique
- Tenderness : douleur provoquée (douleur à la pression : sensibilité au toucher)
- Thready pulse : pouls filiforme (pouls filant)
- Thrill : frémissement
- Throbbing pain : douleur pulsatile
- Tingling : picotement
- Tinnitus : acouphène (bourdonnement d'oreille : tinnitus)
- Urgency : miction impérieuse
- Urinary output : diurèse
- Venous hum : souffle veineux (bruit de diable)
- Vocal fremitus : vibrations vocales
- Wart : verrue
- Water brash : regurgitations acides
- Word blindness : cécité verbale (alexie)
- Word deafness: surdité verbale
- Wryneck (torticollis): torticollis

## PREFIXES / SUFFIXES

**-a** prefix meaning “absent”, “without”

- \* abulia : in psychiatry absence of will power
- \*afebrile: of normal temperature
- \*anosmia: absence of the sense of smell.

**Adeno-** a prefix meaning “relating to a gland”

- \*adenitis: inflammation of a gland
- \*adenoma: a tumor of gland tissue
- \*adenocarcinoma: carcinoma of gland tissue

**Chol-** : relating to bile

- \*cholangitis: inflammation of the tubes leading the bile from the gallbladder to the duodenum.

**Cholecyst-** : relating to the gallbladder

- \*cholecystectomy: surgical removal of the gall bladder.
- \*cholecystogram: an x-ray picture of the gall bladder.
- \*cholelithiasis: stones in the gall bladder.

**Chondro-**: relating to cartilage

- \*chondritis: inflammation of the cartilage.
- \*chondroma: a benign tumor of the cartilage

**Colpo -**: relating to vagina

- \*colporaphy: the operation of suturing the vagina
- \*colporrhea: vaginal discharge

**Dacryo-** : relating to tear fluid

- \*dacryoadenitis: inflammation of the lacrimal gland
- \*dacryocystitis: inflammation of the lacrimal sac, which is part of the duct system draining the tear fluid to the nose.

**Dext-** : a prefix meaning on the right side

\*dextrocardia: a congenital condition in which the heart is situated to the right side of the chest.

**Dys-** : bad / faulty / difficult / painful

\*dysarthria: difficulty of speech

\*dysparunia: painful or difficult sexual intercourse

**-ectomy** : a suffix meaning surgical excision or removal

\*vasectomy: surgical cutting and removal of the vas deferens as a method of sterilization.

\*thyroidectomy: surgical removal of all or part of the thyroid gland.

**Encephalo-** : relating to the brain

\*encephalography: an x-ray examination of the brain

\*encephalitis: inflammation of the brain

**Endo-** : inside or internal

\*endogenous: of a condition due to causes which have arisen within the body itself.

**Entero-** : relating to the intestine

\*enteritis: relating to the intestine

\*enterostomy: surgical construction of an artificial opening between the intestine and the abdominal wall.

**Epi-** “above” or “over”

\*epidermis: the outer layer of the skin

\*epigastrium: the upper part of the abdomen

**Eu-** “good” “normal” “satisfactory”

\*eugenic: the science dealing with the genetic improvement of the human race.

\* euthanasia: a quiet painless death

**Exo-** “outside” or “external”

\*exotosis: a benign growth of bone projecting from the surface of normal bone.

\*exophthalmos: a condition in which the eyeballs protrude

**Extra-** “beyond” “outside” or “additional”

\*extrasystole: a single beat of the heart additional to its normal rhythm.

\*extravasation : the escape of fluids such as blood, serum or lymph from vessels into body tissues.

**Glosso-** a prefix relating to the tongue

\*glossitis: inflammation of the tongue

\*glossopharyngeal nerve: the ninth cranial nerve, it is concerned with the muscles of swallowing and the sense of taste.

**Hemi-** a prefix meaning “half”

\*hemiparesis: slight or partial paralysis affecting one side of the body.

\*hemianopia: a defect in half the visual field of an eye.

**Hyper-** “excessive”, “abnormally increased”

\*hyperacusis: abnormally acute hearing or sensitivity to sounds.

\*hyperaesthesia: abnormally increased sensitivity of an organ mainly used when referring to the skin’s sensitivity to touch, pain or heat.

\*hyperhidrosis: excessive sweating

**Hypo-** “beneath” or “deficient in”

\*hypothesia: abnormally lowered nerve sensitivity of an organ

\*hypomenorrhea: reduced duration or amount of blood flow in menstruation

**Hystero-** relating to the uterus:

\*hysterectomy: surgical removal of the uterus

\*hysterolaparatomy: abdominal hysterectomy

\*hysterocolpectomy: vaginal hysterectomy

**Inter-** “between”

\*intercostal: between the ribs

\*interdigital: in the space between the adjoining toes or fingers.

**Intra-** “inside”, “within”

\*intracranial: within the skull

\*intravenous: within or into a vein.

**Kerato-** relating to the cornea or relating to hard or horny tissue.

\*keratosis: hard growth such as a wart.

**Leuco-** “white”

\*leucocytes: white blood cells

\*leuchorrhoea: an excessive white discharge from the vagina.

**My(o)-** relating to muscle

\*myalgia: pain in the muscle

\*myoma: a tumor of a muscle

\*myopathy: any disease of the muscle

**Myelo -** : relating to the marrow / spinal cord

\*myelitis : inflammation of the spinal cord

\*myelocoele: protrusion of the spinal cord through a defect in the vertebra

**Nepbro-** : relating to the kidneys

\*nephroblastoma: a cancerous tumor of the kidney

\*nephrolithiasis: stones in the kidneys

**Odont-** : relating to the teeth

\*odontology: dentistry

**Oligo-** : “few” or “little”

\*oligospermia: deficiency of spermatozoa in the semen

\*oliguria: decreased production of urine

**-oma** : a suffix meaning “tumor”

**Ophalo-**: a prefix relating to the navel

**Onco-**: relating to tumors

\*oncology: the study and treatment of tumors

**Oopho-**: relating to the ovaries

\*oophorectomy: surgical removal of the ovaries

\*oophoritis: inflammation of an ovary

**Orchi-**: relating to the testis

\*orchidectomy: surgical removal of a testis

\*orchidopexy: surgical correction and fixation in the scrotum of an undescended testicle.

\*orchitis: inflammation of the testis.

**Ortho-**: “straight” or “correct”

\*orthodontics: dentistry concerned with the correct position and regularity of teeth.

\*orthoptics: treatment by exercise of defects of the eye muscles.

**-osis** : a suffix meaning diseased condition

\*osteoarthritis: osteoarthritis: a chronic disease of the joint

**-ostomy**: an artificial opening

\*colostomy: surgical construction of an artificial opening between the colon and the abdominal wall to permit evacuation of faeces when the anus cannot be used.

\*enterostomy: surgical construction of an artificial opening between the intestine and the abdominal wall.

**Peri-** a prefix meaning “around” or “near to”

\*periphrenic: around the kidney

\*periodontal: relating to the structures around and supporting the teeth.

**-pexy**: a suffix meaning surgical fixation of part of the body.

\*orchidopexy: surgical fixation of an undescended testicle.

**-plegia**: “paralysis”

\*paraplegia: paralysis of the lower part of the body

\*quadriplegia: paralysis of all four limbs.

**-pnea**: relating to breathing

\*apnoea: absence cessation of breathing

**Pyo-** : a prefix meaning “pus”

\*Pyogenic: producing pus

\*Pyorrhoea: a discharge of pus, especially in relation to infection of the gums.

**Sclera-**: a prefix meaning “hard”

\*sclerosis: abnormal hardening of a tissue or organ

\*scleroderma: a collagen disease producing thickening of the skin and other parts of the body, such as the intestinal tract.

**Spleen(o)-** relating to the spleen

\*splenomegaly: abnormal enlargement of the spleen

\*splenectomy: surgical removal of the spleen.

**Stomat-** : relating to the mouth

\*stomatitis: inflammation of the inside of the mouth

**Sub-** : “beneath or “under”

\*subclavian: relating to the region beneath the clavicle

\*subluxation: an incomplete dislocation

\*submental: below the chin

\*subphrenic: beneath the diaphragm

\*subungual: beneath a nail

**Tachy-**: “rapid”

\*tachycardia: a fast pulse rate

\*tachypnoea: abnormally fast breathing

**Teno-**: relating to a tendon:

\*tenoplasty: repair of a tendon by plastic surgery

\*tenotomy: surgical cutting of a tendon

**Thermo-** : “heat”

\*thermophile: easily altered by heat

**Thrombo-** : “clot”

\*thrombophlebitis: inflammation of a vein, with the formation of a thrombus

**Tomy-** “surgical incision” or “cutting”

\*thoracotomy: surgical opening of the chest wall

\*craniotomy: surgical opening of the skull

**Tricho-**: “hair”

\*trichobezoar: bezoar composed of hair

\*trichophyton: a fungus which tends to attack the hair and nails

**Xero-**: “dry”

\*xeroderma: abdominal roughness and dryness of the skin

\*xerophthalmia: abnormal dryness of the eye.

## ABBREVIATIONS IN PRESCRIPTIONS

**a.c.** : before food

**b.i.d.** : twice a day

**o.d.**: every day

**o.m.**: every morning

**o.n.**: every night

**t.d.s.** tid: three times a day

**q.d.s.** qid: four times a day

**S.O.S.** “if necessary” this usually means that the drug is to be administered only once if necessary.