

TOPICS FOR DISCUSSION

STUDENT'S BOOK

快酷英语

Prepared by North American Language Academy (NALA) for gEnglish
Written by James Curt Jaffe

Copyright © 2016
Great English Corporation
快酷英语

Preface

This is a collection of articles for students and teachers to read and study together. A principal aim of this collection is to generate discussion and conversation in class. I have tried to keep it at least reasonably challenging for the broad middle of the spectrum without either boring the students to tears or causing their brains to leak painlessly from their ears. Use and enjoy; if not, put down some newspaper for the puddle!

Curt

1. Hand Washing.

When it is winter in the Northern Hemisphere, the cold and flu season (November through February) comes upon us. Many are quite familiar with the “persistent cough” that just won’t go away. While leaving the doctors of the world to take care of prescribing the preventatives, antibiotics and the like, the rest of us need to follow a set of standards to stop the spread of the bugs from one person to another. Some can be spread by coughing or sneezing, which is called “airborne” transmission. The other most common means is by “contact”, where an infected person may sneeze into their hands, touch a doorknob or handle, or even a water or soap dispenser. So what can we do? How can we prevent spreading these diseases? One of the main means, and likely the easiest, is something we were taught as children – hand washing.

Children the world over have been and always will be taught to wash their hands before and after eating, before and after going to the toilet, and things like playing outside. So we remind them, “...don’t forget to wash your hands!” Now watch if you can, from a hidden viewpoint. How long do they wash? Some will just quickly splash their hands with water from the sink, which is completely ineffective. So we must use a standard, one easy to remember for children as well as adults. And then is the question of how long? Many healthcare professionals use 30 seconds of thorough scrubbing, and sing the birthday song once and then repeat it. Don’t be shy, sing it out loud!

Vocabulary

1. Medication
2. Prescription
3. Prevention
4. Hand washing
5. Barrier

Discussion Questions

1. What are prescription drugs, and who can request them for us? Can they be dangerous?
2. Through or by what methods of transmission might we become infected?
3. What are simple ways, out in public, that we can protect ourselves? Which is most effective?
4. As for the other most common means of transmission, which are most efficient?
5. Why are children and the elderly most commonly infected?

Overuse of Antibiotics.

Are antibiotics being overused? Many think so, and there is growing evidence to back this claim. Antibiotics – or, to use the more correct term, antimicrobials – since the early part of the 20th century, have been a godsend to those whose immune systems are under attack from one of these organisms. As is the case with many similar medical maladies, the very young, very old, and infirm are the most at risk. But as more and more antibiotics are prescribed every day around the world, why do they seem to be less effective from one incidence to the next? There are no good answers to this and other similar questions that are starting to be asked. Let's take a look at a few commonly held misconceptions.

1. Any antibiotic will work, so just take any one of them.
 - a. Incorrect. As with any other organism on Earth, no two are exactly the same.
2. Antibiotic or antiviral – they're all the same; either one will work, no matter which you use.
 - a. This is also incorrect. Viruses are more complex and more virulent (strong).
3. A splash of water or just 3-4 seconds of soap is protection enough.
 - a. Wrong again. 30 seconds of hot soapy water with rigorous washing is the standard.
4. Anti-bacterial soap is better, right? Antibiotic drugs work on viruses, right?
 - a. Wrong. This is actually part of the problem. It is causing more virulent strains of both.
5. But if my MD (medical doctor) prescribes the antibiotic medicine it's ok, right?
 - a. Well...yes and no. Some MDs may be overprescribing certain antibiotics based on S/S (signs and symptoms) and commonalities, instead of having their lab go through the standard testing procedure. By doing this, those antibiotics (over time) become less effective because the organisms learn. Ask your doctor. Question them, their procedures, and the meds they are prescribing for you. Be proactive where your health is concerned!

Vocabulary

1. Virus
2. Virulent
3. Bacteria
4. Resistant
5. Misconception

Discussion Questions

1. According to the article, what is different between viruses and bacterial infections?
2. What are some ways in which viruses, bacteria, germs or diseases are transmitted from one person to another?
3. What can happen if antibiotics are overused by a person?
4. Describe the standard for effective hand washing.
5. What places (e.g. buildings, places in nature) might you be more likely to be exposed to viruses or bacteria? What measures can you take to avoid infection?

Methods of Transference.

We have now brought a problem to light, one which at the very least needs to be explored. The question is what is next? While pharmaceutical companies get new antibiotics and, perhaps more importantly, new anti-viral medications to the street, we have to find ways to help and make changes in our lives when and where we can. The most direct is to be aware of how these microorganisms are transferred from patient to patient. First of all, let's look at two methods of transference – contact and airborne.

Contact is “touch”, so we are talking about common things found in the home and outside with other members of the general public. Doorknobs and handles, public transportation terminals – there are many more. To deal with such cases, we can carry a small packet of sterile wipes or hand sanitizer.

The more dangerous method of transference is airborne. Airborne transference allows these organisms to be spread by one person to multiple others through a cough or a sneeze. Think about it. When you sneeze, do you cover your mouth? And when you do, do you simply put your hand to your mouth? Because if you just do that, now we are back to spreading by contact if we then, for example, reach for a door handle.... So, don't just cough into your hand, but into your elbow. If you have a cough and/or cold get a mask from your doctor or drugstore. And don't forget hand washing. We can make a difference by being vigilant. Spread good habits, not diseases.

Vocabulary

1. Transference
2. Contact
3. Airborne
4. Respiratory
5. Skin break

Discussion Questions

1. How can microorganisms be transferred from one person to another?
2. Which method of transference is more dangerous?
3. What are simple ways, out in public, that we can protect ourselves? Which is most effective?
Mask vs. hands vs. elbow?
4. When someone has a cold, do you think it should be compulsory for them to wear a mask in public places?
5. Do you think people are responsible about not spreading germs and diseases? Do you think people need to be better educated about the risks?

IV. Preventative measures: Diet and Exercise.

Two of the most helpful things we can do on our own ironically are two things we loathe to be told to change. With the increase of stress in our lives, caused by different things such as increase in population and traffic flow in addition to all the other stressors we face, we find it hard to not just nap or go right to sleep when we get home from work instead of stopping at the gym. This is a useful expression: "Quality over quantity". We can take exercise as our example, but it applies across the board. Simply put, it is better to do a short quality work out three times per week than to race through poorly organized, high-stress workouts five days a week. Consistency is important, as is giving your muscles time to recover, rebuild, and regenerate. Before starting a new exercise, activity or whole program, go to see your doctor. They will have a battery of tests to determine what your body can handle based on biometrics, physical, and standard lab tests. Keep a journal and report to your MD regularly as well as reporting any changes.

As for diet, like exercise, anytime you decide to make a change you should make an appointment with a nutritionist. Making large or broad changes to your diet can not only be unhealthy but dangerous. Your MD and nutritionist will hopefully work together to form a dietary plan which suits your basic nutritional needs as well as maintaining your body's need for balance. Dietary changes must be made slowly and gradually or else disharmony can result; a person can actually do more harm than good in some cases no matter the intention. Avoid fad diets and in particular "rapid change" diets which proclaim incredible sounding weight loss in a short period of time. Remember, if it seems too good to be true, likely it is. Trust your instincts, and consult your nutritionist and/or your MD if you have any questions. It is their reason for being.

Vocabulary

1. Balance
2. Nutrition
3. Nutritionist
4. Consistency
5. Instincts

Discussion Questions

1. Explain balance and how it relates to managing diet and exercise.
2. What does consistency mean and how might being consistent help your workout(s)?
3. Why might you want to see your MD before starting or modifying a workout schedule?
4. Same question, but for your nutritionist.
5. What does "If it seems too good to be true..." actually mean?

V. Stress.

It would likely be difficult to find a person who can honestly say, "Yes, I get enough sleep." As most of us work 40+ hours per week, or something close to that, between stress and social life, we tend to force our bodies to "make it" on less and less sleep all the time. These are major contributors to stress. Cities are overpopulated, traffic congestion worsening and even public transportation is getting crowded. Then, worst of all, what should be our bastion of solidarity, our fortress of solitude, our homes, our private lives, become stressors. This cannot be, and we absolutely must correct this dangerous trend. Fortunately, there are ways.

First, there is sleep. One of the biggest stressors in our lives is the lack of, or practicing, poor sleep habits. We must remember that sleep is the time when our bodies repair and regenerate. Another technique for de-stressing is relaxing with an enjoyable exercise. Be it physical exercise like walking or yoga, or other activities like meditation, watching television or playing video games. How about this for an idea? When was the last time many of us read a book? While more and more people are spending time on the internet, decide instead to have some friends over, or go out for a meal and a movie. There is an endless stream of ideas. I'd offer more, but I don't want to interrupt your nap.

Vocabulary

1. Stress
2. Overpopulation
3. Go out to a movie
4. Trend
5. Stream

Discussion Questions

1. Define stress in your own words. Is it different or the same for different people?
2. What kind of things cause stress in your life? How do you try to combat them?
3. How much sleep is enough? Does it differ from person to person?
4. Do you get enough sleep?
5. If a close friend seems stressed, what do you do?