

**VII OGÓLNOPOLSKA OLIMPIADA**

**„JĘZYK ANGIELSKI W NAUKACH MEDYCZNYCH”**

***AGE-RELATED HEALTH CHALLENGES***

pod honorowym patronatem

JM Rektora

Uniwersytetu Medycznego

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**PAPER 1 LISTENING**

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**PAPER 1A – LISTENING A STUDENT CODE:** \_\_\_\_\_\_\_\_\_

 **TOTAL SCORE:** \_\_\_\_\_\_\_\_\_ /20

**DIAGNOSING URINARY TRACT INFECTIONS IN THE ELDERLY**

You are going to listen to a discussion on diagnosing urinary tract infections (UTIs) in the elderly. As you listen, choose one answer for each question.

1. The method of choice employed by General Practitioners in order to diagnose UTIs is:
2. urine culture,
3. classic microscopic urinalysis,
4. visual urinary test,
5. urine test strip.
6. Some of the most common symptoms of UTIs in the elderly, mentioned by the speakers, are:
7. pyuria, oliguria, anuresis;
8. incontinence, nocturia, oliguria;
9. dysuria, frequency, nocturia;
10. polyuria, dysuria, paruresis.
11. A tell-tale symptom of UTIs in the elderly is also:
12. cognitive impairment,
13. disorientation,
14. memory loss,
15. low mood or depression.
16. According to the speakers, the main problem with diagnosing UTIs in the elderly is that:
17. elderly patients are frequently overdiagnosed with UTIs,
18. there is inadequate care in nursing homes,
19. UTIs are misdiagnosed for other diseases,
20. UTIs often go unnoticed as the symptoms are not distinctive enough.
21. About 1 in 20 patients in their 50s:
22. may manifest symptoms of a urinary tract infection,
23. has a dipstick test performed on a regular basis,
24. has bacteria in their urine, but is asymptomatic,
25. doesn’t have bacteria in their urine, but yet goes on to develop symptoms.
26. According to one of the speakers:
27. more 50-year-olds than 80-year-olds exhibit symptoms of UTIs,
28. the probability of bacteriuria soars with age,
29. the percentage of elderly people with bacteria in their urine depends on the community one lives in,
30. the number of patients with bacteria in their urine dwindles with age.
31. The elderly patients:
32. usually have sterile urine,
33. can manifest asymptomatic bacteriuria,
34. always present with symptoms of UTIs if there are bacteria found in their urine,
35. often suffer from recurrent UTIs.
36. The frequent use of antibiotics for treating UTIs:
37. causes favourable changes in the gastrointestinal microbiome,
38. eradicates bacteria that cause UTIs,
39. enables uneventful recovery from UTIs and concomitant infections,
40. accelerates the emergence and spread of bacteria impervious to antibiotics.
41. In the speakers’ opinion, urine tests positive for the presence of bacteria:
42. are why patients behave abnormally,
43. don’t create any problems in the long run,
44. make other ailments go unnoticed,
45. allow for faster diagnosis and treatment of other related conditions.
46. Symptoms of sepsis, NOT mentioned by one of the speakers, is:
47. agitation,
48. tachypnea,
49. pyrexia,
50. tachycardia.

SCORE: \_\_\_\_\_\_\_\_\_ /10

**PAPER 1B – LISTENING B**

**PARKINSON’S DISEASE**

You are going to listen to a conversation between Dr. Mark Porter and Professor Roy-Chowdhury, a neurologist, about Parkinson’s disease. Read the following sentences and state whether they are true (T) or false (F).

|  |  |  |  |
| --- | --- | --- | --- |
|  | As many as 5% of people are going to be affected by Parkinson’s disease at some stage of our lives. | T | F |
|  | The fact that celebrities reveal the fact of developing Parkinson’s allows for the greater recognition of this condition among the general public. | T | F |
|  | Patients in which Parkinson’s is suspected should be diagnosed as early and comprehensively as possible. | T | F |
|  | According to Professor Roy-Chowdhury, the approach to Parkinson’s has remained fairly unchanged throughout the recent years. | T | F |
|  | The classical triad of symptoms, characteristic for Parkinson’s, includes rigidity, bradyopsia and characteristic shivering. | T | F |
|  | Non-motor symptoms of Parkinson’s include olfactory dysfunction and parasomnias. | T | F |
|  | It is currently believed that non-motor symptoms are subsequent to the diagnosis by 4 to 5 years. | T | F |
|  | Nowadays, there is no form of neuroprotective medication available that would enable clinicians to delay the progression of Parkinson’s disease. | T | F |
|  | The most successful therapeutic strategy up to date is examining the patient within 6 months of the first appointment to assess the development of the condition. | T | F |
|  | It is not entirely clear why the later the aggressive treatment is started, the more altered the response is. | T | F |

SCORE: \_\_\_\_\_\_\_\_\_ /10