

10 HEALTH AND ILLNESS

SPEAKING

Aim

to set the scene and introduce the theme with a photo; to get students talking about visiting the doctor

1 Start by telling the class that in this unit they're going to be describing medical procedures, approaches to medicine, and discussing issues doctors face; students will practise using vague language and describing what the mind and body do.

- Ask students to look at the photo on pages 86–87. Ask: *What can you see?* Elicit a brief description of the photo, and introduce any key words students might need.
- Ask students to discuss the questions in groups of four or five. Monitor and help with ideas and vocabulary if necessary. In feedback, ask different groups to briefly tell the class what they discussed.
- Once you have fed back on content, look at good language that students used, and language students didn't quite use correctly during the activity.

Possible answers

Problems the place has:

nothing is digitalised, so record-keeping is hard;
lack of access to medicine / specialised care, which is all too expensive
long waiting times in cramped spaces
brain drain of skilled local staff to other, better-paid contexts

In the UK, the most common reasons for visiting doctors include: skin problems, joint disorders, back problems, cholesterol problems, colds and flu, mental illness, high blood pressure, headaches and migraines, etc.

Most common operations include: cataract surgery, prostate surgery, caesarean sections, abortions, hernia operations, hip replacement, blood transfusion, etc.

Teacher development: brainstorming and using the board

Outcomes aims to encourage students to show what they already know, and to recall and recycle language they have. Brainstorming during a lead-in is a positive way of getting students to recall language.

- Write up headings in web diagrams, so, here, write *illnesses* and *operations* on the board, put a circle round each word, and draw short lines from each circle. Then ask students to give you ideas. Encourage lots of different ideas from around the class. Don't write up everything. Write up anything relevant or interesting, and repair or rephrase inaccurate uses. At the end, check any difficult words and point out any vocabulary or structures of interest that students thought of.

Culture notes

The photo shows the administrative office of the Tekle Haimanot Higher Clinic in Addis Ababa, the capital of Ethiopia in Africa.

Optional extra activity Brainstorm *illnesses* and *operations* and write them on the board. Find out how many words and phrases under the two headings students already know.

UNDER THE KNIFE**Student's Book pages 88–89****Communicative outcomes**

In this two-page spread, students will talk about medical procedures and discuss medical experiences; they will use vague language to describe medical procedures they are unfamiliar with.

VOCABULARY Operations**Aim**

to introduce and practise chunks of language used to describe operations

1 Ask students to order the groups of words in pairs. Start them off by eliciting the first answer. In feedback, model the pronunciation of words that are difficult to say.

Answers

- 1 damaged her knee quite badly: the knee joint swelled up – had to have a scan – had it operated on – underwent extensive physiotherapy
- 2 broke his leg in three places: had to fast for twelve hours – was given an anaesthetic – had an operation to insert metal rods – eventually had them removed
- 3 the pain became excruciating: had a filling – it somehow got infected – had to have the whole tooth out – had to have a few stitches
- 4 was diagnosed with kidney disease: was put on a waiting list – finally found a donor – had a transplant – took part in a rehabilitation programme
- 5 suffered severe burns: was rushed to hospital – was put on a drip – had a skin graft – had to wait for the scarring to heal
- 6 found a lump: it was diagnosed as cancer – underwent chemotherapy – it went into remission – suffered a relapse – had an operation to have it removed

2 Elicit one or two examples for the first one to get students started. Ask them to work in pairs to discuss and answer the questions. It may well be the case that students know and produce ideas not mentioned in the answers below, due to experience or specialised knowledge, so be prepared to explore their answers, and ask questions about them to find out what they know.

Possible answers

- 1 when you're pregnant, when you have knee or back problems, when you have a head injury, when you have cancer
- 2 putting increasing amounts of weight on a joint, extending flexibility, lots of stretching and moving, doing fixed exercises again and again every day

- 3 for religious reasons like during Ramadan for many Muslims, for health reasons or because they're dieting using something like the 5:2 method (five days eating and two days with no food)
- 4 heart transplant, liver transplant, kidney and lung transplants, bone marrow transplant and recently they've done the first face transplant
- 5 when you're recovering from drug addiction or alcoholism, when you're recovering from any kind of serious illness or operation
- 6 to ensure fluids and / or medicine goes directly into their blood
- 7 causes fatigue and tiredness, loss of appetite, hair loss, feelings of nausea, feelings of numbness in hands and feet, etc.
- 8 start drinking or taking drugs again when trying to get over addiction, athletes suffer relapses when trying to recover from serious illnesses or injuries and when pushing themselves hard

Teacher development: organising vocabulary


Organising new words and vocabulary into categories using tables, diagrams and spidergrams is a good way of helping students note, learn and remember words. Here, for example, ask students to think of ways of recording and organising the chunks:

- 1 students could copy out their ordered lists in a flow diagram
- 2 students could write headings / a circle in the middle of a spidergram and write the chunks around the circle. Headings might be: A lump, Toothache, A swollen knee, etc.
- 3 students could draw circles and write five or six key words from each list in the circle: at a future date, these key words can act as prompts to make students remember all the chunks they have learnt. For example, key words for number 1 in Exercise 1 could be: *damaged, operated, extensive, joint, swelled, scan*.

Optional extra activity Write key words on the board (e.g. *damaged, operated, extensive, joint, swelled, scan*) and ask students in pairs to try to recall and use as many of the chunks from number 1 in Exercise 1 as they can. Repeat the activity with other sets of key words for 2 to 6.

LISTENING**Aim**

to practise listening for general understanding and for detail

- 3**  **32** Ask students to read the situation and the task.
- Play the recording. Students listen and note answers. Let students compare answers in pairs before discussing as a class.

Answers**Conversation 1**

- 1 having your eyes done / having laser treatment on your eyes / having your eyes fixed by laser
- 2 they numb your eyes with eye drops and give a couple of Xanax to keep you calm, and kind of clamp the eyes open ... then they slice a tiny flap in the front of the eye, and you stare at a laser for a few seconds and that reshapes the inside of your eye
- 3 he doesn't need further treatment, but he has to go back for aftercare ... basically, however, the next day it was fine

Conversation 2

- 1 a root canal at the dentist's
- 2 they drill a hole in the back of the tooth, clean everything up, then stick some kind of temporary filling in there to prevent bacteria getting in
- 3 yes, has to go back and have the temporary filling taken out, then they'll put a more permanent thing in

32**Conversation 1**

- A: You look really different without your glasses on. I almost didn't recognise you there.
- B: Hey, the glasses have gone! They're a thing of the past.
- A: Yeah?
- B: Yeah. After months and months of toying with the idea, I finally got round to having my eyes done the other day.
- A: Cor! Really? Did you get them lasered?
- B: Yeah.
- A: Woah! That's brave of you. Didn't it hurt? I've always imagined it must be really painful.
- B: No, not really. It's actually pretty quick and easy these days. Well, at least if you're shortsighted, like I am ... was!
- A: OK.
- B: It is a bit scary, though, because what they do is they numb your eyes and then they sort of clamp them open so they can slice this tiny little flap in the front of the eye – and you kind of have to watch as the whole thing happens.
- A: Oh! It sounds horrendous, it really does! How did they give you the anaesthetic? Was it an injection or something?
- B: No, they just poured in a load of these eye drops and they did the job. Oh, and they dosed me up with a couple of Xanax as well, just to calm me down.
- A: So how long does the whole thing take?
- B: It's over in a matter of minutes. After they cut the eye open, you have to stare at this laser for a few seconds and that reshapes the inside of your eye – and then you're done.
- A: And how long does it take to recover from?

B: To be honest, the next day I woke up and I pretty much had perfect vision. They're still a bit sore and I have to go back a few times for the aftercare and everything, but it's all very quick. I should've got it done years ago, honestly!

A: Right. Wow! I still think I'll stick with contact lenses for the time being, though, personally.

Conversation 2

C: So, where did you rush off to the other day, then?

D: Oh, sorry. Didn't I tell you? I had to get to the dentist's.

C: Oh no! How come?

D: Well, about a week ago or so, I got this excruciating pain in my upper jaw so I went along to get it looked at and he told me that one of my teeth had died somehow and that I'd need a root canal.

C: Died? How did that happen?

D: Don't really know, to be honest. He said I must've taken some kind of knock. I'm not sure, but I think it might've been my daughter, actually, thrashing her arms and legs around while I was changing her nappy one day, you know.

C: Kids, eh! All that work and that's the kind of thanks you get.

D: Tell me about it! And then today I went in and he drilled a hole in the back, cleaned everything up and then he stuck some kind of temporary filling in to prevent bacteria or anything getting in.

C: That can't have been much fun! Did it hurt at all?

D: No, not really. I mean, I was conscious of what he was doing, but I couldn't feel anything.

C: Do you have to go back again sometime?

D: Yeah, next week. They'll remove the temporary filling and put a more permanent thing in, but then I'm done.

C: How much is all that going to set you back, then? It must be quite expensive.

D: It's not that bad, but it's not cheap either. I mean, I won't see much change from £500.

Culture notes

Xanax = Xanax is the brand name of a drug with the generic name alprazolam. It is a benzodiazepine used to treat anxiety disorders, panic disorders, and anxiety caused by depression.

a root canal = a treatment used to repair and save a tooth that is badly decayed or becomes infected. During a root canal procedure, the nerve and pulp are removed and the inside of the tooth is cleaned and sealed.

4 **32** Let students read through the sentences first, and decide whether they are true or false based on their first listening.

- Play the recording again. Students listen and choose true or false. Let students compare answers in pairs before discussing as a class. In feedback, ask students to justify their answers by telling you what they heard on the recording.

Answers

Conversation 1

- 1 T (*slice this tiny little flap in the front of the eye ...*)
- 2 F (*How did they give you the anaesthetic? Was it an injection or something? // No, they just poured in a load of these eye drops and they did the job.*)
- 3 F (*they dosed me up with a couple of Xanax as well, just to calm me down.*)
- 4 F (*They're still a bit sore ...*)
- 5 T (*I still think I'll stick with contact lenses for the time being, though, personally.*)

Conversation 2

- 6 T (*about a week or so ago, I got this excruciating pain in my upper jaw ...*)
- 7 F (*How did that happen? // Don't really know, to be honest. He said I must've taken some kind of knock. I'm not sure, but I think it might've been my daughter ...*)
- 8 T (*then stuck some kind of temporary filling in, to prevent any bacteria or anything getting in.*)
- 9 F (*I was conscious of what he was doing, but I couldn't feel anything.*)
- 10 F (*I won't see much change from £500.*)

5 Organise students into groups of four or five to discuss the questions. Give them two minutes to read the questions first, and to decide which ones they have most to talk about. When students are ready, ask them to discuss.

- In feedback at the end, look at good language that students used, and language students didn't quite use correctly during the activity.

DEVELOPING CONVERSATIONS**Vague language****Aim**

to introduce and practise vague language to show we can't find the right word or wish to avoid a complicated word

6 Ask students to work in pairs to complete the sentences. Ask students to look at audio script 32 on page 207 and check their answers. Alternatively, you could play the recording at this stage again as an intensive listening to confirm the answers.

Answers

- 1 sort of
- 2 or something
- 3 a load of
- 4 and everything
- 5 or so
- 6 somehow
- 7 some kind of
- 8 some kind of, or anything

7 Ask students to discuss the sentences in pairs. Find out whether they can work out use from their previous knowledge and from context. You could elicit and discuss ideas as a class in feedback or ask students to use the information in the box to check their ideas.

Answers

- 1 We use *sort of* before verbs to show we can't find the exact word.
- 2 We add *or something* to suggest a non-specific alternative to the thing mentioned.
- 3 We use *a load of* to refer to a large, unspecified amount.
- 4 We add *and everything* to refer vaguely to other associated things.
- 5 We use *or so* with periods of time to show we are not being exact.
- 6 We use *somehow* with verbs to show we do not know exactly how.
- 7 We use *some kind of* before nouns to show we do not know what kind exactly.
- 8 We use *some kind of* before nouns to show we do not know what kind exactly, and we use *or anything* to suggest an absence of things.

8 Elicit one or two examples to get students started. Let students work individually before comparing in pairs. In feedback, you could write up some of the best examples on the board.

Possible answers

- 1 I asked for a second opinion, but they just **sort of / kind of** ignored me.
- 2 He used **some kind of / some sort of** (or **a load of**) bleach solution on my teeth.
OR He used bleach solution **and everything** on my teeth.
OR He used bleach solution on my teeth **and everything**.
- 3 If you want a check-up **and everything**, it should cost about £100.
- 4 They told me that a build-up was damaging blood vessels in my brain **or something**.
OR They told me that **some kind of / some sort of** build-up was damaging blood vessels in my brain.
OR They told me that a build-up was damaging **a load of** blood vessels in my brain.
- 5 They use this tiny little knife **or something** to make the incision.
OR They used **some kind of / some sort of** tiny little knife to make the incision.
- 6 It was quite a traumatic birth, but they **somehow** managed to deliver her after about an hour **or so**.
- 7 They just **sort of / kind of** glued the skin back together again using some **sort of / kind of** clear plastic tape **or something**.
- 8 Mercifully, there were no needles **or anything** involved – just massage and **some kind of** traditional medicine.
OR Mercifully, there were no needles **or anything** involved – just massage and traditional medicine **and everything**.

9 Organise the class into pairs to practise using vague language. Point out that you don't expect them to know exactly how to do these procedures. You want them to have a go at describing them in 'vague' terms. Give students two minutes' thinking time before they speak to prepare some ideas or notes about what to say. Monitor and correct any errors.

Answers

There are no fixed answers. Work with whatever students come up with. Below are descriptions of the procedures:

BACK PAIN: There's usually some kind of scan to establish what's wrong; they make a small incision and maybe remove disc material that's pressing on nerves and causing pain; they use a microscope of some kind to view area being operated on.

HIP REPLACEMENT: You're given anaesthetic; a cut is made along the top of the hip; move the muscles connected to the thighbone to allow a better view. Next, the ball portion of the joint is removed by cutting the thighbone with some kind of saw. Then an artificial joint is attached to the thighbone using either cement or a special material that allows the remaining bone to somehow attach to the new joint. The doctor then sort of prepares the surface of the hipbone – removing any damaged cartilage – and attaches the replacement socket part to the hipbone. The new ball part of the thighbone is then inserted into the socket part of the hip. A drain may be put in to help drain any fluid. The doctor then reattaches the muscles and closes the incision.

LIPOSUCTION:

The surgeon will mark out lines on the patient's body, indicating where treatment will take place. Photos of the target area, and sometimes the patient's whole body may be taken; they will be compared to pictures of the same areas taken afterwards. The patient is given anaesthetic; several litres of a saline solution with a local anaesthetic is pumped below the skin in the area that is to be suctioned. The fat is sucked out through small suction tubes.

TOOTH WHITENING:

There are a few ways to have your teeth professionally whitened at a dentist's.

The "laser light" method involves sitting for about one or two hours. A gel is painted on your teeth and the light beam is positioned to be directly over the gel. It is safe and produces instant results and is more costly than other methods. During the process, if your teeth start to become sensitive, the gel is removed. Another professional method is the professional trays made by the dental team. An impression is taken so as to custom fit a soft plastic retainer on top of your teeth. You will be given instructions to place a gel within the tray and place on top of your teeth for a certain time period. This could be from 30 minutes to overnight depending on your choice and the dentist's recommendation. You take the trays out, rinse and spit.

Another option is the same professional trays with a 'boost', which means the trays are used at the dentist's with a 45% concentration of bleach. Your gums are protected, the trays with the gel are placed on your teeth, and you wait about 30 minutes, rinse and spit. The bleach is specially formulated to avoid sensitivity.

Optional extra activity If you want to give students extra practice, write the following questions on the board and ask students to answer them:

How do they get parachutes in the small parachute bag?

How do helicopters take off?

How do fish 'breathe'?

CONVERSATION PRACTICE**Aim**

to practise language from the lesson in a free, communicative, personalised speaking activity

10 Organise the class into threes and ask them to decide which task to choose. Give students four or five minutes to read role cards (pages 191, 186 and 197) or prepare things to say. When students are ready, ask them to do the task.

- In feedback, look at good language that students used, and language students didn't quite use correctly during the activity. Show students better ways of saying what they were trying to say. You could write some useful new phrases on the board with gaps and ask the whole class to complete the sentences.

 **22 Refer students to the video and activities on the DVD-ROM.**

Teacher development: using the video

The video and activities on the DVD-ROM can be used in various ways:

- 1 as an alternative to the conversation practice
- 2 instead of the listening activity in some units, particularly with weaker groups. Students can first practise reading out the dialogues and work on some of the key phrases / structures in a controlled way before having a go themselves.
- 3 at the end of the unit as a revision exercise

Web research activity

- Revise vocabulary from the lesson by brainstorming a list of ten ailments from the class. For example: a sprained wrist, a sore throat, a migraine, an insect bite, etc. Ask students in pairs to choose three ailments and to decide how they would treat the problem.
- Ask them to research online and find out whether the way they would treat each ailment is backed up by Internet advice.

KEEP IT IN MIND**Student's Book pages 90–91****Communicative outcomes**

In this two-page spread, students read about and talk about mindfulness, meditation and depression; they talk about things you do with the mind and body.

SPEAKING**Aim**

to lead in to the topic of the lesson; to do a questionnaire to find out about negative feelings

- 1 Organise the class into pairs to take turns to ask the questions. Go round the room and check students are doing the task and help with ideas and vocabulary if necessary.
 - In feedback, ask different pairs to tell the class what they discussed. Once you have fed back on content, look at good language that students used, and language students didn't quite use correctly during the activity.

READING**Aim**

to read and take notes; to use phrases and sentence starters to retell parts of the text

- 2 Ask students to look at the photo on page 91, and say what it shows (people doing yoga or meditation). Ask them what they expect the text to be about. Give students a moment to read the list of topics and think about what they know about them. Then ask them to work in pairs to discuss the topics. In feedback, elicit interesting ideas students may wish to share with the class. If your students know little or nothing, accept whatever ideas they come up with, and reassure them that they'll learn more shortly.
- 3 Ask students to read through the phrases first. Check any unknown words. Then ask them to work with the same partner to say how the phrases are connected to the topics. You could feedback briefly to find out what students think before they read, and get students to explain their choices and decisions. What's important here is that they understand the language used in the phrases, so be prepared to check meaning.
- 4 Ask students to read the text and take notes. Let them compare notes in pairs. Elicit answers briefly.

Answers

Try to elicit or cover at least some of the following:
Mindfulness and meditation
 mindfulness originates in ancient Buddhist practices used to be fairly unknown in the west, but has become more popular
 widely used now by among others the US military!
 it's basically a kind of meditation therapy designed to train people to focus on inner processes happening now

Depression and anxiety

evidence suggests mindfulness can help to break cycles of depression and anxiety
 people suffering depression find moods often accompanied by negative thoughts and these thoughts usually disappear after meds prescribed or episode passes
 but this has created pattern in the brain and so a mood swing caused by something small like bad weather can trigger off negative thoughts, and start another bout of depression
 the more this happens, the more it recurs, making it harder to treat with drugs
 mindfulness encourages people to be more aware of their patterns of thought
 helps to break the cycle by resetting neural pathways

Life expectancy and well-being in the developed world

Western medicine has been good at extending life expectancy
 in many countries, life expectancy doubled in the 20th century
 many infectious diseases were eradicated
 but we live longer in sickness, not health
 Western medicine less good at encouraging well-being
 unless you're in severe pain, Western doctors have little to offer

Patients that doctors refer to as 'the worried well'

often patients suffering low-level complaints or long-term illnesses are dismissed by doctors as the worried well
 Western doctors often not good at treating such patients at all

Traditional Chinese Medicine

more focused on maintaining good health and well-being than most Western models
 better at relieving minor conditions like eczema, back pain and migraine
 TCM includes acupuncture, herbal remedies, massage

- 5 Ask students to use the phrases to retell parts of the article. Monitor and help with ideas and vocabulary at this stage, and prompt students to produce accurate sentences. Elicit answers briefly.

Possible answers

Work with your students' ideas. It doesn't matter if they don't summarise the whole text. Here are a few possible examples of what they might cover:
 Mindfulness therapy can help people suffering from depression. It can break the downward spiral of depressed moods accompanied by negative thoughts. The negative thoughts that come with the bad moods spark neural connections and thus future mood swings can trigger symptoms of depression. Mindfulness can stop this by helping sufferers become more aware of patterns of thought.

Western medicine has been good at eradicating infectious diseases, which has increased life expectancy a lot and has improved mortality. Western medicine is only really any good at dealing with people in excruciating pain or with something life-threatening. It's not so good at dealing with those who have low-level complaints. Traditional Chinese Medicine (TCM) helps them more. TCM is also better at relieving minor conditions.

6 The aim here is for students to respond personally to the information in the text. Give students two or three minutes to prepare things to say before discussing with a partner. There are no fixed answers here, so work with the personal reactions students come up with.

Optional extra activity Show the following sentences on the board and ask students to write them in their language:

The more this happens, the more likely it is to recur.

The longer you leave it, the more difficult it'll be.

The richer the country, the healthier the people tend to be.

The older people get, the more prone they are to high blood pressure.

Remove the English sentences from the board, and ask students to translate their sentences back into English. Then show the originals again for them to compare.

VOCABULARY Mind and body

Aim

to introduce and practise phrases used to describe actions involving the mind and body

7 Ask students to work in pairs to discuss the actions. Start them off by eliciting the first answer. Monitor and notice how well students understand the phrases. In feedback, check meanings and model the pronunciation of words that are difficult to say.

Possible answers

- 1 you're bored, you're stuck in class / at work, you suddenly start reflecting on the past, you're tired
- 2 you're trying to think of who did something, you're worried about someone or something, you're suddenly having amazing ideas about future possibilities, you're having some kind of panic attack
- 3 you're excited, you're scared, you're exercising – or have just been running
- 4 you're breathing deeply, you're sleeping, you're very relaxed and doing mindfulness therapy
- 5 you may shudder with unease, discomfort, fear, disgust or pleasure
- 6 you're sweating
- 7 you're surprised, you're expressing irony
- 8 to answer a question in class, to ask a question at the end of a presentation, to vote
- 9 you're in pain / having a heart attack, to express deep joy or relief
- 10 in time with music, when you're dancing, to get someone's attention

- 11 you're losing in a game, you feel defeated, you're depressed, you're giving up
- 12 to show you don't know something, or don't care
- 13 you're angry, to show defiance, to demonstrate and protest; if you raise a clenched fist it's a gesture of solidarity and support – especially for oppressed peoples
- 14 it hurts / aches, you're recovering from back surgery, you've been hunched over your computer for a long time
- 15 to get some fresh air, to exercise, after a long flight or meeting or lesson, because you're bored and fancy a walk
- 16 to flirt with someone you find attractive

8 Give students two minutes to think of ideas individually. Monitor and prompt as students do this exercise. Let students compare answers in pairs before discussing as a class.

Answers

- you sniff using your nose
- you use your hands – and particularly your fingernails – to scratch other parts of your body
- you glare angrily at someone using your eyes
- you stroke pets or hair or skin using your hand, especially the cupped palm of your hand
- you blink with both eyes
- you frown by moving your eyebrows down and closer together – the frown can also be seen on your forehead
- if you crouch down, you move your body close to the ground by bending your knees and leaning forward slightly
- you hug with both arms and the front part of your body touches the front part of the person you hug
- if you grin, you smile, usually showing your teeth, so
- you use your mouth
- you pat people on the back or head using the palm of your hand
- if you spit, you use your mouth to release saliva
- if you punch, you use your fist (your closed hand) to hit someone or something

9 Organise the class into new pairs to test each other. Monitor and note and correct errors.

Optional extra activity Play 'Simon Says' (a popular children's game). Ask five students to stand in a row at the front of the class. The class must give them instructions. For example, they say, *Simon says shrug your shoulders*. The students at the front must obey and perform the action. The class then say, *Stretch your legs*, without saying *Simon says*. If any student moves, even flinches, they are out and must sit down. Students continue. If they say *Simon says*, the students must obey. If they don't say *Simon says*, they mustn't move. Continue until only one student remains standing – the winner!

BEDSIDE MANNER**Student's Book pages 92–93****Communicative outcomes**

In this two-page spread, students will talk about health issues, and roleplay medical situations.

SPEAKING**Aim**



to lead in to the topic of the lesson; to talk about being a doctor

- 1 Organise the class into groups of four or five to discuss the questions. Go round the room and check students are doing the task and help with ideas and vocabulary if necessary.
 - In feedback, ask different groups to tell the class what they discussed. Once you have fed back on content, look at good language that students used, and language students didn't quite use correctly during the activity.

Optional extra activity Ask students in their groups to produce a list of five nouns to describe the qualities a doctor should have. An example list: *patience, expertise, consideration, knowledge, tirelessness.*

LISTENING**Aim**

to read for general understanding and for phrases in context in a text

- 2  33 Ask students to read the situation and the task.
 - Play the recording. Students listen and note answers.
- 3  33 Students compare their answers in pairs.
 - Play the recording again. Students listen and add to their notes.
- 4 Students compare their answers in pairs once more. Then elicit answers from the class. Ask students to justify their answers in feedback.

Possible answers

Speaker 1 – the only one who is training doctors, whilst the others are either doctors or studying to become doctors

Speaker 2 – the only one who criticises patients and admits to getting rid of them quickly, whilst the others all seem very caring

Speaker 4 – the only one studying rather than working at present

Speaker 5 – the only one who has done medical research

 33**1**

Medical dramas on TV here have changed a fair bit over the years. Before, the doctor was just a saint that could do no wrong, but nowadays they'll have more flawed characters and the hospitals are more like my own. My favourite remains *House*, even though it finished a while back. It's basically about this highly unconventional doctor and the team he leads. He's a brilliant clinician, but he's also cynical and downright rude to colleagues and patients alike. He's also ridiculously unethical in his approach. In one episode, he gets a junior colleague to break into a patient's apartment to solve the mystery of their condition. In another, he totally breaches patient confidentiality just to prove a point. Of course, this is where the show parts with reality, but I've found it a really useful springboard for my students to discuss ethics, the processes that should've taken place and how to improve bedside manner.

2

When I see the mass of printouts in their hand, my heart just sinks. I just know they'll have been searching the Internet for every possible diagnosis or quack cure you can think of! It's like that joke: a man goes to his doctor and tells him he's suffering from a long list of illnesses. 'The trouble with you,' says the doctor, 'is that you're a hypochondriac.' 'Oh no,' says the man, 'don't tell me I've got that as well.' Seriously, though, these people are often timewasters and to my mind they're also kind of undermining my professionalism – twenty years of study dismissed in favour of Google! My main aim is to get them out of the surgery as quickly as possible.

3

There's a cliché that doctors make the worst patients because we don't take the advice we would give to others. That's definitely true. I read a survey that found 80% of Norwegian doctors had reported into work with illnesses that they would've issued a sick note to others for. Underlying this is a bigger problem of how we see our role. Our purpose is not to suffer but to see symptoms, diagnose disease, treat it and cure it.

As a result, we sometimes feel lost if we come across a disease or condition that we don't immediately recognise or know how to treat. We're good at dealing with definites, not the unknown. The truth is, when we're faced with uncertainty, many of us don't deal with it very well and that can lead to communication breakdowns.

As a sufferer of a major chronic condition myself, I've been on the receiving end of this. It can start from the first encounter, where the doctor starts the examination without even introducing themselves; to a wrong diagnosis or poor treatment because they won't admit to not knowing what the problem is; to secrecy and silence when there's a relapse and the news is bad. Being a patient actually taught me the most valuable lesson: see the person first, not the condition.

4

I started my studies back home in Sierra Leone, but I had to stop because of the Ebola outbreak. I volunteered to work with the response teams going from house to house informing people of the dangers and uncovering suspect cases. It made me realise the importance of communication and education in health. I had wanted to be a surgeon, but now I'd like to get into community health. I later won a scholarship to come and study here in France and I should qualify next year.

5

I've worked and carried out research in a number of countries and perhaps the biggest thing I've learnt is how you need to be aware of not just the disease but also the person and culture it occurs in. I remember seeing a guy who suffered from a rare hormonal condition called Addison's Disease. What happens is that two small organs – the adrenal glands – don't produce sufficient amounts of the hormone cortisol, which in turn leads to increased pigmentation in the skin. Essentially, their skin turns black. That perhaps wouldn't be so much of a problem these days, but this was 40 years ago in South Africa when the country imposed strict racial segregation. Imagine what that patient must've gone through?

Teacher development: encouraging students to interact and share understanding while reading and listening

Outcomes aims to encourage students to interact and share information when listening and reading. The task isn't about getting the answers right. It's about working collaboratively to support each other in getting a good understanding. It is about students showing what they can get with a little help from friends. Encourage students to work together as much as possible during these tasks, gradually building up understanding and working with different people in the class.

- 5 Organise the class into pairs to discuss the questions. Go round the room and check students are doing the task and help with ideas and vocabulary if necessary.
- In feedback, ask different pairs to tell the class what they discussed. Once you have fed back on content, look at good pieces of language that students used, and pieces of language students didn't quite use correctly during the activity.

Possible answers

Work with students' ideas. Here are some possibilities:

The Internet is good because: it has a lot of information; it allows students to find out about their symptoms and to improve their general knowledge; there are blogs and online forums where students can share symptoms and ideas; you can contact medical advice on the web

The Internet is bad because: the ill-informed advice can worry people; people self-diagnose instead of seeking proper advice; rumours can spread on the web which may cause health alarms

Ways of avoiding communication problems: improve your 'bedside manner' by taking time to get to know patients personally; explain things in detail; smile and be polite; be available if patients want to contact them

Apartheid was a system of enforced racial segregation which held sway in South Africa until 1990. The man with Addison's Disease may have found himself suffering from racial discrimination – on public transport, in bars and restaurants, and at work.

Culture notes

The photo shows the main characters from the popular American medical drama *House*, starring Hugh Laurie. Other popular US medical dramas of recent years include *ER* and *Grey's Anatomy*.

Optional extra activity Ask students to look at the photo on the page and say what it shows, and how it makes them feel. This could work as a lead-in or follow-up to this section.

UNDERSTANDING VOCABULARY

Nouns based on phrasal verbs

Aim

to introduce and practise nouns based on phrasal verbs

- 6 Read through the information in the box as a class.
- Ask students to tell you any nouns based on phrasal verbs that they can think of from their previous learning experience (for example, *outcome*, *breakdown*, *breakup*, *setback*). Ask students to work individually to complete the sentences. Start them off by eliciting the first answer.
 - Let students compare answers in pairs. In feedback, model the pronunciation of words that are difficult to say.

Answers

1 shake-up	5 crackdown
2 upbringing	6 breakthroughs
3 workout	7 run-up
4 outbreak	8 dropout

Background language notes for teachers

Note that while the nouns are based on phrasal verbs, it doesn't mean that the verb can be used like the noun. So, you can say *a police crackdown* or *the police cracked down on unrest*, but *the run-up to an election* can't be expressed as *the politicians ran up to the election*. There are no reliable rules about when to use a hyphen when forming nouns from phrasal verbs. So, *shake-up*,

run-up, but *breakup*. When the preposition or adverb goes first, it is usually shown as one word: *upbringing*, for example.

7 Organise the class into pairs to discuss the statements in Exercise 6. Tell students to take a minute first to think about which statements they want to talk about, and to prepare ideas. In feedback, elicit some ideas, and comment on the students' pronunciation and use of nouns based on phrasal verbs.

8 Ask students to read through and discuss the nouns. Encourage them to use both the context and their understanding of the two parts of the nouns to work out meaning. At the end, you could ask students to use dictionaries to check, or you could provide definitions and examples yourself.

Answers

- 1 a **cover-up** is an attempt to stop people from discovering the truth about something, especially a crime or serious mistake
it could refer to a terrible crime, financial scandal, or accident in a nuclear power station, etc.
- 2 a **write-off** is a vehicle so badly damaged it can't be repaired
it is a car / vehicle of some kind
- 3 a **break-in** is an act of entering a building illegally – using force – in order to steal things
they refers to the burglars
- 4 a **bypass** is a road that goes around a town or city so traffic doesn't have to go through the centre
They = local council / government
- 5 a **turnover** is the value of goods / services a company sells at a particular time
They = a big company
- 6 a **walkout** is a form of protest when workers leave a building and stop working
They refers to teachers, factory workers, nurses, doctors – workers of some kind
- 7 a **falling-out** is an occasion when you have a big disagreement with someone and stop talking afterwards
We = me and a friend / colleague / family member
- 8 a **mix-up** is a mistake or problem that happens because of confusion or a misunderstanding
They refers to doctors or hospital staff
it refers to a test result

9 The aim here is to personalise the nouns by getting students to share any stories or experiences. You could start students off by providing your own personal example.

Optional extra activity Ask students to write four or five personalised sentences using the nouns in Exercises 6 and 8. You could make this interactive by asking them to write three true sentences and one untrue sentence using the nouns. They then read their sentences out in groups. Other students must guess which sentence is untrue.

GRAMMAR Modal auxiliaries

Aim

to check students' understanding of how to use modal auxiliaries to add meaning

10 Read through the information in the box as a class.

- Organise students into pairs to discuss the sentences. Do the first as an example in open class. Monitor and notice how well students understand the rules.
- In feedback, elicit the students' answers. They can check their answers using the Grammar reference on page 176.

Answers

- 1a *I just know they'll have been searching the Internet.* (= I'm sure that before they come to see me, they've already done this)
- b *I just know they can't have searched the Internet.* (= I'm sure they haven't done this)
- 2a *Norwegian doctors had reported into work with illnesses that they would've issued a sick note to others for.* (= if other people had come to them, then definitely they would've given them sick notes – it's a certain guess about an imaginary past)
- b *Norwegian doctors had reported into work with illnesses they could issue a sick note to others for.* (= it's possible for them to issue sick notes for this)
- 3a *Imagine what that patient must've gone through.* (= think about all the terrible things I'm 99% sure they have already endured)
- b *Imagine what that patient might be going through.* (= think about what the patient is possibly suffering at the moment)
- 4a *If we come across a disease we don't immediately recognise, we can feel lost.* (= it's possible for us to feel lost)
- b *If we come across a disease we don't immediately recognise, we will often feel a bit lost.* (= this is a certain result)
- 5a *They give poor treatment because they won't admit to not knowing what the problem is.* (= they're refusing to admit they don't know what the problem is)
- b *They give poor treatment because they mustn't admit to not knowing what the problem is.* (= they're not allowed to admit that they don't know what the problem is)
- 6a *Nowadays, most TV dramas will have more flawed characters.* (= I'm certain they have; this is what I'm sure is generally true)
- b *Nowadays, most TV dramas should have more flawed characters.* (= they don't yet, but it'd be a good idea if they did; I want them to; it's desirable)
- 7a *We use it as a springboard for a discussion on the processes that should've taken place.* (= processes I wanted to take place, but didn't)
- b *We use it as a springboard for a discussion on the processes that may take place.* (= maybe take place at some future point)

- 8a *I later won a scholarship to study here in France and I should qualify next year.* (= I think / hope I will qualify)
- b *I later won a scholarship to study here in France and I shall qualify next year.* (= definite / very certain prediction)

G Students complete Exercise 1 in the Grammar reference on page 177.

Answers to Exercise 1, Grammar reference

- 1 must be, should go, could be
- 2 should've talked, might've seen
- 3 may have been murdered, won't know, can't stop
- 4 shouldn't have been playing, could've been, Shall (I) take, can play
- 5 can't be, must have, could (probably) tell
- 6 won't say, should tell, could get

Background language notes for teachers

Note the form of modal auxiliaries:

Present or future: modal auxiliary verb + infinitive without *to*

Past: modal auxiliary verb + *have* + past participle / *been* + *ing*

11 Elicit possible answers to the first situation from the class to get students started. Ask students to work in pairs to discuss further possibilities. Monitor and prompt, and help with ideas and vocabulary. In feedback, elicit ideas, and refer back to rules if students have any problems.

Possible answers

- 2
He must be homeless.
He might be ill. He could be having some kind of attack or seizure.
They shouldn't have let him on the bus.
Someone should've offered him a seat.
- 3
There must be a bug going round.
We should have taken on more staff.
- 4
He should have more tests.
He can't have a serious problem.
He must be OK.
I should check out his diet.
- 5
She can't have recognised me.
She must be ignoring me.
I must have done something wrong.
She should have spoken to me.

12 Organise the class into new pairs. Give students five minutes to choose and prepare situations.

13 When students are ready, ask them to roleplay their conversations. Tell fast finishers to switch roles and re-enact their roleplays.

- In feedback, ask different groups to briefly tell the class what the outcome of their roleplay was.
- Once you have fed back on content, look at good language that students used, and language students didn't quite use correctly during the activity.

Optional extra activity Bring in an interesting photo about which students can speculate or predict. For example, this could be a photo of a busy scene at an airport, or one of a crowd at a football match. Show the picture and ask students to produce sentences using *will*, *might*, *should*, etc.

G For further practice, see Exercise 2 in the Grammar reference on page 177.

Answers to Exercise 2, Grammar reference

- 1 That must've been painful.
- 2 He should've stopped smoking earlier.
- 3 It can't be hard to do.
- 4 Given their resources, they couldn't have done any more to help.
- 5 It can't have been cheap.
- 6 He shouldn't have been taking those pills.
- 7 You may / might / could need three or four operations.
- 8 He must've been lying!
- 9 She might've / may have / could've picked up the cold from my son.
- 10 She should make a complete recovery after the operation.

VIDEO 5: THE CAT WHO ATE NEEDLES

Student's Book page 94

Aim

to watch a video about the drama of an animal operation; to improve students' ability to follow and understand fast speech in a video extract; to practise fast speech and to improve pronunciation, stress and intonation

1 Lead in to the topic by asking students to look at the photo and say what they can see. Organise the class into pairs to discuss the questions. In feedback, elicit students' ideas and write up interesting ideas or pieces of language on the board. Encourage students to justify their opinions.

Possible answers

Benefits of pets: companionship, fun to be with, rewarding to take care of animals, good and educational for your kids, dogs are a good excuse for a walk, can be useful for security
Downsides: cost of food and vet bills, difficult to go away because you have to find someone to feed and look after them, can be smelly, have to take dog for a walk in bad weather
Rewards of being a vet: good money, get to look after and save animals, can be exciting if it involves exotic animals

Culture notes

The photo shows an elderly man with three pet barn owls on the handlebars of his mobility scooter in Middlesbrough, England.

2 Give students time to read through the task. Students watch and note their answers. Let them compare in pairs before discussing as a class.

Answers

- A needle got stuck in the back of a cat's mouth and then when the cat closed its mouth, it bit into the needle. The needle has gone through the roof of the cat's mouth and penetrated the back of the cat's eye. The needle is unsterilised. The thread has been swallowed and could get stuck in the intestines.
- The cat was playing by licking a piece of thread. The thread got stuck on the combs on the cat's tongue and it ended up swallowing it. There was a needle attached to the thread. The needle got stuck in the back of the throat and the cat bit into it.
- Dr Yessenow immediately put Maxine under anaesthesia to take X-rays and get a better look at the needle.
- The needle is unsterilised and could cause infection. The thread could cause complications. The worst-case scenario would be that the needle penetrates a major blood vessel and causes a major bleed, or that fluid leaks out of the eye itself and it completely collapses.

3 Organise the class into pairs to compare and discuss answers.

4 Give students time to read through the sentences first. Ask students to watch the video, and to note True or False. Let students compare answers in pairs. In feedback, ask students to justify their answers.

Answers

- F (only a few inches long)
- T (we realised that the intestinal problem was not a major concern anymore – that our entire focus then was on the eye problem)
- T (clamped an instrument to that little portion of the needle that was sticking out)
- T (took less than a minute)
- T (I think I slept about maybe three or four hours those first couple of nights. I would go through any lengths to save Maxine)
- F (back to her old self / back to normal)
- F (I would go through any lengths to save Maxine / It was worth every minute)
- T (there were so many things that could have gone wrong. Overall, this cat was very, very lucky)

5 Give students time to check the words first. You could check this by asking them to look in a dictionary, or by explaining the words yourself. Let students work in pairs to order the sentences. Then play the whole video. In feedback, ask students to justify their answers.

Answers

- The combs point backwards.
- Doctor Yessenow immediately puts Maxine under anaesthesia.
- I almost wanted to take her place.
- Doctor Yessenow was very helpful, but also very frank.
- It felt like forever – just that not knowing what was going to happen.
- She needs around-the-clock care over the next few days.
- Catherine's dedication pays off.
- In two weeks' time, Maxine is back to her old self.

Background language notes for teachers

around-the-clock care = being looked after 24 hours every day

pays off = is successful

frank = direct and honest

put under anaesthesia = make unconscious with drugs in order to do an operation

combs = here, small points in rows on the tongue


back to her old self = the same as she was before


take her place = be there in place of her

6 This exercise offers students the chance to relate the topic of the video to their own experiences, ideas and opinions.

- Ask students to discuss the questions in groups of four or five. Monitor and help with ideas and vocabulary.
- When most students have finished, stop the class and give some feedback, either by rephrasing some of the things students tried to say for the whole class or by asking students to correct or fill in gaps in sentences you've written on the board, based on what you heard students saying.

Understanding fast speech

7  **24** Play the recording. Students listen and write what they hear. Let them compare in pairs. Tell them not to worry if they haven't caught all the words yet.

8  **25** Students listen again to a slower version to check and improve what they have written. Let them compare answers in pairs.

9 Students check what they wrote in File 10 on page 189 of the Student's Book. Encourage them to practise saying the extract.

Video script **23**

Dr Yessenow: Cats have a tongue with combs on it and the combs point backwards. Cats love to play with strings or the thread in this particular case. The thread gets caught in those combs. If a cat has something on their tongue they go they, they try to get it off, but they can't because it's stuck to the back of the tongue so it ends up swallowing the string. In this particular case, the string was attached to a needle and the needle got stuck in the back of the mouth and then when the cat closed its mouth, it bit into the needle. That's unusual, I had never seen anything like this before.

Narrator: Dr Yessenow immediately puts Maxine under anaesthesia to take X-rays and get a better look at the needle.

Dr Yessenow: This cat had to be in pain. We stopped everything that we were doing here in the hospital. This became our priority.

Narrator: The X-rays revealed the needle is nearly two inches long, and Maxine bit down on it so hard it's gone through the roof of her mouth and penetrated the back of her eye.

Dr Yessenow: I mean we were amazed when we saw this – quite shocking, actually.

Catherine: It was unbelievable when I first saw those X-rays – you could actually see the needle, it almost made it to the top of her head. I just felt bad for Maxine. I almost wanted to take her place.

Narrator: An unsterile needle now exposes Maxine to a laundry list of health problems.

Dr Yessenow: The worst-case scenario would have been that this needle was penetrating a major blood vessel and we would have had a major bleed or that the eye itself, all of its fluid would have leaked out and completely collapsed.

Narrator: And once Maxine is under anaesthesia, Dr Yessenow makes another alarming discovery. The cat has eaten more than just a needle.

Dr Yessenow: There was a thread attached to this needle. I became very concerned about this because if that thread gets stuck in the intestinal track, it becomes a very serious problem and it could be extremely life threatening.

Narrator: Faced with two major issues, the vet sends Catherine off to the waiting room as he considers his options for surgery.

Catherine: Dr Yessenow was very helpful but also very frank. He really wasn't sure what was going to happen. I was afraid the worst-case scenario would be that my Maxine wouldn't make it out of surgery alive.

Dr Yessenow: All the ... of the time involved in this case was the thinking, organising, planning, being prepared and knowing what we were doing.

Catherine: It felt like forever – just that not knowing what was going to happen.

Narrator: After intensive pre-planning, Dr Yessenow preps for surgery and starts the procedure.

Dr Yessenow: I was able to grab a hold of the thread with an instrument and the thread just came out – it was basically only a few inches long. Once that was discovered, we realised that the intestinal problem was not a major concern anymore – that our entire focus then was on the eye problem. We propped the mouth open, clamped an instrument to that little portion of the needle that was sticking out and very, very slowly and carefully pulled the needle through the roof of the mouth and pulled it out. The funny part about all this is that the actual procedure itself took less than a minute.

Narrator: After the successful surgery, Dr Yessenow prescribes four different medicines for Maxine. She needs around-the-clock care over the next few days if there's any hope in saving her eye.

Dr Yessenow: I told Catherine that she was going to have to dedicate the next few days of her existence treating this cat's eye.

Catherine: I had to give her medication every two hours for about 72 hours. I think I slept about maybe three or four hours those first couple of nights. I would go through any lengths to save Maxine.

Narrator: Catherine's dedication pays off. In two weeks' time Maxine is back to her old self.

Catherine: I believe it was very much worth it. Maxine is well now and she's happy, and if that's what it takes to get her to be back to normal, it was worth every minute.

Dr Yessenow: I'm very happy with the way that this worked out because there were so many things that could have gone wrong. Overall, this cat was very, very lucky.

REVIEW 5**Student's Book page 94****Aim**

to consolidate vocabulary and grammar from Units 9 and 10

Answers**Exercise 1**

- 1 turnover / profit
- 2 breakthrough / discovery
- 3 could
- 4 been
- 5 will
- 6 would / could
- 7 have
- 8 must

Exercise 2

- 1 should have been paying more
- 2 They must be struggling
- 3 won't admit to not
- 4 have been improving over / getting better over
- 5 wouldn't be talking to
- 6 are constantly missing

Exercise 3

- 1 boring
- 2 have been looking
- 3 a fiercely
- 4 will
- 5 a walkout
- 6 can

Exercise 4

clench – body (teeth / fist)
 click – body (fingers) work (the mouse / icon)
 come up with – work (solution / ideas / proposal)
 flutter – body (eyelashes)
 implement – work (proposal / policy / strategy)
 input – work (data / ideas)
 oversee – work (project / staff)
 place – work (an order)
 schedule – work (meeting)
 shrug – body (shoulders)
 stretch – body (legs / arms)
 wipe – body (hands / forehead)

Exercise 5

- | | |
|-----|------|
| 1 e | 6 c |
| 2 h | 7 d |
| 3 a | 8 f |
| 4 b | 9 g |
| 5 j | 10 i |

Exercise 6

- | | |
|-----------------|---------------|
| 1 compassionate | 5 extensive |
| 2 leadership | 6 absenteeism |
| 3 casualisation | 7 contractual |
| 4 redundancy | 8 mortality |

Exercise 7

- 1 network
- 2 entertaining
- 3 attract
- 4 perk
- 5 places
- 6 excruciating
- 7 rushed
- 8 insert
- 9 removed
- 10 anaesthetic
- 11 tribunal
- 12 compensation