



医学英语讲座系列

如何与医生有效沟通

第八讲: 常见老年疾病

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Funded by the Government of Canada's New Horizons for Seniors Program





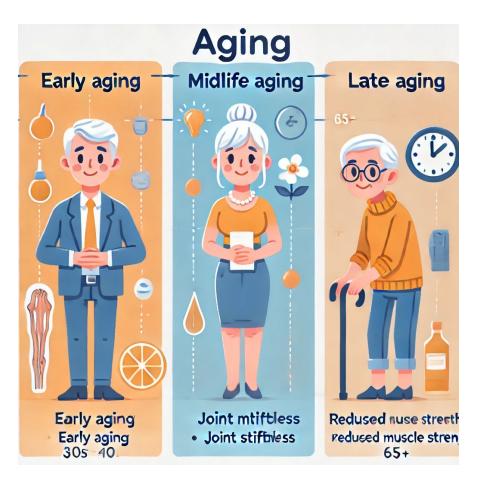
1. 关于老化

Introduction TO AGING

2. 六种常见的老年疾病 Six Common Age-Related Conditions

3. 预防和管理

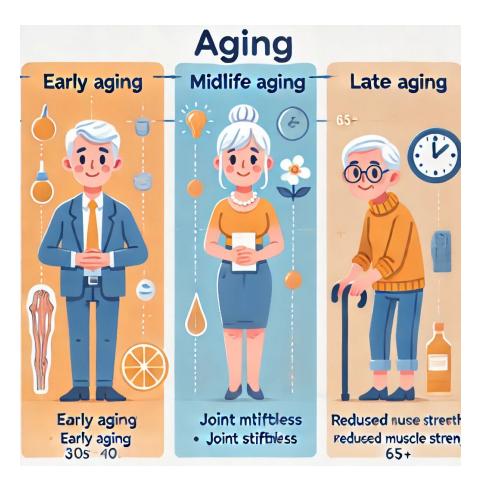
Prevention and Management



1. 老化的定义 (Definition of Aging)

老化是一个自然的生物过程,指的是随着时间的推移,人体的生理功能逐渐减弱的现象。这包括细胞、组织和器官的功能性下降。虽然老化是不可避免的,但通过科学的管理,可以减缓其速度并改善生活质量。

Aging is a natural biological process that refers to the gradual decline in physiological functions of the body over time. This includes the reduced functionality of cells, tissues, and organs. While aging is inevitable, it can be managed scientifically to slow its progression and improve the quality of life.



2. 老化的主要阶段 (Key Stages of Aging)

早期老化 (Early Aging): 通常发生在30-40岁,代谢开始减慢, 皮肤弹性下降。

Early Aging: Usually occurs in the 30s-40s, with slower metabolism and reduced skin elasticity.

中期老化 (Midlife Aging) : 通常发生在40-60岁,常见表现包括 关节僵硬、肌肉力量减弱和轻微的记忆力问题。

Midlife Aging: Typically happens in the 40s-60s, with common signs like joint stiffness, decreased muscle strength, and mild memory issues.

晚期老化(Late Aging): 65岁以后,身体机能显著减弱,出现慢性疾病的风险增高。

Late Aging: After age 65, significant decline in bodily functions and increased risk of chronic diseases.



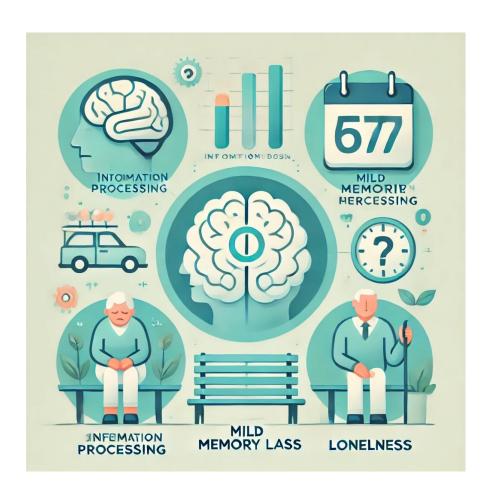
3. 身体的变化 (Physical Changes with Aging)

随着年龄的增长,人体会经历以下变化:

- 。 骨密度降低(导致骨质疏松的风险增加)。
- 。 肌肉质量减少(肌肉力量减弱)。
- 。 免疫系统功能下降(更容易感染疾病)。
- 。 器官功能减退(如肾功能、肺功能)

As we age, the body undergoes the following changes:

- Reduced bone density (increasing the risk of osteoporosis).
- Loss of muscle mass (leading to decreased strength).
- Decline in immune system function (making infections more likely).
- Reduced organ function (e.g., kidney and lung function)



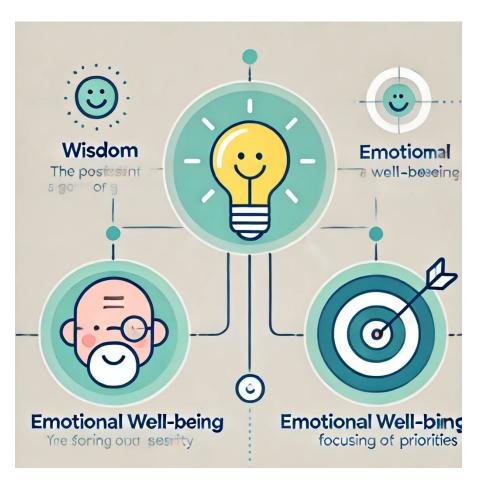
4. 心理和情感的变化 (Mental and Emotional Changes with Aging)

老化不仅仅是身体的变化,还包括心理和情感的影响:

- 。 处理信息速度减慢。
- 。 轻微的记忆力问题,如忘记物品的位置。
- 。 孤独感和焦虑感 (尤其是老年人失去社会支持时)

Aging is not just about physical changes; it also involves mental and emotional aspects:

- Slower information processing.
- Mild memory issues, such as forgetting where items are placed.
- Feelings of loneliness and anxiety (especially when older adults lose social support)



5. 老化的积极面 (The Positive Side of Aging)

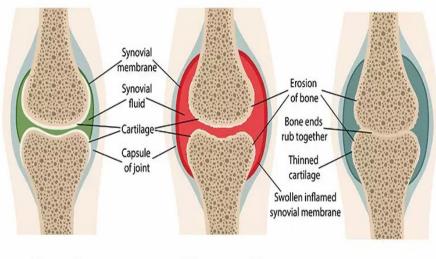
尽管老化带来挑战,它也有积极的一面:

- 。 智慧的积累: 年龄增长往往带来更多的经验和智慧。
- 。 更好的情绪调节: 研究表明, 许多老年人比年轻人更能管理情绪。
- 。 优先考虑重要的事情: 随着年龄的增长, 人们更倾向于专注于 他们真正重视的事物

Despite its challenges, aging has positive aspects:

- Accumulation of wisdom: Aging often brings greater experience and wisdom.
- Better emotional regulation: Research shows that many older adults manage emotions better than younger people.
- Prioritization of important matters: With age, people tend to focus
 more on what truly matters to them.

1. 关节炎(ARTHRITIS)



Normal Rheumatoid joint arthritis

Osteoarthritis

形成原因与发病机制 (Causes and Pathogenesis)

骨关节炎 (OA) 通常由于长期的关节磨损和软骨退化引起; 类风湿性关节炎 (RA) 是一种自身免疫性疾病, 免疫系统错误地攻击关节内膜, 导致炎症和损伤。 Osteoarthritis (OA) is often caused by prolonged joint wear and cartilage

degeneration, while Rheumatoid Arthritis (RA) is an autoimmune disease where the immune system mistakenly attacks the synovium, leading to inflammation and damage.

症状分类 (Types of Symptoms)

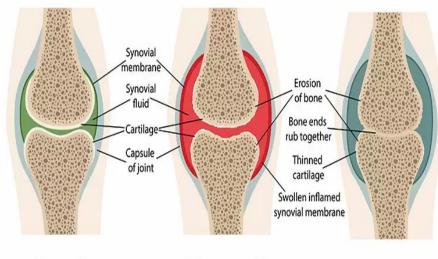
1.OA症状 (OA Symptoms):疼痛通常在活动后加重,休息后缓解;晨起僵硬时间较短。

Pain worsens after activity and eases with rest; morning stiffness lasts briefly.

2.RA症状 (RA Symptoms): 关节肿胀、发热、对称性疼痛; 晨起僵硬超过30分钟。

Joint swelling, warmth, symmetric pain; morning stiffness lasts over 30 minutes.

1. 关节炎(ARTHRITIS)



Normal Rheumatoid joint arthritis

Osteoarthritis

诊断方法 (Diagnostic Methods)

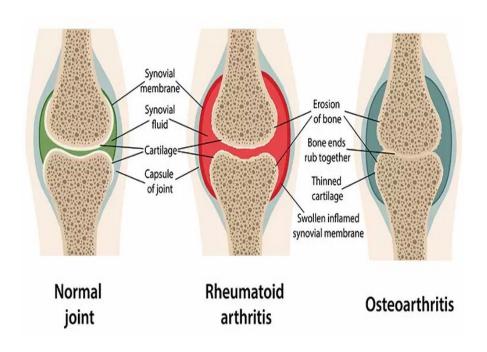
中文:通过X光检查(显示关节间隙变窄)、血液检查(类风湿因子和抗CCP抗体)和关节液分析进行确诊。

English: Diagnosed with X-rays (showing joint space narrowing), blood tests (Rheumatoid Factor and anti-CCP antibodies), and joint fluid analysis.

治疗方案(Treatment Options)

- 1. 非药物治疗(Non-Pharmacological Treatment):
- 体重管理、物理治疗、热疗/冷疗。
- Weight management, physical therapy, heat/cold therapy.
- 2. 药物治疗 (Pharmacological Treatment) :
- NSAIDs缓解疼痛和炎症,DMARDs减缓RA进展。
- NSAIDs for pain and inflammation; DMARDs to slow RA progression.
- 3. 手术 (Surgical Intervention):
- 严重OA可考虑关节置换术(膝关节或髋关节)。
- Severe OA may require joint replacement surgery (knee or hip).

1. 关节炎(ARTHRITIS)



长期管理策略 (Long-Term Management Strategies)

定期随访,监测药物副作用;生活方式改变以减少关节压力。

Regular follow-ups to monitor medication side effects; lifestyle changes to reduce joint stress.

预后评估 (Prognosis Evaluation)

RA的病程可能会进展到关节畸形,而OA的病程则取决于管理质量。

RA may progress to joint deformities, while OA prognosis depends on management quality.

对话情境: 一位患者在诊所向医生描述自己的关节疼痛问题。

Patient: Doctor, my knees hurt, especially after I walk or climb stairs.

病人:医生,我的膝盖很疼,尤其是走路或爬楼梯之后。

Doctor: How long have you been experiencing this pain?

医生: 您这种疼痛持续多久了?

Patient: It started about a year ago, but it's getting worse. I also feel stiff in the morning.

病人:大约一年前开始的,但现在越来越严重了。我早上还觉得关节很僵硬。

Doctor: That sounds like osteoarthritis, a common condition as we age. Do you notice any swelling?

医生: 听起来像是骨关节炎, 这是随着年龄增长常见的病症。您注意到关节肿胀了吗?

Patient: Yes, sometimes my knees look puffy. Is there anything I can do to relieve the pain?

病人:是的,有时候膝盖会肿胀。我可以做些什么来缓解疼痛吗?

Doctor: We'll start with lifestyle changes, like weight management and light exercises. I can also prescribe some anti-inflammatory medications.

医生:我们可以先从生活方式调整开始,比如控制体重和进行轻度锻炼。我还可以给您开一些抗炎药物。

Patient: Thank you, doctor. Will I need surgery in the future?

病人:谢谢医生。我将来需要手术吗?

Doctor: Only if the pain becomes unbearable or significantly limits your mobility. Let's monitor your condition closely.

医生:只有当疼痛无法忍受或严重影响活动时才需要手术。我们会密切关注您的情况。

2. 高血压(HYPERTENSION)

5 Main Blood Pressure Ranges 180 +120 +140+ 130-139 80-89 120-129 <80 <120 Ranges are in millimeters < 80 of mercury

形成原因与发病机制 (Causes and Pathogenesis)

长期高盐饮食和遗传因素是主要风险;动脉硬化引起血管阻力增加是关键机制。

High salt intake and genetic predisposition are major risks; arterial stiffening increases vascular resistance, a key mechanism.

症状分类 (Types of Symptoms)

1.轻度高血压 (Mild Hypertension):通常无明显症状。

Typically asymptomatic.

2.中度高血压 (Moderate Hypertension):头痛、耳鸣、疲劳。

Headaches, tinnitus, fatigue.

3.重度高血压 (Severe Hypertension):胸痛、视力模糊、鼻出血。

Chest pain, blurred vision, nosebleeds.

诊断方法 (Diagnostic Methods)

通过反复测量血压确认;可能需要动态血压监测和靶器官损伤评估(如心电图)。

Confirmed through repeated BP measurements; may require ambulatory BP monitoring and target organ damage assessment (e.g., ECG).

2. 高血压(HYPERTENSION)

5 Main Blood Pressure Ranges 180 +Hypertensive Crisis 120 +140+ 130-139 80-89 120-129 <80 <120 Ranges are in millimeters < 80 of mercury

治疗方案 (Treatment Options)

- 1.生活方式调整 (Lifestyle Modifications):
 - 减盐(<5克/天),减少酒精摄入,定期运动(如每周5次快走)。
 - Reduce salt (<5g/day), limit alcohol, regular exercise (e.g., brisk walking 5 times a week).
- 2.药物治疗 (Pharmacological Treatment):
 - 一线药物包括ACE抑制剂、钙通道阻滞剂。
 - First-line drugs include ACE inhibitors and calcium channel blockers.

长期管理策略(Long-Term Management Strategies)

定期监测血压,调整治疗方案,预防心血管并发症。

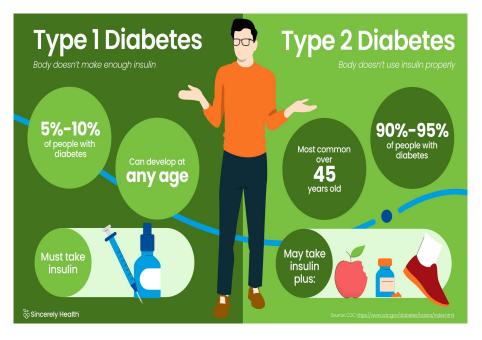
Regular BP monitoring, treatment adjustment, and prevention of cardiovascular complications.

预后评估 (Prognosis Evaluation)

通过有效控制血压,可降低中风和心脏病风险。

Effective BP control reduces the risk of stroke and heart disease.

3. 糖尿病(DIABETES)



形成原因与发病机制 (Causes and Pathogenesis)

2型糖尿病主要由于胰岛素抵抗增加,通常与肥胖、遗传、生活方式有关;1型糖尿病则是自身免疫系统破坏胰岛细胞。

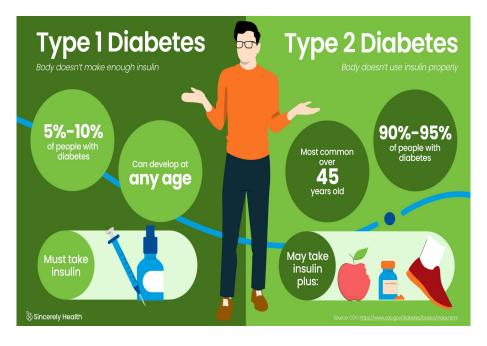
Type 2 diabetes results from increased insulin resistance, commonly linked to obesity, genetics, and lifestyle. Type 1 diabetes is caused by the immune system destroying insulin-producing cells in the pancreas.

症状分类 (Types of Symptoms)

- 1. **高血糖症状 (Hyperglycemia Symptoms)**: 口渴、多尿、饥饿感、视力模糊。 Thirst, frequent urination, hunger, and blurred vision.
- 2. 并发症症状 (Complication Symptoms):神经病变(如手脚麻木)、感染风险增加。

Neuropathy (e.g., numbness in hands and feet) and increased risk of infections.

3. 糖尿病 (DIABETES)



诊断方法(Diagnostic Methods)

空腹血糖 (≥7.0 mmol/L) 或糖化血红蛋白 (HbA1c ≥ 6.5%)。

Fasting blood glucose (≥7.0 mmol/L) or Hemoglobin A1c (HbA1c ≥ 6.5%).

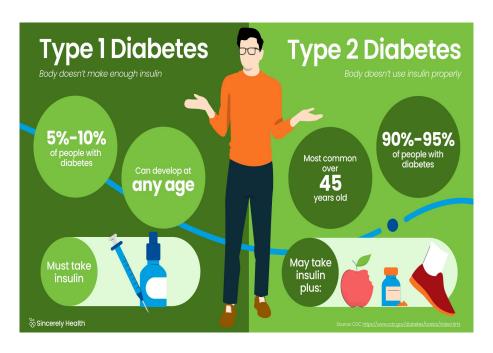
治疗方案(Treatment Options)

- 1.生活方式管理(Lifestyle Management):
 - 控制碳水化合物摄入,定期锻炼(如快走或游泳)。
 - Control carbohydrate intake and regular exercise (e.g., brisk walking or swimming).

2.药物治疗(Pharmacological Treatment):

- 使用口服降糖药 (如二甲双胍) 或胰岛素注射。
- Use of oral hypoglycemic agents (e.g., metformin) or insulin injections.

3. 糖尿病 (DIABETES)



长期管理策略(Long-Term Management Strategies)

血糖监测、预防并发症(如定期眼底检查)。

Blood sugar monitoring and preventing complications (e.g., regular eye exams).

预后评估(Prognosis Evaluation)

良好的血糖控制可显著降低心血管并发症和截肢风险。

Good glucose control significantly reduces cardiovascular complications and amputation risks.

3. 糖尿病(DIABETES)

对话情境: 一位患者因口渴和疲劳就诊, 医生怀疑是糖尿病。

Patient: Doctor, I've been feeling very thirsty and tired lately, and I've lost some weight without trying.

病人: 医生, 我最近总是觉得很渴, 很累, 而且体重也莫名其妙地减轻了。

Doctor: These could be signs of diabetes. Have you noticed frequent urination or blurry vision?

医生:这些可能是糖尿病的症状。您是否注意到尿频或视力模糊?

Patient: Yes, I have both. Is it serious?

病人:是的,我都有。这严重吗?

Doctor: Diabetes is manageable with the right treatment. Let's do a blood test to confirm.

医生:糖尿病通过正确的治疗是可以管理的。我们先做个血液检查来确认。

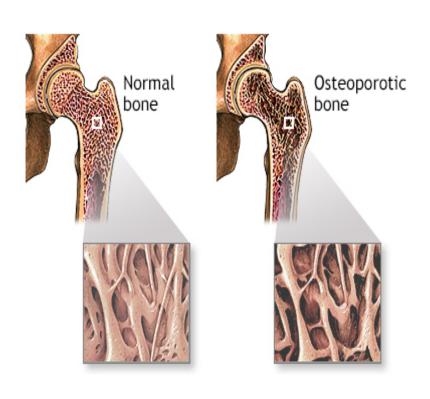
Patient: If I have it, what changes do I need to make?

病人:如果我得了糖尿病,需要做哪些改变?

Doctor: You'll need to adjust your diet, exercise regularly, and monitor your blood sugar levels. If necessary, we'll use medication or insulin.

医生:您需要调整饮食,定期锻炼,并监测血糖水平。如果有需要,我们会使用药物或胰岛素。

4. 骨质疏松 (OSTEOPOROSIS)



形成原因与发病机制 (Causes and Pathogenesis)

与激素水平 (如雌激素) 下降、钙质和维生素D缺乏,以及缺乏负重运动有关。 Related to decreased hormone levels (e.g., estrogen), calcium and vitamin D deficiency, and lack of weight-bearing exercise.

症状分类(Types of Symptoms)

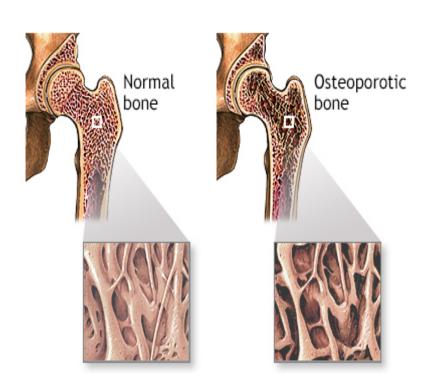
- · 无症状期 (Asymptomatic Stage):骨质流失通常在无症状情况下发生。 Bone loss often occurs without symptoms.
- 骨折相关症状 (Fracture-Related Symptoms):突然疼痛、运动受限,常见于髋部、腕部或脊椎。

Sudden pain and limited mobility, commonly in the hip, wrist, or spine.

诊断方法 (Diagnostic Methods)

通过双能X线吸收测量法 (DEXA) 评估骨密度 (T值<-2.5表示骨质疏松)。
Assessed with Dual-Energy X-ray Absorptiometry (DEXA) for bone density (T-score <-2.5 indicates osteoporosis).

4. 骨质疏松 (OSTEOPOROSIS)



治疗方案(Treatment Options)

- 1.营养支持 (Nutritional Support):
 - 补充钙 (1000-1200mg/天) 和维生素D (800-1000IU/天)。
 - Supplement calcium (1000-1200 mg/day) and vitamin D (800-1000 IU/day).
- 2.药物治疗 (Pharmacological Treatment):
 - 使用双膦酸盐(如阿仑膦酸钠)预防骨折。
 - Use bisphosphonates (e.g., alendronate) to prevent fractures.

长期管理策略 (Long-Term Management Strategies)

定期骨密度检测、跌倒预防措施(如改善居住环境)。

Regular bone density checks and fall prevention measures (e.g., improving home safety).

预后评估 (Prognosis Evaluation)

早期治疗可减少髋部和脊椎骨折的发生率。

Early treatment reduces the incidence of hip and spinal fractures.

4. 骨质疏松 (OSTEOPOROSIS)

对话情境: 一位女性患者咨询如何预防骨质疏松,以及治疗方法。

Patient: Doctor, I'm worried about osteoporosis. My mother had it, and I don't want to have the same issues. What can I do to prevent it?

病人: 医生, 我很担心骨质疏松。我妈妈就有这个问题, 我不想也得这个病。我应该怎么预防?

Doctor: Since you have a family history, you're at a higher risk. Prevention includes getting enough calcium and vitamin D, doing weight-bearing exercises like walking or yoga, and avoiding smoking or excessive alcohol.

医生:因为您有家族史,所以风险更高。预防措施包括摄入足够的钙和维生素D,进行负重运动,比如步行或瑜伽,避免吸烟和过量饮酒。

Patient: Should I take supplements?

病人: 我需要补充剂吗?

Doctor: If your dietary intake isn't sufficient, yes. Adults over 50 need at least 1200 mg of calcium and 800 IU of vitamin D daily. We can do a bone density test to check your current status.

医生:如果饮食摄入不足,那是需要的。50岁以上的成年人每天需要至少1200毫克钙和800国际单位的维生素D。我们可以做一个骨密度测试来检查您的当前状况。

4. 骨质疏松 (OSTEOPOROSIS)

Patient: What happens if I already have osteoporosis?

病人: 如果我已经有骨质疏松怎么办?

Doctor: Treatment includes medications like bisphosphonates to strengthen your bones and prevent fractures. Lifestyle

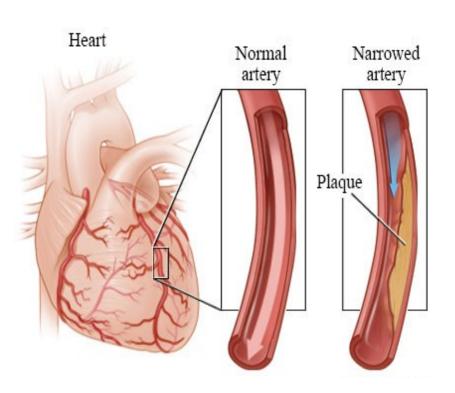
changes are also crucial.

医生:治疗包括使用双膦酸盐等药物来增强骨骼并预防骨折。生活方式的调整同样重要。

Patient: Thank you, doctor. I'll schedule the bone density test.

病人:谢谢医生。我会安排骨密度测试。

5. 心脏病(HEART DISEASE)



形成原因与发病机制 (Causes and Pathogenesis)

长期高血压、高胆固醇和吸烟导致冠状动脉粥样硬化,引发心肌缺血。 Chronic hypertension, high cholesterol, and smoking cause coronary atherosclerosis, leading to myocardial ischemia.

症状分类 (Types of Symptoms)

1. 稳定型心绞痛 (Stable Angina):

胸痛与运动有关,休息后缓解。

Chest pain related to exertion, relieved by rest.

1. 急性冠状综合征 (Acute Coronary Syndrome) :

剧烈胸痛持续超过20分钟。

Severe chest pain lasting over 20 minutes.

诊断方法(Diagnostic Methods)

心电图(ECG)和冠状动脉造影用于确诊。

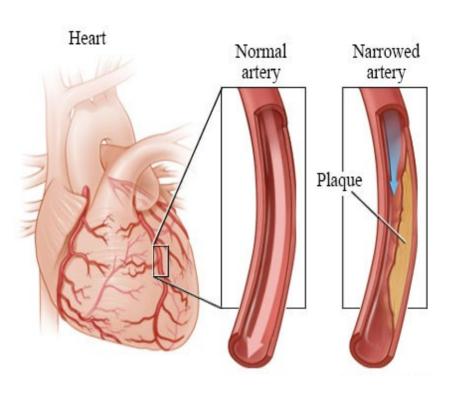
Electrocardiogram (ECG) and coronary angiography for diagnosis.

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六种常见老年疾病

COMMON AGE-RELATED DISEASES

5. 心脏病(HEART DISEASE)



治疗方案 (Treatment Options)

- 1.药物治疗 (Pharmacological Treatment):
 - 阿司匹林、他汀类药物。
 - Aspirin, statins.
- 2.手术 (Surgical Intervention):
 - 冠状动脉支架植入或搭桥手术。
 - Coronary stenting or bypass surgery.

长期管理策略(Long-Term Management Strategies)

调整饮食,控制体重,避免吸烟和高脂饮食。

Diet modification, weight control, and avoiding smoking and high-fat diets.

预后评估 (Prognosis Evaluation)

通过治疗和风险因素控制,可延长寿命并减少复发风险。

Treatment and risk factor control prolong life and reduce recurrence risk.

5. 心脏病(HEART DISEASE)

对话情境:

一位中年男性患者感到胸痛和呼吸困难,与医生讨论症状、风险因素、诊断和治疗方案。

Patient: Doctor, I've been having chest pain lately. It usually happens when I climb stairs or walk briskly, and it feels like a heavy pressure on my chest.

病人:医生,我最近一直有胸痛的情况。通常是在爬楼梯或快速走路时出现,感觉胸口像压着什么东西。

Doctor: I see. Does the pain go away when you rest?

医生: 我明白了。休息时这种疼痛会消失吗?

Patient: Yes, after a few minutes it goes away, but it's starting to happen more often.

病人:是的,休息几分钟后疼痛会消失,但最近发作越来越频繁了。

Doctor: That could be angina, which is caused by reduced blood flow to the heart. Do you have any other symptoms, like shortness of breath, dizziness, or sweating?

医生:这可能是心绞痛,由心脏供血不足引起。您还有其他症状吗,比如气短、头晕或者出汗?

Patient: Sometimes I feel a bit dizzy, and there was one time I felt nauseous after the pain.

病人:有时候会有点头晕,有一次疼痛后还感到恶心。

六种常见老年疾病

COMMON AGE-RELATED DISEASES

5. 心脏病(HEART DISEASE)

Doctor: Have you ever experienced this kind of pain before, or is this the first time?

医生: 您以前经历过这种疼痛吗, 还是这是第一次?

Patient: I think I had similar pain a few years ago, but it wasn't as frequent or severe.

病人: 我记得几年前有过类似的疼痛,但没有这么频繁或严重。

Doctor: Do you have any risk factors for heart disease? For example, do you smoke, have high blood pressure, or high cholesterol?

医生: 您是否有心脏病的风险因素? 比如, 您是否吸烟, 有高血压或高胆固醇?

Patient: I smoked for about 20 years, but I quit five years ago. I was also told during a health check-up last year that my cholesterol was high, but I didn't follow up.

病人: 我吸烟大约20年,但五年前戒了。我去年体检时也被告知胆固醇高,但没有再去复查。

Doctor: Smoking and high cholesterol are significant risk factors for heart disease. It's good that you quit smoking, but we need to address your cholesterol. Let's start with some tests to better understand your condition.

医生:吸烟和高胆固醇是心脏病的重要风险因素。戒烟是个好事,但我们需要控制您的胆固醇。我们先做一些检查来了解您的情况。

Patient: What kind of tests will I need?

病人: 我需要做哪些检查?

5. 心脏病 (HEART DISEASE)

Doctor: First, we'll do an ECG to check the electrical activity of your heart. Then, I'd recommend a stress test to see how your heart performs under physical exertion. We might also do blood tests to measure cholesterol and other markers.

医生:首先,我们会做心电图来检查您的心脏电活动。我建议再做一个运动负荷测试,看看您的心脏在体力活动下的表现。我们还可能需要通过血液检查来测量胆固醇和其他指标。

Patient: Will I need any imaging tests?

病人: 我需要做影像检查吗?

Doctor: If the results suggest potential blockages, we may do an angiogram to get a detailed view of your coronary arteries. This involves injecting a contrast dye and taking X-rays to identify any narrowing or blockages.

医生:如果检查结果显示有潜在的血管堵塞,我们可能会进行冠状动脉造影。这需要注射造影剂并拍摄X光,以确定是否有血管狭窄或堵塞。

Patient: If there are blockages, what are the treatment options?

病人: 如果有堵塞,治疗方法有哪些?

Doctor: It depends on the severity. For mild blockages, lifestyle changes and medications like statins to lower cholesterol or beta-blockers to reduce heart strain might be enough. For more severe cases, we may consider angioplasty, where a stent is placed to open the artery, or even bypass surgery.

医生:这取决于严重程度。如果堵塞较轻,可以通过生活方式的改变和药物治疗,比如使用他汀类药物降低胆固醇,或者使用β受体阻滞剂减轻心脏负担。如果情况更严重,我们可能需要考虑血管成形术(植入支架)或冠状动脉搭桥手术。

5. 心脏病 (HEART DISEASE)

Patient: That sounds serious. Is there anything I can do now to improve my condition?

病人: 听起来很严重。我现在能做些什么来改善我的状况?

Doctor: Absolutely. Start by eating a heart-healthy diet—less saturated fat and salt, and more fruits, vegetables, and whole grains. Regular exercise, like brisk walking for 30 minutes a day, can also strengthen your heart. And make sure to manage your stress levels.

医生:当然可以。从饮食开始,选择有益心脏健康的食物——少吃饱和脂肪和盐,多吃水果、蔬菜和全谷物。每天30分钟的快走等锻炼也能增强心脏功能。同时,注意管理压力。

Patient: I'll work on those changes. How soon should I come back for a follow-up?

病人: 我会开始做这些改变。我多久之后需要回来复查?

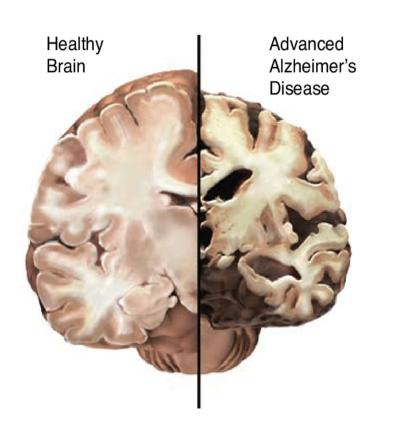
Doctor: Let's schedule a follow-up in two weeks after we complete the tests. In the meantime, if you experience severe chest pain, shortness of breath, or fainting, call emergency services immediately.

医生:我们在完成检查后两周安排复查。在此期间,如果您感到剧烈胸痛、气短或晕厥,请立即拨打急救电话。

Patient: Thank you, doctor. I'll follow your advice.

病人:谢谢医生。我会遵循您的建议。

6. 失智症(DEMENTIA)



形成原因与发病机制 (Causes and Pathogenesis)

阿尔茨海默病(AD)是最常见的类型,其次是血管性失智(VaD)。病理机制包括β淀粉样蛋白的异常沉积、tau蛋白紊乱以及脑部血流减少,导致神经细胞死亡和脑功能下降。Alzheimer's disease (AD) is the most common type, followed by vascular dementia (VaD). Pathological mechanisms include abnormal deposition of beta-amyloid protein, tau protein disruption, and reduced cerebral blood flow, leading to neuronal death and cognitive decline.

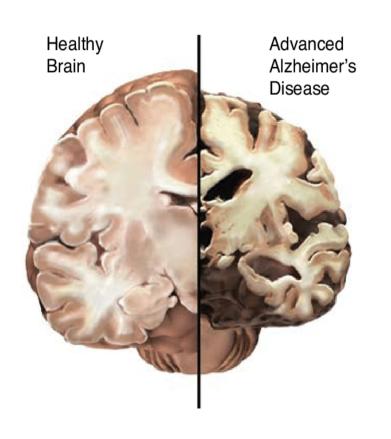
症状分类 (Types of Symptoms)

- **1.早期症状(Early Symptoms)**: 轻微记忆丧失(如忘记约会),语言表达困难。 Mild memory loss (e.g., forgetting appointments), difficulty in verbal expression.
- 2.中期症状 (Mid-Stage Symptoms): 迷失方向、判断力下降、个性改变(如焦虑、抑郁)。

Disorientation, impaired judgment, personality changes (e.g., anxiety, depression).

3.晚期症状(Late-Stage Symptoms): 无法完成日常活动,语言和运动功能严重受损。Inability to perform daily activities, severe impairment in speech and motor skills.

6. 失智症(DEMENTIA)



诊断方法 (Diagnostic Methods)

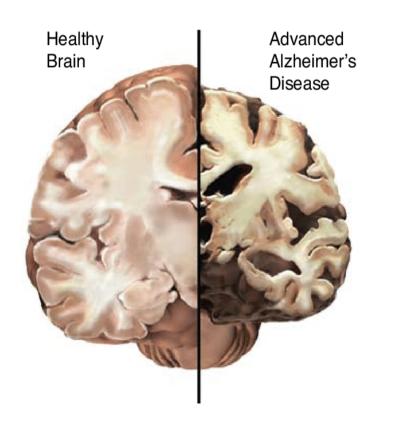
通过神经心理测试 (如MMSE) , 结合MRI或PET扫描观察脑萎缩和代谢异常确诊。

Diagnosed with neuropsychological tests (e.g., MMSE) combined with MRI or PET scans to detect brain atrophy and metabolic abnormalities.

治疗方案 (Treatment Options)

- 1.药物治疗 (Pharmacological Treatment):
 - 胆碱酯酶抑制剂 (如多奈哌齐) 改善认知功能。
 - Cholinesterase inhibitors (e.g., donepezil) to improve cognitive function.
- 2.非药物治疗 (Non-Pharmacological Treatment):
 - 认知行为疗法 (CBT) 、音乐治疗、记忆辅助工具 (如日历) 。
 - Cognitive Behavioral Therapy (CBT), music therapy, memory aids (e.g., calendars).
- 3.支持性护理(Supportive Care):
 - 为患者及家属提供心理支持,改造居住环境以确保安全。
 - Providing psychological support to patients and families, modifying living environments for safety.

6. 失智症(DEMENTIA)



长期管理策略(Long-Term Management Strategies)

定期随访评估认知能力,帮助患者保持社交互动以减缓症状。

Regular follow-ups to assess cognitive abilities, helping patients maintain social interaction to slow symptom progression.

预后评估(Prognosis Evaluation)

阿尔茨海默病平均存活期为8-1o年;早期干预虽不能治愈,但可提高生活质量并延缓功能退化。

The average survival time for Alzheimer's disease is 8-10 years; early intervention improves quality of life and delays functional decline.

6. 老年痴呆症(DEMENTIA)

对话情境:

患者家属陪同老人到诊所就诊,描述记忆力下降和行为改变的问题,医生与家属及患者详细讨论病情、诊断及管理计划。

Family Member: Doctor, I'm really worried about my father. He's been forgetting things lately, like where he put his glasses or whether he locked the door. It's been getting worse over the past six months.

家属:医生,我很担心我的父亲。他最近总是忘事,比如把眼镜放在哪里或者门有没有锁。过去六个月,这种情况越来越严重。

Doctor: I understand your concern. Memory loss can be distressing, but it's also quite common as people age. Let me ask a few questions to get a clearer picture. Does he have difficulty remembering recent events, like what he had for breakfast?

医生:我理解您的担忧。记忆力减退确实令人困扰,但随着年龄增长,这种情况也很常见。我先问几个问题来了解清楚。他是否难以记住最近发生的事情,比如早餐吃了什么?

Family Member: Yes, he forgets things he just did, but he can still talk about things from his childhood.

家属:是的,他会忘记刚刚做过的事情,但还能记得童年时的事情。

Doctor: That's a typical pattern we see in early-stage dementia. Has he shown any other changes, like difficulty handling finances, forgetting appointments, or getting lost in familiar places?

医生: 这是早期痴呆常见的模式。他还有其他变化吗,比如处理财务困难、忘记约会,或者在熟悉的地方迷路?

6. 老年痴呆症(DEMENTIA)

Family Member: Yes, he recently got lost on his way back from the grocery store, and he's been struggling with paying bills.

家属:是的,他最近从杂货店回家时迷路了,而且在处理账单方面也遇到了困难。

Doctor: That's concerning. What about his mood or behavior? Has he become more irritable, withdrawn, or anxious?

医生: 这比较令人担忧。他的情绪或行为有没有变化? 是否变得更易怒、孤僻或焦虑?

Family Member: He's definitely more irritable, and sometimes he gets frustrated because he can't remember things.

家属:他确实更容易发脾气,有时候因为记不住事情感到很沮丧。

Doctor: Understood. Let's ask him a few questions. Mr. Lee, can you tell me what day it is today?

医生:明白了。我们来问问他几个问题。李先生,您知道今天是星期几吗?

Patient: Uh, I think it's... Wednesday?

病人:呃,我想是……星期三吧?

Doctor: Actually, it's Monday. That's okay. Can you tell me where you are right now?

医生:其实今天是星期一。这没关系。您能告诉我现在您在哪里吗?

Patient: Of course, I'm at... um, a clinic, I think.

病人:当然,我在......嗯,我想是在诊所

6. 老年痴呆症(DEMENTIA)

Doctor: That's correct. Thank you. These small lapses are part of what we're trying to understand. To confirm the diagnosis, we'll need to do some tests, including a cognitive assessment and possibly brain imaging.

医生:正确的,谢谢您。这些小的记忆缺失正是我们需要了解的内容。为了确认诊断,我们需要进行一些测试,包括认知评估和可能的脑部影像检查。

Family Member: What kind of tests are involved?

家属:需要做哪些测试?

Doctor: We'll start with a cognitive screening test, like the MMSE (Mini-Mental State Examination), which evaluates memory, attention, and problem-solving skills. If needed, we can do an MRI or CT scan to look for changes in the brain, such as shrinkage in certain areas.

医生:我们会先进行一个认知筛查测试,比如MMSE(简短智能状态检查),来评估记忆、注意力和解决问题的能力。如果需要,我们还可以做MRI或CT扫描,看看大脑某些区域是否有萎缩。

Family Member: What could be causing this? Is it definitely dementia?

家属:这可能是什么原因?一定是失智吗?

6. 失智症(DEMENTIA)

Doctor: Memory problems like these can have various causes. It could be Alzheimer's disease, which is the most common form of dementia, or vascular dementia caused by reduced blood flow to the brain. Other factors, like vitamin deficiencies or thyroid issues, can also affect memory, so we'll need to rule those out.

医生:这样的记忆问题可能有多种原因。可能是阿尔茨海默病,这是最常见的痴呆形式,也可能是由脑部供血不足引起的血管性痴呆。其他因素,比如维生素缺乏或甲状腺问题,也会影响记忆,所以我们需要排除这些原因。

Family Member: If it is dementia, can it be treated?

家属:如果是痴呆,可以治疗吗?

Doctor: Dementia itself can't be cured, but early intervention can help slow its progression. Medications like cholinesterase inhibitors can improve memory and thinking in the early stages. Supportive therapies, like cognitive exercises, can also be very helpful.

医生: 痴呆本身无法治愈,但早期干预可以减缓病情进展。像胆碱酯酶抑制剂这样的药物可以在早期改善记忆和思维能力。认知训练等支持性治疗也非常有帮助。

Family Member: What can we do at home to help him?

家属:我们在家可以做些什么来帮助他?

6. 失智症(DEMENTIA)

Doctor: Keeping a consistent daily routine can reduce confusion. Use memory aids, like calendars and labeled items, to help him stay organized. Encourage social interaction and light exercise to maintain mental and physical health.

医生:保持一致的日常生活习惯可以减少困惑。使用记忆辅助工具,比如日历和标记物品,帮助他保持条理。鼓励社交活动和轻度锻炼,以维持心理和身体健康。

Family Member: Thank you, doctor. We'll start with the tests and follow your advice.

家属:谢谢医生。我们会先做检查,并按照您的建议做。

Doctor: You're welcome. Let's take it step by step. I'll see you again after the test results are in.

医生: 不客气。我们一步一步来。检查结果出来后我会再见您们。



- 1. 为什么预防和管理很重要? (Why is Prevention and Management Important?)
- 预防老年疾病可以延缓病情发展,改善生活质量。
- Preventing age-related diseases can slow disease progression and improve quality of life.
- 有效的管理可以减少并发症的发生率,降低医疗成本。
- Effective management reduces the risk of complications and lowers healthcare costs.



2. 预防老年疾病的五大关键策略(FIVE KEY STRATEGIES TO PREVENT AGE-RELATED DISEASES)

(1) 健康饮食(Healthy Diet)

多吃水果、蔬菜和全谷物, 少吃高盐、高糖食物。

Eat more fruits, vegetables, and whole grains, and reduce high-salt and high-sugar foods.

每天补充适量钙和维生素D,预防骨质疏松。

Supplement daily calcium and vitamin D to prevent osteoporosis.

(2) 规律锻炼 (Regular Exercise)

每周进行至少150分钟中等强度运动,例如快走或骑自行车。

Do at least 150 minutes of moderate-intensity exercise per week, such as brisk walking or cycling.

增加力量训练,如瑜伽或哑铃锻炼,增强骨骼和肌肉。

Add strength training, such as yoga or weightlifting, to strengthen bones and muscles.



2. 预防老年疾病的五大关键策略(FIVE KEY STRATEGIES TO PREVENT AGE-RELATED DISEASES)

(3) 定期体检(Regular Health Check-Ups)

每年监测血压、血糖和血脂, 筛查健康风险。

Monitor blood pressure, blood sugar, and cholesterol annually to screen for health risks.

定期进行骨密度测试、视力和听力检查。

Get regular bone density scans, vision, and hearing tests.

(4) 心理健康管理 (Mental Health Management)

参与社交活动,如社区活动或兴趣小组,减少孤独感。

Participate in social activities like community events or interest groups to reduce loneliness.

学习新技能或玩益智游戏,如下棋或拼图,保持头脑活跃。

Learn new skills or play brain games, like chess or puzzles, to keep the mind active.



2. 预防老年疾病的五大关键策略(FIVE KEY STRATEGIES TO PREVENT AGE-RELATED DISEASES)

(5) 避免高风险行为 (Avoid Risky Behaviors)

戒烟限酒,减少对身体的长期损害。

Quit smoking and limit alcohol to reduce long-term damage to the body. 避免久坐,保持每天适量的身体活动。

Avoid prolonged sitting and maintain daily physical activity.



3. 管理老年疾病的三大原则(THREE KEY PRINCIPLES FOR MANAGING AGE-RELATED DISEASES)

(1) 药物治疗遵医嘱 (Adhere to Medication Guidelines)

- 按时服药,不自行停药或更改剂量。
- Take medications on time and do not stop or change dosages without consulting a doctor.
- 定期复查,评估药物效果和副作用。
- Regularly follow up to evaluate medication effectiveness and side effects.

(2) 病情监测和记录(Monitor and Record Symptoms)

- 每日记录关键指标,如血压、血糖或体重变化。
- Record key metrics daily, such as blood pressure, blood sugar, or weight changes.
- 及时报告任何异常症状给医生,如疼痛或呼吸困难。
- Report any abnormal symptoms to the doctor promptly, such as pain or difficulty breathing.



3. 管理老年疾病的三大原则(THREE KEY PRINCIPLES FOR MANAGING AGE-RELATED DISEASES)

(3) 心理与社会支持 (Psychological and Social Support)

- 寻求家人和朋友的帮助,共同面对疾病挑战。
- Seek support from family and friends to face disease challenges together.
- 如果需要,咨询心理医生或参加支持小组。
- Consult a psychologist or join support groups if needed.

对话情境:一位老年患者(Patient)和家庭成员(Family Member)与医生(Doctor)讨论如何预防老年疾病和管理已有病症。

Doctor: Good morning, Mr. Lee. How are you feeling today?

医生: 早上好, 李先生。今天感觉怎么样?

Patient: I feel alright, but I've been thinking a lot about my health lately. I don't want to get sick as I age.

病人: 我感觉还好,但最近一直在想我的健康。我不想随着年龄增长而生病。

Doctor: That's a great mindset, Mr. Lee. Prevention is the key to staying healthy as we age. Have you been following any particular routines to take care of yourself?

医生: 李先生,这种想法很好。预防是保持健康的关键。您目前有没有在采取什么特别的日常措施来照顾自己?

Patient: I try to eat well, but I'm not sure if my diet is balanced. I do walk a little every day, though.

病人: 我尽量吃得健康, 但不确定我的饮食是否均衡。不过, 我每天都会走一走。

Doctor: That's a good start. A balanced diet is crucial for preventing chronic diseases. Do you include plenty of fruits, vegetables, and whole grains in your meals?

医生: 这是个不错的开始。均衡饮食对于预防慢性疾病非常重要。您的饮食中有足够的水果、蔬菜和全谷物吗?

Patient: I eat some vegetables, but I don't eat fruits often. And whole grains? I'm not sure.

病人:我会吃一些蔬菜,但水果不经常吃。至于全谷物,我不太确定。

Doctor: Fruits and whole grains are excellent sources of fiber, vitamins, and minerals, which help maintain a healthy heart and prevent diabetes. You can start by adding a serving of fruit with your breakfast or as a snack.

医生:水果和全谷物是纤维、维生素和矿物质的重要来源,有助于保持心脏健康并预防糖尿病。您可以从早餐或零食中增加一份水果开始。

Patient: Alright, I'll try that. What about exercise? Is walking enough?

病人:好的,我会试试。那锻炼呢?走路够了吗?

Doctor: Walking is great, but it's important to get at least 150 minutes of moderate-intensity exercise each week. Adding light strength training, like yoga or lifting light weights, can also help keep your bones and muscles strong.

医生: 走路很好, 但每周至少要进行150分钟中等强度的运动。增加一些轻度的力量训练, 比如瑜伽或举轻哑铃, 可以帮助保持骨骼和肌肉的强健。

Patient: I've never tried strength training. Is it safe at my age?

病人: 我从没试过力量训练。我这个年纪能安全进行吗?

Doctor: Absolutely. Start with light weights and simple exercises under supervision if you're new to it. Gradually increase intensity as your body adjusts. It's very beneficial for preventing osteoporosis and improving balance.

医生: 当然可以。如果您是初学者,可以在监督下从轻重量和简单动作开始。随着身体适应,逐渐增加强度。这对预防骨质疏松和改善平衡非常有帮助

Family Member: Doctor, what about regular check-ups? My father hasn't had one in a while.

家属: 医生, 定期体检呢? 我父亲已经有一段时间没做体检了。

Doctor: Regular check-ups are very important. They help us detect potential issues early, like high blood pressure, diabetes, or high cholesterol. Mr. Lee, when was your last blood pressure or cholesterol test?

医生: 定期体检非常重要,可以帮助我们早期发现潜在问题,比如高血压、糖尿病或高胆固醇。李先生,您上次测量血压或胆固醇是什么时候?

Patient: I think it was about two years ago.

病人:我想大概是两年前。

Doctor: That's quite some time. We should update those tests and also consider a bone density scan to check for osteoporosis.

医生: 那已经很久了。我们应该更新这些检查,还可以考虑做一个骨密度扫描,检查是否有骨质疏松。

Patient: Alright. I'll schedule those. Is there anything else I should do?

病人:好的。我会安排这些检查。我还需要做些什么吗?

Doctor: Yes, managing mental health is equally important. Engaging in social activities, learning new skills, or doing puzzles can keep your mind active and prevent feelings of loneliness.

医生:是的,心理健康的管理同样重要。参加社交活动、学习新技能或做拼图游戏可以让您的头脑保持活跃,并预防孤独感。

Family Member: My father used to enjoy gardening, but he doesn't spend much time outside anymore. Would gardening help?

家属:我父亲以前喜欢园艺,但现在不怎么出门了。园艺会有帮助吗?

Doctor: Gardening is an excellent activity! It combines light physical exercise with mental stimulation. It's also a great way to get some fresh air and stay connected to nature.

医生:园艺是个很好的活动!它结合了轻度的体力锻炼和心理刺激,还可以接触新鲜空气,与自然保持联系。

Patient: That sounds like a good idea. I'll start small and see how it goes.

病人: 听起来是个不错的主意。我会从小事情开始试试。

Family Member: Doctor, what if he already has some conditions, like high blood pressure? How should we manage that?

家属: 医生, 如果他已经有一些疾病, 比如高血压, 我们应该如何管理?

Doctor: For existing conditions, following the doctor's recommendations is critical. Take medications as prescribed, monitor key indicators like blood pressure, and attend follow-up visits regularly.

医生:对于已有的疾病,遵循医生的建议非常重要。按时服药,监测关键指标,比如血压,并定期参加复诊。

Patient: That makes sense. I'll try to keep track of my blood pressure at home.

病人:这很有道理。我会试着在家记录我的血压。

Doctor: That's a great step. Prevention and management go hand in hand, Mr. Lee. With consistent effort, you can maintain good health as you age.

医生:这是一大进步。预防和管理是相辅相成的,李先生。通过持续的努力,您可以在老年时期保持良好的健康状态。

今天的作业(TODAY'S HOMEWORK)

2. 练习今天给出的场景对话 (Practice today's mock conversation)

练习时,可以修改内容,置换内容,拓展,或者采用全新的内容

During practice, you can modify, replace, expand, or use entirely new content.

