

選抜制度	日 程	研究科	領 域	科 目
社会人	Ⅱ期	看護学研究科	療養生活支援看護学領域	外国語(英語)
受験番号		氏 名		採 点

次の英文を読み、各問い合わせに答えなさい。

Cancer is a leading cause of death for children and adolescents. (1) The likelihood of surviving a diagnosis of childhood cancer depends on the country in which the child lives: in high-income countries, more than 80% of children with cancer are cured, but in many LMICs\* less than 30% are cured. The reasons for lower survival rates in LMICs include: delay in diagnosis, an inability to obtain an accurate diagnosis, inaccessible therapy, abandonment of treatment, death from toxicity (side effects), and avoidable relapse. Improving access to childhood cancer care, including to essential medicines and technologies, is highly cost effective, feasible and can improve survival in all settings.

Cancer occurs in people of all ages and can affect any part of the body. It begins with genetic change in single cells, that then grow into a mass (or tumour), that invades other parts of the body and causes harm and death if left untreated. Unlike cancer in adults, the vast majority of childhood cancers do not have a known cause. Many studies have sought to identify the causes of childhood cancer, but very few cancers in children are caused by environmental or lifestyle factors. (2) Cancer prevention efforts in children should focus on behaviours that will prevent the child from developing preventable cancer as an adult. Some chronic infections, such as HIV, Epstein-Barr virus and malaria, are risk factors for childhood cancer. They are particularly relevant in LMICs\*. Other infections can increase a child's risk of developing cancer as an adult, so it is important to be vaccinated (against hepatitis B to help prevent liver cancer and against human papillomavirus to help prevent cervical cancer) and to pursue other methods such as early detection and treatment of chronic infections that can lead to cancer. Current data suggest that approximately 10% of all children with cancer have a predisposition because of genetic factors. Further research is needed to identify factors impacting cancer development in children.

When identified early, cancer is more likely to respond to effective treatment and result in a greater probability of survival, less suffering, and often less expensive and less intensive treatment. Significant improvements can be made in the lives of children with cancer by detecting cancer early and avoiding delays in care. (3) A correct diagnosis is essential to treat

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children with cancer because each cancer requires a specific treatment regimen that may include surgery, radiotherapy, and chemotherapy.

A correct diagnosis is essential to prescribe appropriate therapy for the type and extent of the disease. Standard therapies include chemotherapy, surgery and / or radiotherapy. Children also need special attention to their continued physical and cognitive growth and nutritional status, which requires a dedicated, multi-disciplinary team. Access to effective diagnosis, essential medicines, pathology, blood products, radiation therapy, technology and psychosocial and supportive care are variable and inequitable around the world. However, cure is possible for more than 80% of children with cancer when childhood cancer services are accessible. Pharmacological treatment, for example, includes inexpensive generic medications included on the WHO List of Essential Medicines for Children. Children who complete treatment require ongoing care to monitor for cancer recurrence and to manage any possible long-term impact of treatment.

(4) Palliative care relieves symptoms caused by cancer and improves the quality of life of patients and their families. Not all children with cancer can be cured, but relief of suffering is possible for everyone. palliative care is considered a core component of comprehensive care, starting when the illness is diagnosed and continuing throughout treatment and care, regardless of whether or not a child receives treatment with curative intent. Palliative care programmes can be delivered through community and home-based care, providing pain relief and psychosocial support to patients and their families. Adequate access to oral morphine and other pain medicines should be provided for the treatment of moderate to severe cancer pain, which affects more than 80% of cancer patients in the terminal phase.

\* LMICs(Lower Middle Income Countries) : 低中所得国

出典：<https://www.who.int/news-room/fact-sheets/detail/> より一部改変

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No. 3

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問1 下線部(1)を訳しなさい。

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問2 下線部(1)について、その理由を文中から訳して述べなさい。

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問3 下線部(2)について、どのような取り組みがなされているか文中から訳して述べなさい。

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問4 下線部(3)について、その理由を文中から訳して述べなさい。

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問5 下線部(4)を読み、この内容に関するあなたの考えを日本語で述べなさい。

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問6 文中にある単語を用いて、英文の表題を付けなさい。

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