# **SEMINAR 9** sports medicine, indirect questions

# Task 1 Read the text below and complete the gaps with prepositions

**Sports medicine** is a branch of medicine that deals \_\_\_\_\_ physical fitness, treatment and prevention of injuries related \_\_\_\_\_ sports and exercise.

Sport and Exercise Medicine doctors are specialist physicians who have completed medical school, residency training in a specialty such as orthopaedic surgery, and then gone on \_\_\_\_\_\_ complete additional training in Sport and Exercise Medicine. Specialising \_\_\_\_\_ the treatment of athletes and other physically active individuals, they have extensive education in musculoskeletal medicine. SEM doctors treat injuries such as muscle, ligament, tendon and bone problems, but may also treat chronic illnesses that can affect physical performance, such as asthma and diabetes. SEM doctors also advise managing and preventing injuries.

Specialists in SEM diagnose and treat any medical conditions which regular exercisers or sports persons encounter. The majority of a SEM Physicians' time is therefore spent treating musculoskeletal injuries, however other conditions include Unexplained Underperformance Syndrome, Exercise-induced asthma, screening \_\_\_\_\_ Cardiac Abnormalities, Diabetes in Sport, etc. \_\_\_\_\_ addition team physicians working in elite sport often play a role \_\_\_\_\_ performance medicine, whereby an athletes' physiology is monitored in order to achieve peak physical performance.

# Task 2 Read the text about exercise-induced asthma and think of a suitable heading for each paragraph

1) Exercise-induced asthma (EIA) describes the narrowing of airways that occurs in association with physical exertion. EIA occurs in 90% of asthma sufferers, but also affects a proportion of otherwise "healthy" individuals and appears to be **very common in athletes**. Current estimates suggest that up to 50% of athletes may be affected.

2) In athletes, the diagnosis of EIA is particularly important because of potential implications on performance and health. EIA is a recognized cause of sudden death in sport and, untreated, may have long-term implications for structure and function of the airways. In addition, strict regulations concerning the use of medications by competitive athletes mean that ensuring accurate diagnosis is crucial.

3) Surprisingly, symptoms during exercise (e.g. wheeziness and tight chest) are a poor indicator of actual airway narrowing. Since diagnosis of EIA is often made on symptoms alone this could potentially result in a peculiar situation where EIA is:

- *overdiagnosed* in athletes who report symptoms but who do not have airway narrowing
- *underdiagnosed* in athletes with no symptoms (asymptomatic) but who have narrowing of the airways that can still affect their performance

Studies in elite athletes support this and have led to many top sports teams screening their athletes for EIA (e.g. Australian and British Olympic Teams).

From the point of view of the athlete, the main reason to screen for EIA is that the condition may have detrimental effects on athletic performance. EIA is already known to reduce exercise capacity, particularly peak  $VO_2$  and running speed in cold environments and may compromise not only performance during competition but capacity to train effectively.

Supporters of screening also argue that correctly diagnosing EIA has important implications for the health of athletes, with one study showing asthma as a significant risk factor for unexplained death. In addition, a high proportion of asthma-related deaths occur in athletes during, or soon after, a sporting event.

4) Pharmacological and nonpharmacological therapies have been used successfully in the treatment of EIA. Medications shown to improve FEV<sub>1</sub> response include inhaled  $\beta_2$ -agonists, inhaled corticosteroids, cromolyn compounds, and leukotriene modifiers. Other studies have also highlighted the importance of dietary manipulation as an adjunctive intervention. However, there is no clear consensus as to the optimum treatment. Nevertheless, it is generally acknowledged that  $\beta_2$ -agonist medication should be accompanied by an inhaled corticosteroid, because this helps to prevent persistent use of  $\beta_2$ -agonist therapy and also work against potential airway remodeling that may occur. (http://www.sportasthma.co.uk/eia.html)

#### Extra task: listen and interpret:

Video: https://www.youtube.com/watch?v=UUMLSngHm9s

#### **Task 2 Indirect questions**

There are two main ways of asking questions - directly and indirectly. Both have the same meaning but we use **indirect questions** when we want to be **more polite**, **more formal** or **less confrontational**.

We can ask a **direct question** - Where is Brighton Pier? Or to be more formal or polite, we can ask an **indirect question** - I wonder if you could tell me where Brighton Pier is?

When we create indirect questions, the question (What time is it?) becomes part of a longer sentence or questions (Do you know...?) and the word order changes from the order of a direct question. For example:

**Direct:** What time is it? **Indirect:** Do you know what time it is?

**Direct:** Why was he late? **Indirect:** Can you tell me why he was late?

**Direct:** When does the lesson end? **Indirect:** Could you tell me when the lesson ends?

**Direct:** Is she French? **Indirect:** Do you know whether/if she is French?

#### Exercise: Transform the questions into indirect speech.

- 1. Why did she cry? I don't really know \_\_\_\_\_\_.
- 2. Does she speak Greek? I will ask her \_\_\_\_\_.
- 3. Where is Joe? I have no idea \_\_\_\_\_.
- 4. I'd like to know what time \_\_\_\_\_. The show starts at 8 o'clock.
- 5. Is he all right? I do not know \_\_\_\_\_.
- 6. What did he want? I'm afraid I can't tell you \_\_\_\_\_
- 7. Do you know who\_\_\_\_\_? Yes, Jim Harrison is a writer.
- 8. Whose car was it? I'm not quite sure \_\_\_\_\_.
- 9. Is this the right train? Let's ask someone \_\_\_\_\_\_.
- 10. Can you tell me what \_\_\_\_\_? Her name is Maggie.

## Task 3 Word formation

Use the word at the end of each line to form a word that fits in the space in the same line.

## Happy is healthy

Medical research has found that has a strongly	HAPPY
beneficial effect on health. The healing properties of	LAUGH
are such that humour is now being used alongside more	TRADITION
courses of in some hospitals. In a London's children's	TREAT
hospital, for example, two clowns are provided for the of	ENTERTAIN
patients. Doctors say that these clowns are in making	SUCCESS
the children feel better.	
It seems that when we laugh, there can be a in both	REDUCE

blood pressure and the amount of in our muscles.	TENSE
Although it is to prove it at the moment, this may also	POSSIBLE
mean that people who feel unhappy and who are, therefore,	LIKELY
to laugh so much, suffer more often from physical	ILL

#### Form nouns from the verbs

Observe	
Explain	
Recomm	end
Argue	
State	
Advice	
Describe	
Emphasis	se
Compare	
Analyse	
Increase	