

英 語

〔注 意 事 項〕

1. 監督者の指示があるまでは、この問題冊子を開かないこと。
2. 解答用紙は、コンピュータで処理するので、折り曲げたり汚したりしないこと。
3. 解答用紙に、氏名・受験番号を記入し、受験番号をマークする。マークがない場合や誤って記入した場合の答案は無効となる。

受験番号のマーク例(3015の場合)

受 験 番 号			
3	0	1	5
千位	百位	十位	一位
①	●	①	①
①	①	●	①
②	②	②	②
●	③	③	③
④	④	④	④
⑤	⑤	⑤	●
⑥	⑥	⑥	⑥
⑦	⑦	⑦	⑦
⑧	⑧	⑧	⑧
⑨	⑨	⑨	⑨

4. 解答用紙にマークするときは、HB または B の黒鉛筆を用いること。誤ってマークした場合には、消しゴムで丁寧に消し、消しくずを完全に取り除いたうえで、新たにマークし直すこと。
5. 下記の例に従い、正しくマークすること。

(例えばcと答えたいとき)

正しいマーク例

○	○	●	○	○	○	○
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誤ったマーク例

○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○
○	○	○	○	○	○	○

○をする
 Vをする
 完全にマークしない
 枠からはみ出す

6. 解答は、すべて解答用紙の所定の位置に記入すること。
7. 最後の問題 Ⅳ に自由英作文があるので、時間配分に注意すること。

I

次の英文を読み、下記の設問に答えなさい。

Andy, the rugby hero, seemed as fit as he had ever been. He had played in 24 international matches. Three years ago, at 58, and a world record holder for indoor rowing, he felt an unusual tiredness during a training session. He dismissed the chest pain he felt, and took a hot bath. Soon after, he suffered what seemed to be a heart attack. However, he was diagnosed as having a pulmonary embolism,^{注1} or a blood clot on the chest. Further tests showed that he had inoperable prostate cancer.^{注2} His PSA level,^{注3} indicating the levels of protein released into the bloodstream by the prostate, normally under four, was an incredible 133, indicating how serious his problem was. He immediately started writing a diary of his subsequent treatment and how it felt for him not to have control over his life any more. His book has just won an award for Best Rugby Book.

As he addresses the audience at the award ceremony, he says that we should never give up hope. "Otherwise, we will lose the precious gift given to us by God. When the end comes, it will be with hope and our hearts will not be broken." In his speech, he stresses the need for other men to be tested for early signs of any potential problem. "If it is discovered early, the chances of recovery are great." Although he initially felt some doubts about revealing his private battle, Andy soon realized that people liked what they heard. Hundreds of people in the U.K. are diagnosed with cancer every day. He says his story is about everyone's coming to terms with the disease. It gave those with similar illnesses comfort and encouragement. He has been helped tremendously by his family, while admitting that his wife initially criticized him for being so seemingly self-involved. Also, his eldest son hates the publicity surrounding him.

Andy still has a towering appearance and looks fit and youthful. His doctor offered him some hope when he gave the first diagnosis. It hadn't

spread to his bones, and his tumor had been shrunk by radiotherapy. Although the cancer now seems to be under control, his PSA score has recently gone up again, and there is a nagging suspicion the cancer may have returned.

His illness has given him a new mission in life to promote awareness of prostate cancer among the general population, and to persuade all men over 50 to have their PSA levels checked. He denies that he has behaved courageously as he says he has never suffered any pain. However, his book suggests his battle reflects the determination and spirit of a rugby international. He feels lucky, as he could have easily died earlier from the pulmonary embolism. “I have had time to get closer to my family, sort out my financial affairs, and document my illness and treatment.” Although he is still rowing, the drugs are dragging down his energy. This makes him more vocal in condemning the substances used by young athletes to boost their performance at the expense of their long-term health. He describes the influence that drugs have in sport as “evil.”

Andy doesn't care that he will never win another sporting title. He is counting his blessings. “The difference between winning and losing is just a blink,” he says. Although he is referring to sport, he might as well be talking about the thin line between life and death. His next hospital appointment is a few weeks away. On the surface, he is calm, but is beginning to think about what the doctor is going to tell him. “I need to keep doing things,” he says. “I don't want to just sit at home worrying about it.”

注 1: pulmonary embolism 肺塞栓症

注 2: inoperable prostate cancer 手術不能な前立腺ガン

注 3: PSA (Prostate Specific Antigen) 前立腺特異抗体

設 問

上記の英文の内容に合うように、各文の空所を補うものとして最も適したものを選択肢 1～4の中から選びなさい。また(7)は、質問に対する答えとして最も適したものを選択肢 1～4の中から選びなさい。

(1) The most appropriate title for this article is “_____.”

1. My Victory over Cancer
2. The Evil of Drugs in Sport
3. My Mission in Life
4. No More Sporting Titles for Me

(2) Andy advises men worried about getting the same illness _____.

1. to write a book about prostate cancer
2. to seek help from their immediate family
3. to do a lot of sport and exercise
4. to take a PSA test

(3) The phrase it will be with hope and our hearts will not be broken, in paragraph 2, suggests that _____.

1. people should adopt a positive attitude to illness
2. having hope increases one's chances of recovery
3. people should talk to others about their health concerns
4. people shouldn't worry others too much about their health concerns

(4) The phrase his wife initially criticized him, in paragraph 2, suggests that she _____.

1. wished he hadn't started keeping his diary
2. thought he was concentrating too much on his own problems
3. was angry when she heard he had contracted the disease
4. was happy that he was able to tell others about his experiences

(5) Andy now spends a lot of his time _____.

1. writing books about his life
2. offering advice to others
3. talking about his passion for rugby and rowing
4. worrying about his next hospital appointment

(6) Andy is probably most worried about _____.

1. dealing with his financial affairs
2. being unable to continue participating in sports
3. what he's going to hear in a few weeks from now
4. the pain he is suffering

(7) Which of the following statements is NOT true?

1. Men with prostate cancer cannot have an operation to treat it.
2. Older men should take a PSA test even if they don't have any symptoms of the illness.
3. Athletes using drugs to improve their performance are likely to suffer health problems when they get older.
4. Andy's book gives advice and encouragement to all those suffering from cancer.

(8) Andy's days as a top rugby international player _____.

1. have made him look older than his age
2. were only surpassed by his achievements for indoor rowing
3. are the main focus of his prize-winning book
4. prepared him mentally to cope with his current problem

II

次のインタビューを読み、下記の設問に答えなさい。

At Harvard, the social psychologist Daniel Gilbert is known as Professor Happiness because he directs a laboratory studying the nature of human happiness.

Question: How did you get interested in your area of study?

Answer: It was something that happened to me roughly 13 years ago. I spent the first decade of my career studying how people have the tendency to ignore the power of external situations to determine human behavior. Why do many people, for instance, believe the uneducated are stupid? I'd have been content to work on this for many more years, but some things happened in my own life. Within a short period of time, my mentor passed away, my mother died, my marriage fell apart and my teenage son developed problems in school. What I soon found was that, as bad as my situation was, it wasn't devastating. One day, I had lunch with a friend who was also going through difficult times. I told him: "If you'd have asked me a year ago how I'd deal with all this, I'd have predicted that I couldn't get out of bed in the morning." He nodded and added, "Are we the only people who could be so wrong in predicting how we'd respond to extreme stress?" That got me thinking. I wondered: How accurately do people predict their emotional reactions to future events?

Q: How does that relate to understanding happiness?

A: Because if we can't predict how we'd react in the future, we can't set realistic goals for ourselves or figure out how to reach them. What we've been seeing in my lab, over and over again, is that people have an inability to predict what will make them happy — or unhappy. If you can't tell which predictions are better than others, it's hard to find happiness. The truth is, (A) things don't affect us as profoundly as we expect them to. That's true of (B) things, too. We adapt very quickly to either,

and so the (C) news is that losing your sight is not going to make you as unhappy as you think. The (D) news is that winning the lottery will not make you as happy as you'd expect.

Q: Are you saying that people are happy whatever their fate is?

A: As a species, we tend to be moderately happy with whatever we get. If you take a scale that goes from zero to 100, people generally report their happiness at about 75. We keep trying to get to 100. Sometimes we get there, but we don't stay long. We certainly fear the things that would get us down to 20 or 10—the death of a loved one, the end of a relationship, a serious challenge to our health. But when these things happen, most of us return to our emotional baselines more quickly than we predict. Humans have a great ability to recover from problems.

Q: Do most of us have unreasonable notions of what happiness is?

A: Inaccurate, flawed ideas. Few of us can accurately predict how we will feel tomorrow or next week. That's why when you go to the supermarket on an empty stomach, you'll buy too much, and if you shop after a big meal, you'll buy too little. Another factor that makes it difficult to forecast our future happiness is that most of us are rationalizers. We expect to feel devastated if our spouse leaves us or if we get passed over for a big promotion at work. But when things like that do happen, it's soon, "She never was right for me," or "I actually need more free time for my family." People have a remarkable talent for finding ways to soften the impact of negative events. Therefore, they mistakenly expect such bad news to be much more devastating than it turns out to be.

Q: So, if we didn't have these mechanisms, would we be too depressed to go on?

A: There may be something to that. People who are clinically depressed often seem to lack the ability to reframe events. This suggests that if the rest of us didn't have these mechanisms, we might be depressed as well.

Q: As the author of a best seller about happiness, do you have any advice on how people can achieve it?

A: We know that the best predictor of human happiness is human relationships and the amount of time that people spend with family and friends. We know that it's significantly more important than money and somewhat more important than health. That's what the data shows. The interesting thing is that people will sacrifice social relationships to get other things that won't make them as happy, such as money. That's what I mean when I say people should do "wise shopping" for happiness. Another thing we know from studies is that people tend to take more pleasure in experiences than in things. So if you have a certain amount of dollars to spend on a vacation or a good meal or movies, it will bring you more happiness than material things. One reason for this is that experiences tend to be shared with other people, and objects usually aren't.

設 問

上記のインタビューの内容に合うように、各問に対する答えとして最も適したものを選択肢 1～4 の中から選びなさい。

(1) What was the original focus of Dr. Gilbert's research?

1. It was to show how external situations determine human behavior.
2. It was about how humans ignore external situations.
3. It was about how uneducated people react to the external power of human behavior.
4. It was about the cause of human ignorance.

(2) How did he get involved in his current research topic?

1. When he had lunch with a friend, he started to think that helping people through hard times seemed difficult.
2. When he was under extreme stress, he began to wonder how people could predict devastating events.
3. After several difficult experiences, he began to wonder about people's ability to predict their emotional reactions to future events.
4. After his mother died, he wondered why many people believe the uneducated are stupid.

(3) Which of the following is the best combination to fill in the blanks (A) to (D)?

(A) — (B) — (C) — (D)

1. bad — good — bad — good
2. bad — good — good — bad
3. good — bad — bad — good
4. good — bad — good — bad

(4) How do people often react when things get them down?

1. They believe they will be happy in the future.
2. They rate their happiness at about 75 points.
3. They are too depressed to get over it.
4. They return to their emotional baselines quickly.

(5) What do people do when they are devastated?

1. They usually look for ways to get over negative events.
2. They sometimes try to predict how happy they will be in the future.
3. They become optimistic.
4. They assess their situation accurately.

- (6) Why do clinically depressed people often stay so depressed?
1. Because they expect the worst to happen.
 2. Because they don't try to forecast future events.
 3. Because they don't seem to have the ability to reframe events.
 4. Because they don't recognize they are depressed.
- (7) According to Dr. Gilbert, what are the two most important things for happiness?
1. Money and health.
 2. Human relations and pleasurable experiences.
 3. Social relationships and money.
 4. Health and worthwhile experiences.
- (8) What does "wise shopping" imply in the interview?
1. People should not sacrifice social relationships to make money.
 2. People should not sacrifice money for social relationships.
 3. People should sacrifice social relationships to get things that make them happy.
 4. People should aim for things that make them happy even if they sacrifice social relationships.

III

次の英文を読み、下記の設問に答えなさい。

It has long been known that our diet influences the development of our bodies, and even our minds. A recent medical study (1) that the influence of food on our lives starts even before we are born. The study conducted at the University of Exeter showed that a mother's diet before getting pregnant may significantly influence her chances of having either a boy or a girl. Eating a nutritious, higher-calorie diet, including potassium-rich foods such as bananas, increasing one's intake of sodium, and not skipping breakfast, seemed to increase the chances of having a boy. The link has not been proven completely yet, but the idea accords with test tube fertilization^{注1} studies which show that male embryos^{注2} thrive best with long exposure to nutrient-rich cultures. Fiona Mathews, the study's leading author, said the new findings also fit with research showing that male embryos aren't likely to survive in conditions with low sugar levels. This is a condition common among women who skip meals.

Dr. Tarun Jain, a fertility expert* at the University of Chicago, was skeptical of the study at first, but he says the research was well done and that it merits follow-up research. "It just might be that it takes more nutrients to make boys than girls," he said. "While men's sperm determine a baby's gender, it could be that certain nutrients or eating patterns make women's bodies more receptive to sperm carrying the male chromosome,"^{注3} he added.

The research was based on a study of 700 first-time pregnant women in the United Kingdom who didn't know the sex of their fetuses.^{注4} They provided data about their eating habits during the year before they got pregnant. Among the women in the group which had the highest calorie intake before pregnancy (but whose calorie intakes were still within a normal, healthy range), 56 percent had boys versus 45 percent among the women with the lowest calorie intake. Women who ate at least one bowl of cereal for breakfast

per day were 87 percent more likely to have boys than those who ate no more than one bowl per week. Eating cereal is common at breakfast time in Britain and, in the study, eating very little cereal was considered a possible sign of skipping breakfast. Furthermore, the women who had boys consumed a daily average of 300 milligrams more potassium, a chemical found commonly in bananas, than the women who had girls. The women who had boys also took in an average of about 400 calories more per day than those who had girls. Contrary to the common belief that pregnant women who drink a lot of milk are more likely to have girls, the study found that such women were actually more likely to have boys, because of their increased intake of calcium.

The findings seem consistent with research that has been done with other animals. Dr. Michael Lu, an associate professor at the University of California, said, "the results are certainly reasonable from an evolutionary biology point of view. Since boys tend to be bigger, it would make sense that it would take more calories to create them." Still, he warned that there are many other factors involved that can influence the gender of a woman's baby. (A) Thus it would be dangerous for women who want to have boys to overeat, and for women who want girls to starve themselves. Both extreme eating patterns are unhealthy for both mothers and babies. "The bottom line is," he concluded, "we still don't know how to advise patients how to make boys." (B)

Recently, increasing numbers of people throughout the world have been asking doctors for help in determining the sex of their children. This trend, however, raises many difficult ethical, social, and medical questions. (C) Ultimately, our decisions about these questions and possibilities must involve an ethical consideration of human values and an ecological understanding of the nature of all life on our planet. (D)

注 1: test tube fertilization 試験管内(体外)受精

注 2: embryo 胎芽 注 3: chromosome 染色体 注 4: fetus 胎児

設 問

上記の英文の内容に合うように、各問に対する答えとして最も適したものを
選択肢 1 ～ 4 の中から選びなさい。

(1) Which of the following is the most appropriate title for the article?

1. How to Choose the Sex of Your Child
2. Food and Children's Health
3. Mothers' Responsibilities for Children
4. Influences on Babies' Sex

(2) Which of the following words is the most appropriate for blank
(1)?

1. adopts
2. argues
3. denies
4. replies

(3) What does Dr. Jain think?

1. He thinks the study proves that diet can determine a baby's gender.
2. He has some doubts about the study but is interested in it.
3. He thinks that eating patterns determine a baby's gender.
4. He thinks that women's bodies are receptive to male chromosomes.

(4) Which of the following statements is NOT true?

1. Eating cereal increases the chances of having a girl.
2. Drinking more milk increases the chances of having a boy.
3. Eating foods with potassium increases the chances of having a boy.
4. Skipping breakfast increases the chances of having a girl.

(5) What results did the study find?

1. A high intake of potassium before pregnancy increases the chances of having a boy.
2. Skipping breakfast increases the chances of having a boy.
3. Eating very little cereal is considered a sign of being unhealthy in the UK.
4. During pregnancy, women should consume about 400 more calories per day.

(6) What does Dr. Lu claim?

1. Extreme eating patterns result in more boys being born.
2. We will be able to choose the sex of babies in the near future.
3. Recently, more people have extreme habits of eating.
4. The University of Exeter study follows the ideas of evolutionary biology.

(7) Which of the following ideas is stated in the article?

1. People are likely to stop trying to choose the sex of their babies.
2. Determining the sex of babies should be prohibited.
3. Doctors shouldn't tell women how to have baby boys or girls.
4. There will be an increase in the percentage of boys in the future.

(8) In which place —(A), (B), (C), or (D)— would the following sentence fit most logically?

Medical research may in fact develop techniques that will make it possible to choose the characteristics of our children.

1. (A)
2. (B)
3. (C)
4. (D)

IV**自由英作文問題**

下記のテーマについて、英語で自分の考えを述べなさい。書体は活字体でも筆記体でもよいが、解答は所定の範囲内に収めなさい。

In English, write a short essay in which you discuss your ideas about the relationship between diet and health.