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https://www.100test.com/kao_ti2020/539/2021_2022__E8_80_83_E7_A0_94_E8_8B_B1_E8_c73_539132.htm 2003年Text 4 It is said that in England death is pressing, in Canada inevitable and in California optional. Small wonder. Americans' life expectancy has nearly doubled over the past century. Failing hips can be replaced, clinical depression controlled, cataracts removed in a 30-minute surgical procedure. Such advances offer the aging population a quality of life that was unimaginable when I entered medicine 50 years ago. But not even a great health-care system can cure death-and our failure to confront that reality now threatens this greatness of ours. Death is normal. We are genetically programmed to disintegrate and perish, even under ideal conditions. We all understand that at some level, yet as medical consumers we treat death as a problem to be solved. Shielded by third-party payers from the cost of our care, we demand everything that can possibly be done for us, even if it's useless. The most obvious example is late-stage cancer care. Physicians-frustrated by their inability to cure the disease and fearing loss of hope in the patient-too often offer aggressive treatment far beyond what is scientifically justified. In 1950, the U.S. spent .7 billion on health care. In 2002, the cost will be billion. Anyone can see this trend is unsustainable. Yet few seem willing to try to reverse it. Some scholars conclude that a government with finite resources should simply stop paying for medical care that sustains life beyond a certain age-----say 83 or so. Former Colorado

governor Richard Lamm has been quoted as saying that the old and infirm "have a duty to die and get out of the way", so that younger, healthier people can realize their potential. I would not go that far. Energetic people now routinely work through their 60s and beyond, and remain dazzlingly productive. At 78, Viacom chairman Sumner Redstone jokingly claims to be 53. Supreme Court Justice Sandra Day O'Connor is in her 70s, and former Surgeon General C. Everett Koop chairs an Internet start-up in his 80s. These leaders are living proof that prevention works and that we can manage the health problems that come naturally with age. As a mere 68-year-old, I wish to age as productively as they have. Yet there are limits to what a society can spend in this pursuit. Ask a physician, I know the most costly and dramatic measures may be ineffective and painful. I also know that people in Japan and Sweden, countries that spend far less on medical care, have achieved longer, healthier lives than we have. As a nation, we may be overfunding the quest for unlikely cures while underfunding research on humbler therapies that could improve people's lives.

56. What is implied in the first sentence?

[A] Americans are better prepared for death than other people. [B]

Americans enjoy a higher life quality than ever before. [C]

Americans are over-confident of their medical technology. [D]

Americans take a vain pride in their long life expectancy. [答案] C

[解题思路] 本文第一句话说 "It is said that in England death is pressing, in Canada inevitable and in California optional" (据说, 在英国死亡是很紧迫的, 在加拿大死亡是不可避免的, 在加利福尼亚死亡则是可以选择的)。众所周知, 死亡是每一个

人都不可避免的，但该句却说美国人觉得死亡是可以选择的，足以反映出美国人那种自大的情绪和对本国医疗技术发达程度的过分自信，C选项正好符合这个意思。选项A没有在原文中体现出来，选项B的错误在于原句是做不同国家间的横向比较，而选项的表述则是时间上的纵向比较，因而不符合题意。D选项把重点放在了long life expectancy上，但是通过阅读第一段的后面几句话可以发现，文章的重点在medical technology的发达，因此D也是干扰项。 [题目译文] 文章第一句话暗示了什么？ [A] 美国人比其他国家的人对死亡所作的准备更加充分。 [B] 美国人现在的生活质量比以前任何时候都要高。 [C] 美国人对于他们的医疗技术过分自信。 [D] 美国人对于他们的预期寿命妄自尊大。 100Test 下载频道开通，各类考试题目直接下载。详细请访问 www.100test.com