

國立中興大學 114 學年度 學士後醫學系公費生招生考試

英文科試題

考試時間：80 分鐘

考試開始鈴響前，不得翻閱試題，且不得書寫、劃記、作答！
本考試不得使用計算機

考生請注意：

- 一、考生應確實關閉行動電話(或取出電池)及手錶之鬧鈴設定；除准考證及考試必需用品外，所有物品(含行動電話、穿戴式裝置等)均應立即放置於臨時置物區，不得發出聲響或有影響試場秩序之情形。
- 二、請確認抽屜中、桌椅下、座位旁均無其他非必要用品。如有任何問題請立即舉手反映。
- 三、坐定後，雙手離開桌面，請核對並確認准考證、座位標籤、及答案卡上之准考證號碼是否完全相同。如有錯誤，應立即舉手請監試人員處理。
- 四、考生應試時不得飲食、飲水、抽菸、嚼食口香糖。
- 五、答案卡劃記以 2B 鉛筆為佳，劃記時要粗黑、清晰，劃滿作答格，不可出格，不得折損答案卡，修正作答以軟性橡皮擦擦拭乾淨，且不得使用修正液(帶)修正，未遵照正確作答方式而致機器無法正確辨識答案者，考生自行負責，不得以任何理由補救。答案寫在試題紙上者不予計分。
- 六、本試題必須與答案卡一併繳回，不得攜出試場。

國立中興大學 114 學年度學士後醫學系招生考試試題

科目：英文

系所：學士後醫學系甲、乙組

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選擇題(單選題，共 50 題，一題 2 分，答錯不倒扣)

This test comprises 50 items, each valued at two points, for a total of 100 points. Each test item allows for the selection of only one correct option. All answers must be marked exclusively on the card provided.

I. Vocabulary: Read each question carefully and choose the option that best completes the sentence or fits the given context.

1. The new drug showed remarkable _____ in treating previously resistant infections, although long-term studies are still pending.
(A) chronicity
(B) validity
(C) proficiency
(D) potency
2. During routine testing, several healthcare workers were identified as _____, prompting concerns as they had worked closely with vulnerable patients while unaware they carried the virus.
(A) asymptomatic
(B) convalescent
(C) metastatic
(D) preemptive
3. In discussing the latest immunotherapy treatments, researchers noted that the drug's _____ effects were particularly promising, as it specifically targeted cancer cells while leaving healthy tissue largely unaffected.
(A) arbitrary
(B) deleterious
(C) discriminatory
(D) selective
4. After analyzing his family medical records, the genetic counselor explained that the chromosomal abnormality was _____, which helped explain the similar symptoms observed across three generations.
(A) concurrent
(B) congenital
(C) contingent
(D) conducive
5. Early detection proved challenging as many patients sought medical attention only after the _____ period had elapsed, by which time the infection had already progressed to an advanced stage.
(A) incubation
(B) perfusion
(C) remission
(D) suppression

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6. The unique bugs, black soldier fly larvae, transform food waste into nutrient-rich _____, which can help restore soil biodiversity and quality.

- (A) pesticide
- (B) biofertilizer
- (C) herbicide
- (D) preservative

7. In their efforts to achieve a breakthrough in marsupial breeding, researchers obtained _____ from eastern grey kangaroos, utilizing these biological samples for in vitro fertilization (IVF).

- (A) predators
- (B) specimens
- (C) habitats
- (D) fossils

8. During a clinical trial, some participants received the actual medication, while others were given a _____, a harmless substance with no active ingredients used to measure the drug's true effectiveness.

- (A) vaccine
- (B) antidote
- (C) placebo
- (D) prescription

9. Regular yoga practice can enhance _____, allowing practitioners to maintain physical exertion for longer periods without fatigue.

- (A) resilience
- (B) dexterity
- (C) equilibrium
- (D) stamina

10. After the mysterious death of the scientist, medical examiners conducted a(n) _____, a full post-mortem examination, to determine the exact cause.

- (A) autopsy
- (B) biopsy
- (C) diagnosis
- (D) prognosis

II. Grammar: Read each question carefully and choose the best option that fits the sentence appropriately.

11. After reviewing the patient's medical history and blood pressure readings, the doctor suggests that the patient _____ lisinopril 10mg daily to manage high blood pressure and prevent complications.

- (A) take
- (B) takes
- (C) to take
- (D) taking

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12. If the patient _____ the prescribed treatment plan, she would have avoided the complications.
(A) followed
(B) has followed
(C) had followed
(D) had been followed
13. The symptoms persisted _____ the administration of antipyretics, indicating that the treatment was not effective in controlling the fever.
(A) because
(B) despite
(C) although
(D) while
14. The surgical procedure _____ as soon as the patient's condition stabilizes, specifically when the white blood cell count returns to normal range.
(A) has performed
(B) was performed
(C) should perform
(D) should be performed
15. The researchers were shocked to find that the ancient manuscript _____ before they had the chance to examine it.
(A) disappears
(B) was disappearing
(C) had disappeared
(D) has disappeared
16. The research team had meticulously planned every aspect of the project; _____, unexpected technical failures forced them to revise their approach entirely.
(A) hence
(B) nevertheless
(C) moreover
(D) instead
17. Despite several warnings, the hikers insisted _____ continuing their journey up the mountain, unaware of the approaching storm.
(A) on
(B) in
(C) at
(D) with
18. The newly established institute, _____ scientists collaborate on renewable energy solutions, has already attracted global attention for its groundbreaking research.
(A) which
(B) where
(C) that
(D) whose

19. Due to the severity of the patient's condition, the doctor _____ an emergency operation performed immediately.

- (A) made
- (B) got
- (C) had
- (D) let

20. Only after numerous failed attempts to stabilize the patient's vital signs _____ the doctors consider an experimental treatment.

- (A) had
- (B) did
- (C) was
- (D) have

III. Cloze: Consider the context of the passage and the information provided to help you determine the appropriate sentences for the blanks. Choose the best option that maintains the coherence of the passage appropriately.

Questions 21-23

Loneliness is a growing global health concern that affects individuals of all ages and socioeconomic backgrounds. Governments and health organizations grapple with mounting evidence of isolation's devastating societal toll. _____ 21 _____ Similarly, the US Surgeon General has highlighted its impact on mortality, equating it to smoking 15 cigarettes per day. Loneliness is defined as the distressing perception of social isolation stemming from a gap between an individual's desired and actual social connections. Recent studies have revealed concerning patterns across different age groups. _____ 22 _____ Research indicates that loneliness is linked to a 30% increased risk of premature death. Several factors contribute to this heightened risk, including biological changes such as weakened immunity, elevated stress, inflammation, and compromised metabolism. _____ 23 _____ Given these severe health implications, tackling this epidemic requires a multifaceted approach, including individual efforts to raise awareness and healthcare interventions like counseling and therapy.

- (A) Additionally, loneliness is associated with mental health issues like depression, anxiety, and even suicidal thoughts.
- (B) The World Health Organization (WHO) has identified loneliness as a significant public health threat, initiating an international commission to address the issue.
- (C) Experts recommend increased social media usage as a primary solution to combat widespread loneliness.
- (D) However, urban populations are not immune to loneliness, as factors like anonymity, lack of close-knit communities, and fast-paced lifestyles can also contribute significantly to feelings of social isolation.
- (E) Adolescents, in particular, experience loneliness at alarming rates, with figures suggesting that between 5% and 15% are affected.

Questions 24-26

Joseph Lister, a British surgeon, revolutionized the field of surgery by introducing the concept of antiseptics, a method of using chemicals to destroy germs that cause infections. _____ 24 _____ The prevailing theory at the time attributed wound infections to gases entering the wound, with no understanding of the role that microorganisms played in disease transmissions. Lister was convinced that these invisible creatures were responsible for the high mortality rates in his patients, so he began to experiment with carbolic acid, a chemical known to kill parasites and treat sewage, and utilize it methodically to sterilize surgical instruments and disinfect wounds. _____ 25 _____ However, Lister's meticulous documentation of his results, along with his engaging personality and demonstrative surgical performances, gradually won over the medical community. Lister's work had a profound impact on the practice of surgery, dramatically reducing the risk of death from infection. _____ 26 _____ Lister's legacy continues to shape the field of surgery today, with his principles of antiseptics still forming the basis of infection control in hospitals worldwide.

- (A) Anaesthetics had only just been introduced, making surgery pain-free for the patient and allowing the surgeon to try more complicated and time-consuming procedures.
- (B) Lister's antiseptic techniques were met with resistance from his contemporaries, who found it difficult to believe that invisible germs could be the cause of death.
- (C) Before his groundbreaking efforts, surgical procedures were perilous, with infection rates alarmingly high.
- (D) His success in preventing wound sepsis and gangrene also reduced the need for amputations, a common practice in the 19th century.
- (E) In understanding Lister's journey, one glimpses the relentless pursuit of knowledge that defines the very essence of medical innovation.

Questions 27-30

Today, artificial versions of nature are everywhere—indoor ski slopes, synthetic lawns, and faux flowers, with the artificial flower market projected to reach \$1.78 billion this year. Some even claim faux plants are a green alternative. But is there a real difference between experiencing real and artificial nature? _____ 27 _____ Throughout history, scholars have explored humanity's deep connection to the natural world, emphasizing our innate curiosity about living things. Observing real plants allows us to ask and answer meaningful questions, such as why leaves change color or why flowers bloom. _____ 28 _____

Unlike fake plants, real ones respond to care. _____ 29 _____ A real acorn can grow into an oak, but a plastic acorn will always stay the same. Even if a fake plant were designed to mimic growth, its condition would not be influenced by environmental factors—it neither flourishes nor deteriorates. The significance of real plants extends beyond personal experience, playing a crucial role in environmental sustainability and ecological balance. Unlike artificial plants, real plants actively support air purification, biodiversity, and soil health. _____ 30 _____ A notable example is China's Pearl River Delta, a major hub for fake plant manufacturing that is already grappling with severe industrial pollution. Our bond with real nature is rooted in its vitality. While artificial plants may offer convenience, they lack the dynamic qualities that allow us to engage, learn, and care. By choosing real nature, we embrace the joy of nurturing life and understanding the world around us.

- (A) Some scientists argue that artificial plants can be just as aesthetically pleasing as real ones, making them a suitable alternative for interior design.

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- (B) In contrast, large-scale artificial production generates substantial environmental waste, worsening pollution and damaging natural ecosystems.
- (C) Research shows that real nature offers mental health benefits that artificial versions cannot fully replicate.
- (D) With artificial plants, such inquiries lead only to the designer's intent, rather than insights into life itself.
- (E) Sunlight fuels photosynthesis, impacting their growth, while artificial plants remain unchanged.

IV. Reading Comprehension: Read the content and answer questions for each passage.Questions 31-35

Recent wildfires in the Los Angeles area have highlighted a growing concern beyond immediate physical destruction: the complex relationship between wildfire smoke and human cognitive function. While the immediate impacts of these fires—including casualties, displacement, and property destruction—are evident, researchers are increasingly focused on understanding the long-term neurological and psychological effects of wildfire smoke exposure.

Studies have revealed that wildfire smoke contains fine particulate matter (PM2.5) that is significantly more toxic than typical air pollution. These particles, characterized by high levels of polycyclic aromatic hydrocarbons (PAHs) mixed with various neurotoxic elements including heavy metals, can reach the brain through multiple pathways. They either pass directly through the olfactory nerve, penetrate the blood-brain barrier, or modulate the nervous system, ultimately leading to brain inflammation and oxidative stress. The evidence for neurological impact is particularly striking, as demonstrated by a collaborative study from the Universities of Washington and Pennsylvania, which revealed that for every 1 microgram increase in wildfire particle concentration, the odds of a new dementia diagnosis rose by approximately 21%, compared to just a 3% increased risk for non-wildfire particles. Additional research from the University of New Mexico has shown that sudden spikes in air pollution create surges of inflammation in the hippocampus—the brain region responsible for memory and learning—which can persist for over a month after exposure.

The relationship between smoke exposure and cognitive function has been documented through various empirical studies. A comprehensive analysis conducted at UC San Diego examined the impact of smoke on academic performance by studying China's national college entrance examinations over a six-year period. The research specifically focused on smoke from routine, controlled agricultural fires, methodologically isolating cognitive effects from the anxiety associated with evacuation concerns. The findings revealed that significant increases in upwind fires during examination periods led to measurable decreases in student performance, with scores dropping by an average of 0.6 points. These cognitive effects have substantial economic implications, with a 2022 US study estimating that smoke exposure in 2016 alone reduced students' future earnings by approximately \$1.7 billion.

The psychological impact of wildfires presents another dimension of concern. Studies of communities affected by major fires, such as the 2018 Camp Fire in California, reveal complex patterns of mental health effects. Even individuals not directly impacted by the fires reported increased neurocognitive issues and struggled with depression and anxiety. Researchers have also documented a phenomenon known as

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solastalgia—the distress of witnessing one's environment change rapidly—among residents in fire-prone regions, highlighting the interconnected nature of physical exposure and psychological well-being.

31. Which statement most accurately represents the relationship between wildfire smoke exposure and neurological conditions based on the research presented?
- (A) Neurological impacts occur only after sustained exposure over multiple fire seasons.
 - (B) The blood-brain barrier provides effective protection against most wildfire pollutants.
 - (C) The neurological effects are primarily mediated through respiratory impairment.
 - (D) The PM2.5 from wildfires presents a unique risk profile compared to general air pollution.
32. Which of the following is NOT presented in the text as a pathway through which wildfire smoke particles can affect the brain?
- (A) Through inflammatory responses in the respiratory system
 - (B) Through direct passage via the olfactory nerve
 - (C) Through penetration of the blood-brain barrier
 - (D) Through modulation of the nervous system
33. Based on the research findings, what is the most accurate characterization of the cognitive effects of wildfire smoke exposure?
- (A) The effects manifest only during active exposure to smoke.
 - (B) Pre-existing cognitive conditions determine vulnerability to effects.
 - (C) The impacts are most severe in particular age demographics.
 - (D) Cognitive impairment shows a dose-dependent relationship with exposure.
34. Which of the following economic consequences does the passage suggest is linked to wildfire smoke exposure?
- (A) Healthcare costs for treating respiratory conditions
 - (B) Property damage in affected areas
 - (C) Reduced academic performance affecting future earnings
 - (D) Lost productivity in the workforce
35. Which of the following best represents the concept of “solastalgia”?
- (A) A clinical measure of environmental anxiety
 - (B) The physical symptoms of smoke exposure
 - (C) A temporary stress response to evacuation
 - (D) The psychological impact of witnessing environmental degradation

Questions 36-40

The transformative potential of artificial intelligence in healthcare encompasses a broad spectrum of applications, from advanced diagnostics to the realm of personalized medicine. State-of-the-art AI language models, including ChatGPT and Med-PaLM, are demonstrating remarkable capabilities in

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supporting medical practitioners through image analysis, risk assessment, and the development of tailored treatment protocols. While these innovations promise to enhance care quality and mitigate administrative burden, thereby addressing the pressing issue of physician burnout, numerous experts advocate for a measured perspective regarding AI's immediate potential, emphasizing its role as a complementary tool rather than a replacement for human expertise.

A significant concern within the medical community is that the current fascination with AI might deflect attention from fundamental healthcare challenges, such as critical staffing shortages and insufficient resource allocation for established therapeutic interventions. Moreover, there are legitimate apprehensions that AI implementation could potentially amplify existing healthcare disparities, particularly for individuals with limited digital literacy or healthcare comprehension. It is noteworthy that while AI demonstrates proficiency in specific medical tasks, its impact on mortality rates remains to be definitively established. Furthermore, even if AI accelerates certain processes like diagnostic procedures, its effectiveness may be constrained by systemic bottlenecks elsewhere in the healthcare pipeline. This underscores the importance of adopting a pragmatic approach to AI development, one that acknowledges and addresses real-world complexities.

Successful AI integration in healthcare demands careful attention to multiple critical factors, including safety protocols, data privacy measures, system reliability, and ethical considerations supported by rigorous validation processes and continuous monitoring systems. Training on comprehensive, unbiased datasets remains crucial for ensuring AI system dependability, as does clarifying the attribution of responsibility in cases of AI-related diagnostic errors. The future of AI lies in developing synergistic relationships between human expertise and machine capabilities. The optimal approach positions AI as an empowerment tool for medical professionals, enabling them to focus on sophisticated decision-making processes, meaningful patient interactions, and enhanced interdisciplinary collaboration. This partnership leverages AI's strengths in data processing and automation while preserving essential human aspects, such as emotional intelligence and interpersonal skills, to deliver balanced and effective healthcare services.

36. Which of the following best describes the organization of this passage?

- (A) Problems → Strategies → Disagreement
- (B) Potential → Problems → Solutions
- (C) Theory → Practice → Solutions
- (D) Potential → Causes → Effects

37. Which of the following is NOT mentioned in the text as a concern regarding AI implementation in healthcare?

- (A) The challenge of attributing responsibility for AI-related diagnostic errors
- (B) The potential impact on healthcare disparities
- (C) The need for continuous real-time AI system updates
- (D) The diversion of attention from fundamental healthcare challenges

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38. What does the text indicate about AI's impact on mortality rates?
- (A) The impact remains unproven
 - (B) Studies show a significant reduction in mortality
 - (C) The impact varies by medical specialty
 - (D) Long-term studies are still ongoing
39. What does the word "synergistic" in the final paragraph most closely mean?
- (A) collaborative
 - (B) sequential
 - (C) independent
 - (D) sophisticated
40. How does the text characterize the ideal implementation of AI in healthcare?
- (A) As a cost-reduction mechanism for healthcare facilities
 - (B) As a fully automated system that minimizes human intervention
 - (C) As a primary decision-maker in routine medical procedures
 - (D) As a tool that supports medical professionals while preserving human elements

Questions 41-45

The emergence of medical humanities was a response to growing concerns that medical specialization was overshadowing the humanistic aspects of patient care. At the end of the 19th century, physicians such as William Osler and Shaw Billings warned that an overly reductionist approach to medicine risked dehumanizing healthcare, reducing patients to biological cases rather than individuals with emotional, social, and ethical needs. While the term *medical humanities* was coined by historian George Sarton in 1948 to emphasize the humanization of science, it was not until the 1960s and 1970s that humanities disciplines were reintegrated into medical curricula, marking their revival after their prominence in the classical period (around the 5th century BCE).

Medical humanities acknowledge the significance of humanistic perspectives and integrate disciplines such as literature, art, philosophy, ethics, and history into medical education. This interdisciplinary approach equips future doctors with a deeper understanding of the social, cultural, and emotional dimensions of illness. For example, literature provides insight into the origins and complexities of human emotions and behaviors while also fostering medical students' imagination and empathy. Art, on the other hand, enhances medical students' observation skills by engaging them in analyzing paintings, sculptures, and photographs. These practices train students to notice subtle details they might otherwise overlook in clinical settings.

It is important to emphasize that the benefits of medical humanities extend not only to patients but also to doctors themselves. In particular, it helps medical students cope better with stress by fostering emotional resilience and a sense of balance amid their rigorous training. Exposure to the humanities provides students with an opportunity to process complex emotions, reflect on their experiences, and develop a deeper sense of empathy for both patients and themselves. Indeed, the integration of humanities may help future doctors

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cultivate not only clinical expertise but also emotional well-being. However, such integration is not without challenges.

While medical humanities are often justified for their ability to produce more compassionate doctors and improve patient care, scholars have debated whether their value should be purely **instrumental** or also intellectual. Anne Jones, one of the early proponents of medical humanities at the University of Texas Medical Branch, cautioned against assuming that exposure to literature and the arts automatically makes students more humane. She argued that while this outcome is desirable, there is no guarantee that studying the humanities will inherently instill empathy or ethical sensitivity. Some scholars further challenge the idea that the humanities should serve a functional purpose in medical training, emphasizing instead their intrinsic intellectual value. This ongoing tension between the practical application of medical humanities and their role in generating knowledge ensures that the field remains dynamic, continuously evolving in response to both ethical and intellectual challenges in healthcare.

41. What is the primary argument in favor of incorporating humanities into medical education?
- (A) It helps doctors develop a deeper understanding of human emotions, ethics, and social factors in healthcare.
 - (B) It allows medical students to replace traditional scientific training with artistic and literary studies.
 - (C) It provides entertainment and relaxation for students during their rigorous training.
 - (D) It ensures that all doctors become experts in philosophy, history, and literature.
42. Which of the following topics is NOT discussed in the passage?
- (A) The historical development and reintegration of medical humanities into medical education
 - (B) The debate over whether humanities should serve a practical or intellectual purpose in medicine
 - (C) The role of medical technology in enhancing patient care and diagnosis
 - (D) The ways in which humanities help medical students develop observation and empathy skills
43. What does the passage suggest about the effectiveness of medical humanities in fostering empathy?
- (A) Studying humanities automatically makes students more empathetic.
 - (B) There is no evidence to support the claim that humanities improve empathy.
 - (C) While humanities can encourage empathy, there is no guarantee it will happen.
 - (D) The humanities focus only on intellectual development, not emotional growth.
44. In the passage, the word “instrumental” in the final paragraph most closely mean?
- (A) Serving as a necessary tool for achieving a goal or purpose
 - (B) Having a musical or artistic function in education
 - (C) Providing theoretical knowledge without practical application
 - (D) Being unimportant or secondary in significance

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45. Which of the following is NOT mentioned as a benefit of incorporating humanities into medical education?
- (A) Enhancing doctors' ability to observe subtle details in clinical settings
 - (B) Helping medical students develop emotional resilience and manage stress
 - (C) Providing a comprehensive replacement for traditional medical training
 - (D) Encouraging a deeper understanding of patients' social and emotional needs

Questions 46-50

Vaccines have saved millions of lives. WHO research estimates COVID-19 vaccines prevented 475,000 deaths in the UK alone. Initially hailed as a “scientific miracle,” vaccines helped the world return to normal, but public trust has since declined.

A study by the Vaccine Confidence Project found that UK adults' belief in vaccine safety dropped from 90% in 2018 to 70% in 2023. This decline is global, with surveys in 52 out of 55 countries showing reduced trust since 2019. A YouGov poll found that in 2024, 30% of UK adults believed vaccine risks were hidden, up from 19% in 2019. Childhood vaccination rates have also fallen below recommended levels.

Growing skepticism toward governments and health institutions has contributed to this trend. During the early vaccine rollout, people showed great enthusiasm for getting vaccinated, but by mid-2021, doubts arose, fueled by misinformation online. Research from the UK Health Security Agency (UKHSA) revealed that in 2023, 20% of parents encountered online information that made them doubt vaccines, a significant increase from 6% the previous year.

Vaccine hesitancy is not new. Since Edward Jenner's smallpox vaccine in 1796, concerns have persisted. Protests against mandatory vaccinations occurred in the 1890s, and the 1970s saw false claims linking the diphtheria, tetanus, and whooping cough vaccine to brain damage.

Social media has amplified misinformation about vaccines, making it easier for false claims to spread quickly. Younger adults, who frequently rely on social media for health information, are particularly affected. Many of them feel that they sacrificed their education, job opportunities, and social lives during the pandemic to protect older generations, which may contribute to their declining trust in vaccines.

Another factor influencing public confidence is the speed at which COVID-19 vaccines were developed. Although they proved highly effective at reducing severe illness and death, early expectations suggested they would also prevent infection completely. Over time, as **waning immunity** and virus mutations occurred, some people felt misled. Concerns also arose regarding rare but serious side effects, such as blood clotting and temporary heart inflammation.

Vaccine hesitancy is also linked to broader political and social issues. Discussions about personal liberty, government control, and scientific authority have contributed to public doubts. The rise of anti-establishment movements and skepticism toward experts in fields like climate change, public health, and economics further complicates the issue.

46. What is the primary focus of the passage?
- (A) The history of vaccine development and its impact on global health
 - (B) The decline in public trust in vaccines and the factors contributing to vaccine hesitancy
 - (C) The effectiveness of COVID-19 vaccines in preventing deaths worldwide
 - (D) The role of social media in spreading medical misinformation and its impact on vaccine development
47. According to the passage, which of the following factors has contributed to declining trust in vaccines?
- (A) Misinformation spreading through social media
 - (B) A decrease in the effectiveness of vaccines over time
 - (C) A lack of scientific studies supporting vaccine safety
 - (D) A global shortage of vaccines limiting public access
48. Based on the passage, why might younger adults be more susceptible to vaccine hesitancy?
- (A) They have lower levels of education than older generations.
 - (B) They have been discouraged from receiving vaccines by government policies.
 - (C) They have fewer health concerns than older adults.
 - (D) They are more likely to rely on social media for health information.
49. In the passage, the phrase “waning immunity” most likely means:
- (A) An increase in immune system strength over time
 - (B) The gradual loss of protection against infection
 - (C) A sudden and permanent breakdown of the immune system
 - (D) The immediate failure of a vaccine to provide any protection
50. Based on the passage, how much did the percentage of UK adults who believed vaccine risks were hidden increase from 2019 to 2024?
- (A) 5 percentage points
 - (B) 11 percentage points
 - (C) 19 percentage points
 - (D) 30 percentage points