

## 2019年度一般入学試験問題A

# 外国語（英語）

### 【注意事項】

1. この問題冊子には答案用紙が挟み込まれています。試験開始の合図があるまで問題冊子を開いてはいけません。
2. 試験開始後、問題冊子と答案用紙の受験番号欄に受験番号を記入しなさい。
3. 問題冊子には計5問の問題が英1～英7ページに記載されています。落丁、乱丁および印刷不鮮明な箇所があれば、手をあげて監督者に知らせなさい。
4. 答案には、必ず鉛筆（黒「HB」「B」程度）またはシャープペンシル（黒「HB」「B」程度）を使用しなさい。
5. 解答は答案用紙の指定された場所に記入しなさい。ただし、解答に関係のないことが書かれた答案は無効にすることがあります。
6. 問題冊子の余白は下書きに利用しても構いません。
7. 問題冊子および答案用紙はどのページも切り離してはいけません。
8. 問題冊子および答案用紙を持ち帰ってはいけません。

受験番号	
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〔問 1〕 次の英文を和訳しなさい。

It can be daunting for a family to discuss bad news. Sometimes, if the bad news is broken only to the patient, or only to a family member, that individual can find themselves with the burden of knowing a truth they dare not speak. This can lead to a whole conspiracy of silence that isolates people from each other at the very time they need to draw upon each other's strength and support. It is possible to be lonely despite being surrounded by a loving family, as each person guards their secret knowledge for the love and protection of another.

出典 : Kathryn Mannix, *With the End in Mind: Dying, Death and Wisdom in an Age of Denial*.  
London: William Collins, 2017. Page 135.

[問 2] 次の英文を読んで、下記の設問に答えなさい。

If  in the White House on a typical afternoon sometime around 1804 or 1805, you might have noticed a perky bird in a pearl-gray coat ascending the steps behind Thomas Jefferson, hop by hop, as  for a siesta.

This was Dick.

Although the president didn't dignify his pet mockingbird with one of the fancy Celtic or Gallic names he gave his horses and sheepdogs—Cucullin, Fingal, Bergère—still .

“I sincerely congratulate you on the arrival of the Mocking bird,” Jefferson wrote to his son-in-law, who had informed him of the advent of the first resident mockingbird. “Learn all the children to venerate it as a superior being in the form of a bird.”

Dick may well have been one of the two mockingbirds Jefferson bought in 1803. These were pricier than most pet birds (\$10 or \$15 then—around \$125 now) because their serenades included not only renditions of all the birds of the local woods, but also popular American, Scottish, and French songs.

Not everyone would pick this bird for a friend. Wordsworth called him the “merry mockingbird.” Brash, yes. Saucy and animated. But merry? His most common call is a bruising *tschak!*—a kind of unlovely avian expletive that  between a snort of disgust and a hawking of phlegm. But Jefferson adored Dick for his uncommon intelligence, his musicality, and his remarkable ability to mimic. As the president's friend Margaret Bayard Smith wrote, “Whenever he was alone, .

After flitting for a while from one object to another, it would alight on his table and regale him with its sweetest notes, or perch on his shoulder and take its food from his lips.” When the president napped, Dick would sit on his couch and serenade him with both bird and human tunes.

Jefferson knew Dick was smart. He knew he could mimic other birds in his neighborhood, popular songs of the day, even the creak of the ship's timbers on a crossing to Paris. But what Jefferson could never imagine was how science would come to view the nature of Dick's ability. How rare and risky it is, the brainpower it requires, and how it offers a window into a most mysterious and complex form of learning: imitation, the wellspring for so much of human language and culture.

出典：Jennifer Ackerman, *The Genius of Birds*. London: Corsair, 2016. Pages 159-160.

(1) 空所  ～  に入る最も適当なものを①～⑤から選び、意味の通る英文を完成させなさい。

- ① it was a favorite pet
- ② one naturalist described as a cross
- ③ the president retired to his chambers
- ④ you happened to find yourself at the foot of the stairs
- ⑤ he opened the cage and let the bird fly about the room

(2) 下線部を和訳しなさい。

[問3] 次の英文を読んで、下記の設問に答えなさい。

Psychosomatic disorders are not neurological disorders. They belong to the fields of psychology and psychiatry. I am not a psychiatrist, I am a neurologist. At first my interest in, and <sup>(=)</sup>exposure to, psychosomatic disorders may seem to make little sense. Until, that is, you realize that it is precisely because I am not a psychiatrist that I have come to see so many patients who suffer in this way. After all, if you collapsed or suffered a severe headache, why would you ask a psychiatrist for help? Psychosomatic disorders are physical symptoms that mask emotional distress. <sup>(3)</sup>The very nature of the physical presentation of the symptoms hides the distress at its root, so it is natural that those affected will automatically seek a medical disease to explain their suffering. They turn to medical doctors, not to psychiatrists, to provide a diagnosis. Those with abdominal pain see a gastroenterologist, those with palpitations a cardiologist, those with visual blurring an ophthalmologist, and so on. And because every type of specialist sees a different form of psychosomatic illness, and labels and treats it differently, it can be very difficult to fully appreciate the <sup>(\*)</sup>extent of the problem.

The two most common psychosomatic symptoms are fatigue and pain. They are difficult symptoms to assess because they cannot be objectively measured, they can only be described. Psychosomatic illness for a neurologist, however, will often <sup>(7)</sup>manifest as a loss of function, such as paralysis or hearing loss. These sorts of deficits are subjectively experienced by the patient, but there are ways in which they can be objectively verified and quantified, at least in part. The neurologist can fairly reliably <sup>(\*)</sup>differentiate disability due to organic physical disease from that which has a psychological cause. As a result, the neurologist is faced ( ア ) a diagnosis of psychosomatic illness more often than other specialists, and that is how my interest arose.

Up ( イ ) one-third of people seen in an average general neurology clinic have neurological symptoms that cannot be explained and, in those people, an emotional cause is often suspected. It is very difficult for a patient to be given the news that their physical illness may have a psychological cause. It is a difficult diagnosis to understand, let alone accept. And doctors can be <sup>(7)</sup>reluctant to offer it up, partly for fear of angering their patients but also for fear of what they might have missed. Patients often find themselves trapped in a zone between the worlds of medicine and psychiatry, with neither community taking full responsibility. Those who struggle with the diagnosis may seek the opinion of doctor after doctor in the hope ( ウ ) finding a different explanation—and <sup>(7)</sup>validation of their suffering. Repeatedly normal test results begin to seem a disappointment, so desperate is the patients' search for another answer. Some find themselves pushed into a corner where they accept the role of the undiagnosed, someone who cannot be helped, because anything is better than the humiliation of a psychological disorder. Society is <sup>(=)</sup>judgemental about psychological illness and patients know that.

出典 : Suzanne O'Sullivan, *It's All in Your Head*. London: Vintage, 2015. Pages 8-10.

(1) 英文の意味が通るように、空所(ア)～(ウ)に入る最も適当なものを①～④からそれぞれ1つ選び、数字で答えなさい。

- (ア) ① about            ② down            ③ out            ④ with  
(イ) ① after            ② by            ③ than            ④ to  
(ウ) ① from            ② of            ③ on            ④ since

(2) 下線部(エ)～(コ)の意味に最も近いものを①～④からそれぞれ1つ選び、数字で答えなさい。

(エ) exposure to  
① demand for    ② experience of    ③ meaning in    ④ question about

(オ) extent  
① obscurity    ② pain            ③ scale            ④ shame

(カ) manifest  
① appear            ② expand            ③ predict            ④ transcend

(キ) differentiate  
① distinguish    ② evolve            ③ modify            ④ reach

(ク) reluctant  
① comforting    ② enduring            ③ supporting            ④ unwilling

(ケ) validation  
① deprivation    ② limit            ③ proof            ④ urgency

(コ) judgemental  
① critical            ② favorable            ③ obedient            ④ secure

(3) 下線部(3)を和訳しなさい。

〔問 4〕 下線部(ア)～(コ)に入るように各語群にある語句を最も適当な順に並べ替えて、意味の通る英文を完成させなさい。

Spend some time reading medical case studies—a great way to ruin a pleasant morning, by the way—and you’ll be shocked at the unlikely <sup>(7)</sup>( ) ( ) ( ) ( ) ( ) themselves. Focus on sneeze-related accidents, and you’ll notice a trend: Bad things happen when people hold in their sneezes. A fractured larynx, acute cervical pain and facial nerve injuries <sup>(1)</sup>( ) ( ) ( ) ( ) ( ) the documented mishaps caused by a stifled *achoo*.

“I’ve seen patients with a ruptured eardrum or pulled-back muscles, and you hear about cracked ribs,” says Dr. Michael Benninger, an otolaryngologist—that’s an ear, nose and throat doctor—and chairman of the Head and Neck Institute at Cleveland Clinic.

While sneezes (and the schnozes that expel them) come in many sizes, a whopper sneeze can blast air <sup>(7)</sup>( ) ( ) ( ) ( ) ( ) 500 miles per hour, Benninger says. If you redirect that force inward, your suppressed sneeze can send waves of force rippling through your head and body.

Usually that’s not a big deal. After all, most of us have bottled a sneeze here or there without issue. But Benninger says a preexisting musculoskeletal injury or weakness, odd ear or throat physiology or some other anatomical quirk could <sup>(x)</sup>( ) ( ) ( ) ( ) ( ) a held-in sneeze.

While such reactions are unlikely, Benninger says sneezes aren’t meant to be caged. “Sneezing probably cleanses the nose of irritants, viruses and those types of things,” he explains. He uses the word “probably” because <sup>(x)</sup>( ) ( ) ( ) ( ) ( ) sneezing might perform other functions, from signaling to people that you’re sick to resetting the homeostatic environment in your nose.

“I’ve read reports that people sneeze differently in different cultures—almost like a learned behavior,” he says. He adds that everything from your lung capacity to the structure of your face and nose <sup>(7)</sup>( ) ( ) ( ) ( ) ( ) forcefully you sneeze, and the potential of your sneeze to cause or exacerbate an injury.

His advice? Don’t hold in a sneeze. “If <sup>(\*)</sup>( ) ( ) ( ) ( ) ( ) and you want to stop it, rubbing your nose can help,” he says. For patients <sup>(7)</sup>( ) ( ) ( ) ( ) ( ) sneezing—those who’ve recently undergone surgery or broken a bone—Benninger advises opening your mouth wide to minimize a sneeze’s strength. “It’s like forcing water through a pipe,” he says. “If the air can escape through your nose and mouth, that creates less pressure than forcing it through a smaller opening.”

Just make sure that when you sneeze, you’re doing it into the crook of your arm, not your hand. “We know sneezing can project smaller particles 10 to 12 feet, so it’s <sup>(7)</sup>( ) ( ) ( ) ( ) ( ),” Benninger says. “But if you sneeze into your hand, everything you touch <sup>(=)</sup>( ) ( ) ( ) ( ) ( ).” Your clothes help absorb particles, and you probably won’t be touching much with the inside of your arm, he adds. *Gesundheit!* And safe sneezing, everyone.

出典 : Markham Heid, “You Asked: Is It Bad to Hold in a Sneeze?” *TIME*, July 29, 2015.  
<http://time.com/3975363/sneezing/>

(ア) 語群 : hurt / manage / people / to / ways

(イ) 語群 : a / are / few / just / of

(ウ) 語群 : at / nose / of / out / your

(エ) 語群 : an adverse / lead / reaction / to / to

(オ) 語群 : is / research / suggest / there / to

(カ) 語群 : a role / can / how / in / play

(キ) 語群 : coming / feel / on / one / you

(ク) 語群 : feel / may / pain / when / who

(ケ) 語群 : cover / important / mouth / to / your

(コ) 語群 : be / contagious / going / is / to

〔問5〕 次の和文を英訳しなさい。

背筋を伸ばし、足の裏を床にしっかりつけてまっすぐ立ちます。次に、左足の裏を右足のひざの内側あたりに押し当てて、片足でバランスを取ります。下半身が安定したら、胸の前で両手を合わせます。両手を合わせたまま、ひじを伸ばし両手を頭の上へあげます。肩の力を抜いて、腕を伸ばした状態でゆっくりと深呼吸を繰り返します。反対側も同じようにしましょう。