令和８年度（2026 年度）
長野県立大学 大学院 健康栄養科学研究科

冬季　選抜試験

英　語

（６０分）

注意事項

１　本試験では、英和辞典１冊の持ち込み参照を認めます。専門用語辞典及び電子辞書の持ち込みは認めません。
２　試験開始の合図があるまで、この問題冊子を開いてはいけません。
３　問題冊子は８頁あります。解答用紙は１枚あります。
４　試験開始の合図の後、まず、問題冊子、解答用紙の落丁、乱丁、印刷不鮮明等がないか確認し、気づいた場合は、手を挙げて監督者に知らせてください。
５　試験開始後、受験番号、氏名を解答用紙の所定欄（解答用紙１枚につき、受験番号２箇所、氏名１箇所）に記入してください。
６　試験開始後は、原則として、試験が終了し退出許可が出るまで退出できません。
７　解答用紙は持ち帰らないでください。
８　試験終了後、問題冊子および下書き用紙は持ち帰ってください。

設問　以下の文章は、世界保健機関（WHO）の報告書である Global status report on alcohol and health and treatment of substance use のうち、Alcohol consumption, alcohol-related harm and policy responses の抜粋である。下記文章を読んで、問 1～3 に答えなさい。

The harmful use of alcohol poses a significant barrier to achievement of the Sustainable Development Goals (SDGs) through its impact on so many aspects of life in many countries. Alcohol continues to be the most commonly used psychoactive (注 1) substance of significant public health importance. With widespread acceptance of alcohol use and social norms that support drinking behaviour, the detrimental effects of alcohol consumption on the health of populations are often downplayed or overwhelmed by claims of the positive impacts on well-being and economic development. (A)Mixed messages about the harms and benefits of alcohol production and consumption may delay appropriate health-seeking behaviour and weaken actions aimed at reducing the health and social burden attributable to alcohol consumption. Alcohol is the only psychoactive substance that exerts a significant impact on global population health, but is not regulated at the international level by legally-binding regulatory instruments. The inclusion of the harmful use of alcohol in health target 3.5 and alcohol-focused indicator in the 2030 Agenda for Sustainable Development indicates increasing awareness of the impact of the harmful use of alcohol on health and development in populations.

This report presents WHO's latest global data on alcohol consumption, alcohol-related harm and policy responses with the objective of assessing the progress achieved with reduction of alcohol consumption, alcohol-attributable disease burden and policy responses since the year of adoption of the Global strategy to reduce the harmful use of alcohol. (B)The chapter also provides data on health conditions which are entirely attributable to alcohol consumption, as well as health conditions which are partially attributable to alcohol consumption.

Global status and trends in the health consequences of alcohol consumption

Alcohol consumption has a significant negative impact on the health of populations due to the psychoactive, toxic and dependence-producing properties of alcohol. The health effects of alcohol consumption are mainly due to the ethanol in alcoholic beverages. Ethanol affects the body through three main pathways: 1) toxic effects on organs and tissues; 2) intoxication (注 2) due to its largely psychoactive properties leading to impairment of physical coordination, consciousness, cognition, perception, affect or behaviour; and 3) dependence, whereby drinkers have impaired self-control over their drinking behaviour, resulting in increased levels and particularly detrimental patterns of alcohol use.

Other compounds contained in alcoholic beverages that affect health include acetaldehyde (a metabolite of alcohol), methanol, heavy metals (including copper, iron, manganese, nickel, tin and zinc),

which can be present in commercially produced, as well as informally or illegally produced alcoholic beverages.

When ingested, ethanol has impacts on multiple biological systems. As a result, the consumption of alcohol is causally linked to over 200 health conditions, including infectious diseases, malignant neoplasms (注3), mental and behavioural disorders (注4), neurological disorders (注5), cardiovascular diseases (注6), gastrointestinal diseases (注7) and injuries.

While alcohol use is a major risk factor for numerous health conditions, it is also important to note that for people who consume low amounts of alcohol and who do not engage in heavy episodic drinking (as compared to lifetime abstainers (注8)), alcohol may decrease the risk of diabetes mellitus (in women only), ischaemic heart disease (注9) and ischaemic stroke (注10). Although meta-analyses have observed a protective effect for women only, this may be due to men being more likely to engage in heavy episodic drinking (which may in turn lead to a risk increase in diabetes for men but not women). People who engage in heavy episodic drinking experience an increase in diabetes mellitus, ischaemic heart disease and ischaemic stroke even if, on average, they consume low amounts of alcohol.

出典：Global status report on alcohol and health and treatment of substance use disorders. Geneva: World Health Organization; 2024. Licence: CC BY-NC-SA 3.0 IGO. （一部抜粋、改変）

注1 psychoactive：精神活性の
注2 intoxication ：酩酊
注3 malignant neoplasms：悪性新生物
注4 behavioural disorders：行動障害
注5 neurological disorders ：神経障害
注6 cardiovascular diseases ：心血管疾患
注7 gastrointestinal diseases ：胃腸疾患
注8 abstainers ：非飲酒者
注9 ischaemic heart disease ：虚血性心疾患
注10 ischaemic stroke：虚血性脳卒中

問1 下線部 (A)を日本語訳しなさい。

問2 下線部 (B)を日本語訳しなさい。

問3 本文の内容を踏まえて、アルコール摂取が人体に及ぼす影響について、簡潔に説明しなさい。