

Welcome to English Practice for Healthcare.

I'm Helena, an English teacher and registered nurse from the North of England.

This is the fourth episode of my podcast I've started to help anyone learning English and in particular healthcare workers who want to improve their English to work with English speaking patients or colleagues.

There are questions set that you can try and answer to develop your active listening or you can of course just listen while you are doing something else to help you become more comfortable and familiar with the sounds and rhythm of English.

You can read whilst you listen using the free transcript which is available for every episode on my website www.englishpracticeforhealthcare.com.

Finally, this podcast is not intended to be used as medical advice or for you to make any medical decisions. The opinions only represent those of the people speaking and in no way reflect or are affiliated with any healthcare charities or the health service in any country.

So let's get started with the topic of the fourth episode.

Have you ever had earache?

If no, what do you think it would feel like?

Have you ever looked in an ear and do you know the name of the medical instrument we use to examine ears?

In this episode I speak with Jack about his history of ear issues. He describes how this started when he was at school. He was prescribed ear drops and this seemed to clear it up. However, the issue came back in his twenties and has been a problem that has continued for some time now. So, you will hear us discuss how this is an 'on and off' problem for him, which is another way of saying the problems with his ears come and go. They start and then they are solved but then return later. So, what exactly are these ear problems? In the first half Jack describes three main symptoms of his ear trouble. Listen out for what these are.

Ok, other language to listen out for; you will hear me mention Jack's 'tubes'. The tubes I am referring to are his eustachian tubes, which connect the ears to the nose.

Secondly, Jack describes the problems of his ears as 'bizarre', 'bizzare'. This is another word for something that is strange or weird. Something that is difficult to explain.

And thirdly there is a moment when I interrupt Jack when I stop and say 'sorry, go on'. This is a polite way of apologising for overlapping someone's speech before they have finished, and it invites them to continue with the point they were making. So see if you can hear when I say this.

Ok, hi Jack, um can you just start by telling me, where are you from?

I'm from York in England

OK, York, that's in Yorkshire, Yeah?

Correct

Ok and is there an accent in York? And do you have an accent?

Uh yes, I wouldn't say it's thoroughly, uh, York (laughs)

But you've got a hint of a York accent

I believe, so yes

We're here today to talk about, well your ears

Yes

Basically umm so what's the problems you've been having with your ears? Um maybe you could just start by saying, when did it start these issues with your ears?

The first problem I had with my ears was my ears was uh probably towards the end of secondary school

OK, yeah, so when you were, how old?

When I was around 16, 15 or 16

OK

And they just got blocked uh felt very full uh but that that issue was resolved fairly quickly and easily then I had no issues with my ears until mid to late 20s, which is the age I am now so the past two years have been quite troublesome

Mm on and off problems

On and off problems, occasionally I'll have pain but the majority of the issue is just blockage

Right

In my ears and my hearing

So, when you were when you first had the problem, you said it was resolved easily. What, what did they do?

They prescribed me some ear drops

OK

I can't remember exactly what uh what it was, but yeah

You just had to put them in everyday

Yeah, a few. I think three times a day It was

OK,

Yeah

And then you could hear OK after that

Yeah, everything was fine for for a while.

Did they tell you what had caused it?

No

No, OK so in the last two years, so then what happened? How, do you know why you suddenly started getting these issues again?

Uh I have several suspicions. Maybe flying on aeroplanes going in the sea, swimming pools, that sort of thing

Right

Or even, I've thought maybe wearing earphones

Ah OK,

But I don't know

So you've never been told by a doctor that there's anything wrong with your tubes, any of your anatomy?

I think I haven't been, I haven't had a full examination, really. I don't think they've gone into extensively enough

Hmm-hmm

So

Because when you, oh, sorry, go on

I was gonna say the issues that I've had they've been sort of resolved temporarily, but I've never had any diagnosis of anything I don't think there's anything

Right, so it gets solved, but then it just comes back

Mm-hmm

Mm-hmm um so have you had to take antibiotics before?

Yes. Uh, two times when I've been, well, I guess, I said there's no diagnosis, but they've told me it's been infected

Mm-hmm

And then the antibiotics clears up the infection

Mm-hmm

But then I get some sort of ear wax build up and it's just blocked again

Um so what happened before you got those infections diagnosed what what were your symptoms?

Um sort of really intense uh pain that may be in my jaw, sort of running, running down my neck a little bit

Ahh

Err

So it like radiated from your ear all down your jaw

Yeah, yeah

Uff

Painful

Yeah, like a throbbing pain or like a sharp pain?

It's like a persistent uh dull kind of although it is kind of sharp as well It's a very strange pain. Never experienced anything like it really. Not very nice

And paracetamol, did that help?

No, no, in my experience no, no

No, no really an intense pain. Um any other symptoms?

Um you know, my ears can tend tend to smell bad because of it

Hmm

Umm well, other than the lack of hearing, no, no, not just pain uh bad, bad smelling earwax and uh no hearing

Hmm

Yeah lack of hearing

So can you hear things at all, or does everything just sound like it's really far away?

Yeah It becomes really, so it does sound like it's far away yes

Right

And I'll have to and sometimes because it's both ears

Ah both ears

You know, one will be blocked and when I'm talking to people, I'll put my good ear

Uh-huh

Towards the person because I cannot hear anything

Right but it was it both ears at the same time you've had?

It has been, it has been, yeah and then one or then one will clear up and then I'm just waiting for the next one to clear up

Yeah, yeah

Then it just dips in and out

So do you have discharge coming from the ears?

Never had discharge

No, OK

But um I went to the doctor's once and they they they put their, I don't know what it's called, the instrument to

Otoscope

Yeah, and it was it had all sorts of horrible shit on it

(laughs)

It's alright

So when they took,so they put the otoscope in when they bought it out, it had like

Yeah I'm not really

Wax, exudate

Yeah, it's not nice

Matter

Matter, matter, horrible, smelly matter

Right

Uh it's not something I'm happy to admit, but

No, well but it's just a normal sign of infection isn't it

Human stuff

Yeah, it's just that's how our body, it's just one of the symptoms of infection, smell

Yeah, odour

(one) of the signs of infection

But yeah, so, that was that, It was, It was, It's not not not nice to look at or smell

So what finally made you go to the doctor?

The pain

Hmm-mm

But then, the thing is, I've been to the doctor before and then the pains cleared up before I've had any like remedy given to me by the doctor so

Uh-huh

I've like said, ohh, well I don't need these antibiotics and then it comes back maybe a month or two later

Right

It's really up and down very frequently the change, the change in, it's just, I don't know what's wrong with my ears, It's really bizarre

They can take a long time to sort out, ears. So, umm, but when you first, so were having the problems since being when you were at school, you were at secondary school, were you at home or? What, what, were you, were you in York?

I was in York, yeah

Right

I was doing my GCSE's and I remember it was a problem because I was studying GCSE music

Oh right

So I couldn't, I couldn't even hear what I was doing

Oh, right

It was really annoying

What instrument were you playing?

The guitar

Ohh, the guitar. So it really was affecting your day-to-day life then there

Back then

Yeah

Well, always, yeah, always, always has done. Yeah, especially well, even the past couple of years I've been trying to teach English

Mmmm

And teaching in a classroom full of full of uh kids when they're, you know, making a bit of noise and everyone's talking amongst themselves. It's almost impossible to, to hear and concentrate

Right, right

So that's been it's affected me in, in work, definitely

Yeah

Yeah, teaching

And so you were teaching English when you got the bad infections, when was it last year?
When it snuck back on you

Yeah, towards the end of last year, yeah when it really got bad and that's why I thought it was, aeroplane, flying related and like um

The change in the pressure

Change in pressure because every time I, because I was teaching English in Seville

Hmm hmm

Um so had to fly there, obviously

Hmm hmm

And then since arrival, that's when it's all started and then it got worse and then I went in the sea

Mmmm and that just seems to trigger it

That seems to trigger it more but then it sort of left me unclear as to what was the

Yeah

Cause

Root cause

Just at the end there, Jack was talking about triggers. A trigger is another word for a cause. So, we might ask patients 'Have you noticed what triggers this problem?' For example, in this situation Jack notices that flying by aeroplane or by swimming in the sea and getting water in his ear can bring on his ear problems. This suggests then that these might be triggers for him. So, the three symptoms Jack mentions what were these?

Number 1) His hearing. Jack mentioned how the blockage in his ears makes it difficult to hear. He said how this made it difficult to study for his music exam and more recently to teach English in a noisy classroom.

Number 2) Pain. Jack describes the pain as travelling from his ear down the side of his face, which is what we describe as a radiating pain. Also, that it was persistent, which means it was constant, so always there. It's important as patients that we give information on the type of pain we are experiencing and as healthcare professionals to ask patients about this. One way can be to give two options of types of pain and ask which one best describes their pain:

Yeah, like a throbbing pain or like a sharp pain?

It's like a persistent uh dull kind of although this kind of sharp as well It's a very strange pain. Never experienced anything like it really. Not very nice

And number 3) Jack mentions smell

Matter, horrible, smelly matter

Right

It's not uh something I'm happy to admit, but

No, well but it's just a normal sign of infection isn't it

And this was most noticeable when the doctor looked in Jack's ear using an otoscope.

In the second half we hear Jack's experience of requiring medical treatment for his ears whilst in Spain. However, he didn't have his GHIC, which made things more complicated. GHIC stands for global health insurance card and it's what entitles UK residents to necessary medical treatment when travelling to Europe. We also talk about the complications of resolving health issues when you can't be in one place for a longer period of time. Listen to what I suggest to Jack might be a good idea to help him keep track of his ear problems. Does he seem excited by my suggestion?

So you went to the doctors in Seville?

I did, with you

Yes, you did, you went with me. (laughs) I tried to be Spanish translator

Yeah, I was clueless.

But also you were in a lot of pain soo

I was, yeah and I couldn't go to work and I really needed to, we, we had to, I had to get some sort of sick note

Yeah

And uh yeah

I mean, it's hard enough speaking a second language but you know, for you, when you were in a lot of pain, you couldn't think straight

No, yeah

You'd not been sleeping

Yeah

I think the pain had been keeping you up

Yeah

Um so how did you feel being in that place where, you know, there was that language barrier and you needed to try and explain your symptoms?

Right, yeah, I felt terrified, to be honest. Yeah, I felt really scared and intimidated. In fact, I went in before you came with me and went in once with my um I think we had to bring our GHIC cards or something like that well I didn't have my card I just had my, this is my fault but um I had like my number or the policy or whatever

Yeah

But um they were quite um

Abrupt

Abrupt with me yeah they were quite blunt and they were sort of like and I didn't really understand what they were saying

Mmm hmm

So I just kind of I got very intimidated and just went OK, I can't, I can't deal with this on my own and then yeah, I asked you to come with me, which was still very intimidating and difficult to understand what what the process was gonna be It was me not having my physical GHIC card that would have been, that would have made it 10 times easier, because remember, we had to ring

Yeah

Do you remember we were sat we had to ring that person

And many emails were sent by the people

And emails yeah and we were writing down things on

Yeah

Scrap paper

But once we got, once we were in, we were seen and they prescribed the antibiotics didn't they?

Yes, they did

Yeah

When when we were in and all all of that um all of that stuff was dealt with we were it was just a waiting game

Yeah

Cos then we knew, we knew uh where we were going and stuff, it was just like any kind of walk in place

Yeah

Where we had to wait a few hours

Mmm mm and she looked in your ears. I remember yeah

Yeah and she said they looked um really sore, red

Yes

And like

Inflamed didn't she

Inflamed, inflamed yeah

Yeah, yeah, I remember that mmm so how quickly did the antibiotics kick in?

Pretty quickly actually. Yeah, they worked. They worked a treat from, from what I remember um but then I think after that maybe towards the end of of that trip to Seville, it got bad again, I think

Mmm

I think it did, yeah

It was a really stubborn infection

Yeah, well I don't know if it's still the same

Mmmm

I don't even know. I don't know what's going on but

Yeah

It just comes back all the time so right now my left ear is blocked as of this morning

Right, so you just wake up and you just can't hear properly

Well going in the shower. If I get a bit of water in it, that's it

Right

That is it

Oh no, so what um...

The thing is its like different levels of of blocked so sometimes it's completely like I cannot, like if I touch my ear with my fingers

Mmm

I can't hear anything, like there's no sound and that's how I know how severely it's blocked. So right now I can just about hear it on my left ear but if I touch my right ear, it's really like po po po I can feel, I can hear the touch

Right, right so the right ear feels ok at the moment?

Yeah

Right

Yeah

So it's blocked. Have you got any pain?

No pain

OK

Just blocked but I went in the sea on Sunday, it's now Fri, Thursday so I think I've had a bit of a bad week because of that

Yeah so it affects how you're feeling? How you feel in yourself?

Ohhh definitely

Yeah

Definitely does, yeah

It's that kind of like fear

Yeah, it's it It's well, it's also a fear of, yeah, how's this gonna affect me in the future? And I worry about my hearing you know, yeah, like, I love music and I love playing guitar. I don't wanna go deaf, so I wanna get it sorted

Yeah so I guess the problem has been because been travelling around

I've never had the

Not had chance to get

Yeah

Referred to ENT, ear, nose and throat department

Ohh, right that sounds like something I could

I think that's something I think that could be the next step

Yeah, I think uh well, that's the thing yeah. I've never I haven't been grounded long enough

Yeah

In any one place for the past two years

Yeah

So

Yeah

I've dealt with it temporarily on every, every time

Uh-huh. Uh, huh. But that's not what you want, is it?

No

When you're in your 20s, you don't want to be having to be in one place you just wanna live your life and not have

Yeah exactly, exactly but um comes to a point where I've gotta get my priorities in order cos its important your hearing it's a very very important thing

It is, it is

And uh to lose it would be detrimental to my life

Yeah, but I think don't make a jump

No, no

Right now

You know, you know how I am um I catastrophise?

Worst-case scenario that would be worst-case scenario very much

It would but you just never know

Yeah

I just, I don't wanna make it like like I am going deaf but uh

Yeah, but that's something we have to appreciate about people I mean, we've all been guilty of that If we feel a bit unwell, we go to worst case scenario and think

Yeah. Yeah, yeah

Yeah I mean, when I sprained my ankle this year, I was like, right, that's it I'm never gonna walk again

Yeah, that's but that's the thing you do do that you get you get an injury or you have, like, a certain illness you wonder how it will affect you later in life

Yeah so we can never yeah, underestimate anything as healthcare professionals. I think how

Yeah, true

It might seem like an everyday thing, you know, ohh ear infection but day-to-day and mentally, how is it yeah impacting on the patient

No you're absolutely right and that's the thing I think doctors in the UK have been not to but they've been quite dismissive of me when I come to the appointment and like, maybe that's why I've never got to the bottom of it, because I've been a couple of times in England and they go oh no, you're alright like this It's just it's hard for me to explain because I don't really know

Yeah, yeah

But it is affecting my day-to-day life

Yeah, I think a good question would be well, like we've just done today I suppose how many times, which ears and almost making like a timeline

Yeah, yeah, that that would be beneficial probably

Yeah

Because now like we were trying to talk about um when it first came up in Seville and I can't really fully remember so

Mmmmm

But it'd be good to go through and and work it out but

Yeah, well, that's a fun exercise we can do after this

That sounds great

Let's make a timeline. I do love a timeline, to be fair

Probably more so than me

Yeah. So. OK, thank you thank you for sharing and

You're very welcome

About, yeah, I really hope that you can get it solved

Thank you. I appreciate it

Ok, thank you for speaking to us Jack

Alright Helena, I'll see you later

See you later, bye

Thank you

Bye

Bye, bye

Ok, thank you so much to Jack! I think that was a really good reminder of the psychological effect of illness and how any change in our normal health can lead to anxiety. Anxiety about what might happen, and it can lead people to catastrophise, which is to think the worst.

So, the thing I suggested to Jack um to help keep track of his ear problems, was to draw a timeline. This is like a map of a period of time and all the key dates and pieces of information about when he had his ear problems and how many times for example he's been treated with antibiotics. Jack agreed this was a good idea, but it's not exactly the most fun way to spend an afternoon.

Therefore, when Jack said 'that sounds great' this is actually the opposite of what he means, and we can tell this from his tone of voice. This is called sarcasm and it's a type of humour that is very common in the UK. If you look up sarcasm in the dictionary, they often describe sarcasm as a way to hurt someone's feelings or to be critical.

However, between friends such as in this context, context sorry it's meant as something light and said for amusement.

See if you can notice any other times sarcasm is used if you watch any British comedy shows.

Ok, well thank you so much for listening, I hope you have enjoyed the episode and spending this time with me practicing your English. Please recommend the podcast to your friends and classmates and look out for episode 5 uh, which should be coming soon. Thanks again, bye, take care and good luck with your English studying, bye.