

中譯英

台灣自 1995 年起實施全民健康保險制度(National Health Insurance System)，使得醫療服務提供者與需求者單純的雙邊交易關係，加入了第三保險費用支付者--健保局(Bureau of National Health Insurance)，形成三邊交換關係的醫療照護模式。

醫療衛生主管機構為因應日趨增加的醫療保健費用支出，調整衛生與保險支付政策，影響醫院經營策略與醫療服務提供，間接影響醫病關係，形成多邊的醫療交換關係。

自此醫療院所(medical institutions)提供的醫療服務品質與收入來源，除受衛生主管機關衛生政策影響，亦受健保制度規範。醫療服務提供的成本花費受到健保保險支付制度規範，使得醫療院所更加重視醫療資源分配效率與提升醫療品質，以便為患者帶來更佳的服務品質。

在成本精簡、品質要求提升的雙重壓力下，促使醫療院所經營管理壓力增加。因此，醫療院所管理部門更加重視管理制度設計與經營。由於健保局與衛生政策等外部體制因素干擾，醫院為提升內部經營效率，必須因應調整內部經營活動與改善作業流程，產生對內部作業活動的干擾。

(出處:未發表論文)

The National Health Insurance System has been implemented in Taiwan since 1995. Ever since then, BNHI (Bureau of National Health Insurance) has taken part in the trade which originally considers only the providers and the demanders of medical services.

Due to the increasing expenses of health insurance, the authorities of health insurance are adjusting the policies about insurance payments and are also interfering hospital operations. This has indirectly changed the relationship between doctors and patients, creating a multilateral medical system.

Henceforth, service qualities of certain medical institutions and their income sources are under control of both the health care authorities and the National Health Insurance System. The expenses being supervised, medical institutions have to put more efforts into distributing medical resources and improving service qualities in an efficient way.

Under the pressure of elevating services while reducing costs, medical institutions have taken management more serious than ever. Hospitals now have to revise their operating courses in order to cope with the interference of BNHI and other health care policies.

英譯中

For the past eight years, America's government has declined to fund new research into one of the world's most promising medical technologies: the use of human embryonic stem cells [人類胚胎幹細胞] to repair or replace damaged tissue in the diseased and injured. Embryonic stem cells are special for two reasons, one scientific and one ethical. The scientific reason is that they are able to turn into any of the body's myriad cell types, which is why they might be used in this way. The ethical reason is that, at the moment, harvesting them usually involves killing human embryos.

The embryos in question have no future anyway (they are usually "spares" from *in vitro* fertilization [體外受精] procedures). But it was this destruction of potential human life that disturbed George Bush and his supporters.

Barack Obama has promised to reverse the ban. When that happens, American academics will no longer have to watch enviously from the sidelines as their colleagues in Australia, Britain, China, the Czech Republic, Israel, Singapore and South Korea push ahead. But though the legislative wheels have yet to start turning, the mood has already shifted.

One sign of this shift came on January 23rd when the country's Food and Drug Administration (FDA) granted permission for the first clinical trial of a therapy based on human embryonic stem cells to Geron [杰龍生物醫藥公司], a firm based in Menlo Park, California. Geron was able to ask for permission, and the FDA was able to grant it, because the ban does not apply to privately financed research. America, it seems, is back in the stem-cell business.

(Source: *The Economist* Jan. 29th, 2009)

過去八年來，美國政府皆拒絕投資研究目前世界上最具前瞻性之一的醫療科技——人類胚胎幹細胞。它能夠修補甚至取代受到感染或破壞的身體組織。胚胎幹細胞之所以引人注目，在於其科學貢獻及道德上的爭議。科學角度而言，胚胎幹細胞能夠大量形成人體任何部位的細胞，這也因此成為它們最大的醫療用途。道德爭議則是因為以目前的技術要取得胚胎幹細胞，通常必須犧牲人類胚胎。

當然這些胚胎並非受精卵（它們通常為體外受精下「多餘」的細胞）。然而，喬治布希以及部分群眾認為此技術消滅了具有潛在生命的細胞。

現任總統歐巴馬表示他將廢除相關禁令。當他的話兌現，美國學術界便不須再牙癢癢的看著其他國家越趨進步。雖然法規還未真正修改，相關學術界的氣氛早已活絡許多。

一月二十三日，更有一顯著的改變。美國食品及藥物管理局（F D A）批准了第一場關於人類胚胎幹細胞的臨床實驗，由位於加州的杰龍生物醫藥公司所舉行。杰龍公司能夠申請審核且F D A有權批准，因為相關禁令不適用於私人融資研究。如此看來，美國已重返幹細胞研究市場。