**Завдання для студентів 231 групи медичного факультету**

**Завдання 1**

1. ***Read the text:***

**LAUGHTER IS THE BEST MEDICINE**

by Dr John Winsor - The Sunday Times of Malta

At least nine out of every ten illnesses are caused — or at least made worse — by stress, pressure and anxiety. It seems that the way we respond to problems and troubles can produce many symptoms of ill health. But although our minds can make us ill, they can also make us better and help us to stay healthy.

There are a number of ways in which you can use your mind to improve your health:

1. Laugh as much as you can. Laughter is a positive, natural phenomenon which helps by improving respiration, lowering blood pressure and ‘toning up’ the heart.

2. Don’t be cool or unemotional. Insurance companies in the USA have shown that if a wife kisses her husband before he goes to work, then he’ll be less likely to have an accident on the road. He will, on average, live five years longer than if she doesn’t give him a morning kiss.

3. If you feel sad, then cry. Research has shown that tears don’t just provide an important stress relief valve — they help the body get rid of harmful chemical wastes. If you suppress your natural instinct to cry, than you are increasing your chances of acquiring a stress-related disorder.

4. Anger is a killer. Diseases such as high blood pressure, strokes and heart disease are all common consequences of uncontrolled anger. Find a positive way to release it, such as through physical exercise or talking about your problems.

5. A lack of confidence can be very destructive, so build it up. You can do this by imagining that you are creating an advertisement for yourself, writing down all your good points. You’ll probably be surprised to find out how many virtues you have.

6. Smile as much as you can. We all respond to the face we see — for example, if you see someone yawn, you feel tired and if you see someone scowling, then you’ll feel cross. If people see you smiling, then they’ll smile back at you. They’ll like you, too.

7. Learn to assert yourself. In hospitals the patients who live longest are the ones who stick up for themselves. The same is true of life.

8. Boredom is one of the biggest killers in our society. Be prepared to take risks and chances to add excitement to your life. If you don’t take risks, you’ll never know what you can achieve.

9. Put purpose into life. By adding ambition, hope and purpose, you’ll give yourself new powers with which to combat the stresses and strains associated with frustrations, boredom and pressure.

10. Get into the habit of following your instincts. Practise first with minor decisions — what to eat and wear. You’ll be surprised at how good your unconscious

***2. Find the English equivalents of these words and phrases***:

Невпевненість, постояти за себе (2 варіанта), зівати, хмуритись, сердитися, неконтрольований гнів, сміятися, посміхатися, слідувати своїм інстинктам, честолюбство, нові сили, боротися зі стресами,позбавлятися, ризикувати, ставити цілі, додавати драйву.

***3. Answer these questions*:**

1.What proportion of illnesses are caused by stress, pressure and anxiety? 2. How do our minds affect our health? 3. Why is laughter beneficial for us? What effect does a wife’s kiss have on the lifespan and safety of her husband? 4. Tears are harmful, aren’t they? 5. What diseases can be caused by anger? How can you release it? 6. What does lack of confidence have to do with worsening of health? 7. Why is it recommended to smile? How do people react when they see you smile? 8. What kind of patients live longest in hospitals? 9.What is the effect of boredom in our lives? 10. How do ambition, hope and purpose make our lives better? 11. What minor decisions can help you learn to follow your instincts?

***4. Project work***

*What do you think of these recommendations? Give some additional arguments.*

**Завдання 2**

1. ***Read the text:***

**CHILDREN AND DOCTORS**

A Word with the doctor by Dr John Winsor, The Sunday Times of Malta

I don’t think our family doctor liked me very much when I was a youngster. I cannot really blame him.

Whenever he had to come to see me he used to say as he came in: "Where is Robert the Devil?" That was not even my name. He always kicked my bricks down, trod on my favourite railway engine, put me to bed - and prescribed castor oil and a milk diet.

He said he was not going to hurt me - but usually did, with a variety of shiny, evil-looking instruments which he produced from bulging pockets.

Judging by the children I treat, very few of them these days seem to object to a doctor examining them.

I may be a bit of a nuisance, but that is all. I think this is largely because youngsters these days are far more used to seeing a doctor.

And, of course, children are much healthier than they were. They are protected against so many complaints by inoculations. They are better fed and housed, too.

It is very important to get on well with children. Contact with them should be free from fright or fight. If, during the interview, you have to examine them to the accompaniment of yells and screams, you are very likely to overlook some signs of importance and make a wrong diagnosis.

Children have four main fears when seeing the doctor: "What will he do? Will it hurt? Am I very bad? Will he send me to hospital?"

Doctors and parents should never tell a child that "it will not hurt" if it is going to be a bit painful or uncomfortable. To do so will destroy all confidence in the ‘medicine man'!

If a child does know he is to go into hospital, the modern attitude has changed for the better in most hospitals. The young patient should be visited as much as it is allowed.
Mothers and fathers can often be a help in the nursing too. A child dumped in a vast ward, who does not know what is going to happen to him, may suffer for years from the effects.

If a child is ill at home, try to do the nursing downstairs. It may be a bit difficult, but it can make life much happier for the invalid and it may even make nursing easier.
Do not imagine that because a poorly child is off his food, he will starve to death. Do not go on at him about eating.

Taking plenty of fluids is easier and more important. Make sure the youngster gets enough fresh air, and do not try to get a 'greenhouse’ temperature in the room.

Finally, avoid odd jobs when you have got a sick child in the house to nurse. Give him or her plenty of your company - some quality time if you like. The patient will be better for it.

***2. Find the English equivalents of these words and phrases***:

Звинувачувати когось, збивати ногами цеглини, наступати на улюблений паровозик, укладати в ліжко, виписувати касторку, робити боляче, витягати з кишені, бути проти огляду лікарем, захищати, щеплення, бути в дружніх відносинах із дітьми, під супровід крику, пропустити важливі ознаки, зробити неправильний діагноз, головні страхи, болючий або неприємний, зруйнувати довіру до медика, лягти в лікарню, величезна палата, страждати від наслідків, хворіти вдома, напої, парникова температура, бідна дитина, помирати з голоду, примушувати їсти, доглядати хвору дитину, пацієнту буде від цього тільки краще.

***3. Answer these questions*:**

1. Why does the author think their family doctor didn’t like him when he was a child? 2. Did he himself like the doctor? Why not? .3. In what way are children different nowadays? 4. What may happen if children yell and scream while the doctor examines them? 5. What do children fear when seeing the doctor? 6. What lies can destroy children’s confidence in the doctor? 7. How are children treated in hospitals nowadays? 8. What can be recommended when a child is ill at home? 9. Will a child starve if he does not eat when he is ill? 10. Whatb is more important than food for a sick child? 11. What does the author mean by a 'greenhouse’ temperature in the room? 12. And be ‘quality time’?

***4. Project work***

What do you think of the problem “children and doctors”? Write a paragraph about it/

**Завдання 3**

**BRITTLE BONES**

1. ***Read the text:***

IT'S QUITE RIGHT - old people should try to keep young. Try to keep up old interests. Even develop some hobbies.

But there's one luxury they should spare themselves: falling down. Slippery floors and rugs with ragged edges may be relatively harmless for youngsters, but should always be avoided for older people.

It's true that as we get older we fall more clumsily and frequently; but also our bones get weaker.

This worsening of the bones is because of changes in the bone structure. You could take some of the struts and supports out of a bridge, and it might look just the same, and certainly no smaller.

But one would not suggest that trains could still go over it.

Thinning of bones is called osteoporosis, and it can happen for other reasons than old age.

It is more common in women than in men: the former most often at the time of the menopause. This unhappy weakening of our bones can also follow the regular and prolonged taking of certain drugs, especially cortisone.

Osteoporosis can cause a lot of odd symptoms. It is sometimes a cause of backache; or the patient gets a broken bone after a remarkably trivial accident.

In the elderly it is generally the long thigh bone - the femur - which collapses under quite a minor strain or fall.

If anyone has been told they have a thinning of bone (and this has to be proved by X-ray), they must take extra care not to do any heavy lifting or straining.

They need a diet with plenty of protein and vitamins. These last two are so often poorly supplied in the elderly, who sometimes live alone, and have no stimulus to do proper baking or cooking.

For a long time, it was thought that this thinning of bone at any age might be due to a lack of calcium, and patients were stuffed with it.

Big doses of calcium were disappointing, and a varied diet gives anybody enough of this mineral anyway.

Finally, if grandma is changing houses after her brood has grown up, try to get her to accept a bungalow instead of an up-and-down. Fractures are much less frequent in the former.

There are now drugs available to help combat the problem, but taking precautions to avoid falls is always practical.

***2. Find English equivalents of these words and phrases***:

Залишатися молодими, крихкі кістки, не забувати про старі інтереси, не дозволяти собі розкіш падати, слизька підлога, нешкідливий для молодих людей, . кістки стають слабшими, погіршення кісток, зміни в структурі кісток, остеопороз у жінок, регулярний прийом певних ліків протягом довгого часу, додаткові симптоми, причина болю в спині, довга кістка стегна, розпадатися від незначного напруження або падіння, доведено рентгеном, підйом ваги, білки та вітаміни, не мати стимулу готувати їжу, нестача кальцію, пацієнтів напихали, різноманітна дієта, переїжджати з одного будинку в інший, переломи, боротися з проблемою, вживання запобіжних заходів.

***3. Put 8 -10 questions to the text.***

4. ***Project work***

***Give recommendations to an old lady how to avoid fractures and osteoporosis.***

**Завдання 4**

**BLACKOUTS**

1. ***Read the text:***

MANY PATIENTS will complain of having had a 'blackout' but this is a vague and certainly overused word.

It usually means a loss of consciousness for a few minutes but is often used incorrectly. Patients will sometimes almost boast of having had one of these attacks. It has an alarming sound and to say you have had a blackout means that friends and relatives will be suitably impressed.

But if you enquire carefully, you can nearly always separate the really genuine loss of consciousness from the supposed one.

In a fake faint, the patient's description is very vague. They say they felt dizzy and fuzzy and thought they were going to "pass out'. They might also say they felt a tightness in the chest and broke out in a profuse sweat. The alleged blackout may often have gone on for up to an hour.

During a genuine faint there is an actual loss of consciousness because the brain is temporarily deprived of blood. The attack is usually very short and is often caused by some emotional upset, albeit a temporary one, or by fear.

Waiting to see the dentist or taking one's turn in a blood transfusion clinic are typical causes, and they are not uncommon when a patient is having varicose veins treated.

Very occasionally, a sudden loss of blood internally - such as from a bleeding stomach ulcer - may cause loss of consciousness and diabetes can cause alarming looking fainting attacks. If the patient is taking insulin or having injections for diabetes, a shortage of sugar in the blood may lead to a sudden passing out".

However, feeling dizzy when getting up quickly out of a chair or off the bed are not true faints.

Obviously, it is not easy for an anxious relative to be sure that a fainting attack is not too serious. However, it is important never to panic.

General rules about what to do if someone faints are well described in First Aid manuals. For example, it is important to keep the patient quiet and well supplied with fresh air.

If there is no obvious cause or if attacks recur it is time to get expert advice. This is particularly true if the patient is over 30.

Despite what you may think, blackouts are seldom connected with heart disease but there are many other conditions which need to be excluded. However, blackouts are generally more dramatic than serious.

***2. Find English equivalents of these words and phrases***:

Скаржитися на, запаморочення, втрата свідомості, нечітке та занадто часто вживане слово, використовувати неправильно, хвалитися, добре розпитати, несправжня втрата свідомості, відчути головокружіння, тиск у грудях, рясний піт, продовжуватися до години, справжня непритомність, кров не поступає до мозку, викликаний страхом, хоч і тимчасовий, клініка переливання крові, сидіти в черзі, типові причини, варикозні вени, виразка шлунка, втрата крові, приймати інсулін, робити ін’єкції при діабеті, нестача цукру в крові, схвильований родич, панікувати, посібники з надання першої допомоги, приступи повторюються, отримати пораду експерта, пов'язаний із захворюванням серця, скоріше драматичний, ніж серйозний.

***3. Put 8 -10 questions to the text.***

4. ***Project work***

***Describe a situation when somebody loses consciousness. What must we do?***