

# ILLNESSES

|                                                                                     |                          |
|-------------------------------------------------------------------------------------|--------------------------|
|    | a c _____                |
|    | f _____                  |
|    | r _____ n _____          |
|    | the f _____              |
|   | c _____                  |
|  | t _____                  |
|  | s _____                  |
|  | I got my a _____ b _____ |
|  | I c _____ myself         |
|  | a h _____                |
|  | s _____ t _____          |