

## LESSON 4

- 17 Suggest medications for the following symptoms. In some cases, more than one type might be helpful. Explain why you think each medication is helpful.

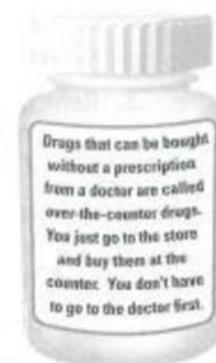
| Symptom             | Medication    | Reason |
|---------------------|---------------|--------|
| sneezing            | Cold tablets, |        |
| a toothache         |               |        |
| weakness            |               |        |
| coughing            |               |        |
| stomach problems    |               |        |
| a burn from hot oil |               |        |
| red eyes            |               |        |
| an infection        |               |        |

Health Matters

17

- 18 **WHAT ABOUT YOU?** How do you buy medications in your country? Which ones do you need a prescription for? Which ones can you buy without a prescription? Which are available both ways?

|                | Prescription<br>always needed | Prescription<br>not needed | Some kinds require<br>a prescription |
|----------------|-------------------------------|----------------------------|--------------------------------------|
| antacids       | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| painkillers    | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| antibiotics    | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| vitamins       | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| cold tablets   | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| antihistamines | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |
| other: _____   | <input type="checkbox"/>      | <input type="checkbox"/>   | <input type="checkbox"/>             |



- 19 **WHAT ABOUT YOU?** Answer the questions in your own way.

- What are some of the medications listed in Exercise 18 that you have taken? \_\_\_\_\_
- What is the normal dosage? \_\_\_\_\_
- Do you need a prescription to get them? \_\_\_\_\_
- What are some warnings or side effects of these medicines? \_\_\_\_\_