1. Relative Clauses

A. Transform these sentences using a relative pronoun.
A girl was injured in the accident. She is now in hospital. The girl The patient is no longer here. The consultant wanted to see her. The patient Where is the syringe? It was in this box. Where Have you bought the ointment? You wanted it. Have I know a couple of people. They suffer from asthma. I know The obstetrician is talking to a woman – do you know her? Do you know Here are the books. I was looking for them. Here I did not get a job. The job was advertised in Newsweek. I did not
B. Grammar rules: which, that, subject, more, object, formal, who, whose, whom
We use for people. x We use for things. We use to refer to a fact that something belongs to someone or something. You must use who/that/which when it is the of the relative clause. You can leave out who/that/which when it is the of the relative clause. The use of who/which is more than that. If the relative pronoun is an object (or is used with a preposition), we use in a formal situation.
C. Complete what or that.
a) happened was my fault. b) Everything happened was my fault. c) The device broke down is working again. d) Did you hear they said? e) I gave her all the money I had. f) = the thing(s) that
D. Complete the following sentences, use more options where possible.
a) Lungs are the organs help us breathe. b) The amount of oxygen people inhale can be measured. c) Louis Pasteur was a French microbiologist discovered the principles of vaccination. d) The donor kidney was removed has recovered quickly. e) The diseases described in the lecture are very contagious. f) He is one of the scientists I admire the most. g) This is his third book, the publication made such an impression. h) A hospital is a place sick people are treated. i) 1667 was the first successful blood transfusion was carried out. j) I can't think of I should help you. k) This is we do appendectomy. l) Tell the people waiting outside to come in. m) The people I work with are terminally ill.
2. Talk to your partner:
What is snoring and what does it cause? Do you snore? Do you have any experiences (bad/funny) with snoring?
3. Watch the video on "Where does snoring come from", answer the following questions. What method is used in the video for determining the cause of snoring? How is it done? What parts of the body can cause snoring? What treatment for snoring is suggested in the video?

4. Check up at the doctor's

A. Read the text about a cough and complete the words:

phlegm	crackles	pro	ductive	dry	cough up	stained		
loos	se non-p	roductive	wheez	es	noticed	auscultation		
gave up breath back smoke heavily								
Cough is a common symptom of upper respiratory tract infection (URTI) and lung disease. A cough may be where the patient coughs up sputum , or where there is no sputum. A productive cough is often described as and a non-productive cough as Sputum (or) may be clear or white (mucoid), yellow due to the presence of pus (purulent), or blood (as in haemoptysis).								
A doctor is examining a patient who is complaining of a cough. Doctor: How long have you had the cough? Mr Hamilton: Oh, for years. Doctor: Do you smoke? Mr H.: I used to, but I a year ago. D: Do you any phlegm? H: Yes. D: What colour is it? H: Usually yellow. D: Have you ever any blood in it? H: No, I haven't. D: Any problems with your breathing? H: Yes, I get very short of breath. I have to stop halfway up the stairs to get my								
(listening to the chest with a stethoscope may reveal the presence of sounds, apart from the normal breath sound, there are two main kinds of added sounds:								
•, which sound like hairs being rubbed together and suggest the presence of fluid in the lungs								
•, which are more musical sounds, like whistling and indicate narrowing of the airways. The sound of an asthma patient's breathing is also called wheeze.								
The sound heard when the pleural surfaces are inflamed, as in pleurisy, is called a pleural rub.								
B. Read the dialogue between the doctor and Mr. Hamilton with your partner aloud, then write how the dialogue will continue. C. Make word combinations: D. Rewrite the questions using words that are								
Blood	cough			better known to patients				
Breath Deep	rub tract			a) Is your cough productive?b) What colour is the sputum?				
Pleural	· / · · · · · · · · · · · · · · · · · ·							
Productive Respiratory			d) Have you ever had haemoptysis?					

Should smoking be banned?

Barack Obama's doctor **confirmed** that the president no longer smokes. At the **urging** of his wife, the president first decided to stop smoking.
____(1) If it took Obama, a man strong-willed enough to achieve the US presidency, five years to **kick the habit**, it is not surprising that hundreds of millions of smokers find themselves unable to **quit**.

Although smoking had fallen sharply in the US, the proportion of smokers stopped **dropping** around 2004. Smoking kills about 443,000 Americans each year. Worldwide, the number of cigarettes sold is six trillion a year, enough to reach the sun and back. Six million people die each year from smoking. (2)



Earlier this month, the US Food and Drug Administration announced that it would spend \$600 million over five years to educate the public about the dangers of tobacco use. But Robert Proctor, the author of a book **entitled** *Golden Holocaust: Origins of the Cigarette Catastrophe*, says: "_____ (3) It should rather be focused on fixing or eliminating the product."

His book starts with a view in the history of smoking. ____(4) In 1953, however, a meeting

of the chief executives of major tobacco companies took a joint decision to **deny** that cigarettes are harmful. ____ (5) They did it in much the same way as those who deny that human activities are causing climate change.

For those who recognize the state's right to **ban** recreational drugs like marijuana and ecstasy, a ban on cigarettes should be easy to accept. Tobacco kills far more people than these drugs.

Some **argue** that as long as a drug harms only those who choose to use it, the state should let individuals make their own decisions. _____ (6) But tobacco is not such a drug, given the dangers posed by secondhand smoke, especially when adults smoke in a home with young children.

Even setting aside the harm that smokers cause to nonsmokers, the free-to-choose argument is **unconvincing** with a drug as highly **addictive** as tobacco. ____ (7) Reducing the amount of nicotine in cigarette smoke to a level that was not addictive might meet this **objection**.

The other argument for the *status quo* is that a ban on tobacco might result in the same kind of fiasco as occurred during Prohibition in the US.

(8) Corruption in law-enforcement agencies would be **on a rise**, while little would be done to reduce smoking.

But that may well be a false **comparison**. After all, many smokers would actually like to see cigarettes banned because, like Obama, they want to quit.

- A. That is more than from AIDS, malaria, and traffic accidents combined.
- B. As early as the 1940's, the industry had evidence **suggesting** that smoking causes cancer.
- C. Tobacco control policy too often centres on educating the public.
- D. That is prohibiting the sale of tobacco would make billions of dollars flow into organized crime.
- E. The authorities should limit its role to **ensuring** that users are informed of the risks that they are running.
- F. For that purpose, he started using nicotine replacement therapy to help him.
- G. Moreover, once the scientific evidence that smoking causes cancer became public, the industry tried to create the impression that the science was **inconclusive**.
- H. It becomes even more **dubious** when we consider that most smokers take up the habit as teenagers and later want to quit.