

**ENGLISH READING
COMPREHENSION PRACTICE**

For first-year students majoring in Dentistry

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
Харківський національний медичний університет

ENGLISH READING
COMPREHENSION PRACTICE

For first-year students majoring in Dentistry

ЗАВДАННЯ
ДЛЯ ДОМАШНЬОГО ЧИТАННЯ
АНГЛІЙСЬКОЮ МОВОЮ

Для здобувачів освіти першого курсу спеціальності
"Стоматологія"

Затверджено
Вченою радою ХНМУ.
Протокол № 11 від 27.06.2025.

Харків
ХНМУ
2025

English reading comprehension practice: for first-year students majoring in Dentistry / compil. I. V. Korneyko, O. V. Krainenko, O. B. Petrova, H. V. Ovsyannikova. Kharkiv KhNMU, 2025. 28 p.

Compilers I. V. Korneyko
O. V. Krainenko
O. B. Petrova
H. V. Ovsyannikova

Завдання для домашнього читання англійською мовою : для здобувачів освіти першого курсу спеціальності «Стоматологія» / упоряд. І. В. Корнейко, О. В. Крайненко, О. Б. Петрова, Г. В. Овсяннікова. Харків : ХНМУ, 2025. 28 с.

Упорядники І. В. Корнейко
О. В. Крайненко
О. Б. Петрова
Г. В. Овсяннікова

PREFACE

Nowadays, a huge amount of modern scientific literature is published in English. When being translated, many important details can be lost. Therefore, a competent reader in English can avoid the difficulties associated with this. There are many other reasons why healthcare professionals should learn to read medical literature in English. Besides, they can self-publish an article in English and submit their research for review by the international medical community. Doing an internship in English-speaking countries to improve your qualification requires a good command of English and English reading skills. Many sources of information require the ability to search for the necessary information (reading to obtain specific information) and understand the primary information of the text (research reading).

This work is aimed at developing reading comprehension skills in first-year students majoring in Dentistry.

The textbook presents ten chapters, each containing scientific or popular science texts as well as reading comprehension exercises to develop research reading skills. The students are to acquire the reading skills to obtain specific information and to process it.

The texts cover various topics related to dental disorders, their treatment, and the study of specific terminology. The reading material is taken from authentic reference literature and has been abridged, considering the requirements for the foreign language learning strategy.

To encourage dentistry students to work independently, the manual includes answer keys. Many tasks have keys at the end of the manual, except for those marked with an asterisk, which presuppose that the students may embody their ideas in different linguistic constructions and develop their creative thinking. The references for the sources of the material are supplied. The language sufficiency level necessary to work with this textbook corresponds to level B1+.

The manual is recommended to stimulate first-year dentistry students to develop their skills in independent reading of professional English-language literature. The textbook can also be used for classes with graduate students and those who wish to improve their reading skills in English.

Unit 1

Read the text

ORAL CAVITY

The oral cavity, also commonly referred to as the mouth or buccal cavity, serves as the initial portion of the digestive system. It consists of several anatomically different aspects that work together effectively and efficiently to perform several functions. These aspects include the lips, tongue, palate, and

teeth. Although a small compartment, the oral cavity is a unique and complex structure with several different nerves and blood vessels inside it. This intricate network is necessary for its unique and diverse role in human life.

The oral cavity is surrounded by the lips and is composed of two separate regions: the vestibule, the area between the cheeks, teeth, and lips, and the oral cavity proper. The oral cavity proper is mostly filled with the tongue and bounded anteriorly and on the sides by the alveolar processes containing the teeth and posteriorly by the isthmus of the fauces. Anteriorly, the roof is formed by the hard palate and posteriorly by the soft palate. The uvula hangs downwards from the soft palate. The mylohyoid muscles constitute the floor of the oral cavity proper. A mucous membrane known as the oral mucosa is composed of stratified squamous epithelium and forms the inner lining of the mouth. Several submandibular and sublingual salivary glands secrete viscous and mucoid fluid to lubricate and keep the oral cavity moist.

The mouth not only plays a vital role in the initial intake and digestion of food and water, but also is essential for the formation of speech and normal respiration. The teeth, which are the chief structures of the oral cavity, tear and grind ingested food into pieces small enough for digestion. The tongue enables the digestion of food through compressing and pressing food against the palate; this leads to the formation of the food bolus subsequently swallowed down the esophagus. The tongue also functions to provide the perception of taste to humans as it contains various papillae on its dorsal surface that serve as taste buds. Moreover, the tongue is the most important articulator of speech, as it manipulates itself against the teeth and palate to form words. The palate serves as a mechanical barrier separating the oral cavity from the nasal respiratory tract, also enabling simultaneous breathing and food intake.

Different branches of the external carotid artery provide blood supply to the oral cavity.

The innervation of the oral cavity is distinct and comes primarily from the maxillary and mandibular divisions of the trigeminal nerve.

There are several muscles inside the oral cavity.

1. In the text, find the words that correspond to the definitions:

- a) a hard structure in the jaw used for chewing
- b) fluid secreted by the glands of the mouth
- c) organ of speech and taste
- d) bones that form the skeleton of the mouth
- e) the tissues and membranes surrounding the teeth
- f) chief structure of teeth
- g) the hard, white substance that covers and protects the tooth
- h) portion of the tooth implanted in tissues

2. * *Continue the sentences:*

- a) The mouth or buccal cavity is the beginning ...
- b) The lips, tongue, palate, and teeth work together to ...
- c) Two separate regions of the oral cavity are ...
- d) The roof of the oral cavity is formed by ...
- e) The role of the mouth is ...
- f) The functions of the chief structures of the oral cavity are to ...
- g) The tongue provides ...
- h) The external carotid artery supplies ...
- i) Several muscles are located ...

3. *Fill in the blanks to make a summary:*

The oral cavity is known as the a) ... or b) ..., serves as the c) Lips, tongue, palate, and teeth work to d) The oral cavity plays e) ... in human life.

The vestibule is the area f) ..., and g) Mostly, the tongue fills the h)

The hard and soft palate form i) Secretion of several j) ... lubricates and keeps the oral cavity moist.

The chief structures of the k) ..., teeth, provide tearing and grinding of the ingested food for digestion. The functions of the tongue include l) the digestion of ..., m) the perception of ... n) the articulation ...

Unit 2

Read the text

DIAGNOSTIC DENTISTRY

Regardless of the state of your oral health, it is important to maintain a schedule of regular dental appointments. A reasonable goal is to visit the dentist once a year, at least, for an oral health checkup. Although you may be free of many oral health concerns, it's still important to undergo preventive procedures such as dental cleanings. An early diagnosis of an oral health problem can go a long way in effective treatment.

Diagnostic dentistry allows dentists to spot oral health issues in their patients before they turn into costly, painful, or time-consuming problems. Two dental cleanings and two diagnostic checkups per year are recommended. This schedule has been shown to reduce the risk of developing oral health problems.

Diagnostic dentistry services may include blood pressure check; checking biting, chewing, and swallowing patterns; evaluation of gum tissue; examination of teeth to detect decay; oral cancer examination and screening; reviewing and updating medical history, including cancer treatment, diabetes, heart problems, joint replacement, medications, pregnancy, and surgeries; treatment planning, including referrals to specialists for specific treatment.

Dentists use some procedures to check for any oral health problems that may have developed since a patient's last dental appointment. Diagnostic dentistry procedures include any procedure used to find a problem with gum

tissue, teeth, or other oral structures of the mouth. These procedures include bite imprints to determine if there are jaw malformations affecting biting and chewing; extrapolation of fluids from swollen gums or abscesses to detect infection or disease; referrals to bone specialists for signs of bone degeneration or malformation; surgical removal or biopsy of strange tissues; swabs of mouth sores; and x-rays. A dentist is more likely to spot oral health problems than your general physician, so don't skip dental diagnostic checkups even if you go to your trusted doctor regularly.

Diagnostic dental care can provide you with the following benefits:

- Better dental care: When a dentist knows exactly what needs a checkup, maintenance, and treatment in a patient's mouth, the appointments are more efficient. The appointment is more focused, thus addressing the specific area of concern. For example, if you have periodontal disease, they will perform periodontal dental cleaning instead of simple prophylaxis during professional teeth cleaning appointments.

- Rapport with your dentist: Building a relationship with your dentist and their staff is important, especially if you experience dental anxiety. Diagnostic dental care appointments don't often include fear-inducing procedures. Having face time with your dentist can help you get to know them better and be more comfortable with going to their office for preventative and treatment appointments.

Options for treatment are as follows: When an oral health problem is diagnosed early, there's often a wider range of components available for appropriate and effective treatment. Your dentist will often talk to you about your options for treatment after a diagnosis. Because these newly diagnosed oral health problems are often not emergencies, there's also often more time to deal with them. With your dentist, you can plan out a treatment program that fits your needs, your budget, and your schedule.

1. Answer the questions:*

1. What is diagnostic dentistry aimed at?
2. Which services does diagnostic dentistry provide?
3. What procedures are used in diagnostic dentistry?
4. What should a patient do to spot oral health problems on time?
5. What are the benefits of diagnostic dental care?

2. Pick out the words (word combinations) from the text that match the following definitions:

- a) a serious, unexpected, and often dangerous situation requiring immediate action
- b) to put a small piece of cotton wool used by a dentist for cleaning a wound, or the application of a substance on it

- c) oral disorders characterized by maxillo-mandibular discrepancies and alveolar bone and teeth irregularities
- d) damage to a tooth's surface, or enamel, due to dental plaque
- e) high-priced
- f) a friendly, harmonious relationship
- g) dental impressions used to create diagnostic models of teeth, gums, and surrounding oral structures
- h) the tissues that support the tooth, located on the jawbone that surrounds our teeth and tooth roots
- i) the obtainment of tissue from a living organism to examine it under the microscope to establish a diagnosis
- j) a type of skin lesion, like ulcers

3. *Fill in the blanks with the words and word combinations from the text:*

Many patients experience ... when they have to consult a dentist; therefore, it is important to build a relationship with your dentist. Dental ... should be made twice a year. ADA recommends two ... and two ... per year. Diagnostic dentistry allows dentists to ... oral health issues on time before they become time-consuming problems. The newly diagnosed oral health problems are often not ...

Unit 3

Quickly read the text, think about the title for it:

The damage to a tooth's surface, or enamel, is called tooth decay, cavities, or dental caries. It occurs when bacteria in your mouth produce acids that affect the enamel. Tooth decay can lead to cavities (dental caries). If tooth decay is not treated, it can cause pain, infection, and even tooth loss.

The oral cavity is full of bacteria. Some bacteria are helpful. But some can be harmful, including the ones that play a role in tooth decay. These bacteria combine with food to form a soft, sticky film called plaque. The bacteria use the sugar and starch in what you eat and drink to make acids. The acids begin to eat away at the minerals on your enamel. Over time, the plaque can harden into tartar. Besides damaging your teeth, plaque and tartar can also irritate your gums and cause gum disease.

Some people have a higher risk of tooth decay, including people who don't have enough saliva, because of medicines, certain diseases, or some cancer treatments. The people who don't get enough fluoride or are very young (babies and toddlers who drink from bottles) are at risk, as well. Your teeth go through the natural process of losing minerals and regaining minerals all day long. Fluoride, along with saliva, helps the enamel restore itself by replacing the minerals. But if you don't care for your teeth, your enamel will keep losing minerals.

A white spot may appear where minerals have been lost. This is an early sign of tooth decay. In early tooth decay, you usually don't have symptoms. As tooth decay gets worse, it can cause a toothache, tooth sensitivity to sweets, hot, or cold. White or brown stains may appear on the surface of a tooth. Over time, the enamel is damaged, forming a cavity. An infection may develop, which can lead to an abscess that can cause pain, facial swelling, and fever.

Dentists usually detect tooth decay and cavities by examining your teeth and probing them with dental instruments. Your dentist will also ask if you have any symptoms. Sometimes you may need a dental X-ray.

There are several ways to treat tooth decay and cavities: fluoride applications (if you have early tooth decay, fluoride treatment can help the enamel to repair itself); filling (if you have a typical cavity, your dentist will extract the decayed tooth tissue and then restore the tooth by filling it with a filling material); root canal treatment (if the damage to the tooth and/or an infection spreads to the pulp inside of the tooth; your dentist will remove the decayed pulp, clean inside the tooth and root, and fill the tooth with a temporary filling and, after, with a permanent filling or a crown.

In more severe cases, when the damage to the pulp and the tooth cannot be restored, your dentist may extract the tooth. Your dentist will suggest that you get a bridge or an implant to replace the missing tooth. Otherwise, the teeth next to the gap may move over and change your bite.

There are steps that you can take to prevent tooth decay:

- Make sure that you get enough fluoride by brushing with a fluoride toothpaste, drinking tap water with fluoride. Most bottled water does not contain fluoride. You may rinse your mouth with fluoride.
- Floss your teeth regularly.
- Make smart food choices by limiting foods and drinks that are high in sugars and starches.
- Do not use tobacco products, including smokeless tobacco.
- See your dentist for regular check-ups and professional cleanings.
- Make sure that your children get dental sealants (thin plastic coatings that protect the chewing surfaces of the back teeth) on their teeth.

1. Fill in the chart with information from the text*

Etiology	Symptoms and signs	Diagnosis	Treatment	Prevention

*2. Answer the following questions using the information in the text.**

1. What is tooth decay?
2. What causes tooth decay?
3. Who is at risk for tooth decay?

4. What are the symptoms of tooth decay and cavities?
5. How are tooth decay and cavities diagnosed?
6. What are the treatments for tooth decay and cavities?
7. Can tooth decay be prevented?
8. What are the steps to prevent tooth decay?

3. * *Choose among the following the diseases treated by the dentist:*

Influenza, gingival and periodontal disease, pharyngitis, bronchitis, caries, tonsillitis, pneumonia, pulpitis, stomatitis, pancreatitis, duodenitis, otitis, periodontitis, gingivitis

4. * *Which of the following is done in the dental surgery?*

Tonsillectomy, gastrotomy, calculus removal, laryngostomy, removal of a dental nerve, restoration, tooth x-ray, tooth extraction, chest x-ray, dental filling, injection of medication.

5. *Change the highlighted words with the words from the text that have the same meaning:*

1. There are a lot of bacteria in the **mouth**.
2. The damaged enamel can be **repaired** by the dentist.
3. The teeth are **destroyed** by the plaque.
4. Dental caries **happens** when bacteria produce acids.
5. Plaque and tartar can also **affect** the gums.

Unit 4

Read the text.

Plaque

People used to think that as you got older, you naturally lost your teeth. We now know that's not true. By following easy steps for keeping your teeth and gums healthy and seeing your dentist regularly, you can have your teeth for a lifetime!

Plaque is made up of invisible masses of harmful germs that live in the mouth and stick to the teeth. Some types of plaque cause tooth decay. Other types of plaque cause gum disease.

Red, puffy, or bleeding gums can be the first signs of gum disease. If gum disease is not treated, the tissues holding the teeth in place are destroyed, and the teeth are eventually lost.

Dental plaque is difficult to see unless it's stained. You can stain plaque by chewing red "disclosing tablets," found at grocery stores and drug stores, or by using a cotton swab to smear green food coloring on your teeth. The red or green color left on the teeth will show you where there is still plaque, and

where you have to brush again to remove it. There are definite rules to control the plaque. These are some of them:

- Stain and examine your teeth regularly to ensure you remove all the plaque. Ask your dentist or dental hygienist if your plaque removal techniques are safe.

- Use floss to remove germs and food particles between teeth and rinse. Ease the floss into place gently. Do not snap it into place, as this could harm your gums. Another way of removing plaque between teeth is to use a dental pick. These picks can be purchased at drug stores and grocery stores.

- Use any tooth brushing method that is comfortable, but do not scrub hard back and forth. Small circular motions and short back-and-forth motions work well; rinse.

- To prevent decay, it's what's on the toothbrush that counts. Use fluoride toothpaste. Fluoride is what protects teeth from decay.

- Brush the tongue for a fresh feeling! Rinse again.

Remember that food residues, especially sweets, provide nutrients for the germs that cause tooth decay, as well as those that cause gum disease. That's why it is important to remove all food residues, as well as plaque, from teeth. Remove plaque at least once a day. If you brush and floss once daily, do it before going to bed.

1. Answer the questions:*

1. What causes tooth decay or gum disease?
2. What are the symptoms of gum disease?
3. How can plaque be detected?
4. What should be done to prevent tooth decay?
5. Why is it important to avoid eating a lot of sweets?

2. Agree or disagree with the following statements:

1. Dental floss is used to remove plaque.
2. When you get older, you are sure to lose your teeth.
3. Food residues nourish the germs.
4. Dental plaque is impossible to see as soon as it's stained.
5. Scrubbing teeth helps to improve oral health.
6. We have to remove plaque several times a day.
7. Coloring teeth may show you where there is still plaque, and where you have to brush.

3. Pick out the words (word combinations) from the text that match the following definitions:

- a) damage to a tooth's surface, or enamel, due to bacterial acids
- b) a thin plastic or wooden stick

- c) to remove (dirt, grime, etc.) from something by hard rubbing
- d) to move into a position quickly, producing a short noise as if breaking
- e) the part that is left after the main part has gone or been taken away
- f) f. to leave a mark on something difficult to remove
- g) a piece of absorbent material on a stick, like a mop
- h) to wash lightly, as by pouring water into or over or by dipping in water
- i) to spot, to attach a layer
- j) a very small organism that causes disease
- k) swollen to a size slightly larger than usual
- l) slightly, without force or strength

4. Match the words in column A with the words in column B to make word combinations:

A	B
purchase	teeth
stain	hygienist
prevent	picks
consult	coloring
harm	rules
brush	plaque
follow	decay
smear	gums

Unit 5

Read the text and give the title to the text

A filling is a way to restore a tooth damaged by decay back to its normal function and shape. When a dentist gives you a filling, he or she first removes the decayed tooth material, cleans the affected area, and then fills the cleaned-out cavity with a filling material.

By closing off spaces where bacteria can enter, a filling also helps prevent further decay. Materials used for fillings include gold, porcelain, a composite resin (tooth-colored fillings), and an amalgam (an alloy of mercury, silver, copper, tin, and sometimes zinc).

No one type of filling is best for everyone. What's right for you will be determined by the extent of the repair, whether you have allergies to certain materials, where in your mouth the filling is needed, and the cost. Considerations for different materials include:

- Gold fillings are made to order in a laboratory and then cemented into place. Gold inlays are well tolerated by gum tissues and may last more than 20 years. For these reasons, many authorities consider gold the best filling material. However, it is often the most expensive choice and requires multiple visits.

- Amalgam (silver) fillings are resistant to wear and relatively inexpensive. However, due to their dark color, they are more noticeable than porcelain or composite restorations and are not usually used in very visible areas, such as front teeth.

- Composite (plastic) resins are matched to be the same color as your teeth and therefore used where a natural appearance is desired. The ingredients are mixed and placed directly into the cavity, where they harden. Composites may not be the ideal material for large fillings as they may chip or wear over time. They can also become stained from coffee, tea, or tobacco, and do not last as long as other types of fillings, generally from three to 10 years.

- Porcelain fillings are called inlays or onlays and are produced to order in a lab and then bonded to the tooth. They can be matched to the color of the tooth and resist staining. A porcelain restoration generally covers most of the tooth. Their cost is similar to gold.

If decay or a fracture has damaged a large portion of the tooth, a crown or cap may be recommended. Decay that has reached the nerve may be treated in two ways: through root canal therapy (in which nerve damaged nerve is removed) or through a procedure called pulp capping (which attempts to keep the nerve alive).

Only your dentist can detect whether you have a cavity that needs to be filled. During a checkup, your dentist will use a small mirror to examine the surfaces of each tooth.

1. Answer the questions:*

1. Which type of filling is the best?
2. What happens when you get a filling?
3. How do I know if I need a filling?
4. What should a dentist do before giving a filling to a tooth?
5. What is usually done if a large portion of the tooth has been damaged?
6. Why are composites not the ideal material?

2. Continue the sentences according to the text:*

1. Filling is ...
2. Filling materials are ...
3. Amalgam is ...
4. Composite resin is ...
5. The ways to treat the decay that has reached the nerve are ...
6. Porcelain fillings are called ...
7. If natural appearance is desired, the dentist uses...

3. Match the words with similar meaning:

1. staining	a. part
2. treat	b. spotting
3. portion	c. damage
4. require	d. restore
5. decay	e. need
6. remove	f. price
7. cost	g. delete

Unit 6

Read the text

PULPITIS

Pulpitis is the name given to any inflammation of the pulp regardless of the presence of an infectious agent. Pulpitis may be acute or chronic, with or without symptoms, and reversible or irreversible. If not treated, an acute form of pulpitis rapidly progresses to pulpal necrosis.

To make a diagnosis, the clinician has to evaluate the damage to the pulpal tissue that can be neither seen nor touched. An indirect assessment based on a combination of clinical tests and knowledge of the biologic and pathologic processes that occur within pulp tissue is required.

Although pulpitis has many possible causes, the primary one is dental caries. because dental caries destroys tooth structure.

The decision as to the extent to which the tooth can be restored plays a great role. The dentist has to choose between:

- conservative restoration of the defective tooth structure;
- removal of the diseased pulpal tissue;
- removal of the entire tooth.

In making the decision, the clinician has to decide whether the pulpitis is reversible or irreversible. To differentiate between reversible and irreversible pulpitis, the following must be assessed:

- Whether the pain is spontaneous or brought on by thermal changes;
- The duration of each episode of pain;
- The nature of the pain as described by the patient.

The pain of reversible pulpitis is sharp and intense, responding to sudden changes in temperature. It typically lasts for 5 to 10 minutes and rarely exceeds 20 minutes. The tooth remains asymptomatic until stimulated again. Positional changes, such as lying down, generally do not influence the nature or duration of the pain. Treatment for reversible pulpitis involves protecting the pulp from additional thermal stimulation and applying sedative dressings at the base of the carious defect for several weeks.

The diagnosis of irreversible pulpitis is made when it is determined that the pulp will not recover, regardless of attempts to treat it. For the patient to obtain permanent relief at this stage, the remaining pulp must be removed or the tooth must be extracted.

The pain of an irreversible pulpitis can be of variable intensity, but it is usually less intense than that of reversible pulpitis. The main feature of irreversible pulpitis is the pain that is spontaneously initiated and is not the result of a sudden temperature change. It lasts for a prolonged period, usually longer than 20 minutes. The pain may be initiated or accentuated when the patient reclines. Although the pain from reversible pulpitis is easily localized to a particular tooth, the pain from an irreversible pulpitis may be referred to another nearby location, such as the lateral aspect of the face or other teeth in the arch.

1. Which of the following is discussed in the text?

Etiology, Epidemiology, Treatment, Prevention, Symptoms and Signs, Definition, Diagnosis

2. Answer the questions:*

1. What is pulpitis?
2. What is the primary cause of pulpitis?
3. What are the types of pulpitis?
4. What should be done to make a diagnosis of pulpitis?
5. What is the indirect assessment of the condition based on?
6. What decisions can a dentist make to treat pulpitis?
7. What is the character of pain with reversible or irreversible pulpitis?
8. What is the treatment for reversible and irreversible pulpitis?

3. Agree or disagree:

1. If not treated, an acute form of pulpitis rapidly progresses to pulpal necrosis.
2. Pulpitis always produces constant symptoms.
3. The only treatment of pulpitis presupposes conservative restoration of the defective tooth structure.
4. The pain of an irreversible pulpitis is usually more intense than that of reversible pulpitis.
5. The pain with irreversible pulpitis may be initiated or accentuated when the patient reclines.
6. The pain of reversible pulpitis is a response to sudden changes in temperature.
7. The pain from reversible pulpitis may radiate to another nearby location.

4. * *Continue the sentences according to the information from the text:*

1. The main cause of pulpitis is ...
2. The following must be assessed to differentiate pulpitis: ...
3. The pain of reversible pulpitis typically lasts ...
4. The pain of irreversible pulpitis typically lasts ...
5. Positional changes, such as lying down, generally do not influence the nature or duration of the pain in case of ...
6. The treatment of reversible pulpitis includes ...

Unit 7

Read the text

Dental Exam

The dental examination is a part of the checkup of your teeth and gums. When you see your dentist for a checkup, the visit usually includes:

- dental cleaning to remove the build-up of plaque (a sticky film of bacteria that coats your teeth);
- X-ray of your teeth on certain visits, depending on the health of your teeth;
- examination of your teeth and mouth.

Dental exams are important for protecting your oral health. Oral health includes the health of your teeth, gums, and all the muscles and bones that let you smile, speak, and chew. Common oral health problems, such as tooth decay (cavities) and gum disease (periodontal disease), can lead to pain, infection, and tooth loss.

Poor oral health can affect your general health, too. For example, losing teeth can cause problems with eating and nutrition, which can lead to other health problems. You can help prevent oral health problems by visiting the dentist regularly, practicing good toothbrushing and flossing habits at home.

During the dental checkup, you usually see both a dentist and a dental hygienist. A dentist is a doctor who has special training to care for teeth and gums. A dental hygienist is a health care professional trained to clean teeth and teach you how to take good care of your teeth and gums.

Dentists can treat people of all ages. Pedodontists specialize in dental care for children. Babies should have their first dental appointment within six months of getting their first tooth, or by their first birthday. Ask your baby's dentist how often your baby should have a dental exam. Most babies should be checked every six months.

Ask your dentist or hygienist how often you should have exams. Most adults and children need to have a routine dental exam every six months. You may need more frequent dental exams if you:

- have gum disease and get a lot of cavities;
- have a family history of oral health problems;

- have a health condition that may increase your risk for oral health problems, such as diabetes, heart disease, HIV, or conditions that affect your immune system;

- take medicines that make your mouth dry, smoke;

- if you are pregnant, which increases your risk for gum disease;

- if you have swollen, dark red, and/or bleeding gums, tooth pain, or other discomfort in your mouth.

You can help keep your teeth healthy for your lifetime by getting regular dental exams and taking good care of your teeth and gums. For a healthy mouth and strong teeth, you should:

- brush your teeth twice a day using a soft-bristled brush and toothpaste with fluoride;

- clean between your teeth regularly using dental floss, a special brush, or a plastic pick. Your dentist can suggest the best way to do this;

- replace your toothbrush every three or four months;

- keep to a healthy diet and limit sweets and sugary drinks. If you do have sweets, you have to brush your teeth soon afterwards;

- drink fluoridated water;

- avoid smoking. Smoking increases your risk of gum disease.

1. Answer the questions:*

1. What is a dental exam?

2. What does oral health mean?

3. Why do people need a dental exam?

4. What do the specialists mentioned in the text do?

5. How often should we consult these specialists?

6. What does the dental check-up include?

7. In which cases do we need to have dental examinations more often?

8. What measures should we take to keep our teeth healthy?

2. Pick out a word from the text to match the following definitions:

a) fluorine-containing salt added to water supplies or toothpaste to reduce tooth decay

b) bite and work (food) in the mouth with the teeth, especially to make it easier to swallow

c) have an effect on; make a difference to

d) an arrangement to meet someone at a particular time and place

e) each of a set of hard, bony, enamel-coated structures in the jaws of most vertebrates, used for eating food

f) tissues that surround the base of your teeth and help keep them in place

g) the loss of blood

h) occurring or done many times at short intervals

3. Continue the sentences according to the text:*

1. Pedodontists are ...
2. Dental hygienists are ...
3. Dentists are ...
4. Dental check-ups include ...
5. To keep your oral cavity healthy, you should ...
6. You need more frequent dental exams if ...

Unit 8

Read the text

DENTAL ABSCESS

A dental abscess, or tooth abscess, is a build-up of pus that forms inside the teeth or gums. A dental abscess is, in most cases, a complication of a dental infection. There are three types of dental abscess: gingival, periodontal, and periapical.

A dental abscess typically comes from a bacterial infection, often one that has accumulated in the soft pulp of the tooth. Bacteria exist in plaque, a by-product of food, saliva, and bacteria in the mouth, which sticks to the teeth and damages them and the gums. If the plaque is not removed by regular and proper brushing and flossing, the bacteria may spread inside the soft tissue of the tooth or gums. This can eventually result in an abscess.

Dental abscesses are associated with severe pain, a bad taste in the mouth, and fever. The pain may be characterized as throbbing and often intense. The pain usually starts suddenly and becomes more intense over the following hours or days. In some cases, the pain may radiate to the ear, jawbone, and neck. To minimize pain, it is best to avoid cold drinks and food and use a softer toothbrush. Signs and symptoms of a dental abscess include:

- pain in the affected area when biting or when touching the affected area;
- sensitivity to cold or hot food and liquids;
- a foul taste in the mouth;
- fever, malaise;
- difficulties in opening the mouth and swallowing;
- insomnia.

Any person with the symptoms mentioned above should see a dentist immediately. Dental abscesses are easily diagnosed by a qualified dentist.

People who have swallowing and breathing problems should go straight to the emergency department of their local hospital. If you cannot get to a dentist immediately, visit a family doctor. Your doctor cannot treat an abscess, but the specialist may prescribe medication and advise on self-care and pain management, and is likely to know the fastest way of getting emergency treatment if required.

Over-the-counter (OTC) painkillers may help reduce the pain while an individual is waiting for treatment. It is important to follow the information on the packet carefully. Home remedies and actions you can take at home to relieve the pain include: avoiding food and drink that is either too hot or too cold, chewing on the side of your mouth without an abscess, not flossing around the affected area, and using a very soft toothbrush. Painkillers and home remedies are only meant for pain reduction and cannot replace a visit to a dentist.

Treatment for an abscess may involve root canal surgery. In case of incision, the abscess needs to be cut out, and the pus, which contains bacteria, drained away. The doctor will administer a local anesthetic.

In the vast majority of cases, complications only occur if the abscess is left untreated. However, complications can occur, even after seemingly effective treatment, but this is very rare. Possible complications include: dental cysts, osteomyelitis, cavernous sinus thrombosis, and maxillary sinusitis.

1. Arrange the following subtitles in the way the information is given in the text:*

Symptoms and signs
Treatment
Etiology
Home remedies
Complications
Definition

2. Answer the following questions:*

1. What is a dental abscess?
2. What causes a dental abscess?
3. What are the symptoms of a dental abscess?
4. What can a family doctor advise to relieve the pain?
5. How do dentists treat a dental abscess?

3. Find the words in the text that describe the character of pain with a dental abscess.*

4. Find the words from the text that match the following definitions:

- a) a swollen area within body tissue, containing an accumulation of pus
- b) a gradual accumulation or increase, typically of something negative, that leads to a problem
- c) an incidental or secondary product made in the manufacture or synthesis of something else
- d) influenced or touched by an external factor
- e) a surgical cut made in skin or flesh
- f) a medicine or treatment for a disease or injury

Unit 9

Read the text.

PRIMARY HERPETIC GINGIVOSTOMATITIS

While the name herpetic gingivostomatitis may sound severe, this condition is quite common and very treatable.

Gingivostomatitis, also known as primary herpetic gingivostomatitis (PHG), is a highly contagious infection of the mouth and related tissues. According to the National Library of Medicine, this infection primarily affects children under age six. In most cases, it's caused by the herpes simplex virus type 1 (HSV-1).

Cases of PHG involve oral lesions that may initially appear similar to a recurrent herpes simplex infection, a canker sore, or a skin infection known as erythema multiforme. Most cases will be asymptomatic, meaning PHG may go undetected, although more severe cases can cause significant symptoms.

Those more significant symptoms include inflammation of the gums, producing a red and swollen appearance; widespread ulcers on the lips, tongue, and other soft tissues in the mouth; swollen or tender submandibular lymph nodes, which are located on either side of the neck under the lower jawbone; fever or chills; malaise and irritability; headache. Additionally, patients can have difficulty eating and swallowing due to mouth pain, which can lead to dehydration.

Patients suffering from acute PHG with symptoms should be advised to rest, drink plenty of fluids, and eat a soft diet supplemented with vitamins D, C, and elderberry. Adult patients should be cautioned to avoid alcohol and tobacco products.

Since gingivostomatitis is caused by a virus and not bacteria, antibiotics typically will not help patients deal with this infection. The acute phase of PHG can be treated with hydration, mild analgesics to help manage pain, such as acetaminophen, and antiviral drugs like acyclovir or foscarnet. After taking antiviral medications, pediatric patients may experience a reduction in fever within about three days and a significant improvement in oral symptoms within about six days.

This condition is highly contagious, so effective measures must be taken to prevent transmission to others through direct contact.

While an acute outbreak of PHG can be quite unnerving, especially for a child, keep in mind that these viral infections can be handled with the help of a healthcare professional.

After a patient's initial bout with PHG, the virus will continue to lie dormant in the body, even if the patient takes antiviral drugs. Although there are currently no vaccines to prevent PHG caused by HSV-1, there are ways to manage the virus outbreaks and prevent the spread of the contagious condition.

1.* Which of the following was *NOT* mentioned in the text?

Etiology

Treatment

Epidemiology

Symptoms and signs

Prevention

Predisposing factors

Diagnosis

Pathophysiology

Complications

Course

2.* Answer the questions:

1. What is PHG?

2. Why may PHG go undetected?

3. What diet should patients with PHG keep to?

4. What are the consistent signs of PHG?

5. Is PHG treatable?

6. Is there any way to prevent PHG?

3. Find the words in the text that match the following definitions:

- a) small, shallow lesions that develop on the soft tissues in your mouth are inactive, as if asleep
- b) a sudden occurrence of something unwelcome, such as a disease
- c) an immune-mediated, typically self-limiting, mucocutaneous condition characterized by 'target' lesions
- d) short period of intense activity of a specified kind
- e) the action or fact of making something smaller or less in amount, degree, or size
- f) the edible black or red fruit of any of a genus of shrubs or trees of the same family as the honeysuckles that produce flat clusters of small white or pink flowers (elderberry)

Unit 10

Read the text

Dental health

People don't think much about their teeth and gums until a problem occurs, like a toothache or bleeding gums. Proper dental care and oral hygiene are crucial for both dental health and overall health and well-being.

Medical research in dentistry has proven that 99% of problems with teeth and gums arise due to poor oral hygiene. For example, in Switzerland, caries is a rarity among patients of dental clinics. And this is not due to ecology, nutrition, or unique heredity. It's just that the Swiss undergo

professional oral hygiene at least 3 times a year and begin dental care with the appearance of the first tooth.

A healthy oral cavity has the following main characteristics:

- teeth are thoroughly cleaned, free of pigment, soft and hard dental deposits;
- gums are pale pink, do not bleed when brushing, flossing, or interdental brushing;
- breath should be fresh and pleasant.

If you have any questions or doubts regarding the above-mentioned indicators, you should urgently contact a dentist for consultation, and if necessary, for qualified help. It is the doctor who will help you choose the right care products, namely: a brush, toothpaste, etc., and most importantly, will teach you how to use them correctly, which is no less important.

Proper care to keep the oral cavity healthy includes brushing and flossing teeth and gums at least twice daily to protect against tooth decay, and dental check-ups at least twice a year. The check-up will include a cleaning, x-rays, and an exam to check for cavities, tooth and gum problems, and signs of oral cancer.

Following a healthy lifestyle is also essential for optimal dental health. This means eating a plant-based diet, avoiding sugar-sweetened foods and drinks, cutting back on alcohol, and not smoking. Snacking smart also presupposes limiting sugary snacks.

Good dental health can protect against periodontal disease. Gum disease is a bacterial infection that begins with gingivitis and can advance to periodontitis, i.e., bone damage and tooth loss.

Left unchecked, gum disease can increase your risk for type 2 diabetes, cardiovascular disease, stroke, and complications during pregnancy. Multiple studies also suggest possible links to other conditions, including kidney disease, rheumatoid arthritis, Parkinson's disease, and cancer.

Common dental disorders include: cracked, chipped, or broken teeth, toothache, tooth decay, gingivitis, and periodontitis.

Oral hygiene requires daily prevention, which allows us to prevent the development of oral diseases promptly. It is completely painless and much more effective in financial terms than treating the consequences that have already occurred.

1. Answer the questions:*

1. What are the signs of oral health?
2. What does oral care presuppose?
3. Why should people consult their dentists regularly?
4. Why do people in Switzerland have so few problems with caries?
5. What are the tips for a healthy lifestyle?
6. What extra problems may gingivitis cause?

2. Analyze the following medical terms:

Term	Meaning
gingivitis	
periodontitis	
stomatitis	
periodontal	
oral	

3.* Continue the sentences with information from the text:

1. Gum disease is ...
2. Oral hygiene requires ...
3. If you have any questions or problems regarding your oral health, you should ...
4. Gum disease can increase your risk for ...
5. The dental check-up will include ...
6. Your gums are healthy if they are ...

4. Agree or disagree according to the information in the text:

1. In Switzerland, caries occurs very seldom among patients of dental clinics.
2. Oral hygiene may produce pain.
3. It is not essential what dental care products you choose.
4. Smart snacking means eating no sweets.
5. Proper dental care and oral hygiene are very important not only for dental health but for overall health and well-being.

Keys

Unit 1

1.

- a) tooth
- b) saliva
- c) tongue
- d) jaws
- e) gums
- f) dentin
- g) enamel
- h) root

3.

- a) mouth
- b) buccal cavity
- c) first portion of the digestive system
- d) perform several functions

- e) diverse role in human life.
- f) between the cheeks, teeth, and lips
- g) the oral cavity proper.
- h) oral cavity proper
- i) the roof
- j) submandibular and sublingual salivary glands
- k) oral cavity, teeth,
- l) the digestion of food through compressing and pressing food against the palate
- m) the perception of taste to humans
- n) the articulation of speech.

Unit 2

2.

- a. emergency
- b. swab
- c. jaw malformations
- d. decay
- e. costly
- f. rapport
- g. bite imprints
- h. gums
- i. biopsy
- j. sore

3.

dental anxiety
 appointments
 dental cleanings
 diagnostic checkups
 spot
 emergencies

Unit 3

5.

- 1. oral cavity
- 2. restored
- 3. damaged
- 4. occurs
- 5. irritate

Unit 4

2.

F

T

T

F

F

T

3.

- a. plaque
- b. dental pick
- c. to scrub
- d. snap
- e. residue
- f. to stain
- g. swab
- h. rinse
- i. to smear
- j. germ
- k. puffy
- l. gently

4.

Purchase picks

Stain plaque

Prevent decay

Consult hygienist

Harm gums

Brush teeth

Follow rules

Smear coloring

Unit 5

3.

1b

2d

3a

4e

5c

6g

7f

Unit 6

- 3.
- T
- F
- F
- F
- T
- T
- F

Unit 7

- 2.
- a. Fluoride
- b. Chew
- c. Affect
- d. Appointment
- e. Tooth
- f. Gums
- g. Bleeding
- h. Frequent

Unit 8

- 4.
- a. abscess
- b. build-up
- c. by-product
- d. affected
- e. incision
- f. remedy

Unit 9

- 3.
- a. canker sore
- b. to lie dormant
- c. outbreak
- d. erythema multiforme
- e. bout
- f. reduction

Unit 10

2

Inflammation of the gums

Inflammation of the periodontal membrane

Inflammation of the oral cavity

Pertaining to the periodontal membrane

Pertaining to the oral cavity

4.

T

F

F

F

T

Sources of the text material

1. Medical Dictionary Mosby's Medical Dictionary. Elsevier, Mosby/Saunders.
2. Encyclopedia Britannica
<https://www.britannica.com/>
3. Cambridge dictionary
<https://dictionary.cambridge.org/>
4. Anatomy, Head and Neck, Oral Cavity (Mouth)
<https://www.ncbi.nlm.nih.gov/books/NBK545271/> / Philadelphia College; Last Update: August 14, 2023.
5. What is diagnostic dentistry?
<https://www.columbia-smiles.com/dental-blog/what-is-diagnostic-dentistry/>
6. NIH: National Institute of Dental and Craniofacial Research (MedlinePlus. Tooth Decay <https://medlineplus.gov/toothdecay.html>)
7. Plaque - what is it?
https://www.nidcr.nih.gov/sites/default/files/2017-09/plaque-what-is-it.pdf?_ga=2.197138854.881068182.1529323114-64545599.1524075144
8. Plaque and Gingivitis
<https://www.colgateprofessional.ca/en-ca/education/patient-education/topics/plaque-and-gingivitis>
9. What is a filling?
<https://www.colgate.com/en-gb/oral-health/fillings/what-is-a-filling>
10. Pulpitis
<https://www.sciencedirect.com/topics/medicine-and-dentistry/pulpitis>
11. Dental exam
<https://medlineplus.gov/lab-tests/dental-exam/>
12. What's to know about dental abscesses? // Medical News Today/
<https://www.medicalnewstoday.com/articles/170136>
13. What Is Herpetic Gingivostomatitis?
<https://www.colgate.com/en-us/oral-health/mouth-sores-and-infections/what-is-herpetic-gingivostomatitis>
14. Dental health
<https://www.health.harvard.edu/topics/dental-health>
15. Chabner, Davi-Ellen. Language of Medicine. Elsevier, Mosby/Saunders.
16. Merriam-Webster Dictionary
<https://www.merriam-webster.com/dictionary/https://www.merriam-webster.com/thesaurus>

Навчальне видання

ЗАВДАННЯ ДЛЯ ДОМАШНЬОГО ЧИТАННЯ АНГЛІЙСЬКОЮ МОВОЮ

*Для здобувачів освіти першого курсу спеціальності
"Стоматологія"*

Упорядники Корнейко Ірина Василівна
 Крайненко Олена Володимирівна
 Петрова Ольга Борисівна
 Овсяннікова Ганна Валеріївна

Відповідальний за випуск Г. В. Овсяннікова



Комп'ютерна верстка О. Ю. Лавриненко

Формат А5. Ум. друк. арк. 1,8. Зам. № 25-76.

Редакційно-видавничий відділ
ХНМУ, пр. Науки, 4, м. Харків, 61022
izdatknmurio@gmail.com, vid.redact@knmu.edu.ua

Свідоцтво про внесення суб'єкта видавничої справи до Державного реєстру видавництв, виготівників і розповсюджувачів видавничої продукції серії ДК № 3242 від 18.07.2008 р.