Karaganda state medical university

Atherosclerosis Direct and indirect speech

Made by Mendekinova Karina 2-065 GM Checked by Dashkina T.G Atherosclerosis (also known as arteriosclerotic vascular disease or ASVD) is a specific form of arteriosclerosis in which an artery-wall thickens as a result of invasion and accumulation of white blood cell (WBCs) (foam cell) and proliferation of intimal-smooth-muscle cell creating a fibrofatty plaque

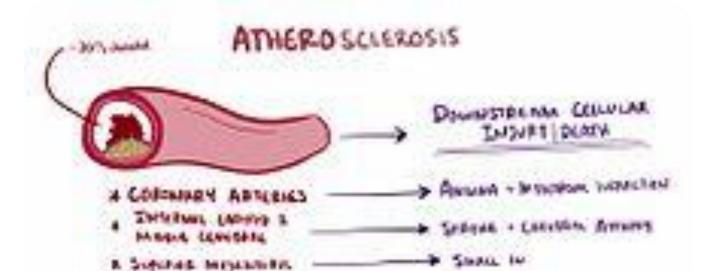


Definitions

The following terms are similar, yet distinct, in both spelling and meaning, and can be easily confused: arteriosclerosis, arteriolosclerosis, and atherosclerosis. Arteriosclerosis is a general term describing any hardening (and loss of elasticity) of medium or large arteries (from Greek ἀρτηρία (artēria), meaning "artery", and σκλήρωσις (sklerosis), meaning "hardening"); arteriolosclerosis is any hardening (and loss of elasticity) of arterioles (small arteries); atherosclerosis is a hardening of an artery specifically due to an atheromatous plaque. The term atherogenic is used for substances or processes that cause atherosclerosis

Signs and symptoms

- Atherosclerosis is asymptomatic for decades because the arteries enlarge at all plaque locations, thus there is no effect on blood flow. Even most plaque ruptures do not produce symptoms until enough narrowing or closure of an artery, due to clots, occurs. Signs and symptoms only occur after severe narrowing or closure impedes blood flow to different organs enough to induce symptoms. Most of the time, patients realize that they have the disease only when they experience other cardiovascular disorders such as stroke or heart attack. These symptoms, however, still vary depending on which artery or organ is affected.
- Typically, atherosclerosis begins in childhood, as a thin layer of white-yellowish streaks with the inner layers of the artery walls (an accumulation of white blood cells, mostly monocytes/macrophages) and progresses from there.
- Clinically, given enlargement of the arteries for decades, symptomatic atherosclerosis is typically associated with men in their 40s and women in their 50s to 60s. Sub-clinically, the disease begins to appear in childhood, and rarely is already present at birth. Noticeable signs can begin developing at puberty. Though symptoms are rarely exhibited in children, early screening of children for cardiovascular diseases could be beneficial to both the child and his/her relatives. While coronary artery disease is more prevalent in men than women, atherosclerosis of the cerebral arteries and strokes equally affect both sexes



Treatment

- Medical treatments often focus on alleviating symptoms. However measures which focus on decreasing underlying atherosclerosis—as opposed to simply treating symptoms—are more effective. Non-pharmaceutical means are usually the first method of treatment, such as stopping smoking and practicing regular exercise. If these methods do not work, medicines are usually the next step in treating cardiovascular diseases, and, with improvements, have increasingly become the most effective method over the long term.
- The key to the more effective approaches has been better understanding of the widespread and insidious nature of the disease and to combine multiple different treatment strategies, not rely on just one or a few approaches. In addition, for those approaches, such as lipoprotein transport behaviors, which have been shown to produce the most success, adopting more aggressive combination treatment strategies taken on a daily basis and indefinitely has generally produced better results, both before and especially after people are symptomatic.

Statins

- The group of medications referred to as statins are widely prescribed for treating atherosclerosis. They have shown benefit in reducing cardiovascular disease and mortality in those with high cholesterol with few side effects.
- These data are primarily in middle-age men and the conclusions are less clear for women and people over the age of 70.
- Monocyte counts, as well as cholesterol markers such as LDL:HDL ratio and apolipiprotein B: apolipoprotein A-1 ratio can be used as markers to monitor the extent of atherosclerotic regression which proves useful in guiding patient treatments

Diet

- Changes in diet may help prevent the development of atherosclerosis. There is tentative evidence that a diet that contains dairy products usually occurs with a better diet overall and either has no effect on or decreases the risk of cardiovascular disease
- A diet high in fruits and vegetables decreases the risk of cardiovascular disease and death. Evidence suggests that the Mediterranean diet may improve cardiovascular outcomes. There is also evidence that a Mediterranean diet may be better than a low-fat diet in bringing about long-term changes to cardiovascular risk factors (e.g., lower cholesterol level and blood pressure

Surgery

• Other physical treatments include angioplasty procedures that may include stents and bypass surgery

Other

• There is evidence that some anticoagulants, particularly warfarin, which inhibit clot formation by interfering with Vitamin K metabolism, may actually promote arterial calcification in the long term despite reducing clot formation in the short term.

Direct Speech

Saying exactly what someone has said is called direct speech (sometimes called quoted speech)

Here what a person says appears within quotation marks ("...") and should be word for word.

For example:

- She said, "Today's lesson is on presentations."
- Some people introduce a direct quote with a colon, and not a comma.

For example:

- She said: "Today's lesson is on presentations."
- When you lead with the quote, you use a comma.

For example:

- "Today's lesson is on presentations," she said.
- We use the same rules to report what people have written or thought. (Some people use italics.)

For example:

- "I can do this," he thought. / I can do this, he thought.
- or
- "I can do this," he wrote.

Indirect Speech

- Indirect speech (sometimes called reported speech), doesn't use quotation marks to enclose what the person said and it doesn't have to be word for word.
- When reporting speech the tense usually changes.
 This is because when we use reported speech, we
 are usually talking about a time in the past
 (because obviously the person who spoke
 originally spoke in the past). The verbs therefore
 usually have to be in the past too.

Указательные местоимения и наречия времени и места в прямой речи заменяются в косвенной речи по смыслу другими словами:

```
this (этот) заменяется that (тот, этот)
these (эти) ->>- those (те, эти)
now (теперь) -»- then (тогда)
to-morrow (завтра) -»- the next day (на
следующий день)
to-day (сегодня) -»- that day (в тот день)
ago (тому назад) -»- before (раньше)
here (здесь) -»- there (там)
yesterday (вчера) ->>- the day before (накануне)
```

Direct Speech	\Rightarrow	Indirect Speech pRobLeM_bOy
can He said, "I can go to school every day."	⇒	could He said (that) he could go to school every day.
may He said, "I may go to school every day."	⇒	might He said (that) he might go to school every day.
might He said, "I might go to school every day."		
must He said, "I must go to school every day."	⇒	had to He said (that) he had to go to school every day.
have to He said, "I have to go to school every day."		
should He said, "I should go to school every day."	⇒	should He said (that) he should go to school every day.
ought to He said, "I ought to go to school every day."	⇒	ought to He said (that) he ought to go to school every day

