

Name: _____

Date: _____

Diseases

F T P P M X A R H T N A C Y Y P G
N U U S E T E B A I D Q N S H N G
U B F M U L L W X J O G I C E T H
E E R N O M E A S L E S R O P M G
R R E P N B C C R S J G I L A I U
M C C S T E T A N U S R N D T N O
A U N Z P R C X O P N E K C I H C
L L A R T H R I T I S L B V T M G
A O C L E P R O S Y W W O N I O N
R S Q Q S D A G J H B P T B S X I
I I X R E J K S D I G R U N Q P P
A S A N V R F P T N B K L A C W O
J S G D A R D Z X H B Z I W F I O
R U Z B E M S D I A M T S P B P H
E A I V A R E L O H C A M A N L W
V E E Q W U L F Y Q G O E U K L T
S F J P E Z L A I R E H T H P I D

Whooping cough
Arthritis
Anthrax
Measles
dengue
Cold

Tuberculosis
Botulisme
Cholera
Tetanus
Rabies
SARS

Chickenpox
Hepatitis
Leprosy
Asthma
Fever
Flu

Diphtheria
Diabetes
Malaria
Cancer
Aids