

Name: _____

Date: _____

Period: _____

non communicable diseases

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

noncommunicable

heart attack

degenerative

allergen

insulin

allergy

chronic

disease

stroke

cancer

tumor

hives