Reading: Skimming and Scanning

Skimming involves quickly glancing through a text to get a general sense of what it is about. You do not actually read the whole piece; you simply look through it, perhaps reading such things as headings, bolded words, topic sentences, etc. This technique helps you get a feel for a text before you actually read it, and you will know what to expect as you do a more detailed reading.

When you must read quickly to locate specific information – such as reading to answer certain types of test questions or chapter review questions – the technique is called ***scanning***. Ann Marris, in *Essay Writing for Students in the Health Sciences*, suggests the following steps in order to scan.

1. Read the questions to determine the exact information you are looking for. Then, decide what form that information might take. For example, to look for when a certain discovery was made, you would search for a date.

2. Decide where the information might be located. For example, if you want to know how a disease may be treated, you look in the treatment paragraph.

3. Scan the text by moving your eyes as quickly as possible down the pages.

4. Once you have found the information, read it carefully. Do not read further.

Exercise

Scan the following essay, written by Sulaiman Al-Mazeedi, a student of the Health Sciences Centre at Kuwait University, dealing with a neurological sleep disorder. As you scan, find the following information:

1. What is hypocretin? _____

2. What is hypersomnia?_____

3. What is another name for hypnagogic hallucinations?
   _____

4. What is the full name for an ECG?
   _____

5. What is the full name for an EEG?
   _____

6. What is an MSLT?
   _____

7. What type of drug is Ritalin?_____

8. What type of drug is Prozac?_____

Uncontrollable Sleep

"The next thing I knew, my legs started giving out. I leaned onto the counter, my body out of control, moving up and down like a sprung spring, and slowly slipped towards the floor. I couldn't talk. It took a few seconds for my sister to realize I wasn't up to my usual antics. She called for our husbands to bring a chair, and they maneuvered me into it. I recovered shortly, only to realize that something serious must be wrong with me." These words, giving a real-life example of a narcoleptic impulse, display the horrific image of what people with narcolepsy might experience at any point in their lives. Narcolepsy is a neurological disorder associated with uncontrollable sleep. Although the exact cause of this genetic disorder is not yet known, many studies have shown its relationship with the absence of hypocretin, a chemical in the brain that aids in normalizing sleep. This disorder attacks men and women equally, affecting one in every two thousand people globally. Narcolepsy, also known as daytime sleep disorder, can be defined in terms of its symptoms, diagnosis, and treatment.

The symptoms of narcolepsy can be divided into those that affect sleeping patterns and those that affect the muscles. Falling under those that affect sleep, the most **prominent** and widely experienced symptom is constant **drowsiness**. This feeling, also called hypersomnia, may occur at any time during the day, but most commonly arises after eating large meals. Other sleep-affecting symptoms include those that take place during actual sleep, such as vivid nightmares known as hypnagogic hallucinations. As for the symptoms affecting the muscles, people with narcolepsy may experience what is called sleep paralysis, or being unable to use one's muscles when going to sleep or when waking up. Moreover, seizure-like tremors caused by an abrupt loss of muscle control, also known as cataplexy, commonly **accompany** narcolepsy. In the presence of such symptoms, certain tests need to be performed to precisely diagnose the patient.

The diagnosis of this disorder involves a series of physical and sleep-related examinations. An electrocardiogram (ECG) is performed to check the status of the patient's heart, while an electroencephalogram (EEG) examines the condition of the brain. A few tests involving breathing patterns are also carried out. Polysomnograms such as Multiple Sleep Latency Tests (MSLT) and other sleep lab studies may also need to be used. If a person who has undergone such tests is diagnosed as being narcoleptic, s/he has several treatment options.

Treatment methods provided for narcoleptic patients involve drugs and lifestyle changes. When drugs are selected as a method of treatment, one of two possible types is prescribed. In certain cases, stimulants such as Dexedrine or Ritalin are given to enhance the brain's activity and, in turn, reduce the sleep-affecting symptoms. On the other hand, antidepressants from both the multicyclic and selective serotonin re-uptake inhibitor classes are administered to reduce the muscle-affecting symptoms of narcolepsy; examples of these types of drugs include Nopramin and Prozac. Drugs, though, are only one aspect of narcolepsy treatment. Lifestyle changes are also often necessary. Scheduling daily naps, for instance, along with getting eight hours of nighttime sleep can aid in controlling the seemingly

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perpetual feeling of drowsiness. In addition, dietary improvements, such as avoiding heavy meals, alcohol, nicotine, and caffeine can help reduce the **urge** to sleep during the day. Even though doctors cannot guarantee full recovery through the use of these treatment methods, a reduction in many of the symptoms of narcolepsy is noticeable when such techniques are followed.

In conclusion, understanding the symptoms, methods of diagnosis, and forms of treatment helps to fully understand this daytime sleep disorder known as narcolepsy. The many symptoms of this disorder involve an alteration in either the patterns of sleep or the productivity of muscles. When such symptoms are apparent, various diagnostic tests are performed to find out whether the person does indeed suffer from narcolepsy. Once this is confirmed, medical treatment methods and lifestyle changes are used to reduce the effects of the condition.

Comprehension Questions:

1) How does this essay begin?
   a) with a detail
   b) with an anecdote
   c) with a statistic
   d) with a definition

2) Narcolepsy is a disorder of the
   a) nerves
   b) blood
   c) brain
   d) legs

3) Narcolepsy is hereditary.
   a) true
   b) false

4) Hypocretin is a likely cause of narcolepsy.
   a) true
   b) false

5) Hypersomnia affects the muscles.
   a) true
   b) false

6) Which of the following symptoms do not affect the muscles?
   a) sleep paralysis
   b) cataplexy
   c) hypnagogic hallucinations
   d) seizure-like tremors

7) Which of the following is not mentioned as a means of diagnosing narcolepsy?
   a) an ECG
   b) an EEG
   c) sleep studies
   d) a sleep journal

8) Drugs like Ritalin reduce brain activity, thus reducing sleep-affecting symptoms.
   a) true
   b) false

9) Which is not a lifestyle change that could help manage narcolepsy?
   a) taking up smoking
   b) taking naps
   c) getting eight hours of sleep a night
   d) eating lighter meals

10) Narcolepsy is curable in most cases.
   a) true
   b) false

11) What does “prominent” in line 17 mean?
   a) distinguished
   b) hidden
   c) long
   d) prolonged

12) What does “drowsiness” in line 17 mean?
   a) awake
   b) dreaming
   c) wakefulness
   d) sleepiness

13) What does “accompany” in line 25 mean?
   a) relate to
   b) occur with
   c) treat
   d) make worse

14) What does “perpetual” in line 44 mean?
   a) endless
   b) short
   c) awful
   d) confusing

15) What does “urge” in line 45 mean?
   a) want
   b) need
   c) strong desire
   d) tends