Intestinal malapsortion in children
Simple choice

1. Cystic fibrosis is:
   a) Generalized exocrinopathy
   b) Bone disease
   c) Endocrine pancreas tumor
   d) Connective system pathology
   e) Cystic lesions of the gastrointestinal tract

R: a.

2. Which of the statements characteristic of celiac disease in children:
   a) It is an infectious disease
   b) It can be cured with fat-soluble vitamins
   c) It requires exclusion of food products containing gluten
   d) It requires systemic antibacterial therapy
   e) It has poor prognosis for life

R: c.

3. Secondary lactase deficiency is characterized by:
   a) The onset is in the early neonatal age
   b) It is common in breastfed babies
   c) It depends on maternal diet
   d) It commonly occurs after acute gastrointestinal tract infections
   e) It has a negative effect on child's neurological development

R: d.

4. Allergy to cow milk protein is characterized by:
   a) Gluten intolerance
   b) Malabsorption syndrome
   c) Allergy to all milk products
   d) Impaired ability to digest lactose
   e) Impaired activity of lactase enzyme

R: b.

5. Cow's milk allergy in infants is:
   a) Functional constipation
   b) Complication of the cardiovascular system diseases
   c) Swallowing problems
   d) The first allergic disease in the "atopic march"
   e) Is common in neuromuscular pathology

R: d.

6. Choose the typical manifestation of cow's milk allergy in infants:
   a) Vomiting
   b) Constipation
   c) Joint pain
   d) Muscle pain
   e) Drowsiness

R: a.

7. Choose risk factors for cows' milk protein allergy in children:
   a) acute bronchitis
   b) bacterial enteropathy
   c) allergic enteropathy
   d) dysuria

e) biliary disorders.
R: c.

8. What causes cystic fibrosis?
   a) Congenital maformatons
   b) Monogenic disorder
   c) Acquired disease
   d) Chromosomal aberration
   e) Polygenic disorder
   R: b.

9. Which group of cells is affected in cystic fibrosis:
   a) Endocrine glands
   b) Langerhans cells
   c) Parietal gastric glands
   d) Exocrine glands
   e) Enterocytes
   R: d.

10. The neonatal onset of cystic fibrosis is:
   a) Biliary atresia
   b) Lobar pneumonia
   c) Meconium ileus
   d) Kernicterus (nuclear jaundice)
   e) Bronchial dysplasia
   R: c.

11. Specify the pathophysiology of digestive affection in cystic fibrosis:
   a) Cystic mucosal damage
   b) Maldigestion
   c) Primary intestinal lymphangiectasia
   d) Disturbance of mesenteric venous blood flow
   e) Intestinal villous atrophy
   R: b.

12. The method of choice for the diagnosis of cystic fibrosis is:
   a) Intestinal biopsy
   b) Rectoscopy
   c) Microscopic examination of feces
   d) Biochemistry of blood
   e) Sweat test
   R: e.

13. Specific feature of diarrhea in cystic fibrosis is:
   a) Watery, foamy acidic stools
   b) Bulky, fetid, steatorrhoeic stools
   c) Bloody stools
   d) Semiliquid stools with mucus
   e) Pasty stools with sour milk smell
R: b.

14. High levels of chloride in sweat is typical for:
   a) Chronic pancreatitis
   b) Celiac disease
   c) Exudative enteropathy

d) Hepatic cirrhosis
e) Cystic fibrosis

R: e.

15. Celiac disease is intolerance to one of the following substances:
a) Fructose
b) Gluten
c) Lipids
d) Cow milk protein
e) Carbohydrate

R: b.

16. The method of choice for the diagnosis of celiac disease is:
a) Intestinal biopsy
b) Sweat test
c) Urine culture
d) Abdominal ultrasound
e) Colonoscopy

R: a.

17. The age of onset of classic celiac disease in children is:
a) Neonatal period
b) Up to 6 months
c) 6-10 months
d) After 12 months
e) Puberty

R: c.

18. Antibodies that are <u>not</u> useful for the diagnosis of celiac disease are:
a) Anti-deamidated gliadin peptide
b) Anti-endomysium
c) Antinuclear
d) Antireticulin
e) Anti-tissue transglutaminase

R: c.

19. Which of the listed products, is a factor in the development of celiac disease:
a) Fruit puree
b) Mashed vegetables
c) Meat
d) Pasta products
e) Cheese

R: d.

20. Which cereal porridge is contraindicated in celiac disease:
a) Semolina
b) Buckwheat
c) Rice
d) Corn
e) Soya

R: a.

Multiple choice

1. What mechanisms are disturbed in intestinal malabsorption:
   a) Digestion of nutrients
   b) Absorption of micronutrients
   c) Nutrient transport
   d) Intracellular synthesis of nutrients
   e) Storing nutrients

R: a; b; c.

2. The types of intestinal malabsorption are:
   a) Carbohydrate malabsorption
   b) Malabsorption of lipids
   c) Protein malabsorption
   d) Malabsorption of drugs
   e) Malabsorption of liquids

R: a,b,c.

3. Choose the diseases that manifest with malabsorption syndrome:
   a) Kartagener syndrome
   b) Peptic ulcer
   c) Celiac disease
   d) Cystic fibrosis
   e) Primary intestinal lymphangiectasia

R: c; d; e.

4. Which of the following includes disaccharide malabsorption:
   a) Lactase deficiency
   b) Sucrose deficiency
   c) Isomaltase-sucrose deficiency
   d) Trypsinogen deficiency
   e) Lipase deficiency

R: a; b; c.

5. Choose the types of lactase deficiency in children:
   a) Congenital
   b) Primary
   c) Secondary
   d) Developmental
   e) Postinfectious

R: a; b; c; d.

6. Clinical manifestations of congenital lactase deficiency are:
   a) Recurrent vomiting from birth
   b) Acid smelling urine
   c) Diarrhea with fluid and electrolyte imbalance
   d) Increased appetite
   e) Good weight gain

R: a; b; c.

7. Clinical manifestations of primary lactase deficiency are:
   a) Dependence on the volume of ingested milk
   b) Watery diarrhea, bowel sounds
   c) Intermittent abdominal pain
   d) Fever
   e) Headache and vertigo

R: a; b; c.

8. The causes of secondary lactase deficiency in children are:
   a) Giardiasis
   b) Inflammatory bowel diseses
   c) Rotavirus diarrhea
   d) Kwashiorkor
   e) Prematurity

R: a; b; c; d.

9. Choose the investigations for the diagnosis of lactase deficiency in children:
   a) Stool exam
   b) Lactose tolerance tests
   c) Hydrogen breath test
   d) Histoenzymatic examination
   e) Liver biopsy

R: a; b; c; d.

10. Dietary methods of lactase deficiency treatment in children are:
   a) Reduction or exclusion in milk consumption
   b) Acidified infant formula
   c) Lactose-free infant formula and other lactose-free products
   d) Hypoallergenic infant formula
   e) Fruit and vegetables purees

R: a; c;e.

11. Clinical signs of disaccharide deficiency are:
   a) Increased weighting
   b) Watery diarrhea
   c) Melena
   d) Varying degrees of malnutrition
   e) Low muscle tone

R: b; d; e.

12. The causes of lipid malabsorption in children are:
   a) Sucrose deficiency
   b) Lipolytic pancreatic enzyme deficiency
   c) Impaired secretion of bile acids
   d) Intestinal motility disorder
   e) Disruption of gut microbiota

R: b; c.

13. The causes of lipolytic enzyme deficiency in children are:
   a) Congenital
   b) Associated with chronic pancreatic pathology
   c) Associated with acute renal disorders
   d) Acquired
   e) Post-viral infections

R: a; b; d.

14. The tests necessary to assess lipolytic enzyme deficiency in children are:
   a) Stool examination
   b) Complete blood count
   c) Intestinal mucosal biopsy
   d) Lipid profile

e) Fecal elastase-1

R: a; c; d; e.

15. Choose the methods of treatment of lipid malabsorption in children:

Pancreatic enzyme replacement therapy

Infant formula rich in medium chain triglycerides

Fat-soluble vitamin supplementation

Antibacterial drugs

Low-fat diet

R: a; b; c.

16. Protein malabsorption is characteristic of:

a) Cystic fibrosis
b) Congenital exocrine pancreatic insufficiency
c) Chronic pancreatitis
d) Celiac disease
e) Vitamin D deficiency

R: a; b; c; d.

17. Choose the correct statements about aminoacid malabsorption:

a) Hereditary diseases
b) Diseases with early onset
c) Debilitating childhood diseases
d) Multisystem involvement diseases
e) Diseases with good prognostic

R: a; b; c; d.

18. Methods of protein malabsorption treatment of children are:

a) Diet rich in proteins
b) Pancreatic enzyme replacement therapy
c) Vitamins and micronutrients suppliment
d) Low-fat diet
e) Ultraviolet phototherapy

R: a; b; c.