

Teste pentru studenți en. (revizuite ianuarie 2015)

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BIBLIOGRAFIE:

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2. Nelson, Essentials of Pediatrics, fifth edition, 2002

Hepatic cirrhosis. Liver failure.

SIMPLE COMPLEMENT

1. Which toxic substance is frequently involved in pathogenesis of hepatic encephalopathy?

- A. Gama-amino butiric acid
- B. Ammonia solution
- C. Mercaptanes
- D. Phenols
- E. Short chain of fatty acids

2 Which of the following drugs don't cause hepatic cirrhosis:

- A. Oral contraceptives
- B. Methylprednisolone
- C. Methotrexate
- D. Isoniazid
- E. Antibiotics

3. The benign prognosis in hepatic cirrhosis is possible in case of:

- A. Encephalopathy
- B. Ascites
- C. Persistent jaundice
- D. Age less than 5 year
- E. Azotemia

4. In treatment of hepatic encephalopathy is not used one of the following drugs:

- A. Neomycin
- B. Lactulose
- C. Metronidazole
- D. Fluconazole
- E. Probiotics

5. One of the following drugs don't worsen the portal encephalopathy:

- A. Diuretics
- B. Sedative drugs
- C. Corticosteroids
- D. Antianxiety drugs
- E. Narcotics

6. In patients with hepatic cirrhosis the restriction of NaCl intake is:

- A. 10 g/day
- B. 0,2 g/day
- C. 2 mg/day
- D. 20 g/ day
- E. 2 g/ day

7. The diagnosis of unknown cause of hepatic cirrhosis is suggested when the etiology is:

- A. Genetic-mediated
- B. Hepatic viruses
- C. Alcohol
- D. Biliary
- E. Unknown

8. In patients with cholestasis and hepatic cirrhosis, the specific test for differential diagnosis with extra hepatic biliary obstruction is:

- A. Liver biopsy
- B. Liver scintigraphy
- C. Ultrasound of liver and biliary tree
- D. Abdominal X-ray
- E. Cholangiography

9. In metabolic hepatic cirrhosis more common cause is considered:

- A. Chronic cholangitis
- B. Autoimmune hepatitis
- C. Glycogen storage diseases
- D. Biliary gallstones
- E. Chronic pancreatitis

10. One of the following clinical manifestations is not common in acute liver failure:

- A. Unconjugated hyperbilirubinemia
- B. Prolonged Quik time
- C. Hypoalbuminemia
- D. Leucocyturia
- E. Prothrombin index < 60%

MULTIPLE COMPLEMENT

1. What clinical signs of hepatic cirrhosis are the result of portal hypertension?

- A. Ascites
- B. Jaundice
- C. Spleen enlargement
- D. Collateral circulation
- E. Vascular stars

2. The action of Propranolol in patients with hepatic cirrhosis is:

- A. Decrease portal hypertension
- B. Vasodilation effect in arterial spleen area
- C. Vasoconstriction effect in portal vein system
- D. Decrease of cardiac stroke
- E. Does not reduce the blood flow in collateral circulation

3. Indications for treatment with nonselective beta-blockers in portal hypertension are:

- A. Treatment of acute bleeding from esophageal and gastric varices
- B. Reducing the risk of repeated superior digestive bleeding
- C. Primary prophylaxis of superior digestive bleeding in patients with enlarging varices
- D. Prophylaxis of repeated bleeding in patients with gastropathy and severe portal hypertension
- E. Treatment of hepatic encephalopathy

4. Treatment of pruritus in primary biliary cirrhosis consists of:

- A. Cholestyramine
- B. Opioid antagonists
- C. Vitamins A and K
- D. Plasmapheresis
- E. D-penicillamine

5. Laboratory tests suggesting primary biliary cirrhosis:

- A. Elevated level of alkaline phosphatase 2-5 time more than normal
- B. Decreased activity of serum 5-nucleotidase
- C. Elevated titer of antimicrobial antibody- antiAMA > 1:40 in 90% of patients
- D. Decreased hepatic copper content
- E. Important increase of serum non-esterified cholesterol

6. Pathogenesis of ascites in hepatic cirrhosis involves:

- A. Secondary hypoaldosteronism
- B. Hypoalbuminemia
- C. Systemic vasodilation
- D. Decrease of arterial volume efficiency
- E. Activation of renin-angiotensin-aldosterone system

7. In primary biliary cirrhosis are present the following morphologic changes:

- A. Inflammation and necrosis in portal areas
- B. Chronic inflammation and fibrosis surrounding biliary extra hepatic ducts
- C. Periductal granulomas
- D. Proliferation of small biliary ducts
- E. Periportal fibrosis

8. Clinical manifestations of primary biliary cirrhosis is characterized by:

- A. Jaundice
- B. Pruritus
- C. Xanthomas
- D. Melanism
- E. Steatorrhea

9. The following statements regarding hepatorenal syndrome in hepatic cirrhosis are false:

- A. Hepatorenal syndrome is a severe complication in patients with hepatic cirrhosis and ascites
- B. It is produced by alteration of renal hemodynamics.
- C. The diagnosis is confirmed in presence of urine level of Na < 5 mmol/l.
- D. Is associated with severe arterial hypertension .
- E. Kidney biopsy is characterized by glomerulosclerosis.

10. The following statements regarding portal hypertensive gastropathy are right:

- A. Endoscopy rule out congestion and friable mucosae.
- B. Is typical insidious bleeding of mucosae.
- C. May be identified in 50 % with barium X-ray study.
- D. Treatment with nonselective beta blockers (propranolol) may prevent repeated bleeding of mucosa.
- E. Treatment with H2 receptor inhibitors are useful and improve symptomatology.

Answer: Hepatic cirrhosis. Liver failure.

SIMPLE COMPLEMENT

- 1. B**
- 2. B**
- 3. D**
- 4. E**
- 5. C**
- 6. E**
- 7. E**
- 8. C**
- 9. C**
- 10. D**

MULTIPLE COMPLEMENT

- 1.ACD**
- 2.ABD**
- 3.BCD**
- 4. ABD**
- 5. ACE**
- 6.BCE**
- 7.ACDE**
- 8.ABCDE**
- 9.DE**
- 10.ABD**