

LIVER AND BILIARY TRACT (& GIT)

1. In viral hepatitis
 - a. The majority of cases of acute hepatitis B infection result in a carrier state, without clinical evidence of disease
 - b. Anti HBs appears in the first week of infection
 - c. Anti HCV IgG does not confer immunity to Hep C
 - d. The major cause of death from Hep B is hepatocellular carcinoma
 - e. Hep A has an outer surface envelope of protein, lipid and carbohydrate

2. Regarding peptic ulceration
 - a. It occurs most commonly in the antrum of the stomach
 - b. It has a strong genetic influence
 - c. There is H pylori infection of the mucosa in 50% people with duodenal ulceration
 - d. It is more frequent in patients with COPD
 - e. Gastric acid is the only prerequisite for formation of ulcers

3. acute appendicitis
 - a. in preschool children usually presents with so called 'classic symptoms and signs'
 - b. it is associated with appendiceal obstruction in 10% of cases
 - c. histologically, it shows neutrophilic infiltration of the muscularis layer
 - d. the clinical diagnosis is falsely positive in 50%
 - e. it cannot cause a liver abscess

4. A young baby presents with jaundice, dark urine and pale stools, most likely the problem is
 - a. Physiologic jaundice of the newborn
 - b. Breast milk jaundice
 - c. Gilbert's syndrome
 - d. Biliary atresia
 - e. None of the above

5. Splenic rupture
 - a. Can occasionally occur spontaneously in normal spleens
 - b. Often causes little blood loss
 - c. Is encountered most commonly in infectious mononucleosis
 - d. May result in splenic infarction
 - e. Must be considered in ITP

6. Regarding cirrhosis
 - a. Focal changes can constitute cirrhosis
 - b. Delicate tracts of type II collagen are deposited
 - c. Shunts occur in the rectum, oesophagus, retroperitoneum and falciform ligament
 - d. The dominant intrahepatic cause of portal hypertension is massive fatty change
 - e. Hypoalbuminaemia is initially due to decreased production

7. Regarding serum markers in hepatitis
 - a. IgM in HAV provides life long immunity
 - b. In HBV, HBeAg, HBV DNA and DNA polymerase appear before HBsAg
 - c. Carrier state in HBV is defined by the presence of HBsAg in serum for 6/12 or longer after initial detection
 - d. Anti HBe indicate active viral replication
 - e. In HEV, serum transaminase precede elevation of IgM anti HEV

8. Conjugated hyperbilirubinaemia
 - a. Occurs when greater than 80% of bilirubin is conjugated
 - b. Is a feature of Gilbert's
 - c. Is rarely associated with cholestasis
 - d. Is often seen in β thalassaemia
 - e. Is often associated with a clinical picture of jaundice, pruritis and xanthomata

9. oesophageal varices
 - a. occur in 1/3 of all cirrhotic patients
 - b. account for more than 50% of episodes of haematemesis
 - c. are most often associated with Hep C cirrhosis
 - d. have a 40% mortality during the first episode of rupture
 - e. lie primarily in the middle portion of the oesophagus

10. The following are true for cirrhosis except
 - a. It is among the top 10 leading causes of death in the western world
 - b. The central pathogenic process is progressive fibrosis
 - c. It may be clinically silent
 - d. Alcoholic liver disease is the aetiology in 30% cases
 - e. Collagen type I and III are deposited in all parts of the lobule

11. Ascites
 - a. is due to lymphatic obstruction
 - b. involves percolation of hepatic lymph into the peritoneal cavity
 - c. does not involve renal retention of sodium and water
 - d. involves increased vascular permeability
 - e. is not associated with hepatic sinusoidal hypertension

12. Hepatitis C virus
- Is a DNA virus
 - Has core antigens as serum markers
 - Is the 'kissing disease'
 - Persistent infection and chronic hepatitis are the hallmarks
 - Has a low rate of cirrhosis
13. Which of the following indicates immunity to Hepatitis B virus
- RNA polymerase
 - IgM anti-HBc
 - Anti-HBs
 - HBeAg
 - HBV-DNA
14. Unconjugated bilirubinaemia
- Is soluble in aqueous solution
 - Is not protein bound
 - When present in excess is readily excreted in urine
 - Can cause kernicterus if present in excess in neonates
 - Is the major form of bilirubin elevated in gallstone obstruction
15. Hepatitis B virus
- Is an unenveloped particle
 - Is an RNA virus
 - Is a member of the hepadnaviridae family
 - Results in chronic hepatitis in 30% acute infections
 - Has an incubation period of 2-6 weeks
16. regarding cirrhosis
- 30% caused by viral hepatitis
 - type I and III collagen are deposited in all portions of the lobule
 - the central pathogenesis is progressive nodule formation
 - Ito cells are considered as a minor source of collagen excess
 - Chronic inflammation has no role in its pathogenesis
17. Ascites
- is commonly associated with hyperproteinaemia
 - is a rare complication of cirrhotic liver disease
 - is diagnosed clinically by the presence of generalized oedema
 - is associated with hepatic sinusoidal hypertension
 - occurs as an early complication of congestive heart failure

18. In cirrhosis
- Fibrosis is confined to delicate bands around the central veins
 - Nodularity is uncommon
 - Vascular architecture is preserved
 - The Ito cell is a major source of excess collagen
 - The left lobe of the liver is the most affected
19. Hep C infection
- Is associated with sexual contact
 - Carries a 40% risk of cirrhosis
 - Is idiopathic in 10% cases
 - Carries a >50% risk of chronic progressive hepatitis
20. In hepatitis B
- Acute infection causes sub-clinical disease in 65% cases
 - The majority of cases of persistent infection result in cirrhosis
 - HBsAg appears soon after overt disease
 - Infection does not play a role in the development of HCC
 - Anti HBs appears soon after HBsAg
21. hepatitis C
- is acquired by faecal – oral transmission
 - has its highest seroprevalence in haemodialysis patients
 - transmission by sexual contact is at a high rate
 - causes chronic hepatitis at a higher rate than hepatitis B
 - exposure confers effective immunity to subsequent infection
22. conjugated hyperbilirubinaemia results from
- Gilbert's
 - Physiological jaundice
 - Excess production of bilirubin
 - Decreased hepatic uptake
 - Cholestasis
23. Regarding hepatic failure
- Occurs with the loss of functional liver capacity of approximately 60%
 - Encephalopathy is a result of increased ammonia formation
 - The liver is the predominant site of the synthesis of albumin
24. Regarding hepatitis C
- Has a high association with sexual transmission
 - Transmission is increased in pregnancy
 - Greater than 50% become chronic
25. With hepatitis B infection
- HBeAg is associated with viral replication

26. with hepatitis E infection
- a. it is transmitted primarily parenterally
 - b. it accounts for a > 20% mortality in pregnant mothers
27. With regard to jaundice
- a. Conjugated bilirubin causes kernicterus in adults
 - b. Unconjugated bilirubin does not colour the sclera
 - c. Unconjugated bilirubin is tightly bound to albumin
 - d. Unconjugated bilirubin produces bilirubin in urine
 - e. Conjugated bilirubin is tightly bound to albumin

ANSWERS

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|-------|-------|
| 1. C | 14. D |
| 2. D | 15. C |
| 3. C | 16. B |
| 4. D | 17. D |
| 5. C | 18. D |
| 6. C | 19. D |
| 7. C | 20. A |
| 8. E | 21. D |
| 9. D | 22. E |
| 10. D | 23. C |
| 11. B | 24. C |
| 12. D | 25. – |
| 13. C | 26. B |
| | 27. C |