

Questions :: Pathophysiology

2nd exam >

Infinity academy

<Q>Megaloplastic anemia can develop with

Iron deficiency

Vitamine B12 deficiency

Disease of bone marrow

Hemolysis

Kidny disease

<Q>Pancytopenia can be seen with

Aplastic anemia

Iron difficiency anemia

Megaloplastic anemia

Hemolytic anemia

Kidney disease

<Q>Bleeding disorder can develop with all the followings EXCEPT

Megaloplastic anemia

Renal failure

<C>Liver disease

<C>Decrease platelets number

<C+>Increase vitamin K

<Q>Abnormal hemoglobin can cause

<C+>Thalassemia

<C>Megaloplastic anemia

<C>Polycythemia

<C>Hemophilia

<C>Aplastic anemia

<Q>Hemolytic anemia can develop with all the followings EXCEPT

<C+>Aplasia of bone marrow

<C>Malaria

<C>Spherocytosis

<C>Sickle cell anemia

<C>G6PD deficiency

Which of the following conditions and laboratory tests are inappropriately matched?

A. diabetes insipidus–urine 17-ketosteroids

B. Cushing's syndrome–blood cortisol

C. Addison's disease, blood ACTH

D. myxedema, blood TSH

All of the following are associated with hypersecretion of a hormone except:

A. Graves' disease

B. Addison's disease

C. Conn's syndrome

D. Cushing's syndrome

All of the following are related to hypofunctional states except:

A. Waterhouse-Friedericksen syndrome

B. myxedema

C. insulin-dependent diabetes mellitus (type 1)

D. Conn's syndrome

E. Addison's disease

Pathologic fractures most typically occur with which of the following:

A. pituitary adenoma

B. adrenal adenoma

C. thyroid adenoma

D. parathyroid adenoma

E. pheochromocytoma

Paroxysmal hypertension is most typically associated with:

- A. pituitary adenoma
- B. adrenal adenoma
- C. thyroid adenoma
- D. parathyroid adenoma
- E. pheochromocytoma

Diabetes insipidus is associated with a lack of:

- A. glucocorticoids
- B. insulin
- C. thyroid hormone
- D. antidiuretic hormone**
- E. growth hormone

Acromegaly is characterized by an excess of:

- A. glucocorticoids
- B. mineralocorticoids
- C. thyroid hormone
- D. antidiuretic hormone
- E. growth hormone**

A destructive lesion in which of the following areas generally results in diabetes insipidus?

- A. mamillo-thalamic tract
- B. adenohipophysis
- C. subthalamic fasciculus
- D. supraoptic and paraventricular hypothalamic nuclei**

A 25-year-old, previously healthy man sustained multiple injuries and fractures in a motorcycle accident. After recovery from his injuries he developed increased output of light colored urine and progressively severe thirst. The most likely diagnosis is:

- A. diabetes mellitus secondary to trauma to the pancreas
- B. diabetes insipidus secondary to trauma to the posterior pituitary**
- C. diabetes mellitus secondary to trauma to the anterior pituitary
- D. inappropriate secretion of antidiuretic hormone

Which of the following is NOT a feature of acromegaly?

- A. generalized visceromegaly
- B. elevated serum calcium**
- C. progressive acral enlargement
- D. diabetes mellitus

The most common cause for acromegaly is:

- A. failure of the epiphyseal plates to close

- B. hyperplasia of the zona reticularis of the adrenal cortex
- C. eosinophilic granulomata in bones
- D. precocious puberty
- E. adenoma of the pituitary

Conn's syndrome is associated primarily with an excess of:

- A. glucocorticoids
- B. mineralocorticoids**
- C. thyroid hormone
- D. antidiuretic hormone
- E. growth hormone

Patients with Addison's disease (primary chronic adrenal cortical insufficiency)

exhibit all of the following except:

- A. melanin pigmentation of skin and mucous membranes
- B. hypotension with low serum sodium and plasma volume
- C. increased secretion of ACTH
- D. excessive urinary loss of potassium**

All of the following are causes of Addison's disease except:

- A. adrenal cortical carcinoma**
- B. autoimmune adrenalitis
- C. tuberculosis

- D. fungal infection
- E. amyloidosis

Of the following, the most common cause of Addison's syndrome is:

- A. adrenal metastases
- B. tuberculosis
- C. autoimmune adrenalitis**
- D. histoplasmosis

Cushing's syndrome is now most commonly due to:

- A. ACTH secreting carcinoma of the lung
- B. adrenal cortical carcinoma
- C. exogenous steroids**
- D. adenoma of pituitary

Cushing's syndrome may be associated with all of the following except:

- A. flat glucose tolerance test**
- B. obesity
- C. hypertension
- D. osteoporosis
- E. muscle weakness

Cushing's syndrome may be caused by all of the following except:

- A. adenoma of adrenal
- B. hyperplasia of adrenal
- C. carcinoma of adrenal cortex
- D. pituitary infarct cortex**

The syndrome of adrenal hyperfunction characterized by sodium retention, potassium loss and moderate hypertension is:

- A. Cushing's syndrome
- B. Conn's syndrome**
- C. Sheehan's syndrome
- D. Addison's disease

A patient with Addison's disease is likely to exhibit all of the following except:

- A. hyperpigmentation of skin
- B. hypotension
- C. tuberculosis of adrenal gland
- D. moon facies**

Physical signs of a patient with Addison's disease include all of the following except:

- A. hyperpigmentation of skin

- B. hypotension
- C. muscle weakness
- D. abdominal striae**

Addison's disease includes all of the following except:

- A. hypoglycemia
- B. hyperpigmentation
- C. hypotension
- D. hypernatremia**
- E. hypovolemia

Cushing's disease is distinguished from Cushing's syndrome by the presence of:

- A. adrenal cortical hyperplasia
- B. a "buffalo hump"
- C. a pituitary neoplasm**
- D. diabetic glucose tolerance curve
- E. hirsutism

Complications of long-term high-dose corticosteroid therapy include:

- A. fractures secondary to osteoporosis
- B. acne
- C. increased susceptibility to infections

- D. increased susceptibility to malignancy
- E. all of the above

Which is/are true of pheochromocytoma?

- A. may be inherited as a dominant trait
- B. hypertension is the most common initial manifestation
- C. may secrete norepinephrine
- D. may be seen in conjunction with medullary carcinoma of the thyroid
- E. all of the above

Truncal obesity, easy bruising and osteoporosis are associated with:

- A. craniopharyngioma
- B. adrenal adenoma**
- C. thyroid adenoma
- D. parathyroid adenoma
- E. pheochromocytoma

All of the following are recognized complications or are associated with hyperthyroidism except:

- A. exophthalmos
- B. congestive heart failure
- C. a bruit over the thyroid gland

D. increased incidence of hyperparathyroidism

High serum cholesterol is associated with:

A. hyperthyroidism

B. hypothyroidism

C. Cushing's syndrome

D. Addison's disease

Features of primary hyperthyroidism include:

A. exophthalmos

B. higher incidence in women

C. diffuse enlargement of the thyroid gland

D. autoimmune pathogenesis

E. all of the above

Patients with Hashimoto's thyroiditis usually have:

A. hyperthyroidism

B. abscesses in the thyroid tissue

C. normal response to TSH administration

D. circulating antithyroglobulin antibodies

All of the following are associated with Graves' disease except:

A. elevation of body temperature

B. increased heart rate

C. intolerance to heat

D. marked weight loss

E. atrophy of lymphoid tissue

Deficiency of thyroid hormone in the adult is associated with:

- A. cretinism
- B. acromegaly
- C. exophthalmos
- D. myxedema**
- E. osteitis fibrosis cystic

Complications of hyperthyroidism include all of the following except:

- A. bradycardia**
- B. hyperpyrexia
- C. hypertension
- D. dehydration
- E. cardiac arrhythmia

Thyroglobulin antibodies are most likely to be present in patients with:

- A. Graves' disease
- B. myxedema
- C. Hashimoto's disease**
- D. cretinism
- E. T3 thyrotoxicosis

Complications associated with Graves' disease include each of the following except:

- A. loss of vision
- B. cardiac arrhythmia
- C. hyperpyrexia
- D. severe tachycardia
- E. atrophy of lymphoid tissue**

Hyperthyroidism is characteristically associated with:

- A. Hashimoto's disease
- B. Graves' disease**
- C. Riedel's thyroiditis
- D. medullary carcinoma of the thyroid

Exophthalmos is characteristically associated with:

- A. Hashimoto's disease
- B. Graves' disease**
- C. Riedel's thyroiditis
- D. colloid goiter

The uncompensated action of calcitonin would result in:

- A. metastatic calcification
- B. hypocalcemia**
- C. exophthalmos
- D. dystrophic calcification
- E. pathologic fractures

The most common cause of primary hyperparathyroidism is:

- A. parathyroid hyperplasia
- B. multiple endocrine syndromes I and II
- C. parathyroid adenoma**
- D. parathyroid carcinoma
- E. thyroidectomy

Primary hyperparathyroidism is associated with all of the following except:

- A. decreased alkaline phosphatase activity in serum**
- B. pancreatitis
- C. nephrolithiasis
- D. "brown tumors" of bone

The chemical findings of primary uncomplicated hyperparathyroidism include elevation of all of the following except:

- A. calcium in serum
- B. calcium in urine
- C. phosphorous in urine
- D. phosphorous in serum**

The most common cause of hypoparathyroidism is:

- A. high phosphate diet in infancy
- B. aplasia of parathyroids
- C. accidental surgical removal of parathyroids at the time of thyroidectomy
- D. sarcoidosis
- E. calcitonin-secreting tumor

Clinical findings associated with hyperparathyroidism include all of the following except:

- A. peptic ulcer
- B. pathologic fractures
- C. acute pancreatitis
- D. hypotension

There is an established association between hyperparathyroidism and all of the following conditions except:

- A. demineralization of bone
- B. metastatic calcification
- C. chronic renal failure
- D. tetany

Clinical manifestations of hypoparathyroidism include all of the following except:

- A. seizures
- B. cataract formation
- C. carpopedal spasm
- D. peptic ulcers

The most common cause of hypoparathyroidism is:

- A. irradiation
- B. autoimmune disorder
- C. atrophy
- D. carcinoma
- E. thyroidectomy

Clinical manifestations of hypoparathyroidism include:

- A. pathologic fracture
- B. cataracts**
- C. renal failure
- D. peptic ulcer

Causes of secondary hyperparathyroidism include all of the following except:

- A. chronic renal failure
- B. vitamin D deficiency
- C. intestinal malabsorption
- D. parathyroid adenoma**

Secondary hyperparathyroidism is caused by each of the following except:

- A. calcium losing diseases
- B. excessive calcium intake**
- C. renal insufficiency
- D. vitamin D resistance

Pheochromocytomas of the adrenal medulla may lead to:

- A. hypertension
- B. attacks of anxiety
- C. cardiomyopathy
- D. all of the above**

Pituitary adenoma may cause:

- A. galactorrhea
- B. Cushing's disease
- C. amenorrhea
- D. gigantism
- E. all of the above**

Hyperfunction of the thyroid gland is associated with the following except:

- A. elevated basal metabolic rate
- B. depressed T3–T4 levels**
- C. diffuse hyperplasia of the follicular epithelium
- D. thyroid adenoma
- E. hyperplasia, in an adenomatous goiter

