Test to lecture 11

1. Lupus Erythematosus Chronicus Discoides is:
2. bacterial Infection
3. light-dependent dermatosis\*
4. autoimmune disease with predominantly skin involvement\*
5. autoimmune disease with involvement of internal organs
6. bullous dermatosis
7. Lupus Erythematosus Systematisatus is a disease which is characterized by:
8. butterfly exanthema on the face\*
9. discoid exanthema on the face and seborrheic areas
10. mucosal involvement\*
11. polyarthritis\*
12. CNS manifestations
13. scleroderma plaques
14. The most often medication provoked Lupus Erythematosus is:
15. quinidine\*
16. penicillin
17. β-blockers\*
18. vaccines and serums\*
19. streptomycin\*
20. Typical histopathological changes in Lupus Erythematosus are:
21. parakeratosis
22. vacuolar degeneration of the basal cell\*
23. akantolysis
24. follicular hyperkeratosis\*
25. perivascular neutrophilic infiltrate in the dermis
26. perivascular lymphocytic infiltrate in the dermis\*
27. Upon direct immunofluorescence (DIF) in Lupus Erythematosus is established:
28. deposition of IgA at the top of dermal papillae
29. a band IgA deposition of the dermo-epidermal border
30. a band deposition of IgG, IgM and C3 of the dermo-epidermal border\*
31. between the cell deposition of the IgG and IgM in Str. Spinosum
32. granular deposition of IgG, C3, IgM of the dermo-epidermal border
33. Systemic sclerosis is an autoimmune disease that is associated with pathology of the:
34. collagen and elastic fibers of the connective tissue\*
35. central nervous system
36. gastrointestinal system\*
37. joints\*
38. CREST - syndrome presents with:
39. calcinosis\*
40. cardiomyopathy
41. Raynaud's phenomenon\*
42. electromyography abnormalities
43. esophagopathy\*
44. sclerodactily\*
45. telangiectasiae\*
46. hypertelurizm
47. Clinical cutaneous manifestations of Sclerodermia Progressiva are:
48. acrosclerosis\*
49. shortened distal phalanges\*
50. flexor contractures\*
51. erythematous-squamous eruptions
52. microstomy and microglossy\*
53. telangiectasia\*
54. atonic ulcers\*
55. Visceral manifestations of Sclerodermia Progressiva are:
56. basal pneumofibrosis\*
57. cardiomyopathy\*
58. nephrosclerosis\*
59. endocarditis of the Libman-Sacks
60. hepatitis
61. convulsions and psychosis
62. Therapeutic plan of the Sclerodermia Progressiva includes:
63. D-Penicilamin\*
64. cortisone preparations
65. paraffin\*
66. remedial gymnastics\*
67. plasmapheresis\*
68. antihistamines
69. vasodilatators\*
70. colchicine\*
71. Cutaneous manifestations of Dermatomyositis are:
72. periorbital heliotrope exanthema\*
73. discoid exanthema on the face
74. papules of the Gotron\*
75. poikilodermy\*
76. endocarditis of the Libman-Sacks
77. erythematous-squamous eruptions
78. Systemic manifestations of Dermatomyositis are:
79. weakness of the shoulder and neck muscles\*
80. difficulty in articulation, dysphonia and dysphagia\*
81. basal pulmonary sclerosis
82. aspiration pneumonia
83. membranous glomerulonephritis
84. convulsions and psychosis
85. primary myogenic damage with electromyography changes\*