

Malabsorption & Celiac disease

MCQs

- The most common HLA subtype seen in celiac disease is:

Select one:

- a. HLA DR3
- b. HLA DR4
- c. HLA DQ2**
- d. HLA DQ8
- e. HLA B27

- A 27-year-old woman presents for review. She describes herself as having 'IBS' and for the past two years has suffered intermittent bouts of abdominal pain, bloating and loose stools. For the past two weeks however her symptoms have been much worse. She is now passing around 3-4 watery, grey, 'frothy' stools per day. Her abdominal bloating and cramps have also worsened and she is suffering from excessive flatulence. Judging by the fitting of her clothes she also feels that she has lost weight. Some blood tests are ordered Hb 10.9 g/dl Platelets $199 \times 10^9/l$ WBC $7.2 \times 10^9/l$ Ferritin 15 ng/ml Vitamin B12 225 ng/l Folate 2.1 nmol/l. What is the most likely diagnosis?

Select one:

- a. Crohn's disease
- b. Celiac disease**
- c. Infective exacerbation of irritable bowel syndrome
- d. Ulcerative colitis
- e. Bacterial overgrowth syndrome

- One of the following is not a complication of celiac disease Select one:

- a, T-cell lymphoma
- b. Osteoporosis
- c. Aplastic anemia**
- d. Ulcerative jejunitis
- e Increased risk of esophageal carcinoma

- A 17-year-old female patient presents to your clinic complaining of hair loss. She was diagnosed with celiac disease at the age of 6 years with duodenal biopsy after having frequent upper respiratory and ear infection. Deficiency of which immunoglobulin is frequently encountered in celiac disease?

Select one:

- a. IgA**
- b. IgE
- c. IgM
- d. IgG
- e. Complement system

- Regarding the clinical features of celiac disease. One is false
 - a. Can be diagnosed after the age of 60
 - b. Can appear in infancy upon weaning from milk to solid foods
 - c. Has a peak of incidence in the fifth decade
 - d. Patients can be asymptomatic and present only with laboratory abnormalities
 - e. Mouth ulcers and angular stomatitis are indicators of very severe disease**

- Which of the following is not a cause of GI bleeding ?

- a. Esophageal varices
- b. Use of NSAIDs
- c. H pylori related erosive gastritis
- d. Gastric malignancy
- e. Celiac disease**

- All of the following are possible complications of celiac disease except?

- a. Weight loss
- b. Anemia
- c. Infertility
- d. Osteoporosis
- e. High ESR and CRP**

- Which of the following is not a recognized complication of celiac disease?

- a. Lactose intolerance
- b. Esophageal cancer
- c. Subfertility
- d. Hypersplenism**
- e. Osteoporosis

- Most sensitive for celiac disease follow up :

-Anti-endomysial antibodies

-Anti tissue transglutaminase antibodies

- Celiac disease is followed up by : ???

- Patient has history of multiple fractures he is known case of celiac disease best diagnostic imaging for bone ?

Answer: **bone densitometry (DXA)**

- Celiac disease
- anti-tissue transglutaminase antibody

- Celiac ...
Anti-endomysium

- All the following are subclinical presentations of celiac disease, except:

- a. Mood changes
- b. Iron def
- c. B12 def
- d. Unexplained elevation of liver enzymes
- e. Recurrent abdominal pain

- ONE of the following tests is most suitable in screening patients for celiac disease.

- a- Anti-casein antibodies
- b- Anti-endomyseal antibodies
- c- Anti-gliadin antibodies
- d- ESR
- e- Alpha fetoprotein.

- the most common presentation in patients with malabsorption is?

- a. Hyperkalemia
- b. Anemia
- c. Incidental finding of positive anti TTG
- d. Melena
- e. High ESR

- one of these is not a cause of malabsorption?

Contact dermatitis

- antibiotic for Whipple disease ???

Mini-OSCE

Q2 : Young Female , is diagnosed with osteoporosis , and complaining from diarrhea last two months , What is your first investigation , and the diagnosis?

- Anti Tissue Transglutaminase
Celiac Disease -

