13. Which of the following is true about rectal bleeding?

- a. A painful digital examination suggests an anal fissure
- b. Bright red blood on the finger usually signifies a cecal lesion
- c. Proctoscopy is of no value in the assessment of rectal bleeding
- d. Rectal cancer is the commonest cause of rectal bleeding
- 14. Which of the following items **IS NOT** true for intrahepatic cholestasis of pregnancy (ICP)?
 - a. It is a cause of acute liver failure
 - b. It is usually revealed by a generalized pruritus during the second or third trimester.
 - c. It recurs frequently during subsequent pregnancies (more than 50% of cases)
 - d. Ursodesoxycholic acid may be used in the treatment of ICP
- 15. Which of the following statements regarding AH (alcoholic hepatitis) is true?
 - a. Maddrey's modified discriminant function (mDF) is calculated from INR and bilirubin
 - b. Pentoxyfilline acts by inhibiting TNF alpha
 - c. Presence of cirrhosis indicates that steroids are not going to be beneficial for treatment
 - d. The gold standard of diagnosis is Maddrey's modified discriminant function (mDF)

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16. The most common cause of death in the setting of acute liver failure is?

- a. Cerebral edema and brain herniation
- b. Fluid and electrolyte imbalance
- c. Fungal infection
- d. Renal failure

- 17.Patients with primary sclerosing cholangitis have an increased risk to develop malignancies. Which malignancies have been shown to be more prevalent in PSC than in the normal population?
 - a. Cholangiocarcinoma
 - b. Colon carcinoma
 - c. Hepatocellular carcinoma
 - d. Pancreatic carcinoma
- 18. Which one of the following statements regarding autoimmune hepatitis (AIH) is true?
 - a. An acute onset of illness is common (40%)
 - b. Immunoglobulin level is usually normal
 - c. Predominant serum alkaline phosphatase abnormality
 - d. Women are affected more than men (M: F- 1:2)
- 19. Which of the following is true about the global incidence of colorectal cancer?
 - a. It is the most common malignancy
 - b. It is the second most common malignancy, after lung cancer-
 - · c. It is the third most common malignancy, after lung cancer and breast cancer
 - d. It is the seventh most common malignancy
- 20. Which of the following symptoms indicates a need for laboratory testing or diagnostic imaging in patients with IBS younger than 50 years?
 - a. Abdominal pain
 - b. Amenorrhea
 - c. Hypokalemia
 - d. Iron deficiency anemia

21. The most common neurologic manifestation of classic Whipple's disease is?

- a. Ataxia
- b. Cognitive change
- c. Oculomasticatory or oculofascialskeletal myorhythmia
- d. Supranuclear ophthalmoplegia

22. Which of the following is correct regarding polypectomy?

- a. Aspirin/ NSAID should be continued
- b. Clopidogrel should be continued
- c. Clopidogrel should be discontinued the day before the procedure
- d. Warfarin should be continued

23.Following splenectomy for trauma

- a. Heinz bodies are characteristically seen on the blood film
- b. Malaria is more severe
- c. Prophylactic penicillin should be taken for six weeks
- d. Thrombocytopenia is typical

24.A 42 years male patient has weight loss and abdominal pain, hyperpigmentation, hepatomegaly, polyarthritis, and hyperglycemia. What is the most likely diagnosis?

- a. Hemochromatosis
- b. Hepatic carcinoma
- c. Type 2 diabetes mellitus
- d. Wilson disease

25. Which of the following is true regarding hepatorenal syndrome in cirrhosis?

- a. An elevated central venous pressure is common
- b. It is a typical acute renal tubular necrosis
- c. Urinary sodium concentration is less than 10 mmol/L
- d. Urine usually shows proteinuria and an abnormal urinary sediment

26. What is the basic defect in Wilson's disease?

- a. Defective biliary excretion of copper
- b. Increased copper absorption
- c. Mutation in the promoter region of the UGT1A1 gene
- d. Reduced ceruloplasmin

27. A 45-year-old woman with type 2 diabetes treated with metformin presents with a two-day history of right upper quadrant pain, fever, nausea and vomiting. Her temperature is 38.9°C, blood pressure 90/55mmHg and pulse 110/min. She has tenderness in the right subcostal region and is jaundiced. Fluid resuscitation is commenced and she is given intravenous antibiotics.

Which one of the following is the most appropriate initial investigation?

- a. Chest X-ray
- b. ERCP
- c. Magnetic resonance cholangiopancreatography (MRCP)
- d. Ultrasound
- 28.At each corner of the hepatic lobules is the portal tract/triad. Which of the following **IS NOT** part of the triad?
 - a. Bile duct
 - b. Hepatic artery
 - c. Hepatic portal vein
 - d. Sinusoids

29. The standard workup for acute hepatitis includes all of the following, **EXCEPT**?

- a. Antinuclear antibodies
- b. HBsAg
- c. IgM-anti-HAV
- d. Liver biopsy
- 30. A 34- years- old surgeon got a needle stick injury from a known HBV patient 2 hours ago. What is the most appropriate test he should perform now to decide further management?

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- a. HBcAb
- b. HBsAb
- c. HBsAg
- d. HBV DNA PCR

- 31.Diverticulosis is the formation of numerous tiny pockets in the lining of the bowel. Which of the following is **FALSE** regarding diverticulosis?
 - a. It is common above 60 years old
 - b. It is precancerous lesion
 - c. It is related to constipation
 - d. It may be presented with rectal bleeding

32. All these conditions have Serum-ascites albumin gradient [SAAG] <1.1 g/dL EXCEPT?

- a. Congestive heart failure
- b. Familial Mediterranean fever
- c. Granulomatous peritonitis
- d. Nephrotic syndrome

33.Contraceptive pills can cause all the following **EXCEPT**:

- a. Angiosarcoma
- b. Cholestasis
- c. Focal nodular hyperplasia
- d. Hepatic adenoma

34. Patients with HCV & HBsAg –ve HBV coinfection who are candidates for DAAs for HCV are liable for HBV reactivation; which of the following is correct?

- a. Monitor ALT for preemptive HBV treatment
- b. Monitor HBV DNA for preemptive HBV treatment
- c. Start prophylactic HBV treatment
- d. Start therapeutic HBV treatment
- 35.A 19- year- old female with 6- month history of abdominal pain, diarrhea, and 4 kg weight loss presents for evaluation. She was previously told she has irritable bowel syndrome. Anti endomysial IgA antibody is checked and is elevated. What is the next best management step?
 - a. Lower GI endoscopy with ileal biopsies
 - b. Start a lactose free diet
 - c. Start s gluten free diet
 - d. Upper endoscopy with duodenal biopsies

36. A 53-year-old man with a history of peptic ulcer disease and hypertension presents with hematemesis. A nasogastric tube is placed and a large amount of coffee ground material is lavaged. The patient has a temperature of 37°C, blood pressure of 88/42 mmHg, heart rate of 112 beats per minute, respiratory rate of 20 breaths per minute, and oxygen saturation of 97% on room air. Physical examination reveals delayed capillary refill.

Which of the following is the best next step in management of this patient?

- a. Administration of fluids
- b. H. pylori serologic testing
- c. Immediate upper GI endoscopy
- d. Intravenous (IV) proton pump inhibitor
- 37. Which of the following is the most common prothrombotic disorder leading to Budd-Chiari syndrome?
 - a. Antiphospholipid antibody syndrome
 - b. Factor V Leiden
 - c. Paroxysmal nocturnal hemoglobinuria
 - d. Põlycythemia vera

38.All of the following are the early complications of liver transplantation **EXCEPT**?

- a. Biliary stricture
- b. Cardio metabolic complication
- c. Hepatic artery thrombosis
- d. Primary non function
- 39. A 24- year- old woman presented with a 3- month history of epigastric pain, nausea and steatorrhea. Abdominal imaging shows pancreatic calcifications and dilated pancreatic duct consistent with chronic pancreatitis. The patient came from southern India 2 months ago. What is the most likely etiology of her condition?

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- a. Alcoholic chronic pancreatitis
- b. Autoimmune pancreatitis
- c. Gall stone disease
- d. Tropical pancreatitis

40. Which of the following **IS NOT** an indication for EUS-FNB?

- A. Celiac plexus block
- B. Cystic mediastinal lesions
- C. Evaluation of sub endothelial abnormalities
- D. Staging of GIT malignancy

111-Give a short account on each of the following: (130 marks)

- **1.Treatment of primary biliary cholangitis? (30 marks)**
- 2. Diagnostic Criteria for Hepatorenal syndrome? (30 marks)
- 3. Erythrocyte changes in liver disease? (30 marks)
- 4. Heat exhaustion? (40 marks)

BEST WISHES

Exam Committee: Prof. Elsayed Wasfi Prof. Sahar Elyamany Prof. Ferial El-Kalla