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Chronic inflammation. Granulomatosis.

Questions

1. CHRONIC INFLAMMATION SHALL BE A SIMULTANEOUS COMBINATION

- 1) untenable reparation
- 2) angiogenesis, scarring
- 3) reactive changes
- 4) tissue damage
- 5) embolism

2. CAUSES OF CHRONIC INFLAMMATION

- 1) acute infection
- 2) persistent infection
- 3) long-term exposure to toxic substances

3. CHRONIC INFLAMMATION IS CHARACTERIZED

- 1) deposition of amyloid
- 2) mononuclear infiltration
- 3) fibrosis of damaged tissues
- 4) persistent destruction of connective tissue

4. MACROPHAGE BY THE CELL OF CHRONIC BASIC INFLAMMATION

- 1) is
- 2) is not

Add:

5. The main cell of chronic inflammation is _____.

6. CELLS OF INFILTRATE IN THE FOCUS OF CHRONIC INFLAMMATION

- 1) macrophages
- 2) lymphocytes
- 3) neutrophils
- 4) eosinophils

7. TISSUE REACTION IN GRANULOMATOUS INFLAMMATION

- 1) exudative
- 2) proliferative

8. CELLS PARTICIPATING IN PHAGOCYTOSIS

- 1) macrophages
- 2) lymphocytes
- 3) neutrophils
- 4) erythrocytes

- 5) plasma cells
- 6) epithelioid

9. IN THE FOCUS OF PRODUCTIVE INFLAMMATION PHAGOCYTOSIS DEVELOPS

- 1) pinocytosis
- 2) completed
- 3) endocytobiosis
- 4) unfinished

10. CELLS OF HEMATOGENIC ORIGIN IN THE FOCUS OF CHRONIC INFLAMMATION

- 1) monocytes
- 2) leukocytes
- 3) lymphocytes
- 4) fibroblasts
- 5) endothelial

11. CELLS OF HISTIOGENIC ORIGIN IN THE FOCUS OF CHRONIC INFLAMMATION

- 1) monocytes
- 2) lymphocytes
- 3) fibroblasts
- 4) endothelial
- 5) myofibroblasts

12. CELL OF INFILTRATE

Set correspondence:

- 1) macrophage
 - 2) lymphocyte
 - 3) fibroblast
 - 4) epithelioid
- ORIGIN
- A) hematogenous
 - B) histiogenic

13. CHARACTERISTIC OUTCOME OF PRODUCTIVE INFLAMMATION

- 1) necrosis
- 2) sclerosis
- 3) dystrophy
- 4) tissue melting

14. TYPES OF PRODUCTIVE INFLAMMATION

- 1) interstitial (interstitial)
- 2) granulomatous
- 3) serous
- 4) purulent

15. WITH RHEUMATISM IN ADULTS, INFLAMMATION DEVELOPS IN THE MYOCARDIUM

- 1) granulomatous chronic
- 2) acute granulomatous
- 3) interstitial
- 4) exudative

16. WITH TUBERCULOSIS IN THE LUNGS INFLAMMATION DEVELOPS

- 1) granulomatous chronic
- 2) acute granulomatous
- 3) interstitial
- 4) exudative

17. WITH ALVEOCOCCOSIS IN THE LIVER INFLAMMATION DEVELOPS

- 1) interstitial
- 2) granulomatous
- 3) exudative
- 4) polyposis

18. INFLAMMATION DEVELOPS AROUND ANIMAL PARASITES

- 1) interstitial
- 2) granulomatous
- 3) exudative
- 4) intermediate
- 5) purulent

19. MICROSCOPIC INTERMEDIATE MYOCARDITIS CHARACTERIZED

- 1) inflammatory infiltrate in the myocardial stroma
- 2) dystrophic changes in cardiomyocytes
- 3) diffuse small focal cardiosclerosis
- 4) giant cell granulomas
- 5) stromal hyalinosis

20. CELL COMPOSITION OF INFILTRATE IN INTERCURRENT MYOCARDITIS

- 1) macrophages
- 2) lymphocytes
- 3) neutrophils
- 4) fibroblasts
- 5) plasma cells

- 6) multinucleated giant cells of foreign bodies

21. CHARACTERISTIC OUTCOMES OF INTERSTITIAL (INTERSTITIAL) INFLAMMATION

- 1) edema
- 2) necrosis
- 3) sclerosis
- 4) calcification

22. CHARACTERISTIC OUTCOME OF INTERSTITIAL (INTERSTITIAL) MYOCARDITIS

- 1) cardiomyopathy
- 2) myocardial infarction
- 3) large focal cardiosclerosis
- 4) small focal diffuse cardiosclerosis

23. INTERSTITIAL INFLAMMATION MOST OFTEN DEVELOPS IN

- 1) the brain
- 2) liver and kidney
- 3) myocardium and lungs
- 4) spleen and lymph nodes

24. TYPES OF GRANULOMATOUS INFLAMMATION DEPENDING ON PATHOGENESIS

- 1) spicy
- 2) immune
- 3) subacute
- 4) chronic
- 5) non-immune

25. GRANULE IS A MANIFESTATION OF TISSUE REACTION

- 1) exudation
- 2) proliferation

26. CHARACTERISTIC CELLS FOR NON-IMMUNE GRANULA

- 1) lymphocytes
- 2) eosinophils
- 3) neutrophils
- 4) plasma
- 5) multicore giant foreign bodies

27. IMMUNE GRANULOMATOUS INFLAMMATION DEVELOPS WHEN

- 1) silicosis
- 2) syphilis

- 3) rabies
- 4) tuberculosis
- 5) alveococcosis

28. NON-IMMUNE GRANULOMATOUS INFLAMMATION DEVELOPS WHEN

- 1) rabies
- 2) syphilis
- 3) tuberculosis
- 4) schistosomiasis
- 5) rhinoscleroma

29. CLINICAL COURSE OF DISEASES WHICH DEVELOP GRANULOMATOUS IMMUNE INFLAMMATION

- 1) acute
- 2) subacute
- 3) the sharpest
- 4) chronic

30. CLINICAL COURSE OF DISEASES WHICH DEVELOP GRANULOMATOUS NON-IMMUNE INFLAMMATION

- 1) spicy
- 2) subacute
- 3) the sharpest
- 4) chronic

31. SYNONYM OF ENDOCYTOBIOSIS

- 1) pinocytosis
- 2) granulomatosis
- 3) completed phagocytosis
- 4) incomplete phagocytosis

32. IN MULTI-CHAMBER ECHINOCOCCOSIS OF THE LIVER ORGAN SIZES

- 1) reduced
- 2) not changed
- 3) increased

33. OUTCOMES OF INFLAMMATION AROUND ANIMAL PARASITES

- 1) petrification
- 2) encapsulation
- 3) hyalinosi of arterioles
- 4) atrophy of organ tissue
- 5) secondary amyloidosis

34. MICROSCOPIC TUBERCULOSIS GRANULE IS CHARACTERIZED

- 1) neutrophils

- 2) lack of blood vessels
- 3) many small vessels
- 4) caseous necrosis in the center
- 5) fibrinoid necrosis in the center
- 6) giant cells of Pirogov-Langhans

35. STROMA COMPONENT IN TUBERCULOSIS GRANULE

- 1) collagen fibers
- 2) reticular fibers
- 3) elastic fibers
- 4) fibrin filaments
- 5) vessels

36. CELLS OF TUBERCULOSIS GRANULUM

- 1) MONOCYTES
- 2) lymphocytes
- 3) fibroblasts
- 4) epithelioid
- 5) plasma
- 6) giant Pirogov-Langhans

37. TUBERCULOSIS GRANULE IS A MANIFESTATION OF A HYPERSENSITIVITY REACTION

- 1) immediate type
- 2) delayed type

38. VESSELS IN TUBERCULOSIS GRANULE

- 1) are present in small quantities
- 2) are determined in large quantities
- 3) absent

39. THE CENTRAL PART OF THE TUBERCULOSIS GRANULE IS PRESENTED BY NECROSIS

- 1) fatty
- 2) caseous
- 3) waxy
- 4) fibrinoid
- 5) colliquation

Add:

40. The central part of the tuberculous granuloma is represented by _____ necrosis.

41. CHARACTERISTIC TISSUE REACTION IN THE PRESENCE OF

IMMUNITY IN A PATIENT WITH TUBERCULOSIS

- 1) productive
- 2) alternative
- 3) exudative

42. TUBERCULOSIS BUILDINGS DEPENDING ON CELL COMPOSITION

- 1) lymphoid
- 2) necrotic
- 3) plasma cell
- 4) giant cell
- 5) epithelioid cell

43. SYNONYM OF SYPHILYTIC GRANULEMA

- 1) petrification
- 2) tubercle
- 3) knot
- 4) gumma

44. GUMMA IS A MORPHOLOGICAL MANIFESTATION OF SYPHILIS

- 1) early congenital
- 2) primary
- 3) secondary
- 4) tertiary

45. BASIC CELLS OF GUMMA

- 1) lymphocytes
- 2) neutrophils
- 3) fibroblasts
- 4) epithelioid
- 5) plasma

46. FIBER OF THE STROMA OF A SYPHILYTIC GRANULE

- 1) collagen
- 2) reticular
- 3) elastic
- 4) fibrin

47. VESSELS IN A SYPHILYTIC GRANULE

- 1) are present in small quantities
- 2) are determined in large quantities
- 3) absent

48. VESSELS IN GUMMA

- 1) little
- 2) a lot

49. A MICROSCOPIC SYPHILYTIC GRANULE IS CHARACTERIZED

- 1) hyalinosis in the center
- 2) lack of blood vessels
- 3) productive vasculitis
- 4) caseous necrosis in the center
- 5) collagen fibers in the stroma

50. MICROSCOPIC SYPHILYTIC GRANULE IS CHARACTERIZED

- 1) lack of necrosis
- 2) caseous necrosis in the center
- 3) reticular fibers in the stroma
- 4) an abundance of epithelioid cells
- 5) the predominance of lymphocytes and plasma cells

51. MOST OF ALL GUMMA IS LOCALIZED IN

- 1) stomach and intestines
- 2) the brain
- 3) spleen
- 4) liver
- 5) aorta

Add:

52. Gummas and syphilitic mesaortitis are manifestations of the _____ period of syphilis.

53. MORPHOLOGICAL MANIFESTATIONS OF THE TERTIARY PERIOD OF SYPHILIS

- 1) hard chancre
- 2) gum in the internal organs
- 3) fibrinous inflammation of the mucous membranes
- 4) gummy infiltration of the vessel walls and organ stroma

54. COMPONENTS OF THE GRANULE

Set correspondence:

- 1) plasmocytes and lymphocytes
- 2) collagen fibers
- 3) reticular fibers
- 4) epithelioid cells
- 5) caseous necrosis
- 6) fibroblasts

DISEASE

- A) syphilis
- B) tuberculosis
- B) tuberculosis and syphilis

55. MEZAORTITIS DEVELOPS IN SYPHILIS

- 1) primary
- 2) secondary
- 3) tertiary

56. LOCALIZATION OF CHANGES IN THE AORTE IN SYPHILITIC MESORTITIS

- 1) arc
- 2) thoracic region
- 3) abdominal

57. LOCALIZATION OF INFILTRATE IN THE AORTIC WALL IN SYPHILITIC MESAORTITIS

- 1) only media
- 2) only intimacy
- 3) only adventitia
- 4) media and intimacy
- 5) media and adventure
- 6) intimacy and adventitia

58. PRIMARY SYPHILIS IS CHARACTERIZED BY EDUCATION

- 1) gum
- 2) syphilis
- 3) hard chancre
- 4) gummy infiltrate

List of recommended literature:

Basic literature:

1. "Basic pathology" Vinay Kumar, Ramzi S. Cotran, Stanley L. Robbins, 1997.

Additional literature:

1. "Pathology. Quick Review and MCQs" Harsh Mohan, 2004.
2. "Textbook of Pathology" Harsh Mohan, 2002.
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10. "Robbins Pathologic Basic of Disease" Eds. R.S.Cotran, V.Kumar, T.Collins – Philadelphia, London, Toronto, Montreal, Sydney, Tokyo: W.B.Saunders Co., 1998 (6th).
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12. "Color Atlas of Anatomical Pathology" Cooke R.A., Steward B. – Edinburgh: Churchill Livingstone, 1995 (10th).
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14. "Concise Pathology" Parakrama Chandrasoma, Glive R. Taylor.
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