

VOLGOGRAD STATE
MEDICAL UNIVERSITY
Department of Pathological Anatomy

Lungs obstructive and restrictive disease. Cancer of lungs.

Test control

1. Chronic catarrhal bronchitis is characterized by all of the following, except:
 - a) hypersecretion of mucus,
 - b) edema and cellular infiltration of the mucosa,
 - c) calcification of the submucosa,
 - d) sclerosis of the submucosal layer,
 - e) areas of metaplasia of the epithelium.
2. Bronchiectasis in shape can be:
 - a) saccular,
 - b) cylindrical,
 - c) oval,
 - d) a and b are true,
 - e) b and c are true.
3. According to the mechanism of formation of bronchiectasis, there can be:
 - a) saccular,
 - b) retention,
 - c) destructive,
 - d) a and b are true,
 - e) b and c are true.
4. The development of chronic obstructive pulmonary emphysema is associated with:
 - a) α 1-antitrypsin deficiency,
 - b) an excess of α 1-antitrypsin,
 - c) insulin deficiency,
 - d) insufficiency of the internal Castle factor,
 - e) an excess of the internal Castle factor.
5. Chronic obstructive pulmonary disease leads to the development of:
 - a) hypertension of the pulmonary circulation,
 - b) hypertension of the systemic circulation,
 - c) intracranial hypertension,
 - d) portal hypertension,
 - e) b and d are true.
6. Chronic cor pulmonale develops when:
 - a) coronary heart disease,
 - b) hypertension,
 - c) chronic obstructive pulmonary disease,
 - d) atherosclerosis of the aorta,
 - e) cerebrovascular diseases.
7. In chronic bronchitis, the following develops in the bronchial wall:
 - a) emphysema,
 - b) sclerosis,
 - c) chronic inflammation,
 - d) a and b are true,
 - e) b and c are true.
8. Allergic reactions in bronchial asthma involve:
 - a) Ig A, b) IgB, c) IgG, d) Ig D, e) IgE.
9. Infectious-allergic bronchial asthma is observed:
 - a) when exposed to allergens,
 - b) in patients with acute and chronic bronchopulmonary diseases,
 - c) when exposed to antibodies,
 - d) a and b are true,
 - e) b and c are true.
10. In an asthmatic attack, the following is found in the mucus under a microscope:
 - a) Kurshman spirals,
 - b) rice bodies,
 - c) Charcot-Leiden crystals,
 - d) a and b are true,
 - e) a and c are true.
11. Chronic granulating bronchitis is characterized by:
 - a) the formation of granulation tissue,

- b) the formation of ulcers on the mucous membrane,
 - c) purulent inflammation,
 - d) hemorrhagic inflammation,
 - e) fibrinous inflammation.
12. Bronchiectasis in shape can be:
- a) fusiform,
 - b) oval,
 - c) clear-cut,
 - d) a and b are true,
 - e) a and c are true.
13. According to the mechanism of formation of bronchiectasis, there can be:
- a) destructive,
 - b) atelectatic,
 - c) segmental,
 - d) a and b are true,
 - e) b and c are true.
14. Chronic obstructive pulmonary disease includes all of the following, except:
- a) chronic bronchitis,
 - b) pulmonary emphysema,
 - c) bronchiectasis,
 - d) lung abscess,
 - e) bronchial asthma.
15. With the prolonged existence of bronchiectasis, the following may develop:
- a) primary amyloidosis,
 - b) secondary amyloidosis,
 - c) senile amyloidosis,
 - d) hyalinosi,
 - e) a and c are true.
16. As a result of what changes in the lungs develop pulmonary hypertension and chronic cor pulmonale:
- a) bronchopneumonia,
 - b) pneumosclerosis,
 - c) pulmonary emphysema,
 - d) a and b are true,
 - e) b and c are true.
17. What changes in the lungs contribute development of bronchiectasis:
- a) croupous pneumonia,
 - b) chronic bronchitis,
 - c) interstitial pneumonia,
 - d) pulmonary emphysema,
 - e) hypertension of the pulmonary circulation.
18. The form of bronchial asthma is:
- a) interstitial BA,
 - b) atopic BA,
 - c) infectious-allergic BA,
 - d) a and b are true,
 - e) b and c are true.
19. An asthmatic attack is characterized by:
- a) collapse of the lung,
 - b) emphysema of the lung,
 - c) focal atelectasis,
 - d) a and b are true,
 - e) b and c are true.
20. In an asthmatic attack in the inflammatory infiltrate in the walls of the bronchi prevail:
- a) neutrophils,
 - b) lymphocytes,
 - c) eosinophils,
 - d) macrophages,
 - e) erythrocytes.
21. Fibrous chronic bronchitis is characterized by:
- a) necrotic changes,

- b) tumor changes,
 - c) hemorrhage,
 - d) inflammatory processes,
 - e) fibroplastic processes.
22. Bronchiectasis in shape can be:
- a) triangular,
 - b) cystic,
 - c) fusiform,
 - d) a and b are true,
 - e) b and c are true.
23. According to the mechanism of formation of bronchiectasis, there can be:
- a) destructive,
 - b) retention,
 - c) atelectatic,
 - d) a and b are true,
 - e) true a, b and c.
24. The lung with bronchiectasis is called:
- a) "greasy",
 - b) "cellular",
 - c) "sago",
 - d) "motley",
 - e) "big red".
25. Chronic obstructive pulmonary disease leads to the development of:
- a) hypertrophy of the right ventricle,
 - b) left ventricular hypertrophy,
 - c) left atrial hypertrophy,
 - d) dilatation of the left ventricle,
 - e) dilatation of the left atrium.
26. What changes most often occur in the lung around bronchiectasis:
- a) foci of inflammation,
 - b) fibrosis,
 - c) amyloidosis,
 - d) a and b are true,
 - e) b and c are true.
27. Varieties of pulmonary emphysema are all of the following, except
- a) chronic diffuse obstructive pulmonary emphysema,
 - b) chronic focal pulmonary emphysema,
 - c) productive pulmonary emphysema,
 - d) vicarious emphysema of the lungs,
 - e) interstitial emphysema of the lungs.
28. Atopic bronchial asthma is observed:
- a) when exposed to allergens,
 - b) in patients with acute and chronic bronchopulmonary diseases,
 - c) when exposed to antibodies,
 - d) a and b are true,
 - e) b and c are true.
29. An asthmatic attack is characterized by:
- a) purulent plugs in the lumens of the bronchi and bronchioles,
 - b) mucous plugs in the lumens of the bronchi and bronchioles,
 - c) blood in the lumens of the bronchi and bronchioles,
 - d) air in the lumens of the bronchi and bronchioles,
 - e) a foreign body in the lumens of the bronchi and bronchioles.
30. In an asthmatic attack in the bronchi microscopically, all of the following are detected, except:
- a) hemorrhages,
 - b) thickening of the basement membrane of the epithelium,
 - c) an increase in subepithelial mucous glands,
 - d) thickening of the smooth muscle layer,
 - e) edema and inflammatory infiltration.

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.
3. "General and Systemic Pathology" Joseph Hunter, 2002.
4. "General and Systematic Pathology" Ed. J.C.E. Underwood – Edinburgh: Churchill Livingstone, 1996 (2th).
5. "Histology for Pathologist" Ed. S.S.Sternberg – Philadelphia: Lippincott Raven Publ, 1997 (2th).
6. "Histopathology. A Color Atlas and Textbook" Damjanov I., McCue P.A. – Baltimore, Philadelphia, London, Paris etc.: Williams and Wilkins, A Waverly Co., 1996.
7. "Muir's Textbook of Pathology" Eds. R.N.M. MacSween, K. Whaley London: ELBS, 1994 (14th).
8. "Pathology" Eds. Rubin, J.L. Farber – Philadelphia: Lippincott Raven Publ, 1998 (3th).
9. "Pathology Illustrated" Govan A.D.T., Macfarlane P.S., Callander R. – Edinburgh: Churchill Livingstone, 1995 (4th).
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).
11. "Wheater's Basic Histopathology. A Color Atlas and Text" Burkitt H.G., Stevens A.J.S.L., Young B. – Edinburgh: Churchill Livingstone, 1996 (3th).
12. "Color Atlas of Anatomical Pathology" Cooke R.A., Steward B. – Edinburgh: Churchill Livingstone, 1995 (10th).
13. "General Pathology" Walter J.B., Talbot I.C. – Edinburgh: Churchill Livingstone, 1996 (7th).
14. "Concise Pathology" Parakrama Chandrasoma, Glive R. Taylor.
15. "Pathology" Virginia A. LiVolsi, Maria J. Merino, John S. J. Brooks, Scott H. Saul, John E. Tomaszewski, 1994.
16. "Short lectures on pathology" Zagoroulko A., 2002
17. "Robbins pathologic basis of diseases" Cotran R., Kumar V., Collins T.
18. "General pathology" Dr. Fatma Hafez, 1979.
19. "Anderson's Pathology" Damjanov I., Linder J. – St. Louis: Mosby Inc., 1995 (10th).

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