

# Sarcoidosis

## MCQs

- History of cough and erythematous lesions in the lower limb. No other complaints. CXR showed bilateral hilar lesions.

Diagnosis:

**Sarcoidosis** ✓

- Which of the following is NOT a characteristic chest X-ray finding in a patient with sarcoidosis? Select one:

a. Bilateral reticular abnormality with honeycombing

b. Bilateral hilar lymphadenopathy

c. bilateral Patchy infiltrates

**d. Cardiomegaly**

e. Pleural effusion

- True regarding sarcoidosis :

**increase absorption of calcium from intestine ( Vitamin D effect due to hydroxylase activity of epitheloid activity of granuloma**

- Which of these is not found in sarcoidosis ??

**Finger clubbing**

- Not a finding in sarcoidosis:

A. Cranial nerve palsy

B. Uveitis

C. Wrong answer

- IN patients with sarcoidosis, all of the following are associated with good prognosis, except:

a. Fever

b. Erythema nodosum

c. Age less than 40 years

**d. Black race**

e. Presence of polyarthrititis

Ethnicity (particularly African American and Afro Caribbean origins), age over 40 years at presentation, lupus pernio, chronic uveitis, sinonasal and osseous localizations, CNS involvement, cardiac involvement, severe hypercalcemia, nephrocalcinosis and radiographic stages III and IV have been associated with a poor prognosis

• All of the followings are associated with Worse prognosis in sarcoidosis except :

- a- Incidious onset
- b- Multiple extrathoracic lesion.
- c- Blacks..
- d- Erythema nodosum.**
- e- Lupus pernio.

• All the following are true about sarcoidosis Except.

- a- raised serum level of angiotensin converting enzymes
- b- Negative tuberculin skin test
- c- Normochromic normocytic anemia
- d- Hypercalcemia
- e- Pulmonary caseating granuloma**

• A 33 year old woman presented with Sarcoidosis , her labs showed :

BUN 13 mg/dl ,Na 140 meq/L , K 3.8 meq/L , Cl 105 meq/L , Ca 11.9 mg/dl , PO4 3.5 mg/dl , Cr 1.9 mg/dl , alb 4 g/dl , CO2 23 meq/L .

All the following are likely to be a finding in this patient except :

- A ) Increased intestinal Ca absorption
- B ) Increased production of 1,25 dihydroxyvitamin D3
- C ) Increased levels of PTH**
- D ) Hypercalciuria
- E ) Increased risk for nephrolithiasis

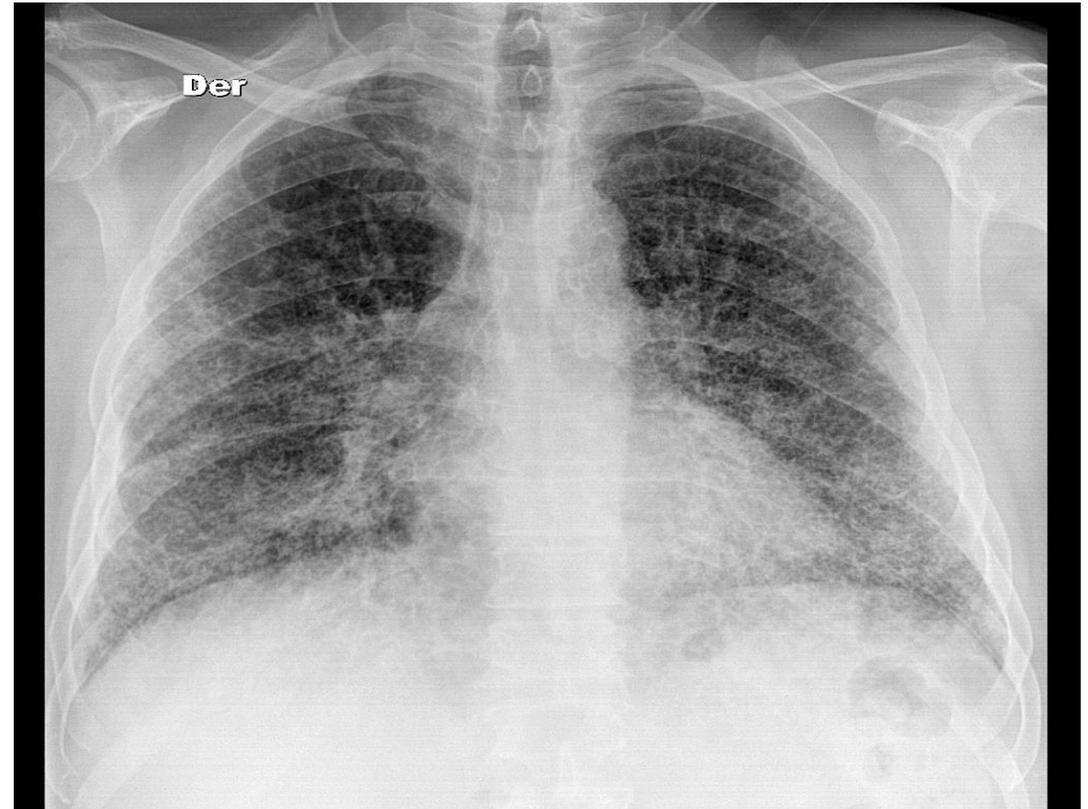
• All of the followings can be caused by sarcoidosis EXCEPT :

- a. Stridor .**
- b. Wheezes .
- c. Heart block .
- d. Facial nerve weakness
- e. Hypercalcemia and Hypocalciuria .

# Mini-OSCE

# Q 8

- What are the findings ?
  - Bilateral reticulonodular opacification
  - Mention 4 ddx ?
- Interstitial lung disease  
Sarcoidosis  
Idiopathic pulmonary fibrosis



## **Station 8**



**Q1 : what is the name of the skin lesion?**

**Erythema Nodosum**

**Q2 : two Possible diagnosis ?**

**Sarcoidosis**

**IBD**

## Station 13

Name this :

Erythema nodosum

3 causes of it :

Sarcoidosis

Tuberculosis

IBD

oral contraceptive pills

Infection



This p.t complains of SOB and doctor notice bells palsy

- 1) What is your diagnosis ? (Sarcoidosis)
- 2) what you will order next to this p.t? (PFT)
- 3) what will you do to confirm your diagnosis ? (hilar biopsy)
- 4) give 2 treatments for this patient ? (steroid, Methotrexate)

