

**Lymphoma
&
Myeloproliferative
disorders**

MCQs

- hodgkin lymphoma emergency:
SVC obstruction

- wrong about lymphoma :
Large tender-painful- lymph node

- Reed Sternberg cell is a characteristic finding in lymphnode biopsy in ONE of the following diseases. Select one:

- Hodgkin's lymphoma.**
- Non Hodgkin's lymphoma.
- Chronic lymphocytic leukemia.
- Acute lymphoblastic leukemia.
- Chronic myeloid leukemia.

- One of the following is false in Non Hodgkins lymphoma: Select one:

- Disease of old age group
- Lymphocytes are of B and T cells.
- High grade type has a cure treatment.
- Low grade type runs a very short and aggressive course.**
- May cause immune thrombocytopenia.

- All of the following “B” symptom of non-Hodgkin lymphoma except :

- drenching sweat
- Fever
- Weight loss
- itching**

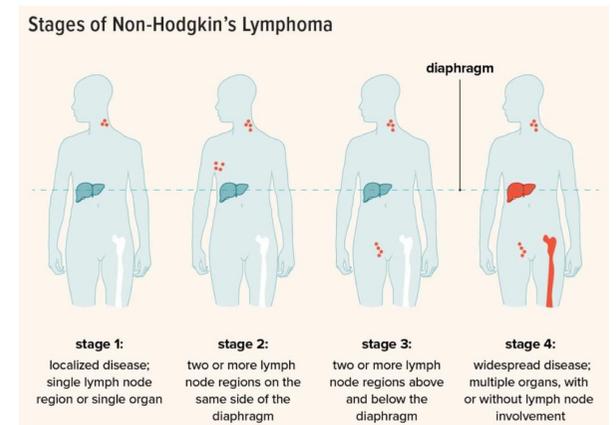
- Young male, 20 years, fever, weight loss 10 kg, x-ray show anterior mediastinal mass , diagnosis is:

- Lymphoma
- Coccidiomycoma
- Histoplasmosis

- A patient with Hodgki's lymphoma, has cervical lymphadenopathy with splenomegaly. He has no fever,weight loss or drenching sweating.

His clinical staging is ONE of the following.

- stage I
- stage II
- stage III**
- stage III
- stage IV B.



- patient 3endo non hodgkin lymphoma ...shu el renal manifestation elo?
- Each of the glomerular lesions listed below can cause Nephrotic syndrome . Which of them may be found in all the following conditions : non – Hodgkins lymphoma , hepatitis B, hepatitis C , and infective endocarditis ?
 - a) Focal and segmental glomerulosclerosis
 - b) Minimal change disease
 - c) Membranous nephropathy
 - d) Type I membranoproliferative glomerulonephritis (with subendothelial deposits)**
 - e) Type II membranoproliferative glomerulonephritis (dense deposit disease)
- All the following are causes of eosinophilia Except.
 - f- ascaris infestation
 - g- malaria*******
 - h- bronchial asthma
 - i- Hodgkin's lymphoma
 - j- Drug hypersensitivity
- Incorrect in non Hodgkin :

Reed stenburg cells
- Positive JAK 2 mutation characteristically occurs in only One of the following:
 - a. Folic acid deficiency anaemia due to celiac disease.
 - b. Pernicious anemia.
 - c. Hodgkin's diseases
 - d. Essential thrombocytosis.**
 - e. Multiple Myeloma.
- Hodgkin 1a? Which is wrong;

involves 2 nodes
- Indications to use cytoreductive drug(thydroxyurea) in patient with essential thrombocytosis include all the following except:

Select one:

 - a. Age under 30 years**
 - b. Patient has Hypertension
 - c. Patient has ischemic heart disease
 - d. History of thrombosis
 - e. Positive JAK-2 mutation

- All the followings are true in polycythemia rubra vera Except.
 - a. Splenomegaly.
 - b. Leukocytosis.
 - c. Increase erythropoietin.**
 - d. Postive JAK-2 mutation.
 - e. Hydroxyurea is one of the treatment methods.

In PV, erythropoietin levels are usually low or normal. The increase in red blood cell production is due to a primary problem in the bone marrow, not an increase in erythropoietin.

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- JAK2 mutation is found in?
 - a. CML
 - b. Polycythemia rubra vera ??
 - c. Essential thombocythemia**

- Which of the following statements regarding polycythemia vera is correct?
 - a. An elevated plasma erythropoietin level excludes the diagnosis.**
 - b. Transformation to acute leukemia is common.
 - c. Thrombocytosis correlates strongly with thrombotic risk.
 - d. Aspirin should be prescribed to all these patients to reduce thrombotic risk.
 - e. Phlebotomy is used only after hydroxyurea and interferon have been tried.

- pruritus is a clinical manifestation to only one of the following disease ?
 - a- Polycythemia vera**
 - b- Iron deficiency anemia
 - c- Folic acid deficiency anemia
 - d- AML
 - e- CML

• In polycythemia rubra vera, one of the following is true?

- a. Low erythropoietin and low red cell mass
- b. Normal erythropoietin and normal red cell mass
- c. Raised erythropoietin and low red cell mass
- d. Raised erythropoietin and raised red cell mass
- e. Low erythropoietin and raised red cell mass**

• polycythemia RV what is wrong :

It is myelodysplastic

• Patient present with Hb of 8... Blood film shows polychromasia. Best next step in management . patient is on hydroxychloroquine therapy for SLE :

a. IV corticosteroids

b. Plasmapheresis

Ans: A (She has Evan's syndrome)

• Wrong about polycythemia rubra vera:

A. Abnormal findings in ABG

B. Increased platelets, and WBCs

LABORATORY FINDINGS — Laboratory findings in PV include an elevated hemoglobin/hematocrit and red blood cell mass in virtually all patients, a platelet count $>400,000/\text{microL}$ in 60 percent, and a white blood cell count $>12,000/\text{microL}$ in 40 percent. Bone marrow cellularity was increased in 90 percent of patients, and storage iron was absent from the marrow in 94 percent.

• All of the following are true about myeloproliferative disorders, except:

In polycythemia vera, the serum erythropoietin level is high.

In essential thrombocytosis, the bone marrow biopsy usually show hypercellular marrow with increased megakaryocytes

Massive splenomegaly in CML and myelofibrosis

• All the following may be found in polycythemia rubra vera Except.

- a. elevated WBC
- b. elevated platelets
- c. splenomegaly
- d. elevated serum uric acid
- e. high erythropoietin level**

• A patient with mild congestive heart failure is treated with high-dose furosemide and diureses 25 pounds of fluid. A complete blood count (CBC) taken before the diuresis shows an RBC count of 4 million/mm³; a CBC taken after diuresis shows a RBC count of 7 million/mm³. Which of the ONE of the following is the most likely explanation?

- a- Cyanotic heart disease
- b- Increased erythropoietin
- c- Polycythemia vera
- d- Relative polycythemia**
- e- Renal cell carcinoma

• Blood film shows target cells, Howell Jolly boies, and sideroblasts:

- A. Hyposplenism
- B. Myelofibrosi

Mini-OSCE

Q13

Hodgkin lymphoma

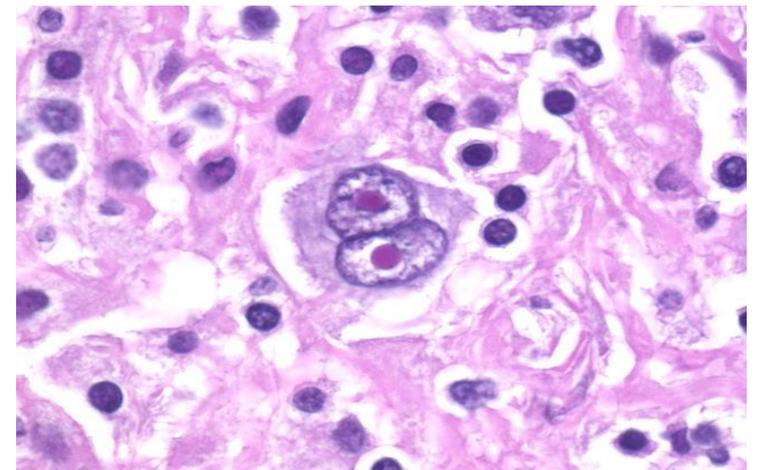
- lymphoma is in two or more groups of lymph nodes.
- lymphoma is in an extranodal site and one or more groups of lymph nodes.

In both cases, the 2 sites of lymphoma are on the same side of the diaphragm.

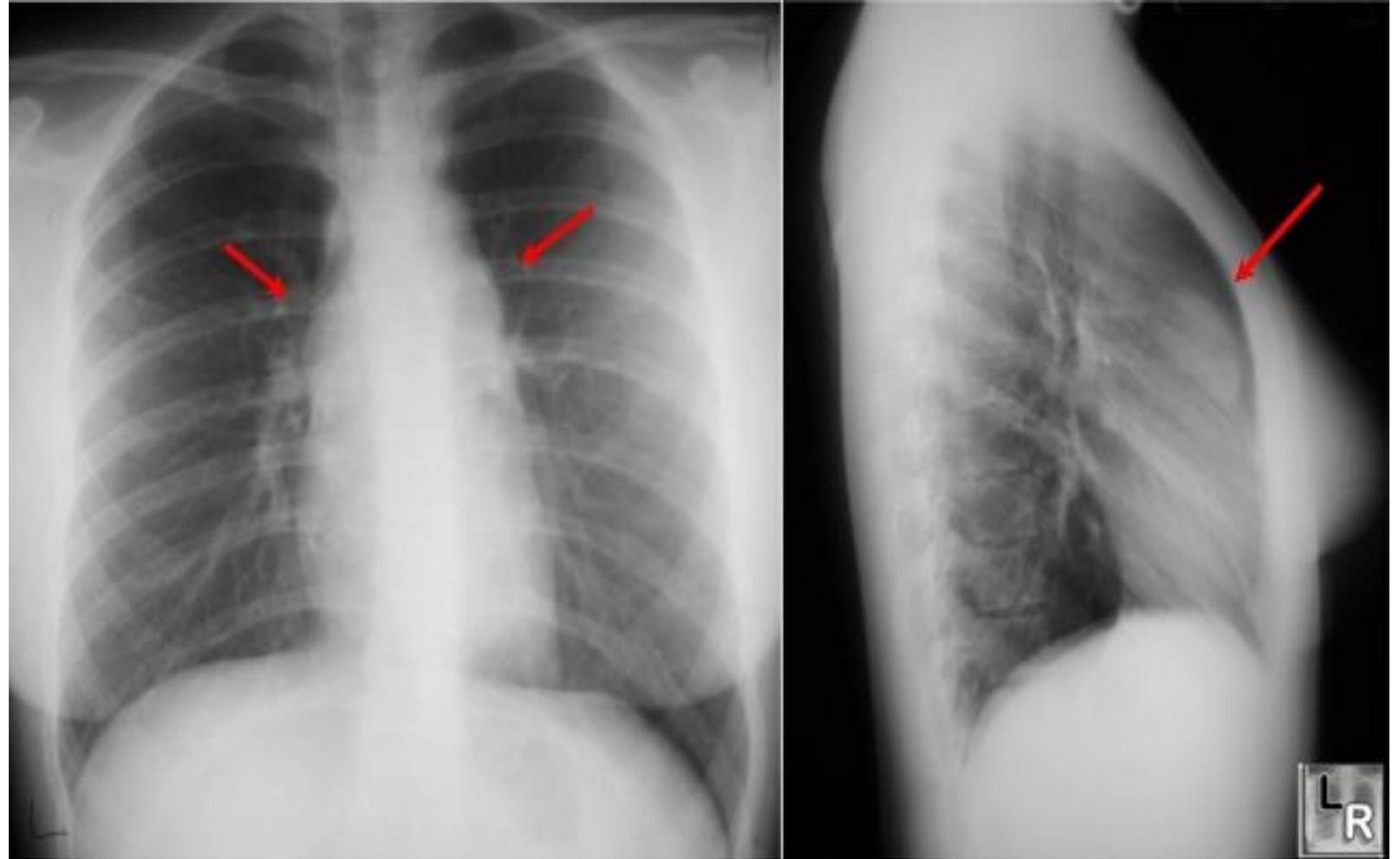
Q1: What is the stage :

Stage 2

Q2: **Reed–Sternberg cells (RS cells)**



Station 4



Q1 : what are the findings

bilateral Mediastinal lymph node enlargement

Q2 : diagnosis :

hodgkin's lymphoma

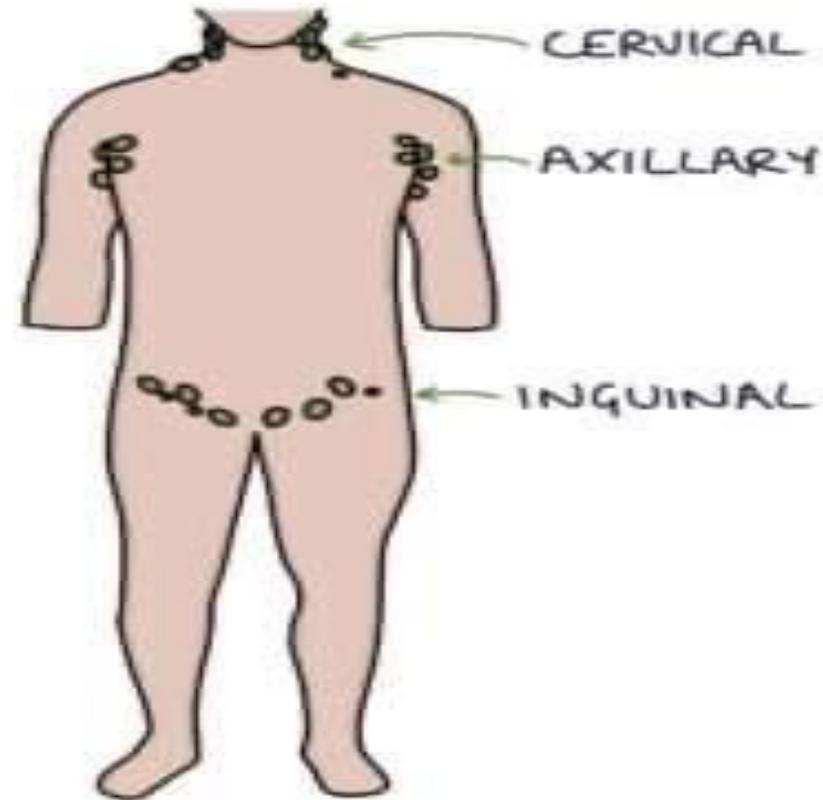
Q6) a 55 year old patient comes to the hospital with lymphadenopathy, a cervical lymph node biopsy confirmed the presence of Reed-sternberg Cells . what is your diagnosis ?

a)Hodgkin lymphoma

b)Haemolytic anemia

c)TB

d)leukaemia



Q10: NOT among diagnosis:

- **Non-Hodgkin Lymphoma**

