

## Tests for Exam.

### Gastroenterology

1. A 42-year-old man with cirrhosis related to hepatitis C and alcohol abuse has ascites requiring frequent large-volume paracentesis. All of the following therapies would be indicated for this patient EXCEPT.
2. Bacterial cholangitis is treated with which of the following drugs?
3. Bile from the gallbladder has which of the following characteristics?
4. Choose clinical subtypes of irritable bowel syndrome.
5. Choose criteria for globus.
6. Choose diagnostic criteria for functional biliary sphincter Oddi disorder.
7. Choose diagnostic criteria for functional biliary sphincter Oddi disorder.
8. Choose diagnostic criteria for functional pancreatic sphincter Oddi disorder.
9. Choose etiopathogenic factors of celiac disease.
10. Choose functional esophageal disorder.
11. Choose how many genotypes from chronic hepatitis C virus do exist now.
12. Choose incorrect criteria of functional dyspepsia.
13. Choose pathogenetic treatment of inflammatory bowel diseases.
14. Choose signs more characteristic for Crohn's disease than for ulcerative colitis.
15. Choose signs more characteristic for ulcerative colitis than for Crohn's disease.
16. Choose skin extraintestinal manifestations of inflammatory bowel diseases.
17. Choose statements that confirm the autoimmune pathogenesis of autoimmune hepatitis.
18. Choose the basic drug treatment for irritable bowel syndrome.
19. Choose the biliary tract components.
20. Choose the categories of patients with chronic hepatitis C, in which progression of liver diseases is more likely.
21. Choose the causes of lymphocytic gastritis.
22. Choose the complications of gastroesophageal reflux disease.
23. Choose the complications of GERD.
24. Choose the components of bile.
25. Choose the daily amount of pure alcohol, harmless (inoffensive) for liver in women.
26. Choose the definition of eosinophilic gastritis.
27. Choose the diagnostic criteria for biliary pain.
28. Choose the diagnostic methods that documented mucosal damage in GERD.
29. Choose the direct-acting antiviral agent (DAA) for chronic hepatitis C.
30. Choose the drug that is NOT used in first-line treatment of H.pylori
31. Choose the drug that sofosbuvir-containing combination is contraindicated with.
32. Choose the drug treatment for irritable bowel syndrome with diarrhea.
33. Choose the drug treatment in case of irritable bowel syndrome with constipation.
34. Choose the drugs implicated in pathogenetic treatment of cholestatic liver cirrhosis.
35. Choose the drugs that NOT implicated in pathogenetic treatment of liver cirrhosis induced by Wilson's disease.
36. Choose the endoscopic features of Crohn's disease.
37. Choose the extrahepatic complications of chronic hepatitis C.
38. Choose the factors contributing to gallbladder and biliary tract pathology.
39. Choose the factors contributing to gallbladder inflammation.
40. Choose the factors that determine the selection of treatment regimen in chronic hepatitis C.
41. Choose the false statement about the endoscopic types of gastritis.
42. Choose the feature which is not characteristic for irritable bowel syndrome.
43. Choose the features of pain syndrome in biliary tract dysfunction.
44. Choose the features of the tissue biopsy in chronic gastritis.
45. Choose the form of gastritis, when surgical treatment can be used.
46. Choose the functional gallbladder and sphincter of Oddi disorders.
47. Choose the functions of bile acids.

48. Choose the general recommendations included in the management of alcoholic hepatitis.
49. Choose the indications for corticosteroids in inflammatory bowel disease.
50. Choose the infections that should be tested in a patient with chronic viral C hepatitis prior to antiviral treatment.
51. Choose the information provided by the upper digestive endoscopy on the pathology of the esophagus.
52. Choose the informative test for assessment of fat absorption.
53. Choose the laboratory criteria for activity evaluation in ulcerative colitis.
54. Choose the main methods of celiac disease diagnostic.
55. Choose the main pathogenetic factors in angiocolitis.
56. Choose the main symptoms of achalasia.
57. Choose the medical agent for maintenance treatment in mild ulcerative colitis.
58. Choose the medical agents used in biotherapy of Crohn's disease.
59. Choose the most common antiviral therapy duration for non-cirrhotic patient with chronic hepatitis C infection, using direct-acting antiviral agents.
60. Choose the most consistent risk factor for gastric cancer.
61. Choose the most important factors that are influencing the poor outcome of H.pylori eradication.
62. Choose the most often disease, which evolved with chronic diarrhea.
63. Choose the painful points associated with biliary tract pathology.
64. Choose the recommended groups of drugs in functional dyspepsia.
65. Choose the routine laboratory tests that may suggest the presence of malabsorption.
66. Choose the signs of steatorrhea in stool examination.
67. Choose the situation that NOT request H.pylori eradication.
68. Choose the situations that may accompany the eosinophilic gastritis.
69. Choose the specific recommendations included in the management of alcoholic liver disease.
70. Choose the surgical therapy for GERD.
71. Choose the symptoms of lactose intolerance.
72. Choose the term to describe the reappearance of HCV RNA after a sustained virological response and infection is caused by a different hepatitis C virus genotype.
73. Choose the test, which should be monitored during treatment and post treatment in chronic hepatitis C in assessing response to therapy.
74. Choose the tests used in diagnosis of biliary tract dysfunction.
75. Choose the typical complications of Crohn's disease.
76. Choose the treatment in functional biliary system disorders.
77. Choose the treatment in severe functional disorders.
78. Choose the treatment of spontaneous bacterial peritonitis which reduces the incidence of renal impairment and improves hospital survival compared with antibiotics given alone.
79. Choose the typical features of ulcerative colitis.
80. Choose which of autoantibodies can more often be present in patients with chronic hepatitis C.
81. Choose, what investigation does the definitive diagnosis of Primary sclerosing cholangitis require.
82. Describe in which setting can occur isolated detection of anti-HBc.
83. Describe the determinants for natural course of chronic HBV infection.
84. Describe the peculiarities for antiviral therapy in pregnancy.
85. Describe what is the most appropriate therapeutic option for chronic hepatitis D.
86. Determine the state characteristic for chronic HDV infection.
87. Determine the state TRUE for coinfection between HBV and HCV.
88. Determine the TRUE statements of superinfection between of HBV and HDV.
89. Determine which of the following statements about viral hepatitis are FALSE.
90. Find the characteristic symptoms of GERD.
91. High (>1.1 g/dL) serum-ascites albumin gradient is consistent with all of the following diagnoses, EXCEPT.
92. How do you define sustained viral response of hepatitis C treatment?
93. Identify confirmatory state of hepatitis delta with active viral replication.
94. Identify drugs with beneficial action on mesenchymal inflammation in case of autoimmune hepatitis.
95. Identify indications for upper digestive endoscopy in case of gastroesophageal reflux disease.

96. Identify pathologies which increase the risk for refractory ascites.
97. Identify the characteristic sign of hepatocellular insufficiency.
98. Identify the characteristics of the discriminating function (DF) / Maddrey Score.
99. Identify the common cause of liver cirrhosis.
100. Identify the component of the etiological treatment in liver cirrhosis.
101. Identify the components of discriminant function (DF) or Maddrey Score in alcoholic liver disease.
102. Identify the correct statements regarding alcoholic steatosis.
103. Identify the diagnostic criteria for autoimmune hepatitis.
104. Identify the diagnostic signs characteristic for autoimmune hepatitis.
105. Identify the direct markers of alcohol use in patients with alcoholic liver disease.
106. Identify the drugs used in the treatment of autoimmune hepatitis.
107. Identify the ethiotrop treatment in decompensated liver cirrhosis, viral etiology.
108. Identify the factor contributing to the development of alcoholic steatohepatitis.
109. Identify the factors involved in the production of alcoholic steatohepatitis.
110. Identify the factors involved in the production of alcoholic steatohepatitis.
111. Identify the group of drugs indicated for the primary prophylaxis of rupture of esophageal varices.
112. Identify the laboratory tests characteristic for autoimmune hepatitis.
113. Identify the mechanisms that contribute to the production of alcoholic hepatic steatosis.
114. Identify the metabolic causes that are leading to liver cirrhosis .
115. Identify the method required for diagnosis of atypical evolution of spontaneous bacterial peritonitis.
116. Identify the most common cause of liver cirrhosis.
117. Identify the parameters of the presence HBV in the body.
118. Identify the pathogenetic effects of corticosteroids in the treatment of alcoholic hepatitis.
119. Identify the pathogenetic mechanism involved in the production of autoimmune hepatitis.
120. Identify the pathology for which the presence of anti-mitochondrial antibody-M2 is characteristic.
121. Identify the peculiarities of coinfection between HBV and HDV.
122. Identify the possible clinical manifestations of autoimmune hepatitis.
123. Identify the signs characteristic for autoimmune hepatitis.
124. Identify the syndrome that produces in a chronic alcoholic user the triad. cholestatic jaundice, mixed hyperlipidemia, with a predominance of triglycerides, hemolytic anemia.
125. Identify the trigger factors that may be involved in the pathogenesis of autoimmune hepatitis.
126. Identify the TRUE characteristics for hepatitis delta VHD has.
127. Identify the type of therapy that is NOT effective in the treatment of alcoholic hepatitis.
128. Identify the vascular causes that are heading to liver cirrhosis .
129. Identify which is NOT a rare cause of liver cirrhosis.
130. Identify which of the following is NOT considered effective in preventing HBV.
131. Identify which of the following phrases defines the refractory ascites.
132. Identify which of the following statements relate to HBsAg.
133. Identify which of the transmission routes does NOT refer to the VHD.
134. Identify which type of autoantibodies is characteristic for autoimmune hepatitis type 2.
135. Identify which type of autoantibodies is characteristic for autoimmune hepatitis type 1.
136. Impairment of the bile flux in cholangitis is most commonly caused by which of the following?
137. In the treatment of hepatic encephalopathy are used the following drugs, EXCEPT.
138. In which case initial dysphagia to liquids (or more pronounced to liquid than to solid foods) is typical.
139. In which case long-term (24-48 h) esophageal pH recording is necessary?
140. In which cases odynophagia is NOT characteristic?
141. Indicate antibiotic with intraluminal intestinal action (with minimal systemic effect).
142. Indicate characteristic for DNA molecule of the HBV.
143. Indicate characteristic histological changes in celiac disease.
144. Indicate clinical types of functional dyspepsia.
145. Indicate criteria for functional heartburn.
146. Indicate criteria for globus.
147. Indicate diagnostic criteria for irritable bowel syndrome.
148. Indicate functional esophageal disorders.

149. Indicate functional gastroduodenal disorders.
150. Indicate liver pathology, which requires immunosuppressive treatment.
151. Indicate sign that characterized dysphagia.
152. Indicate strategies to prevent nosocomial transmission of hepatitis B.
153. Indicate supportive criteria for biliary pain.
154. Indicate the alternative treatment that may be administered for reduces the risk of recurrent spontaneous bacterial peritonitis .
155. Indicate the anatomical structure of the brain typically affected in Wilson's disease.
156. Indicate the basic dietary recommendation in case of irritable bowel syndrome with diarrhea.
157. Indicate the basic dietary recommendation in case of irritable bowel syndrome with constipation.
158. Indicate the basic dietary recommendation in case of irritable bowel syndrome with diarrhea.
159. Indicate the basic dietary recommendation in case of irritable bowel syndrome with constipation.
160. Indicate the characteristic for advanced liver disease.
161. Indicate the characteristic neurological signs in Wilson's disease.
162. Indicate the characteristic of hepatitis delta virus (VHD).
163. Indicate the characteristics of alcoholic steatosis.
164. Indicate the characteristics of Crohn's disease.
165. Indicate the characteristics of inflammatory changes in ulcerative colitis.
166. Indicate the characteristics of MALT lymphomas.
167. Indicate the characteristics of positive result for Anti VHD.
168. Indicate the clinical features of irritable bowel syndrome.
169. Indicate the clinical manifestation of malabsorption syndrome.
170. Indicate the clinical manifestations of Crohn's disease.
171. Indicate the common complications of Crohn's disease.
172. Indicate the condition of HBV replication.
173. Indicate the condition where is presented metaplasia of malpighiense esophageal mucosa with intestinal columnar mucosa.
174. Indicate the conditions influenced failure to antiviral therapy in HBV.
175. Indicate the correct statement about irritable bowel syndrome.
176. Indicate the correct statement about the diagnosis of autoimmune hepatitis.
177. Indicate the criteria for activity evaluation in ulcerative colitis.
178. Indicate the criteria for functional heartburn.
179. Indicate the criteria for moderate degree of malabsorption.
180. Indicate the definition of lymphocytic gastritis.
181. Indicate the diagnostic criteria for irritable bowel syndrome.
182. Indicate the diagnostic methods that documented and quantitated the GERD.
183. Indicate the drug treatment in case of irritable bowel syndrome with constipation.
184. Indicate the drugs from the neurotropic antispastic group.
185. Indicate the drugs used in treatment of ulcerative colitis.
186. Indicate the endpoint of antiviral treatment in HBV.
187. Indicate the etiology of hemochromatosis.
188. Indicate the extraesophageal manifestations of GERD.
189. Indicate the extraesophageal manifestations of GERD.
190. Indicate the factors that determine the type of symptoms in the short bowel syndrome.
191. Indicate the factors that may contribute to GERD.
192. Indicate the forms of acute gastritis.
193. Indicate the gold standard in diagnosis of sphincter Oddi dysfunction.
194. Indicate the groups of people that should be suspected and screened for hemochromatosis.
195. Indicate the incorrect clinical form of irritable bowel syndrome.
196. Indicate the invasive tests for the diagnostic of H-pylori infection.
197. Indicate the laboratory tests suggestive for alcoholic liver disease.
198. Indicate the laboratory tests used to diagnose hemochromatosis.
199. Indicate the likelihood of remaining chronically infected after acute hepatitis C infection.
200. Indicate the main clinical features of ulcerative colitis.
201. Indicate the main symptoms characteristic for achalasia.

202. Indicate the main topographic patterns of H. pylori associated chronic gastritis.
203. Indicate the major pathogenetic factors in inflammatory bowel diseases.
204. Indicate the major symptoms of ulcerative colitis.
205. Indicate the markers of alcohol use in patients with alcoholic liver disease.
206. Indicate the medical agent for maintenance treatment in severe ulcerative colitis.
207. Indicate the medical agents used in biotherapy of ulcerative colitis.
208. Indicate the method of management of the upper digestive haemorrhage by the breakage of esophageal varicose veins using mechanical tamponade.
209. Indicate the method that is not required for the diagnosis of functional dyspepsia.
210. Indicate the most common cause of death in hemochromatosis.
211. Indicate the most common clinical signs in a patient with acute alcoholic hepatitis.
212. Indicate the most common gastrointestinal disorders in the general practice.
213. Indicate the pathological state in which H. pylori plays a role in the development.
214. Indicate the possible treatment of malabsorption.
215. Indicate the primary bile acids.
216. Indicate the products which contain gliadin.
217. Indicate the products which may contain gliadin.
218. Indicate the regions with high prevalence of inflammatory bowel diseases.
219. Indicate the risk factors for neoplasia in Crohn's disease.
220. Indicate the role of liver biopsy in diagnosis of Wilson's disease.
221. Indicate the set of results that most likely can describe chronic hepatitis C in reactivation phase.
222. Indicate the side effects of azathioprine treatment in autoimmune hepatitis.
223. Indicate the sign of achalasia.
224. Indicate the signs of Crohn's disease presented on this image.
225. Indicate the signs of Crohn's disease presented on this image.
226. Indicate the signs of ulcerative colitis presented on this image.
227. Indicate the signs of ulcerative colitis presented on this image.
228. Indicate the specific sign of portal hypertension in liver cirrhosis.
229. Indicate the state characteristic for simultaneous presence of anti-HBs and anti-HBc in serum.
230. Indicate the suggestive criterion for the diagnosis of autoimmune hepatitis.
231. Indicate the suggestive criterion for the diagnosis of liver disease induced by alcohol use.
232. Indicate the suggestive sign for an alcoholic hepatopathy.
233. Indicate the symptoms of acute gastritis.
234. Indicate the tests before antiviral treatment in HBV.
235. Indicate the typical signs of ulcerative colitis presented on this image.
236. Indicate the treatment in functional biliary sphincter Oddi disorder
237. Indicate the true statements about gastritis.
238. Indicate the typical location of eye disorders in Wilson's disease.
239. Indicate the typically affected organs in hemochromatosis.
240. Indicate the vitamins that are absorbed by the bile?
241. Indicate typical Crohn's disease complications presented on this image.
242. Indicate what include the palliative approach in patients with esophageal cancers.
243. Indicate what investigation can be used to measure the gallbladder ejection fraction.
244. Indicate what is the clearance of HBsAg from the blood.
245. Indicate what recommendations include the management of mild GERD.
246. Indicate what signs characterized chronic cholestatic syndrome in primary sclerosing cholangitis.
247. Indicate what signs may be due to postcholecystectomy syndromes.
248. Indicate where in the hepatic cell hepatitis C virus antigens are localized.
249. Indicate which clinical symptom is NOT characteristic for autoimmune hepatitis.
250. Indicate which is the therapy of choice in patients with large-duct disease usually from alcohol-induced chronic pancreatitis?
251. Indicate which may cause defective bile acid conjugation.
252. Indicate which of the following statements are correct for autoimmune hepatitis.
253. Indicate which prognostic score is NOT specific for acute alcoholic hepatitis.
254. Indicate who discovered hepatitis delta virus.

255. Indicate which parameters include coinfection between HBV and HDV.
256. Indicate the possible causes of malabsorption in severe duodenitis.
257. Infectious cholangitis may lead to which of the following biochemical changes?
258. List groups of antibacterial drugs involved in treatment of the spontaneous bacterial peritonitis.
259. List the basic principles in primary prophylaxis of spontaneous bacterial peritonitis.
260. List the biochemical changes that may occur in autoimmune hepatitis.
261. List the elements that characterize autoimmune hepatitis.
262. List the features that are included in the definition of cirrhosis .
263. List the features that are NOT included in the definition of cirrhosis .
264. List the groups of antibacterial preparations involved in the treatment of spontaneous bacterial peritonitis.
265. List the items that do NOT relate to refractory ascites.
266. List the items which induce mesenchymal activity in the liver cirrhosis .
267. List the laboratory tests characteristic for autoimmune hepatitis.
268. List the mandatory steps for diagnosing functional dyspepsia.
269. List the options below which explains refractory ascites.
270. List the pathophysiological consequences of portal hypertension.
271. Mark antibacterial drugs which are NOT used in treatment of spontaneous bacterial peritonitis.
272. Mark antibacterial preparations NOT used in the treatment of spontaneous bacterial peritonitis.
273. Mark feature that relates to angiocholitis inflammation (cholangitis).
274. Mark for which pathology is more suggestive the presence in hepatocytes of the "Mallory corpuscles".
275. Mark right statement about the ratio of pepsinogen I and pepsinogen II.
276. Mark that type of autoantibodies are specific for autoimmune hepatitis.
277. Mark the alternative method of treatment for non-responder autoimmune hepatitis.
278. Mark the autoimmune extrahepatic manifestations that are found in autoimmune hepatitis.
279. Mark the basic therapy used in the treatment of alcoholic hepatitis.
280. Mark the characteristics of alcoholic liver disease.
281. Mark the correct statement about the pathogenetic treatment of autoimmune hepatitis.
282. Mark the correct statement for the diagnosis of alcoholic hepatitis.
283. Mark the correct statements regarding liver-kidney microsomal antibody (anti-LKM-1) in autoimmune hepatitis (AIH).
284. Mark the correct statements that characterize autoimmune hepatitis.
285. Mark the group of drugs included in the pathogenetic treatment of the compensated cirrhosis, autoimmune etiology.
286. Mark the group of drugs that are included in the pathogenetic treatment of compensated cirrhosis, alcoholic etiology.
287. Mark the groups of drug used in pathogenetic treatment of cirrhosis by non alcoholic fatty liver disease.
288. Mark the groups of drug used in pathogenetic treatment of cirrhosis by non alcoholic fatty liver disease.
289. Mark the important points of emergency management of bleeding .
290. Mark the initial symptoms in the vast majority of patients with esophageal cancers.
291. Mark the interventions that are NOT recommended in the prevention of recurrent variceal hemorrhage .
292. Mark the interventions that are recommended in the prevention of recurrent variceal hemorrhage .
293. Mark the lab parameter that is NOT part of liver cirrhosis.
294. Mark the laboratory changes found in alcoholic liver disease.
295. Mark the laboratory data characteristic for autoimmune hepatitis type 2.
296. Mark the nutritional indications for the patient with hepatic encephalopathy.
297. Mark the pathologies, associated with autoimmune hepatitis in case of overlap syndrome.
298. Mark the principles that includes the pathogenetic treatment of compensated cirrhosis of alcoholic etiology.
299. Mark the signs suggestive for alcoholic liver disease.
300. Mark the sources of haematemesis cause by the liver cirrhosis.

301. Mark the specific medication used in the pathogenetic treatment of autoimmune hepatitis.
302. Mark the specific medication used in the pathogenetic treatment of autoimmune hepatitis.
303. Mark the symptoms that are not characteristic for acute gastritis.
304. Mark the test that indirectly indicates alcohol use in a patient with liver disease.
305. Mark the therapy goals in GERD.
306. Mark when it is possible refractory ascites.
307. Mark which category of people most commonly develop autoimmune hepatitis.
308. Mark which of the following statements regarding anti-nuclear antibodies (ANA) in autoimmune hepatitis (AIH) is NOT correct.
309. Mark which of the following statements regarding liver-kidney microsomal antibody (anti-LKM-1) is NOT correct.
310. Mark which symptoms are characteristic of autoimmune hepatitis.
311. Mention de definition of ischemic gastritis.
312. Mention the causes of false-negative results for H.pylori of invasive and non-invasive methods.
313. Mention the characteristics of the autoimmune gastritis.
314. Mention the classification of gastritis based on time course.
315. Mention the condition where melena is associated with hepatosplenomegaly.
316. Mention the diseases with which a differential diagnose must be provided in Menetrier's disease.
317. Mention the endoscopic classification of gastritis.
318. Mention the endoscopic findings in a chemical gastropathy.
319. Mention the etiological factors of chronic reactive chemical gastropathy.
320. Mention the factor affecting H.pylori eradication that is NOT bacterial- dependent.
321. Mention the factor affecting H.pylori eradication that is NOT host-dependent.
322. Mention the feature that characterizes the indefinite gastric dysplasia according to Padova Classification.
323. Mention the feature that is NOT about endoscopic findings in lymphocytic gastritis.
324. Mention the hemathologic changes that may occur in autoimmune gastritis.
325. Mention the histological effects of high radiation doses on the gastric mucosa.
326. Mention the histopathological changes that occur in lymphocytic gastritis.
327. Mention the indications and mechanism of action of Baclofen in GERD.
328. Mention the microorganisms that are associated with pflegmonous gastritis.
329. Mention the number of biopsies pieces, that should be taken according to Sydney Classification.
330. Mention the phases of chronic gastritis.
331. Mention the purpose of the OIGA system gastritis staging.
332. Mention the situation in which the endoscopic follow-up can not be waived.
333. Mention the symptoms of Menetrier's disease.
334. Mention the true statements about H. pylori.
335. Name the cellular immunological changes that occur in autoimmune hepatitis.
336. Name the morphological changes characteristic for autoimmune hepatitis.
337. Name the most important recommendation for the treatment of alcoholic hepatitis.
338. Name the specific autoantibodies found in autoimmune hepatitis.
339. Nonoperative treatment of alkaline esophagitis does NOT include.
340. Note the paraclinical markers suggestive for acute alcoholic hepatitis.
341. Phospholipids, as a component of bile, exert which of the following functions in GI tract.
342. Pick out the specific signs of manifestation of the portal hypertension syndrome in liver cirrhosis .
343. Pick out the specific syndromes of liver cirrhosis .
344. Select "alarm" symptoms in case of gastroesophageal reflux.
345. Select alarm symptoms that exclude functional gastrointestinal disorders.
346. Select all about hepatitis B core antigen.
347. Select alternative treatment for severe alcoholic hepatitis if steroids are ineffective.
348. Select antibodies with diagnostic significance in autoimmune hepatitis.
349. Select changes in the laboratory tests, most characteristic for Wilson's disease.
350. Select characteristics for superinfection between HBV and HDV.
351. Select characteristics of unsubtyped irritable bowel syndrome.
352. Select Charcot triad ,the characteristic presentation of acute cholangitis.

353. Select clinical form of functional dyspepsia.
354. Select clinical forms of cholangitis.
355. Select common complications of ulcerative colitis.
356. Select common procedures used in the diagnosis of irritable bowel syndrome.
357. Select correct statement. irritable bowel syndrome is.
358. Select criteria for globus.
359. Select diagnostic criteria for functional abdominal pain.
360. Select diagnostic criteria for functional abdominal pain.
361. Select diagnostic criteria for functional dyspepsia.
362. Select diagnostic criteria for functional gallbladder disorder.
363. Select disease in which heartburn is the pathognomonic sign.
364. Select diseases that are included in inflammatory bowel diseases.
365. Select drugs from the group of selective myotropic antispasmodics.
366. Select endoscopic features of ulcerative colitis.
367. Select endpoints of antiviral treatment in chronic viral C hepatitis.
368. Select extrahepatic manifestations found in autoimmune hepatitis.
369. Select factors that can cause liver cirrhosis.
370. Select factors that predict a negative prognosis in alcoholic liver disease.
371. Select factors that predict a negative prognosis in alcoholic liver disease.
372. Select FALSE statement about spontaneous bacterial peritonitis.
373. Select features of Zieve syndrome in alcoholic liver disease.
374. Select for which disease is characteristic histological picture from image - periportal hepatitis with lymphoplasmocyte infiltrate.
375. Select forms of liver cirrhosis which can include in histological features of centrolobular fibrosis .
376. Select functional biliary disorders.
377. Select functional bowel disorders according to Rome IV criteria.
378. Select functional esophageal disorders.
379. Select functional gastroduodenal disorders.
380. Select functional intestinal disorder according the Roma IV criteria.
381. Select functional intestinal disorder according to Roma IV criteria.
382. Select functional intestinal disorders according to Roma IV Criteria.
383. Select gastric factors that may cause gastroesophageal reflux disease.
384. Select high-risk populations for whom hepatitis C virus infection screening is recommended.
385. Select high-risk populations for whom hepatitis C virus infection screening is recommended.
386. Select histologic lesions in chronic hepatitis C.
387. Select histological characteristic of liver cirrhosis.
388. Select histological features of alcoholic liver disease.
389. Select histologicals items that can define liver cirrhosis .
390. Select how the hepatocellular deficiency syndrome manifests in liver cirrhosis .
391. Select in which case treatment of patients with chronic hepatitis C infection should be considered without delay.
392. Select in which case treatment of patients with chronic hepatitis C infection should be considered without delay.
393. Select in which organs histologically iron is increased in hemochromatosis.
394. Select in which situation prophylactic cholecystectomy is NOT necessary.
395. Select in which state of alcoholic liver disease the use of steroids IS NOT indicated.
396. Select indication for antiviral therapy chronic hepatitis HBV.
397. Select indication for antiviral therapy in chronic hepatitis B.
398. Select informative methods for positive diagnosis of gastroesophageal reflux disease.
399. Select laboratory tests associated with relapse in ulcerative colitis.
400. Select liver functional tests which are carachteristic for hepatocelullare damage.
401. Select macroscopic changes in alcoholic steatosis.
402. Select major clinical manifestations in alcoholic liver cirrhosis.
403. Select methods of evacuation of intestinal contents in liver encephalopathy.
404. Select non-invasive tests for the assessment of fibrosis in alcoholic liver disease.



405. Select possible causes of esophageal stricture.
406. Select possible variants of liver disease in Wilson's disease.
407. Select precipitating factors of hepatic encephalopathy.
408. Select predisposing factors for cholesterol gallstone formation.
409. Select recommendation in case of finding positive Anti-HDV IgM.
410. Select recommendations for patients positive for ARN HDV quantitative.
411. Select right affirmation about differences among genotypes of hepatitis C virus.
412. Select risk factors for acquiring HBV.
413. Select situations, when anti-HCV antibodies can be false negative.
414. Select situations, when anti-HCV antibodies can be false positive.
415. Select suggestive signs for problematic alcohol use in patients with alcoholic liver disease.
416. Select suggestive ultrasound signs for alcoholic fatty liver.
417. Select the "gold standard" examination in establishing the diagnosis of hepatitis C.
418. Select the amount of beverage that corresponds to a standard portion or unit of alcohol (8-10 g pure alcohol).
419. Select the antibacterial medication used in the treatment of spontaneous bacterial peritonitis.
420. Select the antibacterial preparations of line II used in the treatment of spontaneous bacterial peritonitis.)
421. Select the antibiotics that decreases the rate of bacterial infections after variceal hemorrhage .
422. Select the antibodies that are found in 60-80% of primary sclerosing cholangitis patients.
423. Select the antiviral therapy regimen adjustments in case of cirrhotic hepatitis C virus infected patient, in order to achieve the best sustained virological response.
424. Select the area of distribution of fibrous septum in the liver cirrhosis of viral etiology.
425. Select the areas with the higher prevalence of inflammatory bowel diseases.
426. Select the autoimmune endocrine pathologies, most commonly associated with autoimmune hepatitis.
427. Select the basic drug treatment in case of functional epigstric pain.
428. Select the basic drug treatment in case of postprandial distress syndrome.
429. Select the basic syndrome that is part of the biological picture of liver cirrhosis.
430. Select the biological markers of alcohol use in alcoholic steatohepatitis.
431. Select the biological parameters which assessed liver sintetic function .
432. Select the categories of patients with chronic hepatitis C, in which progression of liver diseases is more likely.
433. Select the categories of patients, which Wilson's disease must be considered in.
434. Select the cause of anemia seen in patients with alcoholic cirrhosis.
435. Select the cause of anemia seen in patients with alcoholic cirrhosis.
436. Select the cause of functional dyspepsia.
437. Select the cause that NOT provoke the infectious esophagitis.
438. Select the cause that provoke noncardiac chest pain.
439. Select the causes of acquired iron overload.
440. Select the causes of acute gastritis.
441. Select the causes of false-positive result of H.pylori infection when the serological test is provided.
442. Select the causes of malabsorption according the pathophysiological classification.
443. Select the causes of non-specific gastritis.
444. Select the changes in the kidney which appear in case of Hepato-Renal Syndrome.
445. Select the characteristic features for a biliary stasis.
446. Select the characteristic features of compensated cirrhosis associated with hepatitis C.
447. Select the characteristic of decompensated liver cirrhosis with metabolic disorders.
448. Select the characteristic sign of hepatocellular insufficiency.
449. Select the characteristic statements for Barrett's esophagus.
450. Select the characteristic statements for biliary dysfunction.
451. Select the characteristics for hepatitis delta.
452. Select the characteristics of acute gastritis that are often detected.
453. Select the characteristics of diarrheic type of irritable bowel syndrome.
454. Select the characteristics of functional diarrhea.

455. Select the characteristics of functional diarrhea.
456. Select the characteristics of functional gallbladder disorders.
457. Select the characteristics of Menetrier's disease.
458. Select the clinical manifestation of malabsorption syndrome.
459. Select the clinical manifestations of autoimmune hepatitis.
460. Select the clinical manifestations of Zollinger-Ellison syndrome.
461. Select the clinical signs of B12 malabsorption.
462. Select the clinical syndrome that is part of liver cirrhosis.
463. Select the common morphological picture, found on liver biopsy in hemochromatosis.
464. Select the complication of advanced cirrhosis.
465. Select the complications of liver cirrhosis.
466. Select the complications of phlegmonous gastritis.
467. Select the complications of portal hypertension.
468. Select the components of bile.
469. Select the components of the classic triad in hemochromatosis.
470. Select the condition that Barrett's esophagus can lead.
471. Select the condition that can cause bacterial overgrowth syndrome.
472. Select the condition that may cause malabsorption by luminal phase disorders (maldigestion).
473. Select the condition that NOT the cause of the refractory ascites.
474. Select the condition when appears Anti-HDV IgM in serum.
475. Select the conditions for reactivation of HBV infection.
476. Select the conditions in which is useful quantitative tests for HBV DNA in serum.
477. Select the contraindication for therapeutic paracentesis in refractory ascites in patients with liver cirrhosis.
478. Select the contraindications for using of corticosteroids in the treatment of alcoholic liver disease.
479. Select the correct definitions of malabsorption in clinical practice (in large sense).
480. Select the correct scheme of prednisolone medication for the treatment of acute alcoholic hepatitis.
481. Select the correct statements about Mallory bodies.
482. Select the correct statements about the effect of alcohol in the development of liver steatosis.
483. Select the correct statements about the pathogenesis of alcoholic liver disease.
484. Select the correct statements in the treatment and monitoring of compensated liver cirrhosis, viral etiology type B.
485. Select the correct statements regarding antinuclear antibodies (ANA) in autoimmune hepatitis (AIH).
486. Select the correct statements regarding autoimmune hepatitis.
487. Select the correct statements regarding smooth muscle fiber antibodies (SMA) in autoimmune hepatitis (AIH).
488. Select the correct statements regarding the etiotropic treatment of compensated liver cirrhosis viral etiology type B.
489. Select the correct variant of the changes characteristic of hereditary hemochromatosis.
490. Select the correct variant of the Wilson's disease characteristic changes.
491. Select the criteria for antiviral treatment response in HBV.
492. Select the criteria for hospitalization of a patient with gastroesophageal reflux disease.
493. Select the criteria of Sydney Classification.
494. Select the criterion that is NOT a risk factor for the progression of alcoholic liver disease.
495. Select the daily amount of pure alcohol, harmless (inoffensive) for liver in men.
496. Select the diagnostic criteria for biliary tract dysfunction.
497. Select the diagnostic criteria for Oddi's sphincter dysfunction (pancreatic type).
498. Select the diagnostic criteria for Oddi's sphincter dysfunction (biliary type).
499. Select the diagnostic methods that are useful for the diagnosis of hemochromatosis.
500. Select the diagnostic tests of GERD.
501. Select the disease that can be associated to eosinophilic gastritis.
502. Select the disease that can cause the malabsorption of fat-soluble vitamins.
503. Select the drug that is NOT used in triple therapy of H.pylori eradication.
504. Select the drug that may help control pruritus in primary sclerosing cholangitis.
505. Select the drug which is the most effective and commonly used in GERD.

506. Select the drugs (vasopressors) implicated in control of hemorrhage and early rebleeding .
507. Select the drugs recommended for treatment of irritable bowel syndrome with diarrhea.
508. Select the drugs that increase levels of GGT in the liver cirrhosis.
509. Select the drugs that stimulate hepatic function of the formation of bile.
510. Select the drugs used in the current treatment of chronic viral C hepatitis.
511. Select the drugs used in the current treatment of chronic viral C hepatitis.
512. Select the drugs used in treatment of autoimmune hepatitis.
513. Select the drugs used in treatment of autoimmune liver cirrhosis.
514. Select the drugs used in treatment of Wilson's disease.
515. Select the drugs used in treatment of Wilson's disease.
516. Select the drugs with dissolve action in gallstones.
517. Select the duration of treatment with copper chelators in patients with Wilson's disease.
518. Select the effects of Propranolol in patients with liver cirrhosis.
519. Select the element that contributes to the appearance of upper digestive haemorrhages in the liver cirrhosis.
520. Select the element that contributes to the appearance of upper digestive haemorrhages in the liver cirrhosis .
521. Select the enzyme systems account for metabolism of alcohol in the liver.
522. Select the enzymes which participate in digestion.
523. Select the epidemiological features of inflammatory bowel diseases.
524. Select the etiopathogenetic factors of bacterial overgrowth syndrome.
525. Select the evolution forms of Crohn's disease.
526. Select the examination used to monitoring anticopper effect of drugs in Wilson's disease.
527. Select the examination, useful in the diagnosis of Wilson's disease.
528. Select the examination, useful in the diagnosis of Wilson's disease.
529. Select the extraesophageal manifestations of GERD.
530. Select the extrahepatic manifestations of chronic hepatitis C.
531. Select the extrahepatic manifestations that can be found in autoimmune hepatitis.
532. Select the factor that can precipitate hepatic encephalopathy.
533. Select the factors involved in the pathogenesis of ascites in liver cirrhosis.
534. Select the factors that determine choice of the regimen of antiviral therapy in a patient with chronic hepatitis C infection.
535. Select the factors that determine choice of the regimen of antiviral therapy in a patient with chronic hepatitis C infection.
536. Select the factors which are related with squamous cell esophageal cancer.
537. Select the factors, which can have negative influence on progression of chronic hepatitis C.
538. Select the features of decompensated liver cirrhosis with portal hypertension.
539. Select the first step in the treatment of refractory ascites in patients with liver cirrhosis.
540. Select the foods that should be avoided by patients with Wilson's disease.
541. Select the foods that should be avoided by patients with Wilson's disease.
542. Select the functions of sphincter Oddi.
543. Select the gall bladder projection point on the abdomen.
544. Select the gastroenterological disease that can be frequently associated with autoimmune hepatitis.
545. Select the haematological changes what can be present in autoimmune hepatitis.
546. Select the HBV antigens.
547. Select the high prevalence areas of HBV.
548. Select the histologic abnormalities in the liver in Wilson's disease.
549. Select the histologic abnormalities in the liver in Wilson's disease.
550. Select the histological characteristic of the lymphocytic gastritis.
551. Select the histological characteristics of CMV gastritis.
552. Select the importance of HDV RNA quantitative.
553. Select the indications for parenteral nutrition in patients with hepatic encephalopathy.
554. Select the indications for the administration of corticosteroids in alcoholic hepatitis.
555. Select the indications of supplemental treatment with another group of antibiotics in the treatment of spontaneous bacterial peritonitis.

556. Select the indirect alcohol consumption markers in patients with alcoholic liver disease.
557. Select the investigations that should be done to screen subjects for hemochromatosis.
558. Select the lab parameter that are NOT a part of liver cirrhosis.
559. Select the laboratory abnormality , first detected after infection with hepatitis C virus.
560. Select the laboratory index that reflects the severity of acute alcoholic hepatitis.
561. Select the liver area that is specifically affected in case of alcoholic liver disease.
562. Select the liver biopsy findings characteristic for alcoholic liver disease.
563. Select the liver disease defined by the histological picture in the image.
564. Select the main clinical features of Crohn's disease.
565. Select the main goals of antiviral therapy for patients with HBeAg negative HBV.
566. Select the mainstay of management in autoimmune hepatitis.
567. Select the markers characteristic for autoimmune cirrhosis.
568. Select the markers characteristics for autoimmune cirrhosis.
569. Select the mechanisms that are important in regulating bile flow.
570. Select the method of assessment of the first degree ascites.
571. Select the method which is NOT recommended in diagnosis of irritable bowel syndrome.
572. Select the modes of hepatitis C virus transmission.
573. Select the morphological type of cirrhosis of ethanolic etiology.
574. Select the morphological type of cirrhosis of viral etiology.
575. Select the most characteristic eye disorder in Wilson's disease.
576. Select the most common cardiac manifestation in hemochromatosis.
577. Select the most common cause of cirrhosis.
578. Select the most common cause of upper gastrointestinal bleeding.
579. Select the most common hematological disorder in Wilson's disease.
580. Select the most common risk population for HDV infection.
581. Select the most common symptom for patients with alcoholic fatty liver.
582. Select the most common symptom of chronic hepatitis C.
583. Select the most common symptom of the acute gastritis.
584. Select the most effective treatment option for severe alcoholic hepatitis.
585. Select the most frequent causes that lead to liver cirrhosis .
586. Select the most important drugs that should be generally avoided during treatment of chronic hepatitis C infection because of drug-drug interaction with most of direct acting antiviral agents.
587. Select the most important investigation that confirms the degree of alcoholic hepatic steatosis.
588. Select the most important mode of hepatitis C virus transmission.
589. Select the most important risk factor for necro-inflammation and progression to cirrhosis in patients with chronic alcohol-induced liver disease.
590. Select the most informative diagnostic method for autoimmune hepatitis.
591. Select the most often cause of dyspepsia.
592. Select the most popular antiviral regimen used in genotype 1 chronic hepatitis C virus infection treatment.
593. Select the most recommended therapeutic option in the treatment of autoimmune hepatitis.
594. Select the most sensitive tests for the H. pylori infection diagnostic.
595. Select the non-bismuth quadruple therapy of H.pylori eradication.
596. Select the non-invasive methods for the diagnostic of the H.pylori infection
597. Select the non-specific causes of chronic gastritis.
598. Select the nutritional features of patients with hepatic encephalopathy in stages III, IV.
599. Select the organs typically affected in Wilson's disease.
600. Select the pangenotypic regimen in the treatment of chronic hepatitis C infection.
601. Select the paraclinic element that contributes to the appearance of hemorrhagic syndrome in cirrhosis.
602. Select the parts of hepatitis C virus, direct-acting antiviral drugs interfere with.
603. Select the pattern of chronic hepatitis B with highly replicative phase.
604. Select the pathogenetic element that contributes to the appearance of hemorrhage in cirrhosis.
605. Select the pathogenetic mechanism of copper excess in Wilson's disease.
606. Select the pathology associated with celiac disease.

607. Select the pathophysiological mechanism of iron overload in hemochromatosis.
608. Select the possible clinical forms of celiac disease.
609. Select the possible complications of paraesophageal hernias.
610. Select the possible regions of affectation in Crohn's disease.
611. Select the rarer causes that are leading to liver cirrhosis .
612. Select the recommended drugs in functional dyspepsia.
613. Select the recommended methods to treat achalasia.
614. Select the right affirmation about post-treatment follow-up of patients with chronic viral C infection, who achieve a sustained virological response (SVR).
615. Select the right affirmation about Wilson's disease.
616. Select the right affirmations about antiviral treatment of patients with chronic hepatitis C.
617. Select the right answer about pflgmonous gastritis.
618. Select the right answers about lymphocytic gastritis.
619. Select the risk factors for alcoholic liver disease.
620. Select the risk factors for bleeding from esophageal varices.
621. Select the risk factors for neoplasia in ulcerative colitis.
622. Select the risk factors for progression of liver disease in patients with chronic hepatitis C.
623. Select the route of hepatitis delta virus VHD transmission.
624. Select the routes of HBV transmission.
625. Select the second line drugs used to treat autoimmune hepatitis in non-azathioprine responder patients.
626. Select the secondary bile acids.
627. Select the serological markers of celiac disease.
628. Select the sign that characterized hematemesis.
629. Select the signs of achalasia at the barium swallow.
630. Select the signs of alcohol consumption in a patient with liver disease.
631. Select the signs of bacterial overgrowth syndrome.
632. Select the signs of hepatocellular failure in liver cirrhosis.
633. Select the signs of latent form of celiac disease.
634. Select the sing on Doppler ultrasound specific for portal hypertension in cirrhosis.
635. Select the sings of bacterial overgrowth syndrome.
636. Select the specific causes of chronic gastritis.
637. Select the specific sign for portal hypertension in liver cirrhosis.
638. Select the stages in perinatally acquired chronic HBV infection.
639. Select the statement that is NOT about eosinophilic gastritis.
640. Select the statement that is NOT characteristic for the endoscopic findings in granulomatous gastritis.
641. Select the statement that is NOT characteristic for the lack of gastric dysplasia according to Padova Classification.
642. Select the steps after confirmation of viral replicationa by HDV.
643. Select the suggestive criteria for the diagnosis of autoimmune hepatitis.
644. Select the test suggestive for autoimmune hepatitis.
645. Select the test used to monitor the effectiveness of phlebotomies performed in patients with primary hemochromatosis.
646. Select the treatment of hepatic encephalopathy.
647. Select the trigger factors that may be involved in the pathogenesis of autoimmune hepatitis.
648. Select the TRUE characteristics aboaut antiviral therapy with nucleoside in chronic hepatitis Delta (HDV).
649. Select the true regimens about the eradication of H.pylori.
650. Select the TRUE stateents about genotype 1 of the VHD.
651. Select the true statements about eosinophilic gastritis.
652. Select the true statements about multifocal atrophic gastritis.
653. Select the true statements about the gastritis staging OLGA.
654. Select the true statements in the etiological treatment of decompensated liver cirrhosis, viral etiology.
655. Select the true statements regarding the etiological treatment of decompensated liver cirrhosis, viral etiology.

656. Select the types of antibodies which are NOT associated with autoimmune gastritis
657. Select the types of extensive resection which may cause steatorrhea.
658. Select the types of infectious gastritis that may occur in immunocompromised patients.
659. Select the typical features that inform a diagnosis of autoimmune hepatitis.
660. Select the typical laboratory abnormalities seen in acute alcoholic hepatitis.
661. Select the typical morphological changes characteristic for macrovesicular alcoholic steatosis.
662. Select the ultrasound characteristics of liver cirrhosis.
663. Select the upper endoscopy sign that is characteristic for cirrhosis.
664. Select the usual duration of chronic hepatitis C until progression to cirrhosis occurs.
665. Select the variants of evolution of HBV + HDV coinfection.
666. Select the way the jaundice syndrome expresses itself on a patient with liver cirrhosis.
667. Select what is necessary to do for patients diagnosed with hepatitis delta.
668. Select what kind of classifications are NOT used for staging gastric atrophy.
669. Select what of the following does NOT present the risk for the development of acalculous cholecystitis.
670. Select what type of major complications of cirrhosis are directly induced by portal hypertension?
671. Select which etiologic treatment is indicated in compensated liver cirrhosis, viral etiology.
672. Select which fluids can contain in high amount hepatitis virus B?
673. Select which is the efficacy of the direct-acting antiviral therapy of chronic hepatitis C.
674. Select which modes are NOT characteristic for spread hepatitis B virus.
675. Select which nutritional recommendation is indicated for the treatment of hepatic encephalopathy.
676. Select which of the following definitions is correct for Hepato-Renal Syndrome.
677. Select which of the following is NOT a specific marker for HBV.
678. Select which of the following markers are positive in HDV+HBV coinfection?
679. Select which of the following statements refer to the superinfection VHB/HBD.
680. Select which of the following statements relate to hepatitis delta?
681. Select which of the following tests is NOT strictly necessary to be performed during antiviral therapy in chronic HBV.
682. Select which of these are NOT clinical manifestations of hemochromatosis.
683. Select which parameters can be detected in HBeAg-negative chronic hepatitis B.
684. Select which statement about the hepatitis virus Delta is NOT true?
685. Select which statements about hepatitis delta VHD are TRUE.
686. Select which statements are true about Dane particle.
687. Select which statement NOT be considered as a risk factor in HBV purchase.
688. Select which symptoms are characteristic for chronic liver diseases?
689. Select who is NOT at-risk of hepatitis B?
690. Select who should be tested for the presence of anti-HDV.
691. Select what NOT include treatment of ascites in alcoholic liver cirrhosis.
692. Selected manifestation of portal hypertension in cirrhosis.
693. Selects the states TRUE for coinfection between HBV and HDV.
694. Specify for which disease is characteristic the increased level of gamma-globulins and the presence of antinuclear antibodies (ANA).
695. Specify for which disease is more characteristic the increased level of gamma-glutamyltranspeptidase (GTP).
696. Specify the clinical signs of autoimmune hepatitis.
697. Specify the methods used in the treatment of hemochromatosis.
698. Specify the symptoms and clinical signs present in hemochromatosis.
699. The antireflux barrier of esophagus contains all structures, EXCEPT.
700. The following biological and clinical parameters are bad prognostic indicators in acute alcoholic hepatitis, EXCEPT.
701. The goal of gastro esophageal reflux disease treatment are NOT to provide.
702. The pathogenic factors in gastro esophageal reflux disease are all, EXCEPT.
703. The treatment with nucleoside analogues for hepatitis B, NOT including.
704. Treatment of ascites in alcoholic liver cirrhosis NOT include.
705. Unfavorable prognosis of alcoholic hepatitis is associated with the following changes, EXCEPT.

706. What are characteristic of decompensated liver cirrhosis with metabolic disorders?
707. What are the bile components?
708. What are the cause of anemia in alcoholic cirrhosis?
709. What are the cause of anemia in alcoholic cirrhosis?
710. What are the cause of skin haemorrhagic syndrome in alcoholic cirrhosis?
711. What are the cause of skin haemorrhagic syndrome in alcoholic cirrhosis?
712. What are the characteristic of decompensated liver cirrhosis with portal hypertension.
713. What are the common risk factors for hepatocellular carcinoma?
714. What are the complications of infectious cholangitis.
715. What are the drugs of choice in treatment of biliary tract infections?
716. What are the indications for manometry?
717. What are the most common extradigestive manifestations in gastroesophageal reflux disease?
718. What are the most important risk factors involved in the development of alcoholic liver disease.
719. What are the side effects of glucocorticoids in treatment of autoimmune hepatitis.
720. What are the signs of worsening gastroesophageal reflux disease?
721. What does aphagia mean?
722. What does dysphagia means?
723. What does globus pharyngeus mean?
724. What does misdirection of food mean?
725. What does misdirection of food mean?
726. What does nausea mean?
727. What does Odynophagia mean?
728. What does phagophobia mean?
729. What does refusal to swallow mean?
730. What does regurgitation mean?
731. What does rumination mean?
732. What does the treatment of portal hypertension in liver cirrhosis include?
733. What does the treatment of portal hypertension in liver cirrhosis include?
734. What does vomiting mean?
735. What drugs can stimulate elimination of bile into the duodenum?
736. What drugs include the pathogenetic treatment of severe alcoholic hepatitis.
737. What includes the treatment of ascites under liver cirrhosis.
738. What is the best initial test in diagnosis of gallbladder and biliary tract disease?
739. What is the character of normal bile?
740. What is the difficulty swallowing in initiating?
741. What is the location of the sphincter of Oddi?
742. What is the main function of the Gallbladder?
743. What is the minimum amount of daily alcohol intake for women associated with the development of chronic liver disease?
744. What is the most common cause bacterial cholangitis?
745. What is the most common type of cholangitis?
746. What is the most pronounced side effect of ribavirin therapy in patients with chronic hepatitis C.
747. What is the most typical statement that characterizes the gastroesophageal reflux disease?
748. What is the optimal duration of immunosuppressive treatment in autoimmune hepatitis?
749. What is the physiological significance of bile?
750. What is the rate of alcoholic liver cirrhosis detected in histological studies?
751. What is TRUE about Child-Pugh score.
752. What kind of clinical manifestation is NOT specific for achalasia?
753. What kind of criteria does CHILD-PUGH classification of cirrhosis include?
754. What kind of therapeutic measures are recommended in case of repeated short-term gastrointestinal bleeding in cirrhosis?
755. What makes up Charcot's triad?
756. What may cause or be aggravated by GERD?
757. What symptom is specific for biliary stones?
758. What type of the following criteria are specific for hypersplenism?

759. What type of therapy for achalasia is effective with clinical improvement in 60% of patients at 6 months?
760. Which are manifestations of hepatocellular failure in patients with liver cirrhosis.
761. Which complications are the most common cause of death in patients with acute alcoholic hepatitis.
762. Which drug is used in the treatment of cholestasis-induced pruritus?
763. Which drugs are effective in treating gastroesophageal reflux disease?
764. Which factor is associated with an accelerated progression of hepatic fibrosis in 32-year old man with chronic hepatitis C?
765. Which hemodynamic factors contribute to the development of ascites in liver cirrhosis?
766. Which is the factor that CAN'T precipitate or exacerbate gastro esophageal reflux disease symptoms.
767. Which is the most sensitive method for diagnostic of Herpes simplex virus (HSV) esophagitis.
768. Which of the bile components induces bile formation independently of bile acids?
769. Which of the bile components is the most prevalent?
770. Which of the following antibiotics will be most useful in hepatic encephalopathy.
771. Which of the following are the causes of liver cirrhosis?
772. Which of the following clinical signs of cirrhosis is caused by portal hypertension?
773. Which of the following diseases is most commonly associated with primary sclerosing cholangitis?
774. Which of the following drugs are used in treatment of Oddi's sphincter dysfunction?
775. Which of the following drugs decrease the gallbladder tone?
776. Which of the following drugs has a litholytic activity in the treatment of gallstone disease?
777. Which of the following drugs increase the gallbladder tone?
778. Which of the following entities is a major precursor of alcoholic cirrhosis.
779. Which of the following factors can decrease the tone of the lower esophageal sphincter?
780. Which of the following function has IgA, as a component of bile?
781. Which of the following GI hormones lead to contraction of the gallbladder?
782. Which of the following haematological changes occurs in autoimmune hepatitis.
783. Which of the following is a part of extrahepatic ductal system?
784. Which of the following is characteristic for bile.
785. Which of the following is characteristic for chronic cholangitis?
786. Which of the following is NOT among the aggressive factors in the pathogenesis of reflux esophagitis?
787. Which of the following is NOT an alarming symptom in gastroesophageal reflux disease?
788. Which of the following is NOT recommended in the treatment of hepatic encephalopathy.
789. Which of the following is the most common cause of liver cirrhosis?
790. Which of the following is the most important goal of treating chronic viral hepatitis C?
791. Which of the following is the most important to determine of crystal formations in the gallbladder?
792. Which of the following physical findings are characteristic for infectious cholangitis?
793. Which of the following statements about cardiac cirrhosis is TRUE?
794. Which of the following statements is NOT true about spontaneous bacterial peritonitis (SBP)?
795. Which of the following statements is NOT true about spontaneous bacterial peritonitis (SBP)?
796. Which of the following statements regarding liver transplantation is TRUE?
797. Which of the following statements supports a favorable prognosis in liver cirrhosis?
798. Which of the following syndromes are characteristic for gallbladder and biliary tract pathology?
799. Which of the following syndromes reflects alcoholic cirrhosis in advanced stages (Child-Pugh B - C).
800. Which of the following ultrasound findings are characteristic for Caroli syndrome?
801. Which statements are characteristic for parasitic cholangitis?
802. Which tests are including initial evaluation for suspected hepatitis C?