

HEPATITIS B

1. During the acute phase manifestations range from subclinical or anicteric hepatitis to icteric hepatitis and sometimes fulminant hepatitis. Which of the following statements are true:
 - a) Fulminant hepatic failure is unusual (0.1 to 0.5 percent) and is due to massive immune-mediated lysis of infected hepatocytes.
 - b) Incubation period lasts one to four months.
 - c) The prothrombin time is a good indicator of prognosis
 - d) The concentration of alanine and aspartate aminotransferase levels (ALT/AST) of up to 1000 – 2000 units/dl is seen in the acute phase.
 - e) A persistent elevation of serum gamma GT for more than 6 months indicates a progression to chronic hepatitis.

2. Chronic Hepatitis B features the following findings:
 - a) Many patients are asymptomatic and physical examination may be normal.
 - b) Most patients will have a markedly raised serum AST and ALT level.
 - c) During exacerbations the serum ALT may be as high as 50 times the upper limit of normal and alpha-fetoprotein as high as 1000 mg/ml.
 - d) Hypersplenism (decreased white blood cell and platelet counts) is suggestive of a progression to cirrhosis.
 - e) Two major extrahepatic complications of chronic HBV are polyarteritis nodosa and glomerular disease.

3. The diagnosis of acute HBV infection is based upon:
 - a) The serological hallmark is the detection of hepatitis B surface antigen (HBsAg).
 - b) IgM antibody to hepatitis B core antigen (anti-HBc) from liver tissue.
 - c) Detection of hepatitis B surface antigen (HBsAg) and IgM antibody to hepatitis B core antigen (anti-HBc).
 - d) The detection of hepatitis B e antigen (HBeAg).
 - e) Presence of HBsAg for more than a month.

4. The treatment for hepatitis B is mainly supportive.
Treatment with nucleos(t)ide analogue is suggested in the following patients:
 - a) Those with severe hepatitis (INR $>$ 1.5)
 - b) Persistent symptoms or marked jaundice (bilirubin $>$ 10mg/dL) for more than four weeks after presentation.
 - c) Immunocompromised patients.
 - d) Patients with concomitant hepatitis C or D infection.
 - e) Patients with pre-existing liver disease and the elderly.

5. The diagnosis of acute hepatitis B is based on the detection of hepatitis B surface antigen (HBsAg).
The differential diagnosis of HBsAg positive acute hepatitis includes:
 - a) Acute hepatitis B
 - b) Exacerbations of chronic hepatitis B.
 - c) Reactivation of chronic hepatitis B.
 - d) Previous hepatitis B infection.
 - e) Immunity to hepatitis B.