Test yourself about anaphylaxis vulnerable patients

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Choose only one answer:

1- Fatal anaphylaxis may accompany:
   a) Uncontrolled asthma
   b) Mastocytosis
   c) Cardiovascular disease
   d) Concurrent use of ACE inhibitors
   e) All of the above

2- One of the following statements is incorrect:
   a) Defects in mediator degradation pathways might predispose to severe or fatal episodes
   b) Low serum PAF acetyl hydrolase activity protects from anaphylaxis
   c) During anaphylaxis, mediators released from cardiac mast cells lead to coronary artery spasm.
   d) Beta adrenergic blockers pose a risk for fatal anaphylaxis
   e) All of the above

3- The following statement is incorrect about anaphylaxis in infants:
   a) Anaphylaxis following immunization is a rare event
   b) Idiopathic anaphylaxis has been reported in infants
   c) The most common trigger is pollen allergy
   d) Anaphylaxis was reported as young as 2 weeks of age
   e) First generation H1-antihistamines potentially cause sedation and can lead to respiratory arrest in infants

4- In infancy, anaphylaxis can be difficult to recognize because:
   a) Infants cannot describe their symptoms
   b) Some signs of anaphylaxis such as flushing, dysphonia, spitting up, and incontinence are normal in infants
   c) Healthy infants have lower blood pressure and higher resting heart rate than older children
   d) Serum tryptase is commonly normal in anaphylactic episodes caused by food allergy
   e) All of the above

5- Difficulty in epinephrine therapy in infants is due to:
   a) Epinephrine does not work in infants
   b) The dose can be very low that needs care in calculation and drawing up
   c) The only epinephrine autoinjectors available provide a dose of 0.3 mg
   d) Epinephrine cannot be given IM in infants

6- The following is true about anaphylaxis in pregnancy:
   a) Hypoxic-ischemic neurologic injury was reported due to in utero anaphylaxis to food antigens that cross the placenta.
   b) Symptoms include low back pain, uterine cramps, fetal distress, preterm labor, and vulval and/or vaginal itching
   c) Iatrogenic interventions such as oxytocin, latex are common triggers
   d) If fetal distress persists, emergency CS should be considered
   e) All of the above

7- Why should you position the pregnant patient semi-recumbent on the left side?
   a) To prevent compression of inferior vena cava by the gravid uterus
   b) To prevent pressure on the liver and gall bladder
   c) For easier cardiopulmonary resuscitation
   d) All of the above

8- An incorrect statement about anaphylaxis in adolescents is:
   a) Death from anaphylaxis is very rare in teenagers
   b) They are vulnerable to anaphylaxis recurrences because of risk-taking behaviors
   c) They fail to avoid their trigger(s) and some refuse to carry epinephrine autoinjectors
   d) Involvement of close friends and lay organizations may support appropriate management
   e) All of the above

9- Cofactors that amplify or augment anaphylaxis include:
   a) Concomitant ingestion NSAID
   b) Fever
   c) Emotional stress,
   d) Travel or other disruption of routine
   e) All of the above

10- Kounis syndrome is:
   a) Epinephrine adverse effect leading to coronary spasm
   b) A cute coronary syndrome induced by mast cell activation during allergic and anaphylactic reactions
   c) Brady arrhythmia in patients with anaphylaxis
   d) Severe hypertension during an anaphylactic episode
   (Answers on page 33)