

A 30 y.o. female with rheumatoid arthritis of five years duration complains of pain in the first three fingers of her right hand over past 6 weeks. The pain seems especially severe at night often awakening her from sleep. The most likely cause is?

- A. Carpal tunnel syndrome
- B. Atlanto-axial subluxation of cervical spine
- C. Sensory peripheral neuropathy
- D. Rheumatoid vasculitis
- E. Rheumatoid arthritis without complication

A 17 y.o. patient complains of acute pain in the knee joint and $t_0 - 38.0^\circ\text{C}$. He was ill with angina 3 weeks ago. Objectively: deformation and swelling of the knee joints with skin hyperemia. Small movement causes an acute pain in the joints.

Which diagnose is the most correct?

- A. Rheumatic fever, polyarthritis
- B. Systemic lupus erythematosus
- C. Reactive polyarthritis
- D. Infectious-allergic polyarthritis
- E. Rheumatoid arthritis

A patient, aged 40, has been ill during approximately 8 years, complains of pain in the lumbar part of the spine on physical exertion, in cervical and thoracic part (especially when coughing), pain in the hip and knee joints on the right. On examination: the body is fixed in the forward inclination with head down, gluteal muscles atrophy. Spine roentgenography: ribs osteoporosis, longitudinal ligament ossification. What is the most likely diagnosis?

- A. Ankylosing spondylitis
- B. Tuberculous spondylitis
- C. Psoriatic spondyloarthropathy
- D. Spondyloarthropathy on the background of Reiter's disease
- E. Spread osteochondrosis of the vertebral column

A 18 y.o. male patient complains of pain in knee and ankle joints, temperature elevation to 39.5°C . He had a respiratory disease 1.5 week ago. On examination:

temperature- 38.5°C , swollen knee and ankle joints, pulse- 106 bpm, rhythmic, AP- 90/60 mm Hg, heart borders without changes, sounds are weakened, soft systolic apical murmur. What indicator is connected with possible etiology of the process?

- A. Antistreptolysin-O
- B. 1-antitrypsin
- C. Creatinase
- D. Rheumatic factor
- E. Seromucoid

A man, aged 30, complains of intense pain, reddening of skin, edema in the ankle-joint area, fever up to 39.0°C . Sudden onset of the illness. In the past there were similar attacks lasting 5-6 days without residual changes in the joint. The skin over the joint is hyperemic without definite borders and without infiltrative bank on the periphery. What is the most likely diagnosis?

- A. Gout
- B. Infectious arthritis
- C. Rheumatoid arthritis
- D. Erysipelatous inflammation
- E. Osteoarthritis

A 40 y.o. woman is ill with rheumatic disease with composite mitral disease with prevalence of the stenosis of left venous foramen. Complains of palpitation, fatigability, progressing dyspnea, attacks of dyspnea and hemoptysis. Now she cannot be engaged even in the easy activities.

What tactics is the most expedient?

- A. Mitral commissurotomy
- B. Conduction of current bicilinoprofilaxis
- C. Prescription of anticoagulants
- D. Prescription of venous vasodilators
- E. –

A patient has complained of great weakness for 6 years. He fell seriously ill, the illness is accompanied by body temperature rise, indisposition, pain in joints and along the legs muscles. Objectively: violet-bluish erythema around eyes and over knee joints. HR- 120/min, heart sounds are weak. Blood count: leukocytes- $12 \times 10^9/L$, ESR- 40 mm/h. What is the most probable diagnosis?

- A. Dermatomyositis
- B. Systemic lupus erythematosus
- C. Rheumatoid arthritis
- D. Atopic dermatitis
- E. Reactive polyarthritis

A 54 y.o. patient has been suffering from osteomyelitis of femoral bone for over 20 years. In the last month there appeared and gradually progressed edemata of lower extremities. Urine analysis: proteinuria - 6,6 g/L. Blood analysis: disproteinemia in form of hypoalbuminemia, increase of α_2 - and γ -globulins, ESR- 50 mm/h. What is the most probable diagnosis?

- A. Secondary renal amyloidosis
- B. Acute glomerulonephritis
- C. Myelomatosis
- D. Chronic glomerulonephritis
- E. Systemic lupus erythematosus

A 31 y.o. patient has been suffering from systemic scleroderma for 14 years.

She has been treated in hospital many times. She complains of occasional dull pain in the heart region, palpitation, dyspnea, headache, eye-lid edemata, weight loss and deformation of extremities joints. What organ affection worsens the disease prognosis?

- A. Kidneys
- B. Heart
- C. Lungs
- D. Gastrointestinal tract
- E. Skin and joints

A 60 y.o. patient complains of pain in interphalangeal joints of hand that gets worse during working. Objectively: distal and proximal joints of the II-IV fingers are deformed, with Heberden's and Bouchard's nodes, painful, stiff. X-ray picture of joints: joint spaces are constricted, there are marginal osteophytes, subchondral sclerosis. What is the most probable diagnosis?

- A. Osteoarthritis
- B. Reiter's disease
- C. Ankylosing spondylitis
- D. Rheumatic arthritis
- E. Psoriatic arthritis

A 21 y.o. man complains of having morning pains in his back for the last three months. The pain can be relieved during the day and after physical exercises. Physical examination revealed reduced mobility in the lumbar part of his spine, increase of muscle tonus in the lumbar area and sluch during moving. X-ray pattern of spine revealed bilateral sclerotic changes in the sacrolumbar part. What test will be the most necessary for confirming a diagnosis?

- A. HLA-B27
- B. ESR
- C. Rheumatoid factor
- D. Uric acid in blood plasma
- E. Antinuclear antibodies

A 40 y.o. patient with rheumatic heart disease complains of anorexia, weakness and loss of weight, breathlessness and swelling of feet. The patient had tooth extraction one month ago. On examination: t_0 - 39°C, Ps- 100/min. Auscultation: diastolic murmur in the mitral area. Petechial lesion around the clavicle; spleen was palpable.

- A. Subacute bacteria endocarditis
- B. Recurrence of rheumatic fever
- C. Thrombocytopenia purpura
- D. Mitral stenosis
- E. Aortic stenosis

A 41 y.o. woman complains of weakness, fatigue, fever up to 38°C, rash on the face skin, pain in the wrists and the elbows. On physical examination: erythematous rash on the cheeks with "butterfly" look, the wrists and elbow joints are involved symmetrically, swollen, sensitive, friction rub over the lungs, the heart sounds are weak, regular, HR- 88/min, BP- 160/95 mm Hg. Hematology shows anemia, leucopenia, lymphopenia; on urinalysis: proteinuria, leukocyturia, casts. What is the main mechanism of disease development?

- A. Production of antibodies to double stranded DNA
- B. Production of myocytes antibodies
- C. Production of antibodies to endothelial cells
- D. Production of myosin antibodies
- E. Production of antimitochondrial antibodies

A 19 y.o. girl admitted to the hospital complained of pain in the knee and fever of 38, 6°C. She is ill for 2 weeks after acute tonsillitis. On exam, hyperemia and swelling of both knees, temperature is 37, 4°C, HR- 94/min, BP- 120/80 mm Hg, and heart border is displaced to the left; S1 is weak, systolic murmur is present. Total blood count shows the following: Hb- 120 g/L, WBC- $9,8 \cdot 10^9/L$, ESR of 30 mm/L. ECG findings: the rhythm is regular, PQ = 0,24 sec. What is a causative agent of the disease?

- A. Beta-hemolytic streptococci
- B. Viral-bacterial association
- C. Autoimmune disorder
- D. Staphylococci
- E. Ricchetsia

A 54 y.o. woman has been ill with osteomyelitis of femoral bone for over 20 years. During the last month there appeared and have been steadily increasing edemata of lower extremities. Urine analysis revealed: proteinuria - 6,6 g/l. Blood analysis: disproteinemia in form of

hypoalbuminemia, raise of α_2 - and γ - globulines, ESR- 50 mm/h. What is the most probable diagnosis?

- A. Secondary renal amyloidosis
- B. Acute glomerulonephritis
- C. Myelomatosis
- D. Chronic glomerulonephritis
- E. Systemic lupus erythematosus

A 58 y.o. patient complains of weakness, leg edemata, dyspnea, anorexia. He has been suffering from chronic bronchitis for many years. During the last 5 years he has been noting intensified discharge of sputum that is often purulent. Objectively: RR- 80/min, AP- 120/80 mm Hg.

Disseminated edemata, skin is dry and pale, low turgor. In urine:

intense proteinuria, cylindruria. Specify the most probable pathological process in kidneys:

- A. Renal amyloidosis
- B. Chronic glomerulonephritis
- C. Chronic pyelonephritis
- D. Interstitial nephritis
- E. Acute glomerulonephritis

A 30 y.o. man complains of intense pain, reddening of skin, edema in the ankle-joint area, fever up to 39.0°. There was acute onset of the illness. In the past there were similar attacks lasting 5-6 days without residual changes in the joint. The skin over the joint is hyperemic without definite borders and without infiltrative bank on the periphery. What is the most likely diagnosis?

- A. Gout
- B. Infectious arthritis
- C. Rheumatoid arthritis
- D. Erysipelatous inflammation
- E. Osteoarthritis

A 34 year old woman fell ill 3 months ago after cold exposure. She complained of pain in her hand and knee joints, morning stiffness and fever up to 38.0°C. Interphalangeal, metacarpophalangeal and knee joints are swollen, hot, with reduced ranges of motions; ESR of 45mm/h, CRP (+++), Waaler-Rose test of 1:128. What group of medicines would you recommend the patient?

- A. Nonsteroidal anti-inflammatory drugs
- B. Cephalosporines
- C. Tetracyclines
- D. Sulfonamides
- E. Fluorchinolones

A 32 year old patient complains about pain in small joints of her hands, paresthesia at the tips of fingers, weakness, difficult deglutition.

She has been suffering from this for 13 years. Objectively: face animia, shortening of nail bones, skin indurations in the area of shoulder girdle are present. Roentgenological examination of lungs revealed basal pneumosclerosis. Fibrogastroscopy revealed esophagus constriction in its cardiac part. Blood count: leukocytes - $9,8 \cdot 10^9/l$, ESR - 22 mm/h, γ -globulin - 22%. What is the most probable diagnosis?

- A. Systemic scleroderma
- B. Systemic lupus erythematosus
- C. Rheumatoid arthritis
- D. Dermatomyositis
- E. Myxedema

A 25 year old patient had pharyngitis 2 weeks ago. Now he complains about body temperature rise up to 38°C, general weakness, dyspnea during walking, swelling and shifting pain in the articulations. Objectively: cyanosis of lips, rhythmic pulse of poor volume - 100 bpm. Left cardiac border deviates outwards from the medioclavicular line by 1 cm. The first heart sound is weakened on the apex, auscultation revealed systolic soufflé. What is the most probable aetiological factor that caused this pathological process?

- A. β -haemolytic streptococcus
- B. Staphylococcus
- C. Pneumococcus
- D. Virus
- E. Fungi

A 13 year old girl was admitted to the cardiological department because of pain in the muscles and joints. Examination of her face revealed an edematous erythema in form of butterfly in the region of nose bridge and cheeks. What is the most probable diagnosis?

- A. Systemic lupus erythematosus
- B. Rheumatism
- C. Dermatomyositis
- D. Rheumatoid arthritis
- E. Periarteritis nodosa

A 38 year old female patient complains about body stiffness in the morning, especially in the articulations of her upper and lower limbs, that disappears 30-60 minutes later after active movements. She has also arthritis of metacarpophalangeal and proximal phalangeal articulations, subfebrile temperature. ESR- 45 mm/h. Roentgenography revealed osteoporosis and erosion of articular surface of small hand and foot articulations. What is the most probable diagnosis?

- A. Rheumatoid arthritis
- B. Psoriatic arthropathy
- C. Osteoarthritis deformans
- D. Systemic lupus erythematosus
- E. Reactive polyarthritis

A 30 year old man complains of intense pain, reddening of skin, edema in the ankle-joint area, fever up to 39°C. There was an acute onset of the illness. In the past there were similar attacks lasting 5-6 days without residual changes in the joint. The skin over the joint is hyperemic and ill-defined, without infiltrative bank on the periphery. What is the most likely diagnosis?

- A. Gout
- B. Infectious arthritis
- C. Rheumatoid arthritis
- D. Erysipelatous inflammation
- E. Osteoarthritis

A 52 year old patient complains about headache, weakness of his upper left extremity. Neurological symptoms become more intense during physical stress of the left extremity. Pulsation on the arteries of the left extremity is sharply dampened but it remains unchanged on the carotid arteries. What is the most probable diagnosis?

- A. Occlusion of the left subclavicular artery, steal syndrome
- B. Thoracic outlet syndrome
- C. Raynaud's syndrome
- D. Takayasu's disease
- E. Occlusion of brachiocephalic trunk

A 47-year-old obese man complained of periodic attacks of acute arthritis in the st left tarsophalangeal joint. Lab exam revealed increased serum rate of uric acid. What is the diagnosis?

- A. Gout arthritis
- B. Reiter's disease
- C. Rheumatoid arthritis
- D. Rheumatic arthritis
- E. Osteoarthritis

A 33-year-old man with a history of rheumatic fever complains of fever up to 38 – 39°C, abdominal pain, dyspnea, tachycardia. Heart borders are displaced to the left by 2 cm, systolic and diastolic murmurs above aorta, BP of 160/30 mm Hg. Petechial rash occurs after measurement of blood pressure. Liver is enlarged by 3 cm, spleen is palpable. Urine is brown-yellow. What is the most likely diagnosis?

- A. Infectious endocarditis
- B. Rheumatic fever
- C. Acute hepatitis
- D. Acute nephritis
- E. Aortic regurgitation

A 35-year-old patient complains about pain and morning stiffness of hand joints and temporomandibular joints that lasts over 30 minutes. She has had these symptoms for 2 years. Objectively: edema of proximal interphalangeal digital joints and limited motions of joints. What examination should be administered?

- A. Roentgenography of hands
- B. Complete blood count
- C. Rose-Waaler reaction
- D. Immunogram
- E. Proteinogram

A 32-year-old male patient has been suffering from pain in the sacrum and coxofemoral joints, painfulness and stiffness in the lumbar spine for a year. ESR - 56 mm/h. Roentgenography revealed symptoms of bilateral sacroileitis. The patient is the carrier of HLA B27 antigen. What is the most likely diagnosis?

- A. Ankylosing spondylitis
- B. Coxarthrosis
- C. Rheumatoid arthritis
- D. Reiter's disease
- E. Spondylosis

A 30-year-old patient presented with body temperature rise up to 38, 5°C, pain in the small articulations of hands; face edemata and erythema. In blood: RBCs - $2,6 \cdot 10^{12}/l$; Hb- 98 g/l; WBCs - $2 \cdot 10^9/l$; ESR - 58 mm/h. In the urine: protein - 3,1 g/l; RBCs - 10-15 in the vision field. What disease can be suspected in this case?

- A. Systemic lupus erythematosus
- B. Sepsis
- C. Systemic scleroderma
- D. Periarteritis nodosa
- E. Acute glomerulonephritis

A 58-year-old patient complains about sensation of numbness, sudden paleness of II-IV fingers, muscle rigidity, intermittent pulse. The patient presents also with polyarthralgia, dysphagia, constipations. The patient's face is masklike, solid edema of hands is present. The heart is enlarged; auscultation revealed dry rales in lungs. In blood: ESR - 20 mm/h, crude protein - 85/l, γ -globulines - 25%. What is the most likely diagnosis?

- A. Systemic scleroderma
- B. Dermatomyositis
- C. Rheumatoid arthritis
- D. Systemic lupus erythematosus
- E. Raynaud's disease

A 32-year-old male patient has been suffering from pain in the sacrum and coxofemoral joints, painfulness and stiffness in the lumbar spine for a year. ESR - 56 mm/h. Roentgenography revealed symptoms of bilateral sacroileitis. The patient is the carrier of HLA B27 antigen. What is the most likely diagnosis?

- A. Ankylosing spondylitis
- B. Coxarthrosis
- C. Rheumatoid arthritis
- D. Reiter's disease
- E. Spondylosis

A 35-year-old patient has been admitted to a hospital for pain in the left sternoclavicular and knee joints, lumbar area. The disease has an acute character and is accompanied by fever up to 38°C. Objectively: the left sternoclavicular and knee joints are swollen and painful. In blood: WBCs - $9,5 \cdot 10^9/l$, ESR - 40 mm/h, CRP - 1,5 millimole/l, fibrinogen - 4,8 g/l, uric acid - 0,28 millimole/l. Examination of the urethra scrapings reveals chlamydia. What is the most likely diagnosis?

- A. Reiter's syndrome
- B. Rheumatic arthritis
- C. Gout
- D. Bechterew's disease
- E. Rheumatoid arthritis

A 32-year-old patient has a 3-year history of asthma attacks, that can be hardly stopped with berotec. Over a few last months he has experienced pain in the joints and sensitivity disorder of legs and feet skin. Ps - 80/min, AP - 210/100 mm Hg. In blood: eosinophilia at the rate of 15%. What disease can be suspected in this case?

- A. Periarthritis nodosa
- B. Systemic lupus erythematosus
- C. Systemic scleroderma
- D. Dermatomyositis
- E. Wegener's disease

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- A. Systemic scleroderma
- B. Dermatomyositis
- C. Rheumatoid arthritis
- D. Systemic lupus erythematosus

E. Raynaud's disease

A 35-year-old patient complains about pain and morning stiffness of hand joints and temporomandibular joints that lasts over 30 minutes. She has had these symptoms for 2 years. Objectively: edema of proximal interphalangeal digital joints and limited motions of joints. What examination should be administered?

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- A. Systemic scleroderma
- B. Dermatomyositis
- C. Rheumatoid arthritis
- D. Systemic lupus erythematosus
- E. Raynaud's disease

A 10-year-old girl was admitted to a hospital with carditis presentations. It is known from the anamnesis that two weeks ago she had exacerbation of chronic tonsillitis. What is the most likely etiological factor in this case?

- A. Streptococcus
- B. Staphylococcus
- C. Pneumococcus
- D. Klebsiella
- E. Proteus

5 weeks after hypothermia a 22-year-old patient developed fever, weakness, muscle pain, inability to move independently. Objectively: tenderness, induration of shoulder and shin muscles, restricted active movements, erythema on the anterior surface of chest. There is a periorbital edema with heliotropic erythema. Gottron's sign is present. What study is required to verify the diagnosis?

- A. Muscle biopsy
- B. Aminotransferase activity
- C. Pneumoarthrography
- D. ASO titre
- E. Rheumatoid factor

A 60-year-old male patient, who works as a construction worker, complains of pain in the right hip and knee joints, that is getting worse on exertion. These presentations have been observed for the last 5 years. Objectively: the patient is overnourished. Right knee joint is moderately deformed. Examination of other organs and systems revealed no pathology. Blood test results: WBCs - $8,2 \cdot 10^9/l$, ESR - 15 mm/h. Uric acid - 0,35 mmol/l. What is the most likely diagnosis?

- A. Deforming osteoarthritis
- B. Reactive arthritis
- C. Gout
- D. Rheumatoid arthritis
- E. Reiter's disease

A 28-year-old female patient with a six-year history of Raynaud's syndrome has recently developed pain in the small joints of hands, difficult movement of food down the esophagus. What kind of disease can you think of in this case?

- A. Systemic scleroderma
- B. Periarteritis nodosa
- C. Rheumatoid arthritis
- D. Systemic lupus erythematosus
- E. Pseudotrichiniasis

A 60-year-old patient complains of recurrent pain in the proximal interphalangeal and wrist joints, their periodic swelling and reddening that have been observed for 4 years. X-ray picture represents changes in form of osteoporosis, joint space narrowing and single usuras. What is the most likely diagnosis?

- A. Rheumatoid arthritis
- B. Osteoarthritis
- C. Gout
- D. Pseudogout
- E. Multiple myeloma

A 36-year-old female patient complains of intense pain in the knee joints and neck. In the morning she experiences pain in the interscapular region and leg joints; pain subsides after warm-up gymnastics. The patient is overnourished, there is a clicking sound in the knees when squatting, the knees are somewhat disfigured, painful on palpation. Blood test results: ESR- 18 mm/h, WBC- $8,0 \cdot 10^9/l$. Radiography reveals subchondral sclerosis in the left knee. What is the basis of this pathology?

- A. Degenerative processes in cartilage
- B. Autoimmune process in the synovium
- C. Deposition of urates (tophi) in the articular tissues
- D. Beta-haemolytic streptococcus
- E. Hemarthrosis

After a holiday in the Crimea, a 36-year-old female patient presents with severe pain in the elbow joints, dyspnea and weakness. The body temperature is of 37,6°C, the skin is pale, there is erythema of cheeks and nose, lower lip ulceration. Visual inspection reveals no changes in the joints, the right elbow movement is limited. There is murmur and pleural friction in the lungs below the right angle of the scapula. Cardiac sounds are muffled, there is tachycardia, gallop rhythm, Ps- 114/min. AP- 100/60. What is the most likely diagnosis?

- A. SLE
- B. Rheumatic heart disease
- C. Rheumatoid arthritis

- D. Infectious allergic myocarditis
- E. Dry pleurisy

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- A. Rheumatoid arthritis
- B. Osteoarthritis
- C. Gout
- D. Pseudogout
- E. Multiple myeloma

A 39-year-old male patient complains of moderate pain and weakness in the shoulder, back and pelvic girdle muscles, that has been progressing for the last 3 weeks; great difficulty in getting out of bed, going up and down the stairs, shaving. Dermatomyositis has been suspected. Blood test results: Hb- 114 g/l, WBC- $10,8 \cdot 10^9/l$, eosinophils - 9%, ESR -22 mm/h, C-reactive protein - (++) . The alteration in the following laboratory value will be of decisive diagnostic significance:

- A. Creatine phosphokinase
- B. Ceruloplasmin
- C. Sialic acids
- D. dsDNA antibodies
- E. Gamma-globulins

A 26-year-old male patient complains of pain in the right knee, which is getting worse in the morning. Two weeks before, he consulted an urologist about prostatitis. Objectively: conjunctivitis is present. There is also periarticular edema of the knee joint, redness of the overlying skin. Rheumatoid factor was not detected. Until further diagnosis is specified, it would be reasonable to start treatment with the following antibiotic:

- A. Tetracyclines
- B. Cephalosporins
- C. Penicillins
- D. Aminoglycosides
- E. Lincosamides

Examination of a 35-year-old patient with rheumatism revealed that the right heart border was 1 cm displaced outwards from the right parasternal line, the upper border was on the level with inferior margin of the 1st rib, the left border was 1 cm in from the left midclavicular line. Auscultation revealed atrial fibrillation, loud apical first sound, diastolic shock above the pulmonary artery. Echocardiocopy revealed abnormal pattern of the mitral valve motion. What heart disease is characterized by these symptoms?

- A. Mitral stenosis
- B. Mitral valve prolapse
- C. Mitral valve insufficiency
- D. Aortic stenosis
- E. Tricuspid valve insufficiency

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mm/h, WBC-8,0·10⁹/l. Radiography reveals subchondral sclerosis in the left knee. What is the basis of this pathology?

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- A. Rheumatoid arthritis
- B. Osteoarthritis
- C. Gout
- D. Pseudogout
- E. Multiple myeloma

A 26-year-old female patient has an 11-year history of rheumatism. Four years ago she suffered 2 rheumatic attacks. Over the last 6 months there have been paroxysms of atrial fibrillation every 2-3 months. What option of antiarrhythmic therapy or tactics should be proposed?

- A. Prophylactic administration of cordarone
- B. Immediate hospitalization
- C. Defibrillation
- D. Lidocaine administration
- E. Heparin administration

An 11-year-old boy complains of general weakness, fever up to 38,2oC, pain and swelling of the knee joints, feeling of irregular heartbeat. 3 weeks ago, the child had quinsy. Knee joints are swollen, the overlying skin and skin of the knee region is reddened, local temperature is increased, movements are limited. Heart sounds are muffled, extrasystole is present, auscultation reveals apical systolic murmur that is not conducted to the left inguinal region. ESR is 38 mm/h. CRP is 2+, antistreptolysin O titre - 400. What is the most likely diagnosis?

- A. Acute rheumatic fever
- B. Vegetative dysfunction
- C. Non-rheumatic carditis
- D. Juvenile rheumatoid arthritis
- E. Reactive arthritis

A 60-year-old male patient, who works as a construction worker, complains of pain in the right hip and knee joints, that is getting worse on exertion. These presentations have been observed for the last 5 years. Objectively: the patient is overnourished. Right knee joint is moderately deformed. Examination of other organs and systems revealed no pathology. Blood test results: WBCs - $8,2 \cdot 10^9/l$, ESR - 15 mm/h. Uric acid - 0,35 mmol/l. What is the most likely diagnosis?

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- B. Coxarthrosis
- C. Rheumatoid arthritis
- D. Reiter's disease
- E. Spondylosis

A 58-year-old patient complains about sensation of numbness, sudden paleness of II-IV fingers, muscle rigidity, intermittent pulse. The patient presents also with polyarthralgia, dysphagia,

constipations. The patient's face is masklike, solid edema of hands is present. The heart is enlarged; auscultation revealed dry rales in lungs. In blood: ESR- 20 mm/h, crude protein - 85/l, γ -globulines - 25%. What is the most likely diagnosis?

- A. Systemic scleroderma
- B. Dermatomyositis
- C. Rheumatoid arthritis
- D. Systemic lupus erythematosus
- E. Raynaud's disease

A 12-year-old child had three attacks of acute rheumatic fever accompanied by carditis. Examination revealed the symptoms of chronic tonsillitis, mitral insufficiency, carious teeth. What is the optimal method of secondary prophylaxis?

- A. Year-round bicillin prophylaxis till the age of 25
- B. Course of cardiotropic drugs twice a year
- C. Year-round bicillin prophylaxis for 3 years
- D. Tonsillectomy
- E. Oral cavity sanitation