

CHAPTER 18. PEPTIC ULCER DISEASE, SELF-ASSESSMENT QUESTIONS

1. Which of the following is *not* a common cause of peptic ulcer disease (PUD)?
 - A. Chronic alcohol ingestion
 - B. Nonsteroidal antiinflammatory drugs (NSAIDs)
 - C. Stress-related mucosal damage
 - D. *Helicobacter pylori* infection
 - E. All of the above are common causes of PUD
2. Which of the following is a complication of PUD?
 - A. GI bleeding
 - B. Perforation
 - C. Obstruction
 - D. All of the above
 - E. None of the above
3. Which of the following is an indication for stress ulcer prophylaxis (SUP) in critically ill patients according to the 1999 American Society of Health-System Pharmacists (ASHP) published guidelines?
 - A. Mechanical ventilation for longer than 48 hours
 - B. Patients admitted to telemetry for heart failure
 - C. Platelet count greater than $50,000/\text{mm}^3$ ($50 \times 10^9/\text{L}$) but less than $150,000/\text{mm}^3$ ($150 \times 10^9/\text{L}$)
 - D. Thermal injuries to more than 15% of body surface area
 - E. Admission to ICU on enteral feedings
4. Which of the following is an important mechanism of prostaglandin mucosal protection?

- A. Stimulation of both mucus and phospholipid production
 - B. Promotion of bicarbonate secretion
 - C. Increased mucosal cell turnover
 - D. All of the above
 - E. None of the above
5. A 65-year-old woman presents with new onset epigastric pain, recent 10-pound (4.5kg) weight loss, and anemia. What diagnostic test should this patient undergo?
- A. Urea breath test
 - B. Stool antigen testing for *H. pylori*
 - C. Esophagogastroduodenoscopy (EGD)
 - D. *H. pylori* serology testing
 - E. Manometry
6. A prophylactic medication regimen to prevent NSAID-induced ulcers would *not* be recommended in:
- A. A 65-year-old patient on long-term NSAID therapy for osteoarthritis
 - B. A 60-year-old patient on aspirin therapy for cardioprotection
 - C. A 72-year-old patient with history of GI bleeding on NSAID therapy for osteoarthritis
 - D. A 30-year-old patient who takes NSAID for occasional tension headaches
 - E. An 80-year-old patient on high-dose corticosteroids for lupus and history of GI bleeding
7. A preferred first-line option for treating a newly diagnosed patient with *H. pylori* infection and a penicillin allergy is:
- A. A triple-drug regimen consisting of a proton pump inhibitor (PPI), clarithromycin and tetracycline

- B. A triple-drug regimen consisting of a PPI, levofloxacin, and tetracycline
 - C. A quadruple-drug regimen with bismuth subsalicylate, metronidazole, tetracycline, and a PPI
 - D. Dual therapy consisting of a PPI and metronidazole
 - E. None of the above
8. Which one of the following should be considered when evaluating a patient who has failed *H. pylori* eradication therapy?
- A. Patient adherence
 - B. Preexisting antimicrobial resistance
 - C. Potential reinfection
 - D. All of the above
 - E. None of the above
9. Which of the following tests can be used to confirm eradication of *H. pylori*?
- A. Urea breath test
 - B. Stool antigen assay
 - C. EGD with biopsies
 - D. Serologic testing
 - E. Both A and D
10. Which of the following statements is *true* regarding misoprostol?
- A. Misoprostol is a synthetic prostacyclin analog that exogenously replaces prostacyclin stores
 - B. Misoprostol is safe to use in pregnancy
 - C. Misoprostol is indicated for reducing the risk of *H. pylori*-induced gastric ulcer

- D. Misoprostol is limited by a high frequency of GI side effects
- E. Misoprostol is the drug of choice for stress ulcer prophylaxis
11. Which of the following is an independent risk factor for the development of NSAID-induced peptic ulcers?
- A. Concomitant use of corticosteroids
 - B. Alcohol consumption
 - C. Concomitant use of selective serotonin receptor inhibitors (SSRIs)
 - D. Smoking
 - E. All of the above
12. Which one of the following statements is *true* regarding *H. pylori* antimicrobial resistance?
- A. Metronidazole resistance is more prevalent in North America than in Asia
 - B. Clarithromycin resistance occurs in approximately 10% of *H. pylori* isolates
 - C. Amoxicillin and tetracycline resistance occur in most *H. pylori* isolates
 - D. Antimicrobial resistance with *H. pylori* is not a concern
 - E. None of the above
13. In which of the following situations is confirmation of *H. pylori* eradication recommended?
- A. Patients who have undergone resection for early gastric cancer
 - B. Patients with gastric MALT lymphoma
 - C. Patients with persistent symptoms after *H. pylori* treatment
 - D. None of the above
 - E. All of the above
14. Which of the following is *not* a goal of PUD therapy?
- A. Resolve symptoms

- B. Increase acid secretion
- C. Promote epithelial healing
- D. Prevent ulcer-related complications
- E. Prevent ulcer recurrence

15. Refractory peptic ulcers will most likely require which of the following interventions?

- A. An increase in the H₂RA dose
- B. An evaluation of serum pepsin to exclude Zollinger-Ellison syndrome
- C. *H. pylori* testing if not done previously
- D. Combination therapy with an H₂RA and PPI
- E. All of the above

ANSWERS

- 1. A
- 2. D
- 3. A
- 4. D
- 5. C
- 6. D
- 7. C
- 8. D
- 9. E
- 10. D
- 11. C
- 12. B

13. D

14. B

15. C