CHAPTER 23. PANCREATITIS, SELF-ASSESSMENT QUESTIONS

1. Which one of the following are common causes of acute pancreatitis?
   A. Hypertension, gallstones, diabetes mellitus
   B. Chronic obstructive pulmonary disease, hypertriglyceridemia, medications
   C. Ethanol abuse, gallstones, pregnancy
   D. Hereditary predisposition, obesity, gallstones
   E. Obesity, hypertension, hypertriglyceridemia

2. Complications of acute pancreatitis may include all of the following except:
   A. Acute respiratory distress syndrome
   B. Acute kidney injury
   C. Abscess formation
   D. Hypertension
   E. Pancreatic infection

3. Which of the following are complications of chronic pancreatitis?
   A. Ascites
   B. Glucose intolerance
   C. Malnutrition
   D. Both B and C

4. Which of the following tests should be reviewed to work up a patient for pancreatitis?
   A. Lipase, amylase, triglycerides
   B. Amylase, serum calcium, hemoglobin
   C. Triglycerides, hemoglobin, serum glucose
   D. Alanine aminotransferase (ALT), lipase, serum magnesium
E. Serum calcium, lipase, C-reactive protein

5. Which of the following is *not* an indicator that the patient may require transfer to an ICU?
   
   A. Systolic blood pressure less than 80 mm Hg
   
   B. Multiple organ dysfunction
   
   C. Temperature greater than 38°C with altered mental status
   
   D. Respiratory rate greater than 35 breaths/min
   
   E. Food intolerance

6. Initial treatment of acute pancreatitis should include:
   
   A. Enzyme supplementation
   
   B. Fluid resuscitation
   
   C. Empiric antibiotics
   
   D. Full oral diet
   
   E. Enrollment in alcohol abstinence counseling

7. Which of the following are risk factors for chronic pancreatitis?
   
   A. Obesity and race
   
   B. Hypertension, enalapril use
   
   C. Ethanol, tobacco, and enalapril use
   
   D. Aspirin, ibuprofen, ethanol, and tobacco use

8. Which of the following bacteria are likely to be implicated in infected pancreatic necrosis?
   
   A. *Listeria monocytogenes*
   
   B. *Haemophilus influenzae*
   
   C. *Klebsiella pneumoniae*
D. *Streptococcus agalactiae*

E. *Mycobacterium tuberculosis*

9. Which statement best describes the pathophysiology of chronic pancreatitis?
   
   A. Pancreatic necrosis secondary to damage to the pancreatic tissue
   
   B. Autolysis of the pancreas secondary to early activation of pancreatic enzymes
   
   C. An inflammatory process leading to endocrine and exocrine dysfunction secondary to diffuse scarring and fibrosis
   
   D. Inflammation of the pancreas secondary to a predominantly neutrophilic inflammatory response

10. Differences between acute pancreatitis and chronic pancreatitis include which of the following?
   
   A. Serum creatinine is elevated in acute but not chronic pancreatitis
   
   B. Serum thromboplastin is elevated in acute but not chronic pancreatitis
   
   C. Serum creatine kinase (CK) is elevated in acute but not chronic pancreatitis
   
   D. Serum amylase is elevated in acute but not chronic pancreatitis
   
   E. Serum potassium is elevated in acute but not chronic pancreatitis

11. Which of the following treatments can decrease morbidity and mortality in acute pancreatitis?
   
   A. Famotidine
   
   B. Atropine
   
   C. Weight loss
   
   D. Ethanol cessation
   
   E. Pancreatic enzyme supplementation
12. Which of the following interventions has not been shown to decrease pain in chronic pancreatitis?

A. Opioids such as morphine
B. Proton pump inhibitors
C. Ethanol cessation
D. Avoidance of fatty meals
E. Smoking cessation

13. What would be a suitable starting prescription for pancreatic enzyme supplementation in a 23-year-old woman with cystic fibrosis weighing 45 kg who presents with steatorrhea greater than 15 g/day?)

A. Creon 12,000: 2 capsules orally before meals, 1 capsule orally before snacks
B. Zenpep 15,000: 3 capsules orally before meals, 1 capsule orally before snacks
C. Creon 24,000: 1 capsule orally before meals and snacks
D. Pancreaze 21,000: 4 capsules orally before meals and 2 capsules before snacks
E. Creon 3000: 8 capsules orally before meals and 4 capsule before snacks

14. Which of the following statements best describes acute pancreatitis?

A. Acute pancreatitis is most commonly caused by an infectious process
B. Patients with acute pancreatitis should receive total parenteral nutrition for at least 7 days, even if they are able to tolerate an enteral diet, to allow time for the inflammation to subside
C. Acute pancreatitis may lead to pancreatic necrosis within the first 2 weeks of presentation
D. Patients presenting with acute pancreatitis should be fluid restricted
E. Patients with acute pancreatitis often present with coffee-ground emesis and dark maroon stools

15. Fluid resuscitation should include:

A. Albumin 25% 100-mL bolus infusion
B. Lactated Ringer’s 2-L bolus infusion
C. D₅W + 0.9% NaCl infused at 125 mL/hour
D. 0.45% NaCl 2-L bolus infusion

ANSWERS

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