

## Chapter 58. Osteoarthritis, Self-Assessment Questions

1. Which one of the following is characteristic of osteoarthritis (OA)?
  - A. Unilateral joint pain upon waking
  - B. Joint stiffness in the morning lasting 45 minutes
  - C. Elevated C-reactive protein (CRP) level
  - D. Elevated erythrocyte sedimentation rate (ESR)
  - E. All of the above
  
2. All of the following are considered risk factors for OA *except*:
  - A. Heavy physical activity
  - B. Age
  - C. Obesity
  - D. Ethnicity
  - E. Joint trauma
  
3. Which one of the following is the *most appropriate* treatment approach in a patient at risk for developing OA?
  - A. Promote lifestyle changes targeted at risk factors for OA
  - B. Initiate tramadol 50 mg every 4 to 6 hours as needed
  - C. Initiate ibuprofen 200 mg every 6 hours as needed
  - D. Initiate acetaminophen 325 mg every 4 to 6 hours as needed, and promote lifestyle changes targeted at risk factors for OA
  - E. Initiate ibuprofen 200 mg every 6 hours as needed, and promote lifestyle changes targeted at risk factors for OA

4. Therapy with celecoxib, rather than a non-selective NSAID, would be *most appropriate* for which of the following patients?
- a. 58-year-old woman with metabolic syndrome and gastroesophageal reflux disease
  - b. 69-year-old man with a history of *Helicobacter pylori* peptic ulcer disease
  - c. 53-year-old woman with a strong family history of myocardial infarction and previous GI upset with ibuprofen use
  - d. 47-year-old man with a history of GI bleed from previous indomethacin use
  - e. 70-year-old woman with chronic renal insufficiency who takes low-dose aspirin for cardioprotection
5. Treatment with naproxen monotherapy, rather than another non-selective NSAID, would be *most appropriate* for which of the following patients?
- A. 49-year-old woman with metabolic syndrome and history of MI
  - B. 70-year-old man with a history of *Helicobacter pylori* peptic ulcer disease
  - C. 58-year-old man with a strong family history of myocardial infarction and previous GI bleed with ibuprofen use
  - D. 67-year-old man with a history of GI bleed from previous indomethacin use
  - E. 70-year-old woman with chronic heart failure
6. Which one of the following regimens is considered an adequate trial of acetaminophen before assessing treatment success or failure?

- A. 325 mg every 6 hours for 1 month
  - B. 325 mg every 6 hours for 2 months
  - C. 1000 mg every 6 hours for 1 month
  - D. 500 mg every 8 hours for 2 months
  - E. 325 mg every 4 to 6 hours for 1 month
7. Compared with oral NSAIDs, topical NSAIDs are:
- A. More effective for hip OA
  - B. More effective for knee OA
  - C. Less effective for hand OA
  - D. Associated with fewer systemic toxicities
  - E. All of the above
8. For which of the following patients would concomitant naproxen and a PPI be *most appropriate*?
- A. 49-year-old woman with metabolic syndrome
  - B. 70-year-old man with a history of *Helicobacter pylori* peptic ulcer disease
  - C. 58-year-old man with a history of myocardial infarction and previous gastric ulcer with ibuprofen use
  - D. 67-year-old man with a history of GI bleed from previous indomethacin use
  - E. 70-year-old woman with chronic heart failure
9. Nonpharmacologic therapies for OA include which of the following?

- A. Stretching
  - B. Application of heat
  - C. Weight loss
  - D. Occupational therapy
  - E. All of the above
10. Which of the following circumstances warrants consideration to initiating chronic opioid therapy?
- a. Untreated moderate to severe OA.
  - b. Moderate to severe OA refractory to acetaminophen.
  - c. Moderate to severe OA refractory to acetaminophen and a history of chronic heart failure.
  - d. Mild to moderate OA refractory to acetaminophen.
  - e. All of the above
11. Compared to nonselective NSAIDs, COX-2—selective agents:
- A. Reduce OA-related pain to a greater extent
  - B. Have a lower risk for cardiovascular adverse events
  - C. Have a lower risk for adverse renal effects
  - D. Have a lower risk of gastrointestinal bleeds
  - E. All of the above
12. Which of the following statements is *true* regarding the use of glucosamine/chondroitin for OA?

- A. Treatment benefit is moderate but consistent among all types and severities of OA.
  - B. Because glucosamine/chondroitin is regulated as a dietary supplement, product standards are consistent and reliable.
  - C. Glucosamine/chondroitin is generally well tolerated, but treatment benefits are uncertain.
  - D. Both glucosamine and chondroitin pose a high risk for anaphylaxis in patients with shellfish allergy.
  - E. Glucosamine-containing products are contraindicated in patients with uncontrolled disease
13. Which of the following is *true* regarding intraarticular corticosteroid use in a patient achieving a partial response to naproxen 500 mg twice daily for left knee OA?
- A. Pain relief will occur rapidly and persist for up to 6 months.
  - B. Intraarticular corticosteroids should not be used concomitantly with naproxen.
  - C. Intraarticular corticosteroids are useful for polyarticular symptoms due to their systemic mechanism of action.
  - D. The affected joint can be injected monthly until response.
  - E. Intraarticular corticosteroids may be more effective if an inflammatory component is present.

14. Which one of the following drug regimens is *most appropriate* for a patient with OA who has with chronic renal insufficiency (creatinine clearance 28 mL/min [0.47 mL/s]) and who has failed acetaminophen monotherapy?

- A. Nabumetone 50 mg twice daily
- B. Celecoxib 100 mg twice daily
- C. Naproxen 500 mg twice daily
- D. Tramadol 100 mg three times daily
- E. Oxycodone 5 mg immediate-release every 4 to 6 hours as needed

15. Patients attempting treatment with topical capsaicin should be counseled on which of the following?

- A. Do not allow contact with eyes or mucous membranes
- B. When applying to knee, wash hands after application
- C. May take 2 weeks of daily treatment to experience benefit
- D. May experience burning sensation at application site
- E. All of the above

## Answers

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