

PATHOLOGY – Endocrine MCQs

1. A patient with hypertension, hypernatraemia and hypokalaemia is most likely to have:
 - A: adrenal metastatic deposits
 - B: congenital adrenal hyperplasia
 - C: Cushing's disease
 - D: nodular adrenal cortex hyperplasia ✓
2. Diabetic microangiopathy is characterised by:
 - A: diffuse basement membrane thickening ✓
 - B: formation of nodules of matrix
 - C: loss of capillary numbers
 - D: mononuclear inflammatory infiltrate
3. A 35 year old man has been diagnosed with a somatotroph pituitary adenoma. What is a likely finding?
 - A: hyperglycaemia ✓
 - B: osteoporosis
 - C: postural hypotension
 - D: skin hyper pigmentation
4. A head trauma patient has developed hypernatraemia and polyuria despite limited IV fluids. The cause is
 - A: acute tubular necrosis
 - B: diabetes insipidus ✓
 - C: Sheehan syndrome
 - D: syndrome of inappropriate ADH secretion
5. Thyrotoxicosis is most commonly due to
 - A: diffuse thyroid hyperplasia ✓
 - B: hyper-functional thyroid adenoma
 - C: multinodular goitre
 - D: TSH secreting pituitary adenoma
6. A newly diagnosed Type 1 diabetes mellitus patient will have
 - A: Beta cell hyperplasia
 - B: circulating free fatty acids
 - C: increased blood insulin levels
 - D: inflammatory pancreatic infiltrate ✓

7. Donald is shouting during a heated debate and develops severe headache and diplopia. You suspect

- A: Nelson syndrome
- B: phaeochromocytoma
- C: pituitary apoplexy ✓
- D: thyroid storm

8. A previously well minor trauma patient has a serum calcium level measured for no apparent reason. It is of course elevated. What is the most common cause in this situation?

- A: familial hypocalciuric hypercalcaemia
- B: occult malignancy
- C: primary hyperparathyroidism ✓
- D: secondary hyperparathyroidism

9. What is the pathogenesis of Hashimoto's thyroiditis?

- A: circulating antibodies against thyroglobulin and thyroid peroxidase ✓
- B: circulating thyroid stimulating immunoglobulin
- C: TSH receptor blocking antibodies
- D: viral infection activation of cytotoxic T cells

10. A patient has had a total thyroidectomy and ran out of thyroxine pills several weeks ago. They complain of

- A: insomnia
- B: palpitations
- C: shortness of breath on exertion ✓
- D: vomiting