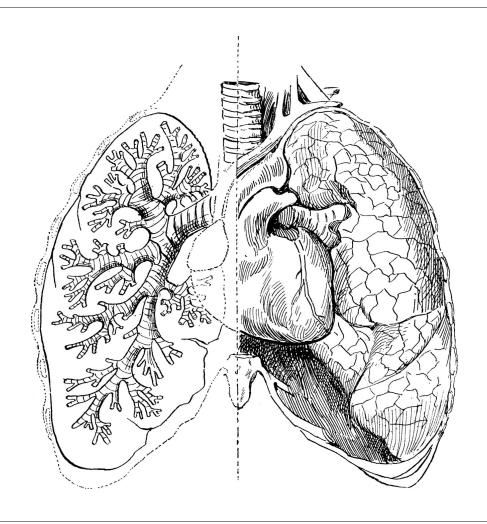
Fungal Questions

43**5**'s Teamwork Respiratory Block



- The document includes SAQ scenarios and MCQs.
- Please contact the team leaders for any suggestion, question or correction.
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MCQs

- Q1: Which of the following sentences is true:
- A | Respiratory viral infections are less common than fungal and bacterial infections.
- B | Respiratory fungal infections are less common than viral and bacterial infections.
- C | Respiratory bacterial infections are less common than viral and fungal infections.
- Q2: Which of the following is opportunistic respiratory fungal infection:
- A | Mucor
- B | Coccidioides immitis
- C | Cryptococcus neoformans
- D | C. gattii
- Q3: Which of the following is primary respiratory fungal infection:
- A | C. gattii
- B | Rhizopus
- C | Blastomyces dermatitidis
- D | Mucor
- Q4: Dimorphic fungi cause:
- A | zygomycosis
- B | Aspergillosis
- C | Primary Systemic Mycoses
- D | Pneumocystis (PCP)
- Q5: Aspergillus species are:
- A | Mould fungi
- B | Dimorphic fungi
- C | Yeast
- D | Primary infections
- Q6: Which of the following diseases show halo sign in radiology:
- A | Pulmonary zygomycosis
- B | Chronic Aspergillosis (Colonizing aspergillosis)
- C | Invasive pulmonary Aspergillosis
- D | Rhinocerebral zygomycosis

Q7: Which of the following diseases show radiolucent crescent in radiology: A Chronic Aspergillosis (Colonizing aspergillosis) B Invasive pulmonary Aspergillosis C Pulmonary zygomycosis
Q8: The most common cause of fungal sinusitis in KSA is: A Aspergillus nidulans B Aspergillus niger C Aspergillus terreus D Aspergillus flavus
Q9: Which of the following you will see under the microscope in Aspergillosis: A fungal septate hyphae B Non-septate hyphae
Q10: Which of the following treatment is used in aspergillosis: A Sulfamethoxazole B Trimethoprim C Voriconazole D Dapsone
Q11: Which of the following you will see under the microscope in Pulmonary zygomycosis: A Septate hyphae B Non-septate hyphae
Q12: Which of the following is true about Pulmonary zygomycosis: A Acute B Chronic C Infection can not extend to other organs
Q13: Which of the following is a treatment of Pulmonary zygomycosis: A sulfamethoxazole B Trimethoprim C Caspofungin D Amphotericin B

Q14: Which of the following diseases is common in AIDS patients:

- A | Chronic Aspergillosis
- B | Allergic bronchopulmonary (ABPA)
- C | Pulmonary zygomycosis
- D | Pneumocystis (PCP)

Q15: Which of the following organism cause Pneumocystis:

- A | Pneumocystis jiroveci
- B | Rhizopus
- C | Aspergillus flavus
- D | Histoplasmosis

Q16: Which of the following is a treatment of Pneumocystis:

- A | Itraconazole
- B | Caspofungin
- C | Trimethoprim
- D | Amphotericin B

Answer key: (Q1: B - Q2: A - Q3: C - Q4: C - Q5: A - Q6: C - Q7: A - Q8: D - Q9: A - Q10: C - Q11: B - Q12: A - Q13: D - Q14: D - Q15: A - Q16: C)

SAQs

A 32 man came to KKUH complaining about fever, hemoptysis, cough, leukocytosis, the radiology test show lesions with a halo sign.

1- What can be the diagnosis?

Invasive pulmonary Aspergillosis.

2- What kind of specimens you will take?

Sputum, BAL, Lung biopsy.

3- What will you see under the microscope? and what is the stain you will use?

Fungal septate hyphae, Giemsa Stain, Grocott methenamine silver stain (GMS).

4- What further tests can you do?

Test for Antibody, ELISA test for galactomannan Antigen.

5- Name one medication used to treat this case?

Voriconazole

6- What are the diseases included in Aspergillosis:

Mycotoxicosis, Allergy, Colonization (without invasion and extension) in preformed cavities, Invasive disease of lungs, Systemic and disseminated disease

7- What are the risk factor of Aspergillosis:

Bone marrow or organ transplantation. AIDS. Diabetes. Cancer: Leukemia, lymphoma. Drugs: Cytotoxic drugs, steroids.

8- Name two common airborne Fungi:

Aspergillus niger, Aspergillus fumigatus.

9- Name two Primary Systemic Mycoses:

Histoplasmosis, Blastomycosis, Coccidioidomycosis, Paracoccidioidomycosis

10- List some symptoms and signs seen in Allergic bronchopulmonary (ABPA):

Symptoms of Asthma, Bronchial obstruction, Fever, malaise, Eosinophilia, Wheezing, Skin test reactivity to Aspergillus, Serum antibodies to Aspergillus, Serum IgE > 1000 ng/ml, Pulmonary infiltrates.