

CPD QUESTIONNAIRE

Earn 2 CPD points after you have read the journal by completing the following questionnaire online on the ALLSA website at www.allergysa.org/cpd or follow the links from the home page. To earn points, you will need to register and fill in personal details (make sure you have your HPCSA number handy and decide on a password beforehand). Once you have registered, you can answer the questionnaire. If you have registered for a previous questionnaire, you'll need your HPCSA number and password to logon. Please note that there is only one correct answer per question, and you will have only one opportunity to submit the questionnaire, so please check answers carefully. You will be able to change answers if you click the wrong one by mistake, but once you click 'Submit Answers' the test will be submitted and marked.

Points will be submitted electronically to the HPCSA.

The closing date for submission of this questionnaire is 30 June 2008.

IMMUNODEFICIENCY DISEASES PRESENTING IN ADULTS – DIAGNOSIS AND MANAGEMENT

- True or false:** Primary immune deficiency is always diagnosed in childhood and never presents for the first time in adults.
a) True
b) False
- True or false:** Recurrent localised infections are a strong indication of underlying systemic immune defect.
a) True
b) False
- True or false:** Antibody deficiency is more common in adults than primary cellular immune defects.
- True or false:** The commonest diagnosis for immune deficiency in adult patients is common variable hypogammaglobulinaemia (CVH) which can involve both humeral and cellular immunity.

APPROACH TO THE CHILD WITH RECURRENT INFECTIONS – PRESENTATION AND INVESTIGATION OF PRIMARY IMMUNODEFICIENCY

- Choose ONE incorrect answer:** Contributing factors for recurrent infections in childhood include:
a) Exposure to smoke in the home
b) Day care attendance of the child
c) Schoolgoing siblings in the home
d) Breastfeeding (HIV-negative mother)
e) Gastro-oesophageal reflux
f) Anatomical obstructions
- Choose ONE incorrect answer:** Cost-effective first stage initial laboratory or side room investigations in South Africa for a child with recurrent respiratory infections includes
a) Full blood count and differential
b) Immunoglobulin isotypes G, M, A, and E
c) HIV testing
d) Mantoux skin test
e) Lymphocyte proliferations
f) Sweat test
- Choose ONE incorrect answer:**
a) Deficient antibody response can occur despite normal levels of serum IgG.
b) Recurrent meningococcal infections point towards phagocyte defects.
c) Absence of tonsillar tissue in the presence of recurrent bacterial infections may give a clue to defective B-lymphocyte development.
d) X-linked agammaglobulinaemia is clinically expressed in males.
e) An ulcerating BCG can be a warning sign of lack of cellular immunity.

SEVERE COMBINED IMMUNODEFICIENCY (SCID)

- True or false:** All children who have SCID can be diagnosed by an absolute lymphocyte count after birth.
a) True
b) False
- True or false:** The most common type of SCID is X-linked and is due to a deficiency of the common gamma chain.
a) True
b) False
- True or false:** SCID should be suspected in any child who presents early in life with severe or opportunistic infections.
a) True
b) False

AN UPDATE OF THE PRIMARY ANTIBODY DISORDERS

- True or false:** True or false: Arrest in early B-cell development results in decreasing B-lymphocyte numbers and profoundly reduced immunoglobulin isotype concentrations.
a) True
b) False
- True or false:** Common variable immunodeficiency is a heterogenous group of diseases associated with complement deficiencies.
a) True
b) False
- True or false:** Patients with X-linked Hyper-IgM syndrome may present with serious *Pneumocystis jirovecii* or *Cryptosporidium* infections.
a) True
b) False
- True or false:** For many primary antibody deficiencies intravenous immunoglobulin G replacement therapy is the treatment of choice.
a) True
b) False

INTRAVENOUS IMMUNOGLOBULIN

- True or false:** All IVIG preparations are equally efficacious.
a) True
b) False
- True or false:** IVIG is a recommended treatment option for haemolytic disease of the newborn.
a) True
b) False
- True or false:** The usual dose of IVIG for antibody replacement therapy is between 400 and 600 mg/kg every 2-4 weeks.
a) True
b) False

EPOXY RESIN EXPOSURE AND DERMATITIS – A CASE STUDY

- True or false:** In rare cases depigmentation can result from exposure to epoxy resins and is referred to as 'leucoderma'.
a) True
b) False
- True or false:** Exposure to the organic solvents that are added to some epoxy products can cause allergic contact dermatitis.
a) True
b) False
- True or false:** ACD, ICD, CU, leucoderma, but not respiratory reactions may result from exposure to epoxy resins.
a) True
b) False

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