

## Test yourself in pathogenesis of preschool wheeze

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**Choose only one answer:**

1. **RVs are frequently associated with wheeze at age**
  - a. 2-6 months
  - b. 12 months
  - c. 24 months
  - d. Beyond 5 years
2. **Mark the incorrect statement:**
  - a. Colonization of the airways was associated with development of asthma by the age of 5 years
  - b. Human Metapneumovirus may cause bronchiolitis and recurrent wheeze in young children
  - c. Non-atopic children may wheeze when they have respiratory tract infections and outgrow symptoms by 6 years of age.
  - d. Children with multiple trigger wheeze do not have any symptoms between episodes
3. **The following viruses are common causes of acute bronchiolitis except:**
  - a. Respiratory syncytial virus
  - b. Herpes virus
  - c. Parainfluenza virus
  - d. Influenza virus
  - e. Adenovirus
4. **Infants are virtually obligatory nose breathers till the age of:**
  - a. 2 months
  - b. 6 months
  - c. 9 months
  - d. 18 months
  - e. 36 months
5. **Which statement is true about the upper airway of infants?**
  - a. The airway caliber is considerably larger than in older children
  - b. The infant larynx is situated much lower than that of adults
  - c. The epiglottis is narrow and floppy and located closer to the palate
  - d. The pharynx and supraglottic tissues are more rigid than in adults
6. **The airways in girls differ than boys in:**
  - a. Higher ratio of large to small airways
  - b. Enhanced surfactant production
  - c. Increased patency of the small airways
  - d. None of the above
  - e. All of the above
7. **One of the following statements is incorrect:**
  - a. Alveolar macrophages directly suppress pulmonary T cell proliferation
  - b. Impaired secretion clearance predisposes to lower airway infection in young children
  - c. Significant reductions in expiratory flows and volumes were observed in young children with physician confirmed wheeze
  - d. Airway remodeling starts only beyond 12 years of age
  - e. There is no good quality evidence that vitamin D supplementation leads to improved asthma control or fewer exacerbations

(Answers on page 25)