

Quiz

Learning through Quiz - Herpes Progenitalis

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Quick Response Code:



- Which of the following is not applicable to genital infection due to herpes simplex virus (HSV)-2:^[1]
 - It causes frequent recurrence
 - Prior HSV-2 infection provide a vaccine-like effect against subsequent infection for HSV-1
 - Genital HSV-2 reactivates 16 times more frequently than genital HSV-1 infection
 - Asymptomatic viral shedding is the most frequent cause of HSV transmission to neonates than primary infection in mother
- Which of the following test results help differentiate true primary HSV-1 and 2 infections from 1st episode of non-primary HSV infection:^[1]
 - Only IgM positive
 - Only IgG positive
 - Both positive
 - Raised IgG+/- IgM+
- Suppressive treatment to prevent the recurrence of genital HSV infection during important life events must be initiated:^[2]
 - 20 days in advance of the desired event
 - 15 days in advance of the desired event
 - 10 days in advance of the desired event
 - 5 days in advance of the desired event
- Which is the false statement regarding HSV in pregnant females:^[3]
 - Primary episode is more severe
 - Recurrences are more frequent
 - Recurrences are short-lasting
 - Recurrences are severe
- Which of the following is the false statement regarding long-term suppressive therapies:^[2]
 - Long-term suppressive therapy can be initiated if the frequency of symptomatic outbreaks is <4 episode/year
 - To be discontinued after 1 year
 - No safety concerns
 - Restart if recurrence rates are unacceptably high
- Identify the false statement regarding HSV in pregnancy:^[3]
 - Herpes progenitalis due to HSV-2 is transmitted more frequently to neonates than HSV-1 during labour

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- b) Congenital infection is rare
c) Spontaneous abortions, prematurity may occur
d) About 80% of mothers having newborns with herpes have no history of exposure to HSV or are asymptomatic at delivery
7. What is the gold standard test for diagnosis of HSV infection:^[2]
a) HSV Serology
b) Culture
c) Cytologically
d) All have the same sensitivity
8. Which pregnancy category does the drug acyclovir belong to:^[4]
a) Category A
b) Category C
c) Category B
d) Category D
9. Neonatal HSV is more severe if the mother acquires HSV infection in:^[3]
a) First trimester
b) Second trimester
c) Early third trimester
d) Late third trimester
10. Which is the false statement regarding American Congress of Obstetricians and Gynaecologists guidelines on genital HSV infection:^[5]
a) Routine antepartum genital HSV cultures in asymptomatic patients with recurrent disease are not recommended
b) Suppressive viral therapy is recommended throughout the pregnancy to prevent recurrence
c) Routine HSV screening of pregnant women is not recommended
d) Lower segment caesarean section (LSCS) is not recommended for women with a history of HSV infection but no active genital lesions during labour
11. When to consider lower segment caesarean section in pregnant female having herpes progenitalis:^[6]
a) Lesions within 6 weeks of delivery
b) Lesions within 2 weeks of delivery
c) Prodromal symptoms or lesions within 24 h of delivery
d) Lesions within 4 weeks of delivery
12. When is acyclovir/valacyclovir started to prevent recurrence during delivery:^[6]
a) 32 weeks onwards
b) 34 weeks onwards
c) 36 weeks onwards
d) Not recommended
13. Protective efficacy of male condom against HSV type 2:^[7]
a) 10–50% protection
b) 90–100%
c) 0%
d) 70–90%
14. Active form of acyclovir is:^[8]
a) Acyclovir monophosphate
b) Acyclovir triphosphate
c) Valacyclovir
d) Thymidine kinase
15. The highest risk of transmission of HSV from mother to child is seen during:^[9]
a) First trimester
b) Second trimester
c) Third trimester
d) Delivery
16. What is the genetic characteristic of the herpes virus family:^[2]
a) dsDNA
b) ssDNA
c) ssRNA
d) dsRNA
17. What is the prodrug of penciclovir:^[10]
a) Aciclovir
b) Ganciclovir
c) Famciclovir
d) Valaciclovir
18. Which is the drug of choice in case of aciclovir resistance:^[11]
a) Ganciclovir
b) Tenofovir
c) Famciclovir
d) Foscarnet
19. What is the dose of i.v. Aciclovir in the management of severe/complicated HSV:^[8]
a) 5–10 mg/kg every 8 hourly
b) 5–10 mg/kg every 6 hourly
c) 20 mg/kg every 8 hourly
d) 15–20 mg/kg every 6 hourly
20. Which of the following is false about medical male circumcision (MMC):^[12]
a) Decreased risk of HSV-2 acquisition among women with a male partner who underwent MMC
b) Decreased risk of HSV-2 acquisition among adult heterosexual male
c) MMC does not affect the transmission of HSV-2
d) Decreased risk of HSV-2 acquisition among men having sex with men (MSM)

Answer

1. b
2. a
3. d
4. c
5. a
6. a
7. b
8. c
9. d
10. b
11. c
12. c
13. a
14. b
15. d
16. a
17. b
18. d
19. a
20. c

Declaration of patient consent

Patient's consent not required as there are no patients in this study.

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The author(s) confirms that there was no use of artificial intelligence (AI)-assisted technology for assisting in the

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