

Medicine Today CPD Journal Program

Questions

Please note you must answer these questions online (www.medicinetoday.com.au/cpd) to take part in this activity; we will not mark any answers that are posted, faxed or emailed to Medicine Today.

March 2015 issue, Module 3

Burning vessels: a review of vasculitis for primary care

The questions in this module are based around the article 'Burning vessels – a review of vasculitis for primary care' (Medicine Today 2015; 16(3): 26-39), which should be read before attempting the module.

Learning objectives: Burning vessels – a review of vasculitis for primary care

- Recognise features and treatment of different forms of vasculitis
- Identify the presentation, investigation and management of giant cell arteritis
- Describe the clinical features and management of Kawasaki disease
- Propose steps you can take to improve communication with patients or families whose first language is not English

Question 1. Regarding vasculitis, which three of the following statements are correct?

- a. Manifestations of vasculitis depend largely on the size of vessels affected
- b. Vasculitis symptoms can include weight loss, arthralgia and rash
- c. Most patients with vasculitis are positive for antineutrophil cytoplasmic antibodies (ANCA)
- d. In most patients, intensive immunosuppression is necessary to avoid long-term complications

Question 2. List at least three clinical features that should raise immediate suspicion for underlying vasculitis.

Case study 1. Jayne, aged 72 years, has come to see you with a unilateral headache that came on gradually over the previous day. She feels generally unwell and has tenderness over her left temple. You suspect giant cell arteritis.

Question 3. Which two of the following statements about giant cell arteritis are correct?

- a. It is also known as temporal arteritis
- b. It affects older patients
- c. It is more common in men
- d. In rare cases, patients may present initially with polymyalgia rheumatica

You examine Jayne, looking for further signs and symptoms of giant cell arteritis.

Question 4. Which three of the following are typical features of giant cell arteritis?

- a. Jaw claudication
- b. Facial rash
- c. Reduced vision
- d. Diplopia

You order investigations for Jayne and refer her urgently to an immunologist for review.

Question 5. Of the following investigations, which two are the most useful for a patient such as Jayne with suspected giant cell arteritis?

- a. Erythrocyte sedimentation rate
- b. ANCA testing
- c. Temporal artery biopsy
- d. FDG-PET scan

Results of investigations confirm the diagnosis of giant cell arteritis and Jayne commences treatment.

Question 6. Which one of the following is the recommended first-line treatment for patients with giant cell arteritis?

- a. Azathioprine
- b. Corticosteroid
- c. Methotrexate
- d. Plasmapheresis

Case study 2. Haruto, aged 3 years, has been brought to see you by his mother. He has a fever and a rash on his palms. His mother speaks little English, but you work out that he has had the fever for more than a week. You decide Haruto has Kawasaki disease until proven otherwise.

Question 7. List at least three findings other than fever and palmar erythema that are associated with Kawasaki disease.

You are concerned that Haruto is at risk of serious complications of Kawasaki disease and order blood tests to check for major organ dysfunction pending review by a paediatrician in a tertiary centre.

Question 8. List at least three serious complications of Kawasaki disease.

Question 9. Regarding the small vessel vasculitides, which two of the following statements are correct?

- a. Henoch–Schönlein purpura predominantly affects children and has an excellent prognosis
- b. ANCA-associated small vessel vasculitis is more common in men and in the 40 to 50 years age group
- c. Treatment of ANCA-associated vasculitis typically involves a minimum of three years of maintenance therapy
- d. ANCA-associated vasculitis can be a side effect of antithyroid medication

Communication can be difficult with patients such as Haruto and his mother who do not have English as their first language.

Question 10. What steps can you take to improve communication with patients or families whose first language is not English? Select as many answers as you think appropriate.

- a. Offer a phone interpreter
- b. Provide written information in their first language if they are literate
- c. Use diagrams
- d. Other – please write the strategies you use in the box below