MULTIPLE CHOICE

1. Intercellular deposits of IgG are consistently found in oral epithelium in which of the following?
   a. Cicatricial pemphigoid
   b. Lichen planus
   c. Pemphigus vulgaris
   d. Stevens-Johnson syndrome
   e. Aphthous ulcers
   ANS: C REF: Chap 1 (Pemphigus vulgaris/Etiology and pathogenesis), p 11

2. A patient seeks help for recurrent palatal pain. She presents with multiple punctate ulcers in the hard palate that were preceded by tiny blisters. Her lesions typically heal in about 2 weeks and reappear during stressful times. She has:
   a. Aphthous ulcers
   b. Recurrent primary herpes
   c. Recurrent secondary herpes
   d. Erythema multiforme
   e. Discoid lupus
   ANS: C REF: Chap 1 (Herpes simplex infection/Pathogenesis), pp 1-3

3. All but one of the following are contagious and thus are potential occupational hazards to the dentist and dental hygienist. Choose the noncontagious condition.
   a. Oral histoplasmosis
   b. Pemphigus vulgaris
   c. Cold sores
   d. Primary herpes
   e. Oral chancre
   ANS: B REF: Chap 1 (Pemphigus vulgaris), pp 11-15

4. A 55-year-old man presents with a single deep indurated crateriform lesion of the posterior lateral border of the tongue. It is asymptomatic. This could be all of the following except:
   a. Squamous cell carcinoma
   b. Chronic traumatic ulcer
   c. Secondary herpes
   d. Syphilis
   e. Histoplasmosis
   ANS: C REF: Chap 1 (Herpes simplex infection/Box 1-2), p 4

5. Bilateral buccal mucosal white lesions would be expected in all the following except:
   a. Cannon’s disease (white sponge nevus)
   b. Witkop’s disease (HBID)
   c. Secondary herpes zoster
   d. Leukoedema
   e. Cheek chewing
   ANS: C REF: Chap 1 (Varicella-zoster infection), pp 6-8

6. Which of the following vesiculobullous disorders is nonhereditary and occurs almost exclusively on the skin?
   a. Pemphigus vulgaris
   b. Cicatricial pemphigoid
   c. Epidermolysis bullosa
   d. Lupus erythematosus
   e. Bullous pemphigoid
   ANS: E REF: Chap 1 (Bullous pemphigoid), pp 17-18

7. Which of the following conditions exhibits subepithelial separation microscopically?
   a. Pemphigus vulgaris
   b. Mucous membrane pemphigoid
   c. Aphthous stomatitis
   d. Secondary herpes simplex
   e. None of the above
   ANS: B REF: Chap 1 (Mucous membrane pemphigoid/Histopathology and immunopathology), pp 16-17

8. The palate and maxillary ridge of a 56-year-old woman contain multiple flat ulcers of 8 weeks’ duration. She has a positive Nikolsky sign and has no evidence of skin or lip lesions. Which of the following should receive serious consideration in the clinical differential diagnosis?
   a. Pemphigus vulgaris
   b. Herpangina
   c. Lichen planus
   d. Aphthous stomatitis
   e. Herpes simplex infection
   ANS: A REF: Chap 1 (Pemphigus vulgaris), pp 11-15
9. A 22-year-old woman complains of mildly painful ulcers in her hard palate. The ulcers are multiple and confluent. A similar condition has been noted in the patient on two previous occasions. This is most likely:
   a. Trauma
   b. Herpangina
   c. Candidiasis
   d. Riga-Fede disease
   e. Secondary herpes

   ANS: E
   REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

10. Cytologic examination can be diagnostic of which of the following diseases?
   a. Herpes simplex
   b. Recurrent aphthae
   c. Mucous membrane pemphigoid
   d. Erosive lichen planus
   e. Frictional hyperkeratosis

   ANS: A
   REF: Chap 1 (Herpes simplex infection/Histopathology), p 5

11. The Tzanck cells in pemphigus vulgaris result from:
   a. Acantholysis
   b. Acanthosis
   c. Intercellular edema
   d. Intracellular edema
   e. Mucous extravasation

   ANS: A
   REF: Chap 1 (Pemphigus vulgaris/Histopathology and immunopathology), pp 11-14

12. Site specificity is a characteristic clinical feature of which of the following conditions when it occurs intraorally?
   a. Syphilis
   b. Candidiasis
   c. Histoplasmosis
   d. Intraoral tuberculosis
   e. Secondary herpes simplex infection

   ANS: E
   REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), p 4

13. Herpes simplex infections are most rationally treated with:
   a. Lysine
   b. Topical clobetasol
   c. Acyclovir
   d. Topically applied tetracycline
   e. Prednisone

   ANS: C
   REF: Chap 1 (Herpes simplex infection/Treatment), p 6

14. A middle-aged man developed multiple flat ulcers in his palate, tongue, and buccal mucosa. The lesions measured approximately 1 cm in diameter and were preceded briefly by bullae. The lesions have been persistent for 6 weeks. He has no skin, eye, or genital lesions. Biopsy shows acantholysis with intraepithelial separation. He most likely has:
   a. Erythema multiforme
   b. Discoid lupus erythematosus
   c. Primary herpes simplex infection
   d. Mucous membrane pemphigoid
   e. None of the above

   ANS: E
   REF: Chap 1 (Herpes simplex infection/Mucous membrane pemphigoid), pp 1-6 | Chap 1 (Herpes simplex infection/Mucous membrane pemphigoid), pp 15-17 | Chap 2 (Erythema multiforme), pp 43-46 | Chap 3 (Discoid lupus erythematosus), p 102

15. Biopsy confirmation of mucous membrane pemphigoid can be made by which of the following?
   a. Direct immunofluorescence
   b. Fite stain of tissue section
   c. Determination of serum antinuclear antibodies (ANAs)
   d. Observed response to trial dose of acyclovir
   e. None of the above

   ANS: A
   REF: Chap 1 p 14

16. The bullous eruption of attached gingiva mediated by autoantibodies directed against basement membrane antigens is known as:
   a. Pemphigus vulgaris
   b. Lupus erythematosus
   c. Erythema multiforme
   d. Behçet’s syndrome
   e. None of the above

   ANS: E
   REF: Chap 1 (Pemphigus vulgaris), pp 11-15 | Chap 2 (Erythema multiforme/Behçet’s syndrome), pp 42-46 | Chap 3 (Lupus erythematosus), pp 102-104
17. Generally, corticosteroids are contraindicated in the treatment of which of the following conditions?
   a. Chronic traumatic ulcers
   b. Pemphigus vulgaris
   c. Herpetiform aphthous ulcers
   d. Hand-foot-and-mouth disease
   e. Mucous membrane pemphigoid

   ANS: D
   REF: Chap 1 (Hand-foot-and-mouth disease/Treatment), p 9

18. Lesions found in the buccal mucosa, known as Koplik’s spots, are first signs of which of the following?
   a. Erythema multiforme
   b. Herpangina
   c. Rubeola
   d. Varicella
   e. Acute lupus erythematosus

   ANS: C
   REF: Chap 1 (Measles/Clinical features), p 10

19. Systemic corticosteroids can affect many metabolic processes. Which of the following effects of prednisone is regarded as therapeutic when prescribed for patients with pemphigus vulgaris and mucous membrane pemphigoid?
   a. Gluconeogenesis
   b. Potentiation of vasopressors
   c. Suppression of pituitary-adrenal axis
   d. Sodium resorption
   e. Immunosuppression

   ANS: E
   REF: Chap 1 (Pemphigus vulgaris/Treatment and prognosis/Box 1-6), pp 14-15

20. Which of the following is important in the clinical efficacy of a topical corticosteroid?
   a. Vehicle
   b. Concentration of steroid in the preparation
   c. Halogenation of parent compound, cortisol
   d. Frequency and amount of application
   e. All the above

   ANS: E
   REF: Chap 1 (Topical steroids), p 14

21. All the following would be considered iatrogenic injuries except:
   a. Amalgam tattoo
   b. Saliva ejector injury
   c. Chemical burn following medication of cavity preparation
   d. Ulceration resulting from traumatic dental impression
   e. Zoster precipitated by lymphoma

   ANS: E
   REF: Chap 1 (Varicella-zoster infection/Clinical features/Herpes zoster), p 7

22. Ingestion of certain drugs is known to occasionally precipitate which of the following?
   a. Herpetiform aphthous ulcers
   b. Geographic tongue
   c. Cicatricial pemphigoid
   d. Mucous patches
   e. None of the above

   ANS: E
   REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17 | Chap 2 (Herpetiform aphthous ulcers), p 39 | Chap 3 (Geographic tongue), pp 95-97 | Chap 4 (Erythroplakia), pp 121-122

23. Prodromal symptoms of pain and burning at the site where a lesion is about to occur are characteristic of which of the following?
   a. Primary syphilis
   b. Mucous membrane pemphigoid
   c. Secondary herpes labialis
   d. Chronic lupus erythematosus
   e. None of the above

   ANS: C
   REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

24. Corticosteroids are the drugs of choice for the treatment of all the following except:
   a. Pemphigus
   b. Pemphigoid
   c. Erythema multiforme
   d. Primary herpes gingivostomatitis
   e. Herpetiform aphthous ulcers

   ANS: D
   REF: Chap 1 (Herpes simplex infection/Treatment), p 6
25. Eye lesions may occur with which of the following conditions?
   a. Congenital syphilis
   b. Mucous membrane pemphigoid
   c. Behçet’s syndrome
   d. Reiter’s syndrome
   e. All the above

   ANSWER: E  
   REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17 | Chap 2 (Syphilis/Behçet’s syndrome/Reiter’s syndrome), pp 26-29 | Chap 2 (Syphilis/Behçet’s syndrome/Reiter’s syndrome), pp 42-43

26. A positive Nikolsky sign may be seen in which of the following conditions?
   a. Histoplasmosis
   b. Major aphthae
   c. Minor aphthae
   d. Mucous membrane pemphigoid
   e. None of the above

   ANSWER: D  
   REF: Chap 1 (Mucous membrane pemphigoid/Clinical features), pp 15-16

27. The keratinocyte desmosome complex is the pathologic target in which of the following diseases?
   a. Discoid lupus erythematosus
   b. Systemic lupus erythematosus
   c. Tuberculosis
   d. Pemphigoid
   e. None of the above

   ANSWER: E  
   REF: Chap 1 (Mucous membrane pemphigoid/Bullous pemphigoid), pp 15-18 | Chap 2 (Tuberculosis), pp 31-33 | Chap 3 (Discoid lupus erythematosus/Systemic lupus erythematosus), pp 102-104

28. Multiple self-limited ulcers are characteristically seen in the pharynx of patients with which of the following diseases?
   a. Herpangina
   b. Hand-foot-and-mouth disease
   c. Measles
   d. Secondary herpes simplex infections
   e. Primary syphilis

   ANSWER: A  
   REF: Chap 1 (Herpangina—entire topic), p 10

29. Epidermolysis bullosa:
   a. May result in a constricted oral orifice because of scarring
   b. Is a bullous skin disease that may have oral manifestations
   c. May be inherited
   d. May be acquired
   e. All the above

   ANSWER: E  
   REF: Chap 1 (Epidermolysis bullosa—entire topic), pp 19-20

30. Vesicles or bullae are not evident clinically in which of the following?
   a. Major aphthae
   b. Primary herpes
   c. Secondary herpes
   d. Cicatricial pemphigoid
   e. Epidermolysis bullosa

   ANSWER: E  
   REF: Chap 1 (Mucous membrane pemphigoid/Epidermolysis bullosa/Herpes simplex infection), pp 15-17 | Chap 1 (Mucous membrane pemphigoid/Epidermolysis bullosa/Herpes simplex infection), pp 19-20 | Chap 2 (Major aphthous ulcers), p 40

31. A 70-year-old woman presents with several erythematous patches and associated ulcers of her gingiva. The lesions have been continuously present for at least 5 months. The patient describes the appearance of blisters before the ulcers. She has no eye, genital, or skin lesions, and she has not been taking any drugs. This patient most likely has:
   a. Primary herpes
   b. Varicella
   c. Erythema multiforme
   d. Major aphthae
   e. Mucous membrane pemphigoid

   ANSWER: E  
   REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17

32. Systemic absorption of topical corticosteroids depends on:
   a. Patient skin pigmentation
   b. Patient ethnicity
   c. Patient gender
   d. All the above
   e. None of the above

   ANSWER: E  
   REF: Chap 1 (Topical steroids), p 14
33. A 9-year-old girl presents with marked gingival inflammation and multiple small ulcers involving her vestibular mucosa, vermilion, and perioral skin. She has a fever, malaise, joint pain, and headache. She most likely has which of the following?
   a. Primary herpes simplex infection
   b. Measles
   c. Herpangina
   d. Mucous membrane pemphigoid
   e. Acute lupus erythematosus

   ANS: A  REF:  Chap 1 (Herpes simplex infection), pp 1-6

34. Which of the following physicians’ names (eponym) is used in association with the oral herald sign of rubella?
   a. Tzanck
   b. Reiter
   c. Nikolsky
   d. Behçet
   e. Koplik

   ANS: E  REF:  Chap 1 (Measles/Clinical features), pp 10-11

35. Direct immunofluorescence is a laboratory test that is effective in confirming which of the following?
   a. Major aphthae
   b. Primary herpes simplex
   c. Zoster
   d. Drug allergy
   e. None of the above

   ANS: E  REF:  Chap 1 (Herpes simplex infection/Varicella-zoster infection), pp 1-8 | Chap 2 (Drug reactions/Major aphthous ulcers), p 40 | Chap 2 (Drug reactions/Major aphthous ulcers), pp 47-48

36. Direct immunofluorescence is done with the patient’s:
   a. Saliva
   b. Serum
   c. Tissue
   d. Cytologic smear
   e. Red cells

   ANS: C  REF:  Chap 1 (Pemphigus vulgaris/Histopathology and immunopathology), pp 12-15

37. Intraoral lesions that result from reactivation of sequestered herpes simplex virus occur in which of the following locations?
   a. Hard palate
   b. Tongue
   c. Buccal mucosa
   d. Tonsil
   e. All the above

   ANS: A  REF:  Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

38. Which of the following features would help separate pemphigus from primary herpes simplex infection?
   a. Systemic symptoms
   b. Duration of disease
   c. Persistence of disease
   d. Size of lesions and their distribution
   e. All the above

   ANS: E  REF:  Chap 1 (Herpes simplex infection/Pemphigus vulgaris), pp 1-6 | Chap 1 (Herpes simplex infection/Pemphigus vulgaris), pp 11-15

39. Acyclovir is the drug of choice for which of the following?
   a. Zoster
   b. Aphthous ulcers
   c. Pemphigus
   d. Actinomycosis
   e. Lupus erythematosus

   ANS: A  REF:  Chap 1 (Varicella-zoster infection/Treatment), p 8

40. Herpes simplex labialis is due to reactivation of a virus that resides in which of the following sites during latent periods?
   a. Basement membrane of the lip
   b. Trigeminal ganglion
   c. Submucosal macrophages in the lip
   d. Epithelium of the vermilion
   e. None of the above

   ANS: B  REF:  Chap 1 (Herpes simplex infection/Pathogenesis), pp 1-3
41. Keratinocyte dysadhesion, also known as acantholysis, due to desmosome weakening by autoantibodies is the disease mechanism attributed to which of the following?
   a. Epidermolysis bullosa
   b. Mucous membrane pemphigoid
   c. Pemphigus vulgaris
   d. Herpes simplex infections
   e. None of the above

   ANS: C
   REF: Chap 1 (Pemphigus vulgaris/Histopathology and immunopathology), pp 11-14

42. Systemic corticosteroids, when used at relatively high doses and for extended periods, may induce all the following side effects except:
   a. Elevation of blood pressure
   b. Aggravation of diabetes mellitus
   c. Hyperplasia of the adrenal cortex
   d. Cataracts
   e. Aggravation of tuberculosis

   ANS: C
   REF: Chap 1 (Systemic steroids), p15

43. Herpes simplex virus may cause vesiculoulcerative lesions on any mucosal surface in all the following patients except ______ patients.
   a. AIDS
   b. Bone marrow transplant
   c. Seropositive
   d. Seronegative

   ANS: C
   REF: Chap 1 (Herpes simplex infection/Pathogenesis), pp 1-3

44. Ophthalmologic examination is important to rule out conjunctival lesions in patients with which of the following mucocutaneous diseases?
   a. Mucous membrane pemphigoid
   b. Epidermolysis bullosa
   c. Lichen planus
   d. Herpangina
   e. Secondary syphilis

   ANS: A
   REF: Chap 1 (Mucous membrane pemphigoid/Treatment and prognosis), p 17

45. Herpes simplex virus is the cause of which of the following?
   a. Dermatitis herpetiformis
   b. Herpetiform aphthae
   c. Herpes whitlow
   d. Herpangina
   e. Herpes zoster

   ANS: C
   REF: Chap 1 (Herpetic whitlow), p 4

46. Direct immunofluorescence staining of a biopsy from a patient with mucous membrane pemphigoid would show immunoglobulin deposition in which of the following microscopic patterns?
   a. Linear fluorescence of the keratin layer
   b. Linear fluorescence of the basement membrane
   c. Irregular globular fluorescence of the basement membrane
   d. Fluorescence of the submucosal blood vessels
   e. Interepithelial fluorescence

   ANS: B
   REF: Chap 1 (Mucous membrane pemphigoid/Histopathology and immunopathology), pp 15-17

47. During active disease states, circulating autoantibodies directed toward a protein known as desmoglein 3 in skin and mucosa epithelium are seen in which of the following?
   a. Aphthous ulcers
   b. Behçet’s syndrome
   c. Erythema multiforme
   d. Pemphigus vulgaris
   e. None of the above

   ANS: D
   REF: Chap 1 (Pemphigus vulgaris), pp 11-15

48. Microscopic evidence of active herpes simplex infection appears as multinucleation in which of the following cells?
   a. Langerhans cells
   b. Macrophages
   c. Keratinocytes
   d. Schwann cells
   e. None of the above

   ANS: C
   REF: Chap 1 (Herpes simplex infection/Histopathology), p 5
49. Relative to pemphigus vulgaris and mucous membrane pemphigoid, which of the following is incorrect?
   a. IgG can be demonstrated in tissue biopsies of both diseases.
   b. Both present as ulcers preceded by blisters.
   c. Both respond to treatment with corticosteroids.
   d. Both are self-limited.
   e. Both can affect the same intraoral sites.
   ANS: D REF: Chap 1 (Pemphigus vulgaris/Mucous membrane pemphigoid), pp 11-15

50. Which of the following is known to trigger recurrent herpes simplex infections?
   a. Exposure to cold temperatures
   b. Immunodeficiency
   c. Stress
   d. Ultraviolet light exposure
   e. All the above
   ANS: E REF: Chap 1 (Herpes simplex infection/Pathogenesis/Box 1-2), pp 1-4

51. Which of the following herpesviruses is most frequently the cause of recurrent oral and perioral vesicular eruptions?
   a. VZV (varicella-zoster)
   b. EBV (Epstein-Barr)
   c. CMV (cytomegalovirus)
   d. HSV (herpes simplex), type 1
   e. HSV (herpes simplex), type 2
   ANS: D REF: Chap 1 (Herpes simplex infection/Table 1-1), pp 1-6

52. Certain drugs and herpes simplex infections are known to precipitate which of the following oral diseases?
   a. Major aphthous ulcers
   b. Pemphigus vulgaris
   c. Lupus erythematosus
   d. Behçet’s syndrome
   e. None of the above
   ANS: E REF: Chap 1 (Herpes simplex infection—entire topic), pp 1-6

53. Risk of transmission of herpes simplex infection is greatest in which of the following clinical stages?
   a. Latent stage with shedding
   b. Latent stage without shedding
   c. Vesicular stage (early lesion, 1 to 3 days)
   d. Ulcerative stage (mid lesion, 4 to 10 days)
   e. Ulcer re-epithelialization (late lesion, 11 to 14 days)
   ANS: C REF: Chap 1 (Herpes simplex infection/Treatment), p 6

54. A 67-year-old woman presents with multiple persistent large ulcers of her gingiva and buccal mucosa. Biopsy of tissue adjacent to the ulcers shows epithelial separation from submucosa through the level of the basement membrane. This is suggestive of which of the following?
   a. Major aphthous ulcers
   b. Secondary syphilis
   c. Secondary herpes simplex infection
   d. Pemphigus vulgaris
   e. Mucous membrane pemphigoid
   ANS: E REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17

55. Koplik’s spots are tiny buccal mucosal lesions that precede the cutaneous eruption of which of the following diseases?
   a. Secondary syphilis
   b. Pemphigus vulgaris
   c. Primary herpes simplex labialis
   d. Behçet’s syndrome
   e. None of the above
   ANS: E REF: Chap 1 (Measles/Clinical features), pp 10-11

56. A patient who has fever, malaise, arthralgia, headache, and oral and perioral ulcers most likely would have which of the following?
   a. Secondary herpes simplex infection
   b. Primary herpes simplex infection
   c. Shingles
   d. Herpangina
   e. Secondary syphilis
   ANS: B REF: Chap 1 (Herpes simplex infection/Clinical features/Primary herpetic gingivostomatitis), p 3

57. All the following side effects are associated with long-term prednisone use except:
   a. Elevation of blood pressure
   b. Aggravation of diabetes
   c. Moon face
   d. Aggravation or reactivation of tuberculosis
   e. Precipitation of canker sores
   ANS: E REF: Chap 1 (Systemic steroids/Box 1-6), pp 14-15

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58. Herpes whitlow is now rarely seen in dental practitioners because:
   a. Most dental personnel have protective circulating antibodies to HSV
   b. Dental personnel are vaccinated against HSV
   c. Dental personnel wear gloves when practicing
   d. Acyclovir prevents its occurrence
   e. None of the above
ANS: C  REF: Chap 1 (Herpes simplex infection/Herpetic whitlow), p 4

59. Oral vesiculoulcerative lesions are seen in association with infection by which of the following microorganisms?
   a. *Mycobacterium tuberculosis*
   b. *Treponema pallidum*
   c. Coxsackie virus
   d. *Actinomyces israelii*
   e. All the above
ANS: C  REF: Chap 1 (Hand-foot-and-mouth disease/Etiology and pathogenesis), p 8

60. Gingivitis, oral and lip ulcers, malaise, headache, and fever in a 9-year-old patient would suggest which of the following?
   a. Congenital syphilis
   b. Zoster
   c. Primary herpes simplex infection
   d. Herpangina
   e. Mucous membrane pemphigoid
ANS: C  REF: Chap 1 (Herpes simplex infection/Primary herpetic gingivostomatitis), p 3

61. A 14-year-old girl presents with several small painful ulcers in her right posterior maxillary buccal attached gingiva. The lesions have been present for 3 days. She has no other oral lesions and is otherwise in good health. This description is suggestive of traumatic ulcers and what other condition?
   a. Primary herpes simplex infection
   b. Secondary herpes simplex infection
   c. Minor aphthae
   d. Squamous cell carcinoma
   e. Herpangina
ANS: B  REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

62. AIDS immunosuppressed patients are at risk for all of the following except:
   a. Mucous membrane pemphigoid
   b. Severe herpes simplex virus infections
   c. Severe aphthous ulcers
   d. Syphilis
   e. Tuberculosis
ANS: A  REF: Chap 1 (Mucous membrane pemphigoid/Herpes simplex infection), pp 1-6| Chap 1 (Mucous membrane pemphigoid/Herpes simplex infection), pp 15-17| Chap 2 (Aphthous ulcers/Syphilis/Tuberculosis), pp 26-32| Chap 2 (Aphthous ulcers/Syphilis/Tuberculosis), pp 37-41

63. Biopsy tissue and cytology smears of early herpes simplex lesions show evidence of viral infection. The viral-induced changes would appear as alterations in the nuclei of which of the following cells?
   a. Langerhans cells
   b. Inflammatory cells
   c. Fibroblasts
   d. Muscle cells
   e. None of the above
ANS: E  REF: Chap 1 (Herpes simplex infection/Histopathology), p 5

64. An 80-year-old woman presents with multiple ulcers of her attached gingiva of 6 weeks’ duration. She also has persistent conjunctivitis. These signs taken together would be most suggestive of which of the following?
   a. Pemphigus vulgaris
   b. Mucous membrane pemphigoid
   c. Behçet’s syndrome
   d. Erythema multiforme
   e. Chronic lupus erythematosus
ANS: B  REF: Chap 1 (Mucous membrane pemphigoid/Clinical features), pp 15-16

65. Topical corticosteroids used orally for long periods and/or at high potency can cause which of the following oral problems?
   a. Lichen planus
   b. Candidiasis
   c. Cancer
   d. Aphthous ulcers
   e. Herpes simplex labialis
ANS: B  REF: Chap 1 (Topical steroids/Box 1-5), p 15
66. The childhood disease that features a maculopapular rash, predominantly of the head, neck, and trunk, preceded by tiny ulcers of the buccal mucosa is known as:
   a. Herpangina
   b. Measles
   c. Varicella
   d. Primary herpes gingivostomatitis
   e. Erythema multiforme
   ANS: B  REF: Chap 1 (Measles/Clinical features), pp 10-11

67. Unilateral distribution of cutaneous or mucosal ulcers followed by prolonged post-lesional pain would be associated with which of the following?
   a. Primary herpes simplex infection
   b. Secondary herpes simplex infections
   c. Secondary syphilis
   d. Zoster
   e. Hand-foot-and-mouth disease
   ANS: D  REF: Chap 1 (Varicella-zoster infection/Pathogenesis/Herpes zoster/Box 1-3), pp 4-7

68. A patient with a secondary oral herpes simplex infection would:
   a. Have no circulating antibodies
   b. Experience no pain in association with the disease
   c. Have positive basement membrane immunofluorescence on direct tissue examination
   d. Have fever, malaise, and arthralgia
   e. None of the above
   ANS: E  REF: Chap 1 (Herpes simplex infection—entire topic/Box 1-2), pp 1-6

69. A bullous eruption of attached gingiva mediated by autoantibodies to laminin 5 and BP antigens in basement membrane is known as:
   a. Pemphigus vulgaris
   b. Lupus erythematosus
   c. Erythema multiforme
   d. Behçet’s syndrome
   e. Mucous membrane pemphigoid
   ANS: E  REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17

70. A 16-year-old girl developed multiple recurrent fluid-filled lesions of the vermilion of her lower lip. This has happened before in the same site. She has no eye, genital, or cutaneous lesions. A cytology smear contained numerous multinucleated cells. The diagnosis is:
   a. Pemphigus vulgaris
   b. Mucous membrane pemphigoid
   c. Lichen planus
   d. Aphthous stomatitis
   e. Herpes simplex infection
   ANS: E  REF: Chap 1 (Herpes simplex infection—entire topic), pp 1-6

71. Which of the following vesiculobullous diseases occurs because of attachment of autoantibodies to antigens (desmoglein 3) in keratinocyte desmosomes?
   a. Primary herpes simplex infection
   b. Herpes zoster
   c. Pemphigus vulgaris
   d. Mucous membrane pemphigoid
   e. Epidermolysis bullosa
   ANS: C  REF: Chap 1 (Pemphigus vulgaris/Etiology and pathogenesis), p 11

72. A blistering hereditary condition typically affects the skin and mucous membranes of children. Lesions, most commonly found at pressure points, heal with scars. This condition is known as:
   a. Cicatricial pemphigoid
   b. Hand-foot-and-mouth disease
   c. Measles
   d. Epidermolysis bullosa
   e. Varicella
   ANS: D  REF: Chap 1 (Epidermolysis bullosa—entire topic), pp 19-20

73. A 76-year-old woman presents with multiple painful oral ulcers that have been persistent for at least 3 months. She states that the ulcers are preceded by blisters. She recently developed an ocular irritation that she described as a gritty sensation when she closes her eyes. Other than her chief complaint and hypertension, she is in good health. She most likely has which of the following?
   a. Primary herpes simplex infection
   b. Epidermolysis bullosa
   c. Erosive lichen planus
   d. Mucous membrane pemphigoid
   e. Tuberculosis
   ANS: D  REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17
74. A 45-year-old woman presents with a 0.5 × 1 cm painless purple patch on her mandibular gingiva. Duration was unknown. All of the following might be included in a clinical differential diagnosis except:
   a. Melanoma
   b. Kaposi’s sarcoma
   c. Erythroplakia
   d. Secondary herpes
   e. Vascular malformation

ANS: D  REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

75. A patient presented with painful ulcerative lesions in his buccal mucosa, gingiva, and tongue. The lesions were subsequently proven to be pemphigus vulgaris on biopsy. Which of the following treatment regimens would be most effective in controlling this patient’s disease?
   a. Systemic acyclovir
   b. Topical corticosteroids
   c. Systemic corticosteroids
   d. Systemic antibiotics
   e. Systemic antifungals

ANS: C  REF: Chap 1 (Pemphigus vulgaris/Treatment and prognosis), pp 14-15

76. Secondary varicella-zoster virus infections:
   a. May signal an underlying lymphoma
   b. Are more prevalent in immunocompromised patients
   c. Result from virus reactivation
   d. Are painful
   e. All of the above

ANS: E  REF: Chap 1 (Varicella-zoster/Pathogenesis/Herpes zoster/Box 1-3), p 6

77. Which of the following frequently appears in the mouth before expressing itself in the skin?
   a. Pemphigus vulgaris
   b. Bullous pemphigoid
   c. Minor aphthous ulcers
   d. Major aphthous ulcers
   e. None of the above

ANS: A  REF: Chap 1 (Pemphigus vulgaris/Clinical features), p 11

78. Which of the following herpes viruses has been associated with the development of carcinoma of the nasopharynx?
   a. VZV (varicella-zoster)
   b. HSV (herpes simplex), type 1
   c. HSV (herpes simplex), type 2
   d. CMV (cytomegalovirus)
   e. Epstein-Barr virus

ANS: E  REF: Chap 1 (Table 1-1), p 2

79. Secondary herpes simplex infections:
   a. Are cured with topical acyclovir
   b. Usually present as single oval-shaped ulcers
   c. Typically affect the buccal mucosa, tongue, and mucosal surface of the lip when occurring as an intraoral expression of the disease
   d. Are always unilateral
   e. None of the above

ANS: E  REF: Chap 1 (Secondary, or recurrent, herpes simplex infection), pp 3-4

80. A positive Nikolsky sign may be evident in which of the following conditions?
   a. Pemphigus vulgaris
   b. Cicatricial pemphigoid
   c. Epidermolysis bullosa
   d. All the above
   e. None of the above

ANS: D  REF: Chap 1 (Mucous membrane pemphigoid), pp 15-17