

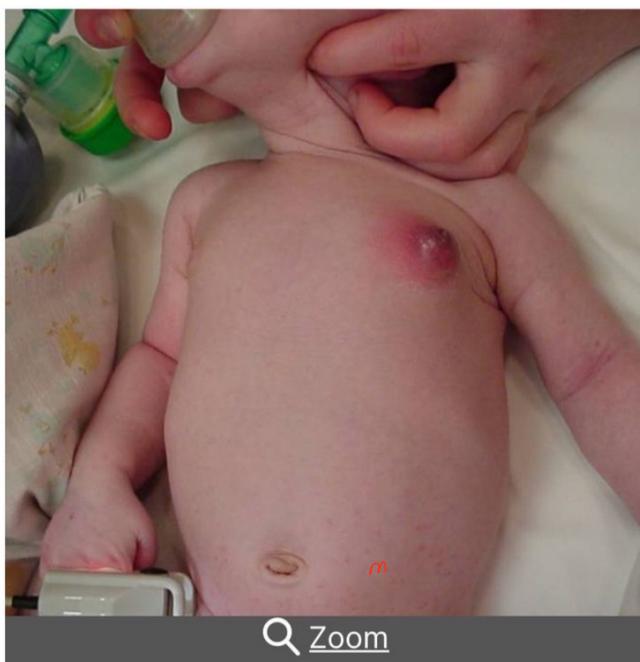
**The newborn became irritated, lost his appetite, got fever 38°C 12 days after the birth.
Left mammary gland became swollen and red.
What is your diagnosis?**

✓ Correct!

Question:

The newborn became irritated, lost his appetite, got fever 38°C 12 days after the birth. Left mammary gland became swollen and red. What is your diagnosis?

mastitis purulent



Correct Answer:

Purulent mastitis of newborns

Explanation:

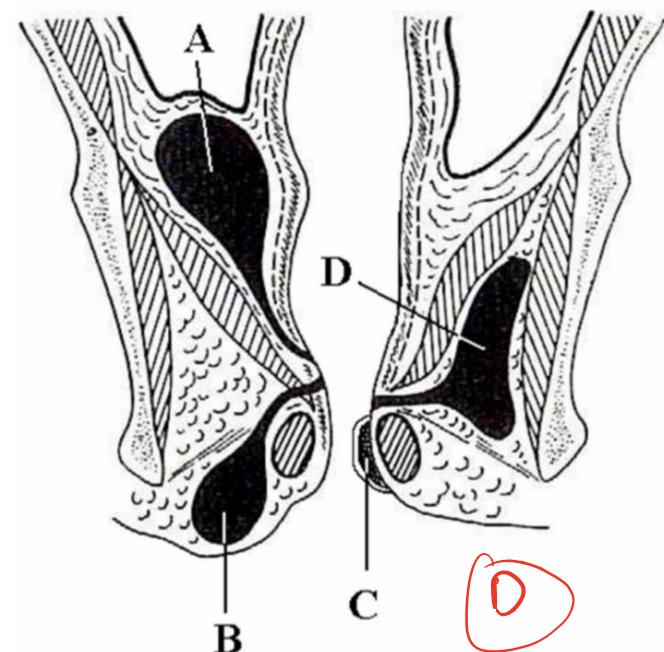
You see the abscess in the breast and around the nipple - neonatal mastitis.

Indicate ischiorectal form of paraproctitis

✓ Correct!

Question:

Indicate ischiorectal form of paraproctitis



Zoom

Correct Answer:

D

Explanation:

There are 4 forms of acute paraproctitis: subcutaneous(the most common), submucous ischiorectal and pelviorectal. Ischiorectal form is indicated "D". The diagnosis can be difficult in that form

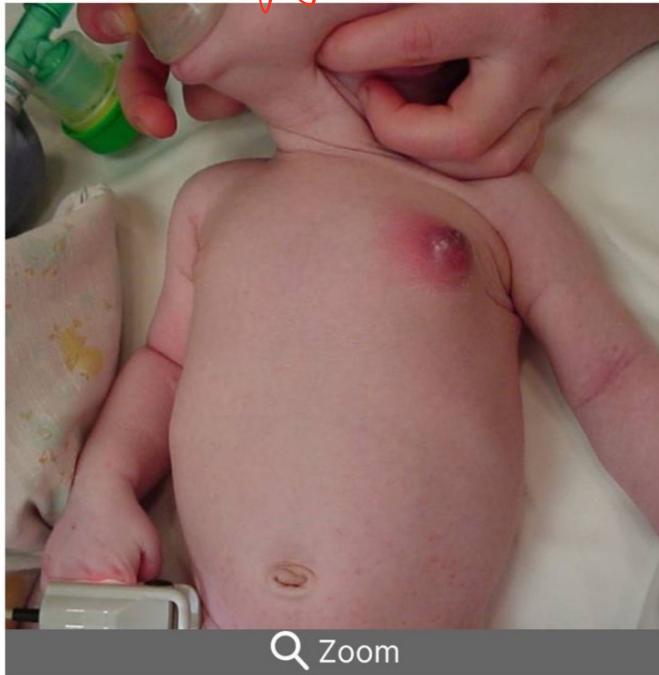
**The newborn became irritated, lost his appetite, got fever 38°C 12 days after the birth.
Left mammary gland became swollen and red.
What is the treatment?**

✓ Correct!

Question:

The newborn became irritated, lost his appetite, got fever 38°C 12 days after the birth. Left mammary gland became swollen and red. What is the treatment?

surgery, abx



Q Zoom

Correct Answer:

Urgent surgery and antibioticotherapy

Explanation:

Treatment of neonatal mastitis with abscess - surgery and antibiotics.

The patient complains of the pain in the anal area, more intensive during defecation, fever 38°C, during the inspection you see that picture. What is your diagnosis?

Question:

Paraproctitis

The patient complains of the pain in the anal area, more intensive during defecation, fever 38°C, during the inspection you see that picture. What is your diagnosis?



Q Zoom

Correct Answer:

Paraproctitis

Explanation:

Typical clinical picture of acute paraproctitis. For erysipelas the inflamed skin edges are very clearly marked without that bulking, haemangioma is different clinical picture without pain and fever, pylonidic cyst is in the sacral area, haemorrhoids have other clinical picture, more close to anus, no fever.

Which symptoms characterize phlegmonous omphalitis:

X Incorrect

Purulent fibrin Paraumbilical hyperemia, edema

Question:

Which symptoms characterize phlegmonous omphalitis:

Correct Answers

Purulent secretion from umbilicus

Paraumbilical hyperaemia

Paraumbilical tissue edema

Explanation:

Purulent secretion from umbilicus, paraumbilical hyperaemia and edema are symptoms of phlegmonous omphalitis. Just bulking of umbilicus can be symptom of umbilical hernia.

✓ **Correct!**

Most serious local complication of mastitis in newborn girls:

Most serious local complication of mastitis in newborn girls:

Correct Answer:

Milk gland necrosis

Explanation:

Milk gland necrosis it the most serious complication from listed.

OK

What type of paraproctitis is the most frequent in children

X Incorrect

Question:

What type of paraproctitis is the most frequent in children

Correct Answer:

Perianal (subcutaneous)

Explanation:

There are 4 forms of acute paraproctitis:
subcutaneous(the most common), submucous
ischiorectal and pelviorectal. Subcutaneus form is
the most frequent.

X Incorrect

**E.coli is the most probable microbe
in case of acute paraproctitis.**

E.coli is the most probable microbe in case of acute paraproctitis.

Correct Answer:

True

Explanation:

In case of acute paraproctitis we usually have E. coli,
sometimes anaerobs or both.

What could be the causes of "moist umbilicus" in newborns

✗ Incorrect

Question:

What could be the causes of "moist umbilicus" in newborns

Correct Answers

Omphalitis Granuloma of the umbilical stump

Fistula of the umbilicus

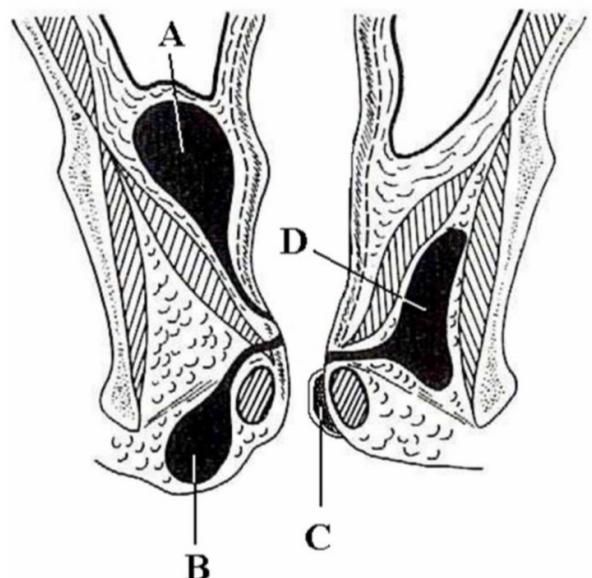
Explanation:

Just Meckel's diverticulum can not "create" moist umbilicus from those diseases.

Indicate pelviorectal form of paraproctitis

Question: Indicate pelviorectal form of paraproctitis

Indicate pelviorectal form of paraproctitis



Q Zoom

Correct Answer:

A

Explanation:

There are 4 forms of acute paraproctitis: subcutaneous(the most common), submucous ischiorectal and pelviorectal. Pelviorectal form is indicated "A". The diagnosis can be more difficult in that form, because the focus of infection is deep and far from the skin.

What can be the complications of newborn's omphalitis:

✓ Correct!

Question:

What can be the complications of newborn's omphalitis:

Correct Answers

Sepsis Phlegmone of abdominal wall

Peritonitis Liver abscess Osteomyelitis

Explanation:

All those diseases can complicate omphalitis.

✓ Correct!

Question: What pathologic process is the main in case of necrotic phlegmone of newborns

What pathologic process is the main in case of necrotic phlegmone of newborns

Correct Answer:

Necrotic

You are a GP and you have a newborn who became irritated, had fever (39 C). You noticed a red spot without clear limits in the chest area skin of newborn. Skin around the spot is infiltrated, warmer.

X Incorrect

Question:

You are a GP and you have a newborn who became irritated, had fever (39 C). You noticed a red spot without clear limits in the chest area skin of newborn. Skin around the spot is infiltrated, warmer.

Correct Answer:

Urgent referral to the pediatric surgeon or to the specialised hospital

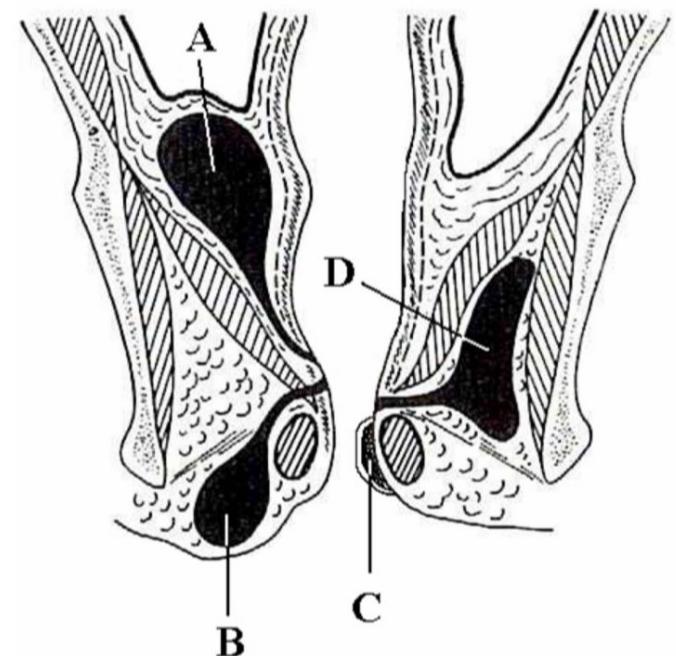
Explanation:

We have symptoms of necrotic phlegmone. Necrotic phlegmone is a very serious disease and should be intensively treated in specialized centre.

✓ Correct!

Question: Indicate submucosal form of paraproctitis

Indicate submucosal form of paraproctitis



 Zoom

Correct Answer:

 C

Explanation:

There are 4 forms of acute paraproctitis: subcutaneous(the most common), submucous ischiorectal and pelviorectal. submucosal form is indicated "C".

Pseudofurunculosis in newborns is:

✓ Correct!

Question:

Pseudofurunculosis in newborns is:

Correct Answer:

Purulent inflammation of the sweat glands

Explanation:

Pseudofurunculosis in newborns is purulent inflammation of the sweat glands.

Pseudofurunculosis is only newborns'disease.

OK

✗ Incorrect

Question: Omphalitis is differentiated from:

Omphalitis is differentiated from:

Correct Answers

Ductus omphaloentericus persistens

Fistula umbilici incompleta

Fungus (granuloma) umbilici

Explanation:

Ductus omphaloentericus persistens, fistula umbilici incompleta and Fungus (granuloma) umbilici are diseases a bit similar to omphalitis, with the secretion from umbilicus. Hernias are completely different.

Hardening of the newborn's mammary glands may be due to:

✓ Correct!

Question:

Hardening of the newborn's mammary glands may be due to:

Correct Answer:

Mastopathy

Explanation:

Hardening of the newborn's mammary glands is mastopathy (without inflammation). Other diseases are completely different.

✓ Correct!

Question: What disease is the most important in the differential diagnosis of neonatal mastitis?

What disease is the most important in the differential diagnosis of neonatal mastitis?

Correct Answer:

Mastopathy

Explanation:

Mastopathy should be differentiated from mastitis. Other diseases are very different in the clinical picture.

Most important clinical signs of the erysipeles

✓ Correct!

Question:

Most important clinical signs of the erysipeles

Correct Answer:

Intensively red, with clear limits lesion of the skin

Explanation:

Symptoms of erysipeles are intensively red, with clear limits lesion of the skin usually with good general condition. Red-bluish, infiltrated, painful area of the skin with severe general symptoms is characteristic of necrotic phlegmone. Multiple infiltration of the subskin can be due to adiponecrosis, cold edematous whitened skin mark - due to sclerema.

✓ Correct!

Question: What are the signs of pediatric paraproctitis:

What are the signs of pediatric paraproctitis:

Correct Answers

Anal pain Fever

Painful infiltration of anal area

Explanation:

Abscess - painful infiltration in anal area, pain and fever are the clinical symptoms of paraproctitis. Stool with blood can be due to fissure, polyp or haemorrhoids, incontinence of stool - due to neurologic reasons.

**The newborn is 3 weeks of age. One week ago red spot appeared in his back.
The zone of redness spread rapidly. High fever began.
Ulcers appeared 3 days ago and they formed an large area of necrosis.
What is your diagnosis?**

Question:

The newborn is 3 weeks of age. One week ago red spot appeared in his back. The zone of redness spread rapidly. High fever began. Ulcers appeared 3 days ago and they formed an large area of necrosis.
What is your diagnosis?



Zoom

Correct Answer:

Necrotic phlegmone

Explanation:

We have typical clinical presentation of complicated necrotic phlegmone in the picture.

Incorrect

Question:

Purulent inflammation of pararectal tissue most often develops:

Purulent inflammation of pararectal tissue most often develops:

Correct Answer:

When congenital pararectal fistula is present

Explanation:

Usually pararectal fistula should be present in case of paediatric acute paraproctitis. Sometime fissure, maceration of the skin and intestinal parasites (enterobiosis) can predispose development of paraproctitis.

What combination of clinical signs is characteristic to neonatal mastitis:

X Incorrect

Question:

What combination of clinical signs is characteristic to neonatal mastitis:

Correct Answers

Hardening and edema of mammary gland

Skin redness around the nipple

Fluctuation

↑ pus!

Explanation:

Neonatal mastitis is suppuration of breast tissue with hardening and edema of mammary gland, skin redness around the nipple and fluctuation.

✓ Correct!

Question:

What tissue is the primary affected in case of newborn's necrotic phlegmona:

What tissue is the primary affected in case of newborn's necrotic phlegmona:

Correct Answer:

Subskin layers

Explanation:

Subskin layers are the primary affected in case of newborn's necrotic phlegmona. Skin is affected in erysipeles. Lymph ducts - in lymphangitis.

What is paraproctitis in children

✗ Incorrect

Question:

What is paraproctitis in children

Correct Answer:

Purulent inflammation of tissue **pararectaly**

Explanation:

This is the definition of paraproctitis. Inflammation of mucosa and rectal wall is symptom of proctitis - bowel inflammation, not purulent disease.

✓ Correct!

What is the most common causative agent of children's purulent diseases?

What is the most common causative agent of children's purulent diseases?

Correct Answer:

S.aureus

Explanation:

S.aureus is the most common causative agent. Streptococcus is the second place, for example it is causative agent of erysipeles. In paraproctitis we can have E.coli, anaerobs - in case of peritonitis due to ruptured appendicitis. Kingella kingae is a very rare causative agent of acute osteomyelitis.

What is mastopathy of newborns:

A

Swollen breast tissue due to influence of hormones

B

Infection of glandular tissue

C

Redness of breasts around the nipples

D

Pathology of processus mastoideus of the skull

✓ Correct!

Question:

What is mastopathy of newborns:

Correct Answer:

Swollen breast tissue due to influence of hormones

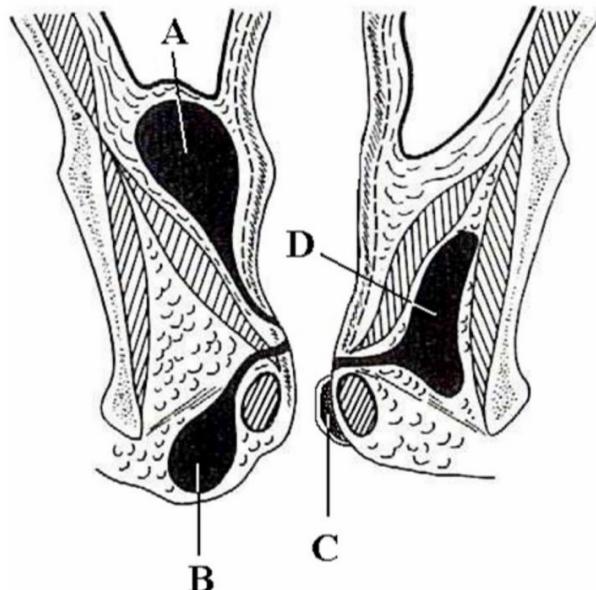
Explanation:

Swollen breast tissue due to influence of hormones is mastopathy. There are no signs of infection . Processus mastoideus - very different anatomical location.

Indicate subcutaneus form of paraproctitis

Question:

Indicate subcutaneus form of paraproctitis



Zoom

Correct Answer:

B

Explanation:

There are 4 forms of acute paraproctitis: subcutaneus(the most common), submucous ischiorectal and pelviorectal. Subcutaneus form is indicated "B". This form is the most common and the diagnosis is usually easy.

What antibiotics should you give empirically in case of acute skin and subskin infection in children?

What antibiotics should you give empirically in case of acute skin and subskin infection in children?

- A Carbapenems
- B Penicillin
- C Oxacillin or first generation cephalosporins
- D The second generation cephalosporins
- E The third generation cephalosporins