### Quiz 1

What conditions are associated with coexisting clubbing and cyanosis?

- a. Cardiac: CCHD
- b. Vascular: AVM (congenital and acquired) (localized, as a part of systemic disease)
- c. *Pulmonary:* ILD d. *Special situations*
- a. Cardiac
  - 1. Fallot's tetralogy
  - 2. Shunt reversal (R to L)—Eisenmenger syndrome in ASD/VSD/PDA
- b. Vascular
  - 1. AVM—congenital localized limbs, lung
  - 2. Acquired—as a requirement for hemodialysis, bullet injury
  - 3. As a part of systemic disease—hepatorenal syndrome
- c. Pulmonary

ILD

d. Special situations

Bronchiectasis—usually associated with clubbing only. Cyanosis indicated collaterals between pulmonary and bronchial arteries—very rare situation.

# 7. Bald Tongue

# **OBSERVATION**

Sides of the tongue show indentation with the teeth marks + surface of the tongue has lost papillae  $\rightarrow$  bald tongue



#### Quiz 2

# What are the causes of pseudohypertrophy?

Causes of pseudohypertrophy include:

- 1. Duchenne's muscular dystrophy
- 2. Myhre syndrome—short stature, brachydactyly, deafness, mental retardation, facial dysmorphism, striking muscular build.
- 3. Kocher-Debré-Semelaigne syndrome—hypothyroidism related pseudohypertrophy of calf muscles in pediatric age group.
- 4. Amyloid related to systemic amyloidosis.

#### Quiz 3

# What is the new contemplated use of calf muscles?

As LV assist device—research in progress.

# 15. Wound Myiasis

## **OBSERVATION**

Larvae of housefly coming out of the ulcer.



### Quiz 1

# What is myiasis?

Infection due to invasion of tissues or cavities of the body by larvae of dipterous insects, e.g. housefly larvae.

#### Quiz 2

Larvae of house fly seen teeming in the wound. This is an example of wound myiasis.

# 21. Complications of Tobacco use

# **OBSERVATION**

Incompletely opened mouth, stained teeth, growth in the posterior part of the mouth, staining of tongue.



#### Quiz 1

# What is the inference?

Staining of teeth: Central teeth stained by smoking; lateral and other teeth stained by chewing tobacco.

Staining of tongue:

Growth in the oral cavity—possibly malignant

Inability to open the mouth completely suggests—submucus fibrosis.

# Quiz 2

# What are the types of tobacco use and misuse?

Types of tobacco use include

- a. Smoked tobacco
- b. Smokeless tobacco
  - Snuff
  - 2. Chewing tobacco (cheni, gutka—held in the mouth between teeth and cheek)
  - 3. Toothpaste

#### Quiz 3

### What is inverse Marcus Gunn phenomenon?

This is a condition where the eyelids close upon opening the mouth (reverse of the Marcus Gunn Phenomenon).

#### Quiz 4

# How do you identify myesthenia gravis as the cause of ptosis?

By using edrophonium injection IV—remarkable improvement will be seen in 30 seconds and worsening shortly thereafter.

#### Quiz 5

## What are the features of ptosis due to Horner's syndrome?

The other findings could include—wasting of sternomastoid—clavicular head (XI nerve involved); Wasting of trapezius (XI, XII nerves)—lesion could be on the base of the skull.

Hoarseness of voice with gradual involvement of XI, XII nerves could be due to a neurofibroma of the XII nerve.

Partial unilateral ptosis without frontalis overreaction and with small pupils and dysphagia could be at the brain stem.

#### Quiz 6

# When do you suspect functional ptosis/pseudoptosis?

One sided drooping of the eyelid (on the side of ptosis) and an overreaction of the frontalis muscle on the other side.

#### Quiz 7

#### Which mid brain lesions can cause ptosis?

Vascular, encephalitic, MS.

Ptosis with headache may be due to an aneurysm in the circle of Willis—most often a PCA aneurysm.

Ptosis without headache may be due to syphilis (tabes dorsalis) and diabetes.

#### Quiz 8

### What are the features of tabes dorsalis?

Joints—painless range of increased abnormal movements—neuropathic joint, AR pupil, ptosis (usually bilateral).

#### Quiz 9

## What are the differential diagnosis of abnormally increased joint movement range?

- a. Ligament laxity syndromes, e.g. pseudoxanthoma elasticum;
- b. Hypotonia—LMN paralysis, cerebellar lesions, posterior column lesions (like tabes dorsalis).