

QUESTION

A 65-year-old male patient with a long history of hypertension and a recent diagnosis of type 2 diabetes mellitus is being treated with lisinopril and metformin. He has been experiencing increasing fatigue and weakness over the past few weeks. His blood pressure is well-controlled, and his blood glucose levels are stable. Physical examination reveals mild anemia and no other significant findings. Laboratory tests show a hemoglobin level of 11 g/dL, a hematocrit of 33%, and a ferritin level of 100 ng/mL. The patient's diet is generally healthy but lacks variety. What is the most likely cause of his symptoms?

- A. Iron deficiency anemia
- B. Vitamin B12 deficiency
- C. Folate deficiency
- D. Chronic kidney disease
- E. Hypothyroidism

ANSWER: A

EXPLANATION: The patient's symptoms of fatigue and weakness, along with the laboratory findings of mild anemia and low ferritin, are most consistent with iron deficiency anemia.

QUESTION

A 45-year-old female patient with a long history of rheumatoid arthritis is being treated with chronic low-dose prednisone. She has been experiencing increasing weight gain and a "moon face" over the past few months. Her blood pressure is well-controlled, and her blood glucose levels are stable. Physical examination reveals a moon face, buffalo hump, and mild hypertension. Laboratory tests show a hemoglobin level of 12 g/dL, a hematocrit of 38%, and a ferritin level of 100 ng/mL. The patient's diet is generally healthy but lacks variety. What is the most likely cause of her symptoms?

- A. Iron deficiency anemia
- B. Vitamin B12 deficiency
- C. Folate deficiency
- D. Chronic kidney disease
- E. Hypothyroidism

ANSWER: E

EXPLANATION: The patient's symptoms of weight gain and "moon face" are most consistent with Cushing's syndrome, which is a common complication of chronic low-dose prednisone therapy.