

QUESTION

1. A patient with a long history of alcohol abuse presents with a 2-week history of weight loss, anorexia, and weakness. Physical examination reveals a 10% weight loss, tachycardia, and a positive Tinel's sign. Laboratory studies show a serum albumin of 2.5 g/dL, a total bilirubin of 2.0 mg/dL, and a prothrombin time of 18 seconds. The patient's most likely diagnosis is:

A. Alcohol withdrawal
B. Acute pancreatitis
C. Wernicke's encephalopathy
D. Cirrhosis
E. Vitamin B12 deficiency

Option	Correct Answer	Explanation
A	Incorrect	Alcohol withdrawal typically presents with tremors, tachycardia, and hypertension, but not with weight loss or a positive Tinel's sign.
B	Incorrect	Acute pancreatitis is characterized by severe abdominal pain and elevated serum amylase and lipase levels.
C	Incorrect	Wernicke's encephalopathy is characterized by a triad of ophthalmoplegia, ataxia, and confusion.
D	Correct	The patient's symptoms and physical findings are consistent with cirrhosis. The laboratory studies show a low albumin, elevated bilirubin, and a prolonged prothrombin time, all of which are characteristic of liver failure.
E	Incorrect	Vitamin B12 deficiency is characterized by megaloblastic anemia and neurological symptoms, but not by a positive Tinel's sign.

2. A 65-year-old man with a long history of alcohol abuse presents with a 2-week history of weight loss, anorexia, and weakness. Physical examination reveals a 10% weight loss, tachycardia, and a positive Tinel's sign. Laboratory studies show a serum albumin of 2.5 g/dL, a total bilirubin of 2.0 mg/dL, and a prothrombin time of 18 seconds. The patient's most likely diagnosis is:

ANSWER



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