

Answer true or false for each of the following statements. The issues raised by these statements will form the basis for part of the quiz on Thursday, May 1, 2008.

1. The ST-segment abnormalities in the inferior leads of the electrocardiogram in this case probably represent “electrical alternans.”
2. In general, pulsus paradoxus is common in cardiac tamponade while Kussmaul’s sign is more characteristic of constrictive pericarditis.
3. The echocardiogram in this patient indicated that during diastole the pericardial pressure was transiently higher than the pressure in the right ventricle.
4. Different mechanisms were involved on each of the two occasions that the patient lost consciousness.
5. The “dramatic respiratory changes in mitral inflow velocity” seen on the echocardiogram in this patient probably consisted of an increase in flow with inspiration and a decrease in flow with expiration.
6. The clear lungs on chest x-ray is unexpected and unexplained in this patient with an elevated pulmonary capillary wedge pressure.
7. The discussant’s suggestion to administer long-term beta-adrenergic blockers has the additional benefit of counteracting the patient’s “cardiac asthma.”
8. Nitroglycerin is a first line drug of choice for chest pain in patients with aortic dissection.
9. In general, syncope is most commonly caused by reflex parasympathetic activation following an episode of excess sympathetic discharge.
10. The “equalization of diastolic pressures” in this patient was caused ultimately by the limited ability of the parietal pericardium to adjust its compliance in the short time duration of this episode.