

## **EAN Spring School** 2020

## Exit Exam, 5 September 2020

(only 1 correct answer per question)

Stefan	Evers
Which	disorder is per definition an idiopathic chronic headache disorder?
	Idiopathic intracranial hypertension Chronic posttraumatic headache Chronic cluster headache New onset persistent headache Trigeminal neuralgia
Which (	drug has a specific indication only for chronic migraine?
	Betablockers Amitriptyline Botulinum toxin Indomethacin Topiramate
Which :	nerve can be blocked to treat cluster headache for some days?
	Greater occpital nerve Vagal nerve Intermedius nerve Infraorbital nerve Mandibular nerve
Rigmo	or Jensen
The dur	ation of a typical cluster headache attack?
	5-15 minutes 10-20 minutes 15-180minutes

## Jan Versijpt What is the m

What is the most frequent cause of orofacial pain?		
☐ Dental pain		
☐ Trigeminal neuralgia		
Persistent idiopathic facial pain		
Facial migraine		
What agent has the most evidence for the prevention of migraine both from an efficacy and safety perspective?		
☐ Topiramate		
Propranolol		
☐ Metoprolol		
☐ Erenumab		
When is the initiation of a preventive agent for migraine indicated?		
From more than 4 headache days per month		
In case of severe headache episodes		
☐ In case of menstrual migraine		
☐ If comorbid conditions require a maintenance treatment		
All of the above		
Giancarlo Comi		
The Female/male incidence ratio in the last 100 years is:		
☐ Stable		
☐ Increased		
<ul><li>Decreased</li><li>Increased in nordic countries only</li></ul>		
increased in nordic countries only		
Which one of these statements concerning the familial risk ratio for MS is wrong?		
Is 20-30 in monozigotic twins		
1s 6-10 in diziyotic twins		
<ul><li>☐ Is 4-6 in sibling</li><li>☐ Is 1-2 in cousin</li></ul>		
The number of loci associated to MS is:		
□ 20-50		
☐ 50-150		
☐ 150-300		
── >300		

## **Paulus Rommer**

Treatment Options in Multiple Sclerosis:		
<ul> <li>are available with sufficient efficacy for all patients</li> <li>are equally effective</li> <li>aim mainly at inflammation</li> <li>all have similar side effects</li> <li>can sufficiently treat the neurodegeneration</li> </ul>		
The treatment decision should:		
<ul> <li>be based solely on the possible side effects</li> <li>be based solely on efficacy data from Phase III studies</li> <li>not be changed in the course of time</li> <li>should take into account that the newest drugs are also the best</li> <li>be tailored to the individual needs of the patient</li> </ul>		
The following statement is correct:		
<ul> <li>the Corona pandemic has no impact on the treatment situation and all drugs are equally good or bad in terms of COVID-19</li> <li>the therapeutic options in the treatment of MS are impressive, yet we cannot adequately treat progressive MS</li> <li>there is no place for natalizumab anymore, as highly efficacious drugs are available without the risk of PML</li> <li>with the approved therapies or with autologous stem cell transplantation a cure can be achieved</li> <li>in times of monoclonal antibodies there is no more place for injectables</li> </ul>		
Erich Schmutzhard		
What is the average annual incidence rate (= patients per 100.000 per year) of meningococcal meningitis in Europe?		
□ 0.01         □ 0.5         □ 2.0         □ 10		
In which acutely life threatening CNS infection is Dexamethason capable to improve outcome and reduce mortality?		
<ul> <li>cerebral malaria</li> <li>Waterhouse-Friederichsen Syndrome</li> <li>arboviral meningoencephalitis</li> <li>Listeria monocytogenes brainstem menigoencephalitis</li> <li>pneumococcal meningitis</li> </ul>		

Which central nervous system infections are "typically" seen in migrants, refugees or asylum-seekers?		
<ul> <li>cerebral Plasmodium falciparum malaria and menimgococcal meningitis</li> <li>CNS tuberculosis and Neurocysticercosis</li> <li>vector-borne diseases as arboviral encephalitis and Borrelial infections</li> <li>tetanus and diphtheria</li> <li>Neuro-AIDS and neurosyphilis</li> </ul>		
Johann Sellner		
The most common parainfectious neurological complication of SARS-CoV2 infection is		
<ul><li>☐ Guillain-Barre syndrome</li><li>☐ Myelitis</li><li>☐ Rhombencephalitis</li><li>☐ Myositis</li></ul>		
The SARS-Co2-related cytokine storm is an emerging cause of		
Akinetic mutism Car accidents Encephalopathy Alzheimer's disease		
The susceptibility for neuroinfectious complications of SARS-CoV2 infection		
<ul> <li>□ is determined by the presence of neurological comorbidity</li> <li>□ is determined by the presence of cardiovascular comorbidity</li> <li>□ is determined by the presence of immunosuppressive therapy</li> <li>□ remains to be elucidated</li> </ul>		
Points: out of <b>19</b> questions		
Evaluation key: 70% correct = <b>13</b> correct		