



Course title: Cardiovascular Risk Factors: Lifestyle, Diet & Diseases

Cardiovascular Risk Investigation: When Should It Start?

1. _____ can be considered the period of structuring of life, where patterns such as diet and lifestyle are built.
(A): Adulthood
(B): Teenage
(C): Old age
(D): Childhood
2. Which of the following factors are associated with cardiovascular risk in children and adolescents?
(A): Sedentary lifestyle and Atherogenic diet
(B): Hypertension genetic factors
(C): Obesity, Metabolic syndrome and Dyslipidemia
(D): All of the above
3. High levels of _____ present in the blood are critical for the generation of atherosclerosis.
(A): sugar
(B): phosphate
(C): lipoproteins
(D): iron
4. _____ are strongly associated with the risk of developing atherosclerotic disease because they can deposit on the vessel wall and then start the process of low-density lipoprotein accumulation.
(A): Sugar
(B): Phosphate
(C): Triglycerides
(D): Good cholesterol
5. _____ represents the most common chronic disorder, and it has especially increased prevalence among poor children and minorities.
(A): Exercise
(B): Obesity
(C): Healthy eating
(D): Good cholesterol
6. Metabolic syndrome (MS) is currently characterized by the combination of a number of risk factors for cardiovascular diseases including which of the following?
(A): dyslipidemia and obesity
(B): high blood pressure
(C): disorders of carbohydrate metabolism
(D): All of the above
7. It has also been demonstrated in children that a direct association between obesity and insulin resistance syndrome is a major precursor of atherosclerotic cardiovascular disease and type II diabetes.
(A): True
(B): False
8. _____ has been identified as one of the most potent antecedents of coronary heart disease.
(A): COPD
(B): Cirrhosis
(C): Arterial hypertension (AH)

(D): Irritable bowel syndrome

9. Which of the following factors are known to be related to BP in adults and are also associated with the behavior of BP in children and adolescents?

- (A): sex and age
- (B): family history of AH
- (C): excess weight or obesity
- (D): All of the above

10. Which of the following changes in lifestyle are crucial in preventing hypertension?

- (A): weight control
- (B): reducing sodium intake
- (C): physical exercise
- (D): All of the above

Early Identification of Cardiovascular Risk Factors in Adolescents & Follow-Up Intervention Strategies

11. Which of the following play a role in shaping adolescent health beliefs and lifestyle behaviors that are often carried into adulthood?

- (A): parental and family influences
- (B): peers and educators
- (C): media
- (D): All of the above

12. _____ are a major cause of morbidity and premature mortality in men and women in the industrialized world and many developing countries.

- (A): Lung cancer
- (B): Cardiovascular diseases
- (C): Brain tumors
- (D): Asthma

13. Heart attacks and coronary heart disease (CHD) are primarily caused by _____, where a narrowing and hardening of the arteries result from an accumulation of fat and cholesterol deposits called plaque.

- (A): diabetes
- (B): acid reflux
- (C): atherosclerosis
- (D): COPD

14. Nutritional intake, physical activity or inactivity and smoking attitudes and behaviors begin in childhood.

- (A): True
- (B): False

15. Which of the following are other risk factors that have been identified with heart disease in the research?

- (A): individual stress response and depression
- (B): drinking too much alcohol
- (C): sleep patterns and socioeconomic status (SES)
- (D): All of the above

16. _____ use is considered the number one individually preventable and modifiable cause of cancer and cardiovascular disease.

- (A): Tobacco
- (B): Gym
- (C): Swimming pool
- (D): none of the above

17. Which of the following is a suggested advice regarding smoking?

- (A): Quit smoking

- (B): Use effective smoking cessation strategies
- (C): Switch to e-cigarettes
- (D): both A and B

18. The study found that skipping _____ over a long period may have detrimental effects on cardiometabolic health.

- (A): lunch
- (B): breakfast
- (C): dinner
- (D): afternoon snack

19. Researchers concluded that consumption of added sugars among U.S. adolescents is positively associated with multiple measures known to increase cardiovascular disease risk.

- (A): True
- (B): False

20. Regular _____ activity has cardiovascular benefits.

- (A): watching television
- (B): playing video games
- (C): physical
- (D): none of the above

21. Which of the following is suggested for physical activity?

- (A): Regular aerobic activity (30-60 minutes of moderate physical activity on most days)
- (B): Limit sedentary activities (under 2 hours per day)
- (C): engaging in social media
- (D): both A and B

22. Hypertension has been linked to which of the following?

- (A): cardiovascular diseases
- (B): stroke
- (C): kidney disease
- (D): All of the above

23. _____ screening is also important for children and adolescents as hyperlipidemia is a known risk factor for the development of cardiovascular disease.

- (A): Cholesterol
- (B): Hemoglobin
- (C): Cancer
- (D): Kidney stone

24. Which of the following is suggested advice for cholesterol?

- (A): Be aware of family history
- (B): Get tested and monitor levels
- (C): Eat well and avoid certain fats in the diet
- (D): All of the above

25. One common measurement that has been used to measure overweight in adults is the _____.

- (A): gender
- (B): body mass index (BMI)
- (C): age
- (D): none of the above

26. Cardiovascular disease has been found to occur at a higher frequency and at a younger age in patients with _____ compared to the general population.

- (A): Type I Diabetes (T1D)
- (B): COPD
- (C): asthma

(D): dermatitis

27. In obese children, obstructive sleep apnea (OSA) has been linked to the early onset of cardiovascular morbidity and metabolic morbidity.

(A): True (B): False

28. Education and health promotion interventions for adolescents should be integrated into which of the following health promotion approaches?

(A): school-based
(B): community-based
(C): family-based
(D): All of the above

Novel and Traditional Cardiovascular Risk Factors in Adolescents

29. _____ is a novel risk factor contributing to the escalation of cardiovascular risk in the youth populations.

(A): overweight/obesity
(B): diabetes
(C): hypertension and dyslipidemia
(D): sleep deprivation

30. _____ is closely associated with clustering of cardiovascular risk factors with insulin resistance being the possible link.

(A): Age
(B): Obesity
(C): Gender
(D): Race

31. Central obesity reflects excess _____ which is a major culprit for insulin resistance and associated cardiovascular disease in both adults and children.

(A): visceral adiposity
(B): salt intake
(C): COPD
(D): none of the above

32. Adolescence obesity is a global concern because obesity associated cardiovascular risk factors and abnormalities are potentially reversible in early disease stage.

(A): True (B): False

33. _____ is a disorder of glucose metabolism with complex inter plays between genetic, lifestyle and environmental factors.

(A): COPD
(B): Pancreatitis
(C): Diabetes
(D): Acid reflux

34. For adolescents with type 1 diabetes who present with acute decompensation and diabetic ketoacidosis (DKA), _____ is the standard therapy.

(A): insulin therapy
(B): chemo therapy
(C): physical therapy
(D): acupuncture

35. Which of the following contribute to the rise in the prevalence of hypertension in the youth?

(A): physical inactivity
(B): high salt/sodium intake
(C): fruits and vegetables intake
(D): both A and B

36. ____ remains to be the primary target of lipid control to prevent cardiovascular events in adults.
(A): Hemoglobin
(B): Iron intake
(C): Low density lipoprotein (LDL) cholesterol
(D): Vitamin C

37. Sleep deprivation is now increasingly recognized as a lifestyle factor contributing to the global epidemic of childhood obesity and a novel, potentially reversible cardiovascular risk factor.
(A): True (B): False

38. _____ is the key organ to eliminate heavy metals from the body.
(A): Stomach
(B): Large intestine
(C): Pancreas
(D): Kidney

Cardiovascular Risk Factors in the Elderly

39. Markers of cardiovascular aging in humans are the progressive rise of which of the following?
(A): systolic blood pressure, pulse pressure and pressure pulse rate
(B): left ventricular mass and coronary artery disease
(C): atrial fibrillation prevalence
(D): All of the above

40. With aging, cardiovascular (CV) diseases become more frequent and complicated.
(A): True (B): False

41. The most important pathologic cause is _____, which results in coronary and cerebrovascular events and other major health problems.
(A): hepatitis
(B): asthma
(C): pollutants
(D): atherosclerosis

42. Which of the following are non-drug treatments for hypertension?
(A): sodium restriction and maintaining ideal weight
(B): smoking cessation
(C): regular exercise and reducing dietary fat content
(D): All of the above

43. _____ is one of the most important risk factors in the development of atherosclerosis.
(A): Hepatitis
(B): Asthma
(C): COPD
(D): Hyperlipidaemia

44. Atherogenic particles are defined as which of the following?
(A): low-density lipoprotein (LDL) cholesterol
(B): non-high density lipoprotein (HDL) cholesterol
(C): total cholesterol and Apolipoprotein B (Apo B)
(D): All of the above

45. _____ decrease cholesterol synthesis by inhibiting HMG CoA Reductase, the most important enzyme in the synthesis of cholesterol.
(A): Nonsteroidal anti-inflammatory drugs (NSAIDs)
(B): Oxycodone
(C): Statins
(D): Oxymorphone

46. _____ aggravates angina pectoris and precipitates silent myocardial ischemia in older patients

who have CAD.

- (A): Exercise
- (B): Smoking
- (C): Swimming
- (D): Healthy diet

47. Some meta-analyses clearly show that high sensitivity _____ is useful in predicting Cardiovascular risk.

- (A): lipid activity
- (B): C-reactive protein (hs-CRP)
- (C): calcium uptake
- (D): none of the above

Vascular Inflammation: A New Horizon in Cardiovascular Risk Assessment

48. _____ remains the leading cause of death across the globe.

- (A): Coronary artery disease (CAD)
- (B): COPD
- (C): Liver cancer
- (D): Ovarian cancer

49. Atherogenesis in blood vessels has been described to occur in _____ major steps.

- (A): one
- (B): two
- (C): three
- (D): four

50. _____ of plaques is an active process involving deposition of hydroxyapatite crystals, as opposed to simple mineral precipitation within the vessel wall.

- (A): Oxidization
- (B): Softening
- (C): Calcification
- (D): none of the above

51. Coronary arteries are best imaged during _____, when there is little cardiac motion.

- (A): respiration phase
- (B): diastole
- (C): oxidation phase
- (D): systole

52. Coronary calcium scans are performed using the axial mode and with prospective _____ gating.

- (A): MRI
- (B): ultrasound
- (C): electrocardiogram (ECG)
- (D): none of the above

53. It has been proven that plaque rupture and acute coronary syndromes are generally a function of the total _____ burden.

- (A): atherosclerotic
- (B): hepatic
- (C): neurogenic
- (D): respiratory

54. Since calcium is known to appear at an advanced stage of atherosclerosis, it has been proposed that patients with calcify plaques also likely to have "soft" plaques that could be vulnerable to rupture.

- (A): True
- (B): False

55. Which of the following are the culprits in acute coronary syndromes?

- (A): Plaque inflammation
- (B): ruptures
- (C): acid reflux disease
- (D): both A and B

Cardiometabolic Syndrome

56. The research suggested that _____ was a fundamental “disorder” associated with a set of metabolic abnormalities.

- (A): insulin resistance
- (B): pancreatitis
- (C): COPD
- (D): hyperthyroidism

57. The basic scientists and endocrinologists support the point of view that the insulin resistance and compensatory hyperinsulinemia are squarely responsible for the metabolic syndrome.

- (A): True
- (B): False

58. The metabolic syndrome is a cluster of cardiovascular risk factors associated with an increased risk of which of the following?

- (A): type 2 diabetes mellitus
- (B): cardiovascular morbidity
- (C): cardiovascular mortality
- (D): All of the above

59. The multiplicity of prevalence data suggest that the metabolic syndrome is common worldwide, especially among _____ and in certain ethnic populations.

- (A): infants
- (B): teenagers
- (C): older people
- (D): none of the above

60. Growing evidence pointed to _____ as an independent risk factor for metabolic syndrome and type 2 diabetes.

- (A): exercise
- (B): smoking
- (C): yoga
- (D): healthy diet

61. Greater intakes of which of the following were associated with a lower prevalence of the metabolic syndrome?

- (A): fruits
- (B): vegetables
- (C): fried food
- (D): both A and B

62. _____ is an important potential determinant of the metabolic syndrome.

- (A): Daily exercise
- (B): Sedentary behavior
- (C): Swimming
- (D): Healthy diet

63. The metabolic syndrome also appeared to be triggered by which of the following?

- (A): adverse psycho-social circumstances
- (B): certain chronic psychological pathologies
- (C): chronic stress
- (D): All of the above

64. Recently, the scientific evidence linking _____ to heart attacks, strokes and cardiovascular death, has been substantially supported.

- (A): daily exercise
- (B): air pollution
- (C): swimming
- (D): healthy diet

65. The metabolic syndrome is a multi-factorial disorder and its development is the result of interactions between biological, behavioral and environmental factors.

- (A): True
- (B): False

Relationship Between Cardiovascular Risk Factors and Periodontal Disease: Current Knowledge

66. _____ is a generally chronic disorder characterized by the breakdown of the tooth supporting tissues and the impaired host inflammatory immune response.

- (A): COPD
- (B): Cirrhosis
- (C): Periodontitis
- (D): Irritable bowel syndrome

67. _____ is an inflammation and infection of bones and ligaments that act as holders of teeth.

- (A): Gastritis
- (B): Cirrhosis
- (C): Periodontitis
- (D): Sinusitis

68. An inflammation and infection of gums is called _____.

- (A): gastritis
- (B): cirrhosis
- (C): gingivitis
- (D): sinusitis

69. Dental plaque and tartar accumulates on the basis of teeth and can be prevented by which of the following?

- (A): adequate tooth cleaning methods
- (B): periodic cares from a professional
- (C): not brushing
- (D): both A and B

70. _____ are the world's largest killers, claiming 17.1 million lives a year, representing 29% of all global deaths.

- (A): Lung cancer
- (B): Cardiovascular diseases
- (C): Brain tumors
- (D): Asthma

71. Which of the following are usually acute events and are mainly caused by a blockage that prevents blood from flowing to the heart or brain?

- (A): heart attacks
- (B): strokes
- (C): appendicitis
- (D): both A and B

72. LDL and fatty acids are incremented both in _____ and periodontitis.

- (A): exercise
- (B): obesity
- (C): healthy eating
- (D): good cholesterol

73. _____ is strongly related to obesity.

- (A): Type II diabetes
- (B): Brain tumor

- (C): Cancer
- (D): Dermatitis

74. Which of the following can provokes changes in blood lipid profile?

- (A): insulin resistance
- (B): hyperglycemia
- (C): fruits and vegetables intake
- (D): both A and B

75. Diabetes is strongly related with hypertension and thus, _____.

- (A): Lung cancer
- (B): Cardiovascular diseases
- (C): Brain tumors
- (D): Asthma

Cardiovascular Risk Assessment in Diabetes & Chronic Kidney Diseases: A New Insight & Emerging Strategies

76. Which of the following are major comorbidities with cardiovascular disease (CVD)?

- (A): diabetes mellitus (DM)
- (B): chronic kidney disease (CKD)
- (C): healthy lifestyle
- (D): Both A and B

77. _____ is the leading cause of ESRD and a major cardiovascular risk.

- (A): Asthma
- (B): Diabetes mellitus (DM)
- (C): Dermatitis
- (D): Prostate cancer

78. _____ is presumed to be the common pathway for all features of the metabolic syndrome.

- (A): Acid reflux
- (B): Insulin resistance
- (C): Gastritis
- (D): Sinusitis

79. The abbreviation "MARC" includes which of the following components?

- (A): Metabolic
- (B): Arterial
- (C): Renal and cardiac
- (D): All of the above

80. Diabetes and abnormalities in glucose metabolism are well known risk factors for which of the following?

- (A): cardiac and arterial disease
- (B): renal disease
- (C): anemia
- (D): All of the above

81. Dyslipidemia including increased LDL and TG as well as low HDL is a major risk in patients with which of the following?

- (A): chronic renal disease
- (B): hypertension
- (C): diabetes
- (D): All of the above

82. _____ is strongly associated with arterial stiffness and promotes left ventricular dysfunction.

- (A): Blood pressure
- (B): Dermatitis

- (C): Asthma
- (D): Sinusitis

83. _____ is a common finding in diabetes mellitus (DM) and has multi-factorial mechanisms.

- (A): Baldness
- (B): Anemia
- (C): Ringworm
- (D): Athlete's foot

84. It is proposed that _____ is the fuel that "burns" the circulatory syndrome.

- (A): allergies
- (B): ingrown nail
- (C): inflammation
- (D): dandruff

Non Invasive Assessment of Cardiovascular Risk Profile: The Role of the Ultrasound Markers

85. Which of the following plays key role in development, progression, and rupture of atherosclerotic plaque?

- (A): inflammation
- (B): immune responses
- (C): sinusitis
- (D): Both A and B

86. _____ is considered the basic pathogenic mechanism of cardiovascular disease.

- (A): Baldness
- (B): Endothelial dysfunction
- (C): Ringworm
- (D): Athlete's foot

87. A non-invasive method to assess endothelium-dependent flow-mediated vasodilation (FMD) is usually performed at brachial artery level by high-frequency _____.

- (A): ultrasonographic imaging
- (B): MRI
- (C): radiography
- (D): CT

88. The FMD examination requires the patients to be supine, at rest and fast for at least _____ hours before the study.

- (A): 24
- (B): 48
- (C): 8 to 12
- (D): 72

89. Ultrasonographic evaluation of FMD should be performed at constant temperature, in an environment equipped with _____.

- (A): heater
- (B): dehumidifier
- (C): exhaust fan
- (D): air conditioning

90. The study has showed that the use of ultrasound to measure the infra-renal aortic diameter is attractive because of which of the following?

- (A): it is rapid
- (B): it is cheap
- (C): it is noninvasive
- (D): All of the above

91. Among imaging techniques for detection of early preclinical stages of atherosclerosis, the best is

the measurement of the _____ using ultrasound high-resolution B-mode.

- (A): femoral artery
- (B): carotid intima-media thickness (CCA-IMT)
- (C): large intestine
- (D): kidneys

Endothelial Progenitor Cell Number: A Convergence of Cardiovascular Risk Factors

92. The _____ of adult humans is a source of endothelial progenitor cells (EPCs) that circulate in the blood and repair damaged endothelium.

- (A): liver
- (B): bone marrow
- (C): large intestine
- (D): kidneys

93. The manifestations of cardiovascular disease share which of the following common risk factors?

- (A): age and smoking
- (B): hypertension and diabetes
- (C): hypercholesterolemia
- (D): All of the above

94. Diabetes is a risk factor associated with heightened cardiovascular risk and endothelial dysfunction.

- (A): True
- (B): False

95. _____ can boost EPC numbers in postmenopausal females by 25% and enhance endothelial function.

- (A): Chemo therapy
- (B): Acupuncture
- (C): Hormone replacement therapy
- (D): Radiation therapy

Gender-Specific Aspects in the Clinical Presentation of Cardiovascular

96. Hypertension is one of the most risk factors for which of the following?

- (A): stroke and aortic disease
- (B): myocardial infarction and heart failure
- (C): chronic renal failure
- (D): All of the above

97. _____ is an independent predictor of 'atypical' presentation of acute myocardial infarction in women.

- (A): Prostate cancer
- (B): Diabetes
- (C): Skin cancer
- (D): Asthma

98. Menopause is a physiological condition associated with endothelial dysfunction, due to lack of _____.

- (A): HDL
- (B): vitamin D
- (C): iron
- (D): estrogen

99. Women with a history of polycystic ovary syndrome have an increased risk of cardiovascular diseases.

- (A): True
- (B): False

100. The risk of mortality and morbidity from CVD is very high in which of the following autoimmune diseases?

- (A): systemic lupus erythematosus
- (B): rheumatoid arthritis
- (C): sinusitis
- (D): Both A and B

101. _____ is the most common cause of death among women, who experience more complications after acute myocardial infarction (AMI) than men.

- (A): Prostate cancer
- (B): Coronary heart disease (CHD)
- (C): Skin cancer
- (D): Asthma

102. _____ is one of the strongest additional risk factors for the development of HF in women with coronary artery disease (CAD).

- (A): Asthma
- (B): Diabetes mellitus (DM)
- (C): Dermatitis
- (D): Prostate cancer

The Role of Stress in a Pathogenesis of CHD

103. _____ has been commonly seen as a risk factor of diseases of major public health relevance including Type 2 diabetes and coronary heart disease (CHD).

- (A): Sun burn
- (B): Cold
- (C): Sinusitis
- (D): Stress

104. According to World Health Organization (WHO), _____ are the number one cause of death globally.

- (A): prostate cancer
- (B): cardiovascular diseases
- (C): skin cancer
- (D): asthma

105. _____ is the pathogenic process that underlies most cardiovascular diseases including CHD.

- (A): Atherosclerosis
- (B): Dermatitis
- (C): Asthma
- (D): Sinusitis

106. Which of the following are modifiable risk factors for coronary heart disease ?

- (A): smoking
- (B): high blood cholesterol and blood pressure
- (C): physical inactivity and obesity
- (D): All of the above

107. According to the prognosis of World Health Organization, stressful life events and psycho-social stress will be the most detrimental risk factors for the development of cardiovascular diseases in the near future.

- (A): True
- (B): False

108. _____ stress refers to bodily adaptation processes and the maintenance of body's balance.

- (A): Psychological
- (B): Sociological
- (C): Physiological
- (D): none of the above

109. _____ stress can be defined as a discrepancy between personal capacities and environmental demands.

- (A): Psychological

- (B): Sociological
- (C): Physiological
- (D): none of the above

110. _____ stress symptoms are related to both physiological and psychological stress.

- (A): Media
- (B): Sociological
- (C): Platonic
- (D): Somatic

111. According to the report, _____ is affecting more than 40 million individuals across the European Union, and is among the most often reported cause of illness by employees.

- (A): media stress
- (B): sociological stress
- (C): somatic stress
- (D): work stress

112. _____ is the type of stress that is ongoing for a longer period of time and often feels unmanageable.

- (A): Chronic stress
- (B): Sociological stress
- (C): Somatic stress
- (D): Work stress

113. _____ may trigger cardiac events or lead to sudden death.

- (A): Media stress
- (B): Sociological stress
- (C): Acute stress
- (D): Work related stress

114. Chronic stress is likely to influence the _____ function, and may alter the endocrine system and the immune system function.

- (A): digestive track
- (B): autonomic nervous system
- (C): integumentary system
- (D): none of the above

115. Which of the following are the typical psychological stressors in the laboratory experiments?

- (A): an acoustic startle probe
- (B): a mental arithmetic task
- (C): a public speaking task
- (D): All of the above

116. Stressful childhood environments are suggested to contribute to later stress vulnerability.

- (A): True
- (B): False

Pulse Pressure and Target Organ Damage

117. ____ defined as the difference between inappropriately elevated systolic blood pressure (SBP) and reduced diastolic blood pressure (DBP) at any value of mean arterial pressure (MAP).

- (A): Migraine
- (B): Sociological stress
- (C): Increased pulse pressure (PP)
- (D): Diabetes

118. In humans, the aging process is associated with structural and functional changes in the _____ and proximal elastic arteries that dilate and stiffen.

- (A): thyroid gland
- (B): aorta
- (C): pancreas

(D): spleen

119. Which of the following factors can alter pulse pressure (PP)?

- (A): aging
- (B): gender
- (C): traditional risk factors
- (D): All of the above

120. ____ is the second most common primary diagnosis in patients with incident or prevalent end-stage renal disease (ESRD).

- (A): Hypertension
- (B): Dermatitis
- (C): Asthma
- (D): Sinusitis

121. Hypertension-induced kidney damage can be classified into which of the following clinical and histopathologic patterns?

- (A): vascular
- (B): glomerular
- (C): glomerular
- (D): Both A and B

122. Increased ____ is a well recognized risk for cardiovascular morbidity and mortality and a predictor of renal involvement.

- (A): skin sensitivity
- (B): sun exposure
- (C): urinary albumin excretion (UAE)
- (D): none of the above

123. _____ is associated with structural and functional changes in the central elastic arteries.

- (A): Thyroid gland
- (B): Arterial stiffness
- (C): Pancreatic inflammation
- (D): Sinusitis

124. _____ is the most potent modulator of arterial stiffness.

- (A): Protein
- (B): Salt
- (C): Potassium
- (D): Iron

Low-Level Exposure to Lead as a Cardiovascular Risk Factor

125. Which of the following heavy metals are the most abundant xenobiotics in human environment?

- (A): lead
- (B): cadmium
- (C): mercury
- (D): All of the above

126. Lead does not fulfill any physiological function in the body and can be toxic even at a small blood concentration.

- (A): True
- (B): False

127. ____ is a beneficial therapy in case of chronic intoxication with heavy metals.

- (A): Chelation
- (B): Acupuncture
- (C): Hormone replacement therapy
- (D): Radiation therapy

Obstructive Sleep Apnea Syndrome as a Systemic Low-Grade Inflammatory Disorder

128. _____ is a common disorder characterized by recurrent upper airway collapse during sleep.
(A): Microalbuminuria
(B): Obstructive sleep apnea syndrome (OSAS)
(C): Asthma
(D): Sinusitis
129. Extreme sleep habits can affect health and have been associated with increased _____.
(A): weight gain
(B): eating disorder
(C): inflammation
(D): sleep walking
130. Apnea produces a decline in _____ levels followed by re-oxygenation when breathing resumes.
(A): oxygen
(B): carbon dioxide
(C): red blood cell
(D): sugar level
131. _____ resulting from increased coagulation or inhibited fibrinolysis is associated with an increased risk for cardiovascular disease.
(A): Hypercoagulability
(B): Diabetes
(C): Acid reflux
(D): Gastritis
132. _____ is an early marker of vascular abnormality preceding clinically overt cardiovascular disease.
(A): Hyperthyroidism
(B): Diabetes
(C): Endothelial dysfunction
(D): Gastritis
133. _____ is an adipocyte-derived hormone that regulates body weight through control of appetite and energy expenditure.
(A): Estrogen
(B): Leptin
(C): Thyroxine
(D): Epinephrine

New Cardiovascular Risk Factors and Physical Activity

134. _____ seem to play a protective role against the onset of atherosclerosis as they capture free cholesterol from the peripheral tissues such as the cells of the vascular wall.
(A): Insulin
(B): Epinephrine
(C): Low-density lipoproteins (LDL)
(D): High-density lipoproteins (HDL)
135. Treatment of High Blood Pressure defines hypertension as a systolic arterial pressure of ≥ 140 mmHg or diastolic ≥ 90 mmHg or the need for antihypertensive treatment.
(A): True (B): False
136. The most beneficial effect of exercise is on the level of _____ which influences levels of lipids in the blood.
(A): iron production
(B): oxidative metabolism
(C): carbon dioxide
(D): sweat

137. An aerobic exercise can results in which of the following if accompanied by weight loss?

- (A): reduce levels of triglycerides
- (B): reduce total cholesterol
- (C): increase levels of HDLs
- (D): All of the above

138. Which of the following are emergent cardiovascular risk factors?

- (A): Apo B and Apo A-1
- (B): Lipoprotein (a) and ultra-sensitive CRP
- (C): Homocysteine and ADMA
- (D): All of the above

Dietary Supplements and Cardiovascular Disease: What is the Evidence & What Should We Recommend?

139. _____ recommends a diet rich in vegetables and fruits, whole grains, high-fiber foods, with lean meats and poultry, moderate consumption of fish, an emphasis on fat-free or low fat dairy products, and limiting the amount of saturated fat, trans fat and cholesterol.

- (A): The American Heart Association
- (B): ARRT
- (C): EPA
- (D): The American Cancer Society

140. Among natural products found in food, which of the following have been studied for their effects on cardiovascular disease?

- (A): fish oils
- (B): vitamin E
- (C): soy isoflavones
- (D): All of the above

141. Dietary intake of omega-3 fatty acids, particularly DHA and EPA found in _____ or fish-oil supplements, reduces risk of CVD.

- (A): beef
- (B): fatty fish
- (C): chicken
- (D): pork

142. Which of the following are sources of vitamin E?

- (A): almonds and peanuts
- (B): sunflower seeds
- (C): filberts
- (D): All of the above

143. Dietary phytoestrogens may play an important role in prevention of menopausal symptoms, osteoporosis, cancer, and cardiovascular disease.

- (A): True
- (B): False

144. Soy isoflavones can do which of the following?

- (A): reduce total cholesterol
- (B): reduce LDL and triglycerides
- (C): increase HDL levels
- (D): All of the above

145. _____ have been clearly shown in epidemiological studies and clinical trials to reduce the incidence of cardiovascular disease.

- (A): Sugar
- (B): Soda
- (C): Omega-3 fatty acids
- (D): Red meat

Mediterranean Diet and Cardiovascular Risk

146. _____ is becoming a generalized recommended eating pattern worldwide, especially after epidemiological studies showing that adherence to this model is associated with a lower total mortality and cardiovascular diseases.

- (A): The Mediterranean diet
- (B): The bacon diet
- (C): An Asian diet
- (D): An American diet

147. The Mediterranean Diet includes which of the following?

- (A): food from plant origin & olive oil
- (B): fish and poultry
- (C): yogurt or cheese
- (D): All of the above

148. Mediterranean diet rich in _____ replaces diets that are rich in saturated fats, reducing LDL cholesterol, and the ratio total cholesterol/HDL.

- (A): sugar
- (B): monounsaturated fats
- (C): salt
- (D): butter

149. Diets rich in vegetables, like Mediterranean diet, increase systolic and diastolic blood pressure.

- (A): True
- (B): False

150. ____ remains the major risk for cardiovascular disease, stroke and end-stage nephropathy.

- (A): Hypertension
- (B): Dermatitis
- (C): Asthma
- (D): Sinusitis