

USMLE Step 2 Secrets 6th Edition Errata and Updates

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Chapter 10: Endocrinology

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Question 13

...**Remember that ACTH is elevated in Cushing disease but decreased with an adrenal adenoma.** If ACTH is increased, a high-dose (8 mg) dexamethasone test should be ordered. A high-dose dexamethasone suppression test is not used to make a diagnosis of Cushing syndrome but is used to distinguish Cushing disease (suppression) from ectopic ACTH production such as **adrenal adenoma** a **bronchial carcinoid tumor** (does not suppress).

Credit to Anne Cameau

Chapter 35: Rheumatology

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Question 24

Polyarteritis nodosa is a type of vasculitis classically associated with hepatitis B infection and cryoglobulinemia. Patients present with fever, abdominal pain, weight loss, renal disturbances, and/or peripheral neuropathies. Lab abnormalities include elevations in erythrocyte sedimentation rate and C-reactive protein, leukocytosis, anemia, and hematuria or proteinuria. ~~Patients often have a positive antineutrophil cytoplasmic antibody titer.~~ Unlike other vasculitides, polyarteritis nodosa is not associated with antineutrophil cytoplasmic antibodies (ANCA). The vasculitis involves medium-sized vessels. Biopsy of an affected organ is the gold standard for diagnosis.

Credit to Daniela Harguindeguy