

# Introduction to cGvHD



- 1. Which of the following is the primary cause of cGvHD?**
  - a) Donor T cells attacking recipient tissues
  - b) Recipient immune cells attacking donor graft
  - c) Chemotherapy side effects
  - d) Infection after transplant
- 2. Which of the following is *not* a diagnostic manifestation of cGvHD?**
  - a) Lichen planus-like skin changes
  - b) Bronchiolitis obliterans
  - c) Maculopapular rash
  - d) Dry oral mucosa
- 3. Which of the following is *not* among the top three most commonly involved organs in cGvHD?**
  - a) Skin
  - b) Liver
  - c) Eyes
  - d) Kidneys
- 4. What is the estimated incidence of cGvHD in allogeneic transplant recipients?**
  - a) 30-70%
  - b) 5-10%
  - c) 80-90%
  - d) Less than 1%
- 5. Which immune cells play a key role in the development of cGvHD?**
  - a) T cells and B cells
  - b) Red blood cells
  - c) Platelets
  - d) Neutrophils
- 6. Which of the following is a key risk factor for developing cGvHD?**
  - a) Prior acute GvHD
  - b) Young donor age
  - c) Use of autologous transplant
  - d) Low-dose conditioning regimen
- 7. True or False: cGvHD symptoms usually appear within the first 30 days post-transplant.**
  - True
  - False
- 8. Which of the following immune pathways plays a major role in cGvHD?**
  - a) JAK-STAT signaling
  - b) Renin-angiotensin system
  - c) Dopamine pathway
  - d) Urea cycle
- 9. What is the role of B cells in cGvHD?**
  - a) Produce autoantibodies that contribute to tissue damage
  - b) Suppress immune responses
  - c) Repair damaged tissues
  - d) Destroy neutrophils
- 10. What is the impact of fibrosis on cGvHD progression?**
  - a) Leads to irreversible organ damage
  - b) Enhances immune tolerance
  - c) Decreases inflammation
  - d) Helps tissue regeneration

## Answer Key

- 1. a - Explanation:** cGvHD arises when donor-derived immune cells recognize the recipient's tissues as foreign, leading to inflammation and damage.
- 2. c - Explanation:** A maculopapular rash is a hallmark of aGvHD, not cGvHD. In contrast, cGvHD presents with features resembling autoimmune diseases, such as lichen planus-like skin changes, bronchiolitis obliterans (lung involvement), and dry oral mucosa.
- 3. d - Explanation:** The most commonly affected organs in cGvHD are the skin, liver, and eyes (including mouth and mucosal surfaces). The kidneys are rarely involved in cGvHD and are not considered a primary target organ.
- 4. a - Explanation:** cGvHD develops in 30-70% of patients after allogeneic hematopoietic cell transplantation (HCT).
- 5. a - Explanation:** Both T cells and B cells contribute to cGvHD by initiating and sustaining immune attacks on recipient tissues.
- 6. a - Explanation:** Prior acute GvHD increases the risk of cGvHD, as it indicates early immune system dysregulation.
- 7. False - Explanation:** cGvHD typically occurs after 100 days post-transplant and can last for months or years.
- 8. a - Explanation:** The JAK-STAT pathway is involved in immune dysregulation in cGvHD, making it a target for therapy.
- 9. a - Explanation:** B cells produce autoantibodies, contributing to chronic inflammation and fibrosis in cGvHD.
- 10. a - Explanation:** Fibrosis results in tissue scarring, causing progressive and often irreversible organ damage in cGvHD.