

Il candidato descriva la seguente patologia:

Diabete Mellito

Il candidato descriva la seguente patologia:

Ipertensione arteriosa



Oliveri

Oliveri

Anna

Anna

Il candidato descriva la seguente patologia:

Epatite

Il candidato descriva la seguente patologia:

Infarto Miocardico

Chetani
Albi *Albi*
Albi



Busta n. 3

Il candidato descriva la seguente patologia:

Calcolosi di Lyon

Il candidato descriva la seguente patologia:

Psoriasi

Deleui

Deu

Deu

Deu



DOMANDE PROVE ORALI

1. Il candidato ci parli della seguente patologia: le orticarie
2. Il candidato ci parli della seguente patologia: calcolosi renale
3. Il candidato ci parli della seguente patologia: malattie autoimmunitarie
4. Il candidato ci parli della seguente patologia: infezioni da SARS CoV2



Martin Röcken and Tilo Biedermann

Autoimmunity and autoimmune disease

1 The term autoimmunity signifies the presence of specific memory-type immune reactions
2 that are directed against one or more self-epitopes. Under most conditions, autoimmunity
3 is determined in terms of immunoglobulins that react with either unknown or well-de-
4 fined human antigens. Today it is supposed that the production of these autoantibodies re-
5 quires prior activation of potentially autoreactive B cells by memory T cells. These T cells
6 must not only recognize a closely related peptide structure. Importantly, these T cells can
7 stimulate B cells only when primed by activated antigen presenting cells. 1

8 Autoimmunity is a relatively frequent event. Most likely, any individual raises immune
9 reactions against numerous self antigens. This autoimmunity leads only very rarely to
10 overt autoimmune disease. Therefore, the development of autoimmune disease requires
11 trespassing of a large number of additional security levels, beyond autoimmune reactivity
12 (Schwartz, 1998). This is illustrated by two frequent clinical phenomena: One of the best
13 examples are antinuclear antibodies (ANA), which are found in even more than 50% of the
14 female population older than 50 years. Compared to this frequency, ANA-associated auto-
15 immune diseases are relatively rare and affect less than 2% (Rubin, 1997). The other is that
16 only very few autoimmune diseases progress continuously. Most of them progress during
17 short waves of disease activity and in between these waves have long periods of quiescence.
18 Since autoreactive T and B cells do normally not disappear during these periods of quies-
19 cence, a series of control mechanisms protect from manifest autoimmune disease.

T and B cells

T cells are small lymphocytes that are characterized by their antigen recognition structure, the T cell receptor (TCR). According to the current state of knowledge, the TCR is only functional as a cell bound structure. Due to the low affinity for free peptide (Weber et al., 1992), the TCR recognizes only antigens that are presented by major histocompatibility complex



Domande Informatica

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