abudinter, but inversion a does not appear to be increased. An abudininal CT scan reveals a cirribite liver. He joins a support group for persons with chronic alcohol abuse and he stops drinking. Despite his continued abstinence from alcohol, he most likely remains at risk for development of which of the following disease A Hepatic adenoma B Focal nodular hyperplasia C Cholelithiasis D Angiosarcoma E Hepatocellular carcinoma	A 64-year-old postmenopausal woman on estrogen therapy has noted worsening swelling of her feet during the past 5 months. She has had increasing dyspnea at night for the past 2 months. She also has chronic arthritis. Her skin has become more darkly pigmented in the last 2 years without sun exposure. On physical examination there is no joint deformity. She has 2+ pitting edema to her thighs. A chest radiograph shows bilateral pleural effusions and pulmonary edema. Laboratory findings include a serum glucose of 196 mg/dL, creatinine 1.7 mg/dL, ferritin 9079 ng/mL, AST 25 U/L, ALT 38 U/L, alkaline phosphatase 49 U/L, total bilirubin 1.2 mg/dL, total protein 5.9 g/dL, and albumin 3.3 g/dL. Which of the following therapeutic approaches is most appropriate for this patient?
Answer: E •	A Begin corticosteroid therapy •
A 22-year-old woman has had progressive malaise for the past year. She has become increasingly obtunded over the past week. On physical examination she is afebrile. Laboratory studies show a plasma ammonia of 55 micromol/L along with serum total bilirubin of 5.8 mg/dL, direct bilirubin 4.6 mg/dL, AST 110 U/L, and ALT 135 U/L. Her serum ceruloplasmin is 14 mg/dL. The antimitochondrial antibody test is negative. A liver biopsy is performed and microscopic examination reveals increased copper deposition. Which of the following	B Stop estrogen therapy • C Give interferon therapy associated with chemotherapy • D Control her diabetes mellitus • E Start regular treatment to reduce iron in her body •
C Proliferative retinopathy •	Answer F •

Answer E .

A 45-year-old man is found in an obtunded state and taken to the hospital. On • admission physical examination he is icteric. His abdomen is enlarged with a fluid wave. An abdominal CT scan shows extensive intraperitoneal fluid and a uniformly enlarged liver that has decreased attenuation (decreased brightness). Laboratory studies show total protein 6.5 g/dL, albumin 2.8 g/dL, total bilirubin 4.8 mg/dL, AST of 563 U/L, ALT 317 U/L, alkaline phosphatase 55 U/L, and ammonia 91 micromol/L. A liver biopsy is performed and microscopically demonstrates abundant Mallory hyaline, neutrophilic infiltrates, hepatocyte necrosis, portal fibrosis, and extensive macrovesicular steatosis. Which of the following is the most likely diagnosis?

- A) Autoimmune hepatitis •
- B Sclerosing cholangitis .
- C Alcoholic hepatitis .

Answer: C .

ingestion? A Normal histology •

D Crystalline lens cataract formation E Corneal Kayser-Fleischer rings •

A 28-year-old woman with recent onset of a major depressive disorder ingests an

entire bottle (100 capsules, 500 mg each) of a medication containing acetaminophen.

She becomes progressively obtunded over the next 8 hours. Which of the following

microscopic findings is most likely to be present in her liver 3 days following this

Answer: E .

B Extensive necrosis •

C Bridging fibrosis •

D Severe steatosis •

Answer: B •

Which of the following statements is false?

A. Hepatic encephalopathy caused by the increased amount of NH3 in the blood because

damaged hepatocytes cannot metabolize ammonia through urea cycle

B. High doses of rifampin and isoniazid may lead to acute liver failure

C. 50-60% of Fulminant hepatitis cases are caused by viral hepatitis.

D. Chlorpromazine considers one of the causes of predictable drug induced liver disease.

E. Acetaminophen is the most common cause of drug induced liver failure.

A 65-year-old man presented with malaise and weight loss. On physical examination, he was found to have enlarged abdomen and skin yellowish discoloration. An abdominal CT scan showed uniformly enlarged liver. Liver biopsy microscopically showed abundant Mallory hyaline bodies, neutrophilic infiltrates, necrosis of hepatocytes, and extensive macrovesicular steatosis . Which of the following is the most likely diagnosis?

a.Acetaminophen toxicity.b.Sclerosing cholangitis.

b. Scierosing cholangitis.

c.Chronic hepatitis B infection.

A 55 year old man with a history of chronic alcoholism diagnosed with early cirrhosis. The development of which of the following conditions is associated with high mortality rate in this patient?

a.Caput medosa
b.Upper GIT bleeding.

b.Upper GIT bleeding

c.Ascitis. d.Hemorrhoids.

e.Splenomegaly

examination yields no remark-able findings. Laboratory studies show total serum protein of 6.4 g/dL, albumin of 3.6 g/dL, total bilirubin of 1.4 mg/dL, AST of 67 U/L, ALT of 91 U/L, and alkaline phosphatase of 99 U/L. Results of serologic testing for HAV, HBV, and HCV are negative. Test results for ANA, anti-liver kidney microsome-1, and anti-smooth muscle antibody are positive. A liver biopsy is done; microscopically, there are minimal portal mononuclear cell infiltrates with minimal interface hepatitis and mild portal fibrosis. What is the most likely diagnosis?

A 31-year-old woman has experienced increasing malaise for the past 4 months. Physical

A. α1-Antitrypsin deficiency B. Autoimmune hepatitis

C. Chronic alcoholism
D. HDV infection

E. Isoniazid ingestion

Non-alcoholic fatty liver disease is seen in all of the following conditions EXCEPT one: a.Insulin resistance b.Obesity c.Diabetes mellitus type 2

d.Dyslipidemia e.Chronic anemia One of the following regarding hepcidin is CORRECT:

a.Spleen is the main source.

b.Reduced hepcidin levels associated with increased iron absorption.

c.It enhances iron efflux from intestine into plasma.

d.Its levels increased in hemochromatosis.

e.It enhances cupper deposition

One of the following is FALSE regarding Wilson disease:

a. Decreased serum ceruloplasmin.

b. Decreased urinary cupper excretion.

c. Mallory hyaline bodies.

d. Fatty change in liver.

e. Kayser-Fleischer ring

Patients with hereditary hemochromatosis have a mutation in:

A. MHC Class I

B. ATP7B

C. HFE

D. HNF1-a

E. DMT1

Ceruloplasmin is copper complexed with which of the following :

A. Albumin

B. Alpha globulin

C. Bilirubin

D. Acetaldhyde

A girl come to your clinic complains of a tremor at rest, which becomes progressively worse over the next 6 months. She exhibits auditory hallucinations and is diagnosed with an acute psychosis. A slit lamp examination shows corneal Kayser-Fleischer rings. Which of the following serologic test findings is most likely to be reported in this patient

A. Decreased α1-antitrypsin level
B. Decreased ceruloplasmin level

C. Increased α-fetoprotein level

D. Increased d-retoprotein level

E. Positive antimitochondrial antibody

Which of the following statements is false?

A. α-1-Antitrypsin deficiency is an AR disorder that lead to pulmonary emphysema and hepatic damage.

B. liver function tests (LFTs) are abnormal in Rey's syndrome.

C. Budd-Chiari Syndrome characterized by occlusion of the portal veins.

D. Primary Sclerosing Cholangitis caused by fibrosis and obstruction of both intra-hepatic and extra-hepatic bile ducts

E. Anti-mitochondrial antibodies is associated with Primary biliary cirrhosis

• A study of persons with increased risk for ischemic heart disease reveals that some of them also have liver disease. Risk factors include lack of exercise and increased consumption of fast-food products containing high fructose corn syrup. Laboratory studies show that their blood glucose averages 117 mg/ dL. Serum AST and ALT are elevated. Abdominal CT imaging shows hepatomegaly with diffusely decreased attenuation but no focal lesions. Some of them go on to develop hepatocellular adenoma. Which of the following underlying disorders do these persons most likely have?

• A Type 1 diabetes mellitus

o B Familial hypercholesterolemia

o C Hepatitis C virus infection

D Hereditary hemochromatosis

E Metabolic syndrome

Wilson disease by cu accumulation is caused by?

a- increased absorption from renal

b- decreased absorption from hepatic

c- decreased excretion from renal

d- increase absorption from hepatic

All of the following cause fatty changes in the liver except:

A. Sinusoidal obstruction

B. Obesity

C. DM

D. Reye's syndrome

E. Viral hepatitis

Is not associated with chronic liver disease

a- portal hypertension

b- cirrhosis

c- testicular hypertrophy



A woman with Inflammatory bowel disease and hepatitis like symptoms with no viral load, what's elevated in her blood a- Antimitochondrial antibodies

b- antinuclear cytoplasmic antibodies

c- anti pyruvate dehydrogenase

A 41-year-old, previously healthy woman has noted abdominal discomfort for the past month. Laboratory studies show normal serum total protein, albumin, AST, ALT, and bilirubin, but her alkaline phosphatase level is elevated. Serologic testing for hepatitis A, B, and C viruses is negative. Abdominal CT scan shows a 9-cm right hepatic lobe mass with irregular borders. The lesion is resected, and

gross inspection reveals a central stellate scar with radiating fibrous septa that merge into surrounding hepatic parenchyma and there is a local vascular injury. What is the most likely diagnosis?

A. Metastatic adenocarcinoma B. Focal nodular hyperplasia C. Hepatic adenoma

D. Hepatocellular carcinoma

E. Macronodular cirrhosis

One of the following is NOT true about hepatic focal nodular hyperplasia:

a. Nodular regeneration of hepatocytes.

b. High risk of malignant transformation.

c. Females predominance.d. Not related to cirrhosis.

a. Can be associated with cavernous hemangion

e. Can be associated with cavernous hemangioma

One of the followings combinations is FALSE:

a- liver adenoma - Acetaminophen

b- Wilson disease -ATP7B gene mutation

c- Budd-Chiari syndrome- Oral contraceptive

c- Budd-Chiari syndrome- Oral contraceptive

d- Sinusoidal obstruction syndrome-Cyclophosphamide

e- Reye syndrome- Microvesicular fatty change

A. HBV infection

B. metastasis to the liver

C. alcohol abused

D. Drugs

E. hereditary hemochromatosis

Most common malignancy of the liver

The most common predisposing factor of HCC is:

a- Hepatocellular carcinoma b- metastatic tumors

c- adenocarcinoma

Cholangiocarcinoma arises from which of the following?

A. Kupffer cells

B. Hepatocytes

C. Ito cells
D. Endothelial cells

E. Biliary duct epithelium

The outstanding feature of chronic hepatitis is: a. Portal lymphocytic infiltrate.

b. Councilman bodies.

c. Steatosis.

d. Fibrosis.

e. Bile duct damage

1- Non-alcoholic fatty liver disease is seen in all the following conditions EXCEPT one:

- A. Insulin resistance.
- B. Obesity.
- C. Diabetes mellitus type 2.
- D. Dyslipidemia.
- E. Chronic anemia.

Answer: E

2- A 55-year-old man with a history of chronic alcoholism diagnosed with early cirrhosis. The development of which of the following conditions is associated with high mortality rate in this patient?

- A. Caput medusa.
- B. Upper GIT bleeding.
- C. Ascites.
- D. Hemorrhoids.
- E. Splenomegaly.

Answer: B

3- One of the following regarding hepcidin is CORRECT:

- A. Spleen is the main source.
- B. Reduced hepcidin levels associated with increased iron absorption.
- C. It enhances iron efflux from intestine into plasma.
- D. Its levels increased in hemochromatosis.
- E. It enhances cupper deposition.

Answer: B

4- Ceruloplasmin is copper complexed with which of the following:

- A. Albumin.
- B. Alpha globulin.
- C. Bilirubin.
- D. Acetaldehyde.

Answer: B

5- One of the followings combinations is FALSE:

- A. liver adenoma Acetaminophen
- B. Wilson disease ATP7B gene mutation
- C. Budd-Chiari syndrome- Oral contraceptive
- D. Sinusoidal obstruction syndrome Cyclophosphamide
- E. Reye syndrome Micro vesicular fatty change.

Answer: A

6- All of the following cause fatty changes in the liver except:

- A. Sinusoidal obstruction.
- B. Obesity.
- C. DM.
- D. Reye's syndrome.
- E. Viral hepatitis.

Answer: A

- 7- A 65-year-old man presented with malaise and weight loss. On physical examination, he was found to have enlarged abdomen and skin yellowish discoloration. An abdominal CT scan showed uniformly enlarged liver. Liver biopsy microscopically showed abundant Mallory hyaline bodies, neutrophilic infiltrates, necrosis of hepatocytes, and extensive macro vesicular steatosis. Which of the following is the most likely diagnosis?
 - A. Acetaminophen toxicity.
 - B. Sclerosing cholangitis.
 - C. Chronic hepatitis B infection.
 - D. Acute hepatitis.
 - E. Alcoholic hepatitis.

Answer: E

8- One of the following is FALSE regarding Wilson disease:

- A. Decreased serum ceruloplasmin.
- B. Decreased urinary cupper excretion.
- C. Mallory hyaline bodies.
- D. Fatty change in liver.
- E. Kayser-Fleischer ring.

Answer: B

9- All of the following are portosystemic shunts except:

- A. Hemorrhoids.
- B. Varices.
- C. Retroperitoneum.
- D. Caput medusae.
- E. Hepatosplenic.

Answer: E

10-Cholangiocarcinoma arises from which of the following:

- A. Kupffer cells.
- B. Hepatocytes.
- C. Ito cells.
- D. Endothelial cells.
- E. Biliary duct epithelium.

Answer: E

11- One of the following is NOT true about hepatic focal nodular hyperplasia:

- A. Nodular regeneration of hepatocytes.
- B. High risk of malignant transformation.
- C. Females' predominance.
- D. Not related to cirrhosis.
- E. Can be associated with cavernous hemangioma.

Answer: B

12- Liver cell adenoma is classically related to the exposure of one of the following:

- A. Oral contraceptives
- B. Halothane
- C. Tetracycline
- D. Antineoplastic agents
- E. Carbon tetrachloride

Answer: A

13- The second most common site of cupper accumulation in Wilson disease is:

A. Brain

- B. Skin
- C. Heart
- D. Kidney
- E. Lungs

Answer: A

- 14- A liver biopsy showed abundant Mallory hyaline bodies and extensive macro vesicular steatosis. Which of the following is the most likely underlying condition?
 - A. Sclerosing cholangitis
 - B. Chronic alcoholism
 - C. Acetaminophen toxicity
 - D. Budd-Chiari syndrome
 - E. Hemochromatosis

Answer: B

- 15- A 65-year-old chronic alcoholic man presented with weight loss and hepatomegaly; his liver function test revealed elevated liver enzymes. What is his lifetime probability of developing liver cirrhosis?
 - A. 5-10%
 - B. 50-70%
 - C. 30-40%
 - D. 20-25%
 - E. 10-15%

Answer: E

- 16- Most common malignancy of the liver
 - A. Hepatocellular carcinoma
 - B. Metastatic tumors
 - C. Adenocarcinoma
 - D. Fibrolamellar carcinoma

Answer: B

- 17- Is not associated with chronic liver disease:
 - A. Portal hypertension
 - B. Cirrhosis
 - C. Testicular hypertrophy

Answer: C

18- Wilson disease by Cu accumulation is caused by:

- A. Increased absorption from kidneys.
- B. Decreased absorption from liver.
- C. Decreased excretion from kidneys.
- D. Increase absorption from liver.

Answer: D

19- Ascites with behavior change in child is associated with:

- A. Wilson disease.
- B. Hemochromatosis.
- C. Budd-Chiari.
- D. Hyperalbuminemia.

Answer: A

- 20- A pathologic study of hepatic cirrhosis is performed. There is a collapse of reticulin with bridging fibrosis from deposition of collagen in the space of Disse to form fibrous septa. Which of the following cell types is activated under the influence of cytokines to give rise to collagen-producing cells?
 - A. Bile duct cell.
 - B. Endothelial cell.
 - C. Hepatocyte.
 - D. Macrophage.
 - E. Stellate cell.

Answer: E

21- Mallory-hyaline bodies (damaged intermediate filaments) can be seen in which of the following conditions?

- A. Wilson disease
- B. Primary biliary cirrhosis
- C. Alcoholic hepatitis
- D. HCC
- E. All of the above

Answer: E

22- A mutation in aldehyde dehydrogenase could lead to accumulation of acetaldehyde, which of the following could be an outcome of this toxic accumulation?

- A. Fascial flushing
- B. Hyperventilation
- C. Tachycardia
- D. B+C
- E. All of the above

Answer: E

23- The most likely complication of cirrhosis that could lead to thrombocytopenia is:

- A. Ascites
- B. Hemorrhoids
- C. Esophageal varices
- D. Splenomegaly
- E. Hepatic Encephalopathy

Answer: D

24- Which of the following statements is false?

- A. Hepatic encephalopathy caused by the increased amount of NH3 in the blood because damaged hepatocytes cannot metabolize ammonia through urea cycle.
- B. High doses of rifampin and isoniazid may lead to acute liver failure.
- C. 50-60% of Fulminant hepatitis cases are caused by viral hepatitis.
- D. Chlorpromazine considers one of the causes of predictable drug induced liver disease.
- E. Acetaminophen is the most common cause of drug induced liver failure.

Answer: D

25- All of the following could lead to a carrier state of hepatitis except:

- A. Vertical transmission
- B. Immunodeficiency
- C. HCV
- D. HBV
- E. HAV

Answer: E

- 26- A 31-year-old woman has experienced increasing malaise for the past 4 months. Physical examination yields no remarkable findings.

 Laboratory studies show total serum protein of 6.4 g/dL, albumin of 3.6 g/dL, total bilirubin of 1.4 mg/dL, AST of 67 U/L, ALT of 91 U/L, and alkaline phosphatase of 99 U/L. Results of serologic testing for HAV, HBV, and HCV are negative. Test results for ANA, anti-liver kidney microsome-1, and anti-smooth muscle antibody are positive. A liver biopsy is done; microscopically, there are minimal portal mononuclear cell infiltrates with minimal interface hepatitis and mild portal fibrosis. What is the most likely diagnosis?
 - A. α1-Antitrypsin deficiency
 - B. Autoimmune hepatitis
 - C. Chronic alcoholism
 - D. HDV infection
 - E. Isoniazid ingestion

Answer: B

- 27- A longitudinal study is conducted of non-alcoholics with type 2 diabetes mellitus, dyslipidemia, and BMI >30. There is an increasing prevalence of liver disease in these people over time. Which of the following microscopic pathologic findings is most characteristic for the livers of these persons?
 - A. Apoptosis
 - B. Cholestasis
 - C. Cirrhosis
 - D. Hemosiderosis
 - E. Steatosis

Answer: E

- 28- Patients with hereditary hemochromatosis have a mutation in:
 - A. MHC Class I
 - B. ATP7B
 - C. HFE
 - D. HNF1- α
 - E. DMT1

Answer: C

- 29- A girl come to your clinic complains of a tremor at rest, which becomes progressively worse over the next 6 months. She exhibits auditory hallucinations and is diagnosed with acute psychosis. A slit lamp examination shows corneal Kayser-Fleischer rings. Which of the following serologic test findings is most likely to be reported in this patient?
 - A. Decreased α 1-antitrypsin level.
 - B. Decreased ceruloplasmin level.
 - C. Increased α -fetoprotein level.
 - D. Increased ferritin level.
 - E. Positive antimitochondrial antibody.

Answer: B

30- Which of the following statements is false?

- A. α -1-Antitrypsin deficiency is an AR disorder that leads to pulmonary emphysema and hepatic damage.
- B. Liver function tests (LFTs) are abnormal in Reye's syndrome.
- C. Budd–Chiari Syndrome characterized by occlusion of the portal veins.
- D. Primary Sclerosing Cholangitis caused by fibrosis and obstruction of both intra-hepatic and extra-hepatic bile ducts.
- E. Anti-mitochondrial antibodies are associated with Primary biliary cirrhosis.

Answer: C

31- The most common predisposing factor of HCC is:

- A. HBV infection.
- B. metastasis to the liver.
- C. alcohol abuse.
- D. Drugs.
- E. hereditary hemochromatosis.

Answer: A

- 32- A 41-year-old, previously healthy woman has noted abdominal discomfort for the past month. Laboratory studies show normal serum total protein, albumin, AST, ALT, and bilirubin, but her alkaline phosphatase level is elevated. Serologic testing for hepatitis A, B, and C viruses is negative. Abdominal CT scan shows a 9-cm right hepatic lobe mass with irregular borders. The lesion is resected, and gross inspection reveals a central stellate scar with radiating fibrous septa that merge into surrounding hepatic parenchyma and there is a local vascular injury. What is the most likely diagnosis?
 - A. Metastatic adenocarcinoma
 - B. Focal nodular hyperplasia
 - C. Hepatic adenoma
 - D. Hepatocellular carcinoma
 - E. Macronodular cirrhosis

Answer: B

33-True about alcoholic liver disease:

Answer: Mallory bodies are morphological features of the disease

34- Coma in liver disease due to increased level of

Answer: Ammonia

35- Wrong about fibrolamellar carcinoma:

Answer: Occurs in elderly

36- PAS positive test granules in hepatocytes:

Answer: Alpha antitrypsin deficiency

37- Wrong about hemochromatosis:

Answer: Increased Hepcidin

38- Wilson disease:

Answer: Decreased hepatic secretion of Liver

39- Wilson disease:

Answer: Low alpha globulin and low albumin

40- Most common cause of acute hepatic failure

Answer: Fulminant viral hepatitis

41- Oral contraceptive pills cause:

Answer: Hepatic Adenoma

42- A woman used to drink alcohol for 4 years then she decided to quit drink, the following will happen to her liver:

Answer: Complete remission

43- Skin pigmentation:

Answer: Hemochromatosis

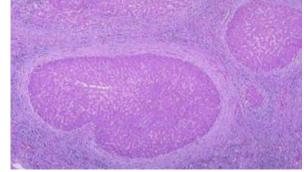
(PRACTICAL)

- 1- This is a section from the esophagus from a 60-year-old patient with liver cirrhosis who developed massive hematemesis, what is the most likely cause of this bleeding based on the picture.
 - A. Esophagitis
 - B. Gastric ulcer
 - C. Gastric cancer
 - D. Esophageal cancer
 - E. Esophageal varices



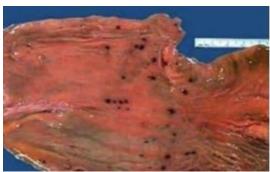
2- This represents a microscopic appearance of a condition that can result of all of the following EXCEPT one:

- A. Wilson disease
- B. Viral hepatitis
- C. Hemochromatosis
- D. Biliary diseases
- E. Reye syndrome



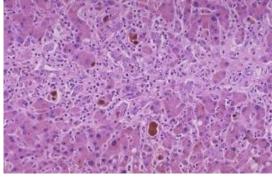
3- A 50-year-old man in the intensive care unit (ICU) after a major surgery, and suddenly developed hematemesis, based upon the picture given above from the stomach, the most likely diagnosis is:

- A. Gastric carcinoma
- B. Autoimmune gastritis
- C. Viral gastritis
- D. Stress ulcers
- E. Chronic H pylori gastritis



4- The intra canalicular and intracellular accumulation of this brown pigment in Liver represents:

- A. Hemochromatosis
- **B.** Steatosis
- C. Wilson disease
- D. Cholestasis
- E. Drug toxicity



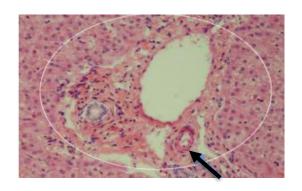
5- Identify the pointed structure in this section:

- A. Branch from portal vein
- B. Bile duct
- C. Central vein
- D. Branch from hepatic artery
- E. Blood sinusoids



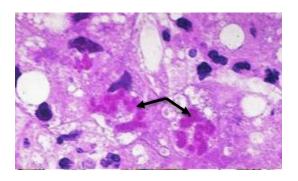
6- The pointed structure represents:

- A. Portal triad
- B. Portal vein
- C. Bile duct
- D. Hepatic artery



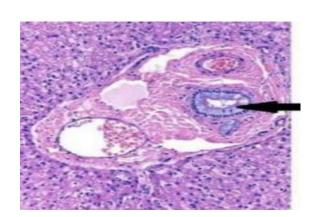
7- the following deposited things are:

- A. Fat
- B. Cytoskeleton
- C. Iron
- D. Copper



8- Identify the pointed structure:

- A. Portal Vein
- B. Hepatic Artery
- C. Porta hepatis
- D. Blood Sinusoids
- E. Bile Duct



1	2	3	4	5	6	7	8
Е	Е	D	D	С	D	В	Е

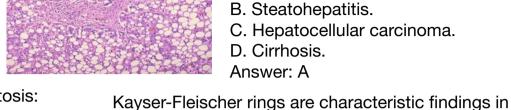
GOOD LUCK!

The following pathological condition of the liver most likely represent: A. Steatosis. B. Steatohepatitis.

C. Liver cancer.

D. Cirrhosis.

Answer: A



liver hepatitis: A. Steatosis.

The most common form of alcoholic

B. Steatohepatitis.

C. Hepatocellular carcinoma.

Which of the following metabolic diseases is most

D. Cirrhosis. Answer A

Second most common site of hemochromatosis: A. Kidney.

B. Brain.

C. Skin.

D. Pancreas. E. Spleen.

Answer: D

The most common cause of acute liver failure:

A. Acetaminophen.

B. Tetracycline. C. CCL4.

D. Allopurinol.

Answer: A

which of the following conditions: A Hemochromatosis

B. Wilson syndrome. C. Ahpha1 antitrypsin deficiency.

D. Reyes syndrome.

Answer: B

commonly associated with the development of liver cirrhosis:

A. Hemochromatosis.

B. Dyslipidemia.

C. α-1-Antitrypsin Defeciency.

Answer: A



لا تنسونا من صالح دعائكم 💚 💚

اللهم إنا نستودعك غزه وأهلها، اللهم أنصرهم وثبت اقدامهم، اللهم كن لهم ناصراً ومعينا.

