



**UNIVERSITY OF JAFFNA, SRI LANKA**

**FINAL EXAMINATION FOR MEDICAL DEGREES – NOVEMBER 2015**

**MEDICINE PAPER II**

**ANSWER ALL TEN QUESTIONS.**

**Date: 23.11.2015**

**ANSWER EACH QUESTION IN A SEPARATE BOOK**

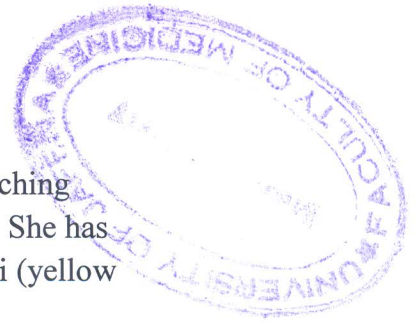
**Time: 3 Hours**

01. A 36 year old married female with a past history of thyroid disease presented with double vision for 2 weeks.
- 1.1 Write 4 possible aetiological causes for the above symptoms. (10 marks)
- 1.2 If she feels better in the morning than evening, what is the most likely diagnosis you would consider? (10 marks)
- 1.3 What salient points in the history would you ask to support your diagnosis? (20 marks)
- 1.4 What are the important 4 investigations would you request on this patient? (20 marks)
- 1.5 Discuss the principles of management of the condition you mentioned in 1.2 (30 marks)
- 1.6 Mention 2 important causes for emergency admission of this patient. (10 marks)
02. A 42 year old married mother of two has been referred to the psychiatric clinic with a history of persistent worries, continuous sadness, lack of interest in things which interested her in the past and low levels of psychic and physical energy for the past three weeks after she was accidentally found to have diabetic mellitus. During this period, she has also developed sleepless night, restless days and burning sensation all over her body.
- 2.1 Write down your provisional diagnosis with justification. (20 marks)
- 2.2 Briefly outline the pharmacological management for this patient based on your provisional diagnosis. (30 marks)
- 2.3 If she expresses “I would rather die than suffer from diabetes”, how would you manage her psychologically? (30 marks)
- 2.4 Briefly describe five psychological and psychiatric problems which can occur in patients with diabetes mellitus. (20 marks)

03. A 40 year old male was referred to the medical clinic for investigation of weakness of muscle of the thigh. On examination he was found to have a BP of 160/100 mmHg, BMI 32, RBS 200 mg/dl.
- 3.1 What is the most probable clinical diagnosis? (10 marks)
- 3.2 What other physical signs would you look for to support your clinical diagnosis? (20 marks)
- 3.3 What laboratory investigations you would order in this patient? Give reason. (30 marks)
- 3.4 He presented with a mechanical back pain of 2 weeks duration and a plain X' ray lumbosacral spine shows an L<sub>4</sub> wedge fracture
- 3.4 a What complication has occurred? (10 marks)
- 3.4 b How will you confirm the condition you mentioned in 3.4 a? (10 marks)
- 3.4 c How will you treat this condition in 3.4 a? (20 marks)

04.

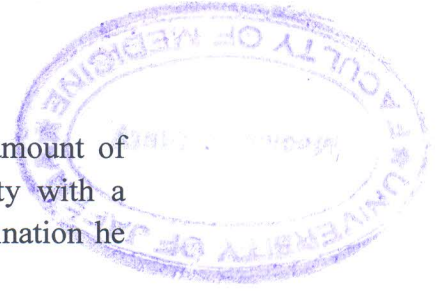
- 4a A 16 year old school girl was brought to district hospital Kayts around 4 AM with difficulty in breathing. The parents said that she was sleeping on the floor with others at home and got up with abdominal pain and had digene syrup and slept. Half an hour later woke up with difficulty in breathing.
- 4a.1 What is the likely clinical diagnosis? (10 marks)
- 4a.2 What are the clinical signs you would look for in this patient on admission, which will support your diagnosis? (10 marks)
- 4a.3 Write the principles of management of this patient. (20 marks)
- 4a.4 What preventive measures would you advise this patient. (10 marks)



- 4b A 19 year old garment factory worker was transferred to Jaffna teaching hospital from Karainagar district hospital for further management. She has had a fight with her boyfriend previous day and has ingested 8 alari (yellow oleander) seeds.
- 4b.1 What are the symptoms & signs she would develop? (10 marks)  
Repeated doses of activated charcoal were given to her at the district hospital.
- 4b.2 What is the rationale for the administration of activated charcoal? (05 marks)
- 4b.3 List the parameters you would monitor in this patient. (10 marks)  
While in the ward, her pulse rate was 50bpm, respiratory rate was 25 cycles/min and cardiac monitor showed no association between P waves and QRS complexes.
- 4b.4 What is the ECG diagnosis? (05 marks)
- 4b.5 How will you manage this patient? (20 marks)
05. A 32 year old male with non Hodgkin's Lymphoma who was under follow up by an oncologist presented to the medical casualty with fever of 2 days duration. He has received his last chemotherapy 2 weeks prior to admission. On examination he was breathlessness and examination revealed dullness over the right lung base with decreased breath sounds. His oxygen saturation was 82% on room air. An urgent chest X' ray revealed right basal homogenous opacity. FBC showed Hb 7g/dl, WBC 820, N-30, L-60, Pl - 40,000
- 5.1 What are the other initial parameters you will record on this patient? (20 marks)
- 5.2 What is the most important initial step in the management? (10 marks)
- 5.3 What is your most probable clinical diagnosis for this presentation? (10 marks)
- 5.4 What other essential investigations you will request and give reasons? (20 marks)
- 5.5 What are the drugs you will administer on this patient and give reasons? (20 marks)
- 5.6 What instructions you would give the nursing officer who manages this patient? (20 marks)



- 06 A 55 year old man is evaluated for 4 year history of gradually progressive left knee pain. He has 15 minutes of morning stiffness which recurs on prolonged inactivity. He admits minimal to no pain at rest. He further says that his ambulation is limited to a certain extent. On examination the vital signs are normal. BMI was 31. His left knee has small effusion and fullness at the back of the knee without other signs of active joint inflammation. He also had joint crepitus, tenderness over the medial joint line and bony hypertrophy.
- 6.1 What is the most probable clinical diagnosis? (10 marks)
- 6.2 List the possible radiological findings of a plain radiography of the affected knee joint? (20 marks)
- 6.3.1 If the patient presents with progressive swelling of left calf, list 3 clinical conditions you would think of? (15 marks)
- 6.3.2 Write 2 tests that would be useful to differentiate the conditions you mentioned in 6.3.1 (10 marks)
- 6.4.1 If the patient present with fever and worsening of knee joint swelling of 3 days duration. What complication would you consider? (10 marks)
- 6.4.2 What test will confirm your clinical diagnosis mentioned in 6.4.1 (10 marks)
- 6.5 Outline the important steps in the management of the condition you mentioned in 6.1 (25 marks)
07. A 28 year old unmarried female presented to the medical clinic with palpitations, sweating and insomnia of 3 months. On examination her BMI was 19.5. Her blood pressure was 160/100 mm Hg and heart rate 100 per minute regular.
- 7.1 What other physical signs you would look for to arrive at a clinical diagnosis? (30 marks)
- 7.2 What are the physical signs you would look for to differentiate “white coat effect” from hypertension? (15 marks)
- 7.3 List 3 possible differential diagnosis for the above clinical presentation. (15 marks)
- 7.4 What imaging studies would you request on this patient and mention the expected abnormalities? (25 marks)
- 7.5 Name 3 groups of antihypertensive drugs that can be used if she becomes pregnant. (15 marks)



08. A 45 year old nonsmoker with a chronic cough with copious amount of sputum for the last 6 months presented to the medical casualty with a history of haemoptysis, fever and shortness of breath. On examination he was cyanosed with clubbing.
- 8.1 What is the most probable clinical diagnosis for the above presentations? (10 marks)
- 8.2 What specific questions would you ask him to find an aetiology for the above diagnosis? (25 marks)
- 8.3 What are the possible causes for his shortness of breath? (25 marks)
- 8.4 List further interventions that would be helpful to prevent frequent hospital admission? (20 marks)
- 8.5 Define massive haemoptysis. How will you manage? (20 marks)
09. A 40 year old patient with hypertension and chronic kidney disease secondary to adult polycystic kidney disease on Enalapril and hydrochlorothiazide presented with a history of worsening of shortness of breath reduced urine output and feeling unwell for last 4 days duration. His creatinine was 1.6 mg/dl done 3 weeks ago. Further he admits that he was treated with one week course of oral pyroxicam and diclofenac sodium by his GP 2 weeks ago for chronic mechanical back pain. On arrival to medical ward his BP is 140/90 mm Hg and his serum creatinine and S K<sup>+</sup> 7.6 mg/dl and 5.8 respectively.
- 9.1 What is the working diagnosis for this acute presentation and give the likely reason for this presentation? (20 marks)
- 9.2 Outline five steps you will take to manage this patient initially? (25 marks)
- 9.3 List renal and extra renal manifestations of adult polycystic kidney disease. (20 marks)
- 9.4 Three years later if he presents with sudden onset of headache and right side third nerve palsy, what would be the cause for this presentation and how do you confirm it? (20 marks)
- 9.5 He has a sixteen year old daughter and she wants to know the probability of having this disease. What would you advise? (15 marks)

10. A 45 year old male returned from Italy was admitted to medical ward with nausea, loss of appetite and loss of weight. He claims that he had similar symptoms when he was there for the last six months. He had few reports of laboratory investigations done 02 days back.  
FBC- Hb – 12g/dl, WBC-7600/cumm, N-58, L-32, Pl-300,000, AST-600 $\mu$ l(<40), ALT- - 680 $\mu$ l(<40), GGT- 52 $\mu$ l(11-58), ALP -90(39-111 $\mu$ l)  
S.Bilirubin T-4.5mg/dl(<1.5) D- 2.0mg/dl (<0.8), S protein Alb-3.8 g/dl, Globulin – 3 g/dlS.creatinine – 0.6 mg/dl,
- 10.1 What are the questions you would ask from the history to find the aetiology. (20 marks)
- 10.2 Write 5 different important examination findings that will help you to identify the aetiology. (15 marks)
- 10.3 List 5 investigations you would order giving reasons. (35 marks)
- 10.4 Few weeks later he was admitted to ward in a drowsy state. He said that he had high fever and consumed paracetamol 2 tablets 4 hourly for 2 days prior to admission.
- 10.4.1 What could be the acute complication for the above presentation? (10 marks)
- 10.4.2 Briefly outline the treatment of the condition you mentioned in 10.4.1? (20 marks)