



UNIVERSITY OF JAFFNA, SRI LANKA

FINAL EXAMINATION FOR MEDICAL DEGREES - FEBRUARY 2023

ACADEMIC YEAR 2015/2016

PSYCHIATRY - PAPER II

Date: 24.02.2023

Time: 03 hours

Answer each question in a separate answer book.

1. A 22-year-old girl is brought to the hospital as she had become irritable and argumentative over a period of 10 days. She was working as a salesgirl in a shop, and was stopped from work the day before as she had got into an argument with another co-worker and slapped her. The parents thought of bringing her to hospital as she was sleeping poorly, keeping up late into the night, calling all her school mates and asking them to come to a party she was organizing at a beach. She told her parents she was going to get a lot of money as God had helped her win a lottery.
 - 1.1 What is the most likely diagnosis? (10 marks)
 - 1.2 Briefly explain the features in the above history that helped you arrive at the diagnosis. (20 marks)
 - 1.3 Describe the possible findings in the mental state examination that will support your diagnosis. (30 marks)
 - 1.4 Discuss the effect of the condition on the patient and the family, and the measures you would take to minimize the adverse consequences. (40 marks)

2. A 24-year-old male is referred for psychiatric assessment from a rehabilitation hospital. He has met with a road traffic accident two months before. He had been riding a motorbike without a helmet and was admitted unconscious with a head injury. CT brain taken after the admission revealed contusions and small haemorrhages in the left side of the brain. There were no fractures and he did not need any neuro surgical intervention.

He had regained consciousness the following day, but had been confused and disoriented for nearly a week thereafter. On recovery, he was found to have grade 3 upper motor neuron weakness of his right upper and lower limbs with mild deviation of the mouth to the left. There was no sensory impairment. He had difficulty in speaking although there was no difficulty in chewing food or swallowing.

He was referred as he was very irritable from time to time. He also did what he liked, and urinated in the ward next to the bed even when he could walk to the washroom.

- 2.1 State three reasons that could explain his irritable behaviour. (15 marks)
 - 2.2 State three reasons as to why he may not be using the washroom. (15 marks)
 - 2.3 State two reasons as to why he may be having difficulty speaking. (20 marks)
 - 2.4 State three specific bedside cognitive tests you should conduct. (20 marks)
 - 2.5 Outline your plan of management. (30 marks)
3. A 23-year-old university student presents to the mental health unit stating that she is extremely distressed and feeling suicidal for the past few days following a quarrel with her boyfriend. She reveals that her boyfriend is very possessive and does not allow her to move with other friends or attend group studies. She has multiple superficial cut injuries on her left arm, and a couple of bruises on her face and upper arms. She claims that they were the rewards for her true love.
- 3.1 How would you assess her in view of arriving at a diagnosis? (20 marks)
 - 3.2 State how you would assess her suicidal risk. (20 marks)
 - 3.3 Outline your management plan. (40 marks)
 - 3.4 Briefly discuss why people involve in deliberate self-harm behaviour. (20 marks)
4. A 40-year-old primi para was referred to the psychiatric clinic from the OPD. She presented with burning sensation in the body, lethargy, easy fatigability, poor sleep, and poor appetite for the past four months. Apparently, she developed these symptoms two weeks after the delivery of her child, a baby boy. On further questioning, she revealed that she was less interested in her usual leisure activities. She also expressed ideas of worthlessness, and showed moderate psycho-motor retardation. She was conscious and well oriented.
- 4.1 What is your most probable diagnosis? (10 marks)
 - 4.2 What are the two important organic possibilities that you would exclude in this case? (10 marks)
 - 4.3 List three important psychiatric risks associated in this case. (15 marks)
 - 4.4 Briefly describe how you would assess those risks mentioned in 4.3. (25 marks)

Later, the patient was admitted to the inpatient unit, and successfully treated with medications. After two weeks, when the patient was ready for discharge, you were asked to provide health education (psychoeducation) to the patient and her husband.

- 4.5 Outline ten important aspects you would cover in the health education. (40 marks)

5. A 16-year-old grade 11 student was brought by her aunt with the history of deteriorating performance in her studies for the past three months. She is living with her aunt after her parents left abroad 6 months ago, as her father, an employee of an international non-governmental organization, got his posting abroad. The girl was found to be preoccupied, staying alone, and thoughtful. She reported reduced sleep and distressing dreams, developed poor appetite, lost her interest in going out, and felt lonely and left out. She further revealed that she felt extremely anxious as her initial optimism of obtaining good results in her O/L examination had been gradually fading away.

- 5.1 Name two differential diagnoses for this clinical scenario. (10 marks)
- 5.2 State what further information in the history and mental state examination that are needed in arriving at a diagnosis. (30 marks)
- 5.3 Name two psychological scales which are useful in her assessment. (10 marks)
- 5.4 Briefly describe your management plan. (50 marks)

6. An 80-year-old retired principal presented to the primary health care institution to collect his regular medications. The medical officer in that institution observed that he was not regular for his clinic visits and the investigations ordered during the last visit were not attended. While talking to him, the medical officer felt that the elderly gentleman was depressed, and on further questioning it was revealed that he was living alone with his wife who had developed dementia and become fully dependent on her husband. As a last statement, the gentleman stated that people should not live for long years.

If you are the medical officer at the primary health care institution,

- 6.1 How would you establish a diagnosis of depression in this gentleman? (20 marks)
- 6.2 List five aetiological factors which would have contributed in the development of depression in this gentleman. (10 marks)
- 6.3 Describe your pharmacological management. (20 marks)
- 6.4 Briefly describe the non-pharmacological management which could be offered at the primary health care level. (30 marks)
- 6.5 Briefly discuss the principles of home-based management for people with dementia. (20 marks)

