



UNIVERSITY OF JAFFNA, SRI LANKA

FINAL EXAMINATION FOR MEDICAL DEGREES - NOVEMBER 2024

Academic Year 2017/2018

PSYCHIATRY - Paper II

Date: 20.11.2024

Time: 1.30 pm - 4.30 pm

ANSWER ALL SIX QUESTIONS

ANSWER EACH QUESTION IN SEPARATE ANSWER BOOK

1. A 45-year-old male presented with chest tightness and breathlessness to the OPD. He had just got off a crowded bus as he suddenly felt he could not breathe and he felt he was going to pass out. His heart was beating fast, and he had also started sweating profusely at this time.

On further inquiry, he said that these episodes had been common for a period of six months when traveling in crowded buses or when in lifts, until he discovered that he did not have these episodes if he took some alcohol prior to travelling. He was a salesman and had to travel frequently for business.

Over the past year, he took alcohol almost daily particularly before travelling in buses or going long distances. However, on this particular day he had not taken any alcohol. He did not have any medical illness and had been investigated for heart disease six months before and found to be normal.

- 1.1 State the most likely diagnosis. (10 marks)
1.2 Outline the features that will make you to arrive at the above diagnosis. (20 marks)
1.3 Briefly describe the psychological approach to his treatment. (30 marks)
1.4 Discuss how you will address his alcohol misuse. (40 marks)
2. A 32-year-old woman is referred from the obstetric ward, with the complaint of not cooperating with the ward staff. She is a graduate teacher, married for five years, became pregnant for the first time, followed up with her antenatal clinic, but developed severe pregnancy-induced hypertension and lost her baby a week before the expected date of delivery. Two days before, she delivered a stillborn baby and has been staying in the ward for the management of hypertension. She became sleepless, withdrawn, not paying attention to her self-care, not talking to family members, and not complying with staff's requests, including taking medications or giving blood for investigations. At times, she became irritable and shouted loudly, cursing the healthcare workers and her family.

During the psychiatric interview, she sits down quietly and mostly responds by non-verbal cues or by one-word answers. Staring at a distance, her eyes are filled with tears.

- 2.1 Mention three (03) most possible differential diagnoses for this clinical presentation. (15 marks)
 - 2.2 State how you would differentiate the conditions mentioned in 2.1. (15 marks)
 - 2.3 Write down your management plan. (50 marks)
 - 2.4 Briefly discuss how the mental wellbeing of mothers could be improved in obstetric settings. (20 marks)
3. A 35-year-old woman, a married mother of four from France, who is on holiday and has been on escitalopram for the past six months, presents to the mental health unit seeking advice for her reduced sleep, irritable mood, and irresistible desire to do charity work against her family's wishes for the past two weeks. She wears a number of ornaments, speaks loudly, greets the staff members, and gives chocolates to all the patients who are there at that time. When she meets the doctor, she immediately hugs him to his surprise.
- 3.1 State three (03) possibilities for her current clinical presentation. (15 marks)
 - 3.2 Briefly describe how you would arrive at your working diagnosis. (30 marks)
 - 3.3 Discuss the management plan. (40 marks)
 - 3.4 How would you advise her if she wishes to donate her ancestral land to a charity organisation? (15 marks)
4. A 24-year-old undergraduate student was referred from the medical ward after being evaluated for multiple complaints, including inability to concentrate on studies, poor memory, a sense of physical weakness, subjective experience of loss of weight, and frequent nightmares for the past six months. On direct questioning, he stated that his course work was demanding a lot from him and his girlfriend was demanding even more from him. Later, he claimed that above all those issues, he was much afraid of his habit of frequent masturbation and losing semen.
- 4.1 List four (04) differential diagnoses for the above clinical scenario. (10 marks)
 - 4.2 State your provisional diagnosis with reasons. (10 marks)
 - 4.3 Write down other information you would like to obtain from this young man. (10 marks)
 - 4.4 Mention how you would explain your diagnosis to him. (10 marks)
 - 4.5 Briefly discuss your management plan. (40 marks)
 - 4.6 Critically discuss the role of masturbation in reproductive health. (20 marks)

5. An 8-year-old boy was brought to the child mental health clinic by his mother as directed by his teacher, who was concerned about his frequent absenteeism and declining grades.

His mother explained that those issues started three months ago after his sister moved away from home to attend university. Since then, the boy tried to stay at home, complaining of aches and pains, feverishness, or tummy aches, and started spending time with his grandmother. Unexpectedly, his grandmother passed away last month, and the boy became upset about the loss.

On further questioning, the mother detailed that after the grandmother's death, there had been an escalation of violence by her husband, who works in the municipal council and uses multiple substances.

During the interview, the boy claimed that he was trying his best to study at home but cried when discussing his grandmother's death and school absences. The physical examination revealed that he was overweight and currently using inhalers for his respiratory issues.

- 5.1 State the most likely diagnosis. Give your reasons. (20 marks)
- 5.2 Mention two (02) other differential diagnoses you would consider in this boy. (10 marks)
- 5.3 State four (04) key areas in the history you would explore in order to find out the reasons for his school absenteeism. (20 marks)
- 5.4 Briefly describe your management plan. (30 marks)
- 5.5. Outline the measures you would adapt to ensure the safety of the boy and his mother. (20 marks)

6. Stephen, a 72-year-old retired postmaster, was referred to the mental health unit from the medical ward.

The history revealed that Stephen, after his retirement, chose to live in his ancestral village with his wife. His one and only son remained in Colombo and hardly maintained contacts with his parents.

Stephen engaged in a number of projects that helped to uplift the sociocultural and economic development of his village, and, as a result, he was awarded a lifetime achievement award.

For the past two years, Stephen faced a number of challenges related to caring for his wife, who was battling with terminal cancer. The couple chose to keep the diagnosis a secret, even from their son. During those difficult periods, Stephen felt a sense of resilience in handling his wife's needs. He lost his wife two months ago and had her funeral only with a few neighbours and villagers. He didn't inform about his loss to many, including his son.

Stephen initially seemed to accept his wife's passing away. But with time, he developed poor sleep, loss of appetite, and a sense of weariness. For the past three weeks, he confined himself at home, ignoring his social contacts, neglecting his food, and becoming feeble. A neighbour happened to see his deterioration and forcefully admitted him to the medical ward.

On mental state assessment, he was found to have extreme guilt and a desire to die through a hunger strike.

- 6.1 Giving reasons, state three (03) differential diagnoses you would consider for Stephen. (15 marks)
- 6.2 How will you describe Stephen's premorbid personality? (10 marks)
- 6.3 State five (05) possible etiological factors you identified in the case description that would have contributed to his current clinical presentation. (15 marks)
- 6.4 Outline the important steps in the management. (40 marks)
- 6.5 After the recovery, Stephen requests whether he could visit his wife's graveyard. How will you respond to his request? (20 marks)