

REPRODUCTIVE HEALTH PAPER ONE (1)

1. Mary, a 27 year old who has just delivered and the placenta has been expelled presents to you with profuse per vaginal bleeding.

a) What is the most probable diagnosis? *PPH*

b) Outline 4 predisposing factors of the above condition

c) Manage this patient *1. Manual removal of retained placenta  
2. Massage of uterus  
3. uterine tamponade  
4. uterine artery ligation  
5. Hysterectomy*

2. A 24 year old mother at 38 weeks gestation presents with complains of reduced fetal movement. On examination, the fundal height is term, presentation is cephalic, fetal lie is longitudinal. On examination of the fetal heart, there is tachycardia, reduced fetal heart rate variability, decelerations and absence of acceleration.

a) What is your probable diagnosis? *abruptio placentae*

b) Outline 4 causes of this condition

c) Outline your management

3. Michelle at 34 weeks gestation presents with history of tiredness, dizziness and occasional breathlessness on exertion. On examination, her blood pressure is 120/80 mmHg, Hb level is 4gm/dl. She has bilateral pitting pedal oedema and her heart and breath sounds are normal.

a) What is your provisional diagnosis? *Pre-eclampsia*

b) Outline 4 possible causes of her condition

c) Discuss her management *admission to hospital*

4. Discuss eclampsia under the following sub headings;

a) Outline six (6) clinical features of impending eclampsia *1. Headache  
2. Blurred vision  
3. Epileptic fits  
4. Proteinuria  
5. Hypertension  
6. Oliguria*

b) Management of eclampsia at 34 weeks gestation *1. Delivery  
2. Call on 610 6245  
3. 100% oxygen  
4. 100% oxygen  
5. 100% oxygen*

c) Discuss her management

5. Njeri who delivered one week ago through caesarean section complains of painful left lower limb. On examination, the limb is swollen and tender especially at the calf muscle with no visible signs of infection or trauma.

a) What is the most likely diagnosis? *Deep vein thrombosis*

b) Discuss her management

c) Outline 2 possible complications of this condition

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6. Anne at 32 weeks gestation presents with lower abdominal pain and painful micturition. On examination, there is suprapubic tenderness and no abnormal vaginal discharge.
- a) What is the most possible diagnosis? *UTI*
  - b) Outline 4 common offending organisms *Staphylococcus, E. coli, Proteus mirabilis, Klebsiella pneumoniae*
  - c) Discuss the management of this patient *Antibiotics, Hydration, Analgesia*
7. Discuss family planning under the following subheadings:
- a) Definition *that is a contraceptive method used to prevent pregnancy*
  - b) Classification giving examples *injectables - Depo provera, pills - COC, IUD - copper, IUD - levonorgestrel, implants - etonogestrel*
  - c) Outline 4 side effects of intrauterine contraceptive device *menorrhagia, dysmenorrhea, infection, ectopic pregnancy*
8. Discuss infertility under the following subheadings:
- a) Definition *inability to conceive after 1 year of regular unprotected intercourse*
  - b) couple investigations *semen analysis, ovulation test, tubal patency*
  - c) outline 4 possible causes *ovulation disorders, uterine abnormalities, cervical mucus, fallopian tube*
9. Discuss maternal mortality under the following subheadings:
- a) causes of maternal mortality in Kenya *direct - haemorrhage, sepsis, eclampsia, anaemia, indirect - malaria, TB, HIV/AIDS, malnutrition, anaemia*
  - b) outline 4 obstetric complications that lead to mortality *haemorrhage, sepsis, eclampsia, anaemia*
  - c) Preventive measures *antenatal care, immunisation, family planning*
10. A 48 year old para 7 + 1 presents to you with history of post coital bleeding and intermenstrual bleeding. Speculum examination reveals fungating growth which bleeds on touch.
- a) What is the probable diagnosis? *Cervical cancer*
  - b) Outline 6 predisposing factors to the above condition *Early sex, multiple partners, HPV, immunosuppression, DVT, sexually transmitted infection*
  - c) Outline 6 complications *anaemia, haemorrhage, metastasis, urinary bladder, pelvic pain*
  - d) Outline 6 preventive measures *regular Papanicolaou smears, HPV testing, safe sex, avoid multiple partners, avoid DVT, avoid sexually transmitted infections*