

Contents

FOURTH YEAR 2013/2014 MCQ.....	2
FOURTH YEAR 2013 MCQ	23

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UNIVERSITY OF NAIROBI

UNIVERSITY EXAMINATIONS 2013/2014

FIFTH YEAR EXAMINATIONS FOR THE DEGREE OF BACHELOR OF
MEDICINE AND BACHELOR OF SURGERY

HME500: MEDICINE-MCQ

DATE: NOVEMBER 6, 2014

TIME: 9.00 A.M. – 12.00 NOON

INSTRUCTIONS:

1. There are 100 Multiple Choice (MCQs) Questions in this paper. Ensure that your paper has all the questions.
2. Each question has ⁺ONE BEST ANSWER.
3. There is no negative marking for incorrect responses.
4. No mark will be given if more than one answer is marked in a single question.
5. An answer sheet is provided where all your answers should be appropriately marked as per instructions.
6. The examination paper should be left in the examination room.

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A 20 year old woman presents with sudden onset weakness of the right side of the body with normal speech. The MOST likely site of the lesion is?

- A. Middle cerebral artery territory
- B. Brain stem
- C. Pons
- D. Cerebellar peduncle
- E. Medulla

Which one of the following statements is TRUE regarding characteristics of X-linked recessive disorders?

- A. In the male, X-linked recessive genes only manifest when the genes are homozygous
- B. The condition usually affects females
- C. They are transmitted by healthy male carriers
- D. Male offspring of a male with the disorder inherit the disease
- E. All female offspring of an affected male will be carriers

Which one of the following drugs used in the treatment of tuberculosis is correctly matched with its expected adverse reaction?

- A. Streptomycin - optic neuritis
- B. Rifampicin - peripheral neuropathy
- C. Pyrazinamide - hepatotoxicity
- D. Ethambutol - renal failure
- E. Isoniazid - peripheral neuropathy

All of the following diseases are classified as spondyloarthropathies EXCEPT:

- A. Ankylosing spondylitis
- B. Psoriatic arthritis
- C. Reactive arthritis
- D. Polymyalgia rheumatica
- E. Enteropathic arthritis

A 25 year old man presents with a 4 month history of swellings on the left lower neck and generalized pruritus. Examination reveals mobile non-tender rubbery lymph nodes. Lymph node biopsy shows features of nodular sclerosing Hodgkin's disease. Bone marrow confirms marrow infiltration. Computerized tomography (CT) scan of the chest, abdomen and pelvis are normal. What is the stage of the disease?

- I A
- II A
- III B
- III S
- IV S

more lymph nodes in regional lymph nodes
 more lymph nodes in regional lymph nodes
 more lymph nodes in regional lymph nodes
 more lymph nodes in regional lymph nodes
 more lymph nodes in regional lymph nodes

6. In a patient with anasarca, 24-hour albumin excretion of 8g and normal glomerular filtration (GFR), the following complications are expected EXCEPT: - ^{hypotension} ^{hypotension} ^{hypotension}

- A. Hypercoagulability ^{renal failure}
- B. Metastatic calcification ^{hypocalcaemia}
- C. Atherosclerosis ^{hypertension}
- D. Susceptibility to infections ^{renal hypoxemia}
- E. Hyponatremia ^{renal failure}

7. A 60 year old man presents to his doctor for a medical check. He is found to have a random blood sugar (RBS) of 7mmol/L. An oral glucose tolerance test (OGTT) done showed fasting blood glucose of 6.2 mmol/L, 2 hour post glucose load of 14.4 mmol/L. Which of the following statements is TRUE regarding this patient?

DM
RBS = 11.2
FBS →
susceptible for
metabolic syndrome
Central obesity
reqd Bp 8
reqd TG 5
↓ HbA1c
↓ FPG

- A. He has diabetes mellitus ^{11.2 = DM}
- B. He has impaired glucose tolerance ^{fasting glucose}
- C. He has metabolic syndrome ^{fasting glucose}
- D. He should have fasting lipid assay to determine the diagnosis ^{fasting glucose}
- E. Another OGTT should be done in 6 months to determine his diagnostic status ^{fasting glucose}

8. A 22 year old man presents to the emergency department with a 3 day history of fever, cough and pleuritic chest pain. His temperature is 39°C, pulse rate is 110 beats/min and respiratory rate is 26 beats/min. Chest radiograph reveals an opacity in the right lower lung zone. Which of the following is the MOST common cause of the condition?

- A. *Candida albicans*
- B. *Pseudomonas aeruginosa*
- C. *Mycoplasma pneumoniae*
- D. *Staphylococcus aureus*
- E. *Streptococcus pneumoniae*

9. A 12 year old boy develops migratory joint pain involving large joints 2 weeks after a sore throat. He has a tachycardia of 110 beats/min, and a systolic murmur at the apex. Which of the following statements is TRUE concerning his clinical presentation?

- A. The micro-organism causing the sore throat is likely to be *Staphylococcus aureus*
- B. Blood cultures usually yield the offending organism
- C. The heart involvement is usually pancarditis
- D. Erythema nodosum is expected
- E. Shortened PR interval is found on the electrocardiogram (ECG)

10. A 20 year old man presents with 3 months history of bloody mucoid diarrhea. Colonoscopy shows diffuse erythema and ulcerations in the entire colon and patchy ulceration in the terminal ileum. The MOST likely diagnosis is:-

- A. Ulcerative colitis ^{UC with backwash ileitis}
- B. Crohn's disease
- C. Amoebic colitis
- D. Shigellosis
- E. Tuberculous enteritis

backwash ileitis

11. A patient presents with oral lesions for 1 month. He has flaccid vesicles and bullae on the trunk and limbs. Nikolsky sign is positive. The MOST likely diagnosis is:-
- A. Erythema multiforme major *Handley's boundary etc. like they are multiple for*
- B. Mucous membrane pemphigoid
- C. Bullous pemphigoid *large blisters more on flexor sides*
- D. Pemphigus foliaceus *crusted lesion*
- E. Pemphigus vulgaris *so - the heavy mixed blisters
flaccid blisters old bc diagnosed
epidermal, keratin, crusty crusted lesion*
12. A 25 year old man with history of HIV disease presents with a history of chronic headache. Neurological examination is normal. CT scan reveals a contrast enhancing ring lesion on the left parietal lobe. The MOST appropriate approach would be:- *Totiplex*
- A. Biopsy the lesion
- B. Start patient on steroids
- C. Start patient on empirical antibiotics
- D. Start patient on empirical anti-toxoplasmosis treatment - *Spiramycin + Sulphadiazine*
- E. Start patient on intravenous acyclovir
13. The following are the results of cerebrospinal fluid (CSF) obtained from a 40 year old man with meningitis
- Protein 100g/l *45g/dl*
 - Glucose 1mmol/l
 - White cell count 2000 cells/ μ l, predominantly lymphocytes
 - Gram stain negative
- These findings are compatible with:-
- A. Pyogenic meningitis
- B. Viral meningitis
- C. Tuberculous meningitis
- D. Sarcoidosis
- E. Cryptococcal meningitis
14. Which one of the following is the MOST important attribute necessary for a screening test?
- A. Sensitivity } *influenza*
- B. Specificity }
- C. Positive predictive value (PPV)
- D. Negative predictive value (NPV)
- E. Receiver-operator curve (ROC)
15. All of the following statements regarding *Plasmodium falciparum* are true EXCEPT:-
- A. It causes more severe disease in pregnancy
- B. It is associated with recurrent relapses after effective initial treatment
- C. It is the only malarial parasite causing greater than 20% parasitemia
- D. Infection is associated with thrombocytopenia
- E. It is the only cause of cerebral malaria.

16. All of the following are diagnostic criteria for polymyositis EXCEPT:-

- A. Elevated creatine kinase
- B. Proximal muscle weakness
- C. Myopathic electromyogram (EMG)
- D. Typical changes on muscle biopsy
- E. Heliotrope rash — Dermatomyositis

17. A 13 year old boy presents with long-standing mild jaundice, moderate pallor and moderate splenomegaly. The MOST likely diagnosis is:-

- A. Sickle cell anaemia
- B. Non-Hodgkin's lymphoma
- C. β -thalassaemia
- D. Chronic myeloid leukemia
- E. Myelofibrosis

18. A 56 year old man presents with severe low back pain, lumbar spine tenderness and general illhealth. He has pallor and mild ankle oedema. Investigations show haemoglobin 6g/dl, MCV 80fl, ESR 110mmHr serum albumin 30g/l, total protein 130g/l. Xrays show compression fracture L3 to L5 and osteolytic lesions in the pelvic bones. Common causes of renal failure in this condition include all the following EXCEPT:

- A. Neurogenic bladder
- B. Hypercalcemia
- C. Hyperuricemia
- D. Proteinuria — Paraprotein
- E. Hyperparathyroidism ✓

19. A 28 year old woman is followed up for thyrotoxicosis. She is on antithyroid medication. Which one of the following clinical parameters will closely reflect her thyroid hormone status?

- A. Emotional variability (moods) ✓
- B. Menstrual patterns
- C. Palpitations
- D. Sleep patterns
- E. Weight

20. All of the following interventions are beneficial in the management of patients with chronic obstructive airway disease (COPD) EXCEPT:-

- A. Pneumococcal vaccination ✓
- B. Ceasation of smoking ✓
- C. Short acting bronchodilators ✓
- D. Inhaled anticholinergics ✓
- E. High tension oxygen therapy ✓

21

All of the following auscultatory findings are expected in mitral stenosis EXCEPT:-

- A. Mid-diastolic murmur ✓
- B. Soft first heart sound ✓ *loud S1*
- C. Presystolic murmur accentuation ✓ *(at apex)*
- D. Opening snap ✓
- E. * Loud second heart sound ✓

22

A patient presents with massive haematemesis for 1 day. Endoscopy reveals acutely bleeding oesophageal varices. All of the following treatments would be recommended EXCEPT:-

- A. Sclerotherapy ✓
- B. Propranolol infusion ✓
- C. Octreotide infusion ✓
- D. Nasogastric tube insertion ✓
- E. Band ligation ✓ *- 1st, 4*

23

A 25 year old woman presents with erosion, weeping and crusted lesions on 30% body surface area. The plan of management should include all of the following EXCEPT:-

also done py by epidemic M

- A. Septic screen ✓
- B. Saline soaks ✓
- C. Infection control ✓
- D. Keep warm ✓
- E. Emollients ✓

SJS < 10% SJS/TEN 10-30% TEN > 30

Immune complex mediated hypersensitivity

24

A 58 year old man with HIV develops a vesicular eruption along the left side of the ribcage. The eruption is preceded by days of tingling and burning sensation. Which one of the statements is TRUE regarding the condition?

index 3 12 1/2 can't HIV 1 HIV 2

- A. Corticosteroids should be started immediately ✓
- B. Early acyclovir reduces the duration of symptoms ✓ *(start early)*
- C. Previous Herpes simplex virus infection is associated with this presentation ✓ *(12)*
- D. Disappearance of the rash is associated with disappearance of symptoms x in all the patients *not all the time*
- E. Amitryptilline has no role in the management of this condition x

Risk factors CKP + 15% P. COPD Anticoagulants Leschman's g herpes Zoster

25

A 50 year old man presents with history of wasting of the small muscles of the hand associated with dysarthria and dysphagia. Examination reveals spastic immobile tongue, wasted muscles of the hands with increased deep tendon reflexes. All of the following statements are true regarding the condition EXCEPT:-

of latent sclerosis of progesterone with most

- A. Autosomal dominant inheritance ✓ *duplexia*
- B. Cause of death is usually respiratory ✓ *spastic paralysis*
- C. Is associated with nystagmus ✓
- D. Responds to steroids x
- E. Sphincteric involvement is a late complication ✓ *Dementia - Archer's sign - not*

ALS - group of motor neuron disease nerve cells consisting skeletal muscle + lateral part of spinal cord replaced by connective tissue - sclerosis change of frontal lobe nerve cells

no of ALS squeeze spastic muscular group 1) bulbar palsy 2) latent sclerosis bulbar palsy 3) myelitis

does not affect heart, taste, sense of touch, reflexes, bladder, rectum, or volume
Ritigole
Anticholinergics = if no saline
Barosty 5x - Oct, Phps
Apply ice to

Rement - multidisciplinary Avoid all muscle as they are myocard scars Duration - monitor speech

26. You notice in the locker room one of your colleagues injecting himself with pethidine. What would be your MOST appropriate actions? A

- Report to the supervisor
- Counsel your colleague yourself
- Pretend you did not see him
- Ask your senior colleague to talk to him
- Report him to the director of the hospital

27. A 28 year old man presents with painful micturition and a purulent urethral discharge for 2 days. Which one of the following is NOT an appropriate drug for his treatment?

(Cefixime, ofloxacin 400mg)

- Ciprofloxacin *- 500mg BID*
- Ceftriaxone *250mg IM*
- Amoxicillin
- Azithromycin *- 2g single dose*
- Doxycycline *- 200mg bid divided at each PO 100-200 bid 1000*

28. Which one of the following is NOT a feature of fibromyalgia? *- disorder of chronic widespread pain*

- Anxiety *dx*
- Fatigue *hypothyroidism*
- Irritable bowel syndrome (IBS) *widespread pain*
- Scleritis *not a feature*
- Sleep disturbance *PSY - possible*

29. A 30 year old man presents with general body weakness. Physical examination reveals pallor and koilonychia. Which one of the following is the MOST likely positive laboratory finding?

- Presence of *Ascaris lumbricoides* ova in his stool
- Presence of *Taenia saginata* ova in his stool
- Increased faecal stercobilinogen
- Mean corpuscular volume (MCV) of 59fl *hook worm*
- Reduced total iron binding capacity (TIBC) *low*

30. Which one of the following renal disease is well matched to renal imaging findings?

- Chronic glomerulonephritis - bilateral contracted echogenic kidneys
- Obstructive uropathy - echogenic kidneys *dilated calyces*
- Chronic pyelonephritis - enlarged globular kidney *reduced*
- HIV nephropathy - bilateral small scarred kidneys *normal*
- Acute tubular necrosis - dilated calyces. *No findings*

31. The metabolic syndrome is defined by the presence of all the following characteristics EXCEPT:

- Abdominal obesity *multiple risk factor*
- Hypertension *fasting lipids*
- High high-density lipoprotein (HDL) - cholesterol *low HDL*
- Hypertriglyceridemia *common risk factor for*
- Impaired glucose tolerance

Multiple risk factors
 Hypertension
 Hypertriglyceridemia
 Impaired glucose tolerance
 Abdominal obesity
 Low HDL
 Page 7 of 20
 Chest pain or SOB
 thrombosis

Complexion
 Mildred
 Optic atrophy
 Scleritis
 Keratitis

obesity
 metabolic syndrome

drowsy
 sleep
 Cognitive
 Remnant
 poor on
 Fluorescein
 Graded
 Anterior

32. All of the following findings are compatible with a diagnosis of *Pneumocystis jirovecii* pneumonia EXCEPT:-

- A. Elevated white blood cell count (blood count is low)
- B. Low CD4 count ↑
- C. Elevated lactate dehydrogenase (LDH) in blood ↑ (plc of lung infection)
- D. Marked hypoxia on arterial blood gas analysis ↑
- E. Butterfly appearance on chest radiograph ↑

33. A 65 year old man complains of palpitations. ECG shows irregular QRS complexes with absent P-waves. The diagnosis is :-

- A. Atrial flutter (saw tooth)
- B. Atrial ectopics
- C. Atrial fibrillation (irregularly irregular PR, P waves, QRS complex)
- D. Heart block PR prolonged
- E. Ventricular fibrillation

34. A 25 year old man is diagnosed with chronic hepatitis B infection. He has high hepatitis B virus (HBV) DNA at 100 million IU/ml. All of the following investigations would be required before initiation of treatment EXCEPT:-

- A. Liver function tests (LFT)
- B. Hepatitis B e antigen (HBeAg) test (negative)
- C. Hepatitis B core antigen (HBcAg) test (current infection)
- D. Hepatitis C virus screen
- E. Thyroid function tests (TFTs)

35. A 30 year old man presents with scaly papules and plaques. The differential diagnoses include all the following EXCEPT:-

- A. Lichen planus
- B. Psoriasis vulgaris
- C. Discoid dermatitis
- D. Pityriasis rosea (hypopigmentation)
- E. Morphoea (localized scleroderma) - sclerod by loose collagen deposits → thickening of the skin

36. A HIV positive woman has generalized cervical lymphadenopathy. Fine needle aspiration (FNA) cytology confirms tuberculous adenitis. Her CD4 count is 60 cells/ul. She is started on antituberculous treatment and HAART simultaneously. 4 weeks later she develops fever and increasing enlargement of the lymph nodes. Which one of the following would be the CORRECT approach to her management?

- A. Stop the anti-tuberculous therapy (start)
- B. Stop the anti-retroviral therapy (continue only if life threatening)
- C. Start on prednisone immediately (highly doubtful)
- D. Add a broad spectrum antibiotic (steroids & mycobacteria)
- E. Give an antipyretic and continue therapy

37. A 60 year old hypertensive and diabetic man who has previously been well is found in the morning with weakness of the right side. He is rushed to the hospital where he arrives in 1 hour. Computerized tomography (CT) scan of the head reveals an infarct. Which of the following would be the MOST effective treatment?

- A. Aspirin
- B. Clopidogrel
- C. Atorvastatin
- D. Intravenous tissue plasminogen activator (TPA) . after 6hrs not med 4.5
- E. Dipyridinole

38. Which of the following deficiency is found in patients with terminal ileum disease?

- A. Calcium
- B. Iron — *Quadrant*
- C. Folic acid — *12 fenum*
- D. Tryptophan
- E. Cobalamin — *Vit B12*

39. A 41 year old man admitted for management of heart failure develops a cough, chest pain and fever after 1 week in the hospital. Which one of the following antibiotics is the BEST empiric choice?

- A. Amoxicillin — clavulanic acid
- B. Clarithromycin
- C. Ceftriaxone — *1st*
- D. Cefuroxime — *2nd*
- E. Flucloxacillin

40. A 43 year old man presents with 8 week history of symmetrical joint pain and swelling involving the metacarpal-phalangeal (MCP) metatarsal — phalangeal (MTP) and proximal interphalangeal (PIP) joints. Symptoms are worse in the morning and last for 1 hour. Which one of the following statements is TRUE of this condition?

- A. Non-steroidal anti-inflammatory drugs (NSAIDs) are the first line of therapy
- B. Extra-articular manifestations is not a feature
- C. Radiological investigation is required for the diagnosis
- D. Disease modifying therapy should be instituted immediately
- E. Biologic agents have no role in its management

41. In a 60 year old man with multiple myeloma and a fracture of the right femur, which one of the following is the MOST appropriate approach to management?

- A. Start melphalan and radiotherapy
- B. Start melphalan then refer for bone marrow transplantation
- C. Start analgesics, internally fix the fracture then administer radiotherapy
- D. Administer radiotherapy then internally fix the fracture
- E. Start neoadjuvant thalidomide then internally fix the fracture.

Page 9 of 20
Oral, Putrefact, defect no scdm
in air tract
P.O. of

messy
polycho-

42. Which one of the following disease process is well matched with the renal manifestation?

- A. Syphilis - obstructive uropathy ^{nephro} ^{syphilis}
- B. *Plasmodium malariae* infection - nephrotic syndrome ^{renal failure}
- C. Systemic lupus erythematosus - acute tubular necrosis ^{lupus nephritis}
- D. *Schistosoma haematobium* infection - Fanconi syndrome, obstructive ^{obstructive}
- E. Rheumatoid arthritis - acute glomerulonephritis ^{CSF on test}

43. A 46 year old man with diabetes presents with right foot ulceration without gangrene. It is septic with malodorous smell. HbA_{1c} is 8.5%. dorsalis pedis pulses are good. *Staphylococcus aureus* and *Klebsiella sp.* have been isolated from the wound swab. The following actions are appropriate EXCEPT:-

- A. Daily hydrogen peroxide soaks ^{DM ulcers}
- B. Intravenous antibiotics ^{spread to}
- C. Daily saline soaks ^{stop dressing}
- D. Platelet - derived growth factor dressing ^{pathogenic control}
- E. Insulin therapy ^{don't go bare foot}

44. A 65 year old man with 25 pack years of smoking presents with cough, weight loss and breathlessness. A chest radiograph shows a right apical homogeneous round opacity. All of the following findings are known to be associated with this presentation EXCEPT:-

- A. Hyperpigmentation of the palms ^{hyperpigmentation}
- B. Radicular pain to the right hand - anorexia ^{anorexia}
- C. Hypocalcemia ^{hypocalcemia}
- D. Hoarseness of the voice ^{hoarseness}
- E. Haemoptysis ^{haemoptysis}

A patient presenting with non-ST elevation acute coronary syndrome will benefit from all of the following therapeutic interventions EXCEPT:-

- A. Thrombolysis
- B. Combined clopidogrel and aspirin therapy
- C. Enoxaparin therapy
- D. Beta-blocker therapy
- E. Nitrates

46. A 70 year old man presents with generalized pruritus and weight loss. Clinical examination reveals green jaundice and a palpable (non-tender) gall bladder. Which of the conditions listed below is the MOST likely diagnosis?

- A. Acute cholecystitis
- B. Cholelithiasis
- C. Hepatocellular carcinoma
- D. Pancreatic malignancy
- E. Cholangiocarcinoma

47. A 20 year old patient presents with pruritic lesions on the neck, antecubital and popliteal fossae since 2 year of age. The lesions are lichenified, excoriated and crusted patches. The MOST likely diagnosis is:-
- A. Atopic dermatitis *Infants 3-6 mths - face, trunk, extensor surfaces*
 B. Seborrhoeic dermatitis
 C. Allergic contact dermatitis *Children - Antecubital & Popliteal fossae*
 D. Nummular dermatitis *Adults - face, neck, upper chest*
 E. Dyshidrotic dermatitis
48. In a HIV positive patient with cryptococcal meningitis and CD4 count of 40 cells/uL, which one of the following approaches would be the MOST appropriate?
- A. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures and HAART initiation at 2 weeks
 B. HAART and amphotericin B plus fluconazole initiation simultaneously, serial lumbar punctures
 C. HAART for 2 weeks followed by amphotericin B plus fluconazole, serial lumbar punctures.
 D. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures; then fluconazole. HAART initiation after 5 weeks
 E. HAART for 5 weeks; serial lumbar punctures. Initiation of amphotericin B plus fluconazole after 5 weeks.
49. A 40 year old alcoholic goes to bed and wakes up in the morning with a wrist drop. The MOST likely nerve injury is?
- A. Radial nerve
 B. Ulnar nerve
 C. Musculocutaneous nerve
 D. Median nerve
 E. Axillary nerve
50. A 28 year old man presents with pain and swelling of his left leg 3 days after a thorn prick. Which one of the following antibiotics is the BEST empiric choice?
- A. Ciprofloxacin
 B. Clarithromycin
 C. Metronidazole
 D. Amoxicillin - clavulanic acid
 E. Nitrofurantoin
51. All of the following statements are true regarding gout EXCEPT:-
- A. The 1st metatarsal - phalangeal joint is commonly involved
 B. Renal failure is a known complication
 C. It can present with extra-articular manifestations
 D. It is common in pre-menopausal women
 E. It results from monourate sodium deposition

52. Which one of the following is TRUE regarding chronic myeloid leukemia (CML)?
- A. It is almost exclusively a disease of children
 - B. Leucocyte alkaline phosphatase (LAP) score is reduced
 - C. Lymphadenopathy is common in the stable state
 - D. Autosplenectomy occurs ✓
 - E. Spontaneous fractures tend to occur
53. Which one of the following conditions is associated with dilutional hyponatraemia?
- A. Congestive heart failure
 - B. Acute tubular necrosis
 - C. Gastroenteritis ✓
 - D. Hypothyroidism
 - E. Hypercholesterolaemia
54. A 36 year old man with longstanding bronchial asthma has been on prednisolone 30mg/day for several years. Now he has cushingoid features. The other findings expected in this patient include all of the following EXCEPT:-
- A. Systemic hypertension
 - B. Bone pains
 - C. ✓ Normal libido
 - D. Agitated behaviour
 - E. Raised intra-ocular pressures
55. All of the following are danger signs in status asthmaticus EXCEPT:-
- A. ✓ Pulse rate of 115 beats/min
 - B. ✓ Inability to complete sentences
 - C. ✓ Respiratory rate of 36 breaths/min
 - D. ✗ Inability to perform peak flow measurements [250]
 - E. ✓ Blood pressure of 90/60 mm Hg
- Handwritten notes for Q55:
 → silent chest
 → resp effort
 → abnormal ↓ BP
 > 25 bpm
 BP 90/60 mmHg
56. All of the following pharmacotherapies have been shown to prolong survival in patients with non-valvular heart failure EXCEPT:-
- A. Spironolactone
 - B. Carvedilol β-blocker
 - C. Angiotensin converting enzyme inhibitors (ACE I)
 - D. Angiotensin receptor blockers (ARB)
 - E. Loop diuretics
57. A 35 year old man presents with heartburn and a feeling of regurgitation after meals. He frequently clears his throat while talking. Upper gastrointestinal tract (GIT) endoscopy is reported as normal. This condition is associated with all of the following features EXCEPT:-
- A. Poor quality of life
 - B. Increased incidence of malignancy
 - C. Barrett's oesophagus
 - D. Recurrent bronchospasm
 - E. Increased incidence of *Helicobacter pylori*

58. A 15 year old boy presents with insidious onset of pruritic eruption on the interdigital clefts, flexor aspects on the wrists and gluteal cleft. The lesions comprise of papules, vesicles, pustules and burrows. The MOST likely diagnosis is:-
- Larval migrans
 - Papular urticaria
 - Urticaria pigmentosa
 - Scabies
 - Dermatitis herpetiformis
59. A 34 year old HIV positive man presents with a 3 week history of severe headaches and photophobia. His CD₄ count is 36 cells / μ l. He further reports that 2 months back, he had similar headaches, was admitted and given 2 weeks of amphotericin B for confirmed "fungal meningitis". He did not go for follow-up after discharge. What is the MOST useful test to confirm the diagnosis now?
- Cerebrospinal (CSF) cryptococcal antigen (CRAG) test
 - Serum CRAG test
 - India ink in CSF
 - CSF fungal culture
 - CSF protein level
60. A 30 year old woman presents with a 2 week history of progressive weakness. She has found it difficult to rise from a sitting position and comb her hair. Examination reveals normal deep tendon reflexes and sensory modalities. All of the following statements are true regarding her illness EXCEPT:-
- It responds to steroids
 - It is associated with elevated muscle enzymes
 - It is associated with acetylcholine receptor antibodies
 - It is associated with malignancies
 - Dysphagia occurs
61. A 60 year old man presents with a 1 day history of headache, fever and neck stiffness. Which one of the following organisms is NOT likely to cause this presentation?
- Streptococcus pneumoniae*
 - Group A β -hemolytic *Streptococcus*
 - Haemophilus influenzae*
 - Neisseria meningitidis*
 - Listeria monocytogenes*
62. All of the following indicators are useful in evaluating the success of treatment of rheumatoid arthritis EXCEPT:-
- Tender joint count
 - Swollen joint count
 - Markers of inflammation
 - Number of deformed joints
 - Functional status of the patient

63. Steroid therapy is indicated in the following oncological emergencies EXCEPT:-
- Superior vena cava obstruction
 - Hypercalcemia
 - Severe neutropenic sepsis
 - Raised intracranial pressure
 - Spinal cord compression
64. A 35 year old man presents with nausea, vomiting and general malaise. He has been hypertensive for 5 years. Laboratory tests show:-
- Urinalysis – protein 3+, RBCs 2+, granular casts
 - Haemoglobin 9.3g/dl, MCV 80fl WBC $6 \times 10^9/L$, platelets $119 \times 10^9/L$
 - Serum K^+ 5.4 mmol/L, Na^+ - 128 mmol/L urea 28mmol/L creatinine 837umol/L
 - Renal ultrasound – bilateral contracted kidneys Right = 6.2 x 3.8 cm, Left = 6.32 x 3.3 cm
- Which of the following statements is TRUE?
- This is acute kidney injury secondary to volume depletion
 - This is acute glomerulonephritis
 - Renal biopsy should be performed
 - Patient requires longterm dialysis
 - Patient has hypertensive glomerulosclerosis
65. All of the following are rational combinations of oral glucose lowering medications EXCEPT:-
- Metformin/Acarbose/Glimepiride
 - Metformin/Repaglinide/Linagliptin
 - Metformin/Insulin
 - Chlorpropamide/Insulin
 - Metformin/Linagliptin/Insulin
66. ✓ A 60 year old male has a 20 pack-year history of cigarette smoking. He presents with a productive cough and shortness of breath especially on cold days and associated chest tightness and wheezing. The MOST likely diagnosis is:-
- Asthma
 - Chronic obstructive pulmonary disease (COPD)
 - Heart failure
 - Anxiety attack
 - Pneumonia
67. An elderly female who is being nursed in hospital for dense hemiplegia from a cerebrovascular accident is suddenly diaphoretic and dyspnoeic. On examination, she is cold, sweaty and tachypnoeic. Her radial pulse is weak and feeble. The electrocardiogram (ECG) is significant only for sinus tachycardia. All of the following investigations are useful in establishing the diagnosis EXCEPT:-
- Cardiac troponin assay
 - D-dimer assay
 - Computerized tomography (CT)-pulmonary angiography
 - Blood sugar analysis
 - Chest radiograph

68. All of the following statements regarding irritable bowel syndrome (IBS) are true EXCEPT:-
- A. Presents with increased loose watery stools
 - B. Diarrhoea often occurs at night
 - C. The stool never contains blood
 - D. Constipation is sometimes the predominant symptom
 - E. Abdominal pain is often relieved by defecation
69. AIDS-defining mucocutaneous disorders include all of the following EXCEPT:-
- A. Oesophageal candidiasis
 - B. Kaposi's sarcoma
 - C. Cutaneous cryptococcosis
 - D. *Herpes simplex* ulcers
 - E. Pyoderma gangrenosum
70. A 26 year old woman presents with a 2 week history of change in speech and a tongue that deviates to the right side on protrusion. Which cranial nerve is involved?
- A. Right glossopharyngeal
 - B. Left glossopharyngeal
 - C. Right hypoglossal
 - D. Left hypoglossal
 - E. Left vagus
71. A 26 year old woman presents with history of chronic cough. She reports that she was on treatment for tuberculosis which she stopped 3 weeks prior after having taken it for 25 days. Which one of the following is NOT appropriate in the approach to her management?
- A. Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide and ethambutol
 - B. Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide, ethambutol and streptomycin
 - C. Send sputum for acid fast bacilli staining
 - D. Send sputum for genexpert MTB/RIF
 - E. Apply directly observed therapy
72. A 13 year old boy presents with a 2 day history of fever, right knee pain and swelling. There were no precipitants to this illness. Which one of the following statements is TRUE regarding this condition?
- A. Intra-articular steroids are useful in the management
 - B. Analgesia, oral antibiotics and bedrest is the gold standard in the management
 - C. Antibiotics should be withheld until results of the gram stain are obtained
 - D. Intra-articular antibiotics are useful
 - E. Needle aspiration and drainage of the joint is warranted

73. A middle-aged man is reviewed in the outpatient clinic with complaints of abdominal swelling for several weeks. Physical examination reveals splenomegaly extending 10 cm below the costal margin. All of the following are likely causes EXCEPT:-
- A. Chronic myeloid leukemia
 - B. Miliary tuberculosis
 - C. Myelofibrosis
 - D. Visceral leishmaniasis
 - E. Hyper-reactive malarial splenomegaly (HMS)
74. - Which one of the following statements is TRUE concerning urinary tract infections?
- A. *Staphylococcus aureus* is the commonest organism among sicklers
 - B. *Proteus spp.* infection is associated with calculi
 - C. Treatment of *Candida* infections predisposes one to bacterial infections
 - D. Haematogenous route of infection is the commonest origin
 - E. In men, infections are usually associated with sexual intercourse
75. All of the following are established risk factors for diabetic foot ulcer disease EXCEPT:-
- A. Diabetic cardiomyopathy
 - B. Chronic kidney disease stage 3 and higher
 - C. Macular eye disease
 - D. Peripheral neuropathy
 - E. Claw-toe deformity
76. Which one of the following is NOT a recognized risk factor for the development of deep venous thrombosis?
- A. Hormonal contraceptive therapy
 - B. Protein C deficiency
 - C. Heart failure
 - D. Anti-phospholipid syndrome
 - E. Hypertension
77. Which of the following is NOT a cause of constipation?
- A. Hypocalcemia
 - B. Hypothyroidism
 - C. Aluminium containing antacids
 - D. Cerebrovascular accidents
 - E. Atorvastatin
78. All of the following are risk factors for haemorrhagic stroke EXCEPT:-
- A. Cocaine use
 - B. Cigarette smoking
 - C. Amyloid angiopathy
 - D. Aneurysm
 - E. Warfarin use

79. A tourist suffered a bout of watery diarrhoea which became mucoid and blood stained. He had fever and developed severe joint pains a few weeks later. Rheumatoid factor was negative. All of the following statements are true regarding the disease EXCEPT:-
- A. *Shigella flexneri* is the causative organism
 - B. There is high circulating bacterial antigen
 - C. Culture of *Neisseria gonorrhoea* will be obtained from joint aspirate
 - D. It is associated with HLA B27 genotype
 - E. It is associated with serum leucocytosis
80. A 45 year old woman with a diagnosis of rheumatoid arthritis has been on methotrexate and prednisone for 2 years. Which one of the following complications is NOT likely to be due to her chronic steroid use?
- A. Cataract formation
 - B. Peptic ulcer disease
 - C. Diabetes mellitus
 - D. Liver disease
 - E. Hypertension
81. A strict vegetarian presents with general malaise, exertional dyspnoea and pallor. Peripheral blood film shows segmented neutrophils and the mean corpuscular volume (MCV) is 110fl. Which one of the following statements is TRUE?
- A. Gum hypertrophy occurs
 - B. Serum ferritin levels are low
 - C. Bone marrow Prussian blue stain is negative
 - D. Paraesthesias are common
 - E. Condition is invariably fatal
82. A 30 year old man has just been diagnosed with HIV. He presents to the clinic with complaints of unintentional weight loss despite a good appetite. His initial weight was 70Kg. He has lost 8 Kg over the past 3 months. Physical exam reveals generalized lymphadenopathy. What is his current WHO stage?
- A. Stage 0
 - B. Stage 1
 - C. Stage 2
 - D. Stage 3
 - E. Stage 4
83. A 28 year old woman presents with goitre. Thyroid profile showed TSH = 0.000m IU/L, FT4 = 30ng/L, FT3 = 12 pmoL/L. Ultrasound showed a thyroid nodule in the right lobe, the rest had normal echodensity. Which of the following treatments is LEAST appropriate for her?
- A. Propranolol
 - B. Propylthiouracil
 - C. Lugol's iodine
 - D. Methylprednisolone
 - E. Surgery

84. Which of the following conditions is NOT a recognized cause of cardiogenic syncope?
- A. Pulmonary embolism
 - B. Ventricular fibrillation
 - C. Postural hypotension
 - D. First degree heart block
 - E. Third degree heart block
85. A 45 year old man with liver cirrhosis and bleeding tendencies and an otherwise normal blood count comes to you for management. Which of the following is the MOST appropriate therapy?
- A. Tranexamic acid
 - B. Platelet infusion
 - C. Whole blood transfusion
 - D. Transfusion of packed cells
 - E. Vitamin K
86. Which of the following drugs is LEAST useful in myoclonic epilepsy?
- A. Ethosuximide
 - B. Carbamazepine
 - C. Sodium valproate
 - D. Clonazepam
 - E. Lamotrigine
87. Modifiable risk factors for osteoarthritis include all of the following EXCEPT:-
- A. Age
 - B. Race
 - C. Female gender
 - D. Obesity
 - E. Prior inflammatory joint disease
88. Which one of the following is NOT a risk factor for hepatocellular carcinoma?
- A. Heavy alcohol consumption
 - B. Exposure to aflatoxins
 - C. Hepatitis A virus
 - D. Hepatitis B virus
 - E. Hepatitis C virus
89. Which one of the following statements is TRUE regarding diabetic nephropathy?
- A. Stage 2 is characterized by microalbuminuria
 - B. Hyperfiltration is only evident in late stages
 - C. The microalbuminuria stage is potentially reversible
 - D. Microalbuminuria precedes the glomerular structural changes
 - E. Stage 4 patients need to be started on dialysis

90. All of the following are evidence – based therapeutic lifestyle changes in the control of systemic arterial hypertension EXCEPT:-
- A. Moderation of alcohol ingestion
 - B. Reduced dietary salt ingestion
 - C. Lower dietary potassium intake
 - D. Stress management
 - E. Regular aerobic exercise
91. A 30 year old pregnant woman is found to be hepatitis B surface antigen (HBs Ag) positive. She is concerned about transmitting the virus to her unborn infant. Which of the following factors is MOST useful in determining the risk of transmission?
- A. Hepatitis B e antigen (HBeAg) status
 - B. Hepatitis B core immunoglobulin G (HBcIgG) status
 - C. Alanine aminotransferase (ALT) 23IU/L
 - D. Her alcohol history
 - E. Aspartate aminotransferase (AST)/ALT ratio >2
92. A 38 year old woman presents with a 1 month history of bilateral numbness of the lower limbs. Examination is notable for reduced vibration sense and reduced ankle reflexes. All of the following tests are useful in this patient EXCEPT:-
- A. Serum sodium
 - B. Serum creatinine
 - C. Thyroid stimulating hormone
 - D. Glycosylated haemoglobin
 - E. Haemoglobin level
93. A 25 year old woman presents with gradual skin tightening involving the hands and face. She also has first degree heart block on the ECG and reflux oesophagitis. Which one of the following statements is TRUE regarding this condition?
- A. It is commoner in males compared to females
 - B. It is easily amenable to treatment
 - C. Raynaud's phenomenon is an invariable feature
 - D. It has no renal manifestations
 - E. It is usually an indolent disease
94. A 16 year old girl has bilateral haemarthrosis of elbow joints. She has a fluctuant right knee that is tender. She is bleed from a venepuncture site for the past 24 hours. Which one of the following is the MOST likely diagnosis?
- A. Classical hemophilia
 - B. Christmas disease
 - C. Von Willebrand's disease
 - D. Disseminated intravascular coagulopathy (DIC)
 - E. Protein C deficiency
95. All of the following are features of minimal change glomerulonephritis EXCEPT:-
- A. Heavy proteinuria
 - B. Hypertension
 - C. Corticosteroid responsiveness
 - D. Lack of active sediment in urine
 - E. Hypercholesterolemia

96. A 20 year old woman presents with a history of sudden onset of confusion. This is followed by a severe episode of generalized tonic-clonic seizure. Before the onset of the seizure, she had reported a funny smell. Examination reveals a temperature of 38°C , confusional state with no evidence of meningeal irritation. Which of the following would be the MOST effective treatment in this condition?
- A. Acyclovir
 - B. Gancyclovir
 - C. Anti-tuberculous treatment
 - D. High dose steroids
 - E. Ceftriaxone with vancomycin
97. Low voltages on a 12-lead ECG occur in all the following conditions EXCEPT:-
- A. Amyloid heart
 - B. Chronic obstructive pulmonary disease (COPD)
 - C. Pericarditis
 - D. Obesity
 - E. Pericardial effusion
98. A 22 year old man presents with a 6-month history of left upper quadrant discomfort and early satiety. 2 days prior to presentation, he developed priapism. Abdominal exam revealed splenomegaly 12 cm below left costal margin. White blood cell count (WBC) is $279 \times 10^9/\text{L}$, haemoglobin is 9.4 g/dL and platelets $702 \times 10^9/\text{L}$. What is the MOST appropriate next investigation to confirm the diagnosis?
- A. Abdominal ultrasound scan
 - B. Erythropoietin level
 - C. Haemoglobin electrophoresis
 - D. Bone marrow evaluation
 - E. Peripheral blood film
99. Which one of the following statements is TRUE regarding ascites in liver disease?
- A. Thiazides are the diuretics of choice
 - B. Malignant ascites responds well to diuretic therapy
 - C. Portal hypertension is a rare cause ✓
 - D. Aldosterone antagonists are the preferred diuretics ✓
 - E. Infectious aetiology is uncommon ✓
100. A 20 year old woman at 20 weeks gestation presents to the emergency department with dyspnoea class III. On examination, she has a regular pulse rate of 90 beats/min, a non-displaced apex with apical mid-diastolic rumbling murmur with loud first heart sound. Which of the following is the MOST appropriate emergency therapeutic intervention?
- A. Furosemide therapy
 - B. Termination of pregnancy
 - C. Digoxin therapy
 - D. Angiotensin converting enzyme inhibitor (ACEI) therapy
 - E. Beta blocker therapy

FOURTH YEAR 2013 MCQ

1. A patient presents with oral lesions for 1 month. He has flaccid vesicles and bullae on the trunk and limbs. Nikolsky sign is positive. The MOST likely diagnosis is:-

- Erythema multiforme major
- Mucous membrane pemphigoid
- Bullous pemphigoid
- Pemphigus foliaceus
- Pemphigus vulgaris

12. A 25 year old man with history of HIV disease presents with a history of chronic headache. Neurological examination is normal. CT scan reveals a contrast enhancing ring lesion on the left parietal lobe. The MOST appropriate approach would be:-

- Biopsy the lesion
- Start patient on steroids
- Start patient on empirical antibiotics
- Start patient on empirical anti-toxoplasmosis treatment
- Start patient on intravenous acyclovir

1. The following are the results of cerebrospinal fluid (CSF) obtained from a 40 year old man with meningitis

- Protein 100mg/l
- Glucose 1mmol/l
- White cell count 2000 cells/ μ l, predominantly lymphocytes
- Gram stain negative

These findings are compatible with:-

- Pyogenic meningitis
- Viral meningitis
- Tuberculous meningitis
- Sarcoidosis
- Cryptococcal meningitis

14. Which one of the following is the MOST important attribute necessary for a screening test?

- Sensitivity
- Specificity
- Positive predictive value (PPV)
- Negative predictive value (NPV)
- Receiver-operator curve (ROC)

15. All of the following statements regarding *Plasmodium falciparum* are true EXCEPT-

- It causes more severe disease in pregnancy
- It is associated with recurrent relapses after effective initial treatment
- It is the only malarial parasite causing greater than 20% parasitaemia
- Infection is associated with thrombocytopenia
- It is the only cause of cerebral malaria

6. In a patient with anaerach, 24-hour albumin excretion of 8g and normal glomerular filtration (GFR), the following complications are expected EXCEPT-

- Hypercoagulability
- Metastatic calcification
- Allosterosis
- Susceptibility to infections
- Hypouricemia

7. A 60 year old man presents to his doctor for a medical check. He is found to have a random blood sugar (RBS) of 7mmol/L. An oral glucose tolerance test (OGTT) done showed fasting blood glucose of 6.2 mmol/L, 2 hour post glucose load of 14.4 mmol/L. Which of the following statements is TRUE regarding his patient?

- He has diabetes mellitus
- He has impaired glucose tolerance
- He has metabolic syndrome
- He should have fasting lipid assay to determine the diagnosis
- Another OGTT should be done in 6 months to determine his diagnostic status

8. A 22 year old man presents to the emergency department with a 3 day history of fever, cough and pleuritic chest pain. His temperature is 39°C, pulse rate is 110 beats/min and respiratory rate is 26 beats/min. Chest radiograph reveals an opacity in the right lower lung zone. Which of the following is the MOST common cause of the condition?

- Candida albicans*
- Pseudomonas aeruginosa*
- Adycephlamni pneumoniae*
- Staphylococcus aureus*
- Streptococcus pneumoniae*

9. A 12 year old boy develops migratory joint pain involving large joints 2 weeks after a sore throat. He has a tachycardia of 110 beats/min, and a systolic murmur at the apex. Which of the following statements is TRUE concerning his clinical presentation?

- The micro-organism causing the sore throat is likely to be *Streptococcus aureus*
- Blood cultures usually yield the offending organism
- The heart involvement is usually pancarditis
- Erythema nodosum is expected
- Shortened PR interval is found on the electrocardiogram (ECG)

10. A 20 year old man presents with 3 months history of bloody mucoid diarrhea. Colonoscopy shows diffuse erythema and ulcerations in the entire colon and patchy ulceration in the terminal ileum. The MOST likely diagnosis is:-

- Ulcerative colitis
- Crohn's disease
- Amoebic colitis
- Shigellosis
- Tuberculous enteritis

21. All of the following auscultatory findings are expected in mitral stenosis EXCEPT:
- A. Mid-diastolic murmur
 - B. Soft first heart sound
 - C. Presystolic-murmur accentuation
 - D. Opening snap
 - E. Loud second heart sound
22. A patient presents with massive haematemesis for 1 day. Endoscopy reveals acutely bleeding oesophageal varices. All of the following treatments would be recommended EXCEPT:
- A. Sclerotherapy
 - B. Propranolol infusion
 - C. Octreotide infusion
 - D. Nasogastric tube insertion
 - E. Band ligation
23. A 25 year old woman presents with erosion, weeping and crusted lesions on 30% body surface area. The plan of management should include all of the following EXCEPT:
- A. Septic screen
 - B. Saline soaks
 - C. Infection control
 - D. Keep warm
 - E. Emollients
24. A 58 year old man with HIV develops a vesicular eruption along the left side of the ribcage. The eruption is preceded by days of tingling and burning sensation. Which one of the statements is TRUE regarding the condition?
- A. Corticosteroids should be started immediately
 - B. Early acyclovir reduces the duration of symptoms
 - C. Previous *Herpes simplex* virus infection is associated with this presentation
 - D. Disappearance of the rash is associated with disappearance of symptoms in all the patients
 - E. Acyclovir has no role in the management of this condition
25. A 50 year old man presents with history of wasting of the small muscles of the hand associated with dysphagia and dysphagia. Examination reveals spastic immobile tongue, wasted muscles of the hands with increased deep tendon reflexes. All of the following statements are true regarding the condition EXCEPT:
- A. Autosomal dominant inheritance
 - B. Cause of death is usually respiratory
 - C. Is associated with myasthenia
 - D. Sphincter involvement is a late complication
 - E. Sphincter involvement is a late complication

16. All of the following are diagnostic criteria for polymyositis EXCEPT:
- A. Elevated creatine kinase
 - B. Proximal muscle weakness
 - C. Myopathic electromyogram (EMG)
 - D. Typical changes on muscle biopsy
 - E. Heliotropic rash
17. A 13 year old boy presents with long-standing mild jaundice, moderate pallor and moderate splenomegaly. The MOST likely diagnosis is:-
- A. Sickle cell anaemia
 - B. Non-todogkin & lymphoma
 - C. Phthalassaemia
 - D. Chronic myeloid leukaemia
 - E. Myelofibrosis
18. A 56 year old man presents with severe low back pain, lumbar spine tenderness and general illhealth. He has pallor and mild ankle oedema. Investigations show haemoglobin 9g/dl, MCV 80fl, ESR 110mm/hr serum albumin 30g/l, total protein 130g/l. Xrays show compression fracture L3 to L5 and osteolytic lesions in the pelvic bones. Common causes of renal failure in this condition include all the following EXCEPT:
- A. Nephrogenic bladder
 - B. Hypercalcaemia
 - C. Hyponatraemia
 - D. Proteinuria
 - E. Hyperepranathryolism
19. A 28 year old woman is followed up for thyrotoxicosis. She is on antithyroid medication. Which one of the following clinical parameters will closely reflect her thyroid hormone status?
- A. Emotional variability (moods)
 - B. Menstrual patterns
 - C. Palpitations
 - D. Sleep patterns
 - E. Weight
20. All of the following interventions are beneficial in the management of patients with chronic obstructive airway disease (COAD) EXCEPT:
- A. Pneumococcal vaccination
 - B. Cessation of smoking
 - C. Short acting bronchodilators
 - D. Inhaled anticholinergics
 - E. High tension oxygen therapy

32. All of the following findings are compatible with a diagnosis of *Pneumocystis jirovecii* pneumonia EXCEPT:-
- ↑ Elevated white blood cell count
 - Low CD4 count
 - ↑ Elevated lactate dehydrogenase(LDH) in blood
 - Marked hypoxia on arterial blood gas analysis
 - Barrettly appearance on chest radiograph
33. A 65 year old man complains of palpitations. ECG shows irregular QRS complexes with absent P-waves. The diagnosis is :-
- Atrial flutter
 - Atrial ectopics
 - Atrial fibrillation
 - Heart block
 - Ventricular fibrillation.
34. A 25 year old man is diagnosed with chronic hepatitis B infection. He has high hepatitis B virus (HBV) DNA at 100 million IU/ml. All of the following investigations would be required before initiation of treatment EXCEPT:-
- Liver function tests (LFT)
 - Hepatitis B e antigen (HBeAg) test
 - Hepatitis B core antigen (HBcAg) test
 - Hepatitis C virus screen
 - Thyroid function tests (TFTs)
35. A 30 year old man presents with scaly papules and plaques. The differential diagnoses include all the following EXCEPT:-
- Lichen planus
 - Psoriasis vulgaris
 - Discoid dermatitis
 - Pityriasis rosea
 - Morphea
36. A HIV positive woman has generalized cervical lymphadenopathy. Fine needle aspiration (FNA) cytology confirms tuberculous aetiology. Her CD4 count is 60 cells/ μ l. She is started on antituberculous treatment and HAART simultaneously. 4 weeks later she develops fever and increasing enlargement of the lymph nodes. Which one of the following would be the CORRECT approach to her management?
- Stop the anti-tuberculous therapy
 - Stop the anti-retroviral therapy
 - Start on prednisone immediately
 - Add a broad spectrum antibiotic
 - Give an antipyretic and continue therapy

26. You notice in the locker room one of your colleagues injecting himself with insulin. What would be your MOST appropriate actions?
- Report to the supervisor
 - Counsel your colleague yourself
 - Pretext you did not see him
 - Ask your senior colleague to talk to him
 - Report him to the director of the hospital
27. A 28 year old man presents with painful micturition and a purulent urethral discharge for 2 days. Which one of the following is NOT an appropriate drug for his treatment?
- Ciprofloxacin
 - Ceftriaxone
 - Amoxycillin
 - Azithromycin
 - Doxycycline
28. Which one of the following is NOT a feature of fibromyalgia?
- Anxiety
 - Fatigue
 - Irritable bowel syndrome (IBS)
 - Scleritis
 - Sleep disturbance
29. A 30 year old man presents with general body weakness. Physical examination reveals pallor and koilonychia. Which one of the following is the MOST likely positive laboratory finding?
- Presence of *Taenia saginata* ova in his stool
 - Increased faecal stercofaelinogen
 - Reticulocyte volume (MCV) of 59fl
 - Reduced total iron binding capacity (TIBC)
30. Which one of the following renal disease is well matched to renal imaging findings?
- Chronic glomerulonephritis - bilateral contracted echogenic kidneys
 - Obstructive uropathy - echogenic kidneys
 - Chronic pyelonephritis - enlarged globular kidney
 - HIV nephropathy - bilateral small scarred kidneys
 - Acute tubular necrosis - dilated calyces.
31. The metabolic syndrome is defined by the presence of all the following characteristics EXCEPT:-
- Abdominal obesity
 - Hypertension
 - High high-density lipoprotein(HDL) - cholesterol
 - Hypertriglyceridemia
 - Impaired glucose tolerance

42. Which one of the following disease process is well matched with the renal manifestation?

- A. Syphilis – obstructive uropathy
- B. ~~C.~~ *Plasmodium malariae* infection – nephritic syndrome
- C. Systemic lupus erythematosus – acute tubular necrosis
- D. ~~E.~~ *Schistosoma haematobium* infection – Fanconi syndrome
- E. Rheumatoid arthritis – acute glomerulonephritis

43. A 46 year old man with diabetes presents with right foot ulceration without gangrene. It is septic with malodorous smell. 10^6 10^8 is 8.5% dorsalis pedis pulses are good. *Staphylococcus aureus* and *Klebsiella sp.* have been isolated from the wound swab. The following actions are appropriate EXCEPT:-

- A. Daily hydrogen peroxide soaks
- B. ~~C.~~ Intravenous antibiotics
- C. Daily saline soaks
- D. Platelet – derived growth factor dressing
- E. Insulin therapy

44. A 65 year old man with 25 pack years of smoking presents with cough, weight loss and breathlessness. A chest radiograph shows a right apical homogeneous round opacity. All of the following findings are known to be associated with this presentation EXCEPT:-

- A. Hypertrophy/enlargement of the palms
- B. ~~C.~~ Radicular pain to the right hand
- C. Hypocalcaemia
- D. Hoarseness of the voice
- E. Haemoptysis

45. A patient presenting with non-ST elevation acute coronary syndrome will benefit from all of the following therapeutic interventions EXCEPT:-

- A. Thrombolysis
- B. ~~C.~~ Combined elonidrogel and aspirin therapy
- C. Ixabiparin therapy
- D. Beta-blocker therapy
- E. Nitrate

46. A 70 year old man presents with generalized pruritis and weight loss. Clinical examination reveals green jaundice and a palpable non-tender gall bladder. Which of the conditions listed below is the MOST likely diagnosis?

- A. ~~B.~~ Acute cholecystitis
- B. Cholelithiasis
- C. Hepatocellular carcinoma
- D. Pancreatic malignancy
- E. Cholangiocarcinoma

37. A 60 year old hypertensive and diabetic man who has previously been well is found in the morning with weakness of the right side. He is rushed to the hospital where he arrives in 1 hour. Computerized tomography (CT) scan of the head reveals an infarct. Which of the following would be the MOST effective treatment?

- A. Aspirin
- B. Clopidogrel
- C. Atorvastatin
- D. ~~E.~~ Intravenous tissue plasminogen activator (tPA)
- E. Dipyridamole

38. Which of the following deficiency is found in patients with terminal ileum disease?

- A. Calcium
- B. Iron
- C. ~~D.~~ Folic acid
- D. Trypophan
- E. Cobalamin

39. A 41 year old man admitted for management of heart failure develops a cough, chest pain and fever after 1 week in the hospital. Which one of the following antibiotics is the BEST empiric choice?

- A. Amoxicillin – clavulanic acid
- B. ~~C.~~ Clarithromycin
- C. Cefazidime
- D. Cefuroxime
- E. Flucloxacillin

40. A 43 year old man presents with 8 week history of symmetrical joint pain and swelling involving the metacarpal-phalangeal (MCP) metatarsal – phalangeal (MTP) and proximal interphalangeal (PIP) joints. Symptoms are worse in the morning and last for 1 hour. Which one of the following statements is TRUE of this condition?

- A. ~~B.~~ Non-steroidal anti-inflammatory drugs (NSAIDs) are the first line of therapy
- B. Extra-articular manifestations is not a feature
- C. Radiological investigation is required for the diagnosis
- D. Disease modifying therapy should be instituted immediately
- E. Biologic agents have no role in its management

41. In a 60 year old man with multiple myeloma and a fracture of the right femur, which one of the following is the MOST appropriate approach to management?

- A. ~~B.~~ Start melphalan and radiotherapy
- B. Start melphalan then refer for bone marrow transplantation
- C. Start analgesics, internally fix the fracture then administer radiotherapy
- D. Administer radiotherapy then internally fix the fracture
- E. Start pamidronate then internally fix the fracture

52. Which one of the following is TRUE regarding chronic myeloid leukaemia (CML)?
- A. It is almost exclusively a disease of children
 - B. Leucocyte alkaline phosphatase (LAP) score is reduced
 - C. Lymphadenopathy is common in the stable state
 - D. Autosplenectomy occurs
 - E. Spontaneous fractures tend to occur
53. Which one of the following conditions is associated with dilational hypotonia?
- A. Congestive heart failure
 - B. Acute tubular necrosis
 - C. Gastroenteritis
 - D. Hypothyroidism
 - E. Hypercholesterolaemia
54. A 36 year old man with longstanding bronchial asthma has been on prednisolone 30mg/day for several years. Now he has striking features. The other findings expected in this patient include all of the following EXCEPT:-
- A. Systemic hypertension
 - B. Bone pains
 - C. Normal fibro
 - D. Agitated behaviour
 - E. Raised intra-ocular pressures
55. All of the following are danger signs in status asthmaticus EXCEPT:-
- A. pulse rate of 115 beats/min
 - B. inability to complete sentences
 - C. Respiratory rate of 36 breaths/min
 - D. inability to perform peak flow measurements
 - E. Blood pressure of 90/60 mm Hg
6. All of the following pharmacotherapies have been shown to prolong survival in patients with non-valvular heart failure EXCEPT:-
- A. Spironolactone
 - B. Carvedilol
 - C. Angiotensin converting enzyme inhibitors (ACEI)
 - D. Angiotensin receptor blockers (ARB)
 - E. Loop diuretics
7. A 35 year old man presents with heartburn and a feeling of regurgitation after meals. He frequently clears his throat while talking. Upper gastrointestinal tract (GIT) endoscopy is reported as normal. This condition is associated with all of the following features EXCEPT:-
- A. Poor quality of life
 - B. Increased incidence of malignancy
 - C. Barrett's oesophagus
 - D. Recurrent bronchospasm
 - E. Increased incidence of *Helicobacter pylori*

47. A 20 year old patient presents with pruritic lesions on the neck, antecubital and popliteal fossae since 2 year of age. The lesions are lichenified, excoriated and crusted patches. The MOST likely diagnosis is:-
- A. Atopic dermatitis
 - B. Seborrhoeic dermatitis
 - C. Allergic contact dermatitis
 - D. Nummular dermatitis
 - E. Dyshidrotic dermatitis
48. In a HIV positive patient with cryptococcal meningitis and CD4 count of 40 cells/ μ l, which one of the following approaches would be the MOST appropriate?
- A. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures and IIAART initiation at 2 weeks
 - B. IIAART and amphotericin B plus fluconazole initiation simultaneously, serial lumbar punctures
 - C. IIAART for 2 weeks followed by amphotericin B plus fluconazole, serial lumbar punctures.
 - D. Amphotericin B plus fluconazole for 2 weeks, serial lumbar punctures; then fluconazole IIAART initiation after 5 weeks
 - E. IIAART for 5 weeks, serial lumbar punctures. Initiation of amphotericin B plus fluconazole after 5 weeks.
49. A 40 year old alcoholic goes to bed and wakes up in the morning with a wrist drop. The MOST likely nerve injury is?
- A. Radial nerve
 - B. Ulnar nerve
 - C. Musculocutaneous nerve
 - D. Median nerve
 - E. Axillary nerve
50. A 28 year old man presents with pain and swelling of his left leg 3 days after a floor prick. Which one of the following antibiotics is the BEST empiric choice?
- A. Ciprofloxacin
 - B. Clarithromycin
 - C. Metronidazole
 - D. Amoxicillin - clavulanic acid
 - E. Nitrofurantoin
51. All of the following statements are true regarding gout EXCEPT:-
- A. The 1st metatarsal-phalangeal joint is commonly involved
 - B. Renal failure is a known complication
 - C. It can present with extra-articular manifestations
 - D. It is common in pre-menopausal women
 - E. It results from monosodium sodium deposition

63. Steroid therapy is indicated in the following oncological emergencies EXCEPT-
- Superior vena cava obstruction
 - Hypercalcemia
 - Severe neutropenic sepsis
 - Raised intracranial pressure
 - Spinal cord compression
64. A 35 year old man presents with nausea, vomiting and general malaise. He has been hypertensive for 5 years. Laboratory tests show:-
- Urinalysis – protein 3+, RBCs 2+, granular casts
 - Haemoglobin 9.3g/dl, MCV 80fl, WBC 6x10⁹/L, platelets 119x10⁹/L
 - Serum K⁺ 5.4 mmol/L, Na⁺ - 128 mmol/L, urea 28mmol/L, creatinine 837umol/L
- Renal ultrasound – bilateral contracted kidneys Right = 6.2 x 3.8 cm, Left = 6.32 x 3.3 cm
- Which of the following statements is TRUE?
- This is acute kidney injury secondary to volume depletion
 - This is acute glomerulonephritis
 - Renal biopsy should be performed
 - Patient requires hempern dialysis
 - Patient has hypertensive glomerulosclerosis
65. All of the following are rational combinations of oral glucose lowering medications EXCEPT-
- Metformin/Acetohexose/Glimepiride
 - Metformin/Gepaglinide/Moglitopin
 - Metformin/insulin
 - Chlorpropamide/Insulin
 - Metformin/Linagliptin/Insulin
66. A 60 year old male has a 20 pack-year history of cigarette smoking. He presents with a productive cough and shortness of breath especially on cold days and associated chest tightness and wheezing. The MOST likely diagnosis is:-
- Asthma
 - Chronic obstructive pulmonary disease (COPD)
 - Heart failure
 - Anxiety attack
 - Pneumonia
67. An elderly female who is being nursed in hospital for dense hemiplegia from a cerebrovascular accident is suddenly diaphoretic and dyspnoeic. On examination, she is cold, sweaty and tachypnoeic. Her radial pulse is weak and feeble. The electrocardiogram (ECG) is significant only for sinus tachycardia. All of the following investigations are useful in establishing the diagnosis EXCEPT-
- Cardiac topoinin assay
 - D-dimer assay
 - Computerized tomography (CT)-pulmonary angiography
 - Blood sugar analysis
 - Chest radiograph

58. A 15 year old boy presents with insidious onset of pruritic eruption on the interdigital clefts, flexor aspects on the wrists and glitcheal cleft. The lesions comprise of papules, vesicles, pustules and burrows. The MOS likely diagnosis is:-
- Larval migrans
 - Papular urticaria
 - Urticaria pigmentosa
 - Scabies
 - Dermatitis herpetiformis
59. A 34 year old HIV positive man presents with a 3 week history of severe headaches and photophobia. His CD4 count is 36 cells /uL. He further reports that 2 months back, he had similar headaches, was admitted and given 2 weeks of amphotericin B for confirmed "fungal meningitis". He did not go for follow up after discharge. What is the MOST useful test to confirm the diagnosis now?
- Cerebrospinal (CSF) cryptococcal antigen (CrAg) test
 - Serum CrAg test
 - India ink in CSF
 - CSF fungal culture
 - CSF protein level
60. A 30 year old woman presents with a 2 week history of progressive weight loss. She has found it difficult to rise from a sitting position and comb her hair. Examination reveals normal deep tendon reflexes and sensory modalities. All of the following statements are true regarding her illness EXCEPT-
- It responds to steroids
 - It is associated with elevated muscle enzymes
 - It is associated with acetylcholine receptor antibodies
 - It is associated with malignancies
 - Dysphagia occurs
61. A 60 year old man presents with a 1 day history of headache, fever and neck stiffness. Which one of the following organisms is NOT likely to cause this presentation?
- Streptococcus pneumoniae*
 - Group A β -hemolytic *Streptococcus*
 - Haemophilus influenzae*
 - Neisseria meningitidis*
 - Listeria monocytogenes*
62. All of the following indicators are useful in evaluating the success of treatment of rheumatoid arthritis EXCEPT-
- Tender joint count
 - Swollen joint count
 - Markers of inflammation
 - Number of deformed joints
 - Functional status of the patient

73. A middle-aged man is reviewed in the outpatient clinic with complaints of abdominal swelling for several weeks. Physical examination reveals a hemogram extending 10 cm below the costal margin. All of the following are likely causes EXCEPT.
- Chronic myeloid leukemia
 - Miliary tuberculosis
 - Myelofibrosis
 - Visceral leishmaniasis
 - Hyper-reactive malarial splenomegaly (HMS)
74. Which one of the following statements is TRUE concerning urinary tract infections?
- Staphylococcus aureus* is the commonest organism among stalkers
 - P. aeruginosa* infection is associated with calculi
 - Treatment of *Candida* infections predisposes one to bacterial infections
 - Haematogenous route of infection is the commonest origin
 - In men, infections are usually associated with sexual intercourse
75. All of the following are established risk factors for diabetic foot ulcer disease EXCEPT.
- Diabetic cardiomyopathy
 - Chronic kidney disease stage 3 and higher
 - Macular eye disease
 - Peripheral neuropathy
 - Claw-toe deformity
76. Which one of the following is NOT a recognized risk factor for the development of deep venous thrombosis?
- Hormonal contraceptive therapy
 - Protein C deficiency
 - Heart failure
 - Anti-phospholipid syndrome
 - Hypertension
77. Which of the following is NOT a cause of conjunctivitis?
- Hypocalcaemia
 - Hypothyroidism
 - Aluminium containing antacids
 - Cerebrovascular accidents
 - Atorvastatin
78. All of the following are risk factors for haemorrhagic stroke EXCEPT.
- Cocaine use
 - Cigarette smoking
 - Arteriohypertensive angiopathy
 - Atenolol
 - Warfarin use

68. All of the following statements regarding irritable bowel syndrome (IBS) are true EXCEPT.
- Presents with increased loose watery stools
 - Diarrhoea often occurs at night
 - The stool never contains blood
 - Constipation is sometimes the predominant symptom
 - Abdominal pain is often relieved by defecation
69. AIDS-defining mucocutaneous disorders include all of the following EXCEPT.
- Oesophageal candidiasis
 - Kaposi's sarcoma
 - Cutaneous cryptococcosis
 - Herpes simplex* ulcers
 - Pyoderma gangrenosum*
70. A 26 year old woman presents with a 2 week history of change in speech and a tongue that deviates to the right side on protrusion. Which cranial nerve is involved?
- Right glossopharyngeal
 - Left glossopharyngeal
 - Right hypoglossal
 - Left hypoglossal
 - Left vagus
71. A 26 year old woman presents with history of chronic cough. She reports that she was on treatment for tuberculosis which she stopped 3 weeks prior after having taken it for 25 days. Which one of the following is NOT appropriate in the approach to her management?
- Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide and ethambutol
 - Restart anti-tuberculous treatment with rifampicin, isoniazid, pyrazinamide, ethambutol and streptomycin
 - Send sputum for acid fast bacilli staining
 - Send sputum for geneXpert MTB/RIF
 - Apply directly observed therapy
72. A 13 year old boy presents with a 2 day history of fever, right knee pain and swelling. There were no precipitants to this illness. Which one of the following statements is TRUE regarding this condition?
- Intra-articular steroids are useful in the management
 - Analgesics, oral antibiotics and bedrest is the gold standard in the management
 - Antibiotics should be withheld until results of the gram stain are obtained
 - Intra-articular antibiotics are useful
 - Needle aspiration and drainage of the joint is warranted

34. Which of the following conditions is NOT a recognized cause of cardiogenic syncope?

- A. Pulmonary embolism
- B. Ventricular fibrillation
- C. Postural hypotension
- D. First degree heart block
- E. Third degree heart block

35. A 45 year old man with liver cirrhosis and bleeding tendencies and an otherwise normal blood count comes to you for management. Which of the following is the MOST appropriate therapy?

- A. Tranexamic acid
- B. Platelet infusion
- C. Whole blood transfusion
- D. Transfusion of packed cells
- E. Vitamin K

36. Which of the following drugs is LEAST useful in myoclonic epilepsy?

- A. Ethosuximide
- B. Carbamazepine
- C. Sodium valproate
- D. Clonazepam
- E. Lamotrigine

87-1. All Modifiable risk factors for osteoarthritis include all of the following EXCEPT-

- A. Age
- B. Race
- C. Female gender
- D. Obesity
- E. Prior inflammatory joint disease

88. Which one of the following is NOT a risk factor for hepatocellular carcinoma?

- A. Heavy alcohol consumption
- B. Exposure to aflatoxins
- C. Hepatitis A virus
- D. Hepatitis B virus
- E. Hepatitis C virus

89. Which one of the following statements is TRUE regarding diabetic nephropathy?

- A. Stage 2 is characterized by microalbuminuria
- B. Hyperfiltration is only evident in late stages
- C. The microalbuminuria stage is potentially reversible
- D. Microalbuminuria precedes the glomerular structural changes
- E. Stage 4 patients need to be started on dialysis

79.

A tourist suffered a bout of watery diarrhea which became mucoid and blood stained. He had fever and developed severe joint pains a few weeks later. Rheumatoid factor was negative. All of the following statements are true regarding the disease EXCEPT-

- A. *Shigella flexneri* is the causative organism
- B. There is high circulating bacterial antigen
- C. Culture of *Neisseria gonorrhoeae* will be obtained from joint aspirate
- D. It is associated with HLA B27 genotype
- E. It is associated with serum leucocytosis

30. A 45 year old woman with a diagnosis of rheumatoid arthritis has been on methylprednisolone and prednisolone for 2 years. Which one of the following complications is NOT likely to be due to her chronic steroid use?

- A. Cataract formation
- B. Peptic ulcer disease
- C. Diabetes mellitus
- D. Liver disease
- E. Hypertension

81. A strict vegetarian presents with general malaise, exertional dyspnoea and pallor. Peripheral blood film shows segmented neutrophils and the mean corpuscular volume (MCV) is 110fl. Which one of the following statements is TRUE?

- A. Gum hypertrophy occurs
- B. Serum ferritin levels are low
- C. Bone marrow Prussian blue stain is negative
- D. Parosmia is common
- E. Condition is invariably fatal

82. A 30 year old man has just been diagnosed with HIV. He presents to the clinic with complaints of unintentional weight loss despite a good appetite. His initial weight was 70Kg. He has lost 8 Kg over the past 3 months. Physical exam reveals generalized lymphadenopathy. What is his current WHO stage?

- A. Stage 0
 - B. Stage 1
 - C. Stage 2
 - D. Stage 3
 - E. Stage 4
- $\frac{8}{70} \times 100 = 11\% > 10\% = 3 \text{ stage}$

83. A 28 year old woman presents with goitre. Thyroid profile showed TSH = 0.000m IU/L, FT4 = 30ng/L, FT3 = 12 pmol/L. Ultrasound showed a thyroid nodule in the right lobe, the rest had normal echodensity. Which of the following treatments is LEAST appropriate for her?

- A. Propylthiouracil
- B. Lugol's iodine
- C. Methylprednisolone
- D. Surgery
- E. Surgery

- is followed by a severe episode of generalized tonic-clonic seizure. Before the onset of the seizure, she had reported a funny smell. Examination reveals a temperature of 38°C, confusional state with no evidence of meningeal irritation. Which of the following would be the MOST effective treatment in this condition?
- Acyclovir
 - Ganciclovir
 - Anti-tuberculous treatment
 - High dose steroids
 - Ceftriaxone with vancomycin
97. Low voltages on a 12-lead ECG occur in all the following conditions EXCEPT.
- Amyloid heart
 - Chronic obstructive pulmonary disease (COPD)
 - Pericarditis
 - Obesity
 - Pericardial effusion
98. A 22 year old man presents with a 6-month history of left upper quadrant discomfort and early satiety. 2 days prior to presentation, he developed pleuritic abdominal pain revealed splenomegaly 12 cm below left costal margin. White blood cell count (WBC) is $279 \times 10^9/L$, haemoglobin is $9.4 g/dL$ and platelets $702 \times 10^9/L$. What is the MOST appropriate next investigation to confirm the diagnosis?
- Abdominal ultrasound scan
 - Erythropoietin level
 - Haemoglobin electrophoresis
 - Bone marrow evaluation
 - Peripheral blood film
99. Which one of the following statements is TRUE regarding ascites in liver disease?
- Thiazides are the diuretics of choice
 - Malignant ascites responds well to diuretic therapy
 - Portal hypertension is a rare cause
 - Aldosterone antagonists are the preferred diuretics
 - Infectious aetiology is uncommon
100. A 20 year old woman at 20 weeks gestation presents to the emergency department with dyspnoea class III. On examination, she has a regular pulse rate of 90 beats/min, a non-displaced apex with apical mid-diastolic rumbling murmur with loud first heart sound. Which of the following is the MOST appropriate emergency therapeutic intervention?
- Furosemide therapy
 - Termination of pregnancy
 - Digoxin therapy
 - Angiotensin converting enzyme inhibitor (ACEI) therapy
 - Beta blocker therapy

90. All of the following are evidence - based therapeutic lifestyle changes in the control of systemic arterial hypertension EXCEPT.
- Moderation of alcohol ingestion
 - Reduced dietary salt ingestion
 - Lower dietary potassium intake
 - Stress management
 - Regular aerobic exercise
91. A 30 year old pregnant woman is found to be hepatitis B surface antigen (HBs Ag) positive. She is concerned about transmitting the virus to her unborn infant. Which of the following factors is MOST useful in determining the risk of transmission?
- Hepatitis B e antigen (HBeAg) status
 - Hepatitis B core immunoglobulin G (HBcIgG) status
 - Alanine aminotransferase (ALT) 231u/L
 - Her alcohol history
 - Aspartate aminotransferase (AST)/ALT ratio >2
92. A 38 year old woman presents with a 1 month history of bilateral numbness of the lower limbs. Examination is notable for reduced vibration sense and reduced ankle reflexes. All of the following tests are useful in this patient EXCEPT.
- Serum sodium
 - Serum creatinine
 - Thyroid stimulating hormone
 - Cytosolic haemoglobin
 - Haemoglobin level
93. A 25 year old woman presents with gradual skin tightening involving the hands and feet. She also has first degree heart block on the ECG and reflux oesophagitis. Which one of the following statements is TRUE regarding this condition?
- It is commoner in males compared to females
 - It is easily amenable to treatment
 - Resnaud's phenomenon is an invariable feature
 - It has no renal manifestations
 - It is usually an indolent disease
94. A 16 year old girl has bilateral haemarthrosis of elbow joints. She has a fluctuant right knee that is tender. She is bleed from a venopuncture site for the past 24 hours. Which one of the following is the MOST likely diagnosis?
- Classical hemophilia
 - Christmas disease
 - Von Willebrand's disease
 - Disseminated intravascular coagulation (DIC)
 - Protein C deficiency
95. All of the following are features of minimal change glomerulonephritis EXCEPT.
- Heavy proteinuria
 - Hypertension
 - Corticosteroid responsiveness
 - Lack of active sediment in urine
 - Hypercholesterolemia

Mx0
G20

1^o Syphilis
- painless
- 2-6 w
2^o Syphilis
Candyta
3^o - gumma
4^o - Anem

The following are matched correctly except:

- (a) Painless chancre ✓
- (b) Painful chancre ✓
- (c) Grouped vesicles ✓
- (d) Inguinal lymphadenopathy ✓
- (e) Rectal discharge ✓

A 20 yr old previously healthy man presents with a 2 day history of chest pain appropriate for his treatment? Which one of the following is least appropriate for his treatment?

- (a) Amoxicillin/clavulanic acid ✓
- (b) Doxycycline ✓
- (c) Azithromycin ✓
- (d) Ciprofloxacin ✓
- (e) Cefuroxime ✓

A 54 year old man with diabetes mellitus presents with swelling and pain of his left foot. On examination the foot is found to be swollen, warm, tender with Achilles foot. Which one of the following is most appropriate for his treatment?

- (a) Cloxacillin ✓
- (b) Ciprofloxacin ✓
- (c) Amoxicillin/clavulanic acid ✓
- (d) Benzyl penicillin ✓
- (e) Clindamycin ✓

An 18 year old female known to have rheumatic heart disease presents with chest pain and worsening heart failure. On examination she is found to have a new mitral regurgitation murmur and mild splenomegaly. Which one of the following is an appropriate empiric choice of treatment for her?

- (a) Crystalline penicillin only ✓
- (b) Ampicillin and levofloxacin ✓
- (c) Ampicillin and gentamicin ✓
- (d) Ceftriaxone only ✓
- (e) Ampicillin, gentamicin and vancomycin ✓

A 40 year old female currently on treatment with a course of antibiotic for develops profuse diarrhea. Which one of the following is an appropriate choice of antibiotic for her treatment?

- (a) Oral ciprofloxacin ✓
- (b) Oral Metronidazole ✓
- (c) Oral sulfamethoxazole trimethoprim ✓
- (d) Continue oral diphenhydramine ✓
- (e) Oral amoxicillin ✓

Which one of the following is not essential in the diagnosis of severe asthma?

- (a) Blood pressure < 90/60 mmHg ✓
- (b) Creatinine > 130 mmol/L ✓
- (c) Severe dehydration ✓
- (d) INR greater than normal ✓
- (e) Confusion or delirium ✓

A 36 year old HIV positive female with a CD4 of 50 cells/L presents with a 2 month history of severe headache and a positive CSF CRAG. All of the following are indicated in her treatment except:

- (a) Amphotericin B and Fluconazole ✓
- (b) Amphotericin B and Deamethasone ✓
- (c) High dose Fluconazole and Fluycosinate ✓
- (d) High dose Fluconazole ✓
- (e) High dose Fluconazole and Fluycosinate ✓

A patient presents to the Accident and Emergency department with diplopia. Which of the following is inconsistent with a diagnosis of right 3rd cranial nerve palsy?

- (a) Inability to fully adduct the right eye ✓
- (b) Dilated right pupil ✓
- (c) Inability to fully abduct the right eye ✓
- (d) Right ptosis ✓
- (e) Right eye resting in down and out position ✓

Following an infective episode, all the following medications are indicated alone or in combination, except:

- (a) Aspirin ✓
- (b) Clopidogrel ✓
- (c) Atorvastatin ✓
- (d) Warfarin ✓
- (e) Nimodipine ✓

SAH

John, 55 years, has just been diagnosed with HIV. He presented to the clinic with complaints of generalized weakness, loss of appetite, and has no obvious swollen lymph nodes (L.N.). What is the most likely cause of his symptoms?

- (a) Hypertension + Ischemic heart disease + stroke
- (b) Tuberculosis + HIV + stroke
- (c) Tuberculosis + HIV + stroke
- (d) Tuberculosis + HIV + stroke
- (e) Tuberculosis + HIV + stroke

Josephine presents with 4 weeks history of headache and fatigue. She has lost 10 kg and has lost 1 kg over the past few months. Physical examination reveals generalized lymphadenopathy and an old right parietal skull fracture. What is the most likely diagnosis?

- (a) Stage 0
- (b) Stage 1
- (c) Stage 2
- (d) Stage 3
- (e) Stage 4

A 45 year old man presents with chronic watery discharge and weight loss. Factors that would lead to a diagnosis of Crohn's disease include all the following EXCEPT:

- (a) Bacterial meningitis
- (b) Cryptococcal meningitis
- (c) Progressive multifocal leukoencephalopathy (PML)
- (d) Primary brain lymphoma
- (e) Toxoplasmosis

Indications for targeted viral load testing according to the Kenya National ART guidelines include all of the following EXCEPT:

- (a) CD4 counts lower than 100 after 12 months on ART
- (b) Fall of CD4 count to or below pre-ART level
- (c) Fall of CD4 count by 30% or more from on-treatment peak value
- (d) Pruritic papular eruptions after 6 months on ART
- (e) Recurrent WHO Stage 2 illness after 6 months on ART

Sparring of frontalis muscle in a patient with facial muscle weakness suggests a diagnosis OTHER than Bell's palsy?

- (a) Sparring of frontalis muscle
- (b) Altered taste sensation
- (c) History of preceding respiratory infection
- (d) Unilateral involvement
- (e) Altered hearing on affected side

Regarding lumbar punctures, which is TRUE?

- (a) In viral meningitis, the CSF glucose is always normal
- (b) In tuberculous meningitis, the CSF protein is usually high
- (c) In bacterial meningitis, the CSF protein is usually normal
- (d) In bacterial meningitis, the CSF glucose is usually normal
- (e) In sub-arachnoid hemorrhage, the CSF colour does not change

All the following are features of pellagra EXCEPT:

- (a) Dermatitis
- (b) Megalocytosis
- (c) Diarrhoea
- (d) Depression
- (e) Hyperpigmentation

Which of the following is matched correctly in relation to deficiency and the resulting disorder?

- (a) Iron deficiency - Brittle bones
- (b) Iodine deficiency - Anorexia
- (c) Fluoride deficiency - Dysphagia
- (d) Zinc deficiency - Reduced immunity
- (e) Calcium deficiency - Osteoporosis

119 A 35 year old known alcoholic presents with sudden onset of abdominal pain mainly in the epigastrium. Clinical examination reveals no rebound tenderness and the serum amylase is 600 IU/L. Which of the following is not indicated in the immediate management of this man?

- (a) Intravenous fluids
- (b) Antibiotics
- (c) Proton pump inhibitor
- (d) Oral feeding
- (e) Abdominal CT scan evaluation

A 30 year old obese man presents with burning retrosternal chest pain associated with hoarseness of voice. Both the electrocardiogram and serum troponin levels are normal. Upper GI endoscopy is also normal. Which of the following is not indicated in the management of this condition?

- (a) 24 hour pH monitoring
- (b) Esomeprazole
- (c) Weight reduction
- (d) Cardiac beta-blocker
- (e) Oesophageal manometry

21 A patient presents with haematemesis which is later confirmed at endoscopy to be originating from bleeding oesophageal varices. Which of the treatments below is not indicated in his immediate management?

- (a) Normal saline infusion
- (b) Band ligation
- (c) Sandostatin infusion
- (d) Propranolol
- (e) Porto caval shunting

22 The following are recommended in the management of acute liver failure except:

- (a) Mannitol
- (b) Dextrose
- (c) Vitamin K
- (d) Diazepam
- (e) Fresh frozen plasma

23 The following Hepatitis B serologic profile is found in an asymptomatic 40 year old male:

- HBsAg Positive
- anti-HBc Positive
- anti-HBe Positive
- anti-HBc IgM Positive
- anti-HBc IgG Positive
- anti-HBe Negative
- anti-HBs Negative

Which of the following is the best interpretation of this profile?

- (a) Past Hepatitis B infection
- (b) Acute Hepatitis B infection
- (c) Inactive HBV carrier
- (d) Chronic Hepatitis B infection
- (e) Hepatitis B vaccination

24 A 43 year old with a 10 year history of ulcerative colitis presents for annual follow up health examination. Which of the following test is least useful?

- (a) Serum Alkaline phosphatase (ALP)
- (b) Colonoscopy
- (c) Complete blood count
- (d) OGD
- (e) Serum Gamma glutamyl transferase (GGT) and Alanine transaminase (ALT)

25 Which of the following statements regarding Helicobacter pylori is true?

- (a) It is associated with a small proportion of duodenal ulcers
- (b) It invades gastric mucus and rarely causes systemic infections
- (c) It colonizes surface epithelial cells in the antrum of the stomach
- (d) It causes a decrease in antral G-cells
- (e) It increases the risk of GERD

26 Six months after a diagnosis of GERD, a patient presents with intermittent difficulty in swallowing solid food without odynophagia, weight loss or vomiting. Which one of the following is the most likely cause of the dysphagia?

- (a) Achalasia
- (b) Esophageal stricture
- (c) Esophageal cancer
- (d) Barrett's esophagus
- (e) Hiatus Hernia

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37 Cutaneous lesions of lumpy erythematous include all the following, EXCEPT -

- (a) Malar erythema ✓
 - (b) Psoriasis ✓
 - (c) Discoid ✓
 - (d) Vasculitis ✓
 - (e) Nodular prurigo - like ✓
- oral ulcers, photosensitivity, non-invasive actinic, purpura, purpura.*

38 A patient presents with generalized pruritic wheals. The face is diffusely swollen. The patient is cyanosed with laboured breathing. The priority intervention is:

- (a) Intravenous line ✓
- (b) Secure airway ✓
- (c) Nebulization ✓
- (d) Oxygen by mask ✓
- (e) Central venous pressure line ✓

39 A 22 year old, previously healthy, patient presents with serous fluid filled vesicles and bullae of three days duration. Nikolsky sign is positive. Tension lesion on the face is 30%. Other prognostic factors include all the following EXCEPT?

- (a) Pulse rate ✓
 - (b) Serum urea ✓
 - (c) Haemoglobin ✓
 - (d) Blood glucose ✓
 - (e) Serum bicarbonate ✓
- purpura, vulgata, scalded skin syndrome, TEN*

40 All the following are associated with photosensitivity EXCEPT:

- (a) Dermatomyositis ✓
- (b) Pellagra ✓
- (c) Lupus erythematosus ✓
- (d) Porphyria cutanea tarda ✓
- (e) Enalapril induced cutaneous eruption ✓

41 A 15 year old student presents with lichenified patches on the neck, antecubital and popliteal fossae. He has had remissions with topical steroids followed by relapses since early childhood. What is the most likely diagnosis?

- (a) Allergic contact dermatitis ✓
 - (b) Irritant contact dermatitis ✓
 - (c) Seborrhoeic dermatitis ✓
 - (d) Atopic dermatitis ✓
 - (e) Nummular dermatitis ✓
- relapsing*

42 Physical modalities used in the rehabilitation of patients with arthritis include the following EXCEPT:

- (a) Electrical stimulation ✓
- (b) Hydrotherapy ✓
- (c) Exercise therapy ✓
- (d) Rest prescription ✓
- (e) Cognitive behaviour therapy ✓

43 The following are true concerning septic arthritis EXCEPT:

- (a) Pre-existing rheumatoid arthritis is a risk factor ✓
- (b) Staphylococcus aureus is the most common organism in prosthetic joint infections ✓
- (c) Atrocin is contraindicated ✓
- (d) Antibiotic treatment should begin immediately once proper samples for microbiologic studies have been collected ✓
- (e) Hemodialysis patients are predisposed to infections at extra-skeletal sites ✓

44 The following medications are used in the treatment of acute attacks of gout EXCEPT:

- (a) Non steroidal anti-inflammatory drugs (NSAIDs) ✓
 - (b) Corticosteroids ✓
 - (c) Colchicine ✓
 - (d) Allopurinol ✓
 - (e) Adrenocorticotropic hormone (ACTH) ✓
- For prophylaxis*

45 The following are true concerning gout EXCEPT:

- (a) The age of onset in women is older ✓
- (b) The majority of people with hyperuricaemia never develop symptoms ✓
- (c) The development of tophiaceous deposits of monosodium urate is a function of the duration and severity of hyperuricaemia ✓
- (d) Symptoms are ameliorated by probenecid ✓
- (e) It is commonly associated with abnormalities of serum lipids ✓

46 The following are true of spondyloarthritis EXCEPT:

- (a) The eye is involved ✓
 - (b) Sacroiliitis occurs ✓
 - (c) Anti-CCP antibodies test is invariably positive ✓
 - (d) HLA-B27 is a strong genetic risk factor ✓
 - (e) Etanercept is useful in treatment ✓
- RA*

The following are true concerning fibromyalgia - correct

- (A) Exercises is a cardinal element of the therapy ✓
- (B) Symptoms are exacerbated by lifestyle antidepressants ✓
- (C) Fatigue is worsened by physical activity ✓
- (D) Commonly presents with irritable bowel syndrome ✓
- (E) Deficits of attention and memory occur ✓

Non-inflammatory causes of epigostric pain include all the following except:

- (A) Osteoarthritis ✓
- (B) Esophageal reflux ✓
- (C) Osteoarthritis ✓
- (D) Reactive arthritis ✓
- (E) Perigastric villonodular synovitis ✓

An elderly female patient who is being nursed in hospital following total hip replacement surgery is suddenly reported to be diaphoretic and dyspnoeic. On physical examination she is cold, sweaty and tachypnoeic with feeble pulses and is desaturating with SpO_2 75%. The ECG is significant only for sinus tachycardia of 120 bpm. Which of the following investigations has the highest positive predictive diagnostic value.

- (A) Cardiac troponin ✓
- (B) D-Dimer ✓
- (C) Computer Tomography (CT) - Pulmonary angiography ✓
- (D) Mixed gas analysis ✓
- (E) Echocardiography ✓

As part of a pre operative evaluation, a 75 year old man is incidentally found to have an isolated irregularly irregular pulse at rate 80 bpm, and a 12 lead ECG shows absence of P waves. All the following therapies are potentially indicated except:

- (A) Digoxin ✓
- (B) Warfarin ✓
- (C) Beta cardio version ✓
- (D) Amiodarone ✓
- (E) Propafenone ✓

CCF 1
HTN 1
Age 75 2
DM 1

CHAD score < 2
50 use Aspirin
72 Warfarin
Page 11 of 22
Aspirin

51. All of the following are recognized causes of electrocardiographic ST segment deviation except:

- (A) Early ventricular repolarisation ✓
- (B) Pulmonary embolism ✓
- (C) Pericarditis ✓
- (D) Myocardial ischaemia ✓
- (E) Ventricular aneurysm formation post MI ✓

52. A 65 year old healthy elderly patient is involved in a fall from a chair and is transported to the hospital with a knife in his left midclavicular line. He is taken to the emergency department and on arrival his blood pressure is barely palpable. His lungs are clear to auscultation. His heart sounds are barely audible. Which of the following is the most likely diagnosis:

- (A) Myocardial infarction ✓
- (B) Aortic laceration ✓
- (C) Tension pneumothorax ✓
- (D) Hemothorax ✓
- (E) Acute MI ✓

53. A 50 year old patient with diabetes presents to A & E department at 3 am with a four hour history of on-going severe constricting chest pain. Examination reveals BP 100/60 mm Hg and pulse 110 bpm. ECG reveals inferior ST segment elevation. All the following are appropriate therapies in the urgent management except:

- (A) Thrombolysis ✓
- (B) Warfarin ✓
- (C) Percutaneous coronary intervention ✓
- (D) Beta-adrenergic blocker ✓
- (E) Clopidogrel ✓

54. A 16 year old patient from rural Kenya has a white blood cell count of 9×10^9 /litre and 60% neutrophils. The haemoglobin is 6.7 g/dl, MCV of 59 fl and platelets of 45×10^9 /litre. The spleen is enlarged. Which one of the following is the most likely association?

- (A) Presence of Schistosoma haematobium ova in stools ✓
- (B) Presence of Schistosoma mansoni ova in stools ✓
- (C) Presence of Ascaris lumbricoides ova in stools ✓
- (D) Presence of Necator americanus ova in stools ✓
- (E) Presence of Taenia saginata ova in stools ✓

A 15 year old boy patient from Western Kenya had dental extraction of six lower teeth and bleeding continued for over 48 hours, requiring admission in hospital. Which of the following statements is of least importance?

- (a) Presence of global alopecia
- (b) History of jaundice weeks prior to the episode
- (c) Presence of excessive bleeding from pale relative following minor trauma
- (d) Presence of gingival hyperplasia
- (e) History of menorrhagia in a maternal aunt

A 23 year old patient has haemoglobin of 5.3g/dl, platelet count of 33x10⁹/litre, total white blood cell count of 6.8 x 10⁹/litre. There are bilateral cervical nodes measuring 1x2 cm and a tipped spleen. Which one of the following diagnosis is most likely?

- (a) Hypersplenism
- (b) Aplastic anaemia
- (c) Acute myeloid leukaemia
- (d) Myelodysplastic syndrome
- (e) Pernicious anaemia

A 75 year old adenomatous man is pale with a haemoglobin of 4.5g/dl, MCV of 156 fl, total white blood cell count of 1.5 x 10⁹/litre and platelets of 87 x 10⁹/litre. Which one of the following can prevent the recurrence of this condition?

- (a) Avoidance of Chloramphenicol
- (b) Eating of well-cooked legumes
- (c) Eating of roasted meat and great products
- (d) Eating of half cooked vegetables
- (e) Eating of raw fish from the Far East

A 43 year old patient has a diagnosis of multiple myeloma. The haemoglobin is 11g/dl, white cell count is 6.7 x 10⁹/litre and platelets are 131 x 10⁹/litre. There are no other significant co-morbidities. Which are of the following drugs should be avoided as much in the treatment of this condition?

- (a) Vincristine
- (b) Borzomib
- (c) Melphalan
- (d) Thalidomide
- (e) Doxorubicin

A 23 year old female underwent abortion of a 14 week foetus last week. She is mildly pale and sick-looking. The temperature is 39.7°C, pulse 112/minute, regular. The haemoglobin is 8g/dl, total white blood cell count 17x10⁹/litre, platelets are 13x10⁹/litre. Which one of the following statements is correct?

- (a) There is underlying acute leukaemia
- (b) The number of bone marrow megakaryocytes is suppressed
- (c) There are features of immune thrombocytopenic purpura
- (d) There is a picture of haemolytic uraemic syndrome
- (e) There is disseminated intravascular coagulation

A 16 year old patient has had repeated blood transfusions since the age of 14. There is mild jaundice, moderate to mild pallor and tender right hypochondrium. The limbs are thin and some digits of the hands and legs are atrophied. What is the most likely cause of the right hypochondric tenderness?

- (a) Hepato-splenic carcinoma
- (b) Cholangitis
- (c) Regeneration of red blood cells in the liver
- (d) Amoebic liver abscess
- (e) Typhoid

A 64 year old has left cervical and bilateral axillary lymphadenopathy of 2.2 cm. The haemoglobin is 12g/dl, white blood cell count is 5.6x10⁹/litre with 6.9% neutrophils, platelets are 480 x 10⁹/litre. Histology and immunohistochemistry have confirmed follicular lymphoma grade 1. Which of the following statements is incorrect?

- (a) This is indolent disease
- (b) CD 20 is likely to be strongly positive
- (c) Chemotherapy should be deferred
- (d) There is a close to 30% chance of transformation to higher grade disease
- (e) This disease is highly curable

Which one of the following is not a post-mortem change?

- (a) Adipocere
- (b) Sclerotization
- (c) Putrefaction
- (d) Skin slippage
- (e) Bulge of the meninges

Which of the following are not correctly matched as pathological parasite - vector?

- (1) S. Entomophaga - Blomphylaxa species ✓
- (2) P. falciparum - female Anopheles mosquito ✓
- (3) Lyme disease - Ixodes ricinus tick ✓
- (4) T. brucei - tsetse fly ✓
- (5) Leishmania - sand fly ✓

A 2 months pregnant woman, who normally resides in Nairobi is on holiday at Mombasa. She has not taken any malaria prophylactic medication. She develops rigors and fevers temperature 39°C on the 4th day of her visit. Which is the most likely diagnosis?

- (a) Malaria - malarial parasite ✓
- (b) Typhoid - *Salmonella typhi* ✓
- (c) Pelvic inflammatory disease ✓
- (d) Urinary tract infection - *Escherichia coli* ✓
- (e) Brucellosis - *Brucella abortus* ✓

A British tourist went boating and swimming in Lake Victoria. A week after he develops fever, anaemia and lymphadenopathy. All the following statements are true except:

- (a) The condition is related to his contact with lake water ✓
- (b) High eosinophilic count is expected ✓
- (c) Tenosynovitis myositis is a known complication ✓
- (d) Heaviness of the body is a related finding ✓
- (e) Jelly fish sting is the most likely cause of his illness ✓

Binocular ptosis is a feature of:

- (a) 7th cranial nerve palsy ✓
- (b) Polymyositis ✓
- (c) Trochlear palsy ✓
- (d) Myasthenia gravis ✓
- (e) Abducens palsy ✓

All the following are correctly matched except:

- (a) Ataxic myasthenius - Multiple sclerosis ✓
- (b) Pseudotumor cerebri - Retinitis pigmentosa ✓
- (c) Oculogyric crisis - Uraemic neuropathy ✓
- (d) Postural hypotension - Shy Drager syndrome ✓
- (e) Gastric swelling - Diabetic neuropathy ✓

All the following are correct concerning X-linked dominant disorders except:

- (a) Vitamin D-resistant rickets is an example ✓
- (b) All female offspring of an affected male will have the disease ✓
- (c) Females do not manifest the symptoms ✓
- (d) Half the males or female offspring of an affected mother have the disease ✓
- (e) No male offspring of an affected man will have the disorder if their mother not affected ✓

A 49 year old male painter is diagnosed with diabetes mellitus. He has noted hand and foot changes requiring change of size of working gloves from medium to large in the last 2 years. His shoe size has changed from size 7 to 8. Which of the following statements is true concerning him?

- (a) His libido is expected to increase ✓
- (b) Muscular hypertrophy is usually associated ✓
- (c) This is a recognized side effect of sulphonylurea class of drugs ✓
- (d) Visual deterioration and visual field defects occur ✓
- (e) Loss of facial and axillary hair is expected ✓

Adrenocorticoids biosynthesis is positively regulated (stimulated) by the following factors except:

- (a) Renin-angiotensin system ✓
- (b) Prolactin ✓
- (c) Serotonin ✓
- (d) Dopamine ✓
- (e) Prolactin and prolactin releasing hormone ✓

The following are true of the syndrome of inappropriate antidiuresis (SIAD) except:

- (a) Hyponatremia is a classic finding ✓
- (b) Nephrosis is causally linked ✓
- (c) Acute intermittent porphyria is a nonmetabolic cause ✓
- (d) SIAD is a diagnosis of exclusion ✓
- (e) Demopressin is an isotonic cause ✓

Which of the following conditions is associated with metabolic acidosis with wide anion gap? (Low fasting BUN, lactate) not metabolic acidosis

- (a) Pyloric stenosis ✓
- (b) Renal tubular acidosis type 1 ✓
- (c) Uretero sigmoidostomy ✓
- (d) Acetazolamide toxicity ✓
- (e) Diabetic ketoacidosis ✓

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ANS: (b) Uretero sigmoidostomy

ANS: (b) Acetazolamide toxicity

ANS: (b) Diabetic ketoacidosis

1 week before - 10 ↓ Cx

A 13 year old boy is evaluated for stunted growth. He has a previous history of limb fractures associated with minimal trauma. Arterial blood assay show pH 7.29, pO₂ 7.34, pCO₂ 7.44. Early morning urine pH 7.52 which one of the following is an expected finding?

- (a) Hypertiglycaemia
- (b) Hypertkalaemia
- (c) Nephrocalcinosis ✓
- (d) Renal artery stenosis
- (e) Proteinuria

Modalities of therapy in actively bleeding esophageal varices include all the following except:

- (a) Octreotide infusion ✓
- (b) Band ligation ✓
- (c) Propanolol infusion
- (d) Vasopressin administration ✓
- (e) Sclerotherapy ✓

A 56 year old woman presents with polyuria, polydipsia and progressive weakness. She had been discharged from hospital two weeks prior, where she had been managed for a concussion injury. Random blood sugar is 4.2 mmol/L. Urinalysis shows low osmolality. Which of the following statements is true?

- (a) Hypoparathyroidism is a feature ✓
- (b) Marked diabetes mellitus is a likely diagnosis ✓
- (c) Hypocalcaemia is expected ✓
- (d) Hypokalaemia is an expected cause of this presentation
- (e) Hypertonic saline improves the situation if hyponatremia occurs

97 The metabolic syndrome is defined by the presence of the following except:

- (a) Abdominal obesity ✓
- (b) Hypertension ✓
- (c) High HDL-cholesterol ✓
- (d) Fasting hypertriglyceridaemia ✓
- (e) Improved glucose tolerance ✓

98 Which one of the following is not true of Wuchereria bancrofti?

- (a) Transmitted by the Culex mosquito
- (b) Associated with nocturnal periodicity
- (c) Associated with pulmonary eosinophilia
- (d) Prevented by treating the whole population with diethylcarbamazine
- (e) There are no serologic tests for its diagnosis

A 20 year old male presents with a 3 week history of fever and conjunctivitis. On examination he is found to be febrile at 38°C and to have splenomegaly of 3cm below the costal margin. Which one of the following is not an appropriate investigation?

- (a) Blood culture ✓
- (b) Urine culture ✓
- (c) ~~Widal test~~
- (d) Demonstration of rising antibody titres
- (e) Stool culture ✓

100 A young girl from North-Essex province presents with sudden onset of fever associated with right upper quadrant pain that increases on deep breathing. She has a trace of jaundice and a raised white cell count. Which statement is false regarding this condition?

- (a) Imaging of the abdomen is indicated
- (b) A calculus (stone) in the gall bladder is common
- (c) Antibiotics are useful in the management
- (d) Surgery is of proven benefit
- (e) Courvoisier's sign is invariably positive

Conjunctivitis's sign
if there is a palpable gallbladder
is in conjunction with pinkness
suggest a course more than gall

1-cm 9-11-1
10-cm 11-1
12-cm 11-12