

ESSAY (Answer ALL Questions)

1. Mr. Odeno, a 45 year old Accountant comes to the out patient department with symptoms suggestive of depression. His wife died 10 months ago.
- a) List the clinical features of depression. (5 marks)
- b) What are the possible differential diagnoses (5 marks)
- c) How would you differentiate abnormal grief reaction from depression? (5 marks)
- d) How would you manage this patient? Assume that the patient is suffering from major depressive illness. (10 marks)
2. A 20 year student presents to you with episodes of what appears to be unusual fits. The nurse on duty informs you that they have been seeing several students from the same school suffering from the same condition. The student is accompanied by a classmate, mother, & class teacher
- a) What history would you ask accompanying people to confirm a diagnosis of conversion disorder. (7 marks)
- b) What are the symptoms and signs of conversion disorder. (7 marks)
- c) How do convulsions in conversion disorder differ from those of epilepsy? (5 marks)
- d) Outline the management of conversion disorder. (5 marks)
3. Mr. Abuto, a 24 year old university student is brought to you by colleagues because he fought another student. He informs you that he fought the student because the latter was discussing him with other students, alleging that he is a homosexual. The patient also complains that there is a gadget put in his brain to mentor his thoughts. The man now feels that his thoughts are withdrawn, and broadcasted. At other times the gadget inserts foreign thoughts into his brain.
- a) What is the most likely diagnosis in this patient. What would be a differential. (5 marks)
- b) What questions would you ask to confirm four diagnosis. (10 marks)
- c) Outline the clinical features of the condition is suffering from. (5 marks)
- d) Outline management of the patient (5 marks)
4. a) Outline the anxiety disorders list under the DSMIV classification. (5 marks)
- b) List the clinical features of post traumatic stress disorder (10 marks)
- c) List the clinical features of Generalized anxiety disorder. (10 marks)

5. Lucia has brought her 75 year old father to the out patient medical clinic. Previously organized man he has been noticed to be unconcerned about order. He is also rude and has been embarrassing his family by loudly uttering rude comments. You suspect that he suffers from dementia. (5 marks)
- What are the differential diagnosis.
 - What psychosocial history would you like to ask.
 - What investigations would you like to do.
 - Outline the clinical features of dementia
6. a) Outline the (DSMIV classification) features of drug dependence. (7 marks)
b) List the necessary investigations in a patient with alcohol dependence. (7 marks)
c) Outline the management of alcohol dependence. (10 marks)
7. A 25 year old woman, Njeri gave birth a week ago. She is brought to the outpatient department by the husband because he found her crying with the baby laid on the floor next to an assortment of knives she was mumbling something about "sacrifice". The medical registrar has examined Njeri and declared that she has illness. The psychiatrist on call has been called and she has requested you to assess Njeri before she arrives.
a) What is the most likely psychiatric diagnosis. Give reasons. What are the differential diagnoses. (10 marks)
b) What additional information would you ask the husband. (5 marks)
c) Discuss with psychiatrist your management plan. (10 marks)

PSYCHIATRY ESSAY QUESTIONS

1. State the common signs and symptoms, differential diagnosis including the general medical conditions that can present with depression.
2. List the features that differentiate delusional disorders, schizoaffective disorders and brief reactive psychosis from each other and from schizophrenia.
3. Define the term psychosis and develop a differential diagnosis for a person presenting with psychosis.
4. What are Personality disorders? Describe briefly concepts of personality and personality disorders.
5. Describe the disorders of perception and discuss their underlying mechanisms.
6. Generalized Anxiety Disorder(GAD) may present with 4 sets of symptoms/categories. Give the outline with examples.
7. Discuss the clinical presentation, aetiology and the management of the following clinical syndromes:
- Schizophrenia
 - Mood disorders
 - Psychoactive subst. dependence syndrome
 - Anxiety
 - Attention deficit disorder
 - Psychosomatic disorders / Somatoform
8. What is the presumed mode of action of the following common drugs used in treatment of psych disorders?
- Antidepressants → Re-uptake inhibitors
 - Neuroleptics → D2 antagonists
 - Anxiolytics → GABA A Agonists
 - Anticonvulsants
9. Describe the mental status exam and outline the Multiaxial classification system.
10. Discuss the aetiology, presentation and management of delirium.
11. Describe the features of subst. dependence syndrome. Using alcohol as your model, outline its management.
12. Write short notes on
- School refusal
 - Conduct disorder
13. What is a subst. use disorder? What are their DSM-IV diagnostic criteria? List the medical complications of alcoholism.
14. Define psychotherapy and give some examples of its models. Discuss group therapy.
15. Discuss delirium.
16. Write short notes on
- Panic disorder
 - Suicide and parasuicide
17. Describe ADHD and outline its management.
18. Discuss the clinical presentation and management of schizophrenic patient.
19. Describe anxiety disorders and give an outline on the principles of classification of anxiety disorders.
20. Define psychopathology. Explain why psychopathology is a social as well as a personal matter.
21. Define mood disorders. Give a brief description of major depressive disorder, bipolar disorder and mania.
22. Briefly describe the contents of the DSM-IV. List the 5 axes used in diagnosis based on DSM-IV.
23. Write short notes on

- Depersonalization ✓
- Derealization ✓
- Insight ✓

5 clinical symptoms of mania *paran*

5 physical symptoms present in patients with depression *phobia*

Discuss the clinical presentation, aetiology and Mx of the following clinical syndromes:

Schizophrenia ✓

Mood disorders ✓

Psychoactive subst dependence syndrome ✓

Anxiety ✓

Write short notes on:

Antidepressants

Neuroleptics

ECT

Phobias

Suicide

Common psychiatric problems in children and adolescents

Q - what are anxiety disorders used in the evolution of DSM
Socio-environmental, cognitive form of any of them

Short essays 26) CP in case of conversion disorder

- Describe the association between mood and appearance.
- Define an illusion and outline circumstances of its occurrence.
- What happens in the disorders of the stream of thought? Name the 3 types you know.
- What are the main differences between a psychosis and a neurosis?
- Describe the symptoms of a psychotic depression.
- Outline the categories of substance abuse and give examples.
- Describe what makes drug-induced hallucinations.
- Outline the acute and chronic effects of drugs.
- Write short notes on Othello syndrome.
- Write short notes on the clinical features of heroin addiction.
- List 5 adverse psychological effects attributed to cannabis.

BHAVIOURAL SCIENCES

- Describe the main theories of learning giving appropriate examples.
- Describe the doctor-patient r/ship with particular reference to psychiatry.
- What are the causes of non-compliance with medical treatment and how may these be remedied.
- Define and briefly describe somatoform disorders.
- Briefly describe the various factors influencing psychosocial devt of children.
- Give an outline of the common drugs of abuse and describe the aetiological factors of drug dependence in detail. What are the possible intervention strategies?

outline recognition of substances other than

examples

- Discuss what makes a drug addictive.

- loss of control & chronic alcohol effects

- write short notes on c/o of heroin addiction

- list 5 A/G. distribution to care

- characteristics diff eg. perceptual & cognitive

- social

- genetic

Nursing
Sheil

To 1

2010

(ii)

UNIVERSITY OF NAIROBI

Psychiatry

UNIVERSITY EXAMINATIONS 2009/2010

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

HPS 600: ESSAY

DATE: NOVEMBER 3, 2010

TIME: 2.00 P.M. - 5.00 P.M.

Answer 4 questions only.

Question one is compulsory

Mood:

compulsory

A 35-year old married secretary was diagnosed by her doctor as suffering from depression 2 months ago. She was started on fluoxetine 20 mg daily. She has now come for follow-up at the outpatient clinic. Her mood has not improved.

DEPRESSION

50-60mg

Non-compulsory

Only one mode

of tx.

Stereotypes

psychomotor

psychological

social

mood

a. List the clinical features of depression (5).

b. List the possible reasons for her non-improvement (10).

c. How would you manage her? (10).

schizophrenia

20 year old university student who has been admitted to the student's sickbay after he attacked his roommate accusing him of stealing his thoughts.

Describe the Schneiderian first-rank symptoms of schizophrenia (10).

What differential diagnoses would you consider? (5).

e. Describe your plan of management (10).

Alcohol [Biopsychosocial model]

A 30 year old man patient who was admitted two days ago into the orthopaedic ward with a fracture of his arm. His fracture has been fixed but he is increasingly confused.

His wife says that he drinks a lot.

Give the criteria for alcohol dependence (5).

List the alcohol related psychiatric disorders (10).

Describe the management of this patient (10).

Alcohol dependence

primarily of alcohol overall

other aspects of life.

Tolerance

Withdrawal symptoms

Feeling compelled to take

drugs

Phase 1 - Diet

Phase 2 - pharmacological (DT)

Phase 3 - Psychotherapy

(DT) - see Detoxification

Phase 1 - Diet

Phase 2 - pharmacological (DT)

Phase 3 - Psychotherapy

selected drugs

selected drugs

selected drugs

selected drugs

selected drugs

DEMENTIA (17)

A 70 year-old woman has been brought to the clinic by her daughter who lives near her. She (patient) has refused to enter the consultation room. The daughter says that she is increasingly forgetful and hides away her valuables including money and later accuses her housemaid of stealing from her when she cannot remember where she kept them. You suspect that she might be suffering from dementia. *(Answer)*

- List the factors that you would like to ask the daughter to confirm your diagnosis (10).
- What are the differential diagnoses (10).
- What investigations would you recommend? (5).

SUICIDE

5. A 14-year-old girl in standard eight was admitted from casualty last night. She had ingested 10 diazepam tablets in an apparent attempt at suicide. She is now stable. You have been asked to take history from her before the major ward round.

- What factors will you consider when assessing the seriousness of the attempt? (10). *(Answer)*
- How would you manage her? (10).
- What is the prognosis? (5).

Risk of completed suicide is the result of population.

A N X I E T Y ¹⁰⁰ *plus older* ¹⁷⁵
Two months ago a 20-year-old college student witnessed a horrible accident in which her friend who was walking with her towards the lecture halls, was badly hurt while crossing the road. She is now quite distressed and uses an alternative route which takes her 10 more minutes to reach the lecture halls. *persistent avoidance, if unable to confront the trauma.*

- What is the most likely diagnosis and what additional features would you look for to confirm the diagnosis? (5).
- What are the differential diagnoses? (5).
- What are the comorbid disorders commonly found in this condition? (5).

*How would you manage her? (10). *(in BIOPSY into socia**

Psychotherapy ¹⁰⁰ *Behavioral therapy* ¹⁰⁰ *CBT* ¹⁰⁰
*What are the types of psychotherapies commonly used (10). *(CBT**

What is cognitive behaviour therapy? (5). *Group therapy* ¹⁰⁰ *outward* ¹⁰⁰
*What are the therapeutic factors in group therapy? (10). *(outward**

Additional factors ¹⁰⁰ *Traumatic event* ¹⁰⁰ *Reexperience* ¹⁰⁰
event ¹⁰⁰ *avoidance/estimata* ¹⁰⁰
Hyperarousal ¹⁰⁰ *intrusive thoughts* ¹⁰⁰
hypervigilance ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

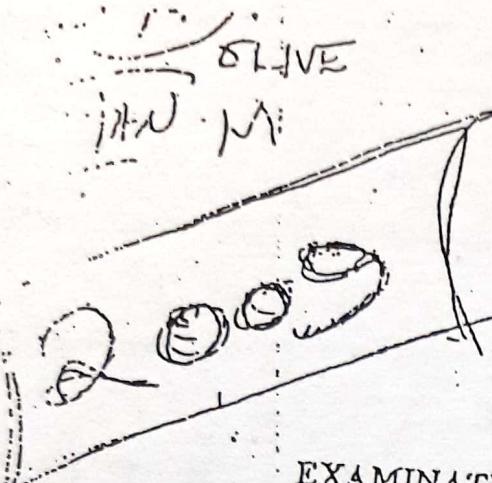
Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing* ¹⁰⁰ *DDT* ¹⁰⁰
exposure ¹⁰⁰ *relaxation* ¹⁰⁰ *biofeedback* ¹⁰⁰
music therapy ¹⁰⁰ *art therapy* ¹⁰⁰ *music therapy* ¹⁰⁰

OCD ¹⁰⁰ *Phobia* ¹⁰⁰ *Adjustment disorders* ¹⁰⁰
hypochondriacal ¹⁰⁰ *hypersensitivity* ¹⁰⁰ *symptoms* ¹⁰⁰

Management ¹⁰⁰ *Biopsychosocial* ¹⁰⁰ *model* ¹⁰⁰ *fluency* ¹⁰⁰ *distress* ¹⁰⁰

PTSD ¹⁰⁰ *CBT* ¹⁰⁰ *Debriefing*



Kainegaga

UNIVERSITY OF NAIROBI

UNIVERSITY EXAMINATIONS 2008/2009

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

HPS 600: PSYCHIATRY ESSAYS

DATE: 4TH NOVEMBER, 2009

TIME: 2.00 P.M. - 5.00 P.M., 1st

INSTRUCTIONS:

Answer a total of 4 questions only.

Answer question 1 and any other 3 questions

The marks allocated for each question are shown in brackets

✓ 1. Describe the clinical syndrome of schizophrenia (5)

a. List possible aetiological factors linked to schizophrenia (10)

b. List the main types of treatment of schizophrenia (10) → HOSPITALISATION
MODER

✓ 2. Using specific examples describe the three levels of prevention in mental health (5)

a. How may depressive illness be prevented? (5)

b. Describe the course and prognosis of a depressive illness (15)

✓ 3. Describe the clinical features of Alzheimer's disease (10)

a. List the neuropathological changes seen in Alzheimer's disease (10)

b. Outline the treatment options for Alzheimer's disease (5)

✓ 4. Describe the puerperal mental disorders (5) → Post-partum blues,
Post-partum depression, Post-partum psychosis

a. How are they treated (10)

b. Describe the treatment of bipolar mood disorder in pregnancy. (10) ECT

Electroconvulsive therapy (ECT)

Define cognitive behaviour therapy (5)

- a. List at least seven cognitive distortions giving examples (10) *Feeling good*
- b. Using the cognitive distortions model describe four ways in which anxiety is maintained (10).

Define conduct disorder giving the diagnostic criteria (5) ADHD (One 12+) *ADHD
School refusal*

- a. What are the biological and psychosocial risk factors associated with conduct disorder? (10)
- b. Describe the evidence based treatments available for managing conduct disorder. (10).

Alcohol *alcohol dependence*
What are the neuropsychiatric disorders associated with alcohol use? (10)

- c. What are the biochemical changes in the brain underlying the behavioural aspects of alcohol (5)?

Outline the treatment of delirium tremens (both short term and long term) (10) *BDZ
Anticholinergics
Acetylcholine ??*

Q. ①

① Neuro-psychiatric disorders - alcohol use

① Mix of ① DT.

② Short term

③ Benzodiazepines

④ chlorpromazine

⑤ barbiturates

⑥ I.V. glucose

⑦ ECG monitoring

⑧ Multivitamins

⑨ esp. Thiamine

⑩ Prophylactic

anti convulsants

e.g. phenytoin

⑪ Long-Term.

⑫ = release

excretion

② Delirium tremens

③ Wernicke's encephalopathy

④ Korsakoff's psychosis

⑤ Alcoholic hallucinosis

⑥ Alcoholic dementia

⑦ Major depressive disorder

⑧ Suicide & self-harm

①

②

③

④

⑤

⑥

⑦

⑧

①

②

③

④

⑤

⑥

⑦

⑧

⑨

⑩

⑪

⑫

⑬

⑭

⑮

⑯

⑰

⑱

⑲

⑳

㉑

㉒

㉓

㉔

㉕

㉖

㉗

㉘

㉙

㉚

㉛

㉜

㉝

㉞

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

㉟

ESSAY (Answer ALL Questions)

- Mr. Oando, a 41 year old Australian comes to your general department with symptoms suggestive of depression. His wife died 10 months ago.
- Elucidate the clinical features of depression. (5 marks)
 - What are the possible differential diagnoses (5 marks)
 - How would you differentiate abnormal grief reaction from depression (5 marks)
 - How would you manage this patient? Assume that the patient is suffering from major depressive illness. (10 marks)
2. A 20 year student presents to you with episodes of what appears to be unusual fits. The nurse on duty informs you that they have been seeing several students from the same school suffering from the same condition. The student is accompanied by a classmate, mother, & class teacher
- What history would you ask accompanying people to confirm a diagnosis of conversion disorder. (7 marks)
 - What are the symptoms and signs of conversion disorder. (7 marks)
 - How do convulsions in conversion disorder differ from those of epilepsy. (7 marks)
 - Outline the management of conversion disorder. (7 marks)
3. Mr. Abuto, a 24 year old university student is brought to you by colleagues after he fought another student. He informs you that he fought the student because she has been discussing him with other students, alleging that he is a homosexual. The patient also complains that there is a gadget put in his brain to monitor his thoughts. He sometimes feels that his thoughts are withdrawn, and broadcasted. At other times the gadget inserts foreign thoughts into his brain.
- What is the most likely diagnosis in this patient. What would be a differential. (5 marks)
 - What questions would you ask to confirm four diagnosis. (10 marks)
 - Outline the clinical features of the condition is suffering from. (5 marks)
 - Outline management of the patient. (5 marks)
- 4.
- Outline the anxiety disorders list under the DSMIV classification. (5 marks)
 - List the clinical features of post traumatic stress disorder. (10 marks)
 - List the clinical features of Generalized anxiety disorder. (10 marks)

Lucia has brought her 75 year old father to the out patient service. As an organized man he has been noticed to be uncoordinated about order. He is also rude and has been embarrassing his family by loudly uttering rude comments. You suspect he suffers from dementia.

(5 marks)

- a) What are the differential diagnosis. (5 marks)
- b) What psychosocial history would you like to ask. (5 marks)
- c) What investigations would you like to do. (5 marks)
- d) Outline the clinical features of dementia

6. e) Outline the (DSMIV classification) features of drug dependence. (7 marks)
- b) List the necessary investigations in a patient with alcohol dependence. (7 marks)
 - c) Outline the management of alcohol dependence. (10 marks)

7. A 25 year old woman, Njeri gave birth a week ago. She is brought to the outpat department by the husband because he found her crying with the baby laid on the f next to an assortment of knives she was mumbling something about "sacrifice". medical registrar has examined Njeri and declared that she has illness. The psychia on call has been called and she has requested you to assess Njeri before she arrives.
- a) What is the most likely psychiatric diagnosis. Give reasons. What are differential diagnoses. (10 marks)
 - b) What additional information would you ask the husband. (5 marks)
 - c) Discuss with psychiatrist your management plan. (10 marks)