

**FAMILY MEDICINE**

**PAPER-I**

FLM/D/18/08/I

Time: 3 hours  
Max. Marks:100

**Important Instructions:**

- *Attempt all questions in order.*
- *Each question carries 10 marks.*
- *Read the question carefully and answer to the point neatly and legibly.*
- *Do not leave any blank pages between two answers.*
- *Indicate the question number correctly for the answer in the margin space.*
- *Answer all the parts of a single question together.*
- *Start the answer to a question on a fresh page or leave adequate space between two answers.*
- *Draw table/diagrams/flowcharts wherever appropriate.*

**Write short notes on:**

1. A 45-year-old man is brought by his family with complaints of loss of consciousness and jerky limb movements 2 days prior for the first time. 4+4+2
  - a) What will you do if he has repeated episodes, and remains unconscious for 30 minutes, while you are examining him?
  - b) If he has a history of heavy alcohol intake, what is the pathogenesis and management?
  - c) List the diseases which can be shown up in a CT scan.
2. A 20-year-old village man dwelling in a hut, is woken up from sleep early morning from a painful snake-bite on his arm, and is unable to open his eyes after a few hours. 4+2+4
  - a) Explain the most likely type of snake and pathogenesis of his symptom.
  - b) What will you look for in the bitten area, giving the inference of the signs detected?
  - c) If he developed hematuria what is the likely snake and pathogenesis of symptom?
3. 4+4+2
  - a) List the criteria and scoring system for making a diagnosis of rheumatoid arthritis (2010, ARA criteria).
  - b) List and describe the hand deformities in rheumatoid arthritis.
  - c) What does the diagnosis of "reactive arthritis" mean?
4. A 45-year-old diabetic lady presents with generalized pruritis. A thorough examination of the skin reveals no abnormality. 4+4+2
  - a) List 6 possible causes and explain how to investigate for them.
  - b) If the history starts in young age and skin shows dryness and lichenification especially in the flexures, state the most likely diagnosis.
  - c) What systemic drugs are used for pruritus and state the side effects?

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5. Explain the mechanisms of interactions between the following pairs of drugs. 3+3+2+2  
a) Warfarin and phenytoin.  
b) Rifampicin and oral contraceptives.  
c) Salbutamol and atenolol.  
d) Iron supplements and antacids.
6. A 50-year man has been diabetic for 15 years and has an HbA1c of 12%. He is taking Metformin+ glimepiride in full doses. He refuses insulin. 4+4+2  
a) What are the other oral hypoglycemic agents he can be given and explain the actions?  
b) If he agrees to take insulin, what are the various regimens of insulin he can be prescribed?  
c) What is an insulin analogue? Name 1 rapid-acting acting and one intermediate-acting insulin analogue.
7. A 35-year-old previously healthy man develops sudden severe spinning sensation of the head, and vomiting lasting 2 days. 4+4+2  
a) What are the clinical findings, differential diagnosis, and how is it managed?  
b) After recovery, the man develops episodes of vertigo lasting a day or two. State the diagnosis and management.  
c) Name 2 drugs which cause unsteadiness and/or vertigo.
8. A 75-year-old man develops over 6 months abnormal behaviour at night, starts talking to his deceased wife, and is unable to recognize his family members. 4+2+4  
a) What is the likely diagnosis? How can this be clinically assessed?  
b) Describe the age-related changes in the brain.  
c) List 4 other neurological diseases commonly seen in the elderly, with the pathogenesis.
9. A 45-year-old smoker develops central chest pain. An ECG shows the following possible traces. Give the diagnosis in each case and the initial management. 2.5X4  
a) ST elevation in leads I, AVL, V4, V5.  
b) ST segment depression of 2 mV in leads III and AVF.  
c) Normal ECG.  
d) Symmetrical T wave inversions in Lead I, AVL and V4, V5,V6.
10. Discuss briefly on the following sleep disorders: 2+2+2+2+2  
a) Excessive daytime sleepiness.  
b) Terminal insomnia.  
c) Parasomnia.  
d) Narcolepsy.  
e) Drug-induced insomnia.

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