

Class. No _____

KHYBER MEDICAL COLLEGE PESHAWAR
(EXAMINATION SECTION)
INTERNAL EVALUATION EXAMINATION
BLOCK-(L)

4th YEAR MBBS (Held on 03-Nov-2022)

Time Allowed: 120 Minutes

Max Marks: 120

Note: Attempt ALL MCQ's.

- Use only blue / black pen. Use of mobile phones and other electronic accessories are strictly prohibited.
- Carefully shade paper type and your correct roll no in response sheet
- Student's result will be declared "Under Report" if (i) MCQ question paper is not returned back along with response sheet or is tampered by the student (ii) The roll number is not written on the said paper

COMMUNITY MEDICINE		
A	1	Incineration of hospital waste is done in various form of incinerators. Which of the following waste must not be incinerated? (A) Broken thermometers ✓ B Catheters C Juice boxes D Syringes E Vaccines vial boxes
	2	The estimate of average number of years a person expects to live if age specific death rate for a given year prevails for rest of his life. Which of the following demographic parameter represents this statement? A Survival Index B Probability of Dyeing C Age Specific Death Rate D Crude Death Rate (E) Life Expectancy ✓
E	3	A 10 Years girl has weight for height less than -2 S.D. Which of the following is true about the girl? (A) She has moderate wasting B She has severe wasting C She has moderate stunting → H/A D She has severe stunting E She has mild malnutrition → W/A
	4	A 38 years old female presented in OPD for nutritional advice. On examination, her height was 1.5 and her weight was 80 kg. Which of the following category her BMI will fall? A Normal 18.5-24.9 B Over weight 25-29.9 (Pre-obese) C Mild obesity ≥ 30 D Moderate obesity 30-34.9 (I) (E) Severe obesity ✓ 35-39.9 (II) F. Morbid obese 40+
A	5	A 5 year old child is brought to OPD with the complaints of difficulty in vision in dim light. On examination there is triangular pearly-white foamy spot on bulbar conjunctiva. Which of the following vitamin deficiency could be the cause? Bifot spot A Folic Acid (B) Vitamin A ✓ C Vitamin B1 D Vitamin B6 E. Vitamin C
	6	A 27 years old woman who has 2 male children visited a family planning center asking for long term reversible Contraception. Which of the following is the method of choice for this lady? (A) Combined OCP → Short term B Diaphragm → Barrier (C) IUCD ✓ → long term D Progesterone Only pills. CVD E Tubal ligatq. (30YY, 2 child)
C	7	An urban community in a city X were having repeated stomach upsets. The source of drinking water supply was tube well water which is supposed to be clean. However when the water was tested it tested positive for the following chemical water quality parameters. Which one of these would show recent faecal contamination A Biological oxygen demand → organic B Carbon dioxide C Chemical oxygen demand → E: coli D Chlorides (E) Nitrites ✓ ↳ Nitrite +ve
	8	A 30 Year old man is working in a textile industry for the last 10 years. Which of the following measure is most appropriate for assuring use of personal protective equipment? A Administrative Measures (B) Engineering Measures ✓ C Legislative Measures D Medical Measures (D) PPE Measures
D	9	A country with population of 220 million has Crude Birth Rate of 27/1000 population and Crude Death Rate of 7/1000 population. Which of the following (stage of demographic transition) this country is passing? → Pakistan A High stationary (BR ≈ DR ↓) B Low stationary (BR ≈ DR ↓) C Early expanding (BR ↑ DR ↓) (D) Late expanding ✓ E Declining (DR > BR)
	10	An 18 months old child suffering from repeated chest infections is referred to (Nutritionist for assessment. Which of the following anthropometric measures should be used? (6-month - 59 months) A Growth chart (B) Mid upper arm circumference (MUAC) (C) Weight and height ✓ → if Age un D Head circumference (E) All of the above ✓ E- weight for AGE → if age kr
C	11	A teacher was explaining the importance of balanced diet in daily life and the factors that affect the basal metabolic rate of healthy individuals, she explained the ratio of carbohydrates in balanced diet which is A 20-30% → Lipids B 40-50% C 12-25% → Proteins (D) 50-60% E 10-40%

55-70%

... of a year presents with muscle wasting, loss of subcutaneous fat with no signs of edema and weight below 60% of WHO standard. The mother gives history of not giving enough proteins and other nutrients to the child after six months of age. What is the likely diagnosis?

B

- A Kwashiorkor
- B Marasmus
- C Marasmus & kwashiorkor
- D Under nutrition
- E Vitamin B1 deficiency

13

A 50 Years old man is working in a hospital. He is exposed to some occupational hazard. Which of the following hazard is controlled on the basis of ALARA (As low as reasonably achievable) principle

- A Dust suppression
- B Ionizing Radiations
- C Radio frequency radiation
- D Sound Waves
- E Ultraviolet Radiation

14

A forty-year-old woman came to the outpatient department with a lump in the left breast. The lump is soft but not mobile. There is no nipple discharge. What is the most appropriate screening test for the diagnosis of the condition?

- A Breast ultrasound (< 40 years)
- B Mammography (40 year +)
- C MRI scan
- D Fine needle aspiration (FNA)
- E Self-examination

15

(Chlorine) in the form of bleaching powder is the most commonly used disinfectant used for water purification because it is effective, inexpensive, easily available and easy to use. What is the minimum recommended concentration of free chlorine in water for effective disinfection? (safe level is 4 mg/L or Appm)

- A 0.5 mg/L
- B 1 mg/L
- C 1.5 mg/L
- D 2 mg/L
- E 2.5 mg/L

16

A 2 year old baby presented to you in emergency department. He is having difficulty in breathing. He is fed on formula milk and mother use well water for making formula milk. Child belongs to an area where high concentration of nitrates are used as fertilizer and contaminates drinking water of well. What is the most probable diagnosis?

- A Blue baby syndrome
- B Cyanotic heart disease
- C Infant Meth Haemoglobinemia
- D Legionnaire Disease
- E Nitrogen toxicity

17

Disaster is defined as "a serious disruption of the functioning of a community or a society causing widespread human, material, economic or environmental losses that exceed the ability of the affected community or society to cope using its own resources". What are key components of Disaster Management Cycle?

- A Management, Mitigation and Recovery
- B Mitigation, Prevention, Preparedness and Recovery
- C Preparedness, Response, Mitigation and Health Care Delivery
- D Recovery, Response and Reconstruction
- E Response, Recovery, Prevention and Preparedness

18

Waste collection system includes different color coding system. Which of the following waste must be collected in black bag? (Cytotoxic + Metals)

- A Body parts → yellow
- B Blades (Sharps) → white
- C catheters + POP + Dresses → RED
- D Mercury compounds - cytotoxic
- E Packaging material → BLUE

19

In a remote area of the country a gastroenteritis epidemic broke out. A community shallow well was suspected to be the cause. The doctor in charge of the BHU had no other facility to check the quality of water. All he could do was physical examination of water to assess it's quality. Which one of the following parameters would have been the easiest, quickest and safest physical water quality parameter to confirm.

- A Colour (15 TCU Max)
- B PH
- C Odour → Pure water always odourless and tasteless (300 mg/l)
- D taste
- E Turbidity → NTU → visible to average person!
- F. Total dissolved solid

20

A 35 years old woman who has completed her family visited a family planning center asking for permanent family planning method. Which of the following is the method of choice for this purpose?

- A Combined OCP (Active)
- B Progesterone Only pills.
- C Intradermal implant. → Fibroids
- D Tubal ligation. (Permanent)
- E IUCD (BEST) → Hot, smoking, CVD

21

Recently massive floods across the country have caused tremendous loss of human life and infra-structure. Which of the following terminology best suits disasters due to floods?

- A Metrological → lightning + storm
- B Telluric → Earthquakes
- C Tectonic
- D Topological (FAL)
- E Technological

22

A 45-year-old known diabetic patient comes to the outpatient department of tertiary care hospital He is having all the symptoms of the condition. Which of the following is the most appropriate test for checking mean plasma glucose concentration over the previous 8-10 weeks? (3 months)

- A Fasting plasma glucose concentration
- B Fructosamine test
- C Haemoglobin A1c
- D Oral glucose tolerance test (OGTT)
- E Random blood sugar test

23

A women was advised combined oral contraceptive pills by the women medical officer in a BHU for her family planning purpose after consideration all the parameters. What is the appropriate day of menstrual cycle to take her first tablet?

- A 1st day of menstrual cycle
- B Last of menstrual cycle
- C 3rd day of menstrual cycle
- D 4th day of menstrual cycle.
- E 5th day of menstrual cycle.

→ 5-21 day
→ 7 days break.

Cystitis

uritation Sx

PHARMACOLOGY

24 A 32 year old pregnant female presents with burning micturation, frequent urination and urgency for 2 days. On examination there is suprapubic tenderness, urine R/E shows leukocytes, positive nitrates and leukocyte esterase. A drug that causes sequential blockade of enzymes in bacterial folate synthesis, is to be avoided in this patient for which of the following adverse effects in the fetus?

- A Ebstein anomaly -> Lithium B Ototoxicity -> Aminoglycoside C Teeth defects -> tetracycline, amoxicillin
D Neural tube defects -> Folate deficiency E Limb hypoplasia -> Thalidomide

25 A 62-year-old woman recently diagnosed with type 2 diabetes started a therapy that included acarbose. Inhibition of which of the following enzymes most likely mediated the therapeutic effect of the drug in the patient's disease?

- A Acyltransferase B Alpha-glucosidase C Glucokinase (alpha)
D Hormone-sensitive lipase E Pyruvate carboxylase

26 A 50 year old woman who underwent thyroid ablation with radioactive iodine started treatment with levothyroxine. Which of the following cell elements represent the main site of therapeutic action of this drug?

- A Cell membrane B Cell nucleus -> nuclear hormone C Golgi apparatus
D Mitochondria E Smooth endoplasmic reticulum

27 A 54-year-old diabetic man presented to OPD with complaints of dry cough over the past few days and an unexpected weight gain over the past few weeks. His diabetes is well controlled with a combination of oral antidiabetic agents. Physical examination showed evident peripheral edema, mild jugular venous distention. Which of the following drugs most likely caused the patient's signs and symptoms?

- A Acarbose B Exenatide C Glyburide
D Metformin E Pioglitazone (PPRA-X)

28 A 59-year-old man suffering from type 2 diabetes had been receiving an oral anti-diabetic therapy that included a drug that closes adenosine triphosphate (ATP)-sensitive K+ channels on pancreatic beta-cell membranes. Which of the following drugs most likely uses this mechanism of action?

- A Acarbose B Glimepiride (sulfonyl urea) C Insulin
D Metformin E Pioglitazone (OCPs, hepatotoxic)

29 A 56 year old male patient comes for a follow up after being treated for benign prostatic hyperplasia. His urinary symptoms have improved but he now complains of dizziness when getting out of bed in the morning. His vitals and physical examination is unremarkable. Keeping in mind his current complaints, which mechanism is used by the prescribed drug to cause symptomatic relief of benign prostatic hyperplasia?

- A Antagonism at alpha 1 receptors B Agonism at alpha 2 receptors C Antagonism at androgen receptors
D Inhibition of 5-alpha reductase enzyme E Competitive inhibition of dihydrotestosterone

30 A 40-year-old woman's biopsy report revealed ER-positive breast cancer. She was prescribed tamoxifen in combination with aromatase inhibitor. Which of the following drug is a selective non-steroidal aromatase inhibitor?

- A Anastrozole + letrozole B Clomiphene C Danazol
D Finestrade E b. Tamoxifen Exemestane (non-steroidal)

31 A 56-year-old woman was recently diagnosed with type 2 diabetes. Her medical history was significant for a serious allergic reaction to sulfamethoxazole and for recurrent urinary tract infections presently treated with ciprofloxacin. An appropriate therapy was prescribed that included a strict diet and an oral antidiabetic drug. Which of the following drugs would be contraindicated for this patient?

- A Acarbose B Glyburide -> sulfa C Metformin
D Pioglitazone E Repaglinide E-SGLT-2

32 A 48-year-old woman underwent hysterectomy and bilateral salpingoophorectomy. The doctor suggested a low dose estrogen to prevent menopausal symptoms. Which of the following is a synthetic estrogen?

- A Desogestrel B Diethylstilbestrol (Ethinyl Ester) C Levonorgestrel
D Norethindrone E Norgestrel

33 A 24-year-old female diagnosed with endometriosis was prescribed combined oral contraceptives to relieve her endometriosis related pain. Which of the following is NOT a side effect of oral contraceptives?

- A Breast cancer B Cervical cancer C Chloasma/melasma
D Gall stones/cholelithiasis E Ovarian cancer (Advantage) + Endometrial + CRC

34 An under-nourished 50-year-old man confined to bed because of the fractured femur is prescribed anabolic steroids to promote muscle growth and increase strength and energy. What component of anabolic steroids cause this effect?

- A Amphetamines B High protein levels C Synthetic testosterone
D Natural sugars E Triglycerides

35 A 50-year-old man with a history of cholestatic jaundice is prescribed anabolic steroids to promote muscle growth and increase strength and energy. What component of anabolic steroids cause this effect?

- A Amphetamines B High protein levels C Synthetic testosterone
D Natural sugars E Triglycerides

S/E: cholestatic jaundice, lowering HDL & ↑ LDL (↑ CVD risk), vascularization, Excess body hairs, fluid retention + edema, osteoporosis/osteopenia, liver damage/infertility, ↑ erythropoiesis

Ex: Cancer cachexia, major surgery, Anorexia, ↓ NE loss, * Dope-test (illegals strength action), CI -> Prostate CA + Breast CA + liver/kidney disease

SJS, Keratic kerat, KA, Cryptosporidiosis, Hepatitis

B tags, once daily, 5-7 H2, Hiotrix, T3 + T4, levothyroxin, T3

UB, MR (anticholinergic), Prostate, relaxes, shrinks, alpha-blocker, S-X Re, TURP, Finestrade

Terazosin, Doxazosin, Ciprofloxacin, contraindication, children + pregnant, lactation

weight gain/edema, ↑ BP/↑ ICP, Acne/Anemia/Alopecia, Cardiovascular, Pancreatitis, Vomiting (PAPs), light sensitivity

tetracycline, amoxicillin, Miglitol, Flatulence, cramps, Bloating, Cretinism, Myxedema, Hypocholesterolemia, Atherosclerosis, Gotter

pulmonary fibrosis, Aromatase, Androgens -> Estrogen, Exemestane (non-steroidal)

cramps, Menstrual periods, regular, improve, Acne + Hirsutism, ↓ Endometriosis, Protect Ovarian, Endometrial, CRC

narrowest portion of ureter? VUJ (>5mm Lum Stack)

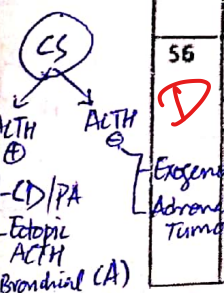
46	A 38 years old male patient presents with sudden onset of pain in right scrotum. He had a past history of renal stones for which he was planning on surgical removal of renal stones. Ultrasound scans showed a 1mm stone impacted in ureter. A 1mm renal calculi in the ureter will most likely impact at?	A Bladder orifice	B Pelvi-ureteric junction	C Pelvic brim
47	A histopathologist is examining renal biopsy specimen of a 54 years old male with long standing history of uncontrolled hypertension. He notices that capsule is adherent to cortical surface. Kidney surface is finely granular and shows V-shaped areas of scarring. What is the possible cause of these findings?	A Glomerulonephritis	B Malignant hypertension	C Nephrosclerosis (Benign)
48	A 50 years old male patient was diagnosed as having bladder carcinoma. Which of the following factors is the most important predisposing condition for the development of bladder cancer?	A Arylamine exposure	B cigarette smoking	C cyclophosphamide treatment
49	A 24 years old male patient presents with sudden onset of pain in right scrotum. Ultrasound scans showed a stone impacted in ureter. This confirms the diagnosis of ureteric calculus. In this regard, the commonest type of ureteric calculus is?	A Calcium oxalate	B Cysteine	C Granite
50	A biopsy of the renal mass shows an epithelial tumor composed predominantly of cells with abundant granular cytoplasm. This feature can be found in	A Conventional (clear cell) carcinoma	B Polycystic kidney	C Medullary sponge kidney
51	During 4th year MBBS class a student falls in class rank from first place to last place. She has also noted a lower pitch to her voice and coarsening of her hair along with increased tendency towards weight gain, menorrhagia and increased intolerance to cold. What relevant investigations will you perform in this case?	A ACTH	B GH	C GTT
52	A 13 years old boy is seen because of increasing weakness, easy fatigability, and weight loss over the past 90 days. In addition he has developed nausea, vomiting and abdominal pain. His blood pressure is markedly decreased, he has increased pigmentation of his skin creases. What is the most likely diagnosis?	A Addison's Disease (↑ACTH)	B Hypogonadism	C Hypoparathyroidism
53	A 60 years old male patient presents to emergency unit with complaint of inability to pass urine. On examination, the bladder is found fully distended. On Digital rectal examination, the prostate is found to be abnormally enlarged. Biopsy of the prostate was advised which showed benign prostatic hyperplasia. Which zone of prostate is most likely affected by prostatic hyperplasia?	A Capsule of prostate	B Entire prostate	C Perilurethral prostate
54	A 30 years old woman is seen by her gynecologist 6 months after giving birth to a normal infant. She suffered severe cervical lacerations during delivery, resulting in hemorrhagic shock. Following blood transfusion and surgical repair, postpartum recovery has so far been uneventful. She now complains of continued amenorrhea and loss of weight and muscle strength. What is the Diagnosis?	A Androgen excess	B Diabetes insipidus	C Hyperprolactinemia
55	A 34 years old woman is seen because of unexplained weight gain, selectively over the trunk, upper back & neck, irregular menstrual periods. She is especially concerned about the changing contour of her face which has become rounder (moon shaped). She has male pattern hair growth, elevated blood pressure and blood glucose. Abdominal CT Scan reveal smooth homogeneous lesion in left adrenal gland. Which of the following investigations will be needed for diagnosis of the above disease?	A Cortisol	B GH	C LH and FSH
56	A 60 year old male with a history of Type 1 diabetes loses consciousness during the course of a dental treatment. What can be the most likely cause?	A Addisonian crisis	B Anaphylaxis	C Hyperglycemia

Chronic Pyelonephritis
↓
Y, X shape Scarring
Thyroidization
(dilated tubules with flattened Epith)

Yellow mass with Hemorrhage and Necrosis (upper pole)

Autoimmune Adrenitis (MCC) 80%
TB (MCC) → Destroyed

MCC of CS is Exogenous Steroids?



Small Contracted Kidneys
→ chronic GN → Granular appearance
→ chronic pyelonephritis → U-shape scars
→ Benign Nephrosclerosis → V-shape scars (leather Grain app)
→ Amyloidosis

Brain is exclusively dependent on glucose
→ hypoglycemia → loss of consciousness
Tuberous sclerosis → Angiomyolipoma

* Malignant Nephrosclerosis → Flea-bitten appearance (yellow mottled appearance)

cut surface → narrow cortex

(Child + Infants)
↓ Aldosterone
↓ Cortisol
↓ Na⁺, ↑ ACTH
↑ K⁺, ↓ Glucose

(Transitional zone)

(CS)
* B/L Adrenal hyperplasia

TSH ↑ fT4 ↓ → Subclinical Hypothyroidism
 Burning + Flaking of nipples + itching + desquamation + ulceration + redness

Paget's disease
 ↓
 DIC

58 A 60 years old woman complains of itching and scaling of the right breast nipple area, which on biopsy is confirmed as Paget's disease. On further work-up, a 2 cm in diameter palpable mass is noted under the skin of the nipple. Which of the following is likely to be an association?
 (A) Infiltrating ductal carcinoma B Lobular carcinoma in situ C Invasive lobular carcinoma
 D Intraductal papilloma E Fibroadenoma → Solid lump, 15-35 y/o, smooth, mobile

TBC ↓
 Anabolic steroid
 ↑ Glucocorticoid
 Nephrotic synd

Thyroxine binding globulins (TBGs) is one of three transport proteins responsible for carrying the thyroid hormones thyroxine and triiodothyronine in the bloodstream and have effect on thyroid function tests. Which of the following conditions can lead to increase level of abnormal (TBGs)?
 A Acromegaly B Hypothyroidism C Malabsorption
 D Malnutrition E Pregnancy + liver diseases + OCPs + Estrogen therapy

AGES scoring
 Age
 Grading
 Extent
 Size

59 A palpable mass is noted in right lobe of thyroid of a 45 years old man along with enlargement of cervical lymph nodes. Histopathological study reveal tumor cells having ground glass appearance (Orphan Annie) nuclei. What is the most likely diagnosis?
 A Anaplastic carcinoma B Follicular carcinoma C Medullary carcinoma
 D Papillary carcinoma E Papillary carcinoma → likely nephroblastoma

>100,000/ml organisms
 Asymptomatic
 Bacteriuria
 Pregnancy
 Infant

60 A 20 year old Male comes to the ER with severe lower abdominal pain which accompanied with nausea and vomiting fever for 1 day and he says he got no relief when he took paracetamol. He is also complaining of pain during urination. Which of the following investigations will you perform first to confirm your diagnosis?
 A Abdomino-pelvic Ultrasound to visualize Kidney, Ureter & Bladder B Blood CP C Blood culture
 D Urine Analysis E Urine Culture (UR/C) → Midstream urine OR suprapubic aspiration

DDM/Juvenile (Type-1)
 NIDDM/Adult onset (Type-2)

61 Thyroid function tests (TFTs) include T3, T4 and TSH. Name 1 st line single test for thyroid function evaluation?
 A Free T4 B T3 C TBG
 D TRH E TSH, fT4

GDM
 ↓
 macrosomia

62 Fasting Plasma Glucose (FPG) of a 48 year old senior male officer during his "Annual Check-up" was found to be 142 mg/dl. He was advised re-testing for DM by Glycosylated Hemoglobin (A1C). The result of A1C was found to be 6.8% (HPLC). Now he wants your opinion. Keeping in view the latest recommendations by international bodies (and ignoring the social aspects for the time being, at least) which of the following you think is the best option for this patient?
 A DM is confirmed B Requires repeating of FPG C Requires repeating of A1C
 D Requires OGTT E Requires Urinalysis

skin hyperpigmentation
 DIC

63 Calcium is the most abundant cation found in the human body and plays an integral role in neural transmission, enzyme activity, myocardial function, coagulation and other cellular functions. Which of the following disease can lead to hypercalcemia?
 A Hyperparathyroidism B Pancreatitis → hypocalcemia C Malignant disease
 D Sarcoidosis E Thyrotoxicosis

↑ Na⁺/Serum Osm
 ↓ Urine Osm
 DI

64 Glucose tolerance test can be done in pregnancy to screen for gestational diabetes. Which other condition this test is employed for?
 A Acromegaly B Adrenal hypofunctions C Hypothyroidism
 D Hyperparathyroidism E Pituitary Atrophy → Hypertension

Stop fluids
 Give salts + Dextrose
 (IV-3% B/S)

65 An acutely ill 20 years old female student is brought to emergency with fever, hypotension and obtunded mental status. Numerous petechiae and purpuric hemorrhages are scattered over the trunk. Gram stain reveals gram negative diplococci. Serum sodium is markedly decreased while serum potassium is increased. PT, APTT and d/Dimers are increased. What is the most likely diagnosis?
 A Acute kidney failure B Addison Disease C Disseminated intravascular coagulation (DIC)
 D Hemophilia E Waterhouse Friderichsen Syndrome (WFS)

S-100
 Zellballen pattern
 Polygonal, spindle cells
 surrounded by sustentacular cells

66 A 36 years old man is brought to the emergency department because of lethargy, weakness, and confusion. Serum sodium and plasma osmolality are markedly decreased while urine osmolality is increased. What is most likely diagnosis?
 A Conn syndrome B Cushing syndrome C Sheehan syndrome
 D SIAD syndrome E Nephrotic syndrome

67 A 35 years old woman presents with amenorrhea and weight loss despite increased appetite. The history and physical findings reveal exophthalmos, fine resting tremors, tachycardia, and warm moist skin. What is the most probable diagnosis?
 A Goiter B Hashimoto's thyroiditis C Hyperparathyroidism
 D Hypopituitarism E Hyperthyroidism → Grave's Disease

68 A 26 years old woman has episodic hypertension with headache, diaphoresis, and palpitations. MRI scan showed adrenal tumor arising from medulla. What urinary lab investigation can confirm the diagnosis?
 A Urinary Protein creatinin ratio B 24 hours urinary ketosteroids C 24 hour urinary proteins
 D Urinary Albumin E Vinyl Mandilic acid (VMA) → Pheochromocytoma

Cx of DM? Diabetes Neuropathy
 Most serious is? Heart disease + Stroke + Retinopathy
 MC acute Cx of DM? Hypoglycemia

↑ Catecholamines
 ↑ Metanephrines
 VMA, HVA
 Dopamine

69 A 30 years old woman presents with amenorrhea, galactorrhea, and visual field defects all of several months duration. MRI reveals a hypophyseal mass impinging on optic chiasm. Which hormone would be found in high concentration in serum?

- A ACTH *MC type* B GH *10-15%*
 C LH and FSH *<1%*
 D Prolactin *→ Prolactinoma* E TSH *→ least common type <1%*

Transphenoidal

70 Which of the following tests can be used to assess kidney functions at tubular level?

- A Calculation of GFR *→ GFR* B Creatinine clearance
 C Cystatin C
 D Fractional excretion of Na E Serum Urea *(Urine conc. test) / Fluid Deprivation test*

Tubular Test
 - Osmolality
 - Proteinuria
 - Glycosuria
 - Amino aciduria

71 A female patient presents to the OPD with complaint of vague discomfort in the lower abdomen and abnormal uterine bleeding for the past one year. Ultrasound scan and biopsy of the lesion showed the diagnosis of endometria adenocarcinoma. With regards to the diagnosis, what is the peak incidence of endometrial adenocarcinoma?

- A At any age B Perimenopausal years C Premenopausal years
 D Postmenopausal years *60 years* E Reproductive years

→ Bleeding
 → Bruising
 → Anal Excretion
 → Pain & tenderness
 ↓
 Non Habitual

VERTICAL INTEGRATION

72 A young male presented to ER with history of repeated sexual assaults. Upon local examination thickened and shiny silver hyper keratinized skin was found around perianal region. (Anus was deeply situated) A foreign residue assumed to be having same consistency as of lubricant was found. Upon DRE anal canal was dilated with lax anal sphincter. Which of the following option best applies to the above findings?

- A Bestiality B Habitual active agent of sodomy C Habitual passive agent of sodomy
 D Lesbian E Voyeurism

Local pelvic recurrence
 → Pelvic, Para-osteic nodes
 Shaving
 Funnled anus
 Piles, Fissure
 ↓
 Habitual

73 A couple had given birth to three children after 5 years of their marriage. They planned another baby but at 8 weeks of pregnancy amniocentesis was done and baby was found out to be born with down syndrome. Now the parents want to terminate the pregnancy. Which type of sterilization is this?

- A Contraceptive sterilization B Compulsory sterilization C Eugenic sterilization
 D Permanent sterilization E Therapeutic sterilization *→ For Mother's life*

(risk to child)
 Retard have anomalies

74 A young lady had been pregnant under surrogacy contract for 9 months and then delivered a healthy baby. After delivery she refused baby to handover to actual parents against the contract. What is the most suitable option among the following given below?

- A Breach of child B Cancellation of contract C Commercial transaction
 D Disagreement E Revoking of contract

Lochia
 - Rubra → RED (3-4 days)
 - Serosa → Pink (4-10 days)
 - Alba → yellow (10-14 days)

75 Police has brought a middle-aged woman in an alleged case of concealment of birth. On examination she has enlarged breasts exuding colostrum, Montgomery's tubercles present. Uterus is relaxed flabby and at umbilical level. (Lochia rubra is present in the vaginal canal. According to examination findings how many days have been passed since she has delivered the baby? *RED → 3-4 days*

- A 1 day B 2-3 days C 4-5 days
 D 6 days E 1 week

76 police has caught a renal transplant surgeon red handed for doing illegal renal transplants in a private setup. He now has been charged with violation of human tissue and organ transplant act. According to human organ transplant act of Pakistan what penalty he could face?

- A Imprisonment for up to 1 year and permanent removal of name from PMDC
 B Imprisonment for up to 2 years only
 C Imprisonment for up to 5 years and removal of name for 2 years initially
 D Imprisonment for up to 10 years and removal of name for 3 years initially *2-million fine*
 E Removal of name from PMDC permanently

77 A 25 years adult man was brought to forensic medicine department who was said to be a victim of an unlawful sexual act (sodomy). What is the most appropriate position for the examination of such case?

- A Knee elbow position B Left lateral position *→ Semi position* C Lithotomy position
 D Prone position E Right lateral position

78 A doctor was called by the prosecutor for cross examination during a court proceeding. The prosecutor questioned a physician about the way the abortion stick works during criminal abortion. The acceptable answer is?

- A Necrosis and infection of uterine wall B Nerve stimulation of uterus C Relaxation of Uterine Muscles
 D Separation of placenta E Uterine contraction *(membrane rupture + sepsis)*

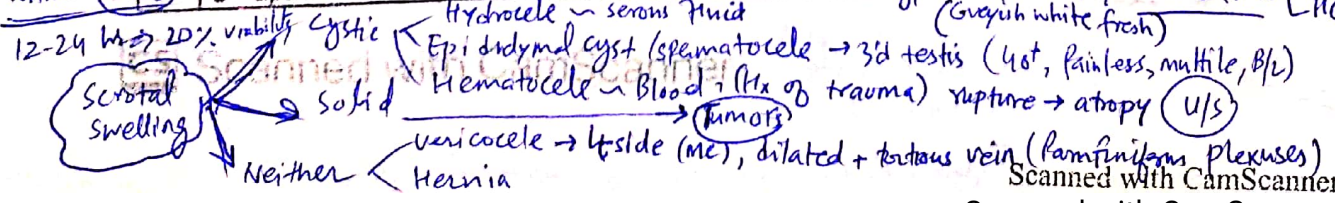
*Pren's Sign

79 During workup for fertility, a 34 year old man is found to have a 1x1 cm solid swelling in anterolateral aspect of right testis. What is the most probable diagnosis?

- A Torsion of the testis B Epididymo orchitis C Epididymal cyst
 D Lipoma of the cord E Testicular cancer *→ MC type Seminoma, Rt side (MC)*

Detorsion within 6hr

AFP nL
 HCG ↑



Triple test \rightarrow Hx & CBE + Mammography/ultrasound

80 A 54 years old woman is concerned about swelling in left breast. On examination, there is 4x5 cm lump in upper inner quadrant of left breast. There is also a single mobile lymph node palpable in left axilla. The contralateral side and axilla are normal. What is the next appropriate management option?

B Triple assessment
A Fine needle aspiration cytology
B Ultrasound of breast
C Reassurance and close follow up
D MRI of breast

Aspirate B cystic mass

81 A 62-year-old male presents to the OPD complaining that he has noted slight urgency, frequency, nocturia, and a decrease in the force of micturition. He is referred to have blood tests to include which of the following?

B Prostate specific antigen
A Carcinoembryonic antigen
C Carbohydrate antigen 19
D Lactate Dehydrogenase
E Alkaline phosphatase

Prostate CA
 28 weeks

82 A young married woman who was 4 weeks pregnant but does not want to continue the pregnancy because of her studies. There is no health issues to the mother other wise However, her husband is also not willing to abort the baby. Aborting a fetus according to the above scenario in Pakistani law, is considered as?

A Criminal abortion
B Has to be decided in the court
C Optional abortion
D Therapeutic abortion
E Upon mutual family decision

83 A wife of a young adult male reported to their family doctor that her husband feels pleasure for being pained and frequently asks to torture and bite him. What type of sexual perversion is this?

D Masochism \rightarrow Pain on himself
A Bondage \rightarrow Both
B Exhibitionism
E Sadism \rightarrow Pain on opposite

84 A 25 years old woman presents with vaginal bleeding and a positive pregnancy test. Her transvaginal ultrasound shows a non-viable Intrauterine pregnancy. What would be reasonable to offer her? Choose the best answer.

C Misoprostol (vaginal)
A laparoscopy
B Methotrexate
D Progesterone
E Serum hcg measurement

Good option for non viable

AML site of Met is? Bone
 Lymph node

85 A 60 years old man is distressed by severe backache due to metastatic carcinoma of the prostate. Which of the following is the appropriate treatment?

B Subcapsular Orchidectomy
A Radiotherapy
C Radical Prostatectomy
D Palliative Chemotherapy
E Brachytherapy

Hormone therapy

A surgical resident is asked by the consultant to perform a staging workup for a lady with invasive ductal carcinoma having a 5x5 cm lump in left breast with peau d'orange skin. Which of the following is the correct step.

B CT scan chest, abdomen, and pelvis;
A CT scan Chest, Abdomen and Pelvis
C MRI of breast
D MRI of Chest
E Positron Emission Tomography CT scan

First line in Metast Prostat CA
 (ADT)

MC type??
 DIC
 HER-2

87 A middle age 12 weeks pregnant women on her routine checkup found out during ultra sound that she is having a double sac with two fetuses. Initially in early days of her pregnancy there was only one fetus and sac. What is this condition called?

B Monochorionic dizygotic twins
A Dizygotic twins
C Monozygotic twins
D Superfecundation
E Superfetation

88 A 42 years old female presents to the OPD with pain in the right upper quadrant. Ultrasound examination reveals a 5x5 cm mass in the lower pole of right kidney. What is the next appropriate investigation?

C CT scan abdomen
A Intravenous Urogram
B X ray KUB
D Diagnostic Laparoscopy
E MRI abdomen

89 On screening examination during recruitment at an Army selection center, a 21 years old boy is found to have swelling in the left scrotum which feels like a bag of worms. What is the most probable diagnosis?

E Varicocele
A Epididymitis
B Hydrocoele
C Inguinal hernia
D Testicular torsion

Cardinal ligament

90 Uterine prolapse is usually due to weakness of

D Transverse cervical ligament
A Broad ligament
B Ovarian ligament
C Pubocervical ligament
E None of the above

91 A 24 years old gravida 2 para 1 presented with 4 months pregnancy and vaginal bleed since one week. On ultrasound there was snow storm appearance of uterus with absent fetal echoes and cardiac activity. Most probable diagnosis is:

D Molar pregnancy
A Ectopic pregnancy
B Intra uterine death
C Missed abortion
E Spontaneous abortion

92 A 54 year old woman attends the gynaecology department with postmenopausal bleeding. A transvaginal ultrasound measures her endometrial thickness as 8 mm. an endometrial biopsy shows moderately differentiated adenocarcinoma cells. What is the most appropriate staging investigation?

D CT scan of her thorax, abdomen and pelvis.
A Chest X ray
C Hysteroscopy
E Transabdominal ultrasound

serous tumours
 highly aw.
 TP53 mutations
 Endometrial carcinoma (glandular pattern)

Grade-1 # well diff. \rightarrow well formed Glands
 Grade-2 # Moderate (<50% solid sheet cells)
 Grade-3 # Poorly (>50% solid sheet cells)
 (Surgery + Radiation) chemo if spread beyond
 AML invasive CA of FGT? Endomet. CA
 PTEN
 KRAS
 PI3K/AKT

93	A 30 years old male with chronic renal failure is on waiting list for a transplant matching. Which of the following genetic locus of transplant antigen is used in matching the donor kidney with the recipient?	A ABO blood group D Major histocompatibility complex	(B) Human Leukocyte Antigen (HLA-I,II) E Rhesus antigen	C Immunoglobulin A
94	A 32 year old woman has a pelvic ultrasound as part of investigations for primary subfertility. The scan shows bilateral 5cm "kissing" ovarian cysts in the pouch of Douglas, both of which contain diffuse, low-level echoes giving a solid "ground-glass" appearance. She reports severe dysmenorrhea and dyspareunia. What type of ovarian cysts are these most likely to be? (d/t Pelvic Adhesion)	A Dermoid cysts D Tubo-ovarian abscesses	(B) Endometriomas E Serous cystadenomas	C Hemorrhagic functional ovarian cysts
	A 25 year old lady presents in 3rd trimester of pregnancy with burning micturition and increased urinary frequency. The commonest organism for UTI in pregnancy is:	(A) E. coli D Pseudomonas	B Klebsiella sp E Salmonella	C Proteus
96	A 24 years old woman presented to the OPD with painless lump in her right breast. On examination, there is a 2x2 cm firm (mobile swelling) in upper outer quadrant of right breast. What is the next step in management?	(A) Fine needle aspiration cytology D Core Cut biopsy	B Mammography E Excision of the lump	C Reassurance and follow up
97	A 55 years old woman presents with recurrent episodes of postmenopausal bleeding and post coital bleeding. Her previous gynaecological history is unremarkable, with a lifetime of normal cervical smears. She is not on any drugs, including HRT. Pelvic ultrasound and endometrial biopsy are normal. Vaginal examination demonstrates vaginal dryness, small petechiae and loss of rugae. What is the most appropriate next step in her management?	(A) Estrogen containing vaginal pessaries/creams D transdermal continuous combined HRT	B Flexible cystourethroscopy E Water based vaginal lubricants	C Outpatient hysteroscopic assessment of the endometrium.
98	In the workup of a patient with cervical cancer, otherwise confined to cervix of normal size an Intravenous pyelogram shows hydronephrosis. It indicates which stage	A Stage Ia D Stage IV a	B Stage IIb E Stage IV b	(C) Stage IIIb
99	A young girl 25 years old presented with complaint of menorrhagia, abdominal pain O/E there was a 20 week size mass arising from hypogastrium. The most likely diagnosis is:	(B) Fibroid uterus D Ovarian cyst	A Pelvic inflammatory disease E Mesenteric cyst	C Endometriosis
100	A 35 year old woman presents to infertility clinic with investigations suggesting anovulation. Which drug is used for ovulation induction.	(B) Clomiphene D GnRH analog	(A) Clonidine E Progesterone	C Estrogen
101	A 40 years old gentleman presented with dizziness, decreased energy level and lethargy. On examination his BP is 80/40 mmHg. He is pale looking with reduced facial hair and gynecomastia. His MRI shows a 2 cm pituitary macroadenoma. His hormonal tests show: Free T4 12 nmol/l (77-155 nmol/l) Free T3 0.8 nmol/l (1.2-2.8 nmol/l) TSH < 0.05 mIU/l (0.3-4 mIU/l) 9 am Cortisol 80 nmol/L (Normal >450 nmol/L) FSH 0.2 mIU/mL (1.5-12.4 mIU/mL) LH 0.4 mIU/mL (LH is 1.7-8.6 mIU/mL) Testosterone 2.5 nmol/L (10 to 35 nmol/L) Serum prolactin 25 ng/mL (Men: less than 20 ng/mL) IGF-1 40 ng/ml (90-360 ng/mL for people ages 40-54)			
	What is the next immediate step?	(C) Steroid replacement D Start him on cabergoline/Bromocriptin	B Replace thyroid hormones E Testosterone replacement	

→ Pelvic Endometriosis

→ PID (TOA) MRI PA

Fibroadenoma Breast-mouse

HRT indications
- Vasomotor
- Urogenital
- Osteoporosis
- MSK
- Atrophy

↑ Prolactin Suppress GnRH level

→ First line treat for GH secreting tumor? Transphenoidal Sx

MRI

Ovarian Endometrioma

kissing ovarian sign

25-40 years

Stage IIIb (pelvic side wall)
Stage IV b (Liver, Mets, Lungs)

≠ Hyperprolactinoma

Mass Effect (VFDs)

→ Transphenoidal surgery

MacroAdenoma > 1cm

- Functional (one/many hormones, Tes)
- Nonfunctional (Hormonal deficiency) d/t AP compression

First line for Prolactin secreting tumor

Fatigue + weight gain → GH

Basal insulin is preferred over ^{rapid acting} insulin

102 All children with type 1 diabetes mellitus require insulin therapy. Most require 2 or more injections of insulin daily, with doses adjusted on the basis of self-monitoring of blood glucose levels. The preferable insulin regimen is

A Conventional Insulin therapy: Twice daily mixed Insulin	B mixed Insulin breakfast + evening meal and mid-day short acting insulin.	C Intermediate acting breakfast + evening meal and three times short
D short acting breakfast + lunch and mixture of short acting and Intermediate acting at evening meal.	E Rapid acting before breakfast + lunch + evening meal + Long acting before bedtime. (N)	

Insulin Regime > 1 year child

Insulin Regime is an ideal mealtime insulin

103 A 30 years old man presented to a dentist with dental problems. The dentist referred him to a physician for his increased frequency of headaches. He is also complaining of change in his ring size and lately his shoe size has increased.

On examination he is 5 feet 10 inches. Blood pressure 170/100 mmHg. He has large Duffy hands, macroglossia, increased spaces between teeth, prognathism and frontal bossing. The physician investigated him and found him to be acromegalic with increased Growth hormones and IGF-1 and inability to suppress Growth hormone on OGTT. His pituitary MRI is showing 1.7 cm adenoma and his perimetry is normal

What is the best treatment option?

A Cabergoline	B Pegvisomant	C Pituitary Irridiation
D Transphenoidal surgery	E Wait and repeat tests after six months	

104 A 32-year-old woman attends her GP with weight loss and tremors. On questioning, she also reports loose stools and increasing anxiety. She has a past medical history of type 1 diabetes. You suspect Grave's disease in the patient. Which antibody test you will order to support your diagnosis?

A Anti 21-hydroxylase anti body	B Anti parietal cell antibody	C Antigliadin Antibodies
D Thyroid peroxidase Antibodies	E Thyroid stimulating hormone receptor antibody	

105 A 50-year-old man came to medical OPD with symptoms of recurrent episodes of watery diarrhea, associated with crampy abdominal pain and hot flushes.

On examination, pulse was 80/minute, BP 140/80 (lying), and 120/70 (standing)

Chest: bilateral wheezes + bronchospasm

CVS: pan systolic murmur along the left sternal border (Rapid heart beat)

What is the diagnosis?

A Carcinoid Syndrome	B Coeliac disease	C Giardiasis
D IBS	E Congestive heart failure	

5 HIAA → urine

Cx: Carcinoid Resect Mesenteric fib Carcinoid cancer

106 The child has excessive frequency of passing urine and has to seek permission from the teacher in the class to leave the lessons and go to the wash room. There is history that ants are attracted to the urine. Currently he has lost weight despite good oral intake. urine is not smelly, temp is 101.0 Urine dipstick shows no protein. Blood glucose is 220mg/dl. The various possible diagnoses are:

A Urinary tract infection	B Psychogenic polydipsia	C Diabetes mellitus
D Malaria	E Diabetes insipidus	

107 A 60-year-old woman was admitted as an inpatient with uresepsis and an acute kidney injury (AKI). Her Potassium level is 6.8 mg/dl. The trainee medical officer on duty asks you to give Calcium gluconate to this patient.

What's the role of calcium gluconate the management of hyperkalemia? (0.5-1.0 mL/kg IV)

A Decrease potassium levels by unknown mechanism	B Increase gastrointestinal loss of potassium	C Increase renal excretion of potassium
D Intracellular shift of potassium	E Stabilization of cardiac membrane → Ca^{2+} gluconate	

108 A 50 years old female presented with three years history of anorexia, nausea, generalized weakness and depressive symptoms. His blood pressure 180/100.

Her lab results are as follow.

Hb 8 gm/dl ↓

SGPT 42 ↑

S Creatinine 6 mg/dl (0.5-1.5 mg/dl) ↑

S calcium 12 mg/dl (8.5-10.5 mg/dl) ↑

S PTH 400 pg/ml (10-55 pg/ml) ↑↑↑

What is the Most likely cause of hypercalcaemia in this patient?

A Parathyroid Adenoma	B Parathyroid Carcinoma	C Pagets Disease
D Renal Cell carcinoma	E Tertiary Hyperparathyroidism (ESRD)	

Insulin Glucose

β-agonist

(vit-D ↓) CKD

	PTH	Ca ²⁺	PO ₄	vit-D
Primary HPTH →	↑	↑	↓	nl/↓
Secondary HPTH →	↑	↓/nl	↑/nl	↓↓↓
Tertiary HPTH → (ESRD)	↑↑↑	↑	↑	↓/nl

Thyrotoxicosis ⇒ Depression + Inactivity + Lethargy + Tremors + Withdrawn Behaviour

T₃-toxicosis
 Floxir Nodules
 Goitre
 Toxic adenoma
 Tender, diffuse
 viral infection
 mild Hypertension

Agammaglobulinemia

Ab refractory hypochloremia

109

A 33-year-old woman presents with weight loss and excessive sweating. Her partner reports that she is 'on edge' all the time and during the consultation you notice a fine tremor. Her pulse rate is 96/min. A large, non-tender goitre is noted. Examination of her eyes is unremarkable with no evidence of exophthalmos.

Free T₄ 26 pmol/l ↑ (12-30 pmol/L)
 Free T₃ 12.2 pmol/l (3.0-7.5) ↑
 TSH < 0.05 mu/l ↓ (0.4-4.0 mu/L)

What is the most common cause of the diagnosis under consideration?

- A De Quervain's thyroiditis
- B Graves' disease
- C Hashimoto's thyroiditis
- D T₃-secreting adenoma
- E Toxic multinodular goiter

Hypothyroid state

Radial Thyroiditis

Stony Hard Pressure Effects

(TSH) TPO-Ab D₁₇Antib Hypothyroid

110

A 54-year-old woman presents systemically unwell with high grade fever and sore throat. She has recently started carbimazole for hyperthyroidism. What is the most important blood test to perform?

- A Cortisol
- B Full blood count
- C Liver function tests
- D Prothrombin time
- E Urea and electrolytes

111

A 20-year-old athletic man with no significant past medical history is found to have isolated asymptomatic microscopic haematuria on routine physical exam. He is not on any medications and does not use illicit drugs. Which one of the following observations suggests haematuria of glomerular origin?

- A Absence of RBC and WBC casts
- B Decoy cells in urine sediment
- C Dysmorphic RBCs or acanthocytes in urine sediment
- D Isomorphic red blood cells (RBCs) in urine sediment
- E Isomorphic RBCs and white blood cells (WBCs) in urine sediment

112

55-year-old woman was admitted with recurrent severe hyperkalemia, that only transiently improve with insulin and dextrose infusions. She takes no regular medications and has no significant past medical history. What would be an additional prescription to help prevent this recurrence?

- A Calcium gluconate
- B Calcium resonium
- C Furosemide
- D Magnesium supplementation
- E Spironolactone

↑ K⁺ elimination
 cation exchange resins, diuretics

113

A 15 years old school going student presented to emergency deptt with chief complaints of vomiting, abdominal pain and increased urinary frequency for the last three days. On examination his blood pressure is 100/80mm Hg, pulse rate is 102 beats per minute and regular. His skin is dry and flushed.

These investigations are available at the moment.
 Random blood sugar 350 mg/dl.
 Blood PH 7.25
 S creatinine 1.1 mg/dl
 Serum ketones positive.

What is the best first line treatment for this patient?

- A IV bicarbonate
- B IV 0.9% Normal Saline
- C IV antibiotics
- D IV 0.45% Dextrose Saline
- E S/C Heparin

DRA
 2-3L 0.9% N/S (1-3 hrs) → 0.45% N/S (250-500ml/hr)
 ↓
 5% Gluc + 0.45% N/S 150-250 ml/hr
 0.1 U/kg → IV infusion → 0.05 U/hr
 IV Bolus (Regularly)
 Insulin

114

A 40 year old female presents to the OPD with history of worsening headache, weight gain and generalized weakness. She also turned out to be hypertensive and raised blood sugar levels on a couple of occasions. An overnight dexamethasone suppression test was done which showed no cortisol suppression. What is the most commonest cause of above mentioned symptoms and test?

- A Conn's syndrome
- B Cushing's Disease
- C Pheochromocytoma
- D Small cell lung cancer
- E Thyroid carcinoma

ab IV pyelogram
 excretory urography

115

A 30-year-old man presents to the Emergency Department with nausea, vomiting, severe flank pain, and hematuria. Which one of the following diagnostic images is APPROPRIATE in this subject?

- A A plain film of the abdomen (KUB)
- B An ultrasound of the kidneys
- C An intravenous urogram (IvU/IvP)
- D An unenhanced helical (spiral) CT of abdomen
- E An MRI

Noncontrast CT → Most appropriate for both suspected stones disease and recurrent symptoms of stone diseases.
 Contrast CT → Kidney injury

Both structure + function - obstruction

Renal Injury Grades

- 1 → contusion, microscopic (Gross Hematuria) → (Not detectable)
- 2 → Non expandable Hematoma, Cortical laceration < 1cm deep
- 3 → Parenchymal laceration > 1cm deep cortex + No Extra vasation
- 4 → Parenchymal laceration deep to CMJ + CP
- 5 → Multiple, Major lacerations, shattered

... your 60 year old male presented to emergency department with history of vomiting and watery diarrhea for 2 days. His vitals are as follows; blood pressure 105/72 mmHg, pulse 94 bpm, respiratory rate 14/min, temperature 36.9 deg C. On examination, the abdomen is soft and non-tender, Capillary refill time is 2 seconds and his skin turgor is normal. The patient's mucous membranes appear dry. His GCS is 15/15 and he is answering all questions appropriately.

His initial blood tests show the following:
 → Na+ 123 mmol/L (135 - 145)
 → K+ 3.6 mmol/L (3.5 - 5.0)
 → Urea 10.3 mmol/L (2.0 - 7.0) *↑ BUN*
 → Creatinine 131 μmol/L (55 - 120)

ARF - Pre-RENAL AKI
 * hypovolemic hyponatremic
 BUN/Cr *↑*
 * not euvolemic hyponatremic
 → for severe neurologic symptoms
 → symptomatic hyponatremia

With regards to this patient's hyponatremia, which of the following is the best approach?
 A Encourage oral fluids | B Fluid restriction to less than 1 litre a day | C IV 3% sodium chloride
 D IV 5% dextrose | **E IV isotonic normal saline + Electrolytes**

117 A 50-year-old man came to medical OPD with symptoms of recurrent episodes of watery diarrhea, associated with crampy abdominal pain and hot flushes. On examination pulse was 80bpm, BP 140/80 (lying), and 120/70 (standing). Chest: bilateral wheezes. CVS: pan systolic murmur along the left sternal border. What is the serum biomarker of this condition?
 Dx: carcinoid syndrome

A Serum chromogranin A | B Serotonin level | C Sandostatin level
 D Serum metanephrines | **E 5-hydroxyindoleacetic acid 5HIAA**

118 You are consulted on a 28-year-old man with IgA nephropathy and proteinuria of 1.2 g/day. His BP is 134/84 mmHg with a heart rate of 70 BPM. His creatinine is 1.0 mg/dL. He has no other symptoms. Which one of the following medications you recommend to improve his proteinuria?

A Amlodipine | B Atenolol | C Chlorthalidone
D Lisinopril | E Prednisone

ACEIs ARBs
 ↓ BP
 ↓ protein loss

119 Most Common form of Nephrotic Syndrome is:
 A Minimal Change Disease (children 2-6 years)
 B Focal Segmental glomerulo-sclerosis (Adults FSGS)
 C Membrano proliferative glomerulonephritis
 D Membranous Nephropathy (Adults) → C3 glomerulopathy

120 A 24 year old thin, lean female presented to the opd with dizziness and depressive symptoms. She was also complaining of abdominal pain with episodes of vomiting. On examination she had a dark brown complexion and her BP was 90/60. Keeping the history in mind what is the most specific investigation you would like to do?

A Blood glucose level | B Serum Calcium | C Thyroid function tests
 D Serum ferritin | **E Synacthen test** (Addison Disease) → ACTH (Primary AI)

Nephrotic Syndrome	Nephrotic Syndrome	Synacthen Test
<ul style="list-style-type: none"> Massive proteinuria Hypoalbuminemia Edema Hyperlipidemia 	<ul style="list-style-type: none"> Hematuria Oliguria Azotemia Hypertension 	<ul style="list-style-type: none"> - ACTH is given in Morning - ↑ Cortisol (nl) But X Primary AI - Extra - ACTH ↑

ACTH Stimulator Test

→ Minimal Change Disease (lipid nephrosis)
 → MCC of Nephrotic Syndrome
 → MC GN in Adults? IgA Nephropathy
 → MCC of recurrent hematuria? Berger's Disease
 * Hematuria after ARF - 2-3 days? IgAN
 - 2-3 weeks? PSGN
 * Alports Syndrome? Kidney + Ear + Eye (Basket wave appearance) (α5-IV collagen)