

FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA Final Examination for Medical Degrees – February 2023

OBSTETRICS & GYNAECOLOGY - PAPER I

Tuesday 21st February 2023

1.00 pm - 3.00 pm (2 hours)

Answer all five questions

Answer each question in a separate book

Operative details are not required

1. Discuss the strategies which could be adopted or implemented to improve the pregnancy outcome, related to medical disorders complicating pregnancy.

(100 marks)

2.

	2.1	Define the term "Induction Of Labour" (IOL).	(10 marks)
	2.2	List four (4) indications for IOL.	(20 Marks)
	2.3	List four (4) factors which favour successful IOL.	(20 Marks)
	2.4	Briefly discuss the process of IOL.	(35 Marks)
	2.5	List three (3) complications of IOL.	(15 Marks)
3.			
	3.1	List five (5) absolute contraindications for Vaginal Birth After	
		Caesarean delivery (VBAC).	(20 Marks)
	3.2	List five (5) factors that would potentially increase the risk of	
		uterine rupture in a woman with VBAC (other than the absolute	
		contraindications).	(20 Marks)
	3.3	List four (4) clinical features associated with impending uterine	
		scar rupture.	(20 Marks)
	3.4	Discuss the basic principles of management of impending	
		uterine scar rupture.	(40 Marks)

4. A 39 year old mother of two children with previous vaginal deliveries is presented to the gynaecology ward complaining of lower abdominal pain, faintishness and mild per vaginal bleeding. Her last regular menstrual period was six weeks ago. She has past history of pelvic inflammatory disease.

On examination she is pale, pulse rate is 120 bpm, blood pressure 70/50 mmHg.

4.1	List four (4) possible causes for the above presentation.	(20 Marks)
4.2	List giving reasons four (4) investigations to be carried out in	·
	this patient on admission.	(20 Marks)
4.3	What is the most likely diagnosis? Justify your diagnosis answer	
	with the relevant information given above.	(20 Marks)
4.4	Describe the basic principles of the management of this patient.	(40 Marks)

- 5. A 41 year old woman is admitted to gynaecology ward with a history of persistent mild per vaginal bleeding for three weeks duration. She has a history of complete evacuation of a hydatidiform mole which was confirmed by histology a month ago.
 - 5.1 Explain how complete hydatidiform mole developed from parental germ cells. (20 Marks)
 5.2 Name six (6) relevant investigations that you would request on this patient. (30 Marks)
 5.3 Name four (4) abnormalities of the above investigations you mentioned in 5.2 that would indicate the need of chemotherapy. (20 Marks)
 5.4 Briefly discuss single drug regimen chemotherapy for this condition. (30 Marks)
