



**Faculty of Medicine**  
**University of Ruhuna**  
**Final Examination for Medical Degree – April-May 2005**  
**Medicine Paper I**  
 26 April 2005, 0900 -1200 hrs

**Answer all TEN questions**  
**Answer each part in a separate book**

**Part A**

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|-----|---|----------|
| 1.1 | List FIVE common causes of chronic atrial fibrillation.   | 25 marks |
| 1.2 | Describe how you would investigate and treat a 50 year old man who has chronic atrial fibrillation.                                       | 75 marks |
| 2.1 | Describe the symptoms and signs of miliary tuberculosis.  | 60 marks |
| 2.2 | List FOUR investigations that would confirm the diagnosis in a patient with miliary tuberculosis. Briefly describe the expected findings. | 40 marks |

**Part B**

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| 3   | A previously well, 30 year old male was admitted with severe pain in the epigastric area of one day duration. He had vomited a few times before the admission to hospital. The patient had consumed alcohol during the last four days at a family function. On examination, he was in pain and had marked tenderness over the epigastrium. The pulse rate was 120 beats per minute and the blood pressure was 100/60 mmHg. |          |
| 3.1 | List TWO possible causes for his condition   | 20 marks |
| 3.2 | List TWO investigations which will confirm the underlying diagnosis.   | 20 marks |
| 3.3 | List FOUR therapeutic steps you would take in the immediate management of this patient.  | 60 marks |
| 4   | Explain the pathophysiology of the following:  |          |
| 4.1 | Proteinuria in minimal change glomerulonephropathy   | 30 marks |
| 4.2 | Hypocalcaemia in a patient with chronic renal failure  | 30 marks |
| 4.3 | Acute renal failure in multiple myeloma  | 40 marks |

**Part C**

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|-----|---|----------|
| 5   | A 25 year old woman presented with progressive breathlessness. Three months previously she was prescribed ferrous sulphate for microcytic hypochromic anaemia. Haematological investigations during the present admission revealed a haemoglobin of 6.8g/dL and the blood picture showed microcytic hypochromic anaemia with normal white blood cells and normal platelets. |          |
| 5.1 | List FOUR probable causes for the recurrence of anaemia in this patient   | 40 marks |
| 5.2 | Describe the features in the history, physical examination and investigations that would support any one of the conditions you mentioned in 5.1.  | 60 marks |
| 6   | Briefly describe the medical management of the following patients:  |          |
| 6.1 | A 50 year old woman presenting to the medical clinic with a history suggestive of stable angina. The serum TSH was 35 mu/L (normal 0.5 to 5 mu/L)   | 50 marks |
| 6.2 | A 60 year old woman with a multinodular goitre presenting with breathlessness and a regular heart rate of 140 beats per minute and serum free thyroxine of 12 ng/dl (normal 4-8 ng/dl)  | 50 marks |

**Part D**

- 7 A 50 year old man is admitted with fever and myalgia of five days duration. On admission he complains of passing dark urine in reduced amounts.

On examination, he is febrile, icteric and has diffuse tenderness in the muscles. The pulse was 100 beats per minute, blood pressure 120/80 mmHg and jugular venous pressure elevated 6cm above the sternal angle. Auscultation of the lungs revealed bilateral basal crepitations.

- 7.1 What is the most likely diagnosis? 20 marks  
7.2 Give ONE other possible diagnosis? 10 marks  
7.3 Give FIVE investigations that you would perform on admission, which will help in the management of this patient. Indicate the expected results. 50 marks  
7.4 Name TWO clinical and TWO biochemical parameters that are useful in monitoring during the acute phase of the illness. 20 marks

**Part E**

- 8 A 32 year old woman presents with sudden onset left hemiparesis due to a stroke.

- 8.1 List FIVE important items of information in the history that you will obtain to find out the underlying cause indicating the relevance of this information. 50 marks  
8.2 List FIVE physical signs that would indicate an underlying cause. Briefly explain the significance of each sign. 50 marks

**Part F**

- 9 A 45 year old woman was brought to the hospital by her family members. She was noticed to be refusing food, not sleeping at night and crying for no reason at times over a period of ten days. When talked to, the patient said that it's no use her coming to the hospital because her body above the neck is "dead"

- 9.1 What is the psychopathological feature elicited in the history? 10 marks  
9.2 What is the likely diagnosis? 10 marks  
9.3 Give FIVE other clinical features you may see in this patient 30 marks  
9.4 How would you assess this patient on admission to hospital? 20 marks  
9.5 Briefly describe the management of this patient 30 marks
- 10.1 Discuss the management of dissociative fits. 50 marks  
10.2 How does it differ from epilepsy? 50 marks
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