



FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA, GALLE.

Final Examination for Medical Degrees - February/March 2003

OBSTETRICS & GYNAECOLOGY - PAPER I

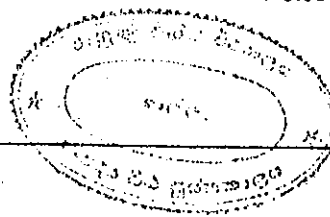
Wednesday 26th February, 2003

9.00 am to 12.00 noon
(3 hours)

Answer All Six Questions.

Answer Each Part in a Separate Answer Book.

Excessive details not required.



Part A

- 1.1 Name five (05) investigations used to detect glucose intolerance in pregnancy and list the advantages and disadvantages of each. (Marks 30)
- 1.2 Name two (02) Investigations used to monitor the glycaemic control of a pregnant woman and explain their importance. (Marks 15)
- 1.3 What are the risks to the fetus and neonate if the mother has diabetes mellitus and how could they be prevented? (Marks 30)
- 1.4 Describe the steps that should be taken when an insulin depended mother has an induction of labour. (Marks 25)

A 30 year old woman presents with a period of amenorrhoea of eight (08) weeks, a positive urinary pregnancy test and a complaint of nausea and vomiting for which she has not taken any treatment.

- 2.1 Name the two (02) most important investigations you would recommend and explain their importance. (Marks 15)
- 2.2 Name and justify two (02) other investigations which may be relevant depending on the results of the investigations mentioned in 2.1 above. (Marks 10)
- 2.3 If she also complains of bleeding per vaginam of two days duration, name the conditions you will consider in the differential diagnosis and explain how you will clinically differentiate between them. (Marks 60)
- 2.4 In the conditions mentioned in 2.3 above under what circumstances would further evaluation with pelvic ultrasound be inappropriate? (Marks 15)

Part B

- 3.1 List the factors predisposing to puerperal infections. (Marks 20)
- 3.2 What steps would you take to minimise puerperal infections? (Marks 30)
- 3.3 Outline the investigation and rational management of puerperal infections. (Marks 50)

An 18-year-old school girl presents with primary amenorrhoea.

- 4.1 List the possible causes of the amenorrhoea. (Marks 30)
- 4.2 Outline the steps you would take to find out the cause of the amenorrhoea. (Marks 40)
- 4.3 Outline the principles of management of this girl. (Marks 30)

Part C

5. A 32 year old primigravida presents to the antenatal clinic at 28 weeks of gestation with excessive oedema of feet, blood pressure of 120/80 mmHg and no albuminuria.

5.1 List the possible causes for this clinical situation. *(Marks 2)*

5.2 On further evaluation and investigation, if no other abnormality is detected in this patient, how will you counsel this patient? *(Marks 1)*

5.3 If this patient's blood pressure was 150/100 mmHg, how will you manage her? *(Marks 2)*

Part D

6. 6.1 What is genuine stress incontinence (G.S.I.) of urine and how does it differ from urge incontinence? *(Marks 2)*

6.2 Explain why a parous, postmenopausal female has a higher risk of G.S.I. *(Marks 5)*

6.3 List the treatment options available for the treatment of G.S.I. *(Marks 2)*