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UNIVERSITY OF JAFFNA, SRI LANKA

SECOND EXAMINATION FOR MEDICAL DEGREES (1st) DECEMBER 2016

Parasitology

Date 27.12.2016	Time allowed: 2 hours
Answer all four questions	

- A 40 year old labourer was admitted to the Teaching Hospital Jaffna with a complaint of fever for more than 5 days, with pain in the right hypochondrium. He had a history of heavy consumption of alcohol, especially toddy. On abdominal examination, there was tenderness with hepatoniegaly extending 5 cm below the right costal margin.
 - 1.1 What is the most likely parasitic condition? (05 marks)
 - 1.2 Name the parasite responsible for the above condition. (05 marks)
 - 1,3 What are the other investigations which would help you to arrive at a confirmatory diagnosis of the above condition? (50 marks)
 - 1.4 What are the precautionary measures to be taken in order to prevent the transmission of the parasite you mentioned in 1.2? (40 marks)
- 2. A 37-year male presented to the Dermatology clinic with a history of 2 non-healing lesions on the right lower arm. Clinical examination revealed that the lesions were painless erythematous nodules, with overlying crust and central ulceration. The ulcers had slowly increased in size over 3 months and had failed to heal despite several courses of systemic antibiotics.
 - 2.1 What is the most likely parasitic condition? (05 Marks)
 - 2.2 Name the parasite known to cause the above condition in Sri Lanka. (05 Marks)
 - 2.3 Outline the steps involved in the sample collection and laboratory investigation for the confirmation of the above condition. (25Marks)
 - 2.4Briefly describe the therapeutic modalities currently used in the treatment of the above condition in Sri Lanka. (25Marks)
 - 2.5 Discuss the measures to be taken for the prevention and control of the above infection in Sri Lanka. (40Marks)





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- A 17 year old boy, bitten by an unknown snake in a playground, was brought to the hospital within half an hour of being bitten. On arrival he was conscious, but bilateral ptosis was noted. He complained of severe pain at the site of the bite, giddiness and retrosternal chest pain. He also vomited and passed dark color urine. The bitten limb was grossly swollen and the fang marks were evident with surrounding erythema. His blood was incoagulable when assessed by the 20WBCT. He was treated initially with 10 vials of Indian Polyvalent Anti-venom Serum (AVS) and soon after the AVS administration he developed a severe anaphylaxis.
 - List the common venomous snakes found in Sri Lanka. 3.1 (15Marks)
 - 3.2Which of the snakes that you mentioned in 3.1 is most likely to cause the clinical (05 Marks) presentation described above?
 - 3.3 Give reasons for your answer to 3.2. (30 Marks)
 - Discuss the reasons why many patients develop severe anaphylactic reactions (25 Marks) during the administration of Indian Polyvalent Anti-venom Serum (AVS) in Sri Lanka.
 - Briefly describe the recommended first aid measures for snake bite in Sri Lanka (25 Marks)
- Write short notes on the diagnosis and treatment of the following parasitic conditions.
- www.FirstRanker 4.1 Scabies (30 Marks)
 - 4.2 Trichomoniasis (30 Marks)
 - Enterobiasis (Pin worm infection) (40 Marks)