

4				•	-
1	DI	1	h	בו	is:
		IU	w	ıa	13.

a) Psychosis				
--------------	--	--	--	--

o) Fear of animal

- c) Anxiety
- d) Neurosis

Correct Answer - D Neurosis

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2. Not a selective serotonin reuptake inhibitor

a) Fluoxitine	
b) Fluoxamine	
c) Buspirone	

d) Citaloforamin

Correct Answer - C
Buspirone





3.	Pavlov's experiment is a	an example	of which of	the following	learning t	heory?
----	--------------------------	------------	-------------	---------------	------------	--------

- a) Modeling
- b) Classical conditioning
- c) Operant conditioning
- d) Learned helplessness

Correct Answer - B

Pavlov's experiment is an example of Classical conditioning.

Classical conditioning is a process of learning, by which a previously neutral stimulus elicit an identical or similar response to one originally elicited by another stimulus as a result of pairing of the two stimuli.

Ref: Kaplan & Sadock's Comprehensive Textbook of Psychiatry, 9th edition, page 647.

Beginning Psychology By Malcolm Hardy, 5th edition page 54; Universal Principles of Design By William Lidwell, page 174; Psychology: Concepts and Applications By Jeffrey S. Nevid, 3rd edition page 176.



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4_ Which of the following could be a component of conversion disorder?

- a) Pseudoseizures
- b) Derealisation
- c) Depersonalisation
- d) Amnesia

Correct Answer - A

Pseudoseizure can occur in conversion disorder.

Paralysis, blindness and mutism are the most common conversion disorder symptoms. Anaesthesia and paresthesia especially of the extremities are the most common sensory symptoms.

Other sensory symptoms includes deafness, blindness and tunnel vision.

Motor symptoms associated with it are: abnormal movements, gait disturbance, weakness and paralysis.

One gait disturbance seen in this is ataxia abasia, which is a wildly ataxic, staggering gait accompanied by gross, irregular, jerky truncal movements and thrashing and waving arm movements.

Ref: Kaplan and Sadock's Concise Textbook of Clinical Psychiatry, 3rd Edition By Benjamin J. Sadock, Page 279



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5. The most common substance of abuse in India:

a) Cannabis	
b) Tobacco	
c) Alcohol	
d) Opium	

Correct Answer - A

By most estimates, cannabis (Indian hemp plant) remains the *world's most commonly used illicit drug.*

Cannabis is perhaps the most widely used drug in India too, due to it's easy availability. Cannabis, a substance that has been traditionally used in India as an intoxicant. It is produced from the plant cannabis saliva or Indian Hemp plant. It grows in the wild over most parts of the country.

Ref: Kaplan & Sadock's Synopsis of Psychiatry 9th Edition, Page 444, 424-27; Park's Social and Preventive Medicine 18th Edition, Page 635; Shorter Oxford Textbook of Psychiatry 5th Edition, Page 332-342



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6. Which of the following drug is not used in the treatment of akathisia?

- a) Benzodiazepam
- b) Propranolol
- c) Trihexyphenidyl
- d) Haloperidol

Correct Answer - D

Akathisia refers to somatic restlessness which occur in patients treated with first generation antipsychotics.

Among the options given haloperidol is an old generation antipsychotic which causes a side effect of akathisia.

Drugs commonly used to treat akathisia are propranolol, benzodiazepines and anticholinergics.

Ref: American Psychiatric Association Practice Guidelines for the treatment of Psychiatric Disorders 2006, page 649





7	The current agent of choice for treatment of bipolar affective (manic-depressive)
1	• disorder is:

- a) Chlorpromazine
- b) Haloperidol
- c) Diazepam
- d) Lithium carbonate

Correct Answer - D

Lithium carbonate is the current agent of choice, particularly during the manic phase. Because the onset of action is slow, concurrent use of antipsychotic agents such as chlorpromazine or haloperidol may be necessary to control mania.

Concurrent use of tricyclic antidepressants may be necessary in the depressive phase.

Monitoring of lithium levels is necessary because of the serious nature of the adverse effects (neurologic, renal, cardiac).

Ref: Ropper A.H., Samuels M.A. (2009). Chapter 57. Depression and Bipolar Disease. In A.H. Ropper, M.A. Samuels (Eds), *Adams and Victor's Principles of Neurology*, 9e.



8. Most common complication of modified ECT

a) Intracerebellar Bleed
b) Fracture spine
c) Body ache
d) Amnesia

Correct Answer - D

D i.e. Amnesia

- * Electro convulsive **therapy (seizure)** *increases production of brain derived neurotrophic factor (BDNF)Q.* Madsen proposed *generation of new neurons in the hippocampus* may be an important neurobiological element underlying the clinical effects of ECT.
- * ECT is most commonly indicated (-85% of all ECT) and most effective in treatment of major depression (with psychosis / delusions /or suicidal tendency)Q. ECT is indicated in psychotic (delusional) depressionQ because nihilistic delusions may induce suicidal tendency, whereas ECT is not indicated in neurotic depression (dysthynia), cyclothymiaQ. ECT may be useful in MDP (bipolar) in decreasing duration of depressive episode. ECT is not (or less) useful in chronic conditions like chronic schizophrenia (with negativ symptoms esp)Q. Use of ECT is not the first line (choice) of treatment in mania & schizophrenia (lithium & anti psychotics are mainstay of treatment). Panic disorder is also treated with drugs not ECT.

Indications of ECT

* ECT is most useful in acute and positive symptoms (eg suicidal tendency, catatonia), whereas it is least effective in chronic conditions and negative symptoms







* Clinical indications of ECT include

Primary use Secondary use

1. Rapid definitive 1. Failure to response respond or

required on medical

or

intolerance to

psychiatric grounds pharmacotherapy in

current

2. Risk of

alternative episode i.e. drugs

treatments out

are

weight benefits ineffective,

contraindicated or

3. Past history of have serious side

poor response to effects

psychotropics or 2. Rapid definitive

good response to response

ECT necessitated by

deterioration of

4. Patient the patients

preferance condition.

* ECT should be considered when the onset of disorder is acute, when changes in *mood*, *thought*, *and motor activities are pronounced*, when the cause of disorder is believed to be biochemical or physiological, when the condition interferes with the daily life or when other treatments have failed. Diagnosis for which ECT may be indicated include (especially when a/w delusions).

Major (Severe) Mania Schizophrenia Other Depression with (Bipolar (Severe conditions

1. Psychosis (i.e. disorder) Psychosis) 1. Delirium d/t delusional or 1. Psychosis 1. Catatonia general

medical

psychotic 2. Manic particularlyQ conditions or depression)Q, who delirium 2. Schizoaffective substance are guilt ridden or 3.Rapid cycling disorder (i.e. intoxication



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feel worthless, who states *depressive* 2. Catatonia d/t believe others 4. Acute *features*)*Q* and GMC, neurolept control their lives & uncontrolled schizophreniform malignantContraindications

I. Absolute (relatively) *Raised Intra Cranial TensionQ* d/t fear of brain herniation.

... Relative

- * Cerebro vascular Accident (CVA) = intracerebral hemorrhage
- * Recent Myocardial infarction (MI)
- * Severe hypertension
- * Pheochromocytoma Severe Pulmonary disease
- * Retinal detachment Space occupying intracerebral lesions (except for small, slow growing tumors without edema or other mass effect)
- * Unstable vascular aneurysms or malformations Complications Direct (Modified) ECT (when ECT is given without muscle relaxant & anesthesia)

Most common side effect is fracture T4 T8 spineQ Causes decreased intraocular tension (JOT)

. Modified ECT (with MR & anesthesia) Both retrograde & antegrade amnesia is found but the *most common complication* is *retrograde amnesiaQ* Antegrade amnesia usually resolves within 5 hours whereas retrograde memory deficits may take 6-9 *monthsQ*



9. Visual analogue scale (VAS) most widely used to measure

a) Sleep		

- b) Sedation
- c) Pain intensity
- d) Depth of Anaesthesia

Correct Answer - C
C i.e. Pain intensity

10. Visual hallucinations is seen in:

a) Alcoholism		

b) Mania

c) Depression

d) Phobia

Correct Answer - A A. i.e. Alcololism

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11. All are true regarding somatization dosorder except:

- a) Maintain sick role
- b) 4-Pain symptoms
- c) 1-Sexual symptom
- d) 1-Pseudo neurological symptom

Correct Answer - A www.FirstRanker.com A i.e. Maintain sick role



12. La belle indifference is seen in

a) Conversion Reaction
b) Schizophrenia
c) Mania
d) Depression

Correct Answer - A

A i.e. Conversion reaction

La belle indifferenceQ is in-appropiate attitude of calm or lack of concern about one's disability. It is seen in conversion (dissociative) disorderQ (but not specific), physical illness etc.

MMMKIRSIRAM



13. Markedly inappropriate sensitivity, self importance and suspiciousness are clinical features of

a) Aantisocial	
b) Historic	
c) Schizoid	_
d) Paranoid	

Correct Answer - D
D i.e. Paranoid P

14. Antidepressant drug used in nocturnal eneuresis is:

a) Imipramine	
b) Fluoxetine	
c) Trazdone	
d) Sertaline	

Correct Answer - A

A i.e. Imipramine

Adverse effects of TCAs

- I. Anticholinergic Dry mouth, bad taste, urinary retention, blurred vision, palpitation, constiPation.
- 2. Sedation, mental confusion, weakness.
- 3. Increased appetite and veigfit gain.
- 4. Sweating andfine tremer
- 5. Decreased seizure threshold (clomipramine, maprotiline & bupropion).
- 6. Postural hypotension > Marimum by amitripSline Goodman & Gillman 11/e p. 4j3.
- 7. Cardiac arrythmia; Maximum by amitriptyline and dosulpin.



15. Not a feature of Wernicke's Korsakoff Syndrome

a) Ataxia			

- b) Psychosis
- c) Normal pupillary response
- d) Opthalmoplegia

Correct Answer - C
C i.e. Normal pupillary response



16. The site of lesion in Korsakoff's psychosis is

- b) Corpus striatum
- c) Mammilary Body
- d) Cingulate gyrus

Correct Answer - C
C i.e. Mammilary body



17. Not involved in Wernicke - Korsakoff syndrome:

a) Mammilary body
b) Thalamus
c) Periventricular grey matter
d) Hippocampus

Correct Answer - C C i.e. Periventricular grey matter Korsakoff's Psychosis (K P)

- It is the *commonest cause of organic amnestic syndrome*. It is also k/ a Wernicke Korsakov syndrome, because it *often follows an acute neurological syndrome called Wernicke's encephalopathy* comprising delirium, ataxia, opthalmoplegia, nystagmus & peripheral neuropathy.
- It is a potentially reversible conditionQ caused by thiamine deficiency most commonly associated with chronic alcohol abuse malnutrition. But other causes of malnutrition eg. starvation, hyperemesis gravidarum, dialysis, cancer, AIDS, gastric plication or prolonged IV hyperalimentation, alone can also result in thiamine deficiency & KP.
- Neuropathological lesion caused by thiamine deficiency is usually widespread but most consistent changes are seen in bilateral dorsomedial (& anterior) nucleus of thalamus, mammillary bodies, and hippocampus, in form of small vessels hyperplasia; petechial hemorrhages, astrocytic hypertrophy & degenerationQ. It disrupts a critical circuit between hippocampus & frontal lobes. The changes are also seen in periventricular (around 3^rd ventricle), periaqueductal grey matter, cerebellum, and brain stem (midbrain, pons, medulla



fornix) as symmetrical lesions.

The cardinal feature is a *profound deficit of episodic memory,* confabulation and lack of insight into the amnesiaQ. It presents as:

Change in personality (frontal lobe like) such that they display *lack of initiative*, *interest or concern & diminished spontaneity*.

- Executive function deficits involving attention, planning, set shifting, & inferential reasoning.
- Apathy, passivity & confabulationQ are often prominent. There is disorientation for time, emotional blunting, & inertia.
- There is little impairment in implicit memory and their ability to perform (complete) complex motor procedures remain intactQ. Typically general intelligence, perceptual skills & language remain relatively normalQ.

Memory disorder

- Profound deficit of episodic type explicit (declarative) memory 1/t loss of autobiographic information (often extending back for many years).

Severe anterograde amnesia (learning defect) for verbal & visual material with a lack of insight into the amnesia. Events are recalled immediately after they occur, but forgotten a few minutes later. Thus digit span, testing the short term memory store, is normal. *Storage is mildly impaired but retrieval & learning are severely impairedQ.*When patients learn new material they will forget it at a normal rate, but learning the new material is extremely difficult, and in severe cases new learning is impossible. So these patients have difficult encoding & consolidating explicit memory.

- Retrograde amnesia back to the onset of illness, is as severe as anterograde loss; but the overall retrograde memory impairment (i.e. before the onset of illness) is not as severe as that of anterograde memory.

New learning & recent memory is grossly defective but retrograde (remote) memory is relatively (variably) preserved, and show a temporal gradient, with older memories better preserved. As a result these patients retain more distant memories dramatically more proficiently than they learn new material.

- Although remote memory is surprisingly intact, patients are unable



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to organize them in a temporal context. So they distort the relationship between facts and *fill the remote memory gaps by confabulationQ* (a vivid & wholly fictitious account of recent activities which the patient believes to be true).

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18. Most common cause dementia in adult:

a) Alzheimer's				
----------------	--	--	--	--

- b) Multiinfrct
- c) Pick' disease
- d) Metabolic cause

Correct Answer - A A i.e. Alzheimer's

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19. In Alzheimer's disease (AD) which of the following is not seen:

a) Aphasia	
b) Acalculia	
c) Agnosia	
d) Apraxia	

Correct Answer - C

Ans. None > C. Agnosia tRej. Kaplan ana Jaadock s Synopsis of Psychiatry 10/c pi-t?

Aphasia, Apraxia, Acalculia and Agnosia may all be seen in Alzheimer's Dementia. Agnosia in Alzheimer's disease usually presents late in the disease and is not included in the ICD-10 Diagnostic criteria for dementia in Alzheimer's disease with early onset and hence may be selected as the single best answer by exclusion



20. Mania is characterized by:

a) Paranoid delusion	
----------------------	--

- b) Loss of orientation
- c) High self esteem
- d) All

Correct Answer - C C i.e. High self esteem

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21. Lithium is treatment of choice for

- a) Unipolar MDP prophylaxis
- b) Bipolar MDP prophylaxis
- c) Schizophrenia
- d) Acute mania

Correct Answer - B

B i.e. Bipolar MDP prophylaxis

Lithium: Indications:

- Established indications:
- Treatment of acute mania
- Prophylaxis of bipolar mood disorder.
- Possible clinical indications:
- Treatment of the schizo-affective disorder
- Prophylaxis of unipolar mood ilisorder
- treatment of cyclothymia
- Treatment if acute depression(as an adjuvant for refractory depression)
- Treatment of chronic akoholism(in presence of significant depressive symptoms) 6 psychoactive use disorders(e'g cocaine dePendence)
- Treatment of impulsive aggression.
- Treatment of Keine-Levin syndrome



22. Features like increased psychomotor acitivity, waxy flexinbility at time are seen classically in :

- a) Simple schizophrenia
- b) Hebephrenic schizophrenia
- c) Catatonic schizophrenia
- d) None of the above

Correct Answer - C
C. i.e. Catatonic schizophrenia



23. Post traumatic stress disorder (PTSD) is differentiated from all other disorders by:

- a) Nightmares about events
- b) Autonomic arrousal and anxiety
- c) Recall of events and avoidance of similar experiences in PTSD
- d) Depression

Correct Answer - C

C i.e. Recall of events and avoidance of similar experiences in PTSD

- PTSD arises as response to traumatic event (criteria A) that is characterized by persistent re-experience (criteria B), persistent avoidance and numbness (C), hyperarousal (D), of > 1 month duration (criteria E) causing significant distress & impaired functioning (criteria F)Q. The onset may be delayed (6 months to years after event).
- PTSD arises as a delayed/protracted response to an exceptionally stressful or catastrophic life event or situation which is likely to cause pervasive distress in almost any person (eg. disaster, war, rape, torture, serious accident). It may develop even after 6 months to years after stressorQ.
- PTSD is characterized by *peristent/recurrent intrusive distressing recollections of stressful event either in flashbacks (images, thoughts or perceptions), dreams, reliving experiences, illusions, hallucinations* or distress/ physiological reactivity on exposure to reminders of traumatic events. There is marked (persistent) avoidance of stimuli/events or situations that arouse recollection of stressful events and *increased arousal (hyperarousal) and numbing of general responsivenessQ.*



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Partial amnesia for some aspects of stressful events, anhedonia (inability to experience pleasure) and alexithymia (characterized by inability to identify & articulate feelings) may be present.

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24. Catatonia is a type of: September 2007

a) Schizophrenia
b) Phobia
c) Depression
d) OCD

Correct Answer - A

Ans. A: Schizophrenia

Schizophrenia is a severe, persistent, debilitating, and poorly understood psychiatric disorder that probably consists of several separate illnesses.

Symptoms include disturbances in thoughts (or cognitions), mood (or affects), perceptions, and relationships with others. The hallmark symptoms of schizophrenia are auditory hallucinations and delusions, which are fixed false beliefs. The symptoms of schizophrenia may be divided into the following 4 domains: Positive symptoms: These include psychotic symptoms, such as hallucinations, which are usually auditory; delusions; and disorganized speech and behavior.

Negative symptoms: These include a decrease in emotional range, poverty of speech, loss of interests, and loss of drive.

Cognitive symptoms: These include neurocognitive deficits, such as deficits in working memory and attention and executive functions such as the ability to organize and abstract.

Mood symptoms: Schizophrenia patients often seem cheerful or sad in a way that does not make sense to others. They often are depressed.

Catatonia Schizophrenia







This syndrome occurs in children, adolescents, and adults; is associated with a heterogeneous group of comorbid conditions; and is characterized by a variety of symptoms and signs of impairment of the expression of voluntary thoughts and movements.

Typically, the syndrome of catatonia is episodic, with periods of remission.

It can presents in three clinical forms:

Excited catatonia
 Stuporous catatonia
 Catatonia alternating between excitement and stupor.

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25. Suicidal tendencies are most commonly seen in: March 2003

a) Female
b) Younger age
c) Severe depression
d) All of the above

Correct Answer - C
Ans. C i.e. Severe depression



26. Sexual stimulation obtained through some inanimate object is known as: September 2003

a) Transvestism	
b) Fetichism	
c) Voyeurism	
d) Zoophilia	

Correct Answer - B
Ans. B i.e. Fetichism

27. All of the following are formal thought disorder EXCEPT: March 2013 (b, c, h)

a) Schizophrenia	
b) Delusion	
c) Loosening of association	
d) Mania	

Correct Answer - B

Ans. B i.e. Delusion

Delusion is a disorder of thought content (NOT a formal thought disorder/disorder of thought process)

Delusion

- Disorder of thought;
- False unshaken belief not amenable to reasoning

Hallucination

- Disorder of perception;
- Perception in the absence of external stimuli;
- Not dependent of will of observer

Illusion

Misinterpretation of external stimuli



28. Illusion is: September 2007

- a) A false unshaken belief not keeping one's sociaocultural background
- b) Perception without stimuli
- c) Abnormal perception by a sensory misinterpretation of actual stimulus
- d) Fear of closed spaces

Correct Answer - C

Ans. C: Abnormal perception by a sensory misinterpretation of actual stimulus

Illusion is an abnormal perception caused by a sensory misinterpretation of actual stimulus, sometimes precipitated by strong emotion, e.g. fear provoking a person to imagine they have seen an intruder in the shadows.



29. Which of the following is not associated with dementia: March 2011

a) Forgetfulness
b) Alteration of consciousness
c) Reduced personal care
d) Loss of neurons in brain

Correct Answer - B

Ans. B: Alteration of consciousness

There is impairment of judgement and impulse control, and also impairment of abstract thinking There is however usually no impairment of consciousness in dementia (unlike in delirium) Dementia:

- Chronic onset
- No disturbance of consciousness
- Cognitive impairment
- Personality alteration
- Impaired memory
- Impaired judgment
- Absent diurnal variation



30. According to Wechsler intelligence scale scoring, average IQ of a normal child is:

a) 50			
b) 75			
c) 90			
d) 111			

Correct Answer - C
Ans. c. 90



31. Well dressed man came for feeling of women trapped in man body is suffering from?

a) Paraphilia
b) Transverium
c) Gender identity disorder
d) Protterurism

Correct Answer - C

Ans. is 'c' i.e., Gender identity disorder

Gender identity disorder

- These disorders are characterized by disturbance in gender identity, i.e., the sense of one's masculinity or faminity is disturbed. Gender identity disorders has following two characteristics:?
 - 1. A strong and persistent cross gender identification which is manifested by : ?
- Repeatedly stated desire to be, or the insistence that he or she is , of the other sex.
- 2. Wearing the clothes of other sex (cross dressing), Preference for cross-sex roles in plays or fantasies, Preference for playmates of the other sex.
 - 2. Persistent discomfort with his or her sex.
- Important gender identity disorders are : -
- Transsexualism: It has all the characteristic of gender identity disorder (see above). The most characteristic feature is that there is marked preoccupation with the wish to get rid of one's genitals and secondary sex characteristics and to adopt the sex characteristics of other sex (perceived-gender), e.g., Female transexuals request for







hysterectomy or mastectomy.

- 2. Dual-role transvestism: It is characterized be wearing of clothes of opposite sex in order to enjoy the temporary experience of membership of the opposite sex, but without any desire for a more permanent sex change (unlike transsexualism). Both transexualism and dual-role transvestism should be differentiated from transvestism (fetishistic transvestism) which is not a gender identity disorder and characterized by wearing the clothes of other sex for the purpose of sexual excitment.
- 3. Gender-identity disorder of childhood : This disorder is similar to transsexualism with a very early age of onset (2-4 years of age).



32. Folie-a-deux means?

a) Delusion of persecution	_
b) Sharing of delusion	_
c) Delusion of double	_
d) None	

Correct Answer - B

Ans. is 'b' i.e., Sharing of delusion

- It is also known as shared psychotic disorder or symbiotic psychosis.
- It is characterized by sharing of delusions between two person (Folie a deux) or rarely between more individuals (Folie a trois, Folie a quatre, Folie a famine).
- There is a dominant (active) person who induces delusions into the other (passive receptor or dependent person) -4 Dependent person accepts the delusion of dominant person.
- On separation of two, dependent person may give up his delusions, however the active (dominant) person often requires treatment



33. REM sleep is associated with all except?

a) Dreams	_
b) Delta waves	<u> </u>
c) Loss of muscle tone	<u> </u>
d) Increased BP	_

Correct Answer - B Ans. is 'b' i.e., Delta wave

Stages of Sleep

- Sleep is basically divided into two phases
- Non-REM (NREM) or slow-wave sleep: It is called Non-REM sleep because no rapid eye movement (REM) is there on eletrooculogram, rather there is slow or quiscent eye movement. It is also referred as S-sleep (synchronized sleep) or quiet sleep or orthodox sleep because there diminished physiological functions and a low level of overall activity. It is further divided into:?
- .. Stage 1 : It is a transition from wakefulness to sleep and is characterized by disappearance of alpha activity and appearance of theta activity. There is slow eye movements.
- 2. Stage 2 : It is characterized by typical EEG activity i.e., Sleep spindles and IC-complex'. No eye movement occurs.
- 3. Stage 3 & 4 : Stage 3 & 4 are stages of deep sleep. These are also called slow wave sleep as these stages are characterized by slow delta waves. Delta wave appearance starts in stage 3 and dominated in stage 4.
- REM sleep: The REM sleep is so named as there is rapid roving movements of eye, i.e., rapid eye movement (REM)on electro-oculogram. It is also called paradoxical sleep because there is a paradoxical elevation of brain activity & metabolism and







- physiological activity. The high-amplitude slow waves seen in stage 3,4 of REM sleep is replaced by rapid low voltage activity (beta wave). Features of REM sleep are : -
- .. EEG Beta wave, Reappearance of alpha wave, Saw-tooth wave (low voltage fast activity), Pontogenital-occipital spikes.
- 2. Dreaming
- 3. Other features : Generalized muscular atony, Penile erection, autonomic hyperactivity (Increased pulse rate & BP) and intermittent movement of small muscle groups.



34. For diagnosis of mania symptoms should be-

- a) > 1 week
- b) > 3 weeks
- c) >2 week
- d) > 4 weeks

Correct Answer - A

Ans. is 'a' i.e., > 1 Week

Diagnostic criteria for Mania

- Three or more of the following for at least 1 week : -
- .. Inflated self esteem or grandiosity
- 2. Decreased need for sleep
- 3. Overtalkativness
- I. Flight of ideas or racing thoughts
- 5. Distractibility
- increased goal directed activity or psychomotor agitation
- Zerose involvement in pleasurable activities that have a high potential for painful consequences.
- The mood disturbance is sufficiently severe to cause marked impairment in occupational & social functioning, or there are psychotic features.
- If the symptoms occur for 4 days, and do not cause impairment of social/occupational functioning, and psychotic feature are absent, then the diagnosis is hypomania.



35. Acute and transient psychotic disorder, onset of symptoms?

a) < 1 weeks
b) < 2 weeks
c) < 3 weeks
d) < 4 weeks

Correct Answer - B

Ans. is 'b' i.e., < 2 weeks

Acute and transient psychotic disorder

- These psychotic disorders are characterized by an abrupt (less than 48 hours) or an acute (Less than 2 weeks) onset of symptoms. Three types have been recognized (according to ICD-10).
- ... Acute polymorphic psychotic disorder without symptoms of schizophrenia: Hallucinations, delusions, and other psychotic symptoms are present and are varied and constantly changing, just like emotional status. None of them is consistent as to qualify for a diagnosis of schizophrenia. The polymorphic and unstable picture is characteristic of illness.
- 2. Acute polymorphic psychotic disorder with symptoms of schizophrenia: Polymorphic and unstable symptoms occur along with consistent symptoms of schizophrenia.
- 3. Acute schizophrenia like psychotic disorder : Except for acute and shorter duration of symptoms they resemble schizophrenia in total. Symptoms occur for less than Imonth. Under DSM IV classification, it is classified as brief psychotic disorder.



36. Ataxia abasia is seen in?

a) Conversion disorder
b) PTSD
c) Depression
d) Manic

Correct Answer - A

Ans. is 'a' i.e., Conversion disorder

Symptoms of conversion disorder

- Sensory symptoms (in ICD -10 dissociative anesthesia & Sensory loss): Anaesthesia andparesthesia are common, especially of extremities. All sensory modilities (Pain, temperature, touch, proprioception) are affected at same level, and the disturbance is not consistent to the distribution of dermatomes. Thus, clinicians may see the characteristic *glove and stocking anaesthesia* of hands or feet or hemianesthesia of body beginning precisely along the midline. Deafness, blindness or *contracted visual fields (tubular or tunnel vision)*.
- *Motor symptoms (In ICD-10 Dissociative motor disorder) : -* Abnormal movement, paralysis, Weakness, gait disturbances (ataxia-abasia). Aphonia, Torticollis, Opisthotonus, blepherospasm.
- Seizure symptoms (In ICD-10 Dissociative convulsions): Earlier known as hysterical fits or pseudoseizures, dissociative convulsions are characterized by convulsive movements and partial loss of consciousness. Dissociative convulsions should be differentiated from true convulsions: -
- ... Tongue biting, Urinary incontinence and injury are uncomomn (in contrast to true convulsions, In which these are common).
- 2. Never occurs during sleep (in contrast, true convulsions can occur



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anytime and during sleep).

- 3. Usually occur in safe place or indoors (in contrast, true convulsions can occur anywhere).
- I. Usually occurs when people are observing (in contrast, true convulsion can occur with or without people observation).
- 5. Normal prolactin level in postictal period (in contrast, serum prolactin is usually raised in post-ictal period after true convulsions).
- 5. There is no or partial amnesia about the episode (In contrast, true convulsion has complete amnesia).



37. True about anorexia nervosa is all except ?

- a) Binge eating is common
- b) Unknown in male
- c) Ammenorrhoea starts before severe loss of weight
- d) Self-induced vomiting

Correct Answer - B

Ans. is 'b' i.e., Unknown in male

- Anorexia nervosa is less common in male, but can be seen.
- There is binge eating and self induced vomiting.

 "Amenorrhea often precedes severe weight loss" Essentials of psychiatry

ANOREXIA NERVOSA

• The term '`anorexia nervosa" is a misnomer as loss of appetite is a rare symptom. This disorder is characterized by self imposed dietary restrictions leading to malnutrition and severe weight loss.

Clinical features

- Females are far more commonly affected than males. Onset usually occurs between the age of 10-30 years, usually in mid adolescence. A deliberate and persistent restriction of food is usually the earliest presenting symptom. There is intense fear of becoming of obese, even if body becomes very thin and underweight.
- There is a body-image disturbance. The person is unable to perceive the body size accurately.
- Some patients cannot continuously control their voluntary restriction of food intake and So have eating binges. These binges usually occur secretly and often at night and are frequently followed by self-induced vomiting. Patients abuse laxatives and even diuretics to







lose weight, and ritualistic exercising, extensive cycling, walking, jogging and running are common activities.

- Patients with anorexia nervosa exhibit peculiar behavior about food. They hide food all over the house, frequently carry large quantities of candies in their pockets and purses. They try to dispose of food in their napkins or hide in their pockets, while eating meals. They cut their meat into very small pieces and spend a great deal of time rearranging the pieces on their plates.
- There is significant weight loss and patient is underweight.
- Amenorrhea is seen in almost all women and loss of libido may occur in male patients. There may be poor sexual adjustment.
- Obsessive compulsive neurosis, depression and anxiety like psychiatric illness may coexist.
- Complications of malnutrition may occur, e.g., hypoglycemia, hypothermia, low BP, bradycardia, leucopenia, endocrine changes (raised GH and Cortisol, reduced gonadotrophin), and appearance of lanugo hair.



38. Loosening of association is an example of

- a) Formal thought disorder
- b) Schneider's first symptoms
- c) Perseveration
- d) Concrete thinking

Correct Answer - A

Ans. is 'a' i.e., Formal thought disorder

Thought disorders

Formal thought

disorders (Disorders of

thought process) Racing thoughts:-

Anxiety, Schizophrenia

Retarded thoughts:-

Depression

Circumstantiality:

Mania, Schizophrenia

Thought blocking:-

Schizophrenia, Severe

anxiety

Perseveration :- Organic Phobias

brain disease,

Schizophrenia (occasionally

Loosening of association:- Disorders of thought

process

Delusion:- Psychosis (Schizophrenia mania, depression & others

Obsession Compulsion **Preoccupations**

Depersonalization &

Derealization







Flight of ideas :- Mania

Tangentiality

Clunging & punning :-

Mania & schizophrenia

Neologism, word salad,

Echolalia:-

Schizophrenia

- In schizophrenia and mood disorders (depression, mania) all parts of the thought (thought process as well as content) are involved.
- However, schizophrenia is conventionally referred as formal thought disorder.

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39. False regarding delirium tremens?

- a) Tremors
- b) Opthalmoplegia
- c) Visual hallucination
- d) Clouding of consciousness

Correct Answer - B Ans. is 'b' i.e., Ophthalmoplegia

Delirium tremens

- Delirium tremens is the *most severe alcohol withdrawal syndrome*. It occurs usually within 2-4 days of complete or significant alcohol abstinence. This is an *acute organic brain syndrome (delirium)* with characteristic features of delirium.
- ... Clouding of consciousness with disorientation in time and place.
- 2. Poor attention span and distractability.
- 3. Visual (and also auditory) hallucination, and illusion. Tactile hallucination of insect crawling under the skin (formication) may also occur.
- I. Marked autonomic disturbances with tachycardia, sweating, hypertension, mydriasis, coarse tremers.
- i. Insomnia, psychomotor agitation, ataxia, anxiety.
- Benzodiazepines are the drugs of choice for delirium tremens. Chlordiazepoxide is the agent of choice with diazepam as an alternative.



40. Not used for erectile dysfunction?

a) Beta blockers	
b) Siledenafil	
c) PG-E,	
d) Papaverine	

Correct Answer - A

Ans. is 'a' i.e., Beta blockers

Drugs used for erectile dysfunction

- 1. Phosphodiesterase-5 inhibitors (Siledenafil, Todafil, Vardenafil).
- By inhibiting PDE-5, these drugs prevent degradation of cGMP and potentiate the action of NO.
- These are the DOC for pharmacological therapy of erectile dysfunction.

2.Alprastadil (Prostaglandin El)

- It is a powerful vasodilator
- It acts by increasing arterial inflow by vasodilation and reducing outflow by contracting the carporal smooth muscle that occludes draining venules.
- It is the DOC for patients not responding to PDE-5 inhibitors.
- It is directly injected into corpora cavernosa.

3. Papaverine

- It is a nonspecific phosphodiesterase inhibitor.
- Injection of papaverine with or without phentolamine into corpus cavernosum produces penile tumiscence to permit intercourse.
- Repeated injection can cause penile fibrosis.

4.Androgens

• Can be used when androgen deficiency is demonstrated to be



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responsible for the loss of libido and erectile dysfunction. **5.Apomorphine (Laurence 9th/e p. 546)**

• A dopamine antagonist, is given by subcutaneous injection.



41. A student unable to deliver speech beforeaudience is suffering from?

a) Social phobia	_
b) OCD	<u> </u>
c) Agoraphobia	<u> </u>
d) Claustrophobia	`

Correct Answer - A

Ans. is 'a' i.e., Social phobia

Phobic disorders

- Phobia is persistent and morbid fear of specific situation, object or activity. The fear is morbid because; ?
- .. The fear is irrational : The objects or situations do not produce fear in normal persons.
- 2. The fear is out of proportion to the dangerousness perceived that the affected person avoids the situation permanently.
- 3. Patient is unable to control the fear and is very distressed by it.
- The common types of phobia are : ?

1. Agoraphobia

- This is an example of irrational fear of situations. It is the commonest type of phobia encountered in clinical practice.
- It is characterized by an irrational fear of being in places away from familiar setting of home and patient believes that he cannot escape from these places, to a safer place (usually home). This fear results in avoidance of these places which include public places, stores, crowd, travelling alone in bus, train or plane, Theaters, Tunnels, Bridge, standing in line small enclosed rooms or lifts.
- The patient is afraid of all the places or situations from where escape may be perceived to be difficult if he suddenly develops

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embrassing or incapaciating symptoms. These embrassing or incapaciating symptoms are the classical symptoms of panic. A full-blown panic attack may occur (agoraphobia with panic disorder) or only a few symptoms (like dizziness or tachycardia) may occur (agoraphobia without panic disorder).

2. Social phobia

- In social phobia there is irrational fear of one or more social or performance situations in which the person is concerned about negative evaluation or scrutiny by others, for example: Public speaking; writing/drinking/eating in public; using public lavatories.
- Feared social or performance situations may produce anxiety symptoms, even a panic attack. Therefore, feared social or performance situations are avoided.

3. Specific (simple) phobia

- These are phobias limited to highly specific situations or objects, for example.
- ... Claustrophobia :-Fear of closed spaces
- 2. Acro/Aerophobia :-Fear of high places
- 3. Zoophobia :- Fear of animals
- I. Pyrophobia :- Fear of fire
- i. Xenophobia :- Fear of strangers
- 3. Algophobia :- Fears of pain
- '. Thanatophobia :- Fear of death
- 3. Mysophobia :- Fear of dirt & germs
-). Erythrophobia :- Fear of blushing
-). Sitophobia :- Fear of eating
- ... Ailurophobia :- Fear of cats
- 2. Sitaphobia :- Fear of dogs
- 3. Hydrophobia :- Fear of water



42. Suicide is most common in?

- a) Depression
 b) Alcohol dependence
- c) Dementia
- d) Schizophrenia

Correct Answer - A Ans. is 'a' i.e., Depression

Causes/Risk factors for suicide

- Psychiatric disorders : Depression (most common), alcoholism (2nd mc), Drug/Substance dependence, Schizophrenia, Dementia.
- Physical illness: Cancer, AIDS, Multiple sclerosis, Head trauma.
- Psychosocial factors: Failure in love, marital difficulties, family dispute, illegitimate pregnancy.
- Biological factors : Decrease in serotonin
- Other Male sex, Age > 40 years, Single (Unmarried, divorced or widowed), previous suicide attempt, social isolation.



43. Which of the following can cause delirium?

- a) Hypoxia
- b) Barbiturates
- c) Alcohol withdrawal
- d) All of the above

Correct Answer - A

Ans. is 'd' i.e., All of the above

Important causes of delirium

- 1. Trauma: Head injury, subdural hematoma
- 2.Infection: Septicemia, pneumonia, endocarditis.
- 3.Metabolic : Hypoxia, hypercapnia, uremia, CHF, Hepatic failure, porphyria, metabolic acidosis or alkalosis, water & electrolyte imbalance.
- 4. Endocrine: Hypo- or hyperpituitarism, Hypo- or Hyperthyroidism, Hypo- or hyperparathyroidism, hypo- or hyperadrenalism.
- 5. Drug intoxication : Alcohol, barbiturates, TCA, anticholinergics, anticonvulsants.
- 6.Drug withdrawal : Alcohol (delirium tremens), sedatives, hypnotics.
- 7 .Nutritional deficiency : Vitamin (Thiamine, pyridoxine, Niacin, B12, Folic acid), Protein. 8.0ther : Post-operative, seizures, sleep deprivation



44. Total score in Mini Mental Status Examination (MMSE) is ?

(a) 25			
(b) 30			
c) 32			
d) 35			

Correct Answer - B
Ans. is 'b' i.e., 30



45. 18 year old girl with circumscribed bald patch with no organic disease & no behavioural disorder has ?

a) Depression	
b) Trichotillomania	<u>〜</u>
c) OCD	<u> </u>
d) Phobia	

Correct Answer - B

Ans. is 'b' i.e., Trichotillomania

• As there is no organic or behavioral disorders, this girl is suffering with impulse control disorder of compulsive hair pulling, known as Trichotillomania.

Impulse control disorder

- These disorders are characterized by failure to resist an impulsive behavior that may be harmful to self or others. There may be a feeling of release of tension by doing the act and a feeling of guilt after the act is over. Important impulse control disorder are:
- .. Pyromania (Pathological fire setting)
- !. Kleptomania (Pathological stealing)
- 3. Trichotillomania (Compulsive hair pulling)
- I. Pathological gambling
- 5. Intermittent explosive disorder
- 3. Impulse control disorder not otherwise specified
- Oniomania (Compulsion to shop/buying)
- Internet compulsion (Internet addiction)
- Cellular or Mobile phone compulsion
- Compulsive sexual behavior (sexual addiction).



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46. Pyromania refers to an irresistible urge to

a) Set things on fire	
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b) Eat out of proportion	b)) Eat o	out of	propor	tion
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- c) Sleep for long periods
- d) None

Correct Answer - A www.kilest.com Ans. is 'a' i.e., Set things on fire



47. The deliusion which involves replacement of a familiar person by someone else is ?

a) Capgras syndrome
b) Cotard syndrome
c) Othello syndrome
d) None

Correct Answer - A

Ans. is 'a' i.e., Capgras syndrome

- DSM is characterized by misidentification delusions of other or self. Four main syndromes are differentiated : ?
- ... Capgras syndrome (Delusion of double) : Patient falsely sees a familiar person as a complete stranger who is importing on him as a familiar person.
- 2. Fregoli syndrome (illusion de fregoli) : The patient falsely identifies stranger as familiar person.
- 3. Syndrome of subjective double : The patients own self is perceived as being replaced by a double.
- I. Syndrome of intermetamorphosis : A false belief that a person can transform into another person.
- These syndrome most commonly appear in schizophrenia. Other causes are Alzheimer syndrome, head injuries, and delusional disorders.



48. In personality disorder, features are all except

- a) Ego dystonia
- b) Starts in childhood
- c) Behavior is maladaptive
- d) Disorder results in personal distress

Correct Answer - A

Ans. 'A' i.e., Ego dystonia Features of personality disorders

- Most often the first sign of a personality disorder appears in late childhood or adolescence and continues during adulthood.
- Someone with a personality disorder holds attitudes and behaves in ways that can cause considerable problems for themselves and others.
- Behaviour is long-standing (not limited to an episode of mental illness).
- Behaviour is pervasive and maladaptive.
- Disorder results in personal distress and social or occupational dysfunction.
- Behavior is fixed and inflexible.
- Personality disorders are ego-syntonic.
- They are not due to a direct result of disease or substance.



49. Sleep walking is seen in which stage of sleep?

- a) REM
- b) Stage 1-2 NREM
- c) Stage 2-3 NREM
- d) Stage 3-4 NREM

Correct Answer - D

Ans. is 'd' i.e., Stage 3-4 NREM

Important events occuring during sleep

- Deep sleep/slow wave sleep disorder : These events occur during stage 3 & 4 of NREM. Important disorders are : ?
- ... Somnambulism (Night walking) : Patient walks during sleep.
- 2. Sleep terror or night terrors (pavor nocturnes): The patient suddenly gets up screaming, with autonomic arousal (tachycardia, sweating). Sleep terrors are rarely remembered in the morning (in contrast to night mares). No treatment is required only reassurance is required. However, in severe cases benzodiazepine can be used.
- 3. Sleep-related enuresis (Nocturnal enuresis/bed wetting): Repetitive voiding occurs during sleep. First line of treatment is
 behaviour therapy. If behavioral therapy fails, desmopressin (DOC)
 and Imipramine can be used.
- I. Bruxism (Teeth grinding)
- 5. Sleep-talking (Somniloquy).
- REM sleep events
- ... Nocturnal penile tumescence: It is spontaneous occurence of an erection of the penis during sleep. It is a normal phenomenon and occurs for 80-120 minutes per night Nocturnal penile tumescence can be used to differentiate between psychogenic impotence and







- organic impotenceas nocturnal penile tumescence is preserved in psychogenic impotence but not in organic cause of impotence.
- 2. Night mares (dream anxiety disorder): They are characterized by fearful dreams occurring in the last one third of night sleep. The person wakes up frightned and remembers the dream vividly (in contrast to night terror).
- 3. Narcolepsy: This is characterized by excessive day time sleep, often disturbed night time sleep and disturbances in the REM sleep. Age of onset is between 10-20 years. There is irresistable desire to sleep and bouts of sudden sleep each lasting for 10-30 minutes occuring during day time. In majority of cases narcolepsy is associated with one or more accessory symptoms:?
- Cataplexy: It is the most common accessory symptom and is characterized by sudden decrease in muscle tone either, local or generalized.
- Hypnagogic hallucination: Hallucination occuring just before falling asleep. When hallucination occurs just before awakening it is called hyponopompic hallucinations.
- Sleep paralysis (least common)
 Treatment of narcolepsy include stimulant medications (methyphenidate, amphetamines) or modafinil.

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50. Quod Hanc means?

- a) Passive partner in sexual intercourse
- b) Women having high sexual desire
- c) Sexual parterner in pedophilia
- d) Male impotent to particular women

Correct Answer - D Ans. is 'd' i.e., Male impotent to particular women



51. Pagophagia involves eating?

a) Ice	
b) Sand	_
c) Clay	_
	_
d) Salt	

Correct Answer - A Ans. is 'a' i.e., Ice

Geophagia Eating clay

Pagophagia Eating ice

Plambophagia Eating lead

Amylophagia Eating

starch c

Coprophagia Eating feces

Eating

Cautopyreiophagia burnt

matches

Tricophagia Eating

hair

Lithophagia Eating stones

Eating

Geomelophagia raw

potatoes



52. Doppelganger is-

- a) Shadow following person
- b) Feeling of double of oneself
- c) Indentification of stranger as familiar
- d) None of the above

Correct Answer - B

Ans. is 'b' i.e., Feeling of double of oneself

Doppelgangers (subjective double) is the delusion that there is double of oneself. A person feels that double of himself exists elswhere.



53. What is contraindication for ECT?

a) Arrthmia	
b) Epilepsy	
c) HIV	
d) Cerebral aneurysm	

Correct Answer - D

Ans. is 'd' i.e., Cerebral aneurysm

Contraindications of ECT

- Absolute: Increased intracranial tension.cerebrovascular response to ECT include marked increased in cerebral blood flow and blood flow velocity. Cerebral oxygen consumption increases as well. The rapid increase in systemic blood pressure may transiently overwhelm cerebral autoregulation and may result in increased in intracranial pressure. Therefore, the use of ECT is prohibited in patients with known space occupying lesion (brain tumor) or head injury, cerebral (intracranial) aneurysm.
- Relative: Recent myocardial infarction, severe hypertension, cerebrovascular accident, severe pulmonary disease, Retinal detachment, Pheochromocytoma.



54. A patient is known alcoholic since last 20 yrs, suddenly he develops restless tremors, agitation. Diagnosis?

a) Delirium tremens b) Psychosis c) Wernicke's encephalopathy d) Kursakoff's syndrome

MMM/FilestRainker colf Correct Answer - A Ans. is 'a' i.e., Delirium tremens



55. Which of the following is delusion?

a) Othello syndrome
b) Declerambault's syndrome
c) Pyromania
d) None

Correct Answer - A

Ans. is 'a' i.e., Othello syndrome & 'la' i.e., Declerambault's syndrome

Delusional disorders (Persistent delusional disorders)

- Delusional disorder, previously called as paranoid disorder, is a group of disorders where *long standing delusions are the primary or only manifestation of illness.* Persistent delusions must be present for at least 3 months (ICD-10) or for at least 1 month (DSM IV).
- Depending on the content following type of delusions may occur.
- Delusions of persecution. These are the *most common type* of delusions. The patient believes that he is conspired against and harassed or bodily injured, spied or followed or poisoned by other. Patient believes that he is under the surveillance of police, as his neighbours have complained against him; or he is watched and the news in the newspaper refer to him.
- 2. Somatic (Hypochondrical) delusions: There are delusions *related* to the patients body or its part. This condition is also referred to as monosymptomatic hypochondrical psychosis (MHP) or hypochondrical paranoia. Examples are:?
- Body or its part being ugly or misshapen, i.e., nose is deformed —> Delusional dysmorphophobia.
- Infestations by worms or foreign bodies ---> *Delusional parsitosis*.
- Emitting a foul odor —> Delusional halitosis.







- 3. Delusions of grandeur: Delusions of *inflated self esteem and self image*. The patient may believe that he is an important person who is able to help other, or may report hearing the voice of God and the Saints, Confirming their elevated status.
- 4. Delusions of jealousy (infidelity): Content of delusions is predominantly jealousy (infidelity) involving the spouse --> Othello syndrome or *Conjugal paranoia*. Elobrate steps are taken to prevent the spouse to go outsite (Locks the spouse, not allowing her go outside), or to catch the spouse red handed (private detectives).
- 5. Delusion of love (Erotomanic delusion or erotomania): More prevalent *among females* and there is an erotic conviction that a person with higher status is in love with patient—) Declerambault's syndrome.



56. Flooding is a treatment modality used in ?

- a) Phobia
- b) Depression
- c) Mania
- d) Schizophrenia

Correct Answer - A Ans. is 'a' i.e., Phobia



57. Schizophrenia is more common in which socioeconomic strata?

a) Middle	
b) Upper	
c) Low	
d) Upper middle	

Correct Answer - C

Ans. is 'c' i.e., Low

'Schizophrenia is more prevalent in patients having a lower socioeconomic status".
 Namboodiri

Etiology of Schizophrenia

• The exact etiology is not clear. Experts think schizophrenia is caused by several factors.

1. Heredity (Genetic factors)

• Schizophrenia runs in families. The illness occur in 0.5-1% of general population. However, First degree relative of schizophrenic patients have a 10 times more lifetime risk of having illness. The risk is 3-6 times and 2 times more in second and third degree relatives, respectively

2. Environmental factors

- Environmental factors and stress are important in precipitating schizophrenia in many individuals. These factors are : ?
- ... Socioeconomic: Low socio-economic status, Industrialization; Immigration; familes with high expressed emotions; Nuclear families; Schisms & skewed families; and pseudomutul & pseudohostile families.
- 2. Drugs: Drugs causing schizophrenia like state are amphetamine (most common causative drug), LSD, Phencyclidine, ketamine,







Mescaline, Cocaine, Cannabis.

3. Metabolic & Neurological disorders : - Schizophrenia like symptoms may occur in Huntington's chorea (early stage), homocystinuria, acute intermittent porphyria, Wilson's disease and hemochromatosis.

3. Biochemical factors

- Dopamine hypothesis is the most accepted hypothesis for schizophrenia. There is hyperactivity of dopaminergic system. This hypothesis is supported by: 1) Amphetamine and cocaine which release dopamine in central synapses induce schizophrenia like symptoms; and 2) Antipsychotic drugs control the schizophrenic symptoms by blocking dopamine (D,) receptors. However, the dipamine hypothesis has been questioned also as Homo vanillic acid (HVA the principal metabolite of dopamine) is not elevated and prolactin level is not decreased (Dopamine has inihibitory action on prolactin release).
- Other neurotransmitters involved are: Increased serotonin, Decreased GABA, variable change (Increased or decreased) glutamate, and increased norepinephrine.

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58. ECT is contraindicated in -

a) Very ill patients			
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- b) Raised ICT
- c) Heart disease
- d) Pregnancy

Correct Answer - B Ans. is 'b' i.e., Raised ICT

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59. Good prognostic factor for schizophrenia is ?

a) Blunted affect
b) Early onset
c) Presence of depression
d) Male sex

Correct Answer - C

Ans. is 'c' i.e., Presence of depression

• Good prognostic factors: - Acute onset; late onset (onset after 35 years of age); Presence of precipitating stressor; Good premorbid adjustment; catatonic (best prognosis) & Paranoid (2nd best); short duration (< 6 months); Married; Positive symptoms; *Presence of depression;* family history of mood disorder; first episode; pyknic (fat) physique; female sex; good treatment compliance & good response to treatment; good social support; presence of confusion or perplexity; normal brain CT Scan; outpatient treatment.



60. Time interval between acute and persistent psychotic disease is ?

a) 1 week	
b) 2 week	
c) 3 week	
d) 1 months	

Correct Answer - D

Ans. is `d' i.e., 1 months

- If symtoms are for less than 1 months, it is transient psychotic disorder and if there are for more than 1 months, it is persistent psychotic disorder (persistent delusional disorder).
 - Note:- Diagnosic criteria for delusional disorder (Persistent delusion disorder) has different durations in DSM IV and ICD-10:-
- .. According to DSM IV, symptoms (Non bizzare delusion) should be for > 1 months.
- 2. According to ICD-10, Symptoms should be for > 3 months.



61. Alpha waves in EEG represent?

a) Eye closed with active mind
b) Eye open, fully awake and alert
c) Deep sleep
d) None

Correct Answer - A

Ans. is 'a' i.e., Eye closed with active mind

EEG rhythms and sleep wake cycle

- Following EEG rhythms (Berger's rhythm) are important in relation to sleep wake cycle : ?
- Alpha rhythm: In adult humans who are awake but at rest with mind wandering and the eye closed, ocrhythm is prominent. It is a regular rhythm with a frequency of 8-13 Hz and amplitude of 50-100 V. It is most marked in parietal and occipital lobe. It is associated with decreased level of attention, i.e., person is awake but has decreased attention (relaxed) -> Person is thinking but with decreased attention (subconscious thinking).
- 2. Beta rhythm: When attention is focused on something, the alpha rhythm is replaced by Beta rhythm. It is an irregular 13-30 Hz low voltage activity. It is most evident on frontal lobe and occurs when patient is fully awake and alert. Therefore this replacement of beta rhythm for alpha rhythm is called arousal or alerting response or alpha block. This phenomenon can be produced by any form of sensory stimulation or mental concentration such as solving arithmetic problems. Person is thinking with a maximum concentration. Conscious thinking.
- 3. Theta rhythm (4 7 Hz): When person with alpha rhythm becomes slightly more relaxed (as occurs when there is transition from



wakefullness to sleep, i.e., stage 1 of REM), alpha rhythm is replaced by theta rhythm. Thinking is present but with even less attentiveness than which was present in alpha rhythm stage (Deep subcsoncious thinking). Two types of theta rhythm have been described: -

- Hippocampal (occurs in mammals other than men, i.e., cat dogs, etc).
- Cortical (occurs in men)
 - 4. Delta rhythm (3-5 Hz): It is present when the person is in deep sleep (NREM stage 3 & 4) and there is no thinking.

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62. Poor prognostic factor for Schizophrenia-

a) Presence of depression
b) Female sex
c) Presence of stressor
d) Early onset

Correct Answer - D Ans. is 'd' i.e., Early onset

Poor prognostic factors: Insidious onset, early onset (before 20 years of age); absence of precipitating stressor; poor premorbid adjustment; hebephrenic subtype (worst prognosis), simple, undifferentiated and chronic catatonic subtype; long duration (chronic course —> >2 years); single / divorced; Negative symptoms; absence of depression; family history of schizophrenia; past history of schizophrenia, asthenic (thin) physique; male sex; poor treatment compliance & poor response to treatment; poor social support; flat or blunted affect; ventricular enlargement on brain CT scan; hospitalization & indoor treatment



63. Pathognonomic of maniac episode is ?

a) Elevated mood
b) Grandiosity
c) Decreased appetite

Correct Answer - B

d) Increased sleep

Ans. is 'b' i.e., Grandiosity

- Option 'a' is confusing one. Yes, elevated mood is one of the most classical symptom of mania. But it is not pathognomonic.
- Pathognomonic means a symptom which can be used for diagnosis. Elevated mood is not a symptom of diagnostic criteria of mania.

Diagnostic criteria for mania

- Three or more of the following for at least 1 week :-
- .. Inflated self esteem or grandiosity
- Decreased need for sleep
- 3. Overtalkativeness
- I. Flight of ideas
- 5. Distractibility
- 5. Psychomotor agitation or Increased goal directed activitie
- 7. Excessive involvement in pleasurable activities

Important symptoms of mania

- Elevated mood :- Euphoria, elation, exatlation, ectasy, high self esteem.
- 2. Thought & speech :- Pressure of speech (Talkativeness), flight of ideas, delusion of grandeur, delusion of persecution, distractibility.
- 3. Increased psychomotor activity :- Overactiveness, restlessness, increased energy.
- I. Goal directed activity :- Patient is alert, trying to do many things at



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one time.

- 5. Psychotic features :- Delusions and hallucination.
- other:- Increased sexual drive, aggressive behavior, decreased need for sleep (insomnia), spending excessive money, increased appetite, impaired judgement, social & occupational dysfunction, absent insight.

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64. Father of modern psychiatry is?

- a) Bleuler
 b) Freud
- c) Pinel
- d) Kraepel in

Correct Answer - C Ans. is 'c' i.e., Pinel

- Father of psychoanalysis → Sigmund freud
- Father of modern psychiatry → Phileppel pinel



65. Classical triad of global confusion, ataxia and ophthalmoplegia is seen in ?

- a) Alzheimer's disease
- b) Delerium tremors
- c) Wernicke's encephalopathy
- d) Korsakoff psychosis

Correct Answer - C
Ans. is 'c' i.e., Wernicke's encephalopathy



66. Borderline personality disorder?

- a) Chronic feeling of emptiness
- b) Unstable interpersonal relationship
- c) Grandiosity
- d) Low self esteem

Correct Answer - B

Ans. is 'b' i.e., Unstable interpersonl relationship

Borderline personality disorder

- The central feature of borderline personality disorder is a pervasive pattern of unstable and intense interpersonal relationship, self perception and mood.
- The patient make recurrent suicidal threats and gesture and a small proportion of patients carry out the act or self multilation like cutting or burning.
- The patients have difficulty in controlling their anger and impulsitivity. There is uncertainty about personal identity.



67. Personality associated bipolar disorder -

a) Antisocial
b) Anakastic
c) Borderline
d) Narcissistic

Correct Answer - D

Ans. is 'd' i.e., Narcissistic

Symptoms of Narcissistic personality disorder can be confused with manic phase of bipolar disorder".

Narcissistic personality disorder

- Narcissistic patients are grandiose and require admiration from other.
- This is characterized by Ideas of grandiosity & inflated sense of self importance; lack of empathy with others; attention seeking behavior; exploitation of others; and an arrogant, haughty attitude.



68. Bruxism is seen in?

- a) NREM stage 1,2
 b) NREM stage 3,4
 c) REM
- d) Any of the above

Correct Answer - B Ans. is 'b' i.e., NREM stage 3, 4

- Slow wave sleep (stage 3 & 4 of NREM sleep) disorders :- Sleep walking (somnambulism), night terror (sleep terror or pavornocturnus), Nocturnal enuresis, Bruxism (teeth grinding), and sleep talking (somniloquy).
- REM sleep events/disorder :- Nightmares, nocturnal penile tumescence, Narcolepsy.



69. Child wakes up at night sweating and terrified does not remember the episode-diagnosis?

a) Narcolepsy
b) Nightmares
c) Night terrors
d) Somnambulism

Correct Answer - C

Ans. is 'c' i.e., Night terrors

• Sleep terror or night terrors (pavor nocturnus): - The patient suddenly gets up screaming, with autonomic arousal (tachycardia, sweating). Sleep terrors are rarely remembered in the morning (in contrast to night mares). *No treatment* is required only reassurance is required. However, in severe cases benzodiazepine can be used.



70. Trichotillomania?

- a) Irresistable desire to set fire
- b) Irresistable desire to steal things
- c) Compulsive hair pulling
- d) Pathological gambling

Correct Answer - C Ans. is 'c' i.e., Compulsive hair pulling

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71. OCD is associated with which personality?

a) Anakastic	
b) Borderline	
c) Narcissistic	_
d) Histrionic	_

Correct Answer - A Ans. is 'a' i.e., Anankastic

• Obsessive-Compulsive (anankastic) personality disorder: - People with obsessive-compulsive personality disorder are markedly preoccupied with orderliness, perfectionism, and control. They lack flexibility or openness. Their preoccupations interfere with their efficiency despite their focus on tasks. They are often stingy as well as stuborn.



72. Neurotransmitter in mania -

- a) Increased dopaine
- b) Decreased dopamine
- c) Increased norepinephrine
- d) Decreased norepinephrine

Correct Answer - C

Ans. is 'c' i.e., Increased norepinephrine

Neurotransmitters in mood disorders

- Most accepted biochemical hypothesis for mood disorders is the monoamine hypothesis, according to which serotinin and norepinephrine are the major neurotransmitters involved in mood disorders: -
- .. Depression --> Decrease in serotonin and norepinephrine. Serotonin is the most important neurotransmitter in depression.
- 2. Mania --> Increased level of norepinephrine
- Patients suffering from severe depression with suicidal intent/attempt appear to have a marked decrease in serotinin.
- Acetylcholine and GABA are the other neurotransmitters which are involved in mood disorders.



73. Schizophrenia results with?

- a) Increased GABA
- b) Decreased norepinephrine
- c) Increased dopaminergic activity
- d) Decreased dopaminergic activity

Correct Answer - C

Ans. is 'c' i.e., Increased dopaminergic activity

- Dopamine hypothesis is the most accepted hypothesis for schizophrenia. There is hyperactivity of dopaminergic system. This hypothesis is supported by: 1) Amphetamine and cocaine which release dopamine in central synapses induce schizophrenia like symptoms; and 2) Antipsychotic drugs control the schizophrenic symptoms by blocking dopamine (D,) receptors. However, the dipamine hypothesis has been questioned also as Homo vanillic acid (HVA the principal metabolite of dopamine) is not elevated and prolactin level is not decreased (Dopamine has inhibitory action on prolactin release).
- Other neurotransmitters involved are : Increased serotonin, Decreased GABA, variable change (Increased or decreased) glutamate, and increased norepinephrine.



74. Capgras syndrome is?

- a) Sharing of delusion
- b) Delusion of double
- c) Erotomania
- d) Hypochondriacal delusions

Correct Answer - B

Ans. is 'B' i.e., Delusion of double

Capgras syndrome is a delusion of double.

The delusional misidentification syndrome (DSM)

- DSM is characterized by misidentification delusions of others or self. Four main syndromes are differentiated : ?
- Capgras syndrome (Delusion of double):- Patient falsely sees a familiar person as a complete stranger who is imposing on him as a familiar person.
- 2. Fregoli syndrome (illusion de fregola): The patient falsely identifies stranger as a familiar person.
- 3. Syndrome of subjective double: The patient's own self is perceived as being replaced by a double.
- I. Syndrome of intermetamorphosis: A false belief that a person can transform into another person.
- These syndromes most commonly appear in schizophrenia. Other causes are Alzheimer syndrome, head injuries, and delusional disorders.



75. Drug used for cocaine withdrawal symptoms is-

a) Floxetine
b) Lorazepam
c) Phenobarbital
d) No drug

Correct Answer - D Ans. is 'd' i.e., No drug

- "Tolerance develops swiftly but there are no withdrawal symptoms. Treament, if needed, is symptomatic. Often no medicines are needed and the user can stop its use by himself when he is coerced to do so by the court or the employer" Namboodiri
- "No pharmacological agents reliably reduce the intensity of withdrawal, but recovery over a weak or two is generally uneventful" - Kaplan & Saddock



76. In stupor catatonia, all are seen except -

a) Agitation
b) Catalepsy
c) Mutism
d) Akinesia

Correct Answer - A

Ans. is 'a' i.e., Agitation

- Agitation is seen in excited catatonia (not is stupor catatonia).
- Features of catatonic schizophrenia may be :?
- .. Excited catatonia :- It is characterized by *increased in psychomotor activity,* i.e. restlessness, *agitation,* excitement, aggressiveness, violence. The impulsive activity occurs in response to *hallucination* and delusions.
- 2. Stuporous (retarted catatonia):- It is characterized by *extreme* retardation of psychomotor activity. It includes mutism, rigidity, negativism, posturing, stupor, echolalia, echoproxia, catalepsy (waxy flexibility), ambitendency, gegenhalten, stereotypies, stupor, mannerism, *Grimicing*, automatic obedience.



77. Psychosurgery is used in?

a) Phobia		

- b) Generalized anxiety
- c) OCD
- d) Depression

Correct Answer - C Ans. is 'c' i.e., OCD

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78. Role of marijuana in AIDS related cachexia?

- a) Euphoric
 b) Pschostimulator
- c) Increases appetite
- d) Decrease emetic feeling

Correct Answer - C Ans. is 'c' i.e., Increases appetite

Mari-juana or cannabis sativa contains the active principle tetrahydrocannabinol (THC), which as an appetite stimulant effect.



79. All are used in treatment of nocturnal eneuresis except?

- a) Imipramine
- b) Alarm setup
- c) Voiding of urine before sleeping
- d) Maintainence of calendar of day night wetting

Correct Answer - D

Ans. is 'd i.e Maintainence of calendar of day night wetting

All are used.

Treatment of nocturnal eneuresis

- It consists of :?
- .. Appropriate toilet training and restricting fluid at night. Encouraging the child to empty their bladder before bed.
- 2. Alarm therapy
- Behavioral therapy using "bell and pad apparatus"
- I. Motivational therapy
- 5. If non-pharmacological treatment fails -4 Imipramine is the drug of choice. Other drugs used are oxybutynin and desmopressin.
- Record keeping is helpful in determining a baseline and following the child's progress and may itself be a reinforcer. A star chart may be particularly helpful.



80. Repressed information can be brought into conscious mind by all except?

a) Dream
b) Focused attention
c) Hypnosis
d) Somatic stimulation

Correct Answer - B

Ans. is 'b' i.e., Focused attention

- Preconcious thoughts are readily accessible to conciousness by focused attention, but not unconscious thoughts which contains repressed memory.
- Freud advanced the 'topographic theory of mind' in the year 1900 in the book 'the interpretation of dreams'. It divides the mind into three divisions :?
- ... Unconscious : A traumatic event which had occured during childhood are "repressed" (forced down) into deeper layer of unconsciouness where they lie dormant without producing any symptoms.
- Preconscious: This is the region of mind between the unconscious and the conscious, with access to both. The unconscious mental contents can reach the conscious only through the preconscious. So, It acts as a sensor of conscious to mentain repressive barrier for unconscious mental contents.
- 3. Conscious: It refers to attention concerned with registration of stimuli from both with and without.
- Focused attention can bring preconcious thoughts to consciousness. But repressed memory is in unconscious.
- Methods used to recover repressed thoughts are :-



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- .. Hypnosis
- 2. Dream interpretation
- 3. Automatic writing
- I. Somatic stimulation
- i. EMDR (eye movement desensitization and reprocessing)

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81. All of the following are used to improve attention deficit in children except?

- a) Cognitive enhancement therapy
- b) Cognitive behavioural therapy
- c) Cognitive remeditation therapy
- d) Flooding

Correct Answer - D

Ans. is 'd. i.e., Flooding

- In attention deficit following can be used:
- ... Cognitive enhancement therapy (also called cognitive remediation therapy)
- 2. Cognitive behavioral therapy
- 3. Clinical behavior therapy
- I. Direct contingency management
- i. Intensive, packaged behavioral treatment



82. Indications for ECT are all except?

- a) Severe depression with suicidal risk
- b) Catatonic schizophrenia
- c) Severe psychosis
- d) Sever manic attack

Correct Answer - D

Ans. is 'd' i.e., Sever manic attack

Indications of ECT

- Severe depression with suicial risk or with psychotic features or with stupor.
- Some types of schizophrenia (catatonic or paranoid)
- Schizophrenic or depressive stupor
- Severe catatonia with stupor
- Severe psychoses (schizophrenia or mania) with risk of suicide or homicide or physical assault.



83. Concrete thinking stage of cognitive development?

a) 0-2 years	
b) 2-5 years	

d) 10-15 years

Correct Answer - C

c) 5-10 years

Ans. is 'c' i.e., 5-10 years

Cognitive development stages

- Children are not little adults. Until they reach the age of 15 or so they are not capable of reasoning as an adult. Jean Piget described four major stages of intellectual (cognitive) development which are related to major development in brain growth.
- Sensori-motor stage (birth 2 years)
- 2. Pre-operational stage (2-7 years)
- 3. Concrete operational stage (7-11 years)
- I. Formal operational stage (>11 years)



84. Delusions are features of all except?

a) Delirium
b) Schizophrenic
c) OCD

Correct Answer - C Ans. is 'c' i.e., OCD

d) Alcohol withdrawal

Delusions are seen in psychotic disorders

- Organic
- ... Delirium (Acute confusional state)
- 2. Substance :- Abuse (alcohol, amphetamines) and withdrawal (alcohol).
- Non organic
- ... Schizophrenia
- 2. Affect/mood disorders (Mania & depression)
- 3. Other non-organic psychosis :- Delusional disorders, Schizoaffective disorders.
- Delusions are not seen in neurotic disorders -, Anxiety disorders obsessive-compulsive disorders, Dissociative (conversion) disorders, Somatoform disorders, Stress-related disorders

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85. Psychoanalysis was started by?

a) Eugen Bleuler	
b) Sigmund Freud	
c) Bleuler	

d) Erikson

Correct Answer - B

Ans. is 'b' i.e., Sigmund freud

Name	Contribution Psychoanalysis, free association, (oedipus & electra
Sigmund Freud	complex), cocaine in psychiatry, Repression, ego-defence mechanisms, psychodynamic theory.
Phillippe Pinel	Moral and humane treatment of mentally ill
Jones Maxwell	Propagated therapeutic community concept.
Kuble Ross Erik	Classified five stages of death.
Erikson	Divided life cycle in 8 stages



86. Hallucinations, true is?

- a) Perceived in the inner subjective space
- b) There is misinterpretation of external stimulus
- c) There is no external stimulus
- d) Can be controlled by voluntary effort

Correct Answer - C

Ans. is 'c' i.e., There is no external stimulus

- Characteristics of Hallucinations :?
- ... Absence of corresponding external perceptual stimuli.
- 2. Vividness, force and reality value of a normal perception.
- 3. The experience occurs spontaneously
- It cannot be produced or terminated at will by subject (not in conscious or voluntary control).
- 5. Perceived as being in external objective space.
- i. Have relative permancy (i.e. remain constant and unchanged).
- 7. Hallucinations are usually experienced alongside and simultaneously with normal perception.



87. Cotard's syndrome has?

a) Persecutory delusions	

- b) Religious delusions
- c) Nihilistic delusions
- d) Hypochondrical delusions

Correct Answer - C Ans. is 'c' i.e., Nihilistic delusions

Types of delsions

- Based on the contents of delusions, they are divided into :-
- Persecutory delusions (paranoid): The patient feels that he is being persecuted against. There is false belief that one is being harmed, threatened, cheated, poisoned, harassed or spied on or is a victim of conspiracy to damage his reputation. The supposed persecutor of the patient may be people in the environment (e.g., members of family, neighbours, former friend) or may be political or religious groups. These delusions occur in schizophrenia (especially paranoid), severe affective disorders (sever mania or severe depression), and organic brain syndrome. This is the most common type of delusion. Delusion of persecution may occur in the context of primary delusional experiences, auditory hallucinations, bodily hallucinations or experiences of passivity.
- 2. Grandiose delusion (expansive delusions): False belief that one is exceptionally powerful, talented or important. These delusions seen most commonly in mania, However, can also occur in schizophrenia and organic states.
- 3. Delusions of reference: False belief that certain objects, people or events have intense personal significance and refer specifically to one self, e.g., believing that a television news reader is talking





- directly about oneself, or people walking on the road are talking about him. These delusions are seen in schizophrenia, mania and organic states.
- I. Religious delusions : False belief pertaining to a religious theme, often grandiose in nature, e.g., believing that one is a special messenger from God. These delusions are seen in schizophrenia.
- 5. Delusions of love (erotomania): False belief that another person is in love with one (commoner in woman). In one form, termed de clerambault sydrome, a woman (usually) believes that a man, frequently older and of higher status, is in love with her.
- 5. Delusion of infidility (morbid jealousy, othello syndrome :- False belief that one's lover has been unfaithful. These are seen in schizophrenia, alcohol related psychosis, organic states.
- '. Delusion of misidentification : a) Capgras syndrome (Delusion of double) : Belief that a familiar person has been replaced by an exact double i.e. an impostor. b) Fregoli syndrome : Belief that a complete stranger is actually a familiar person already known to one.
- 3. Delusion of self accusation or guilt : False feeling of remorse of guilt. It occur in Depression.
- Nihilistic delusions: False belief that oneself, others or the world is non-existent or about to end. There are pessimistic ideas that the patient's career is finished, he is about to die, world is doomed. These occurs in severe depression. If nihilistic delusions are accompanied by ideas concerning bodily function failure, e.g., putrefaction of intestines, etc., the syndrome is called COTARD's SYNDROME.
-). Hypochondriacal delusions : False belief about one's health, patient wrongly believes that he has severe medical illness, contrary to the all medical evidences. It is seen in depression.
- Delusion of infestations: False belief that one is infested with small but visible organisms. As a monosymptomatic delusional disorder this is called EKBOM SYNDROME. It is seen in acute confusional state (due to drugs or alcohol withdrawal), in schizophrenia, in dementing illness, and as delusional eloboration of tactile hallucinatory experiences (secondary to formication).
- 2. Delusion of control : Belief that his actions, impulses or thoughts are controlled by an outside agency and accordingly called as made







- action, made impulse or made affect. Also called somatic passivity experiences (passivity phenomenon). Commonly seen in schizophrenia.
- 3. Delusions concerning possession of thoughts Patients with delusions about possession of thoughts may lose the conviction that their thoughts are their own. Most commonly seen in schizophrenia.
- Delusions of thought insertion thoughts have been implanted by an outside agency.
- Delusions of thought withdrawal thoughts are being taken out of their mind. This is usually accompanied by "thought block".
- Delusions of thought broadcast unspoken thoughts are known to other people through radio, telepathy or in some other way.



88. Oedipus complex is related to which phase of psychosexual development?

a) Oral	
b) Anal	
c) Genital	
d) Phallic	

Correct Answer - D
Ans. is `d' i.e., Phallic



89. Most effective treatment in borderline personality disorders?

a) Pharmacotherapy
b) Behaviour therapy
c) Combination of both pharmacotherapy and behavioural therapy
d) None

Correct Answer - B

Ans. is 'b' i.e., Behaviour therapy

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• "Dialectical behavioral therapy (DBT), a type of cognitive behavioral therapy (CBT), has been developed specifically for the treatment of borderline personality disorder, and it appear to be the most effective treatment for this condition".



90. All are reversible causes of dementia except

a) Hypothyroidism
b) Hydrocephalus
c) Meningoencephalitis
d) Alzheimer's disease

Correct Answer - D

Ans. 'D' i.e., Alzheimer's disease

Reversible causes of dementia

- 1) Surgically treatable:- Normal pressure hydrocephalus, brain tumors (frontal lobe tumor), meningioma, subdural hematoma due to head injury, hydrocephalus.
- 2) Medically treatable:- Depression, hypothyroidism, alcohol abuse, vitamin B 12/folate/Niacin deficiency, any metabolic or endocrine disturbance, neurosyphilis, Hashimoto's encephalopathy, Wilson's disease, celiac disease, Whipple's disease, chronic meningoencephalitis, drugs and toxin (toxic dementia).

Irreversible causes of dementia:-

Alzheimer's disease, vascular (multi-infarct) dementia,
 Parkinsonism, Huntington's chorea, Lewy body dementia, Pick's disease.



91. Visual hallucinations are seen in all except?

- a) Delirium
 b) Depression
 c) Schizophrenia
- Correct Answer B

Ans. is 'b' i.e., Depression

d) Alcohol withdrawal

Type of Causes

Auditory

- Schizophrenia, Organic brain syndrome, Alcoholic hallucinosis manic-depressive illness, Brain lesions → Pontine or temporal lobe lesions.
- Organic brain disturbances : Delirium, delirium tremens, occipital lobe tumors, epilepsy, dementia
- Intoxication (LSD, amphetamines, Alcohol, mescaline), alcohol withdrawal.

Visual

- Brain lesions
- 1. Unformed visual hallucinations :- Disorders of occipital lobe or ocular diseases.
- 2. Formed visual hallucinations :- Disorders of temporal lobe, upper brain stein or thalamus
- Schizophrenia
- Temporal lobe diseases (e.g., complex partial seizure).

Ifactory & gustatory

 Olfactory hallucination may also occur in depression & schizophrenia



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Tactile

- Schizophreni
- Formication :- Cocaine, alcohol withdrawal

Note: Epilepsy and cerebral disorders can cause hallucinations of all modalities depending on the site of lesions.



92. Waxy flexibility is a feature of?

a) Echopraxia	
b) Catatonia	
c) Stereotype	
d) Mannerism	

Correct Answer - B

Ans. 'B' i.e., Catatonia

Catatonia may be of following types:-

- Catatonic excitement:- Excited, uncontrolled motor activity, not influenced by external stimuli.
- Catatonic posturing:- Voluntary adoption of an unusual or bizarre position that is then maintained for some time.
- Catatonic rigidity:- Maintaining a fixed position and rigidity resisting all attempts to be moved.
- Waxy flexibility (flexibility cerea or catalepsy): Maintaining of particular posture imposed on the patient by the examiner, even if the posture is bizarre and uncomfortable, i.e., the patient can be molded like wax into a position that is then maintained.
- Catatonic stupor:- Patient is mute and immobile (akinetic mutism) but fully conscious.
- Catatonic negativism .- A seemingly motiveless resistance to all instructions or attempts to be moved.
- Automatic obedience:- Exactly reverse to negativism, i.e., unhesitating compliance to all instructions without apparent conscious control.



93. Term Psychiatry was coined by ?

a) Moral	
b) Johann reil	
c) Bleuler	_
d) Pinel	_

Correct Answer - B

Ans. is 'b' i.e., Johann reil

IMPORTANT CONTRIBUTORS IN PSYCHIATRY

Term Coined by

Moral

Emil

Kraepelin

Demence precoce Kahlbaum Dementia precox Hecker

Catatonia, cyclotymia Eugen

Hebephrenia Bleuler Schizophrenia Eugen

Ambivalence Bleuler

Free association Sigmund Psychoanalysis, Freud

Psychodynamics Sigmunnd Id, ego, Superego Freud

Psychiatry Sigmund Freud Johann

christion Reil



94. All are features of Korsakoff syndrome except

a) Antegrade amnesia
b) Retrograde amnesia
c) Ataxia
d) Confabulation

Correct Answer - C Ans. 'C' i.e., Ataxia

Korsakoff syndrome

- Korsakoff's syndrome is the chronic amnestic syndrome that follows Wernicke's encephalopathy, and the two syndromes are believed to be pathophysiologically related. Korsakoff's syndrome is characterized by severe and irreversible memory impairments and confabulation behaviour in the absence of intellectual decline or attention deficit. Important clinical features are:?
- Memory:- The Korsakoff syndrome is characterized by both antegrade (i.e., learning) and retrograde (i.e., a memory of past events) amnesia. Antegrade amnesia is severe with a lack of insight. Retrograde amnesia is not as severe. New learning and recent memory are impaired but remote memory is relatively preserved. Although remote memory is relatively preserved, the patient is unable to organize them in a temporal context and distort the relationship between facts and fill the remote memory gaps by confabulation. There is a profound deficit of explicit (conscious or declarative) type of long term memory, with little impairment of implicit (unconscious or non-declarative) type of long term memory. Personality:- Passive and malleable such that they display a lack of
- 2. Personality:- Passive and malleable such that they display a lack of initiatives, interest, or concern and diminished spontaneity.



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- 3. Other:- Perseveration, lack of motivation (amotivational syndrome), apathy, passivity.
- I. General intelligence, language, and motor & perceptual skills are not impaired.



95. Diagnostic criteria for drug dependence includes all except -

- a) Tolerance

 b) Withdrawal symptoms

 c) Early completion of tasks
 - d) Larger dose than usual

Correct Answer - A

Ans. is 'c' i.e., Early completion of tasks

Diagnostic criteria for substance abuse

- To make a diagnosis of dependence, three or more of the following criteria should be present.
- Tolerance :- Same dose produces markedly diminished effect on continuous use, therefore increased doses are required to produce same effect.
- Withdrawal symptoms on abstinence.
- Substance is taken in larger amount or longer period than was intended.
- Persistent desire (craving) or sense of compulsion to take the substance.
- A great deal of time spent to obtain the substance, to use substance or to recover from its effect.
- Neglect of important social, occupational and recreational activities.
- Continued substance use despite clear evidence of overtly harmful consequences



96. Suspiciousness is a characteristic feature of?

- OT ?
- a) Paranoid personality disorder
- b) Schizoid personality disorder
- c) Schizotypal personality disorder
- d) Anankastic personality disorder

Correct Answer - A

Ans. is 'a' i.e., Paranoid personality disorder

Paranoid personality disorder

- It is characterized by generalised mistrust and Suspiciousness about the motives and actions of others and a tendency to interpret them as malevolent. The patient believes that :-
- ... Others are exploiting or deceiving the person.
- 2. Friends are untrustworthy and not loyal.
- 3. The spouse/partner is unfaithful.
- I. There is hidden meaning in neutral or friendly remarks.
- Many patients have feeling of self-importance and think they are unusually talented



97. Earliest symptom showing improvement from classical triad of Wernicke's incephalopathy. to thiamine therapy?

a) Ataxia
b) Ophthalmoplegia
c) Confusion
d) All are equally responsive

Correct Answer - B

Ans. is 'b' i.e., Ophthalmoplegia

Response to thiamine treatment in Wernicke's encephalopathy

- Ocular symptoms: Earliest to respond, ophthalmoplegia (ocular palsies) improves within hours of thiamine administration. However, horizontal nystagmus may persist.
- Ataxia :- Ataxia responds more slowly than ocular palsies and half the patients recover incompletely with a residual ataxia.
- Encephalopathy: Confusion and other CNS symptoms improve more slowly. As the symptoms of encephalopathy improve, Korsakoff's syndrome may become apparent in some patients



98. All are symptoms of morphine withdrawal except?

a) Mydriasis b) Yawning c) Lacrimation d) Fall in BP

Correct Answer - D

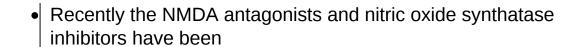
Ans. is 'd' i.e., Fall in BP

- worphine withdrawal
 Manifestations of morphine withdrawl
 Lacrimation
 Anxiety & fear
 Mydriasis
 Diarrhea
 Palpitation
 Sweating
 Restlessness
 Insomnia

-). Dehydration
-). Rapid weight loss
- Yawning
- 2. Gooseflash (Piloerection)
- 3. Abdominal colic
- I. Rise in BP
- Delirium and convulsions are not a characteristic features (contrast barbiturates) and are seen only occasionally.
- Treatment consists of withdrawl of morphine and substitution with oral methadone followed by gradual withdrawl of methodone.







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99. All are required to diagnose major depression except?

- a) Depressed mood
- b) Isomnia
- c) Nihlistic ideas
- d) Decreased concentration

Correct Answer - C

Ans. is 'c' i.e., Nihlistic ideas

Diagnostic criteria for major depression

- 5 or more of following symptoms should be present most of the day for at least 2 weeks: ?
- Depressed mood
- Loss of interest or pleasure in all activities.
- 3. Decrease/increase appetite or loss/gain of weight.
- I. Insomnia or hypersomnia (Increased or decreased sleep).
- 5. Psychomotor retardation or agitation (decreased or increased psychomotor activity).
- 5. Fatigue or loss of energy (weakness or lethargy).
- Feelings of worthlessness or excessive guilt.
- 3. Diminished concentration
-). Recurrent thoughts of death or recurrent suicidal ideation or suicidal attempt.
- At least one of symptoms should be either :?
- Depressed mood or 2) Loss of interest or pleasure —) These two (1 & 2) are essential criteria. Therefore 1 essential criterian and 4 other criteria (total 5) should be persent.



100. All are features of psychosis except?

- a) Loss of insight
- b) Presence of delusions
- c) Preserved contact with reality
- d) Personality disturbances

Correct Answer - C

Ans. is 'c' i.e., Preserved contact with reality

Psychosis

- Psychosis is a mental state involving the loss of contact with reality, causing deterioration of normal social functioning. The characteristic features of psychosis are : -
- ... Gross impairment in reality testing, i.e., loss of contact with reality.
- 2. Marked disturbance in personality and behavior with impairment in social, interpersonal and occupational functioning.
- 3. Marked impairment in judgement.
- Loss of insight (insight is an assessment of how aware the patient is of their own mental illness).
- 5. Presence of characteristic symptoms like delusions and hallucinations, these are called psychotic symptoms.
- The major psychosis are : ?
- Organic psychotic disorders, e.g., Delirium, substance related psychosis, head trauma.
- Non-organic psychoses
- 3. Major psychoses : Schizophrenia, mood disorders (depression, mania, bipolar).
- Other psychotic disorders (third psychosis): Delusional disorders, acute and transient psychotic disorders, schizoaffective disorder
 Neurosis







- Neurosis is a general term referring to mental distress that, unlike psychosis, does not prevent rational thought and daily functioning.
 Characteristic features are: -
- ... Symptoms cause subjective distress to the patient.
- 2. Insight is present (symptoms are recognised as undesirable).
- 3. The personality and behaviour are relatively preserved as is the judgement.
- I. The contact with reality is preserved.
- i. Absence of organic causative factor
- Important neurotic disorders are Anxiety disorders (Panic), Phobia (Phobic anxiety disorder), obsessive compulsive disorder, Dissociative conversion disorder.



101. Ganser syndrome is a feature of?

- a) OCD
- b) Conversion disorder
- c) Dissociative disorder
- d) Schizoid personality disorder

Correct Answer - C

Ans. is 'c' i.e., Dissociative disorder

Dissociative disorder

- The essential feature of the dissociative disorder is a disruption in the usually integrated functions of consciousness, memory, identity or perception of the environment. Dissociative disorder are :-
- Dissociative (psychogenic) amnesia: It is the most common type of dissociative disorder. Dissociative amnesia is characterized by retrograde amnesia (inability to retrieve stored memories and events leading up to onset of amnesia) and absence of antegrade amnesia (inability to form new long term memories).
- 2. Dissociative fugue :- A dissociative fugue may be present when a person impulsively wanders or travels away from home and upon arrival in the new location is unable to remember his/her past (i.e., amnesia for early life). There is loss of personal identity and the person assumes a new identity. There is absence of awareness of amnesia during fugue episode, i.e., Patient denies any memory loss during fugue state. On recovery there is amnesia for fugue episodes and recovery of memory of earlier life (i.e., before the episode of fugue).
- 3. Dissociative identity disorder (multiple personality disorder) :- More than one personality appears to possess the individuals, Showing their characteristic behavior. At any instance behavior and memories







- of one personality is exhibited, patient then is unaware of the other's existance.
- I. Depersonalization disorder: Feeling of detachment from self is referred to as depersonalization. Individuals with this disorder will report feeling as if they are living in a dream or watching themselves on movie screen i.e., feeling detached from self and as if one is an outside observer of oneself. People with this disorder feel like they are "going crazy" and they frequently become anxious and depressed
- Dissociative disorders not otherwise specified :- These are the disorders that are characterized by dissociative response that do not meet diagnostic criteria for one of the other dissociative disorder. Important ones are :-
- Dissociative Trance (Possession) disorders: There is temporary exchange of person's personality by a new personality usually attributed to a spirit or divine power. Usually the person is aware of the existance of the other, i.e., possessor (unlike dissociative identity disorder).
- Ganser's syndrome: Also known as syndrome of approximate answers. This is characterized by giving approximate answers together with a clouding of consciousness, and frequently accompanied by hallucinations and other dissociative, somatoform or conversion symptoms.



102. Repetitive irresesistable thought to do something

a) Phobia	
b) Obsession	
c) Compulsion	
d) Anxiety	

Correct Answer - B

Ans. is 'b' i.e., Obsession

Obsessive compulsive disorder (OCD)

- OCD is an anxiety disorder which is characterized by recurrent, unwanted thoughts (Obsessions) and repettive behaviors (compulsions).
- An obsession has following characteristic : -
- ... An idea, impulse or image which intrudes into the conscious awareness repeatedly.
- 2. It is recognized as one's own ideas, impulse or image but is perceived as egoalien (foreign to one's personality).
- 3. It is recognized as irrational and absurd (insight is present --4 Patient knows about disorder).
- I. Patient tries to resist against it but is unable to do so which leads to marked distress or anxiety.
- A compulsion has following characteristics :-
- .. It is repetitive, purposeful form of behavior is carried out because of strong feeling of compulsion to do so.
- 2. It usually follows an obsession.
- 3. ts goal is to prevent or reduce the anxiety or stress caused by obsession however it do not always succeed in doing so.
- I. It is irrational or excessive and not realistic.







- i. Insight is present.
- A patient with OCD may have an obsession, a compulsion or both (mostly patients have both).
- A patient with OCD realizes the irrationality of the obsession and experiences both the obsession and the compulsion as ego-dystonic (unwanted behavior).
- The person is preoccupied with details rules, list order, organisation or schedules to the extent that the major point of activity is lost.
- The person shows perfectionism that interfers with task completion (e.g., unable to complete project because his own overtly strict standard are not met).

103. All are features of neurosis except?

- a) Symptoms cause subjective distress
- b) Contact with reality preserved
- c) Personality disturbances
- d) Insight is maintained

Correct Answer - C Ans. is 'c' i.e., Personality disturbances



104. All are seen in nicotine withdrawal except ?

a) Hyperhydrosis	
b) Anxiety	
c) Bradycardia	
d) Insomnia	

Correct Answer - A
Ans. is 'a' i.e., Hyperhydrosis



105. All are included in diagnostic criteria of somatization disorder except?

a) Sexual symptom	_
b) Pain symptom	〜 〜
c) GI symptom	〜 〜
d) Visual symptoms	

Correct Answer - D

Ans. is 'd' i.e., Visual symptoms

Somatization disorder

- The essential features of somatization disorder are multiple recurrent somatic symptoms of long duration (chronic) that are caused by psychological basis and no physical illness can be found.
- The disorder begins before the age of 30 years and then has a chronic course (over a period of several years). Diagnostic criteria for somatization disorder
- Each of the following should be present : ?
- Four pain symptoms: Pain, at least at four different sites or functions –9 Head (headache), abdomen, back, joint, extremites, chest, rectum, during mensturation or sexual intercourse or urination.
- 2. Two gastrointestinal symptoms :- Nausea, bloating, vomiting, diarrhea.
- 3. One sexual symptom :- Erectile dysfunction (Impotence), ejaculatory dysfunction, irregular menses, excessive menstural bleeding.
- I. One pseudoneurological symptom :- Conversion symptoms (impaired coordination or balance, paralysis, weakness, blindness, deafness, glove & stocking anesthesia, Paresthesia, seizure, aphonia); Dissociative symptoms (amnesia); loss of consciousness.



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106. Bleuler's symptoms for schizophrenia are all except?

a) Loosening of association
b) Affect disturbances
c) Autism
d) Hallucinations

Correct Answer - D

Ans. is 'd' i.e., Hallucinations

- Eugen Bleuler renamed dementia precox as Schizophrenia. He recognized that schizophrenia is a group of disorders rather than a distinct entity. Therefore, he used the term, a group of schizophrenias.
- Bleuler described the characteristic symptoms (fundamental symptoms) for schizophrenia which are also known as 4 'A's of Bleuler:?
- .. Ambivalence (coexistence of two opposite feelings and attitude towards the same thing in the same person at the same time).
- 2. Autism (Preoccupation with fantasies, delusions and hallucinations to the exclusion of reality).
- 3. Affect disturbances (e.g., inappropriate affect)
- I. Association disturbances (e.g., Loosening of association, thought disorder).
- He also described accessary syptoms *of schizophrenia : d*elusions, hallucinations, and negativism.



107. Negative symptom of schizophrenia?

a) Hallucination	
b) Delusion	
c) Ambivalance	
d) Motor hyperactivity	

Correct Answer - C Ans. is 'c' i.e., Ambivalance

- Symptoms of schizophrenia can be divided into :?
- ... Positive symptoms :- Positive symptoms are psychotic symptoms not seen in normal individuals but are "actively expressed" in patient, i.e., hallucinations, delusions and bizarre motor acts. Positive symptoms are more common in acute schizophrenia. These respond well to typical antipsychotics.
- 2. Negative symptoms: Negative symptoms are normally expected behaviours, emotions (feeling), thoughts and drives that the person with schizophrenia fail to exhibit, i.e., deficit state (diminution or loss) of normal function. The prominent negative symptons are flattening or blunting of affect, anhedonia, ambivalence (avolition) asociality (social withdrawal), alogia, apathy, paucity of thought and poverity of speech. Negative symptoms are more common in chronic schizophrenia. Negative symptoms do not respond well to typical antipsychotics Therefore patient on typical antipsychotics may show improvement of positive symptoms and persistent of negative symptoms.
- More recently a third category has been proposed.
 3.Disorganized symptoms :- Disorganized speech/thinking, and disorganized behavior.



108. Cyclothymia is a type of?

- a) Bipolar mood disorder
 b) Major depression
 c) Dysthymia
- d) Persistant mood disorder

Correct Answer - D

Ans. is 'd' i.e., Persistant mood disorder

Persistent mood disorder

- Mood disorders may run a chronic course over years with fluctuation of mood interposed with symptom free intervals. If symptoms persist for more than 2 years, they are referred to as persistent mood disorders. Two most important persistant mood disorders are :?
- .. Cyclothymia :- It is a subdued version of bipolar disorder, characterized by episodes of depression and hypomania that neve,. have sufficient intensity to meet full diagnostic criteria for bipolar disorder.
- 2. Dysthemia: Long standing (persistent, i.e., 2 years) mild depression which is not severe enough to meet full diagnostic criteria for major depression. Symptoms are more prominent than signs (more subjective than objective depression). This means that disturbances in appetite and libido are uncharacteristic, and psychomotor agitation or retardation is not observed.



109. All are anxiety disorders except?

- a) Phobias
 b) OCD
 c) Conversion reaction
- d) PTSD

Correct Answer - C

Ans. is 'c' i.e., Conversion reaction

Anxiety disorders are:-

- .. Panic disorder with or without agoraphobia
- 2. Agoraphobia with or without panic disorder
- 3. Specific phobia
- I. Social phobia
- 5. Obsessive compulsive disorder
- 5. Post traumatic stress disorder
- '. Generalized anxiety disorder



110. All are diagnostic symptoms of schizophrenia except?

a) Catatonia
b) Hallucinations
c) Disorganized speech
d) Social withdrawal

Correct Answer - D

Ans. is 'd' i.e., Social withdrawal

Diagnostic criteria for schizophrenia

- Characteristic symptoms :- Two (or more) of the following for a 1 months duration (or less if successfully treated) :?
- .. Delusions
- 2. Hallucinations
- 3. Disorganized speech
- I. Grossly disorganized or catatonic behavior
- Negative symptoms, i.e., affective flattening, alogia.
 Note: Only one of the above is required if delusions are bizarre or there are third person hallucinations (running commentary or two voices arguing or conversing).
- Social/occupational dysfunction
- Duration :- Continuous signs of disturbance persist for at least 6 months. This 6 months period must include at least 1 month of symptoms that meet criteria A.
- Exclusion of mood disorder and schizoaffective diorder.
- Exclusion of substance abuse/general medical condition.



111. All are true about type 1 schizophrenia except?

- a) Acute illness
- b) Good prognosis
- c) Negative symptoms
- d) Intellect maintained

Correct Answer - C

Ans. is 'c' i.e., Negative symptoms

Type I (Reactive or acute schizophrenia)

Characteristic symptoms

Type of illness
Response to
neuroleptics
Outcome

Intellectual impairment Etiology

Positive symptoms (Hallucination, Acute Delusion, Thought)

Good

Reversible Absent

Dopamine overactivity

Good

Type II (Process schizophrenia)

Negative symptoms (Affect flattening, poverity of

speech loss of drive

Chronic Poor

Long standing

Sometimes present Structural changes in

brain (dilated

ventricle on CT scan

Poor



112. Drug of choice for generalized anxiety?

a) 3-blocker	
b) Alprazolam	
c) Buspirone	
d) Phenytoin	

Correct Answer - B Ans. is 'b' i.e., Alprazolam

Treatment of generalized anxiety

- Benzodiazepines are the drug of choice. Drugs in this group are diazepam, Lorazepam, Alprazolam, Oxazepam, chlordiazepoxide.
- Other drugs used are buspirone; TCA (amptriptyline, imipramine, clomipramine, desipramine); SSRIs (Fluoxetine, Sertaline, Paroxetine, Citalopram); SNRIs (Venalafaxine), 13-blockers.
- Anticonvulsants with GABAergic properties may also be effective against anxiety, e.g., Gabapentin, Oxcarbazepine, Tiagabine, pregabalin, and Valproate (divalporex).



113. Persistent preoccupation with serious illness and normal body function is called?

(a) Obsession
b) Somatization
c) Hypochondriasis
d) Conversion disorder

Correct Answer - C

Ans. is 'c' i.e., Hypochondriasis

Hvpochondriasis (hypochondriacal disorder)

- The primary feature of hypochondriasis is persistent preoccupation with excessive fear of a serious (e.g., cancer) or incurable (e.g., AIDS) disease, which is based on person's own interpretation of physical symptoms or sensation, i.e., misinterpretation of physical symptoms or sensations, for example an occasional change in heart rate will lead a person with hypochondriasis to fear of heart disease. Therefore, Hypochondriasis is abnormal preoccupation about normal body function, i.e., body functioning is normal but patient thinks it as abnormal.
- The preoccupation with the presence of a feared illness persists inspite of normal medical assessment and investigations. Patient goes from one doctor to another for a consultation.
- People with hypochondriasis are able to acknowledge that their fears are unrealistic (insight is present), but this intellectual realization is not enough to reduce their anxiety.
- Two important facts differentiate hypochondriasis from somatization disorder : -



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- .. Patient with hypochondriasis is preoccupied with illness, on the other hand patient with somatization disorder is occupied with symptoms.
- 2. Hypochondriasis patient is preoccupied with one illness (usually) while patient with somatization disorder has many (at least 8 or more) symptoms.



114. Not true about somnambulism among the following is?

- a) Sleep walking.
- b) Patient consciousness is preserved.
- c) Disorder of sleep arousal.
- d) Low level motor skill/function is present

Correct Answer - D

Ans: D. Low level motor skill/function is present. Sleep walking (somnambulism):

- The patients may carry out a range of activities for which he doesn't have any memory later on.
- It may include leaving the bed and walking about and also activities like dressing, moving around or even driving.



115. Test based on the principle of suspect's reaction, if he witnesses an event then he behaves in a certain way is?

a) Narcoanalysis
b) Brain mapping
c) Truth serum testing
d) Polygraph

WWW.FirstRanker.com Correct Answer - D Ans:D. Polygraph

116. Intense depression & misery without any cause is?

a) Melancholia	
b) Major depressive disorder	<u> </u>
c) Mania	_

d) Schizophrenia

Correct Answer - A www.FirstRanker.com Ans:A. Melancholia



117. Which of the following is not true regarding delusional disorder?

a) Held with absolute conviction
b) Usually false
c) Not amenable to reasoning

Correct Answer - D

Ans:D. Occurs at early age.

d) Occurs at early age

- Delusional disorder may account for 1–2% of admissions to inpatient psychiatric hospitals.
- Age at onset ranges from 18–90 years, with a mean age of 40 years



118. Key symptom in alcohol withdrawal syndrome is:

a) Sleep disturbance	
b) Visual hallucinations	
c) Tremors	
d) Delirium	

Correct Answer - C

Ans: C. Tremors

Key symptom - Tremor.

Withdrawal Syndromes

Substance Features

- Yawning°, Insomnia, Dysphoric mood
- Water loss from different orifices° (Lacrimation°, sweating°, diarrhea°, vomiting,
- Increased vitals° (BP, Pulse, RR, Temperature)°
- Pupillary dilation, piloerection°
- Hang over (MC)°
- Hallucinations° (usually auditory) and illusions°
- Insomnia°
- Tremors/Seizures (Alcoholic seizures/Rum fits): Classic sign

Delirium tremens:

Opioid

- Alcohol Occurs within 5 days° of complete or significant abstinence° from heavy alcohol
 - Recovery occurs within 7 days
 - Characteristic features are clouding of consciousness°, disorientation°, hallucinations (mostly visual and







auditory)°, illusion°, autonomic disturbances°, agitation° and insomnia°.

• Increased or decreased Sleep (hypersomnia° or insomnia) Psychomotor activity

- Cocaine Vivid unpleasant dreams°
 - Increased apetite and fatigue

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119. What is produced by the supersensitivity of Dopamine receptors?

a) Dyskinesia
b) Hyperphagia
c) Hyperpathia
d) Hypomania

Correct Answer - A

Ans. is 'a' i.e., Dyskinesia

(Ref: Pathophysiology, pharmacology and biochemistry of dyskinesia p. 195)

• Increased neostriatal dopamine receptor density and dopaminergic supersensitivity in the neuroendocrine system are associated with the development of tardive dyskinesia.



120. Following are the major symptoms of obsessive compulsive disorders?

a) Contamination	_ _
b) Pathological doubts	〜 一
c) Intrusive thoughts	〜 一
d) All the above	_

Correct Answer - D

Ans. is'd'i.e., All the above

[RI Kaplan & Saddock's |tr/e p. 605)

OCD has four major symptom patterns :-

Contamination: -

 Contamination is the most common pattern of an obsession followed by washing (washer)

Pathological doubts: -

 Doubts is the second most common pattern of an obsession, followed by a compulsive checking (checkers).

Intrusive thoughts (Pure obsessions): -

- In this third most common pattern, there are intrusive obsessional thoughts without a compulsion.
- Such obsessions are usually r4re titious thoughts of a sexual or aggressive act that is reprehensible to the patient.

Symmetry: -

- This is the fourth most common pattern in which there is an obsession for symmetry or precision, which can lead to compulsion of slowness.
- Patients can literally take hours to shave their faces or to eat a meal.



121. All are true about narcolepsy except:

a) Day dreaming
b) Hypnagogic hallucinations
c) Cataplexy
d) Sudden sleep

Correct Answer - A

e) Decreased REM latency

Ans. (A) Day dreaming

[Ref Neeraj Ahuja 7th/ I j8-39; Kaplan & Sailockls Textbook of psychiatry 11th/547-50; Harrison 19th/189, t7th/172- ZB; CMDT 2016/1072]

Narcolepsy:

- Disorder characterized by excessive daytime sleepiness often distributed night time sleep and disturbances in REM sleep.
- Hallmark of this disorder is decreased REM latency, I.e. decreased latent period before the first REM period occurs.
- Normal REM latency is 90- 100 minutes, in narcolepsy, REM sleep occurs within 10 minutes of the onset of sleep.

Classical tetrad of symptoms:

- Sleep attacks (MC)
- Cataplexy
- Hallucinations at sleep onset (Hypnagogic) and upon waking (Hypnopompic)
- Sleep paralysis.



122. Which of the following is not a side effect of quetiapine?

a) Dry mouth	
b) Hair loss	
c) Sudden cardiac death	

d) Dyspepsia

Correct Answer - B

Ans. B. Hair loss

[Ref Goodman & Gilman li'Ve p. 463-466]

• Quetiapine is an atypical antipsychotic used for the treatment of schizophrenia, bipolar disorder, and major depressive disorder.

schizophrenia, bipolar disorder, and major depressive disorder.		
Very Common Less common		Rare
Dry mouth	High blood pressure	Prolonged QT interval
Dizziness	Orthostatic hypotension	Sudden cardiac death
Headache	High blood cholesterol	Syncope
Somnolence	Elevated serum triglycerides	Diabetic ketoacidosis
Nausea	Abdominal pain	Restless legs syndrome
Vomiting	Constipation	Hyponatraemia, low blood sodium.
Increased appetite	Increased appetite	Jaundice
Sore throat	Increased liver enzymes	Pancreatitis
Trouble moving	Backache	Agranulocytosis



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Rapid heartbeat	Insomnia	Seizure
Weakness	Fatigue	Cardiomyopathy
	Pain	Suicidal ideation
	Dyspepsia (Indigestion)	Priapism
	Peripheral edema	Neuroleptic malignant syndrome
	Dysphagia Weight gain	Tardive Dyskinesia.

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123. DOC for schizophrenic patient with poor oral absorption is?

a) Clozapine	
b) Fluphenazine	
c) Sulpride	
d) Penfluridol	

Correct Answer - B

Ans. B. Fluphenazine

[Ref: Ther Adv Psychopharmacol. 2014 Oct; 4(5): 198-219.doi: 10.1177/2045125314540297]

Long-acting injectable (LAI) antipsychotics (APs) (LAI APs) have proved effective in schizophrenia and other severe psychotic disorders because they assure stable blood levels, leading to a reduction of the risk of relapse.

LAIs bypass the initial deactivating process by avoiding first-pass metabolism in the liver.

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124. TCAs are contraindicated in all of the following except?

- a) Narrow angle glaucoma
- b) Prostate hypertrophy
- c) A patient on MOA inhibitors
- d) Impaired renal function

Correct Answer - D

Ans. D. Impaired renal function

[Ref Lippincott p. 81]

Common Contraindications of TCAS

- .. Hypersensitivity to the medicines
- 2. Cardiac conduction abnormalities
- 3. Within 14 days of MAO inhibitors
- I. Urinary retention
- 5. Narrow angle glaucoma
- 3. Prostate enlargement
- 7. Should be used cautiously in suicidal tendency, schizophrenia, seizure disorders, paranoia, impaired liver functions.
- 3. Safety in not established in pregnancy and lactation. Not recommended for children less 12years of age.



125. Loading dose of diazepam for alcohol withdrawal is?

a) 80mg	
b) 50mg	
c) 40mg	
d) 20mg	

Correct Answer - D

Ans. D. 20mg

Rigid:

• 10 mg four times daily

Flexible:

• 10 mg every 4-6 hours asneeded based on symptoms to a maximum of 60 mg/day

Front loading:

• 20 mg every 2-4 hours until sedation is achieved; then 10 mg every 4-6 hours as needed to a maximum of 60 mg/day



126. Confabulation is?

- a) A state of confusion where patient is not able to describe the details
- b) Purposefully fabricating stories to project a certain image
- c) Filling up to gaps by fabrication to cover lapses in memory
- d) A feeling of strangeness to familiar situations or events.

Correct Answer - C

Ans. C. Filling up to gaps by fabrication to cover lapses in memory

[Ref Kaplan & Sadock's 10th/e p. 275]

Confabulation

- It is a type of Paramnesia (Distorted or falsified recall of events in relation to details or their temporal relationships)
- Unintentional filling of gaps of memory with material which are untrue and fanciful.



127. Alcohol withdrawal is not associated with?

a) Seizure		
b) Amnesia		
c) Tremers		
d) Delirium		

Correct Answer - B

Ans. B. Amnesia

[Ref: Niraj Ahuja 6th/e p. 41]

Amnesia occurs during acute intoxication (not during withdrawal).



128. Drug of choice for Tourette syndrome is?

a) Haloperidol
b) Amantidine
c) Propanolol
d) Diazepam

Correct Answer - A

Ans. A. Haloperidol

[Ref Kaplan & Saddock 10'Ve p. 557]

Medication for tic suppression (Tourrete syndrome)

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Neuroleptics - Pimozide, along with haloperidol and fluphenazine are the medications with the most proven efficacy in controlling tics.



129. Scatologia is?

- a) Eating disorder
- b) Sleep disorder
- c) Paraphilia
- d) Defense mechanism

Correct Answer - C

Ans. C. Paraphilia

[Ref: Niraj Ahuja 6th/e p. 133, 134]

Scatologia, also called Coprolalia, is a deviant sexual practice in which sexual pleasure is obtained through the compulsive use of obscene language.

The affected person commonly satisfies his desires through obscene telephone calls, usually to strangers.



130. A 40 year old married male thinks that he is multitalented and is always overconfident. He never listens to his family or friends. Infact whenever anyone gives him any advice, he thinks that they have some motive against him. He is always suspicious of his wife.

All these are feature of?

a`) Borderline	personality	disorder
		<i>-</i>	

- b) Schizoid personality disorder
- c) Paranoid personality disorder
- d) Histrionic personality disorder

Correct Answer - C

Ans. C. Paranoid personality disorder

[Ref Namboodiri 3rdle p. 303; Niraj Ahuja ele p. 123]

Paranoid personality disorder:

- It is characterized by generalized mistrust and suspiciousness about the motives and actions of others and a tendency to interpret them as malevolent. The patient believes that:
- .. Others are exploiting or deceiving the person.
- 2. Friends are untrustworthy and not loyal.
- 3. The spouse/partner is unfaithful.
- I. There is hidden meaning in neutral or friendly remarks.
- i. Many patients have feeling of self-importance and think they are unusually talented.

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131. A 25 years old male is not happy with its gender and is always in distress due to this. He wants to change sex and have vagina. It comes under?

a) Transsexualism
b) Dual role transvestism
c) Gender dysphoria
d) Sexual maturation

Correct Answer - C

Ans. C. Gender dysphoria

[Ref Encyclopedia of relationships across the life span p.191]

- * Gender dysphoria (formerly Gender Identity Disorder)
- It is defined by strong, persistent feelings of identification with the opposite gender and discomforts with one's own assigned sex that results in significant distress or impairment.
- In these cases, the assigned sex and gender do not match the person's gender identity, and the person is transgender.



132. Characteristic of histrionic personality disorder is?

- a) Violation of rules of society
 b) Attention seeking behavior
- c) Unstable interpersonal relationship
- d) Grandiose behavior

Correct Answer - B

Ans. B. Attention - seeking behavior

[Ref Niraj Ahuja 6"'/e p. 122]

- Patients with histrionic personality disorder display excessive emotionality and attention-seeking behavior. Other options
- Violation of rules of society → antisocial personality disorder
- Unstable interpersonal relationship → borderline personality disorder
- Grandiose behavior → narcissistic personality disorder



133. Personality type seen in schizophrenia is?

a) Schizoid
b) Paranoid
c) Borderline
d) All of the above

Correct Answer - D

Ans. D. All of the above

[Ref Niraj Ahuja 6th/e p. 125 & Internet]

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• Schizophrenia is associated with 3 types of personality disorders i.e. schizoid, borderline and paranoid.



134. Irresistible urge to drink alcohol is called?

a) Kleptomania
b) Pyromania
c) Dipsomania
d) Trichotillomania

Correct Answer - C

Ans. C. Dipsomania

[Ref Peculiarities of behavior]

Dipsomania is characterized by periodic bouts of uncontrollable craving for alcohol.



135. Which of the following is not a culture bound syndrome?

a) Amok	
b) Latah	
c) Dhat	
d) Von-Gogh	

Correct Answer - D

Ans. D. Von-Gogh

Important culture-bound syndromes Ataque de nervios Dhat syndrome Khyal cap Ghost sickness Kufungisisa Maladi moun Nervios Sheniing shuois

- Ataque de nervios
- Dhat syndrome
- Khyal cap
- Ghost sickness
- Kufungisisa
- Maladi moun
- Nervios
- Shenjing shuairuo
- Taijin kyofusho
- Susto
- Amok
- Koro
- Latah
- Windigo



136. A 39 years old male patient presents with waxy flexibility, negativism and rigidity. Most probable diagnosis is?

a) Excitatory catatonia
b) Stuporous catatonia
c) Paranoid schizophrenia
d) None

Correct Answer - B

Ans. B. Stuporous catatonia

[Ref Neeraj Ahuja &hie p. 62, 63]

Stuporous (retarded) catatonia

 Characterized by extreme retardation of psychomotor function, which includes mutism, rigidity, negativism, posturing, echolalia, Echopraxia, Catalepsy (waxy flexibility), ambitendency, gegenhalten, streotypies, stupor, Mannerism, Grimicing, Automatic obedience, and verbigeration.

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137. Suicide rate in India is?

- a) 10.5 /100,000
- b) 12.5/100,000
- c) 14.5/100,000
- d) 18/100,000

Correct Answer - A

Ans. A. 10.5 /100,000

[Ref Internet; Indian 1 Psychiatry. 2012 Oct-Dec; 54(4): 304-319.doi:10.4103/0019-5545.104793]

India ranks 43rd in descending order of rates of suicide with a rate of 10.6/100,000 reported in 2009 (WHO suicide rates).

In the most recent National Crime Records Bureau (NCRB; Ministry of Home Affairs) report the rate in 2010 rose to 11.4 per 100,000 population.

The male: female suicide ratio was 1.78 in India in 2008 and 2009.



138. DHAT syndrome is?

- a) Passage of blood in urine
- b) Passage of semen in urine
- c) Passage of pus in urine
- d) None

Correct Answer - B

Ans. B. Passage of semen in urine

[Ref Encyclopedia of multicultural psychology p. 135] Dhat syndrome is a culture-bound syndrome prevalent in Indian subcontinent in which male patients report that they suffer from premature ejaculation or impotence, and believe that they are passage of semen (dhat) in urine.

The condition has no known organic cause.



139. Most appropriate test for child psychologist to evaluate the intellectual ability of a 3 year old is?

a) Stanford Binet scale
b) Denver development scale
c) Alexander's pass along test
d) Rorschach inkblot test

Correct Answer - A

Ans. A. Stanford Binet scale

[Ref Psychological testing p. 101]

Stanford-Binet Intelligence Scale

- The Stanford-Binet Intelligence Scale is an individually administered standardized test that measures intelligence and cognitive abilities in children and adults, from age two through mature adulthood.
- The Stanford-Binet Intelligence Scale is now in its fifth edition (SB5) and was released in 2003. It is a cognitive ability and intelligence test that is used to diagnose developmental or intellectual deficiencies in young children.



140. Treatment of choice for akathesia is?

a) Phenytoin
b) Propranolol
c) Dantrolene
d) Lithium

Correct Answer - B

Ans. B. Propranolol

[Ref Kaplan & Saddock's 10th le p. 1020]

"The first line drug for akathisia is most commonly alpha-blocker".

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141. Functional somatic disorder is?

- a) Somatization disorder
- b) Chronic fatigue syndrome
- c) Hypochondriasis
- d) Body dysmorphic disorder

Correct Answer - B

Ans. B. Chronic fatigue syndrome Functional somatic syndromes:

- They are characterized more by symptoms, suffering and disability than by disease specific, demonstrable abnormalities of structure or function, i.e. There is reporting of somatic symptoms and resultant disability rather than on the evidence of underlying convention disease process
- Three most common functional somatic syndromes are fibromyalgia, Irritable bowel syndrome and chronic fatigue syndrome.



142. Cardinal element of behavior therapy is?

a) Modeling	
b) Learning	
c) Conditioning	
d) Guidance	

Correct Answer - B

Ans.B. Learning

[Ref Niraj Ahuja 6'1* p. 220]

• Behavior therapy is based on the assumption that all behaviors (normal or abnormal) are learning response. Normal and abnormal behaviors are subject to the laws of learning and the same laws can be used to change them. Behavior therapy is based on theories of learning and aims at changing the maladaptive behavior and substituting it with adaptive behavior.



143. Tolerance is seen in?

- a) Alcohol dependent syndrome
 b) Schizophrenia
- c) OCD
- d) All of the above

Correct Answer - A

Ans. A. Alcohol dependent syndrome

[Ref Kaplan & Saddock's 10thle p. 382]

Alcohol dependent syndrome

- Alcohol dependent syndrome uses the same criteria for dependence for other substances, i.e., three or more of the following : -
- ... Tolerance
- 2. Withdrawal symptoms
- 3. Alcohol is taken in larger amount or for longer period.
- I. Persistent desire or sense of compulsion to take alcohol.
- 5. A great deal of time spent to obtain alcohol, to use alcohol or to recover from its effect.
- 5. Neglect of important social, occupational and recreational activities.



144. Treatment of choice for generalized anxiety disorder is?

a) Benzodiazepines
b) Neuroleptics
c) Beta blockers
d) Barbiturates

Correct Answer - A

Ans. A. Benzodiazepines

[Ref Harrison 17th/e p. 2712; Kaplan & Saddock's 10th/e p. 626] **Treatment of generalized anxiety disorder**

• Benzodiazepines are the drug of choice. Drugs in this group are diazepam, Lorazepam, Alprazolam, Oxazepam, chlordiazepoxide.

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145. Generalized anxiety disorder is diagnosed when anxiety and worry continues for at least?

a) 2 months	` ر
b) 4 months	<u>、</u>
c) 6 months	<u>〜</u>
d) 8 months	`

Correct Answer - C

Ans. C. 6 months

[Ref Harrison 17"/e p. 2712; Kaplan & Saddock's 10th/e p. 626] **GENERALIZED ANXIETY DISORDER**

- This is characterized by excessive anxiety and worry which are persistent & generalized and not restricted to any specific situation or object.
- Excessive anxiety worry occur for at least 6 months.



146. Most important receptors involved with schizophrenia are?

a) GABA _A	
b) GABA,,	
c) D _Z d	
d) 5-HT	

Correct Answer - C

Ans. C. D_Zd

[Ref Kaplan & Saddock's 10th le p. 470]

Dopamine hypothesis is the most accepted hypothesis for schizophrenia. There is hyperactivity of dopaminergic system. This hypothesis is supported by :

- .. Amphetamine and cocaine which release dopamine in central synapses induce schizophrenia like symptoms; and
- 2. Antipsychotic drugs control the schizophrenic symptoms by blocking dopamine (D2) receptors.



147. Risk factor for suicide is?

a) Increased serotonin
b) Drug abuse
c) Female sex
d) Married person

Correct Answer - B

Ans.B. Drug abuse

[Ref: Niraj Ahuja ele p. 236, 237; Essentials of psychiatry 4th/e p. 734]

Causes/Risk factors for suicide

- Psychiatric disorders: Depression (most common), alcoholism (2nd mc), Drug/Substance dependence, Schizophrenia, Dementia.
- Physical illness: Cancer, AIDS, Multiple sclerosis, Head trauma.
- Psychosocial factors: Failure in love, marital difficulties, family dispute, illegitimate pregnancy.
- Biological factors: Decrease in serotonin
- Other Male sex, Age > 40 years, Single (Unmarried, divorced or widowed), previous suicide attempt, social isolation.



148. A 25 years old male c/o recurrent abdominal pain but biochemical assays and ultrasound abdomen is normal. He also complains of constant headaches. He suddenly complains of loss of vision of bilateral eyes. Ophthalmologist finds nothing on examination. Symptoms are most probably due to

|--|

- b) Posterior inferior cerebellar artery infarct
- c) Malingering
- d) Factitious disorder

Correct Answer - D

Ans. D. Factitious disorder Factitious disorder

- It is also known as Hospital addiction, hospital hoboes, or Professional patient.
- The term Munchausen syndrome is used for those patients who repeatedly simulate or fake diseases (intentionally) for the sole purpose of obtaining medical attention. There is no other recognizable motive (in contrast to malingering).
- The typical presentation of Munchausen syndrome is characterized by a restless journey from doctor to doctor and hospital to hospital, an ever-changing list of complaints and symptoms.
- The patient tries to maintain the sick role to obtain medical attention.



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There may be evidence of earlier treatment usually surgical procedure, for example, multiple surgical scars (gridiron abdomen).

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149. Emile Durkheim is linked with work on which condition in psychiatry?

a) Suicide
b) Obsessive compulsive disorder
c) Anxiety disorder
d) Schizophrenia

Correct Answer - A

Ans. A. Suicide

Suicide (French: Le Suicide)

- It was a groundbreaking book in the field of sociology.
- It was written by French sociologistEmile Durliiheim and pubtshed in 1897.
- It was ostensibly a case study of suicide, a publication unique for its time that provided an example of what the sociological monograph should look like.



150. Highest insight is?

a) Intellectual	
b) Emotional	
c) Psychological	
d) Affective	

Correct Answer - B

Ans. b. Emotional

Neziroglu and Stevens proposed four different levels of insights:

- True emotional insight
- Intellectual insight
- Partial internally and externally based insight
- Denial of illness
- True emotional insight is representative of the highest level of insight possible. In it the patients' awareness and understanding of their own thoughts, feelings and motives can be used to change behavior.



151. Extracampine hallucinations term was given by ?

a) Eugene Bleuler	_
b) William Harvey	<u> </u>
c) Robert Macinoff	〜 〜
d) Eden Speroff	

Correct Answer - A

Ans. A. Eugene Bleuler Extracampine hallucinations

- The term extracampine is indebted to Latin words extra outside and campaneus field.
- It was introduced in or shortly before 1903 by Swiss Psychiatrist Eugene Bleuler to denote a hallucination that is experienced by affected individual as being outside the range of normal perception.



152. Hypomimia is?

- a) Decreased ability to copy
- b) Decreased execution
- c) Deficit of expression by gesture
- d) Deficit of fluent speech

Correct Answer - C

Ans. C. Deficit of expression by gesture Hypomimia

- Hypomimia or amimia is a deficit or absence of expression by gesture or mimicry.
- This is usually most obvious as a lack of facial expressive mobility (mask like facies).
- This is a feature of frontal subcortical disease.



153. Serial 7 substraction is used to test?

a) Working memory
b) Long term memory
c) Mathematical ability
d) Recall power

Correct Answer - A

Ans. A. Working memory Serial sevens substraction test

- Serial sevens, counting down from one hundred by sevens, is a clinical test used to test mental function; for example, to help assess mental status after possible head injury or in suspected cases of dementia.
- This well-known test, in active documented use since at least 1944,was adopted as part of the mini-mental state examination.
- The test is also used in determining when a patient is becoming unconscious under anaesthetic, for example prior to major dental surgery.

154. Which of the following are sections of mental state examination?

a)	Mood	and	affect
----	------	-----	--------

- b) Speech and language
- c) Cognition
- d) All the above

Correct Answer - D

WWW.FirstRanker.com Ans. D. All the above



155. Obsessive attention by an individual towards another person is called?

a) Stalking	
b) Percieving	
c) Following	
d) Pressurizing	

Correct Answer - A

Ans. A. Stalking Stalking

- Stalking is unwanted or obsessive attention by an individual or group toward another Person.
- Stalking behaviors are related to harassment and intimidation and may include following the victim in person or monitoring them.
- The word stalking is used, with some differing meanings, in psychology and psychiatry and also in some legal jurisdictions as a term for a criminal offense.



156. Most common of all psychiatric disorders are -

a) Anxiety disorder
b) Schizophrenia
c) Depression
d) Mania

Correct Answer - A

Ans. A. Anxiety disorder

- Most common psychiatric disorder > Anxiety disorders.
- 2d most common psychiatric disorder > Depression.



157. Patient wants to scratch for itching in his amputated limb is an example of?

- a) Illusion
 b) Pseudohallucination
 c) Phantom limb hallucination

d) Autoscopy hallucination

Correct Answer - C

Ans. C. Phantom limb hallucination

- Phantom limb hallucination The person feels his body parts intact in their respective places even after they are lost through amputation or injury.
- In the question given patient feels itching in the amputated limb and tries to scratch the limb. Thus it is an example of phantom limb hallucination.



158. Myxedema madness includes?

- a) Auditory hallucinations and paranoia
- b) Visual hallucinations and depression
- c) Auditory hallucinations and depression
- d) Paranoia and depression

Correct Answer - A

Ans. A. Auditory hallucinations and paranoia Psychiatric disorders in hypothyroidism

- These include depressed mood, apathy, impaired memory and other cognitive defects.
- Hypothyroidism can contribute to the development of treatment refractory depression.
- Myxedema madness consisting of auditory hallucinations and paranoia is seen in some Patients.



159. APACHE II does not include?

a) Acute physiology score
b) Age
c) Sex
d) Chronic health evaluation

Correct Answer - C

Ans. C. Sex

- Acute physiology and chronic health evaluation
- Knaus et al (1981) introduced the first the Acute Physiology and Chronic Health Evaluation (APACHE) model in 1981 and revised it to APACHE II in 1985. APACHE III was presented in 1991 but as the regression analysis modelling is not in the public domain its uptake has been slow.

APACHE II is made up of four basic comPonents:

- 1) Acute physiology score;
- 2) Chronic health evaluation;
- 3) Age;
- 4) Urgency of admission to critical care



160. SSRIs should be carefully used in the young for the management of depression due to increase in?

a) Nihilism ideation
b) Guilt ideation
c) Suicidal ideation
d) Envious ideation

Correct Answer - C

Ans. C. Suicidal ideation

• In 2003, th UK Medicine and Health Care products regulatory agency concluded that all SSNs, with the exception of fluoxetine, were contraindicated in the treatment of depression in young people due to increase in suicidal ideation and dubious efficacy.



161. If a person is asked, "what will he do if he sees a house on fire"?, Then what is being tested in that person?

a) Social judgement
b) Test judgement
c) Response judgement
d) None of the above

Correct Answer - B

AnS. B. Test judgement Judgement

- It is the ability to assess a situation correctly and act appropriately within that situation'
- Social judgement: is observed during the hospital stay and during the interview session. It includes evaluation of personal judgement.
- Test Judgement: is assessed by asking the patient what he would do in certain test situations like house on fire, man lying on road.
- It is rated as good/ intact normal or poor/ impaired/abnormal'



162. Illusion is a disorder of?

a) Thought b) Perception c) Affect d) Emotion

Correct Answer - B

Ans, B. Perception

Disorders of perception

- ... Altered perception Sensory distortion (micropsia, hyeracusis), www.kirstRanker.cc Illusion.
- 2. False perception Hallucination.



163. Rope seen as snake is an example of -

- a) Illusion
 b) Hallucination
 c) Delusion
- d) Pseudohallucination

Correct Answer - A

Ans. A. Illusion

- Ilusions are altered perception in which a real eternal object is combined with imagery to produce false internal percept.
- In simple words, illusion is misinterpretation of an actual sensory input.

For example: -

- .. Hearing once name in a train whistle:- Train whistle is a real eternal stimulus, which is perceived as once name (false internal percept).
- 2. Mistaking a stick or rope for snake in dark room:- Stick is a real external object, which is perceived falsely as snake.



164. Woman firmly and persistently feels her husband is cheating on her and she disapproves to accePt any proof given in the husbands support' The other family members do not supportherbelief. This is an example of-

a) Illusion	
b) Delusion	
c) Hallucination	
d) Perversion	

Correct Answer - B

Ans. B. Delusion

- In the question given the woman has a false unshakable belief that her husband is cheating on her and she disapproves all her relatives and proofs in support of her husband.
- Thus this is an example of delusion.



165. Withdrawal of which of the following causes piloerecton?

a) Morphine b) Cannabis c) Smoking d) Alcohol

Correct Answer - A

Ans. A. Morphine

Manifestations of morphine withdrawal - Yawning

Gooseflash (Piloerection).



166. Schizotypal personality belongs to which cluster of personality disorders?

(a) A	
(b) B	
c) C	
d) D	

Correct Answer - A

Ans. A. A

- Cluster A: Paranoid, Schizoid, Schizotypal.
- Cluster B: Antisocial (Dissocial), Histrionic, Narcissistic, Borderline.
- Cluster C: Anxious (avoidant), Dependent, obsessive compulsive (anankastic).



167. Cardinal feature of antisocial personality

- a) Violation of rules of society
- b) Attention seeking behavior
- c) Unstable interpersonal relationship
- d) Grandiose behaviour

Correct Answer - A

Ans. A. Violation of rules of society

The essential features of antisocial personality disorder are a disregard for and violation of the rights of the other and the rules of the society. MANIFIESTRA



168.

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Which personality disorder/s can be a part of autistic sPectrum of disorders?

a) Schizoid		
b) Schizotypical		
c) Borderline		
d) All the above		

Correct Answer - D

Ans. D. All the above

Following personality disorders can be diagnosed later in life in patients with childhood autistic spectrum of disorders: Borderline, Obsessive compulsive, narcissitic, paranoid, schizotypical and, avoidant, personality.



169. Patients who are grandiose and require admiration from others has which type of personality?

a) Narcissistic
b) Histrionic
c) Borderline
d) Antisocial

Correct Answer - A

Ans. A. Narcissistic

Grandiosity and admiration from others are feature of Narcissistic personality disorder.



170. Max duration of time spent is in NREM stage?

(a) I	
(b) II	
c) III	
d) IV	

Correct Answer - B

Ans, B. II

• REM sleep occupies 20-30% of total sleep and NREM sleep ocupies 60-70% (state I: 5-70%, stage II : 40-50%, stage III & IV : 15_20%)



171. Spouse jealousy is a feature of?

- a) Othello syndrome
- b) Chronic alcoholism
- c) Stockholm syndrome
- d) Clerambault's syndrome

Correct Answer - A

Ans. A. Othello syndrome Othello Syndrome:

- When the content of delusions is predominantly jealousy (infidelity) involving the spouse, person feels an unreasonable fear that a partner has been unfaithful, is presently unfaithful, or plans to be unfaithful, it is called as Othello Syndrome or conjugal paranoia.
- Elaborate steps are taken to prevent the spouse to go outside (Locks the spouse, not allowing her to go outside).



172. All of the following are true about pseudohallucinations except?

- a) Arises in inner subjective self
- b) Patient describes the sensations being perceived by mind eye
- c) Are under voluntary control
- d) Distressing flashback of PTSD is a n example

Correct Answer - C

Ans.C. Are under voluntary control Pseudohallucination

- Pseudohallucination is a perceptual experience, which differs from a hallucination in that it appears to arise in the inner subjective space, not through one of the external sensory organs.
- Patients tend to describe these sensations as being perceived with the 'inner eye' or 'mind eye' (or ear).
- However, like true hallucinations pseudohallucinations are not under voluntary control.
- Example include: Distressing flashbacks in post-traumatic stress disorder or the recently bereaved widow waking up to briefly 'see' her husband sitting at the foot of the bed,



173. Delirium is defined as?

- a) Acute onset of disturbed consciousness
- b) Chronic onset of disturbed consciousness
- c) Progressive generalized impairment of intellectual functions and memory without impairment of consciousness
- d) Disorientation without clouding of consciousness

Correct Answer - A

Ans. A. Acute onset of disturbed consciousness

- Delirium is defined by the acute onset of fluctuating cognitive impairment and a disturbance of consciousness.
- It is also referred to as acute confusional state or acute organic brain syndrome.

 It is also referred to as acute confusional state or acute organic brain syndrome.



174. All the following drugs are used to prevent relapse and maintain abstinence in cases of alcohol withdrawal except?

a) Disulfiram	_
b) Acamprosate	
c) Naltrexone	
d) Propranolol	

Correct Answer - D

Ans. D. Propranolol

- Detoxification (treatment of withdrawal):- BZDs are the drugs of choice, e.g. chlordiazepoxiile (Id choice), Diazepam (2nd choice).
 Maintenance after detoxification (to prevent relapse and maintenance of abstinence):-
- ... Aversive agent (ileferent agents):- Disulfiram, CCC, metronidazole, Natrafezole.
- 2. Anticraving agent: Naltrexone, Acamprosate, fluoxetine, Topiramate, Nalmefene.



175. Which is the most common type of persistent delusional disorder?

- a) Delusion of persecution
- b) Somatic delusion
- c) Delusion of jealousy
- d) Delusion of grandeur

Correct Answer - A

Ans. A. Delusion of persecution

Delusion of persecution is the most common type of persistent delusional disorder.



176. Dysthymia is?

- a) Chronic depression
- b) Chronic mania
- c) Bipolar disorder
- d) Personality disorder

Correct Answer - A

Ans. A. Chronic depression Persistent depressive disorder (Dysthymia)

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- Depression may run a chronic course over years with fluctuation of mood interposed with symptom free intervals (less than 2 months).
- If symptoms persist for more than 2 years, they are referred to as persistent depressive disorder or dysthymia.



177. Bipolar II disorder includes?

- a) Cyclothymic disorder
- b) Dysthymia
- c) Single maniac episode
- d) Major depression and hypomania

Correct Answer - D

Ans. D. Major depression and hypomania



178. Psychotic patient on antipsychotic drugs develops torticollis within 4 days of therapy. what is the treatment?

a) Central anticholinergic
b) Peripheral anticholinergic
c) Beta blocker
d) Dantrolene

Correct Answer - A

Ans. A. Central anticholinergic

- This is a case of drug induced muscular dystonia, which is treated by central anticholinergic.
- Drug of choice for antipsychotic induced extrapyramidal side effects Acute muscular dystonia -+ Central anticholinergic
- 2. Akathisia Beta blocker
- 3. Parkinsonism Central anticholinergic.
- I. Neuroleptic malignant syndrome Dantrolene
- 5. Tardive dyskinesia → Terabenazine (TBZ)



179. Eugene Blueler's 4As include following except ?

a) Autism	
b) Affect	
c) Anhedonia	
d) Association	

Correct Answer - C

Ans. C. Anhedonia

• Bleuler's 4 'As' are: (I) Ambivalence (2) Autism; (3) Affect disturbances (inappropriate affect); and (4) Association disturbances (loosening of association, thought disorder).

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180. Appetite for nonnutritive substances is called?

a) Pica	
b) Apprepritant	
c) Bulimia	
d) Bolean	

Correct Answer - A

Ans. A. Pica

• Pica is characterized by an appetite for substances that are largely non-nutritive, such as paper, clay, metal, chalk, soil, glass, or sand.

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181. Bad trip is seen with?

a) Cocaine
b) Cannabis
c) LSD
d) Heroin

Correct Answer - C

Ans. C. LSD

Acute panic reaction with loss of control on onself, called Bad trip, is characteristic of LSD or otJrer hallocinogens.



182. Antipsychotic drug causing retinal pigment disorder is?

a) Thiaoridazine
b) Clozapine
c) Chlorpromazine
d) None of the above

Correct Answer - A

Ans. A. Thiaoridazine

Blue pigmentation of skin, corneal and lenticular opacities, retinal degenration can occur with thioridazine.



183. Antipsychotic drug with least extra pyramidal symptoms?

a) Pimozide
b) Thioridazone
c) Clozapine
d) Flupromazine

Correct Answer - C

Ans. C. Clozapine

- Antipsychotics with no extrapyramidal side effects clozapine, aripiprazole, quetiapine.
- Amongst typical antipsychotics, thioridazone has least extrapyramial side effects.



184. Following is true about alcoholic dependence syndrome except -

a) No tolerance
b) Withdrawal symptoms
c) CAGE questionnaire
d) Physical dependence

Correct Answer - A

Ans. A. No tolerance

- Alcohol dependence has following criteria:- (i) Tolerance; (ii)
 Withdrawal symptoms; (iii) Taken in larger amount or longer
 duration; (iv) Persistent craving (desire) to take alcohol; (v) A great
 deal of time spent to obtain alcohol or to use it; (vi) Neglect of other
 activities (social, occupational); and (vii) Continued use despite clear
 evidence of overtly harmful consequences.
- The CAGE questionnaire is a tool used to assess individuals for potential alcohol problems, including dependence.
- Alcohol produces both physical as well as psychological dependence.



185. DSM IV criterion for depression is?

a) 1 week
b) 2 weeks
c) 3 weeks
d) 4 weeks

Correct Answer - B

Ans. B. 2 weeks

For the diagnosis of minor depression 2-4 and for major depression > 5 DSM IV symptoms are required for at least for a two week period.



186. The clinical effects of the antidepressant drugs is mainly based on ?

- a) Change in neurotransmitter receptor sensitivity
- b) Decreased level of neurotransmitters
- c) Change in efficacy of neurotransmitters
- d) None of the above

Correct Answer - A

Ans. A. Change in neurotransmitter receptor sensitivity

- Temporal correlation of clinical effects with changes in receptor sensitivity has given rise to hypothesis that changes in neurotransmitter receptor sensitivity may actually mediate the clinical effects of antidepressant drugs.
- These clinical effects include not only antidepressant and anxiolytic actions but also the development of tolerance to the acute side effects of antidepressant drugs.



187. Theory of human motivation was given by ?

a) Pavlov	
b) Abraham Maslow	
c) Alios Alzheimer	
d) Aaron Beck	

Correct Answer - B

Ans. B. Abraham Maslow

Maslords hierarchy of needs is a theory in psychslag proposed by Abraham Maslow in his 1943 paper.

"A Theory Of Human Motivation" in Psychological Review. Maslow subsequently extended to include his observations of humans innate curiosity'.

His theories parallel many other theories of human developmental psychology, some of which focus on describing the stages of growth in humans.

Maslow used the terms "physiological", "safety', "beloftingness" and love, esteem, self-actualization", and "self-transcendence" to describe the pattern that human motivations generally have through.



188. Mechanism of action of duloxetine is?

- a) Selective Inhibition of serotonin reuptake
- b) Selective inhibition of nor-epinephrine reuptake
- c) Selective inhibition of both serotonin and nor-epinephrine reuptake
- d) None of the above

Correct Answer - C

Ans. C. Selective inhibition of both serotonin and norepinephrine reuptake

Duloxetine, is a drug classified under serotonin-norepinephrine reuptake inhibitors (sNRJs).

At lower doses it is more prominent serotonin reuptake inhibitor.

Whereas at higher doses it is more prominent inhibitor of norepinephrine reuptake.

It has minimal dopamine agonist action.



189. Medical treatment for paraphillia includes ?

a) SSRIs
b) Benzodiazepines
c) Opioids
d) Barbiturates

Correct Answer - A

Ans. A. SSRIs

Medical treatment for paraphillia -

- Antidepressants, such as lithium and various selective serotonin reuptake inhibitors (SSRIs)
- Long-acting gonadotropin-releasing hormones (ie, medical castration), such as leuprolide acetate and triptorelin
- Antiandrogens (to lower sex drive)' such as medroxyprogesteroneacetate (10 mgqt2hr, with the dosage doubled every3 days to a maximum of 200 mg/day, then maintained for I month and adjusted as necessary).
- Phenothiazines, such as fluphenazine
- Mood stabilizers



190. Husband having suspicion that his wife is having affair with another man, diagnosis is ?

a) Illusion
b) Delusion
c) Hallucination
d) Delirium

Correct Answer - B

Ans. B. Delusion

A delusion is false, firm (unshakeable) beliefthat is not accepted by other members of patient's culture and society.

Above is an example of delusion of infedility (morbid jealousy, othello syndrome) i.e-. False belief that one's lover has been unfaithful.



191. Causes of neuroregression in a child can be all except?

a) Wilson's disease
b) Vitamin B12 deficiency
c) ADHD
d) Ataxia telengiectasia

Correct Answer - C

Ans. C. ADHD

Causes of neuroregression

Inherited

A. GreY matter involvement-

- With visceromegaly: Niemann pick disease, Sandholf disease (GM2), sialidosis, Goucherdisease, Mucopolyschharidoses (MPS)
- Without visceromegaly :- TaySach Disease, Rett syndrome, Menke's kinky hair disease
 - B. White matter involvement:-
- Leukodystrophies: Metachromatic leukodystrophy, Krebbe's disease, Adrenoleukodytrophy, Alexander disease, Cannavan disease.
- Acquired/Demyelinating:-
 - Multiplesclerosis, schilder's disease, Devicdisease
 - C. Basal ganglia involvement Wilson's disease, Dystonia muscular deformans, Huntington's disease
 - D. Spinocerebeller :- Friedrich's ataxia, Ataxia telengiectasis
 - E. Acquired
- Infections:- SSPE, progressive rubella syndrome, HIV
- Metabolic:Chronicleadpoisoning,Hypothyoidism,VitB12&Edeficienry,Dru



192. A 25 year old male believes that his penis is decreasing in size everyday and one day it will disappear one day and he will die. Diagnosis is ?

a) Obsession
b) Somatization
c) Hypochondriasis
d) Delusion disorder

Correct Answer - D

Ans. D. Delusion disorder

- Description given in the question is of Koro syndrome, a delusional disorder.
- Koro syndrome
- Koro is a culture-specific syndrome delusional disorder in which an individual has an overpowering belief that one's genitalia are retracting and will disappear, despite the lack of any true longstanding changes to the genitals.
- Koro is also known as shrinking penis. The syndrome is commonly known as genital retraction syndrome.



193. Haloperidol induced extarpyramidal side effects are treated by ?

a) Benzodiazepines	_ _
b) Barbiturates	<u>〜</u>
c) Anticholinergic drugs	_
d) SSRIs	_

Correct Answer - C

Ans. C. Anticholinergic drugs

Commonly used medications for extra-pyramidal symptoms are anticholinergic agents such as Benztropine, Diphenhydramine and trihexyphenidyl.

Another common course of treatment includes dopamine agonist agents such as pramipexole.



194. Most common substance of abuse in India ?

(a) Cannabis	
b) Tobacco	
c) Alcohol	
d) Opium	

Correct Answer - B

Ans.B. Tobacco

National Household Survey of Drug and Alcohol Abuse in India

- Estimated users: (2001)

... Tobacco - 162 million.

2. Alcohol - 62 million

3. Cannabis - 9 million.

I. Opiates - 2.5 lakh



195. In Neuroleptic malignant syndrome, cause of death is?

- a) Respiratory failure
- b) Liver failure
- c) Drug toxicity
- d) None of the above

Correct Answer - A

www. First Ranker. com Ans. A. Respiratory failure Causes of death in NMS

- Respiratory failure
- Renal failure
- Pneumonia
- Thromboembolism
- Cardiac failure



196. Drug with no mood stabilizing property is -

a) Lithium	
b) Lamotrigine	

d) Carbamazepine

c) Imipramine

Correct Answer - C

Ans. C. Imipramine

www.FilestRanker. The 5 individual drugs that can be used as mood stabilizers are:

Lithium

2. CarbamazePine

3. Lamotrigine

I. Valproate

5. Asenapine



197. Sex reassignment surgery is done in?

- a) Gender identity disorder
- b) Premature ejaculation
- c) Erectile dysfunction
- d) Orgasmic dysfunction

Correct Answer - A

Ans. A. Gender identity disorder

Many persons with gender identity disorder have sought sex-reassignment surgery, that is, physical change that is constant with their cross sexual identity.



198. Modafinil is used for the treatment of?

a) Narcolepsy
b) Sexual dysfunction
c) Depression
d) Anxiety

Correct Answer - A

Ans. A. Narcolepsy

Modafinil is a wakefulness-promoting agent (or eugeroic) used for treatment of disorders such as narcolepsy, shift work sleep disorder, and excessive daytime sleepiness associated with obstructive sleep apnea'



- 199. A girl with bad behavior like smashing and throwing objects was admitted in the hospital. There also she was behaving very badly with staff & abusing nurses. But she behaves very well with a one very good looking resident doctor. Diagnosis is?
 - a) Bipolar disorder
 - b) Schizoaffective disorder
 - c) Borderline personality disorder
 - d) Antisocial personality

Correct Answer - D

Ans. D. Antisocial personality Antisocial (Dissocial) personality disorder

- The essential features of antisocial personality disorder are a disregard for and violation of the rights of the other and the rules of the society.
- It is characterized by repeated violation of the law and rules of the society (drug abuse); physical aggressiveness; Reckless disregard for safety of self or others; consistent irresponsibility in work and family environment and lack of remorse.
- This disorder is synonymous with previously used terms like psychopath or sociopath.



200. All of the following are associated increased REM latency, except?

a) First night effect b) SSRIs c) Narcolepsy d) Restless leg syndrome

Correct Answer - C

MM.F.II.S.IR SINKER. COM **Ans. C. Narcolepsy Increased REM latency -**

- PTSD
- Restless leg syndrome.
- First night effect
- SSRI's
- TCA's
- Ethanol
- Lithium



201. Sign of oppositionalism in a young child is due to?

- a) Mental retardation
- b) Organic mental disorder
- c) Mental distress
- d) All of the above

Correct Answer - C

Ans. C. Mental distress

"Oppositionalism, temper tantrums and breath holding spells are not unusual during 1st years of life and are age typical expression of frustration and anger"



202. Trichophagia is characterized by?

- a) Compulsive pulling of hair
- b) Compulsive eating of hair
- c) Compulsive shopping
- d) Compulsive stealing

Correct Answer - B

Ans. B. Compulsive eating of hair

Trichophagia is compulsive eating of hair and is usually associated with trichotillomania i.e. compulsive pulling of hair.

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203. MC cause of delirium?

- a) Infection
- b) Liver failure
- c) Belladonna poisoning
- d) None of the above

Correct Answer - A

Ans. A. Infection

Infection is one of the most common causes of delirium.



204. General paralysis of insane is associated with?

a) Neurosyphillis	
b) Alzheimer's disease	
c) Parkinson's disease	
d) None of the above	

Correct Answer - A

Ans, A. Neurosyphillis

General paresis, also known as general paralysis of the insane or paralytic dementia, is a severe neuropsychiatric disorder, classified as an organic mental disorder and caused by the chronic meningoencephalitis that leads to cerebral atrophy in latestagesyphilis.

Degenerative changes are associated primarily with the frontal and temporal lobar cortex-

General paralysis of the Insane (GPI) is progressive deterioration of the whole mental and physical personality.

Symptoms included exaggeratedkneejerk, lack ofreaction ofthe pupils to light, an inabilityto pay attention, a'clouding'of consciousness, poor short-term memory, tremulous voice, reflex disturbances, and retinal anomalies' and diminished skin sensation. Patients were often recognizable by their striking 'delusions of grandeur"



205. Jamais vu is -

- a) Illusion that what one is hearing, one has heard previously
- b) A unfamiliar thought regarded as repetition of a previous thought
- c) Unfamiliar situations or events feel strangely familiar
- d) Feeling of strangeness to familiar situation

Correct Answer - D

Ans. D. Feeling of strangeness to familiar situation

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famais vu :- A feeling of strangeness to familiar situations or events.



206. Conventional drug used in the treatment of delirium is?

a) Haloperidol	
b) Lithium	
c) SSRIs	
d) Morphine	

Correct Answer - A

Ans. A. Haloperidol

Drugs used for delirium:

- Typical antipsychotics: Haloperidol (Doc), Thioridazine, chlorpromazine.
- Atypical antipsychotics: Risperidone, quetiapine, olanzapine.
- Benzndiazepines (for delirium tremens): Chlordiazepoxide, Diazepam, Lorazepam, Clonazepam.



207. Characteristic hallucination of schizophrenia is

- a) Auditory hallucinations commanding the patient
- b) Auditory hallucinations giving running commentary
- c) Auditory hallucinations criticizing the patient
- d) Auditory hallucinations talking to patient

Correct Answer - B

Ans. B. Auditory hallucinations giving running commentary

- Third-person hallucinations, e.g. voices heard arguing, commenting or discussing the patient or giving a running commentary on one's action; are characteristic of schizophrenia.
 - In schizophrenia auditory hallucinations are the most common type of hallucinations.
- .. First-person hallucination:- Audible self-thoughts
- 2. Second person hallucination:- Voices address the person directly or commanding one's action and
- 3. Third-person hallucinations:- voices heard arguing, commenting or discussing the patient or giving a running commentary on his action or thought. Only the "third person hallucinations' are characteristic of schizophrenia.



208. Which of the following typical antipsychotic drug is not available in depot form?

a) Haloperidol	
b) Risperidone	_
c) Olanzapine	<u> </u>
d) Chlorpromazine	_

Correct Answer - D

Ans. D. Chlorpromazine

Antipsychotic drugs with depot preparations are risperidone, poliperidone, halopetidol, fluphenazine, flupenthixol, zuclopenthixol, olannpine, clozapine, imipramine and quetiapine.

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209. Self mutilation is a feature of?

- a) Von-Gogh syndrome
- b) Catatonic schizophrenia
- c) Paranoid schizophrenia
- d) None of the above

Correct Answer - A

Ans. A. Von-Gogh syndrome

Dramatic self-mutilation occurring in schizophrenia has also been MMM.FirstRanker. called Von-Gogh syndrome'



210. A patient inventing new words, is a feature of ?

a) Neurosis
b) Schizophrenia
c) OCD
d) Von-Gogh syndrome

Correct Answer - B

Ans B. Schizophrenia

Neologism: - New words or condensations of several words that are not readily understood by others.

Neologism is seen in schizophrenia and organic brain syndrome.

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211. True about flumazenil is?

- a) Can be used in barbiturate poisoning
- b) Specific antidote for opiate overdose
- c) Can be used in benzodiazepine overdose
- d) All of the above

Correct Answer - C

Ans. C. Can be used in benzodiazepine overdose

Fumazenil is an imidazobenzodiazepine derivative and a potent benzodiazepine recePtor antagonist that competitively inhibits the activity at the benzodiazepine recognition site on the GABA benzodiazepine receptor complex thereby reversing the effects of benzodiazepine on the central nervous system.

Flumazenil does not antagonize the central nervous system effects of drugs affecting GABA-ergic neurons by means other than the benzodiazepine receptor (including ethanol, barbiturates, or general anesthetics) and does not reverse the effects of opioids.



212. Increased dopamine levels are associated?

a) Depression	
b) Mania	
c) Delirium	
d) Schizophrenia	

Correct Answer - D

Ans. D. Schizophrenia

Dopamine hypothesis is the most accepted hypothesis for schizophrenia.

There is hyperactivity of dopaminergic system.

Other neurotransmitters involved are: - Increased serotonin, Decreased GABA, variable change (Increased or decreased) glutamate, and increased norepinephrine.



213. Tourette syndrome is a type of?

- a) Tic disorder
- b) Mental retardation disorder
- c) Seizure disorder
- d) None of the above

Correct Answer - A

Ans. A. Tic disorder

Tourette syndrome (also called Tourette's syndrome, Tourette's disorder, Gilles de la Tourette syndrome, GTS or, more commonly, simply Tourette's or TS) is an inherited neuropsychiatric disorder with onset in childhood, characterized by multiple physical (motor) tics and at least one vocal (phonic) tic.

Average onset between the ages of 3 and 9 years.

Males are affected about three to four times more often than females.

Common associations are ADHD and OCD.



214. Treatment of choice for acute panic attacks is ?

a) Barbiturates
b) Benzodiazepines
c) TCAs
d) MAO inhibitors

Correct Answer - B

Ans. B. Benzodiazepines

DOC for Panic disorders - SSRI's

DOC for acute panic attack - Benzodiazepines.



215. Characterized by chronic, multiple tics?

- a) Parkinson's disease
- b) Wilson's disease
- c) Shy-Drager syndrome
- d) Tourette's syndrome

Correct Answer - D

Ans. D. Tourette's syndrome

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Tourette syndrome (also called Tourette's syndrome, Tourette's disorder, Gilles de la Tourette syndrome, GTS or, more commonly, simply Tourette's or TS) is an inherited neuropsychiatric disorder with onset in childhood, characterized by multiple physical (motor) tics and at least one vocal (phonic) tic.



216. Which of the following is not true about sleep?

- a) REM sleep comes earlier than NREM sleep
- b) REM sleep is also called paradoxical sleep
- c) Sleep walking comes in NREM sleep
- d) Dreams come in REM sleep

Correct Answer - A

Ans. A. REM sleep comes earlier than NREM sleep

The NREM (with its four stages) and REM sleep repeat several times a night in cyclic manner, 4-6 times depending on the length of sleep.

A typical cycle starts with stage I of the NREM sleep which is followed by second, third and fourth stages.

REM sleep occupies 20-30% of total sleep and NREM sleep occupies 60-70% (Stage I occupies 5- 10%; Stage 2 occupies 40-50%; Stage 3 occupies 15-20%



217. Gamma waves of REM sleep in sleep cycle are associated with ?

- a) Intense attention
- b) Subconscious thinking
- c) Deep subconscious thinking
- d) Deep sleep

Correct Answer - A

Ans. A. Intense attention

Beta and gamma waves (20-80Hz) occur spontaneously during REM sleep and waking and are evoked by intense attention, conditioned responses, tasks requiring fine movements and sensory stimulus



218. Drug not used in prophylaxis of MD P?

a) Haloperidol
b) Lithium
c) Carbamazepine

Correct Answer - A

d) Valproate

Ans. A. Haloperidol

Prophylactic treatment for bipolar disorder:

- .. Lithium (drugof choice)
- 2. Carbamazepine
- 3. Valproate
- I. Other drugs which can be used are topiramate, Lamotrigine, atypical antipsychotics (artpiprazale, olanzapine, quetiapine, risperidone, Clozapine) and Gabapentin.



219. Behavioral therapy is done in ?

- a) Schizophrenia
 b) Agoraphobia
- c) Delirium
- d) Neurotic depression

Correct Answer - B

Ans. B. Agoraphobia

Most important use of behavioral therapy - Phobia & OCD.
Other users are - Other anxiety disorders (including panic), Eating disorders, Autism, ADHD, some personality disorder, sexual dysfunctions, depression.

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220. Feature associated with mania is?

- a) Neologism
 b) Perseveration
- d) Flights of ideas

c) Echolalia

Correct Answer - D

Ans. D. Flights of ideas

Diagnostic criteria for mania

Three or more of the following for at least 1 week:-

- .. Inflated selfvesteem or grandiosity
- 2. Decreased need for sleep
- 3. Overtalkativeness
- I. Flightofvideas
- 5. Distractibility
- 3. Psychomotor agitation or Increased goal directed activities
- '. Excessive involvement in pleasurable activities



221. Eating disorder with normal weight is?

- a) Anorexia nervosa
- b) Bulimia nervosa
- c) Binge eating disorder
- d) None of the above

Correct Answer - B

Ans. B. Bulimia nervosa

Anorexia nervosa - Under weight
Bulimia nervosa - Normal Weight
Binge eating disorder - Over weight.

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222. Phototherapy is used in the treatment of ?

- a) Anorexia nervosa
- b) Seasonal affective disorder
- c) Schizophrenia
- d) Obsessive compulsive disorder

Correct Answer - B

Ans. B. Seasonal affective disorder

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Phototherapy is primarily indicated in the treatment of seasonal depressions.

In addition to seasonal depression, the other major indication for phototherapy may be in sleep disorders.



223. Binge eating disorder is characterized by ?

- a) Normal weight
 b) Weight loss
 c) Obesity
- d) Self induced vomiting

Correct Answer - C

Ans. C. Obesity

Binge eating disorder (BED) is characterized by insatiable cravings that can occur any time day or night, usually secretive, and filled with shame.

There are no comPensatory mechanisms associated with the binge to get rid of calories, so individulas with BED are more likely to be overweight or obese, while patients with bulimia nervosa may be underweight, normal weight.



224. Tricyclic antidepressants have all of the following actions except?

- a) Anticholinergic action
- b) MAO inhibition
- c) Block 5-HT or NE reuptake
- d) Causes sedation

Correct Answer - B

Ans- B. MAO inhibition

Tricyclic antidepressants (TCAS) are either NA + 5HT reuptake inhibitors (e.g. - Imipramine,

Amitriptyline) or predominantly NA reuptake inhibitors (e.g.

Desipramine, nortriptyline).

TCAs are not MAO inhibitors.

Adverse effects of TCFs are: anticholinergic side effects, sedatior, mental confusion, weakness, increase appetite & weight gain, sweating & fine tremor, postural hypotension and cardiac arrhythmia.



225. Which of the following is a feature of opioid withdrawal?

a) Tremors
b) Goose flesh
c) Dry nose and mouth
d) Constipation

Correct Answer - B

Ans. B. Goose flesh www.kitestRanker. Manifestations of morphine withdrawal -

- Lacrimation
- Sweating
- Yawning
- Gooseflash(Piloerection)
- Mydriasis
- Anxiety & fear
- Restlessness
- Insomnia
- Abdominal colic
- Diarrhea
- Dehydration
- Hypertension
- Palpitation
- Rapid weight loss



226. Patient and Psychotherapis, both participate actively in?

- a) Psychoanalysis
- b) Psychoanalytic psychotherapy
- c) Psycodynamic psychotherapy
- d) All of the above

Correct Answer - B

Ans. B. Psychoanalytic psychotherapy

Psychoanalytic (psychodynamic) psychotherapy is a much more direct from of psychonalysis.

The patient and therapist sit face to face.

However therapist usually talks quite a lot, compared to silence in psychoanalysis.

Treatment is an interactive process between the patient and therapist.



227. The maximum DALY loss is for the following disease -

a) Schizophrenia
b) Unipolar depression
c) Bipolar depression
d) Mania

Correct Answer - B

Ans. B. Unipolar depression

Amongst the psychiatric disorders maximum DALY loss is caused by major depression.



228. Etheromanias refer to?

- a) Acute psychosis post ether anaesthesia
- b) Ether addiction
- c) Excessive ether use drug anaesthesia
- d) None

Correct Answer - B

Ans, B. Ether addiction

Ether addiction or etheromania is the addiction to inhalation or drinking of diethyl ether.



229. The term "Dementia precox" was coined by?

a) Freud		

- b) Bleuler
- c) Kraepelin
- d) Schneider

Correct Answer - C MANN FIRST RANKEY. COM Ans. C. Kraepelin

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230. The term 'id' was coined by?

a) Freud
b) Skinner
c) Wayker
d) Blueler

Correct Answer - A

Ans, A. Freud

Structural theory of mind(theid, ego and superego) was given by sigmund freud.



231. Subcortical dementia is seen in all except?

- a) Parkinsonism
- b) Alzheimer's disease
- c) Wilson's disease
- d) Huntingtons chorea

Correct Answer - B

Ans.B. Alzheimer's disease

Subcortical dementia is seen in parkinsonism, Huntington's disease, wilson's disease, progressive supranuclear palsy, idiopathic basal ganglion calcification (Fahr's disease), thalamic lesions, multiple sclerosis, HIV associated dementia and multisYstem atroPhY. Alzheimer's disease causes cortical dementia.



232. Formication is seen with?

- a) Acute amphetamine intoxication
- b) Chronic use of amhetamine
- c) Alcohol withdrawal
- d) Cannabis poisoning

Correct Answer - B

Ans. B. Chronic use of amhetamine

Magnan's syndrome (also called formication) is seen in chronic cocaine and chronic amphetamine abuse.



233. Hangover following alcohol consumption can be treated with?

a) Pyridoxine	
b) Thiamine	
c) Riboflavin	
d) Niacin	

Correct Answer - B

ANs. B. Thiamine

Thiamine helps prevent the buildup of glutarate in the brain, which may be associated with part of the headache associated with hangover.



234. Most commonly abused opioid -

- a) Morphine
- b) Diacetylmorphine
- c) Oxycodine
- d) Bupremorphine

Correct Answer - B

Ans, B. Diacetylmorphine

Diacetylmorphine (heroin) is the most commonly abused opioid.



235. Hallucinations are produced by?

- a) Amphetamine
- b) Morphine
- c) Paraxetine
- d) Chlorpromazine

Correct Answer - A

Ans, A. Amphetamine

Amphetamine psychosis mimic paranoid schizophrenia. There may be deleusions and hallucinations.



236. Anxiety is?

- a) Neurosis
- b) Psychosis
- c) Personality disorder
- d) None

Correct Answer - A

Ans., A. Neurosis

Important neurotic disorders are Anxiety disorders (Panic), Phobia (Phobic anxiety disorder), obsessive compulsive Disorder & Dissociative conversion disorder.



237. In depressions, there is deficiency of?

a) 5-HT
b) Acetylcholine
c) Dopamine

Correct Answer - A

Ans. A. 5-HT

d) GABA

Depression = Decrease in serotonin and norepinephrine.

Serotonin is the most imPortant neurotransmitter in depression.

Mania= Increased of norepipherine.



238. The aminoacid derived neurotransmitter used for treating depression is ?

a) Serotonine	
b) Histamine	
c) acetylcholine	
d) none	

Correct Answer - A

Ans. A. Serotonine

The three main neurotransmitters involved in depression are dopamine, norepinephrine and serotonin (s-HT).

When brain levels of one or more neurotransmitter are low or unbalanced, depression can result. Generally, antidepressant drugs work by increasing production or decreasing the breakdown of one or more of these neurotransmitters.



239. Repetitive times work doing for premonition of ?

a) Obscession	_
b) Compulsion	<u> </u>
c) Anxiety	_
d) None	_

Correct Answer - B

Ans. B. Compulsion

Repetitive irresistable thoughts > Obsession.

Repetitive purposeful behavior (work doing) > compulsion.



240. Derelation & depersonalisation seen in which type of disorder?

a) Dissociative disorder
b) Personality disorders
c) Mania
d) None

Correct Answer - A

MMM.FilestRanker.com Ans. A. Dissociative disorder



241. Schizoid personality disorder all are seen except?

a) Aloof & detached
b) Prone to fantasy
c) Suspicious
d) Introspective

Correct Answer - C

Ans. C. Suspicious

Suspiciousness is seen in paranoid personality disorder.



242. Narcolepsy is due to abnormality in?

- a) Hypothalamus
 b) Neocortex
 c) Cerebellum
- d) Medulla oblongata

Correct Answer - A

Ans. A. Hypothalamus

Narcolepsy is unique in that those who suffer from it tyPicaly fall almost instantaneously into REM sleep.

It is thought that narcolepsy is caused by a malfunctioning of the hypothalamus in brain.



243. Max duration of time spent is in NREM stage?

(a) I	
(b) II	
c) III	
d) IV	

Correct Answer - B www.FirstRanker.com

Ans. B. II



244. NREM Sleep true is?

a) Teeth grinding
b) Narcolepsy
c) Nightmares

Correct Answer - A

d) Sleep paralysis

Ans. A. Teeth grinding

Slow wave sleep (stage 3 & 4 of NREM sleep) disorders r Sleep walking (somnambulism), night terror (sleep terror or pavornocturnus), Nocturnal enuresis, Bruxism (teeth grinning), and sleep talking (somniloquy).

REM sleep events/disorder:- Nightmares, nocturnal penile tumescence, Narcolepsy.



245. Bruxism is?

- a) Walking during sleep
- b) Nocturnal enuresis
- c) Grinding of teeth during sleep
- d) Sleep apnoea

Correct Answer - C

Ans. C. Grinding of teeth during sleep

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246. Narcolepsy, not true?

- a) Cataplexy
- b) Sleep architecture normal
- c) Loss of muscle tone
- d) Hallucination

Correct Answer - B

Ans. B. Sleep architecture normal

There is disturbed REM sleep.

www.FirstRanker. Cataplexy (sudden loss of muscle tone) is the most common accessory symPtom.

There may be hallucinations.



247. How to differentiate between psychological and organic erectile dysfunction?

a) Nocturnal penile tumescence
b) PIPE therapy
c) Sildenafil induced erection
d) Squeeze technique

Correct Answer - A

Ans. A. Nocturnal penile tumescence

One of the important method to distinguish psychogenic impotence from organic imPotence is nocturnal penile tumsescence & early morning erection which are preserved in psychogenic impotence but not in organic cause of impotence.



248. Desensitization is a type of?

a) Psychotherapy
b) Psychoanalysis
c) Behavioral therapy

Correct Answer - C

d) None

Ans.C. Behavioral therapy

Types of behavioral therapy are : - Systemic desensitization, therapeutic graded exPosure, exPosure & response prevention, flooding, aversion therapy, and operant conditioning.

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249. Stimulant drug is given to child for ?

- a) Conduct disorder
- b) Speech developmental disorder
- c) Pervasive disorder
- d) ADHD

Correct Answer - D

Ans.D. ADHD

Stimulants (like methylphenidate, dextramphetamine) are the drugs MANN FIRST Ranker of choice for ADHD.



250. Klein levin syndrome?

- a) Insomnia
 b) Anxiety
- c) Depression
- d) Hypersomnia

Correct Answer - D

Ans. D. Hypersomnia

Kleine levin syadrome or sleeping beauty syndrome is a neurological disorder of recurring periods of excessive amounts of sleeping and eating.

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251. According to recent rounds by DSM what code is given to psychiatric diseases in ICD 10?

(a) E		
b) F		
c) P		
d) G		

Correct Answer - B

Ans. B. F

ICD -10 is WHO classification for all diseases and health problems (and not only psychiatric disorders).

ICD-10 uses alpha numeric code made of an alphabet à in contrast DSM-IV uses numerical coding) à 'F' is for mental disorders.

There are I0 main categories denoted by digits 0 to 9.



252. Which of the following is the poor prognostic factor for OCD?

a) Magical thinking	_
b) Dirt contamination	_ _
c) Pathological doubt	_ _
d) Hoarding	_

Correct Answer - B

Ans: B. Dirt contamination.

OCD - Clinical features & symptoms:

- Contamination Most common obsession.
- Obsession of contamination → compulsive avoiding of contaminated objects → excessive cleaning --> inability to leave there homes (due to germs fear, shame & disgust from feces, urine, dust & germs).
 Pathological doubt 2nd most common.
- Obsession of doubt → compulsive checking → most danger of violence → forgetting to turn off the stove, or not locking the door, some patient can travel back home several times.
- Obsession of self-doubt → feeling guilty about issues
 Intrusive thoughts 3rd most common.
- Intrusive obsessional thoughts without compulsion (repetitive sexual or aggressive acts, patients obsessed of there thoughts, may think that they suppose to report them to the police or to make a confession to the priest.
- Symmetry 4th most common.
- Need for symmetry of precision → compulsion of slowness, patient can take an hour to eat a meal or shave their faces.



253. Semen squeeze

- a) Erectile dysfunction
- b) Premature ejaculation
- c) Retrograde ejaculation
- d) Antegrade ejaculation

Correct Answer - B

Answer: B- Premature Ejaculation

Squeeze Technique:

- Variation of the Masters and Johnson method.
- As a man approaches climax, either he or his partner squeezes the tip of the penis just below the head of the penis as he approaches the point of climax.
- Pressure is held there until the sensation of impending orgasm diminishes.
- This pressure can even be held until there is some reduction in erection.
- The process can then be started over again so that over time a man prolongs the time period until he reaches ejaculation.
- Useful to treat cases of premature ejaculation



254. A patient with a history of RTA before 2 months presents with complaints of dreams of accidents. He is able to visualize the same scene whenever he visits the place. Hence is afraid to go back to the accident site. Identify the type of disorder that he might be suffering from?

a) Adjustment disorder	
b) PTSD	
c) Anxiety disorder	COM
d) OCD	Hel.

Correct Answer - B

Answer: B - Post-traumatic Stress disorder Post-traumatic stress disorder, basically a type of anxiety disorder

• Though it shares features with other anxiety disorders, has its own specific characteristics in presentation.

Criteria 1:

• Etiologically significant trauma should be present to be classified under this condition.

Criteria 2:

- "Intentionality" or "aboutness", an important factor in PTSD.
- PTSD concerns with memory intrusion of past stressors into present.
- Nightmares, flashbacks, or reliving experiences should be related to



the past experience.

Criteria 3:

• Avoid a stimulus or activity that provokes the memory of past event.

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255. Freud's theory of dream includes all except:

a) Displacement
b) Condensation
c) Symbolisation
d) Correlation

Correct Answer - D

Answer: -D - Correlation

Sigmund Freud theory of dream:

• Dream work involves the process of condensation, displacement, and secondary elaboration.

Concept of unconscious mind:

- Primary assumption of Freudian theory is that the unconscious mind governs behavior to a greater degree than people suspect.
- Goal of psychoanalysis is to make the unconscious, conscious.

Theory of dream:

- Freud theory of dream elaborates the state of unconscious mind with respect to dream interpretation,
- Process involved include condensation, displacement, and secondary elaboration.
- Displacement takes place when we transform the person or object we are really concerned about to someone else.
- The process of condensation is the joining of two or more ideas/images into one.



256. Expression and consequent release of previously repressed emotion is called as

a) Regression
b) Dissociation
c) Abreaction
d) All of the above

Correct Answer - C

Answer: C - Abreaction

The expression and consequent release of a previously repressed emotion, achieved through reliving the experience that caused it.

Done typically through

Hypnosis

Suggestion



257. All are habit disorder except

a) Nail biting	
b) Thumb sucking	
c) Temper tantrum	_
d) Tics	

Correct Answer - C

Answer: C-Temper tantrum

Definition:

- Habit disorder is a term used to describe several related disorders linked by the presence of repetitive and relatively stable behaviour that seem to occur beyond the awareness of the person performing the behaviour.
- The first group of habit disorder includes "Tic Disorder"
- Tics are involuntary movements, sounds, or words that are sudden, rapid, recurrent and non-rhythmic"
- In addition to TD's, body-focussed behaviours,
- Recurrent hair pulling Trichotillomania (TTM)
- Skin picking (SP)
- Nail biting, are included within habit disorders.

Head banging, rocking of body, teeth grinding & thumb sucking are repetitive disorders.

- Seen in children between age group of 6 months to 2 years.
- Benign & self-limited.
- The movements serve a means of tension discharging in children.
- As children become older, they learn to inhibit some of their rhythmic patterns.
- Undue attention by parents can lead to aggravation of these problems.



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258. New name of mental retardation according to American Association of Mental Retardation

a) Feeble Mindedness	
b) Madness	
c) Intellectual disability	_
d) Mentally unstable	_

Correct Answer - C

Answer: C - Intellectual disability

Intellectual disability (ID), also known as general learning disability, Mental retardation (MR), is a generalized neurodevelopmental disorder characterized by significantly impaired intellectual and adaptive functioning.



259. Now-a-days Down syndrome Is referred to as.

a) Submental disorder
b) Oligophrenia
c) Madness
d) Mentally unstable

Correct Answer - A

Answer: A - Submental disorder

Majority of children with Down syndrome function in mild to moderate range of mental retardation.

Down syndrome / Trisomy 21 -

- Genetic disorder caused by presence of all or part of a third copy ofchromosome 21.
- Typically associated with physical growth delays, characteristic facial features and mild to moderate intellectual disability.



260. A 55 years aged chronic alcoholic male, presented with irrelevant talks, tremor and sweating. He had his last drink 3 days back. What will the probable diagnosis?

- a) Delirium tremens
- b) Korsakoff psychosis
- c) Post-Acute withdrawal syndrome
- d) Discontinuation syndrome

Correct Answer - A

Answer: A - Delirium Tremens

The description of symptoms is related to the condition "Delirium Tremens"

Delirium Tremens / Alcohol Withdrawal Delirium (AWD):

- Most severe form of ethanol withdrawal manifested by,
- Altered mental status (Global confusion)
- Autonomic hyperactivity (Sympathetic overdrive) Mechanism:
- Alcohol abuse affects neurotransmitter systems in brain mainly by,
- Loss of GABA inhibitory mechanism Reduces chloride ion influx.
- Alcohol acts as NMDA receptor antagonist Withdrawal increases the excitatory neurotransmitter.
- The clinical manifestations of ethanol withdrawal are **combination effects of GABA & NMDA receptor activity.**
- Thus causing tremors, diaphoresis, tachycardia, anxiety & in

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severe cases Seizure.

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261. What differentiates delirium from dementia?

a) Confusion	
b) Difficulty in communicating	
c) Hallucination	
d) Sudden change	

Correct Answer - D

Answer: D. Sudden change

Delirium

- Also called the acute confusional state, delirium is a medical condition that results in confusion and other disruptions in thinking and behavior, including changes in perception, attention, mood and activity level.
- In **dementia**, changes in memory and intellect are slowly evident over months or years. Delirium is a more abrupt confusion, emerging over days or weeks, and represents a **suddenchange** from the person's previous course of dementia. Thinking becomes more disorganized, and maintaining a coherent conversation may not be possible.
- The hallmark separating delirium from underlying dementia is inattention. The individual simply cannot focus on one idea or task.



262. Most common DRUG causing dependence?

a) Cannabis	
b) Cocaine	
c) Heroin	
d) Amphetamine	

Correct Answer - A

ANS - A.Cannabis

Cannabis- 9 million users,192 million users(Acc. To WHO Drug report 2018)

Heroin (opioid derivative) -2.5 lakh users

It is estimated that 275 million people used illicit drugs, such as cannabis, amphetamines, opioids, and cocaine, in 2016 which translates into an annual prevalence of illicit drug use of 5.6%. Cannabis is most used with 192 million users. Some 31 million people who use drugs suffer from drug use disorders.-(WHO Drug report 2018)

Ref: ARVIND ARORA review of psychiatry p:64, WHO Drug report(2018)



263. MBBS student she was choking with dyspnea, chest tightness, anxiety and an impending sense of doom on examination all systemic conditions were found normal, then she went to psychiatry. What is the probable diagnosis of the condition?

a) Panic disorder	
b) Depression	
c) Epilepsy	
d) Asthma	· con

Correct Answer - A

ANS - A. Panic disorder

Panic disorder-severe anxiety with choking, chest pain and palpitations.

Depression- low mood and lost interest in activities

Epilepsy-neurological disorder with whole-body fatigue and muscle spasms

An asthma-respiratory disorder associated with symptoms of cough, wheezing, etc

Ref: ARVIND ARORA review of psychiatry p:131



264. A patient with depression was given Imipramine for 2 weeks. Relatives noticed increased excitement, colourful clothes, increased talking. What is the next step in management?

- a) Antipsychotic with Imipramine continued
- b) Discontinue Imipramine and start Valproate
- c) Continue Imipramine alone
- d) Manage with Valproate alone

Correct Answer - A

ANS-A. Antipsychotic with Impramine continued

The condition from which the patient above is suffering is a bipolar disorder which includes both depression and mania.

So in order to treat both antidepressant i.e imipramine is continued along with an antipsychotic such as phenothiazines, thioxanthenes, etc.

Antipsychotic or valproate alone cannot reduce the depression and Imipramine alone cannot reduce the mania.

Ref: ARVIND ARORA review of psychiatry p.no:111



265. A Patient falls down often with behavioral change and enuresis. What is the condition associated with him?

a) Frontotemporal dementia
b) Normal pressure hydrocephalus
c) Parkinson's disease
d) Alzheimer's disease

Correct Answer - B

Ans- B. Normal pressure hydrocephalus

Frontotemporal dementia - Associated with poor behavioral control, decision making, and language.

Normal-pressure hydrocephalus - Associated with gait disturbance, behavioural change, enuresis, and dementia.

Parkinson's disease - Associated with tremor and muscular stiffness Alzheimer's disease-Associated mainly with memory loss and confusion

Ref: Normal Pressure Hydrocephalus By Michael J. Fritsch, Uwe Kehler, Ullrich Meier P .16; Oxford textbook of neurological surgery by Adel Helmy P.94



266. A Patient with depressive symptoms for 6 months and associated with auditory hallucinations for 2 weeks. What is the probable diagnosis of the condition?

- a) Psychotic depression
- b) Schizoaffective disorder
- c) Mania depressive illness
- d) Schizophrenia

Correct Answer - A

Ans- A. Psychotic depression

Psychotic depression- Depression along with psychotic symptoms such as hallucinations, delusions, etc.

Schizoaffective disorder-Symptoms of schizophrenia and mood disturbances occur together.

Mania depressive illness - Mania depression along with psychotic symptoms.

Schizophrenia includes all the symptoms of schizophrenia

Ref: Arvind Arora review of Psychiatry page. 103