

FINAL EXAM
 DECEMBER 2015

NATIONAL BOARD OF EXAMINATIONS

MEDICAL ONCOLOGY
PAPER – I

MED.ONCO/D/15/17/I

Time : 3 hours

Max. Marks : 100

Important instructions:

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write short notes on:

1.	Various immune check points inhibitors and potential biomarkers to monitor their efficacy. Name 4 cancers where role of immunotherapy appears to be promising.	8+2
2.	a) Enumerate the antibiotic antineoplastic agents. b) Mechanism of resistance. c) Side effects of these drugs.	2+4+4
3.	Role of tumor markers in diagnosis and prognosis of solid cancers.	5+5
4.	A 3 year old child has presented with right orbital mass of 3 months duration. Briefly discuss the differential diagnosis, work up plan, also briefly suggest treatment outline for each of the probable diagnosis.	4+3+3
5.	a) What are the hallmarks of cancer? b) Role of anti angiogenic agents in cancer ovary and renal cell cancer.	5+(3+2)
6.	A 62 year old gentlemen was treated with radical radiation for his T ₁ glottic cancer. What will be the radiation fields, dose and long term toxicity expected? Discuss the options of salvage treatment in case his disease recurs after 2 years.	(2+2+4)+2
7.	a) Mechanism of histone deacetylase inhibitors. b) Illustrate your answer with example of myelodysplastic syndrome and multiple myeloma.	4+(3+3)
8.	Write principles of micro-array technology. What are the different types and its usage?	5+5
9.	a) Staging, pathology and molecular biology of endometrial cancer. b) Outline its impact on management.	(3+3+2)+2
10.	a) Different types of clinical trials. b) Plan a clinical trial for advanced lung cancer in elderly population.	5+5
