

Pharmacology MUHS Questions **(2005-2015)**

Paper II

Endocrine

SAQs

1. Oral Antidiabetics (Classify, Example, MoA, ADR – Metformin; Acarbose – MoA, ADR; Tolbutamide + Oxyphen butazone – basis of giddiness, sweating, tremors in NIDDM)
2. Oxytocin/(Ergometrin or PG analogues)(Uterine stimulants - Classify, Indications, RoA, Contra.)
3. Topical Steroids(Name, MoA)
4. Contraceptives(Classify, Emergency Regimens, Combination Pills – MoA, Adv, Contra; Mifepristone – MoA, TU)
5. Anti-Thyroid drugs(Classify, in lactation)
6. Radioactive Iodine(Advantages & Disadvantages)
7. Lugol's Iodine(Use in Hyperthyroidism)
8. Ovulation Inducers(Enumerate, ADR, Common Problems Encountered; Clomiphene citrate- Indications, ADR)
9. Tocolytics (Name, ADR)
10. Naturally Occurring Progesterone(Why not used? Alternatives)
11. Estrogen Receptor Modulator(TU, ADR)

LAQ's

1. Corticosteroids(Glucocorticoids - Classify, ADR, TU, Precautions)
2. Oral Antidiabetics(Classify, Obese, Sulfonylureas - MoA, ADR; Thiazolidinediones – MoA, Actions, ADR; Management of newly diagnosed case, Any two FDC's with Advantages)
3. Insulin(Sources, Human/Conventional, Indications, ADR, Prevention of ADR)
4. Anti-Thyroid(Classify, MoA, ADR, Carbimazole - TU, ADR; Radioactive Iodine – MoA, ADR)
5. Contraceptives(Classify, Preparations, Combination pill – MoA, Toxicity)

Chemotherapy

SAQ's

1. Artesunate(ACT – Indication, Adv, Regimen; Artemisinin – MoA, TU, ADR)
2. Beta Lactams(Penicillinase Inhibitors; Augmentin; Antibiotic Resistance to Penicillins)
3. Anti-Malarial(Classify, Chloroquine – TU, not used in intestinal amoebiasis, resistant malaria; Quinine)
4. Cephalosporins(Classify, Third Gen; 3rd/4th; Penicillin/Cephalosporin, Typhoid Fever)
5. Fluoroquinolones(Classify, Newer FQ's; Nalidixic/Ciprofloxacin; ADR; FQ's Eliminated by hepatic and rectal route;)
6. Metronidazole(ADR, TU)
7. Cotrimoxazole(MoA, TU; Sequential Blockade – Two examples)
8. Chemoprophylaxis(Rheumatic Fever)
9. Anti-Tubercular(DOTS; MDR-TB; Pyridoxine+INH; Typhoid Carriers;
10. Aminoglycosides(Common Features, Streptomycin – TU)
11. Anti-Leprotic(Multibacillary Leprosy – Why Multidrug?; Lepa reaction – Cause, Types, Drugs;)
12. Anti-Helminthic(Mebendazole; Praziquantel/Niclosamide in T.solium; Vermifuge/Vermicide[with MoA and Examples]; Albendazole/Mebendazole; Mixed Roundworm Infestation, MoA)
13. Vaginal Discharge(Drug of Choice, Microbial Causes)
14. Macrolides(Enumerate; Azithromycin – Adv, TU, Spectrum, PKs, Tolerability, Interactions)
15. Urinary Antiseptics(Definition, Examples)
16. Sulfonamide(Sulfasalazine – TU, Burns)
17. Anti-Virals(NRTI's)
18. Tetracyclins(Doxycyclin – Adv)

LAQ's

1. Cephalosporins(Classify, MoA, ADR, TU; 3rd/1st)
2. Aminoglycosides(Classify, MoA, Streptomycin - ADR, TU)
3. Penicillin(Classify, MoA, Ampicillin&Amoxycillin - ADR, TU; PenicillinG – MoA, ADR, TU)
4. Selection of Antibiotic
5. Anti-Tubercular(Classify, ADR, Rifampicin – PKs, ADR, Spectrum, TU, Action; INH – MoA, ADR; Causes of failure of drug treatment; MDR-TB Treatment; DOTS; RNTCP)
6. FQ's(Classify, 1st/2nd [Spectrum, Adv, ADR, Indications])
7. Anti-Malarial(Classify, Chloroquine – MoA, TU; Site of Action)
8. Antibiotic Resistance(Mechanisms and How to Overcome/Prevent)
9. Anti-Amoebic(Classify, Intestinal Amoebiasis, ADR)
10. Anti-Leprotic(Multibacillary, ENL, Lepa Reaction)
11. Cotrimoxazole(MoA, TU, ADR)

CNS

SAQ's

1. Opioids (Antagonists-Classify, TU;Morphine-TU, Poisoning, Contra. of Morphine in head injury)
2. Preanaesthetic medication(Purpose of each drug, Route of administration, Dose)
3. Antiparkinsonian drugs(Levodopa, Levodopa+ carbidopa, Amantadine, L-dopa+multivitamin consequences, Drug of choice with reason)
4. NSAIDs(ADR, Aspirin-MoA as antinflammatory, antiplatelet)
5. Anaesthetics (Lignocaine, Desired & undesired properties of IV gen anaesthetic agents, Use of thiopentone sodium and NO in Gen. Anaesthesia)
6. Antiepileptics(Use of Diazepam in status epilepticus, Carbamazepine, Drug used in both types of epilepsy-ADR ;Pregnancy-problems encountered, precautions and actions to avoid them)
7. Benzodiazepines/Barbiturates
8. Antianxiety drugs(MoA)
9. Barbiturates(Classification, Phenobarbitone-TU; Poisoning- basis of forced alkaline diuresis)
10. Benzodiazepines(Zaleplon/Diazepam, Diazepam-TU)
11. Alcohol(4 methyl pyrazole in methyl alcohol poisoning, Disulfiram + ethyl alcohol, Methanol poisoning)
12. Antidepressants(TCA-ADR, Cheese reaction of MAO inhibitors, Serotonin reuptake inhibitors)

LAQ's

1. Sedative & Hypnotics(Classify;Benzodiazepines-MoA,TU, Adv over barbiturates; Management of insomnia)
2. Antidepressants(Classify, SSRIs-ADR,TU; Pharmacology of TCAs)
3. Antiepileptics (Phenytoin sodium-MoA,TU,ADR; Carbamazepine- MoA,TU,ADR; Drugs used in Grandmal & Petitmal epilepsy, Status epilepticus)
4. NSAIDs(Classify, MoA; Aspirin-MoA,TU,ADR,Contra;COX-2 inhibitors-ADRs;Adv and disadv of selectiveNSAIDs)
5. Alcohol(Drug dependence,Management of Chronic alcoholism)
6. Opium (Enumerate alkaloids, Morphine- MoA,TU,ADR,)
7. Opioid/Non-opioid analgesics(Uses,Drug of choice with dose schedule,ADRs,Contra)
8. Antiparkinsonian drugs(Classify; Levodopa+Carbidopa-Adv and Disadv ; Levodopa- MoA,TU,ADR)
9. Antianxiety drugs(Classify, Diazepam- MoA,TU,ADR,Contra)
10. Preanaesthetics(Enumerate, Basis of each , Disadv)

Miscellaneous-

SAQ's

1. Bronchial asthma-(Classify,ADRs; Selective Beta 2 agonist- MoA, ADR; Aminophylline- MoA, ADR; Budesonide- MoA, ADR ; Inhalational corticosteroids- Enumerate, MoA, ADR; Non autonomic drug groups- Enumerate, MoA)
2. Migraine(Prophylaxis; Sumatriptan- MoA, ADR)

3. Cough(Classify,MoA ; Antitussive agents-MoA, non-opioid antitussives [Enumerate,TU]; Bromhexine-mode,dose)
4. Gout(Enumerate drugs,MoA;)
5. Antihistaminics(Classify, Uses;H1 antagonists-TU,ADR; Non sedative antihistaminics-Adv, Indications)
6. Rheumatoid arthritis(Treatment,Methotrexate-MoA,TU)
7. Scabies(Enumerate, Merits and demerits of each)
8. Vaccines(Defn,Viral vaccines examples, Passive immunization, infective diseases treated with passive immunization)
9. Immunosuppressants(Classify, MoA, TU, ADR; Cyclosporine – TU, ADR)

LAQ's

1. NMJ blocking drugs(Classify,Peripherally acting-drug interactions,TU)
2. H1 receptor antagonists(Clinical classification;Older H1 blockers-TU,ADR; Newer-Adv,Disadv)

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