

FINAL EXAM **JUNE 2018**

NATIONAL BOARD OF EXAMINATIONS

GASTROENTEROLOGY PAPER-III

GASTRO/J/18/10/III

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 question 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. | , | Indications and brief technique of endoscopic mucosal resection (EMR) and endoscopic submucosal dissection (ESD) Role of radiofrequency ablation therapy in Gastroenterology | 5+5 |
|-----|----------|---|-----|
| 2. | a) b) | Emerging anti-reflux endoscopic techniques Evaluation and management of colonic stricture in ulcerative colitis | 5+5 |
| 3. | | Classify various Gastrointestinal polyposis syndrome Molecular (genetic) alterations in the development of colon cancer. | 4+6 |
| 4. | , | Clinically relevant classification of Crohn's disease and its implications for management Would you recommend surveillance for colon cancer in patients with inflammatory bowel disease? Give reasons. | 5+5 |
| 5. | · | What are the immune mechanisms causing intestinal injury in celiac disease? Write a short note on Hirschsprung's disease | 6+4 |
| 6. | | Definition and causes of short bowel syndrome. Management of short bowel syndrome | 4+6 |
| 7. | , | NSAID induced enteropathy: Pathophysiology, clinical features & management. How would you investigate and manage a 65-year-old patient presenting with acute abdominal pain and is found to have mesenteric venous thrombosis? | 5+5 |
| 8. | a) b) | Clinical features, investigations and management of small intestinal bacterial overgrowth Gut virome | 5+5 |
| 9. | | Fecal calprotectin Management of perianal fistula and abscess in patients who do not have inflammatory bowel disease | 5+5 |
| 10. | · | Adalimumab: structure, pharmacology, indications in GI diseases and results Wnt/ β -catenin pathway in hepatocellular cancer | 5+5 |