



May Exam: 1/06/2014

Time allowed: 3 Hours

Fayoum University

Faculty of medicine

السادة دكتوريو سيوفان

Final M.B.B.Ch. Examination

Internal Medicine (paper 1)

All questions are to be attempted (150 marks)

1- A female -25- year- old came to the hospital presenting with progressive loss of weight since one year.

a) What are the possible causes? **(4 marks)**

The patient's appetite was good, but she suffered from attacks of rapid irregular palpitations, anxiety, diarrhea, nervousness together with heat intolerance. On examin. BI P 160/70 mmHg. Pulse 120/min markedly irregular Temp. 37 °C . Hands: fine tremors, warm, sweaty with palmar erythema.

b) What is your most probable diagnosis? **(2 marks)**

c) How would you confirm your diagnosis by specific investigations? **(2 marks)**

d) How would you treat this patient? **(3 marks)**

e) Enumerate 4 other causes of palmar erythema **(4 marks)**

f) Name the causes of fine tremors **(4 marks)**

The patient was put on ttt, and she came back with a bad general condition, marked palpitation, sweating, great apprehension. Pulse: 170/min. markedly irregular, Temp. 41°C .

g) What is your diagnosis? **(2 marks)**

h) What are the possible precipitating factors for such condition? **(4 marks)**

i) How would you treat such condition? **(5 marks).**

2- A 59-year-old female presented with a severe attack of cough, expectoration, acute dyspnoea and wheezes of one hour duration. She used to experience similar attacks since 7-years and used to receive some medications including inhaled drugs. On examin. BI P 160/90 mmHg Pulse: 100/min. regular

a) What is the diagnosis of the attack? **(2 marks)**

b) How would you describe the expectoration of this patient? **(2 marks)**

c) When is the usual diurnal exacerbation of the attack? Why? **(3 marks)**

d) Enumerate 3 other causes of acute dyspnoea **(3 marks)**

e) What are the drugs that can precipitate such an attack) **(2 marks)**

f) What are the drugs that can treat such an attack? **(2 marks)**

Continuous effort to treat the attack by drugs were done for 6 h, but with no response. The patient's consciousness became disturbed and she became cyanosed. BI P 160/90 mmHg Pulse 130/ min. RR 33/ min.

g) What happened to the patient? **(2 marks)**

- h) What is the most urgent investigation you should request? **(2 marks)**
- i) How would you treat this patient? **(2 marks).**

3- A 43-year-old male is brought to the ER by his wife after she witnessed him having a seizure 8 h ago. Since the seizure, he remained drowsy and his mental status failed to improve. He vomited several times. She stated that he complained of a dull headache and blurry vision for several hours before the seizure. He has no history of prior seizures. His previous medical history is significant only for hypertension for which he took 3 drugs. His wife admits that he stopped taking medicine over a week ago.

- a) What is the exact diagnosis? **(2 marks)**
- b) Comment on the complications of hypertension **(10 marks)**
- c) What are the secondary causes of hypertension? **(5 marks)**
- d) Define resistant (refractory) hypertension **(3 marks).**

4- A 22-year-old female patient being treated from RHD and a two years history of AF on oral anti-coagulant presented to the hospital with an acute onset of inability to move both LLs associated with retention of urine. On exam. Complete paralysis of both LLs. She could not feel pin prick up to the level of umbilicus. The vibration sense, joint sense and muscle sense were intact. Heart: accentuated S1 + mid-diastolic rumbling murmur

- a) What is your diagnosis? **(2 marks)**
- b) What could probably precipitate such a condition? **(3 marks)**
- c) How would you explain urine retention in this patient? **(3 marks)**
- d) Where is the level of sensory loss? **(2 marks)**
- e) What are the specific investigations you would request? **(4 marks)**
- d) Enumerate the causes of LLs paralysis **(10 marks)**
- e) How would you treat this patient? What is your advice? **(6 marks)**

5- Enumerate 4 causes for each: (32 marks)

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| a) Sinus bradycardia | b) Pleural effusion | c) Addison's disease |
| d) Precipitating factors for heart failure | e) Emotional lability (inappropriate laughing and crying) | |
| f) Secondary diabetes | g) Metabolic causes of coma | |
| | h) Pulmonary hypertension. | |

6- Give short account on: (18 marks)

- a) Syncope
- b) Unstable angina
- c) Non-metastatic extra-pulmonary (para-neoplastic) manifestations of bronchial carcinoma.

Good Luck.