| Total No. of printed pages = 3 BINA CHOWDHURY CENTRAL LIBRARY (CHIMTLE SIPS) AZERE Halke Mapara (SWahan Thiorit | | | |
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| Roll No. of candidate | | | |
| | 2020 | | |
| B.Pharm. (Prac | ctice) 1th Year End-Term Examination | | |
| PATHOPHYSIOLOG | GY AND PHARMACOTHERAPEUTICS — II | | |
| Full Marks – 60 | Time - Three hours | | |
| The figure | es in the margin indicate full marks for the questions. | | |
| 1. Find out the correct answ | er: $(10 \times 1 = 10)$ | | |
| (i) Positive symptoms of | f schizophrenia | | |
| (a) Dellusion | | | |
| (b) Hallucination | | | |
| (c) Bizarre behavio | \mathbf{r} | | |
| (d) All of these | | | |
| (ii) Bipolar disorder is ch | naracterized by | | |
| (a) Mania and depr | ession | | |
| (b) Only mania and | l hallucination | | |
| (c) Depression and | delusion | | |
| (d) None of these | | | |
| (iii) Which of the followin | ng is a gastricproton pump inhibitor (PPI)? | | |
| (a) Carbenoxolone s | sodium | | |
| (b) Sucralfate | | | |
| (c) Famotidine | | | |

(d) Rabeprazole

| | (iv) | Jaur | ndice in Malaria can be grouped under |
|---|------|--------------------------------|--|
| | | (a) | Congenital Hyperbilirubinaemia |
| | V. | (b) | Haemolytic |
| | | (c) | Hepatocellular |
| | | (d) | Obstructive |
| | (v) | Follo | owing is the excellent therapy for drug induced Aplastic anaemia |
| | | (a) | Antibiotic + Antifungal |
| | | (b) | Transfusion support with erythrocyte and platelets. |
| | | (c) | Antithymocyte globulin (ATG) and cyclosporine |
| | | (d) | All the above |
| | (vi) | | following antiulcer drug (Ulcer Protectant) does not act by reducing the etion of or neutralizing gastric acid |
| | | (a) | Magnesium Hydroxide |
| | | (b) | Sucralfate |
| | | (c) | Ranitidine |
| | | (d) | Omeprazole |
| (vii) Epilepsy is the recur | | Epil | epsy is the recurrent episodes of |
| | | (a) | Seizure (b) Ulcer |
| | | (c) | Fever (d) None |
| (viii) Following is an antiepileptic drug | | owing is an antiepileptic drug | |
| | | (a) | Phenytoin |
| | | (b) | Ranitidine |
| | | (c) | Methotrexate |
| | | (d) | Enalapril |
| | (ix) | Foll | owing is an antidote for iron toxicity given as slow I.V. |
| | | (a) | Diazepam |
| | | (b) | Phenobarbital |
| | | (c) | Desferoxamine |
| | | (d) | Deferiprone |
| | | | |

1.2 (B) 2

Iron is stored in our body as BINA CHOWDHURY CENTRAL LIBRARY Azere Hatkowwapara, . re-wahat 74 017 Ferritin (a) (b) Apoferritin Transferrin (d) Ferrous gluconate. Answer any SIX questions: $(6 \times 5 = 30)$ Write down the pathophysiology and management of anxiety (a) (5)Explain the types of schizophrenia and its management. (b) (5)(c) Write a short note on depression and manic depression (5)(d) What is epilepsy? Classify antiepileptic drugs with examples and mechanism of action. (1+4=5)(e) What is alcoholic liver disease? How alcohol can cause fatty liver? (2+3=5)(f) What is Cholelithiasis? Briefly explain about its surgical and non-surgical management. (1+4=5)Define and classify anaemia. Write in brief about any one type of anaemia. (g) (2+3=5)(h) Write a note on various haemopoietic agents. (5) Answer any TWO questions: $(2 \times 10 = 20)$ What are the classic symptoms of Parkinson's Disease? Classify antiparkinsonian drugs with examples and write the various mechanisms of action and their ADR. (3+7=10)What is Dyspepsia and GERD? Brief the sign-symptoms. Discuss in details about therapy of peptic ulcer. (2+2+6=10)Briefly discuss about sign and symptoms, diagnosis and management of (c)

Liver Cirrhosis.

2.

3.

(10)