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Q.11 The officer in charge of police station, while driving with a group of police officers on a routine round, found a disheveled bearded young man in torn clothes, bare footed and holding stones in hands throwing at people and cars' wind screens. The officer in charge has brought this individual to you for an opinion. Keeping new in mind the New Mental Health Act for how long will keep such cases for the following purposes according to different section?

a) Detention for assessment  
b) Detention for treatment  
c) Urgent admission  
d) Emergency holding

Q.12 Mr. Z is an admitted case in forensic unit of psychiatry department. He is undergoing treatment as a patient in pursuance of an order of a referring authority for mental illness. Two days patient met the consultant incharge and request incharge to discharge on urgent basis as he deems himself symptom free.  

a) What section of mental health act will apply on discharge?  
b) What particular section say in detail?

Q.13 You are invited to speak at a seminar organised on world mental health day on “Public Mental Health in Pakistan: A brief review”. Write down main points under following headings.

a) What is public mental health?  
b) Importance?  
c) Situation of mental health in Pakistan.  
d) What is needed to improve the situation?
Q.1 A supervisor after examining an unconscious patient during a ward round asked his trainees to:

a) Name the three neuro anatomical structures involved in arousal or maintenance of an awake state.
b) What is the neuro-physiology of arousal or maintenance of an awake state?
c) Enlist three functions of frontal lobe.

Q.2 A resident doctor wakes up at 7:00 AM in the morning. He has had a very tiring evening at the hospital a day earlier. He does not want to get out of bed and go to hospital and just wants to stay in for long till noon. Suddenly a thought comes in his mind that his Senior Registrar who is very strict in attendance shall punish him badly for his absence next day. Then a feeling of guilt comes that he should really get out of bed and be at the hospital at the earliest as his poor patients might suffer and generally it is not morally good for a resident to miss his duties.

a) Considering Freud’s views define the three components of personality?
b) How do you identify all three components in the above scenario?
c) What are the three levels of awareness according to Freud that affect human behavior?

Q.3 A 22 years old boy has developed some strange perceptions.

- Sometimes he complains of hearing voice while going to sleep.
- While looking at the clouds, he sees the face of his beloved girl.
- When water is running through a tape, he hears voices of his friends.
- When there is a sound of alarm of clock, he sees strange creatures.
- While lying in bed he feels that someone is touching his genitalia.

Which phenomenological terms are used for the above 5 perceptions?
Q.4 A 28 years old female, mother of 7 children presented with 3 attempts of self-harm with the intention of killing her-self. In ward she is aggressive, hyperactive, talkative and begins to cry suddenly. These complaints began 3 months after sudden death of her husband. She still calls her husband by name and says that he will come, sees her in dreams and talks of his good and bad habits. In ward she begins to behave like a child and then blames others for her worse conditions and occasionally laughs saying that I’m so happy. Some of her behaviours are those of attention seeking like pretending to be unconscious, falling down from bed, taking bath at 3 a.m. at night, dressing and using cosmetics, eating many pills at a time, holding knife in hand and saying she would kill herself.

a) What 4 conditions would you consider in differentials?
b) Write any 3 defense mechanisms that she is using.
c) What four areas would you cover in assessing the suicidal intent?
d) How will you manage if there is suicidal risk to the patient?

Q.5 A 24 years old university student presented to psychiatric OPD saying “my life has become a hell. I spend 3 hours in washroom while taking bath and when I come out of there I am extremely conscious of everything that comes in contact with my body. I can’t go out of hostel room too far as I am always in search of water for washing my hands after I shake hands with others, therefore I have begun to use gloves in the university, but now the gloves seem contaminated”.

a) What is your provisional diagnosis?
b) Which clinical instrument you use to assess this condition?
c) Mention pharmacological options available to treat it.
d) Mention 2 psychological treatments that can be considered.
e) Enlist 2 physical treatments other than psychotherapy and pharmacotherapy that may be considered.
Q.6 A 45 year old male suffering from Bipolar Affective Disorder, presented in a confused and agitated state. He developed generalized rigidity, tremors, hyperreflexia, ataxia and autonomic instability (hyperthermia, tachycardia, hypertension, diarrhea and mydriasis) two days back. The symptoms started when two SSRIs were combined along with Lithium Carbonate. All relevant physical investigations including Serum Lithium were within normal limits except raised Creatinine Phosphokinase and leucocytosis.

a) What is the most likely diagnosis of this case?
b) How would you differentiate this case from neuroleptic malignant syndrome (NMS)?
c) How would you manage this case?

Q.7 A 56 years old man is getting medication for diabetes mellitus, ischemic heart disease and hypertension. He is currently admitted in intensive care unit by a medical specialist on account of chronic renal failure. The nurse on duty tells the doctor that the old man gets irritable, talks irrelevance, does not recognize anybody around and became tearing full from his caregiver family members. These symptoms usually become worse at night.

a) What is the most likely diagnosis in this case?
b) What are the major causes of such a presentation?
c) How will you manage this case?

Q.8 Mr Y is a 50 years old individual who took a fall from the first floor of a building to sustain a severe head injury resulting in coup and countercoup as well subdural haematoma. 

What are the likely psychiatric sequelae that you expect in the short and long terms in this patient?
Q.9 A 25 years old man referred to you with eccentric behavior for the last seven years. While suspecting personality disorder:

   a) What 05 objective and 05 projective personality assessment tests that can help you in this case?
   b) Name any 05 sub-scales used in MMPI.

Q.10 A 32 years old married female presents to an emergency room after taking an overdose of medications. She has had an argument with her mother-in-law on a minor issue. On a fit of anger she took an overdose of tranquilizers which were lying around in the drug cabinet at her home. She is drowsy but otherwise arousable on painful stimuli. Her blood pressure is 130/70 mmHg, her pulse is 70/ mm. There is history of sadness and decrease interest during the last one month.
   On assessment, general medical team thinks that there is no imminent threat to her life. They call the psychiatrist on the service in order to assess her condition.

   a) What is the list of differential diagnoses?
   b) How would you manage this case in the emergency room?
   c) What would be the next step after the initial management?
Q.14 A family of nine living in an urban slum of Lahore comprises of Mr and Mrs. X, five Sons and two daughters. Mr X is unemployed, while his wife is a household worker who washes dishes and clothes in a couple of homes. Three sons are drug addicts, while two are regular offenders and have been in jail several times. The two daughters have never gone to school and are extremely violent and aggressive. The girls gather plastic bottles from the nearby dumping depot.

a) What Public Mental Health risk factors and challenges do you expect to be prevailing in this family that are likely to enhance criminal behavior and mental illness.

b) What psychiatric and/or medical disorders that are most likely to be present in this family.

Q.15 A 55 Years old male, suffering from Bipolar Affective Disorder presently in severe depression with psychotic features, admitted as a high risk suicidal case. He was on Venlafaxine SR 150mg/day, lithium carbonate 800mg/day and olanzapine 10mg/day. He has history of Diabetes mellitus, hypertension and Ischemic heart disease for which he was taking treatment from his physician. He is not taking any medical or psychiatric treatment for the last five days because of severe psychomotor retardation. A course of 6-8 ECTs were planned for him.

a) What ECT work up you will like to do in this case?

b) Besides Severe Depression what are other important indications of ECT.

c) What are the contra indications for ECT?
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Q.16 A 42 years old patient of bipolar affective disorder stabilized on lithium for past six years presents with complaints of lethargy, dry coarse skin, cold intolerance, weight gain and menstrual irregularities for past 02 months.

a) What is the most likely diagnosis in this case?
b) How will you manage this condition?
c) What is the recommended pre lithium workup and monitoring during course of treatment?
d) Enlist four drugs that are known to raise serum lithium levels.

Q.17 A 45 years old businessman was presented in acute stress and complained that is exhausted from the demands of life and is at verge of collapse. The patient had a severe financial loss when his goods imported from abroad were confiscated by the custom officials. He was in legal fighting for the release of his good but the matter was delaying. Two weeks back her mother got a heart attack and remained in hospital for more than ten days. During this time he was running between court, hospital and his office and neglected himself and his family. His wife got sick from his excessive irritability, and neglecting attitude went to her parent’s house and told that probably her husband is interested in other woman so he is neglecting her.

How will you do crisis intervention in this case?
Q.18 A 19 years old lady diagnosed case of anxiety was presented at psychiatric clinic, with one year history of restlessness, palpitation and pain in chest, referring to the left arm. She believes that she has heart problems for which she has consulted may doctors who assured her that she does not has heart problem. At her university or during shopping she likes to remain in company of someone because of the fear of fainting and losing control. She always fears rejection and humiliation from other and worries about the others feeling.

a) What management of anxiety you can offer in this case?
b) Which cognitive errors you will address during CBT?
c) What cognitive techniques you will use?

Q.19 Mr. Y has been diagnosed of a sexually transmitted disease. He wishes to have treatment without anyone else knowing about his infection, not even his wife. The residents on duty are deeply concerned that wife might also be infected if she is not informed about the miserable condition of her husband.

a) What Confidentiality?
b) Can you breach confidentiality in the above case, justify your answer in 2 to 3 lines?
c) What are the conditions in general in which confidentiality can be breached?
d) What is the section of Mental Health Ordinance that mention in 2 to 3 lines?
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Q.20 A 22 years old male patient brought by father at psychiatric OPD with the complaints of self-talking, hearing unusual voices, aggression and having a firm belief that people are plotting to kill him. After complete assessment, patient is diagnosed of schizophrenia.
Mention the steps to break the news to the father?

The End