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INSTITUTE OF INDIGENOUS MEDICINE, UNIVERSITY OF COLOMBO, RAJAGIRIYA
BUMS LEVEL III – SECOND SEMESTER EXAMINATION – MAY 2016
PATHOLOGY - II- AS 3203

Time: 2 ½ hours
(1.45. p.m. – 4.15 p.m.)

Index no

Answer all questions.

Structured Questions

01.

A. 1. What do you mean by tumor markers? (0.5 marks)

11. Name four types of tumour markers with examples (01 mark)

111. What are the clinical significants of these tumour markers? (1.5 marks)

B. 1. What are the two major contributors in “carcinogenesis”? (01 mark)

11. Gives three examples for each of the above contributors

(1.5 marks)

111. What do you mean by cachexia?

(0.5 marks)

1V. What are the factors involve in the above process

(01 mark)

C. 1. Define the term "Neoplasia"

(01 mark)

11. What are major differences between benign and malignant neoplasms?

(01 mark)

111. What are the three major types of benign mesenchymal tumors?

(01 mark)

02.

A. 1. What is **Liver Cirrhosis**?

(0.5 marks)

11. How can you differentiate cirrhotic liver from metastatic liver?

(01 mark)

111. Name three major causes for liver cirrhosis

(1.5 marks)

B. 1. Define the term "Hepatic Failure"

(01 mark)

11. List five major pathophysiological events of liver failure?

(01 mark)

111. Name three **Oncoviruses cases liver malignancies**

(01 mark)

C.

1. What is metastatic calcification?

(01 mark)

11. List three conditions in which metastatic calcification takes place

(1.5 marks)

111. List three malignant diseases causes **polycythemic paraneoplastic syndrome** (1.5 marks)

Essay Questions

01.

A. 1. List the causes for acute Gastritis.

(03 marks)

11. Chart the pathological changes in acute and chronic gastritis.

(04 marks)

B. 1. List out the acid protective mechanisms in the stomach.

(02 marks)

11. Explain the complications of Peptic ulcer disease.

(03 marks)

C. **68 years** old civil retired servant, who complaint of **difficulty in swallowing**. He noted that **solid foods**, but not liquids, were seeming to stick at the **lower end** of the chest, and had been **getting worse** over the past couple of months. He had **lost 10 kilos** in weight over this time. He **smoked** 15 cigarettes per day. X Ray Barium swallow shows "**rat tail**" deformity.

1. Give the almost certain diagnosis?

(02 marks)

11. What pathological investigation will confirm your diagnosis?

(02 marks)

111. Explain the expected epithelial metaplasia will take place at this condition? (02 marks)

1V. What could be the major reason for this epithelial metaplasia?

(02 marks)

02.

- A. 1. Explain the pathogenesis of Acute Glomerular Nephritis (04 marks)
11. How it differs from Nephrotic Syndrome? (02 marks)
- B. Explain the pathogenesis and clinical course of **Acute Tubular Necrosis** (08 marks)
- C. Write short notes on Renal Artery Stenosis. (06 marks)

03.

- A. I. What is "diverticulosis"? (02 marks)
II. What can cause this condition? (03 marks)
- B. Explain the pathophysiological complications of **duodenal diverticulosis**? (05 marks)
- C. 25 years old doctor presented to the gastroenterologist with the long history of bloody diarrhea. He had previously been investigated by sigmoidoscopy and started a course of steroid treatment. He also complained crampy lower abdominal pain and recent loss of 8 kg. On examination, he was pale, pyrexial, and tender in the left iliac fossa but no mass were palpable.
- I. What pathological features would suggest this is ulcerative colitis rather than crohn's colitis? (06 marks)
- II. What are the complications of this condition? (04 marks)

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