## March-1990

### D.M. DEGREE EXAMINATION, MARCH 1990,

(Higher Specialities)

Branch III - Nephrology

CLINICAL NEPHROLOGY

e: Three hours.

Answer ALL the questions.

Describe the bleeding disorders in patients with al failure, its pathogenesis and management.

Discuss the metabolic complications of diuretic rapy and its management.

Write short notes on:

- (a) Reverse osmosis.
- (b) Anti-N like antibodies.
- 4 Describe renal histological changes in
  - (a) Systemic sclerosis.
  - (b) Eclampsia.
  - (c) Viper snake bite.

Discuss the pathogenic mechanisms and approach a case of idiopathic oedema.

### D.M. DEGREE EXAMINATION, MARCH 1991.

(Higher Specialities)

Branch III - Nephrology

Paper II - CLINICAL NEPHROLOGY

Time: Three hours.

Answer ALL the questions.

- Discuss the mode of action, advantages and limitations in the use of Cyclosporin A in renal disease.
- Discuss the clinical spectrum of ANCA associated renal disease.
- Write short notes on:
- (a) Role of immuno-adsorption in a sensitised transplant recipient.
  - (b) Schistosomal nephropathy.
  - (c) Hepatorenal failure.
  - (d) Predictive test in anticipating pre-eclampsia.
  - (e) Medical prophylaxis of calcium nephrolithiasis.

### D.M. DEGREE EXAMINATION, SEPTEMBER 1990.

(Higher Specialities)

Branch III - Nephrology

# Paper II - CLINICAL NEPHROLOGY

Time: Three hours.

# Answer ALL the questions.

- Discuss the role and pattern of trace elements in the pathogenesis, clinical manifestations, diagnosis and management of chronic renal failure.
- Discuss the principles of drug therapy in renal failure.
- Discuss hypertension in a post-transplant case.
- 4. Discuss the renal histological changes in
  - (a) HIV infection
  - (b) Multiple mycloma
  - (c) Leprosy
  - (d) P. falciparum infection.
- 5. Write brief notes in:
- (a) Rationale for se of ACE inhibitors in proteinuric states.
  - (b) Vitamin D resistant Rickets.
  - (c) Metabolic abnormalities in CAPD.

## March-1992

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# D.M. DEGREE EXAMINATION, MARCH 1992.

# Branch III - Nephrology

# CLINICAL NEPHROLOGY

Time: Three hours. Maximum: 100 marks.

1. Discuss Acquired Renal Cystic Disease. (25)

2. Describe medical management of Renal Stone Disease. (25)

3. Write notes on:
(a) Recombinant Erythropoietin.
(b) Polyamines as uremic toxins.
(c) Assessment of adequacy of dialysis.

 $(5 \times 10 = 50)$ 

(d) ACE inhibitants in renal failure.

(e) Thin membrane disease.

### D.M. DEGREE EXAMINATION

(Old/New Regulations)

(Higher Specialities)

Branch III - Nephrology

Paper II - CLINICAL NEPHROLOGY

Three hours.

Maximum: 100 marks.

Answer ALL questions.

Describe clinical manifestations, laboratory tests and agement of aluminium toxicities in ESRD patients. (25)

Discuss investigations in a case of death during dialysis suggest remedial measures. (25)

Write short notes on:

- (a) Benign familial hematuria and its investigations
- (b) Acute renal failure in Intensive Care Unit
- (c) ANCA related renal disease
- (d) Congenital Nephrotic Syndrome
- (e) Lead Nephropathy.

. (5×10=50)

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### D.M. DEGREE EXAMINATION, MARCH, 1993

Branch III - NEPHROLOGY

#### CLINICAL NEPHROLOGY

Time: Three hours

Maximum: 100 Marks

 Describe in detail the age related changes in the structure and function of kidneys?

(25)

Discuss the old and new concepts in the management of anemia in chronic renal failure.

(25)

- 3. Write short notes on:
  - a) Glomerular TIP lesion
  - b) Dialyser reuse.
  - c Nail patella syndrome.
  - d) Platelet derived growth factor
  - e) Lithium Toxicity

April-1995

(Higher Specialities)

Branch III - Nephrology

(Old/New Regulations)

Paper II - CLINICAL NEPHROLOGY

e: Three hours

Max.marks: 100

Answer ALL questions.

piscuss the etiopathogenesis, manifestations, and management of the Hemolytic uremic syndrome. (25)

pescribe the clinical features, geographical distribution, pathologic features and management of IgA Nephropathy. (25)

Write short notes on:

- a. Percutaneous Transluminal Renal Angioplasty.
- Effects of chronic Renal failure on the immune response.
- Bacterial virulence factors influencing urinary tract infection.
- Pre-operative and intra-operative management of Phaeochromocytoma.
- Renal transplantation in a sensitized recipient. (5 x 10=50.

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D.M. DEGREE EXAMINATION

(Higher Specialities)

Branch III - Nephrology

(Revised Regulations)

Paper II - CLINICAL NEPHROLOGY, DIALYSIS AND TRANSPLANTATION\$

Time: Three hours

Max. marks:100

Answer All Questions

- A 55 year old man presented with semi-come and moderate renal failure whose urine is free of sugar but 2+ for proteinuria. Discuss approach, investigations and management of this patient. (25)
- A 40 year old patient who had been on long term dialysis was admitted with problem of sensorial deterioration. Two days later he died. Discuss the pathophysiology of his condition and describe all possible pathological changes in vital organs. (25)
- 3. Write short notes on:
  - (a) Hormonal alterations in chronic renal disease
  - (b) Hemodynamics in chronic renal allograft rejection
  - c) Adrenal corticoids and hypertension
  - i) Long term use of cyclosporin
  - ) Dialysis-related arthropathy. (5x10=50)

MB 108 D.M. DEGREE EXAMINATION

(Higher Specialities)

(Old/New Regulations)

Branch III - NEPHROLOGY

Paper II - CLINICAL NEPHROLOGY

Time: Three hours

Max. marks:100

Answer All Questions

- Discuss the pathogenesis of progressive renal damage in vesicoureteric reflux. Discuss the controversies in its management. (25)
- Discuss the pathogenesis of pregnancy induced hypertension. Describe its clinical features, management and prevention. (25)
- 3. Write short notes on:
  - (a) Amphotericin nephrotoxicity
  - (b) Hemodialysis biocompatibility
  - (c) Uremic pericarditis
  - (d) Etiopathogenesis of calcium containing stones
  - (e) Use of monoclonal antibodies in renal transplantation.

'(5x10=50

D.M. DEGREE EXAMINATION

(Higher Specialities)

Branch III - Nephrology

(Revised Regulations)

Paper II - CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time: Three hours Max. marks:100

Answer All questions.

All questions carry equal marks.

- 1. Medullary necrosis
- Pathogenesis of IgA nephropathy
- Myoglobinuric nephropathy
- Interstitium in the initiation and evaluation of glomerulo nephritis.
- 5. Pathogenesis of cystic kidney disease
- 6. Renal manifestations of Hepatitis C infection
- 7. Calcitriol in CRF
- 8. Cytokines in the pathogenesis of ARF
- 9. Glomerular tip lesion
- 10.Osteopontin.

[KA 010]

Sub. Code: 1202

## D.M. DEGREE EXAMINATION

(Higher Specialities)

Branch III - Nephrology

(Revised Regulations)

# Paper II — CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time: Three hours

Maximum: 100 marks

# Answer ALL questions.

- Describe the genetics, pathogenesis, manifestations and diagnosis of autosomal-dominant polycystic kidney. (25)
- Discuss the role of serology in the diagnosis of glomerular and vascular disease. (25)
- Write briefly on :

 $(5 \times 10 = 50)$ 

- (a) Postpartum acute renal failure
- (b) Cryoglobulinaemic glomerulonephritis
- (c) Xanthogranulomatous pyelonephritis
- (d) Post transplant hypertension
- (e) Acute renal failure in malaria.

D.M. DEGREE EXAMINATIONS (Higher Specialities)

Branch III - Nephrology

(Revised Regulations)

Paper II - CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time: Three hours

Max.marks:100

### Answer All Questions

- Describe the role of paraproteinaemies in the causation of renal diseases and discuss the mechanisms involved. (25)
- Discuss the pathogenesis of pregnancyinduced hypertension. Describe its clinical features, management and prevention. (25)
- 3. Write briefly on:
  - (a) Low turnover bone disease
  - (b) Konuraemic indications for dialysis
  - (c) Rifampicin associated acute renal failure
  - (d) Antineutrophil cytoplasmic antibodies
  - (e) Hypertension due to unilateral renal parenchymal disease.

(5x10=50)

[KB 010]

Sub. Code: 1202

### D.M. DEGREE EXAMINATION.

(Higher Specialities)

Branch III — Nephrology

(Revised Regulations)

# Paper II — CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time: Three hours

Maximum: 100 marks

# Answer ALL questions.

- 1. Describe the etiopathogenesis and clinical features of acute cortical necrosis. How would you confirm the diagnosis and manage a patient with this disorder? (25)
- Describe the clinical features, pathogenesis, histology, management and long term outcome of Henoch Schonlein purpura. (25)
- 3. Write briefly on :

 $(5 \times 10 = 50)$ 

- (a) Banff 1997 classification of acute allograft rejection.
- (b) Ultrafiltration in ambulatory peritoneal dialysis.
  - (c) Complications of subclavian vascular access.
- (d) Hepatitis B vaccination in chronic renal failure.
  - (e) Criteria for diagnosis of brain-stem death.