# CPD Questionnaire: April 2003

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This programme includes 2 ethics CPD points. In 2003, there will be an ethics article in the March, May, July and September issues. Complete the questionnaires on these four articles and get your 2 ethics points.

An answer sheet will be provided every two months. Make sure you receive the March, May, July, September and Nov/Dec issues. Please mark only one answer per question with a cross in the provided space on the answer sheet, furnish us with your personal details on the sheet, sign the answer sheet at the bottom, make a copy for yourself, and send the original to the *CPD office*, *PO Box 14804*, *Lyttelton*, *0157*. To earn 4 points, 70% of the answers must be correct.

### Gastro-oesophageal reflux disease

### 1. The following statements are TRUE, except one.

- A. Angina and MI should always be excluded in GORD patients with chest pain.
- B. Negative endoscopy findings exclude reflux disease.
- C. Patients with NERD are less likely to develop strictures, bleeding or Barrett's oesophagitis.
- D. NERD patients often respond well on on-demand PPI therapy.
- E. A PPI taken every third day has been proven effective in NERD patients.

### 2. The following patients need to be referred to a gastroenterologist, except one.

- A. Chronic heartburn patients.
- B. Patients with angina-like chest pain.
- C. Those who have recurrent symptoms after 4-6 weeks of successful initial therapy.
- D. Patients who fail on standard or high dose PPI's.
- E. Patients with odynophagia or extra-oesophageal symptoms.
- 3. Cisapride is not currently recommended for the treatment of GORD due to its effects on cytochrome P450 and the risk for ventricular arrhythmia's.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE.
- 4. Patients older than 45 years of age, with heartburn more than 2 times a week and longer than 6months should be referred to a specialist.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE
- 5. A patient has been endoscoped and is on full dose PPI therapy. His symptoms are well controlled. The dosage may be lowered to a half dose PPI to determine the lowest, cost-effective dose that controls symptoms.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE

### Antithrombotic therapy in clinical practice

- 6. The following patients are at high risk for thrombosis, except one.
- A. Patients with congestive heart failure
- B. Patients with atherosclerotic vascular disease.
- C. Patients with malignancies.
- D. Pregnant patients.
- E. Alcoholics.
- 7. The INR should be 2-3 for the following patients on warfarin therapy, except one.
- A. Prophylaxis and treatment of deep venous thrombosis.
- B. Treatment of acute myocardial infarction.
- C. Prevention of systemic embolism in tissue heart valves and valvular heart disease.
- D. Pulmonary embolism treatment.
- E. Prevention of systemic embolism in atrial fibrillation.
- 8. The ideal time for administration of fibrinolytic agents is within 6 hours after onset of the acute chest pain.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE
- 9. In acute coronary syndromes, non-STEMI patients should be on heparin and streptokinase, whereas STEMI patients should only be on heparin.
- C. Choose "A" if TRUE.
- D. Choose "B" if FALSE

## 10. The following statements are TRUE for antiplatelet therapy, except one.

- A. Aspirin does not reduce all-cause mortality.
- B. Aspirin plus streptokinase reduces the mortality of MI patients with 43%.
- C. Gp IIb/IIIa inhibitors block thromboxane A2 and have no additional effect when combined with aspirin.
- D. Aspirin can reduce the frequency of TIA'a and was shown to reduce the risk of a second stroke by 25%.
- E. Thienopyridine derivatives inhibit the ADP-independent pathways of platelet activation.

## CPD

### Familial hypercholesterolaemia

- 11. The familial hypercholesterolaemia prevalence is as high as 1/72 for the Afrikaner population and 1/67 in the Ashkenazi Jewish population in South Africa.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE
- 12. The following statements are TRUE for the clinical features of FH, except one.
- A. HETEROzygotes have less severe clinical and biochemical features than HOMOzygotes.
- B. Xanthomas are present in childhood HOMOzygous FH patients.
- C. Xanthomas only appear, if at all, during adulthood in HETEROzygous FH patients.
- D. Xanthelasmas are nearly always present in HOMOzygous FH patients.
- E. In HETEROzygous FH patients, females present with symptoms 10 years earlier than in these males.

## 13. Dietary restrictions can result in a 15% reduction in LDL in a compliant patient with HETEROzygous FH, but has minimal effect in HOMOzygous patients.

- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE.

14. Although the prevalence of FH is low in the African population, there are mutations, like FH Pedi and FH Cape Town-2, identified for these populations.

- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE.

## 15. The following statements are TRUE for the treatment of FH, except one.

- A. Statin therapy is indicated for FH.
- B. Nicotinic acid is indicated for FH.
- C. Probucol is effective to reduce xanthomata size.
- D. Portacaval anastomoses have been used for treating homozygous FH patients and produced a 50% reduction in LDL levels.
- E. Fibrates reduce LDL levels significantly.

### The teenager with moderate acne

## 16. The following statements are TRUE for antibiotic use in acne, except one.

- A. Tetracyclines should not be prescribed with isotretinoin due to an increased risk for intracranial hypertension.
- B. The same antibiotic should be used in subsequent episodes to prevent resistance.
- C. Avoid using different topical and oral antibiotic agents at the same time.
- D. Vestibular dysfunction and localized pigment disturbances are common side effects that appear to be noted only with doxycycline.
- E. Rifampicin may induce acne.

- 17. The following statements are TRUE for the treatment of acne with retinoids like isotretinoin and tretinoid, except one.
- A. It is the first choice treatment for patients with severe nodulocystic acne.
- B. A pre-treatment pregnancy test is mandatory.
- C. Lipid levels and liver function tests should prudently be monitored, pre-treatment and weekly/biweekly in the first month of treatment.
- D. Topical agents are available and adapalene was shown to be as effective as tretinoin.
- E. Retinoids eradicate P. acnes.
- 18. The most important problem with isotretinoin is teratogenisity.
- A. Choose "A" if TRUE.
- B. Choose "B" if FALSE.

### The postoperative period

## 19. The following statements are TRUE for managing scoline apnoea, except one.

- A. Continue to ventilate the patient.
- B. Do a peripheral nerve stimulation to determine an extension of the neuromuscular block.
- C. Sedate the patient, as this is an unpleasant experience.
- D. Blood samples should be taken for plasma cholinesterase levels, and dibucaine and fluoride numbers.
- E. Patients need not apply for a Medical Alert bracelet.

## 20. The following oral analgesics contain codeine, except one.

- A. Codis®
- B. Lentogesic®
- C. DF 118®
- D. Myprodol®
- E. Stopayne®