

AUTOCOIDS
MEDIATORS OF INFLAMMATION
ANTI-INFLAMMATORY DRUGS

REVISION QUESTIONS

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Q1

A 64-year-old man suffering from benign prostatic hyperplasia presented to his physician complaining of generalized itching. The problem began 1 week earlier, after an afternoon of prolonged sun exposure. The patient reported that the itching was distressing, especially during the night. Physical examination showed an enlarged prostate and no other evidence of ongoing disease.

Which of the following drugs would be appropriate for this patient?

[A] Cyproheptadine [B] Diphenhydramine [C] Famotidine ~~[D]~~
Loratadine [E] Promethazine [G] Ibuprofen

Explain your answer H₁ 2nd Gene Antagonist.

Q2

A 24-year-old woman experienced severe motion sickness whenever she traveled by air or sea. Diphenhydramine taken before a trip was effective in minimizing her symptoms.

The therapeutic effect of the drug was most likely due to blockade of which pair of central receptors?

Explain your answer

⇒ H₁ & CNS Muscarinic Receptors.

⇒ Inverse agonist of H₁ & M receptors causing motion sickness.

⇒

Q3

A 34-year-old man presented to his physician complaining of dry mouth, constipation, and difficulty in urination. He also noticed an increase in appetite. The man had started a therapy with ciproheptadine 2 weeks earlier to treat cold-induced urticaria.

Drug-induced blockade of which pair of receptors most likely mediated the patient's symptoms?

H₁, Σ_1 , M₁ receptor

Explain your answer

*→ Antagonist M receptor of Ach release
thus reduce on Salivary production &
Bladder contraction.*

⇒ Parasympathetic .

Q4

A 10-year-old boy developed pruritus and skin wheals after eating fried eggs. He was diagnosed with food allergy, and loratadine was prescribed.

Which of the following statements best explains why loratadine is used in several allergic disorders?

- A. It blocks the antigen-induced release of histamine from mast cells
- B. It prevents the antigen-antibody reaction on the surface of mast cells
- C. It elicits effects that are opposite to those elicited by histamine
- D. It blocks muscarinic and adrenergic receptors in smooth muscle
- E. It prevents many histamine-induced effects in peripheral tissues

Explain your answer

⇒ Blocks action of histamine by binding to H₁

Q5 *Receptors in Peripheral Tissue.*

A 47-year-old man presented to the clinic complaining of a recent onset of repeating episodes of vertigo associated with nausea and vomiting. The patient was otherwise healthy and denied use of alcohol or illicit drugs. Physical examination was unremarkable, but a provocative test elicited severe vertigo. A diagnosis was made, and a pharmacotherapy was prescribed.

Which of the following drugs would be appropriate for this patient?

- [A] Diphenhydramine [B] Ondansetron [C] Dronabinol [D] Ergotamine [E] Loratadine [F] Propranolol

Explain your answer

→ H₁ anti histamine (1st gen)

Q6

A 66-year-old man suffering from benign prostatic hyperplasia was admitted to the hospital because of severe supra-pubic pain and an inability to pass urine for the past 24 hours. On questioning, he said he had been taking diphenhydramine for a few days to relieve itching.

Which of the following actions most likely mediated the adverse effect of the drug in this patient?

- A. Relaxation of the detrusor muscle ✓
- B. Constriction of the bladder external sphincter ✗
- C. Constriction of the prostate capsule ✗
- D. Relaxation of the bladder internal sphincter ✗
- E. Increased diuresis ✗

($\beta-1$
 $\beta-2$)

Explain your answer

→ acts on M_3 -receptors of the detrusor m.
→ relaxing the detrusor → urine retention

Q7

A 54-year-old man at a scheduled ophthalmic check-up was found to have increased intraocular pressure. The man had been suffering from open-angle glaucoma for 2 years, but up until the current visit, the disease was found to be well controlled by local treatment with timolol and latanoprost. Drugs taken recently by the patient included over-the-counter preparations for episodic headache, heartburn, and insomnia.

Which of the following drugs could have caused the patient's increased intraocular pressure?

[A] Paracetamol [B] Omeprazole [C] Ibuprofen [D]
Diphenhydramine [E] Famotidine

Explain your answer

Q8

A 21-year-old woman suffering from seasonal allergic conjunctivitis started a treatment with eye drops of azelastine, a second-generation histamine H1 antagonist.

What is the advantage of using second-generation H1 antagonists locally in the conjunctiva instead of first-generation H1 antagonists?

⇒ 2nd Generations do not cross the BBB
thus has less sedative effects.

Q9

An 8-year-old girl was diagnosed with seasonal allergic conjunctivitis triggered by exposure to airborne pollen. She started a topical therapy with cromolyn sodium (sodium cromoglicate).

Which of the following actions most likely mediated the therapeutic effectiveness of cromolyn in this patient?

- A. Blockade of histamine H1 receptors
- B. Blockade of mediator release from mast cells**
- C. Inhibition of prostaglandin biosynthesis **x**
- D. Blockade of leukotriene receptors
- E. Constriction of conjunctival vessels

CROMOLIN S = Mast cell stabilization

Explain your answer

It enhances phosphorylation of a specific protein in mast cells. this protein interferes with signal transduction

Q10 pathways to cause a reduction in the release of inflammatory mediators by mast cells / Mast Cell Stabilizers.

A 48-year-old man with open-angle glaucoma still had elevated intraocular pressure despite 1 month of treatment with timolol and dorzolamide. The ophthalmologist decided to add latanoprost to the therapeutic regimen.

Which of the following effects on aqueous humor most likely mediated the therapeutic effect of the drug in the patient's disease?

- A. Increased outflow through Schlemm canal
- B. Decreased production by ciliary epithelium
- C. Increased outflow through uveo-scleral route
- D. Decreased production by eye vessel constriction
- E. Increased outflow through trabecular meshwork

Explain your answer

⇒ Latanoprost is a selective Prostanoid FP Receptors agonist.

Q11

A 47-year-old man complained to his physician of an inability to maintain an erection. After a complete medical workup, he was prescribed intra-urethral administration of alprostadil to be used before intercourse.

What is the molecular mechanism of action that mediates the efficacy of the drug in the patient's erection disorder?

PGE₁ Analogue.
Action: Acts as Prostaglandin receptor Antagonist
mimicking the action of PGE₁,
which is naturally a vasodilator.
- This further allows entry of blood
into the corpus cavernosus!

Q12

A 22-year-old primipara woman was admitted to the obstetrical unit for labor induction because of a postdated pregnancy. Her obstetrical examination was normal, but her cervix was unfavorable for induction of labor with oxytocin.

Which drug would you give intra-vaginally to ripen the cervix? **BIDUPROSTONE** / **Misoprostol** ^{*_{E₁}}

Explain your answer

⇒ Increases the amplitude of frequency of uterine contractions while reducing cervical tone, resulting in cervical dilation. **E₂ Analogue**.

→ Intra-vaginal **E₁ Analogue** causing smooth muscle of cervix

Q13

A 2-day-old premature male baby, born by normal vaginal delivery, presented with severe cyanosis. Chest x-rays and echocardiography confirmed the diagnosis of congenital transposition of the great arteries, and the baby was scheduled for surgery.

Which of the following drugs was most likely administered by intravenous infusion to the baby until surgery?

[A] Indomethacin [B] Alprostadil [C] Dinoprostone [D] Latanoprost [E] Misoprostol

Explain your answer

Acts as vasodilator & SM relaxant PGE₁ Analogue.
thus causes smooth muscle relaxation.

Q14

A 35-year-old woman was seen at the clinic because of progressive exertional dyspnea and arthralgias. Further exams led to the diagnosis of primary pulmonary hypertension, and an intravenous infusion of epoprostenol was started.

What is the molecular mechanism that mediates the therapeutic efficacy of the drug in the patient's disease?

Epoprostenol = PGI₂ analogue causing
cause vasodilation &
smooth muscle relaxation
long acting on the vessels
Also Anti platelet aggregation.

Q15

A 22-year-old woman recently diagnosed with mild persistent asthma started treatment with salbutamol as needed and oral zileuton daily

What is the molecular mechanism of action that mediates the therapeutic effect of zileuton in the patient's disease?

→ Zileuton = drug that prevents the lipoxygenase pathway for the production of SHPETE & HPETE thus no production of leukotrienes.

Q16

A 35-year-old woman presented to her physician complaining of recent onset of nausea and vomiting in the mornings. A pregnancy test confirmed she was pregnant. Past medical history was significant for chronic heart failure, necessitating a medical abortion. A drug treatment for abortion induction was prescribed.

Misoprostol 3rd & 2nd Can be combined with mifepristone.

Which of the following drugs was most likely included in that treatment?

[A] Epoprostenol [B] Indomethacin [C] Cyproheptadine [D] Mefenamic acid [E] Misoprostol

Explain your answer

⇒ Analogue of PGE₁ thus causes uterine muscle contraction

Q17

A 64-year-old woman recently diagnosed with osteoarthritis started treatment with ibuprofen and misoprostol

Which of the following adverse effects is most likely expected from misoprostol treatment?

- A. Peptic ulcer
- B. Drowsiness
- C. Hypertension
- D. Diarrhea**
- E. Increased intraocular pressure

Side Effect :- Abdominal Pain
- diarrhea
- Vaginal bleeding
- Uterine hyperstimulation
- Uterin Rupture

Explain your answer

1 Increases smooth muscle contraction.

Q18*

A 54-year-old man complained to his physician that the alprostadil he was using before intercourse was able to improve his erectile dysfunction but caused penile pain.

Which of the following actions most likely mediated the adverse effect of the drug?

- A. Sensitization of substantia gelatinosa in the spinal cord
- B. Decreased firing of corticospinal projection to the dorsal horn
- C. Increased sensitivity of the brain periaqueductal area *
- D. Lowering threshold of nociceptive afferent neurons
- E. Increased sensitivity of the frontal cortex

Explain your answer

Q19

A 66-year-old man complained to his physician that he had urinated very little over the past 24 hours. The man was being treated with digoxin, furosemide, and captopril for congestive heart failure, and the therapy had improved his cardiac conditions. Two days ago, the patient had pain on movement of his left leg that got better with two ibuprofen tablets. The physician found no clinical signs of intravascular volume depletion and increased the dose of furosemide, but 6 hours later, urination was not improved.

Which of the following actions most likely mediated the patient's oliguria?

- A. Ibuprofen-mediated decrease of the glomerular filtration rate (GFR)
- B. Worsening of cardiac failure despite the therapy
- C. Furosemide-mediated decrease of renin secretion
- D. Digoxin-mediated decrease of the glomerular filtration rate
- E. Furosemide-induced hypokalemia

Explain your answer

⇒ electrolyte imbalance which results in less H₂O

removal.

Q20

A 48-year-old woman was brought to the emergency department because of serious breathing difficulty. Two hours earlier, she had taken a drug for a headache. The patient had been suffering from sinusitis and nasal polyps for 6 months. Physical examination showed severe bronchospasm.

Which of the following drugs most likely caused the patient's signs and symptoms?

[A] Metoclopramide [B] Paracetamol [C] Acetylsalicylic acid [D] Diphenhydramine [E] Cyproheptadine

Aspirine.

Explain your answer

Aspirine shunts the Arachidonic path from forming Prostaglandines to formation of leukotrienes which are potent Bronchoconstrictors
Aspirine exacerbated respiratory disease 06

Q21 *Aspirine Induced Asthma (As with all NSAIDs)*

A 65-year-old man had been recently diagnosed with osteoarthritis. Six months ago, the patient suffered from peptic ulcer disease that healed after triple anti-ulcer therapy.

Which of the following non-steroidal anti-inflammatory drugs would be most appropriate for this patient?

[A] Ibuprofen [B] Piroxicam [C] Indomethacin [D] Ketorolac **[E]**
Celecoxib [F] Aspirin

Explain your answer

*Because E is a selective COX 2 inhibitor
hence will not affect the normal function
of other cells but will inhibit COX
which is mostly implicated in infla-
mmation.*

Q22

A 6-year-old boy suffering from influenza received an anti-pyretic drug for 4 days. On the fifth day, he lapsed into a coma and died. The autopsy disclosed diffuse microvescicular fatty infiltration of the liver, heart, and kidneys, as well as cerebral edema.

Which of the following anti-pyretics most likely caused the patient's death?

[A] Paracetamol [B] Piroxicam [C] Ibuprofen [D] Indomethacin
[E] Ketorolac [F] Aspirin

Explain your answer

Q23

An 850g baby boy, prematurely born at 27 weeks' gestational age, was intubated immediately and placed on positive pressure assisted ventilation. On the third day of life, his nurse noticed that he had tachycardia and a widened pulse pressure. Color Doppler echocardiography showed reverse pulmonary artery flow in diastole. A treatment with intravenous Indomethacin was started.

Which of the following best explains the reason for that therapy?

- A. To speed up the maturation of the lungs
- B. To increase lung surfactant formation
- C. To decrease atrial contractility
- D. To prevent thrombi on cardiac valves
- E. To close the patent ductus arteriosus

Explain your answer

MECHA
: By blocking/prox
venting PGE product
which are implicated
in vasodilation, it
allows for vasocon
striction which aids
in Patent Ductus Arteriosus closure.

Q24

A 52-year-old woman recently diagnosed with mild rheumatoid arthritis started a therapy with non-steroidal anti-inflammatory drugs (NSAIDs), but 2 months later, the physician decided to add a disease-modifying anti-rheumatic drug (DMARD) to the therapeutic regimen.

Which of the following is most likely the main advantage of DMARDs over NSAIDs in the treatment of rheumatoid arthritis?

- A. To cause fewer adverse effects
- B. To slow down the progression of bone and cartilage destruction
- C. To improve symptoms after one week of therapy
- D. To completely cure the disease, after 2 to 4 months of therapy
- E. To completely abolish acute joint pain

Explain your answer

Q25

A 33-year-old man complained to his physician of low back pain and stiffness that were greatest on awakening in the morning and gradually improved throughout the day. The intermittent use of ibuprofen had been able to improve the symptoms in the past, but recently he had no relief. Magnetic resonance imaging confirmed the diagnosis of ankylosing spondylitis.

Which of the following drugs would be appropriate for the patient at this time?

[A] Hydroxychloroquine [B] Probenecid [C] Etanercept [D] Naproxen [E] Colchicine [F] Allopurinol

Explain your answer

Q26

A 50-year-old woman with rheumatoid arthritis was recently diagnosed with refractory disease, and infliximab was added to her ongoing treatment.

Which endogenous compound is most likely the molecular target of the drug?

Explain your answer

Q27

A 48-year-old man was admitted to the emergency department with the chief complaint of an excruciating pain in his left ankle. The pain had started the previous night and increased over several hours. The patient reported that he sprained his ankle 1 week ago. On physical examination, the ankle appeared warm and tender, and the entire area was red and swollen. A synovial fluid analysis showed crystals engulfed by phagocytes. A diagnosis was made, and a pharmacotherapy was prescribed.

Which of the following drugs would be most appropriate to treat the patient's pain?

[A] Codeine [B] Indomethacin [C] Methotrexate [D] Aspirin [E] Etanercept [F] Allopurinol

Explain your answer

Q28

A 55-year-old man recently diagnosed with hyper-uricemia started a treatment with allopurinol

Plasma levels of which of the following pairs of endogenous compounds most likely increased after a few days of therapy?

- A. Guanine and xanthine
- B. Xanthine and hypoxanthine
- C. Inosine and guanine
- D. Adenine and inosine
- E. Adenine and hypoxanthine

Explain your answer

Q29

A 44-year-old woman at a routine check-up was found to have a serum urate level of 18 mg/dL and a urine urate level of 800 mg/24 h. She started an appropriate treatment, and 3 weeks later her serum urate level was 7.2 mg/dL and urinary urate level was 530 mg/24 h.

Which of the following drugs did the patient most likely take?

[A] Probenecid [B] Aspirin [C] Furosemide [D] Allopurinol [E] Indomethacin [F] Naproxen

Explain your answer

Increase removal of urate from blood via urine

Q30

A 39-year-old woman complained to her physician of joint pain that had worsened over the past month. The pain was worse first in the morning and prevented her from performing her household tasks for at least an hour after waking. She tried ibuprofen three times daily for 2 weeks, but relief was poor, and she stopped the medication because of epigastric pain. The woman was also suffering from chronic active hepatitis B, currently treated with lamivudine. On physical examination, the patient appeared uncomfortable with any movement. Her wrists, metacarpophalangeal joints, and knees showed bilaterally symmetrical swelling, tenderness, and warmth. Further exams confirmed the diagnosis, and a pharmacotherapy was prescribed.

Which of the following drugs would be appropriate for the patient at this time?

[A] Methotrexate [B] Aspirin [C] Etanercept [D] Piperacillin [E] Ciprofloxacin [F] Erythromycin

Explain your answer first line drug for acute gout
include nonselective NSAIDs.

Q31

A 32-year-old man diagnosed with rheumatoid arthritis had been taking methotrexate for 4 months. The disease was controlled initially, but the pain returned, and his rheumatologist decided to add a drug to the treatment regimen. The second drug is a recombinant fusion protein consisting of the extracellular portion of two tumor necrosis factor (TNF) receptor moieties.

Which of the following drugs was most likely prescribed?

[A] Infliximab [B] Etanercept [C] Leflunomide [D] Triamcinolone [E] Cyclosporin [F] Piroxicam

Explain your answer

Q32

A 55-year-old man complained to his physician of blurred vision, night blindness, light flashes, and photophobia. The man was diagnosed with mild rheumatoid arthritis 6 months ago and was taking a combination therapy that included a DMARD). Ophthalmoscopy disclosed a macular area of hyperpigmentation surrounded by a zone of hypopigmentation on the left retina.

Which of the following drugs most likely caused the patient's signs and symptoms?

- [A] Hydroxychloroquine [B] Etanercept [C] Methotrexate [D] Infliximab [E] Ibuprofen [F] Celecoxib

Explain your answer

Q33

A 55-year-old man complained to his physician that a rash had appeared the previous day on his thorax and legs. The patient was recently diagnosed with hyper-uricemia and had been receiving allopurinol for 2 weeks. The physician suspected the rash was due to the ongoing pharmacotherapy and decided to discontinue allopurinol and to start a treatment with probenecid.

The physician should advise the patient not to concurrently use which of the following drugs?

[A] Paracetamol [B] Hydroxychloroquine [C] Ibuprofen [D] Aspirin [E] Loratadine [F] Diphenhydramine

Explain your answer

Probenecid impairs secretion of Salicylate (Acetic) bases.

Q34

A 51-year-old woman complained to her physician of fatigue and shortness of breath. The woman, who was vegetarian, realized she had recently developed an unexplained desire to eat ice and also noted that her stools had become dark. She had been receiving piroxicam for 6 months to treat her rheumatoid arthritis. Physical examination was unremarkable.

Which of the following disorders most likely caused the patient's symptoms?

- A. Iron deficiency anemia
- B. Respiratory alkalosis
- C. Reye syndrome
- D. Analgesic nephropathy
- E. Aspirin hypersensitivity

Explain your answer

Q35

A 58-year-old man complained to his physician of morning stiffness in the hip and knee and some joint stiffness after inactivity. Past medical history of the patient was significant for a myocardial infarction 6 months earlier. Further exams led to the diagnosis of osteoarthritis, and an analgesic pharmacotherapy was prescribed.

Which of the following analgesic drugs would be contraindicated for this patient?

- [A] Ibuprofen [B] Piroxicam [C] Celecoxib [D] Paracetamol
[E] Diclofenac

Explain your answer

Q36

A 28-year-old man was admitted to the emergency department because of persistent nausea and vomiting, general malaise, and diaphoresis for the past 6 hours. The man had been over-treating himself for 4 days with an analgesic medication to relieve severe pain from a neck injury. Two days earlier, he had gotten drunk at a party. Physical exam showed a slightly confused and dehydrated patient with icterus and a flapping tremor. Pertinent lab results on admission were alanine aminotransferase 300 U/L (normal 8–20 U/L), aspartate aminotransferase 480 U/L (normal 8–20 U/L).

The patient had most likely taken an excessive dose of which of the following drugs?

[A] Aspirin [B] Indomethacin [C] Paracetamol [D] Ibuprofen [E] Ketorolac

Explain your answer

Q37

A 42-year-old woman had been recovering from breast cancer surgery. Because her post-operative pain was severe, she received an intravenous injection of ketorolac that was able to reduce the pain.

Which of the following molecular actions most likely mediated the analgesic effect of the drug?

- A. Drug binding to prostaglandin receptors in the surgical area
- B. Decreased concentration of prostaglandins in the surgical area
- C. Decreased oxygen radical production in the surgical area
- D. Inhibition of prostaglandin biosynthesis in the central nervous system
- E. Lowering of anxiety, fear, and suffering evoked by pain

Explain your answer

Q38

A 54-year-old man presented to the emergency department with nausea, headache, dizziness, tinnitus, difficulty in hearing, and sweating. His body temperature was 39.5°C. The patient was suffering from osteoarthritis and had been over-treating him self with aspirin for 4 days in an attempt to relieve severe pain in his right hip.

Which of the following actions most likely mediated the drug-induced hyperthermia in this patient?

- A. Resetting the hypothalamic thermostat
- B. inflammatory reaction in the joints
- C. Increased release of interleukin-10
- D. Uncoupling oxidative phosphorylation in skeletal muscle
- E. Metabolic alkalosis

Explain your answer

Q39

A 14-year-old girl was seen in the clinic because of severe abdominal pain secondary to her menstrual periods. The pain began with the onset of her menstrual flow and had occurred monthly since her first menstrual period at age 13. Her physical examination was unremarkable. A diagnosis of primary dysmenorrhea was made.

Which of the following drugs would be most appropriate for this patient?

[A] Paracetamol [B] Misoprostol [C] Dinoprostone [D] Ibuprofen [E] Cyproheptadine

Explain your answer

Q40

A 35-year-old woman at 24 weeks gestation was admitted to the obstetrical unit because of signs of severe fetal distress. Fetal death was diagnosed on admission, and induction of labor was planned. An oxytocin drip was initiated, and a vaginal suppository was inserted.

Which of the following drugs was most likely given intra-vaginally?

[A] Indomethacin [B] Salbutamol [C] Epoprostenol
[D] Ergometrine [E] Dinoprostone

Explain your answer

Q41

A 59-year-old woman complained to her physician of persistent heartburn. She had been taking ibuprofen for osteoarthritis of the right hip for the past 2 months. She refused to stop the medication, which she said was very good for her pain. The physician prescribed another drug, to be taken together with ibuprofen, to prevent peptic ulcer formation.

Which of the following actions most likely contributed to the preventive effect of the prescribed drug?

- A. Binding to necrotic ulcer tissue, acting as a barrier for acid and pepsin
- B. Blockade of muscarinic M_3 receptors on gastric parietal cells
- C. Blockade of gastrin receptors on gastric parietal cells
- D. Stimulation of bicarbonate and mucus secretion by superficial epithelial cells
- E. Bactericidal effect against *Helicobacter pylori*

Explain your answer

Q42

A 53-year-old man presented to the clinic complaining of itching, flushing, arthralgia, heartburn, and diarrhea. Further exams led to the diagnosis of systemic mastocytosis.

Which of the following pairs of drugs should be included in the therapeutic treatment of this patient?

- A. Aspirin and ergotamine
- B. Misoprostol and ergotamine
- C. Loratadine and famotidine
- D. Loratadine and diphenhydramine
- E. Aspirin and famotidine

Explain your answer

Q43

A 42-year-old man was seen in the clinic with general malaise, fever, cough, and dyspnea. Further exams led to the diagnosis of acute bronchitis.

Which of the following enzymes was primarily involved in the patient's inflammatory disease?

- A. Creatinine kinase
- B. Cyclooxygenase-2
- C. 5-lipoxygenase
- D. Lactic dehydrogenase
- E. 12-lipoxygenase
- F. Cyclooxygenase-1

Explain your answer

Q44

A 32-year-old man suffering from hemophilia had been recently diagnosed with tension headache. The headaches occurred two to four times weekly, usually toward the end of his workday. The pain was constant, dull in character, and usually lasted the rest of the day with variable intensity.

Which of the following analgesic drugs would be appropriate for this patient?

[A] Indomethacin [B] Paracetamol [C] Aspirin [D] Ketorolac
[E] Piroxicam [F] Naproxen

Explain your answer

Q45

A 20-year-old man, diagnosed with acute rheumatic fever, started high-dose salicylate treatment. A few days later, laboratory values indicated increased blood pH, decreased PaCO₂, and decreased plasma bicarbonate content.

Which of the following acid–base disturbances was most likely caused by salicylate treatment?

- A. Respiratory acidosis
- B. Respiratory alkalosis
- C. Metabolic acidosis
- D. Metabolic alkalosis
- E. Mixed acidosis

Explain your answer

Q46

A 60-year-old man recently diagnosed with osteoarthritis asked his physician for an analgesic drug because of intermittent pain in both hips. Past history of the patient was significant for myocardial infarction 2 years ago and for pronounced aspirin hypersensitivity.

Which of the following would be the best advice to give to this patient at this time?

- A. To use a propionic acid derivative like naproxen
- B. To take only very low doses of aspirin
- C. To take aspirin with misoprostol
- D. To use indomethacin
- E. To avoid all non-steroidal anti-inflammatory drugs

Explain your answer

Q47

A 58-year-old man complained to his physician of dull, continuous bone pain that had been increasing over the past few days. The patient had been suffering from prostatic carcinoma for 2 years. Past history was significant for an episode of hemolytic anemia, ascribed to his congenital glucose-6-phosphate dehydrogenase (G6PD) deficiency, and for erythema multiforme, apparently due to an allergic reaction to naproxen.

Which of the following would be an appropriate analgesic drug for this patient?

[A] Aspirin [B] Paracetamol [C] Piroxicam [D] Ibuprofen [E] Amitriptyline

Explain your answer

Q48

Explain the pharmacological basis for the use of cyproheptadine in the management of carcinoid syndrome

Q49

Which prostanoids are mainly involved in vascular responses and haemostatic mechanisms and what are their actions?

Q50

Indicate whether the following statement is TRUE or FALSE. Explain your answer

Combined therapy with gold preparations and penicillamine is advantageous in rheumatoid disease since their actions are synergistic

END