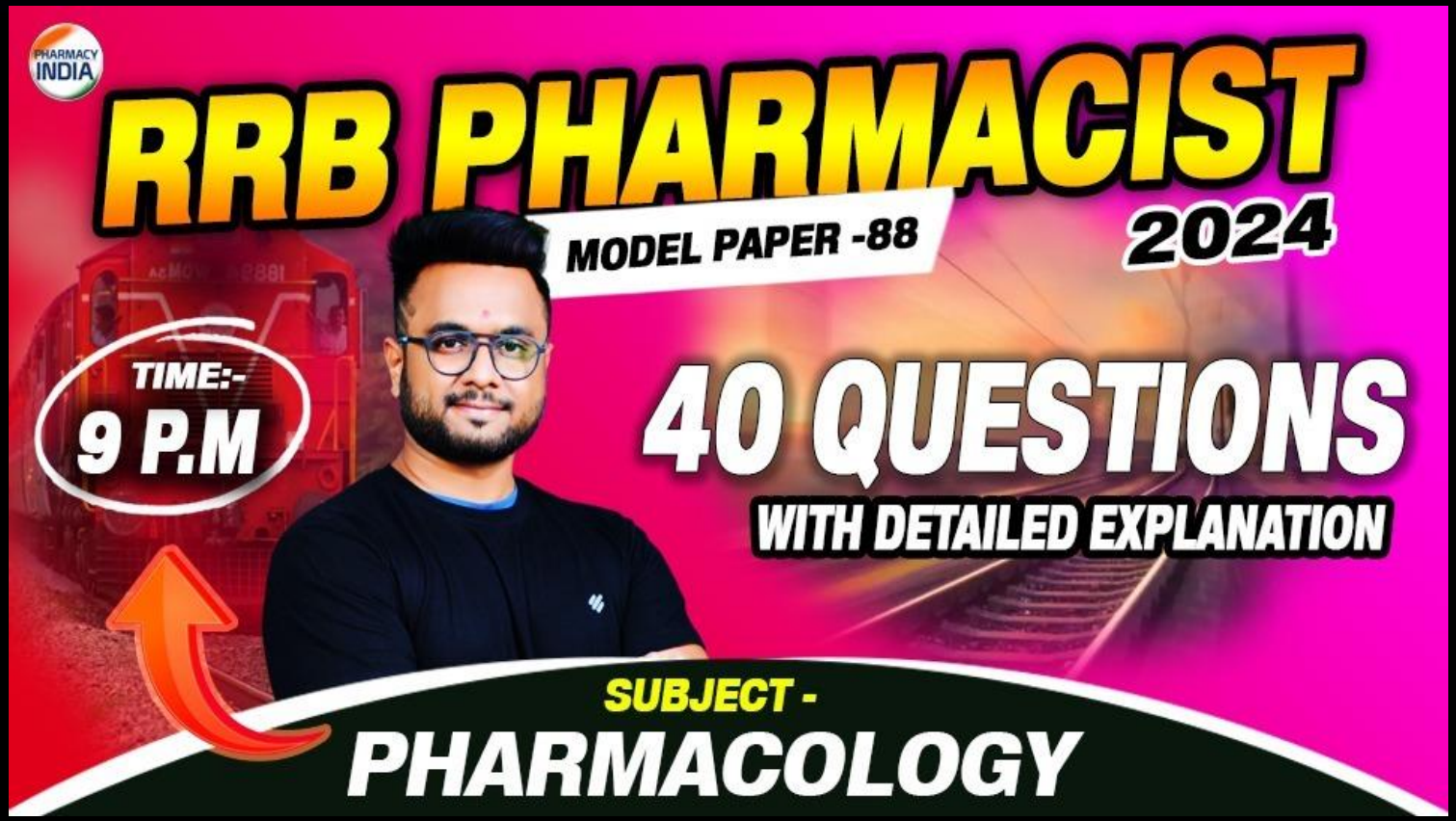

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WhatsApp

1. The "Saheli" oral contraceptive contains

(a) Non-steroidal compound
(b) Estrogen
(c) Estrogen and progestin
(d) None of these

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(a) Non-steroidal compound

(b) Estrogen

(c) Estrogen and progestin

(d) None of these

"Saheli" oral contraceptive contains

Correct answer: (a) Non-steroidal compound

Explanation: Saheli contains centchroman, a non-steroidal oral contraceptive that works by selectively blocking estrogen receptors in the uterus.

2. Tocolytics are drugs which are used for

(a) Uterine stimulants
(b) Bronchodilation
(c) Uterine relaxants
(d) Bronchoconstrictor

2. Tocolytics are drugs which are used for

(a) Uterine stimulants

(b) Bronchodilation

(c) Uterine relaxants

(d) Bronchoconstrictor

Explanation: Tocolytics are medications that relax the uterus and are used to prevent premature labor.

3. Most common oestrogen, progesterone preparations used as oral contraceptive agents

(a) Estrone + Progesterone
(b) Methanol + Progesterone
(c) Diethylstilbesterol + Norgesterol
(d) Ethinyl Estradiol + Norethindrone

3. Most common oestrogen, progesterone preparations used as oral contraceptive agents

(a) Estrone + Progesterone

(b) Methanol + Progesterone

(c) Diethylstilbesterol + Norgesterol

(d) Ethinyl Estradiol + Norethindrone

Explanation: These two hormones are commonly combined in birth control pills for effective contraception.

4. Anti-estrogen infertility used for the treatment of infertility

(a) Tamoxifen
(b) Ibuprofen
(c) Naproxen P-2)
(d) Clomiphene

4. Anti-estrogen infertility used for the treatment of infertility

(a) Tamoxifen

(b) Ibuprofen

(c) Naproxen P-2)

(d) Clomiphene

Explanation: Clomiphene is an anti-estrogen that stimulates ovulation, often used in fertility treatments.

5. Alcohol present in the Sphingolipid

(a) Sphingosine
(b) Sphinganine
(c)Sphingomyelin
(d) Ceramide

5. Alcohol present in the Sphingolipid

(a) Sphingosine

(b) Sphinganine

(c)Sphingomyelin

(d) Ceramide

Explanation: Sphingosine is the alcohol component of sphingolipids, essential for their structure.

6. Sildenafil acts by inhibiting

(a) PDE-1

(b) PDE-5

(c) PDE-2

(d) PDE-9

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(a) PDE-1

(b) PDE-5

(c) PDE-2

(d) PDE-9

7. Which one of the followings is the most likely positive sign of pregnancy when detected in urine

(a) Estrogens
(b) Progesterone
(c) Human Chorionic Gonadotropin (HCG)
(d) Corticotropic Hormone

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(a) Estrogens

(b) Progesterone

(c) Human Chorionic Gonadotropin (HCG)

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8. Decreased parathormone secretion result in

(a) Tetany
(b) ADH Deficiency
(c) Excess Carbohydrate Intake
(d) Acromegaly

8. Decreased parathormone secretion result in

(a) Tetany

(b) ADH Deficiency

(c) Excess Carbohydrate Intake

(d) Acromegaly

Explanation: Reduced secretion of parathormone causes calcium levels to drop, leading to muscle tetany

Muscle tetany is a condition that causes involuntary muscle contractions, spasms, and tingling sensations due to an imbalance of electrolytes in the body

9. Combined pills contain

(a) Oestrogen
(b) Progesterone
(c) Oestrogen + progesterone
(d) None of these

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(a) Oestrogen

(b) Progesterone

(c) Oestrogen + progesterone

(d) None of these

10. Which of the following glucocorticoids is a long-acting drug

(a) Prednisolone
(b) Dexamethasone
(c) Triamcinolone
(d) All of these

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11. Mini Pill contains

(a) Estrogen
(b) Non-Hormonal Contents
(c) Progesterone
(d) Estrogen and Progesterone

11. Mini Pill contains

(a) Estrogen

(b) Non-Hormonal Contents

(c) Progesterone

(d) Estrogen and Progesterone

Explanation: The mini-pill is a type of contraceptive pill that contains only progesterone, unlike combined pills that have both estrogen and progesterone.

12. The drugs which have stimulant effects on the motility of the uterus are known as

(a)Oxytocics
(b) Diuretics
(c) Carminatives
(d) Laxatives

12. The drugs which have stimulant effects on the motility of the uterus are known as

(a) Oxytocics

(b) Diuretics

(c) Carminatives

(d) Laxatives

13. Which drug may be used for stimulating uterine contractions

(a) Meprobamate
(b) Ketoconazole
(c) Oxytocin
(d) Metoprolol

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(c) Oxytocin
(d) Metoprolol

14. Uterine relaxants are also known as

(a) Ecbolic
(b) Tocolytics
(c) Abortifacients
(d) Analeptics

14. Uterine relaxants are also known as

(a) Ecbolic

(b) Tocolytics

(c) Abortifacients

(d) Analeptics

15. Oxytocin is the hormone released from

(a) Anterior lobe of pituitary
(b) Pars intermedia
(c) Posterior lobe of pituitary
(d) Infundibulum

15. Oxytocin is the hormone released from

(a) Anterior lobe of pituitary

(b) Pars intermedia

(c) Posterior lobe of pituitary

(d) Infundibulum

16. Which of the following may cause female infertility

(a) Gonorrhea
(b) Chlamydia infection
(c) Prolonged use of contraceptives
(d) All of these

16. Which of the following may cause female infertility

(a) Gonorrhea
(b) Chlamydia infection
(c) Prolonged use of contraceptives
(d) All of these

17. Long term use of Glucocorticoids induces

(a) Hypotension
(b) Hepatotoxicity
(c) Osteoporosis
(d) Bradycardia infertility

17. Long term use of Glucocorticoids induces

(a) Hypotension

(b) Hepatotoxicity

(c) Osteoporosis

(d) Bradycardia infertility

Explanation: Chronic use of glucocorticoids can lead to osteoporosis by reducing bone density and strength.

18. Which of the following is an oxytocin antagonist

(a) Ritodrine
(b) Atosiban
(c) Isoxsuprine
(d) Methergine

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(a) Ritodrine

(b) Atosiban

(c) Isoxsuprine

(d) Methergine

19. Drug used in uterine inertia

(a) Tyrothricin
(b) Terbinafine
(c) Oxytocin
(d) Miconazole

19. Drug used in uterine inertia

(a) Tyrothricin

(b) Terbinafine

(c) Oxytocin

(d) Miconazole

Explanation: Oxytocin is used to treat uterine inertia by inducing or enhancing uterine contractions during labor.

20. Osteoporosis is a disease at a greater risk in people

(a) Women after menopause
(b) People with deficiency of iron and B complex
(c) People on corticosteroid therapy for a short time
(d) Old age

20. Osteoporosis is a disease at a greater risk in people

(a) Women after menopause

(b) People with deficiency of iron and B complex

(c) People on corticosteroid therapy for a short time

(d) Old age

Explanation: Women after menopause are at a higher risk for osteoporosis due to a decrease in estrogen, which helps maintain bone density.

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21. Which of the following minerals form bones and teeth

(a) Calcium and Phosphorous
(b) Potassium and Calcium
(c) Sulphur and Iron
(d) Phosphorous and Iron

21. Which of the following minerals form bones and teeth

(a) Calcium and Phosphorous

(b) Potassium and Calcium

(c) Sulphur and Iron

(d) Phosphorous and Iron

22. Bone deformations can occur due to lack of
(a) Calcium
(b) Phosphorus
(c) Vitamin D
(d) All of these

22. Bone deformations can occur due to lack of

(a) Calcium

(b) Phosphorus

(c) Vitamin D

(d) All of these

23. Which drugs cause osteoporosis on long-term use

(a) Estrogen
(b) Progesterone
(c) GnRH analogues
(d) Warfarin

23. Which drugs cause osteoporosis on long-term use

(a) Estrogen

(b) Progesterone

(c) GnRH analogues

(d) Warfarin

24. Identify the Vitamin resembling a Hormone

(a) Vitamin A
(b) Vitamin B5
(c) Vitamin B6
(d) Vitamin D

24. Identify the Vitamin resembling a Hormone

(a) Vitamin A

(b) Vitamin B5

(c) Vitamin B6

(d) Vitamin D

Explanation: Vitamin D acts like a hormone in the body, playing a critical role in calcium absorption and bone health

25. Plasma sodium electrolyte disturbances can be caused by

(a) Bromhexine
(b) Propranolol
(c) Prednisolone
(d) Salbutamol

25. Plasma sodium electrolyte disturbances can be caused by

(a) Bromhexine

(b) Propranolol

(c) Prednisolone

(d) Salbutamol

Explanation: Prednisolone, a corticosteroid, can cause disturbances in electrolyte balance, including sodium levels.

26. CORRECT statement for Peripheral nervous system is

(a) Afferent nerve fibers convey nerve impulse carrying 'output from the brain to effector organs

(b) Motor nerve fibers provide the brain with 'input' from organs and tissues.

(c) Motor nerve fibers convey nerve impulse carrying 'output' from the brain to effector organs

(d) Sensory nerve fibers convey nerve impulse carrying 'output' from the brain to effector organs

26. CORRECT statement for Peripheral nervous system is

(a) Afferent nerve fibers convey nerve impulse carrying 'output from the brain to effector organs

(b) Motor nerve fibers provide the brain with 'input' from organs and tissues.

(c) Motor nerve fibers convey nerve impulse carrying 'output' from the brain to effector organs

(d) Sensory nerve fibers convey nerve impulse carrying 'output' from the brain to effector organs

27. d-Tubocurarine produces skeletal muscle relaxation by inhibiting

(a) Nicotinic receptors in neuromuscular junctions
(b) Ganglionic nicotinic receptors
(c) Alpha adrenergic receptors
(d) Muscarinic receptors

27. d-Tubocurarine produces skeletal muscle relaxation by inhibiting

(a) Nicotinic receptors in neuromuscular junctions

(b) Ganglionic nicotinic receptors

(c) Alpha adrenergic receptors

(d) Muscarinic receptors

Explanation: d-Tubocurarine is a non-depolarizing neuromuscular blocker that inhibits nicotinic receptors at the neuromuscular junction, causing muscle relaxation.

28. An example of skeletal muscle relaxant drug directly acting on muscle is

(a) Chlormezanone
(b) Succinylcholine
(c) Guanethidine
(d) Dantrolene

28. An example of skeletal muscle relaxant drug directly acting on muscle is

(a) Chlormezanone

(b) Succinylcholine

(c) Guanethidine

(d) Dantrolene

Dantrolene is a skeletal muscle relaxant that acts directly on muscle by interfering with calcium release from the sarcoplasmic reticulum.

29. Centrally acting muscle relaxant

(a) Halothane
(b) d-Tubocurarine
(c) Mephenesin
(d) Succinyl choline

29. Centrally acting muscle relaxant

(a) Halothane

(b) d-Tubocurarine

(c) Mephenesin

(d) Succinyl choline

Explanation: Mephenesin is a centrally acting muscle relaxant, meaning it works on the central nervous system to relieve muscle spasms.

30. The skeletal muscle relaxant causing significant release of histamine is

(a) Pancuronium
(b) Atracurium
(c) Gallamine
(d) d-Tubocurarine

30. The skeletal muscle relaxant causing significant release of histamine is

(a) Pancuronium
(b) Atracurium
(c) Gallamine
(d) d-Tubocurarine

Explanation: d-Tubocurarine can cause the release of histamine, leading to side effects such as hypotension and bronchoconstriction.

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31. Which of the following is a peripheral acting muscle relaxant

(a) Baclofen
(b) Methocarbamol
(c) Dantrolene
(d) Tizanidine

31. Which of the following is a peripheral acting muscle relaxant

(a) Baclofen

(b) Methocarbamol

(c) Dantrolene

(d) Tizanidine

Dantrolene works directly on skeletal muscles by inhibiting calcium release, making it a peripheral muscle relaxant.

32. Which of the following drugs is used as a neuromuscular blocking agent

(a) Methocarbamol
(b) Succinylcholine
(c) Tizanidine
(d) Baclofen

32. Which of the following drugs is used as a neuromuscular blocking agent

(a) Methocarbamol

(b) Succinylcholine

(c) Tizanidine

(d) Baclofen

33. Among the peripherally acting muscle relaxants, Which of the following is depolarizing blocker

(a) Pipecuronium
(b) Pancuronium
(c) Suxamethonium
(d) Atracurium

33. Among the peripherally acting muscle relaxants, depolarizing blocker Which of the following

(a) Pipecuronium

(b) Pancuronium

(c) Suxamethonium

(d) Atracurium

34. Drugs acting directly on the skeletal muscle

(a) Succinyl choline
(b) Tubocurarine
(c) Gallamine
(d) Dantrolene

34. Drugs acting directly on the skeletal muscle

(a) Succinyl choline

(b) Tubocurarine

(c) Gallamine

(d) Dantrolene

35. d-Tubocurarine is a

(a) Neuromuscular blocking agent
(b) Anticholinesterase
(c) Anaesthetic
(d) Neuro degenerative agent

35. d-Tubocurarine is a

(a) Neuromuscular blocking agent

(b) Anticholinesterase

(c) Anaesthetic

(d) Neuro degenerative agent

36. Indicate the skeletal muscle relaxant, which is a depolarizing agent

(a) Vencuronium
(b) Scopolamine
(c) Succinylcholine
(d) Hexamethonium

36. Indicate the skeletal muscle relaxant, which is a depolarizing agent

(a) Vencuronium
(b) Scopolamine
(c) Succinylcholine
(d) Hexamethonium

37. Drug with greater affinity for AAG (Alpha-1 Acid Glycoprotein) than HAS (Human Serum Albumin)

(a) Metformin
(b) Lidocaine
(c) Digoxin
(d) Lophenoxic acid

37. The drug with greater affinity for AAG than for HAS is

(a) Metformin

(b) Lidocaine

(c) Digoxin

(d) Lophenoxic acid

Lidocaine has a higher binding affinity for alpha-1 acid glycoprotein compared to human serum albumin, influencing its pharmacokinetics.

38. Epinephrine is added to local Anaesthetics to

(a) Cause hemostasis
(b) Prolong the action of the drug
(c) Stimulate healing of wound
(d) Decrease side effects

38. Epinephrine is added to local Anaesthetics to

(a) Cause hemostasis

(b) Prolong the action of the drug

(c) Stimulate healing of wound

(d) Decrease side effects

39. Example for amide type local anaesthetic

(a) Cocaine
(b) Benzocaine
(c) Lignocaine
(d) Procaine

39. Example for amide type local anaesthetic

(a) Cocaine

(b) Benzocaine

(c) Lignocaine

(d) Procaine

40. Local anaesthetic used in-the management of arrhythmia is

(a) Procaine
(b) Benzocaine
(c) Lidocaine
(d) Ketamine

40. Local anaesthetic used in-the management of arrhythmia is

(a) Procaine
(b) Benzocaine
(c) Lidocaine
(d) Ketamine

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