

i) Minimal CNS effects
 ii) No anti-curculatory property
 iii) No muscle relaxant property
 iv) Tolerance development is minimal
 v) Safe in pregnancy
 vi) Withdrawal symptoms minimal

Dismerit
 i) Slow onset of action
 ii) less effective in panic disorder

i) Benzodiazepene inc frequency whereas barbiturates inc duration
 ii) Benzodiazepene binds to GABA_A b/w ds & gamma 2 subunit
 Barbiturates bind to GABA_A other than the site of barbiturates

PHARMACOLOGY TEST

SHORT ESSAY QUESTIONS(CNS)

Max Marks: 35

Time allowed: 1 hour 15 min

- Q1.** a) Enumerate Benzodiazepines. How does Benzodiazepines differs from Barbiturates. 1+3
 b) Write down the merits and demerits of Buspirone. → Q193K 2
- Q2.** a) Give Mechanism of action and Clinical uses of Valproic acid. → 2P7K 3
 b) Describe the Pharmacokinetics and Adverse effects of Phenytoin. 2+2
- Q3.** Define following terms with examples:
 a) Minimum alveolar concentration. → 209
 b) Diffusional hypoxia. ✓ 5
 c) Malignant hyperthermia.
 d) Neuroleptanaesthesia
 e) Dissociative anaesthesia 1
 4
- Q4.** a) Enumerate Intravenous Anaesthetics
 b) Describe the advantages and disadvantages of following drugs as General Anaesthetic
 i) Nitrous oxide. → 2nd ppr 3
 ii) Propofol 1
- Q5.** a) Classify Antidepressants. → 244
 b) Explain the result of concurrent administration of Fluoxetine(SSRI) with Phenelzine (MAO inhibitor). → 248 serotonin syndrome 2
 c) Write down the Mechanism of action of Imipramine (Tricyclic Antidepressant). 4
- Q6.** a) Tabulate the differences between typical and atypical antipsychotics.
 b) Explain why regular monitoring of blood count is required during clozapine therapy. 1
 c) Enumerate drugs used in the treatment of Status epilepticus. 1
 ↓
 ↓ Blood dyscrasia
 ↓ Agranulocytosis

Ketamine

Ketamine 2C

Propofol

Thiopental
midazolam

Diazepam
Lorazepam
Phenytin

NAFEES ISHAQ
MBBS FIG-074

QNO 2 (A): VALPROIC ACID → Pg 207

MOA: Block Na channel, cause blockade of GABA-T, act on T type Ca⁺⁺ channel. These varied mechanism provide broad spectrum against seizures.

USES: i) Generalized tonic clonic, myoclonic & partial seizures

Adverse effects

Nausea, weight gain, Alopecia, Teratogenic

QNO 2 (B): PHENYTOIN

MOA: Block voltage gated Na channel in inactive state & slow rate of recovery

USES: Tonic clonic, partial seizure

Adverse effect: Ataxia, diplopia, Neuropathy, hyperplasia, excessive hair growth

Paracetamol: Variable absorption

- (iii) Bind to plasma protein
- (iv) If a drug which have more affinity for plasma protein comes in the body, replace it & as a result phenyldn concentration inc in plasma.
- (v) Metabolism of phenylalanine is inc in presence of inducer of liver metabolism.

Q No 3 (A): Minimum Alveolar concentration:- The alveolar conc. of an inhaled anesthetic that is required to prevent a response to a standardized painful stimulus in 50% of patient e.g.: Halothane 0.75% MAC, NO methyl

(ii) Diffusion hypoxia:- NO absorbed during anesthesia has to be excreted during recovery as it is very insoluble in blood, it rapidly diffuses down a conc. gradient into alveoli where it reduces partial pressure of O₂ in alveoli making patient hypoxic.

SHORT ESSAY QUESTIONS

FIRST TERM TEST OF PHARMACOLOGY

Time Allowed: 2 hours

Max Marks: 55

Q1) Define following terms with example of each:

i) Bioavailability ii) Zero order kinetics iii) Tolerance 1.5+1.5+1.5

b) Describe factors affecting absorption of drugs. 2.5

c) What is the clinical significance of Volume of Distribution of Drugs? 2

D2) Give detail of pharmacological antagonism with its subtypes. 3

D3) Enumerate different types of receptors with examples. 4

D3. Write down the adverse effects and clinical uses of following drugs:

i) Atropine ii) Propranolol 4+4

Q4a) Enumerate indirectly acting cholinergic agonists. 2

b) Classify adrenergic antagonists on the basis of receptor selectivity. 3

c) What is Epinephrine Reversal Phenomenon. 1

Q5a) Classify antihypertensive drugs. 2.5

b) Give Mechanism of Action of Captopril. 2

c) Describe pharmacological effects of digoxin on cardiovascular system? 2.5

Q6a) Enumerate antianginal drugs. 2

b) What is mechanism of action of nitrates? 2

c) Describe the adverse effects of calcium channel blockers. 2

Q7a) Give classification of Antiarrhythmic drugs. 4

b) Enumerate various adverse effects of Amiodarone? 1.5

c) Write down the Mechanism of action of Quinidine 1.5

Q8. Compare and contrast loop diuretics with thiazide diuretics in terms of

Mechanism of Action, Adverse Effects and Clinical Indications. 5

(B) Atropine:

MOA: Antagonist at all M receptor

Clinical uses: Mydriatic, cycloplegic, Antidote for cholinesterase, Antispasmodic
Adverse effect: blurred vision, dry mouth, tachycardia, constipation, urinary retention
contraindication: Glaucoma, Prosthetic hyperplasia.

treats the
G1 tract
& bladder

10³

Adrenoceptors:

At low dose it cause bradycardia & at high dose causes tachycardia

DEPARTMENT OF PHARMACOLOGY

TEST PHARMACODYNAMICS (SEQ's)

ALLOWED: 50MIN

TOTAL MARKS: 35

1. ✓ Give different types of receptors?
 2. ✓ Explain G protein coupled signaling receptor?
 3. ✓ Give difference between tolerance and Tachyphylaxis?
 4. ✓ Enumerate factor effecting dose of drugs?
 5. ✓ Compare and contrast between graded and quantal dose response curve?
 6. ✓ Explain therapeutic index with examples?
 7. ✓ Give detail of pharmacological antagonism with example?
 8. ✓ Explain Pharmacogenetics with example?
5. Write short notes on:
- a. Spare Receptors
 - b. Partial Receptors *agonist*

NAFEE'S

- ✓ Enumerate clinical uses & adverse effects of Ciprofloxacin 397 K
✓ Give the drug options for the treatment of hypnozite stage of Malaria 431 K
- 12 a) Enumerate NSAIDS(COX-1 & COX-2 Inhibitors)
✓ Describe the pharmacological actions of Aspirin
13. Classify Oral Antidiabetic drugs? Discuss Mechanism of action of Sulfonylurea
14. ✓ Enumerate drugs used in the treatment of CCF
✓ Give mechanism of action & uses of Methotrexate.
- 15 a) Write down the mechanism of action of:
✓ Digoxin.
ii. Salbutamol

- Q10 a) Classify Penicillins **4**
 b) Give clinical uses and adverse effects of Floroquinolones **2**
- Q11 a) Enumerate Anti Parkinsonian drugs **2**
 b) Give clinical uses and side effects of Levodopa **CNS + H. + 1** **1**
- Q12 a) Enumerate NSAIDS(COX-1 & COX-2 Inhibitors) **2**
 b) Give mechanism of action of Isoniazid **2**
- Q13 a) ~~Moa of Thioephylamine~~ **2**
 b) Describe the mechanism of action of Local Anesthetics **3**
- Q14 a) Enumerate Four Benzodiazepines **2**
 b) Give Clinical uses of Morphine. **+ 1**
- Q15 Write down the mechanism of action of Digoxin and treatment of its toxicity **4**

*** SHORT ESSAY QUESTIONS ***
FIRST TERM TEST OF PHARMACOLOGY

Time Allowed: 2 hours

Q1.a) Define following terms with example of each:

Max Marks: 5

i) Bioavailability ii) Zero order kinetics iii) Tolerance

1.5+1.5+1.5

b) Describe factors affecting absorption of drugs.

2.5

c) What is the clinical significance of Volume of Distribution of Drugs?

2

d) a) Give detail of pharmacological antagonist with its subtypes.

3

b) Enumerate different types of receptors with examples.

4

Q3. Write down the adverse effects and clinical uses of following drugs:

i) Atropine

ii) Propranolol

4+4

Q4.a) Enumerate indirectly acting cholinergic agonists.

1

b) Classify adrenergic antagonists on the basis of receptor selectivity.

3

c) What is Epinephrine Reversal Phenomenon.

1

→ Q5.a) Classify antihypertensive drugs. K 102, 104

2.5

→ b) Give Mechanism of Action of Captopril. K 102, 107

2

→ c) Describe pharmacological effects of digoxin on cardiovascular system? K 108, 111

2.5

Q6.a) Enumerate antianginal drugs. K 103, 111

2

→ b) What is mechanism of action of nitrates? K 105

2

→ c) Describe the adverse effects of calcium channel blockers. K 108, 111

2

Q7.a) Give classification of Antiarrhythmic drugs. K 121, 130

2

→ b) Enumerate various adverse effects of Amiodarone? K 126, 131

2

→ c) Write down the Mechanism of action of Quinidine. K 125, 130

2

Q8. Compare and contrast loop diuretics with thiazide diuretics in terms of

5

Mechanism of Action, Adverse Effects and Clinical Indications. K 126, 131

Slack

Pharmacology & Therapeutics

Time Allowed: 1hr 10 Min

SEQ's Type

Total Marks: 70

- 1) a. Define bioavailability. Give three factors influencing bioavailability? ✓ 4
b. What is drug allergy? Give drug treatment of Anaphylactic shock? ? DDDDS-NS 3
c. What is therapeutic index? Give its clinical significance? ✓ 3
- 2) a. What is the difference between tolerance and drug dependence? ✓ 2
b. Write short notes on:
i. Physiological antagonisms ✓ ii. Tachyphylaxis ✓
iii. Active principle of drugs ✓ iv. Merits of intravenous route ✓ 2+2+2+2
- 3) a. Classify beta blockers according to receptor selectivity. 3
b. Write five clinical uses of atropine. 3
c. Enumerate drugs used for treatment of benign prostatic hyperplasia? 4
- 4) a. Enumerate drugs for treatment of heart failure? 3
b. What are sign/ symptoms and treatment of digoxin toxicity? 2
c. Classify diuretics according to MOA with examples? 3
d. Enumerate adverse effects and two contraindications of captopril? 2
- 5) a. Enumerate drugs used for treatment of Epilepsy? 4
b. Explain MOA of Phenytoin? Write down their adverse effects? 3+3
3+3
- 6) a. Compare and contrast between halothane and nitrous oxide? 4
b. Explain dissociative anesthesia? 3
c. Enumerate drugs used in Preanesthetic medication? 4
- 7) a. What are therapeutic indications of thiopental? → clinical use 3+2
b. Explain their MOA? Give treatment of barbiturate poisoning? 2

Thiopental

TIME ALLOWED: 70MIN

- ✓ 1. Name Azole Anti fungal Agents. Give their Mechanism of Action & Toxicity. 2+2+3
 ✓ 2. Enumerate 1st & 2nd line drugs used in Tuberculosis. 3
 ✓ 3. Write down the Mechanism of Action & Adverse Effect of INH. 2+2
 ✓ 4. a) Classify drugs used in Amebiasis. 3
 b) Give Mechanism of Action and Toxic effect of Metronidazole. 2+2
 ✓ 5. a) Enumerate drugs used for Nematodes. What is the MOA of Albendazole? 3
 b) Discuss how bacterial resistance is produced against antimicrobial agents. 2+2+3
 ✓ 6. What is MOA, Clinical Uses and Toxicity of Chloroquine. 3+2+2
 ✓ 7. Classify Anti Cancer drugs. What are Uses and Adverse Effects of Methotrexate? 3+4
 ✓ 8. Write short note on:
 a) Interferon
 b) Immunosuppressants
 ✓ 9. Define Bioavailability? What are the factors Affecting the bioavailability of the drug. 1+3
 ✓ 10. What is zero order kinetics. Give its examples? 3
 ✓ 11. Define biotransformation. Enumerate phase II reactions of metabolism. 1+2
 ✓ 12. What is enzyme induction. Give examples. 4
 ✓ 13. What is a receptor? Give different types of receptors? 1+2
 ✓ 14. What is antagonism of the drug? Describe briefly pharmacological antagonism with examples. 1+3

HyperKalemia.
Apnea.

→ Graft pain following nerve damage (e.g. after surgery or by herpes zoster).
Gabapentin is also an anti convulsant.

Adverse effects of Succinylcholine

are:

1. HyperKalemia.
2. Muscle pain.
3. ↑ intragastric and intraocular pressure.

advantages of volatile liquids. (Non-irritating vapor).

- 1. Halothane: • pleasant odor (Non-irritating vapor).
advantages • effective bronchodilator.
- 2. Enflurane: • pleasant odor (Non-irritating vapor).

Disadvantages: Halothane:
• Slow induction and recovery
• CV and respiratory depression.
• High metabolism.
• Greater side effects.

Enflurane:

- CV and respiratory depression
- Significant metabolism.

DEPARTMENT OF PHARMACOLOGY
SEQ's (Pharmacodynamics)

Time Allowed: 60 mins

Max Marks: 30

Q1. Define following terms with examples of each:

a) Agonist

b) Inert binding site

c) Spare receptors

5

d) Potency

e) Therapeutic index

Fig 35

5

Q2. What is meant by the term Tolerance. briefly describe its mechanism

Ch. 10 pg 53

3

Q3. a) Enumerate various types of 2nd messengers

b) Briefly describe the signaling mechanism of G protein coupled receptors

4

Q4. In the presence of a full agonist, how a partial agonist acts as an antagonist? Explain.

a) Competitive Antagonism

b) Non competitive Antagonism

Q5. Explain the following with examples:

Fig 7.2

a) Define Drug Allergy. What are its manifestations.

Fig 7.5

b) Give drug treatment of anaphylactic shock.

Fig 7.1

phenobarbital

adrenergic

at alpha

adrenergic

Q-No: 9

Metronidazole, Iodoavinal, Diloxanide

- a) Enumerate drugs in treatment of Amoebiasis.
b) Explain mechanism of action of gentamycin.

} → 381K

2
3

Q-No: 10

- a) Enlist first line anti tuberculous drugs.
b) Explain mechanism of action of rafampin

} → 394K

3
2

Q-No: 11

- a) Enumerate clinical uses & adverse effects of Ciprofloxacins
b) Give the drug options for the treatment of hypnozoite stage of Malaria

383K

3
2

Q-No: 12

- a) Enlist drugs used for the treatment of asthma.
b) Explain mechanism of action of aminophylline.

176K
176K

3
2

Q-No: 13

- a) Write down the difference between aspirin and acetaminophen.
b) Enlist antiplatelet drugs.

276K + 286K

3
2

Q-No: 14

- a) Classify Antidepressant drugs.
b) Give clinical uses of Morphine

80 255K

Q-No: 15

- a) Enumerate drugs used in the treatment of CCF
b) Give mechanism of action & uses of Methotrexate

80
450K

3
2

Time Allowed: 1 hour

- ✓ 1. Enumerate indirectly acting cholinergic drugs. 4
 ✓ 2. Write down treatment of organophosphate poisoning. 3
 ✓ 3. Give therapeutic classification of anti cholinergic drugs. 3.5
 ✓ 4. Enumerate uses & adverse effect of Atropine. 3.5
 ✓ 5. a) Give difference between heparin and warfarin. 3.5
 b) Write down mechanism of action of Aspirin as antiplatelet drug. (3.5+3.5+3.5+3.5)
 ✓ 6. Write short notes on
 Pilocarpine ✓ Ganglion blockers ✓ Streptokinase ✓ Abciximab 5
 ✓ 7. a) Explain MOA of Statin 5
 b) Enumerate antihyperlipidemic drugs. 5
- ✓ 8. a) Enumerate their Adverse Effects? 4
 ✓ 9. a) Give bacterial spectrum of Macrolides? 2
 b. Describe Adverse Effects of Chloramphenicol & Sulfonamides? 5

NAFEG

HyperKalemia.
Apnea.

→ (sharp pain following nerve pain following herpes zoster) Gabapentin also an anti convulsant.

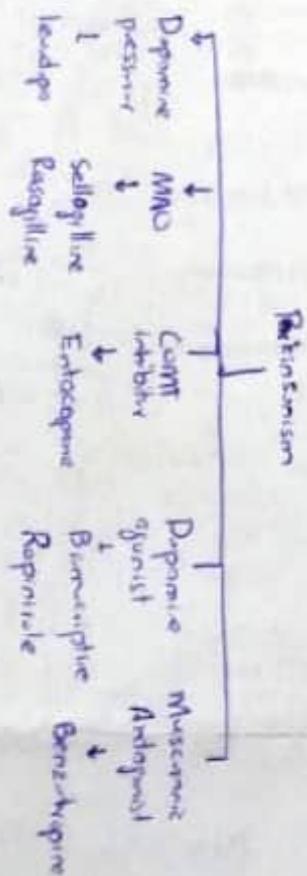
Adverse effects of succinylcholine

are:

1. HyperKalemia.
2. Muscle Pain.
3. ↑ intragastric and intraocular pressure.

Ques 3 (A)

- (i) Activated Charcoal is given
(ii) Gastric de-contamination
for Enhancement of urination.



2nd paper

NO

Advantages

(i) Non irritant

(ii) Speed induction & recovery

(iii) No nausea & vomiting

(iv) Very potent analgesic

(v) Non toxic to liver, kidney

Disadvantages

(i) Not potent alone

(ii) Hypnotic

(iii) Inhibit B12 metabolism

(iv) Abuser at risk

Nitrous oxide	Halothane
(i) It is a gas	Volatile liquid
(ii) Insoluble	Soluble
(iii) ↑ Blood pressure	↑ B-P
(iv) 100% MAC	0.75% MAC
(v) Weak Anesthetic	Potent Anesthetic
(vi) High partial pressure	low partial pressure

Ques 4 (A)

- (i) Barbiturates (thiopental)
(ii) Dissociative (Ketamine)
(iii) Opioid (Fentanyl)
(iv) Benzodiazepine (Midazolam)

(B)

HALOTHANE

Advantages

(i) Non inflammable

(ii) Non irritant

(iii) Potent & speedy induction & recovery

(iv) Control hypertension

(v) Inhibit intestine & uterine contraction

Disadvantages

(i) Special apparatus

(ii) Poor analgesic