GENERAL PHARMACOLOGY 1.9

71.	Highly plasma pro A. Warfarin	otein bound is : B. Atenolol	Delhi 1995	82.	A ter anon
	C. Digitoxin	D. Phenytoi			ing :
72.		ics occur in followi			A. '
	high dose :	Promenalal	AI 1996		B. '
	A. Phenytoin & F B. Digoxin & Pro				C. '
	C. Amiloride & F				D. '
	D. Lithium & the			83.	All o
73.	Drug level in the l	blood is monitored b		03.	
			AI 1996		post
	A. Side effects B. Very low ther	anautic index			A. (
	C. Long half life	apeutic muex			C . 1
	D. Low therapeut	tic efficacy		84.	Whi
74.		e following does	not cause		side
	hyper-triglycerid	emia :	PGI 1995		A .
	A. Frusemide				C. 7
	B. Steroid C. Calcium chan	nel blocker		85.	Whi
	D. Chlorpromazi				fibro
75.	Cholestatic jaundi		PGI 1995		A .
	A. Imipramine	B. Methyl t			C
	C. Tetracycline			86.	All d
76.	Pharmacogenetics	s are important in m		00.	
		D. Transfords	Delhi 1997		one
	A. Rifampicin C. Digitalis	B. Isoniazio D. Proprano			drug
77.		of a drug is indep			A. (
		order kinetics			B. (
	A. Zero	B. First			C . 1
	C. Second	D. Third			D. 1
78.	True about acidic	drug is :	PGI 1997	87.	The
		in alkaline medium			hum
		in acidic medium			A. 1
	C. Excretion on a				B. (
=0	D. All of the abo	••	•		C . 2
79.	Dosage of drug is	determined by follow	•		D
	A Volume of dia		PGI 1997	88.	Ana
	A. Volume of disB. Half life	stribution		00.	A. I
	C. Body mass				
	D. Sex				B. 4
80.		hepatic circulation is	seen in :		C. /
		•	UP 1998	~ -	D. 1
	A. Vancomycin	B. Ciproflo		89.	Phar
_	C. Ampicillin	D. Erythron			
81.		of a drug througho			A. 9
	influenced by all o	of the following facto	-		C. /
	A The evicent of	nuctain hinding	Manipal 1992	90.	True
		protein-binding	differences in		A. (
	Regional bloo	ubility of the drug &	unterences in		B . 1
	C. The pK of the				C. (
	-	alf-life of the drug			D. 1
	-				
Ans.	71. A 72. A 81. D 82. A		74.C 75.I		76. B
1	01.D 04.A	83. B	84. C 85. I)	86. A

I

		eratogenic drug is a omalies when it is ac		•	-
			11111115		nipal 1994
	ng \	The first trimester of	of pres		impai 1774
_	ъ. 3.		• •	•	
		The third trimester	-		
		The first stage of la	-		
		of the following dru		used in the tr	eatment of
		t-traumatic epileps	-		nipal 1995
_		Carbamazepine	-	Ethosuximid	-
		-			
		Phenytoin		Valproate	mtation is a
		lich of the following effect :	causes		erala 1998
-			р		lerala 1990
		Adriamycin Tamoxifen	B.	Bleomycin Stibesterol	
		lich of the following	g aoes	-	Cerala 1998
-			р		Lerala 1998
		Busulpan	B.		
		Adriamycin	D.		
		of the following of			
		drug enhances the	actio	•	
		ig, except :	A	-	Orissa 1998
		Chlorpromazine &	-		
		Corticosteroid & e			
		Diazepam & ethyl		1	
).				
_	The drug metabolizing enzyme that are oldest in t				
		nans are :			Orissa 1999
		The cytochrome P4	130 gei	ne family	
	3.				
		Xanthine oxidase			
).		-	;	
A	۱n	agonist is one whicl			PGI 1999
F	f.	Receptor auto-regu			
_	3.	Affinity with intrin	isic act	livity	
C	2.	Affinity only			
Ľ).	Intrinsic activity of	nly		
F	Pha	armacologically un	desira	ble but unavo	idable is :
					PGI 1999
A	Ł	Side effect	В.	Toxic effects	
	2.		D.	Idiosyncrasy	
1	٢n	ie regarding dose-r	-		PGI 1999
A	ł.	Cannot determine t	-	• •	Ş
E	3.	Log of a drug is sig	gmoid	shaped	

- C. Cannot find response to antagonist
- D. A wide range of doses can not be plotted

72. A 82. A	73. B 83. B	74. C 84. C	75. B 85. B	76. B 86. A	78. B 88. C	

1.14 PHARMACOLOGY

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163.	Drug undergoing Entero Hepatic circulation is : Karnataka 1998					
	A. Sulfonamide B. Penicillin					
	C. Erythromycin D. Streptomycin					
164.	Loading dose of a drug is given : Delhi 1998					
2011	A. When half-life of a drug is long					
	B. When serum concentration is to be achieved rapidly					
	C. When therapeutic index is low					
	D. When drug follows first order kinetics					
165.	The following can be associated with fatty liver					
	except: UPSC 2007					
	A. Amiodarone B. Zidovudine					
	C. Sodium valproate D. Chlorpropamide					
166.	Which one of the following is an antiemetic with					
	minimal CNS side effects? UPSC 2007					
	A. Ondansetron B. Chlorpromazine					
	C. Metoclopramide D. Prochlorperazine					
167.	All of the following have receptors which are					
	transcription factors except : AI 2007					
	A. Insulin B. Estrogen					
	C. Glucocorticoids D. Vitamin D					
168.	Prothrombin Time (PT) of a patient is 26, Control PT					
	is 13 seconds and Sensitivity index is 1.41. What will be					
	the INR of this patient? AI 2007					
	A. 26/13 B. (26/13) x 1.41					
	C. (26/13)141 D (26/13) 1/141					
W169.						
	A. Ticlopidine B. Aspirin					
	C. Clopidogrel D. Dipyridamole					
170.	The following drug acts by hypomethylation :					
	AI 2007					
	A. Gemcitabine B Capecitabine					
	C. Decitabine D. Cytosine arabinoside					
171.	Good clinical practices (GCPs) are not a part of :					
	AIIMS 2007					
	A. Preclinical studies B. Phase-I studies					
170	C. Phase-II studies D. Phase-IV studies					
172.	Bone marrow aplasia is seen with all except : AIIMS 2007					
	A. Methicillin					
	B. Chloramhenicol					
	B. Chiorannenicoi					
	C Alpha methyl hydantoin					
	C. Alpha methyl hydantoin					
	C. Alpha methyl hydantoinD. Phenylbutazone					
	1 5 5					

173.	Therapeutic index is an indicator of :				
	-	Delhi 2007, AI 2008			
	A. Safety B.	Efficacy			
	C. Potency D.	Toxicity			
174.	Which one of the followin	-			
	clinical trial?	AI 2008			
	A. Large number of patients	s are included			
	B. Efficacy				
	C. Toxicity				
	D. Safety				
175.	Xenobiotics involves all o	f the following enzymes			
	except :	AI 2008			
	A. Hydroxylation B.	Cytochrome oxidase			
	C. Cytochrome P450 D.	Methylation			
176.	Drugs causing urine discol	oration include all of the			
	following except :	AI 2008			
	A. Quinine B.	Pyridine			
	C. Rifampicin D.	Nitrofurantoin			
177.	Which of the following is an	inhibitor of the CYP 450			
	enzymes ?	AIIMS 2008			
	A. Phenobarbitone				
	B. Ketoconazole				
	C. Rifampicin				
	D. Phenylbutazone				
	•				

178. Free water clearance is reduced by : AIIMS 2008

- A. Chlorpropamide B. Furosemide
- C. Clofibrate D. Vincristine

179. The loading dose of a drug depends on : AIIMS 2008

- A. Half life of the drug
- B. GFR
- C. Volume of distribution
- D. Rate of metabolism

Ans.	163. C 173. A	164. B 174. D	165. D 175. B	166. A 176. A	167. A 177. B	168. C 178. A	169. A,C 179. C	170. C	171. A	172. A

Although, KDT also attributes respiratory depression and reduced gut motility to delta receptors. The fact that they have not been mentioned in Katzung indicate these to be minor functions with δ receptors if at all. Hence supraspinal analgesia here is the answer of choice.

16. Ans. — A Head injury :

Precaution and Contraindications of Morphine:

- 1. Head injury : Morphine is contraindicated in patients with head injury (KDT). Reasons are :
 - a. By retaining CO_2 it increases intracranial tension which will add to that caused by head injury itself.
 - b. Even therapeutic doses can cause marked respiratory depression in these patients.
 - c. Vomiting, miosis, and altered mentation produce by morphine interfere with assessment of progress in head injury cases.
- 2. Branchial asthma : Morphine can precipitate an attack by its histamine releasing action.
- 3. *Hypothyroidism*, liver and kidney disease patients are more sensitive to morphine
- 4. Infants and elderly are more susceptible to the respiratory depressant action of orphine.
- 5. It is dangerous in patients with respiratory insufficiency (Emphysema, pulmonary fibrosis, corpulmonale) sudden deaths have occurred.
- 6. Hypotensive states and hypovolemia exaggerate fall in BP due to morphine.
- Undiagnosed acute abdominal pain—> morphine can aggravate certain conditions e.g., diverticulitis, biliary colic, pancreatitis.
- 8. Elderly male —> chances of urinary retention are high.
- 9. Unstable personalities —> are liable to continue its use and become addicted.
- * Morphine should thus not be used in cases of head injury and bronchial asthma both. However, as the text uses the term 'contraindicated in association with head injury,

we select this as a better answer from the options provided and draw the following inference to justify answer.

- * Morphine is contraindicated in patients with head injury.
- Morphine should be avoided in patients with bronchial asthma as it has the potential to exacerbate or precipitate an attack.
- * Patients with hypothyroidism are more sensitive to effects or morphine. This however, does not contribute as a contraindication to its use and a dose reduction may probably be all that is required for these.
- 17. Ans. C Low oral bioavailability always and necessarily means poor absorption : "Bioavailability of a drug is defined as

the fraction of unchanged drug reaching the systemic circulation following administration by any route"

- 18. Ans. B Concurent food intake may severely reduce the rate of absorption of pheny-toin.
 - * Presence of food in the stomach delays absorption of digoxin as well as digitoxin.
 - * Absorption of Halofrantine can be dramatically increased if give with food (6 to 10 times):

Oral bioavailability of halofrantine is greatly increased when microionised or taken with fatty food.

- * Food and volume of fluid ingested do not affect absorption of hydrochlorthiazide although some conflicting reports are present.
- * Absorption of phenytoin by oral route is show because of poor aqueous solubility. Presence of food may interfere with its absorption.
- 19. Ans. A Phenytoin:

Phenytoin administration, is plagued by several side effects, even at therapeutic plasma concentration, when use has been prolonged.

"Pancytopenia (Granulocytopenia) has also been mentioned as a side effect of phenytoin in Harrison's 14th/426"

MCQ's OF NERVOUS SYSTEM (CENTRAL & PERIPHERAL)

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	What is important i	n ner	rvous System				
Neurotransmitters, Alcohol, Neuroleptics, Antidepressants, (newer) Benzodiazepines (duration, effects), Antiepileptic drugs (mechanism of action, indications and side effects), Adrenergic and cholinergic agonists and antagonists (effects, uses), Antihistaminics and Antiserotinergics (uses). Ergot alkaloids, Muscle relaxants, CNS stimulants, Antiparkinsonian.							
1.	All of the following antiepileptic drug act via Na+ channel, except :AI-2007A. VigabatrinB. Topiramate D. Phenytoin	9.	Which of the following hypnotics may be given to a patient with marked respiratory insufficiency ?AIIMS 1986, 98A. DiazepamB. Glutethimide				
2.	Which one of the following is not an antiepileptic : AI 2007	10.	C. Methaqualone D. None of the above Chlorpromazine is effective as an antiemetic by :				
2	A. PhenobarbitoneB. CarbamazepineC. PhenytoinD. FlunarizineWhich of the drug is not on attrained participation.		A. Quietening stomach				
3.	Which of the drug is not an atypical antipsychotic ?AIIMS-2006A. ThoridazineB. Riseperidone		B. Blocking the chemoreceptor trigger zoneC. Depressing the vomiting centerD. Decreasing nervous input from the vestibular				
4.	C. Clozapine D. Olanzapine Naltrexone is used in which of the following conditions? AIIMS-2006	11.	apparatus to the vomiting centre				
	A. For opioid overdoseB. For opioid abuseC. Benzadiazepine abuse	12.	A. Diphenylhydantoin B. Diazepam C. Trimethadione D. Phenobarbial				
5.	D. All of the above Drug which is widely used for long term maintenance of morphine withdrawal? AIIMS-2006	12.	to suppress epileptic seizures except : PGI 1980, 92 A. Diazepam B. Reserpine				
•	A. MethadoneB. NaloxoneC. NaltrexoneD. Nalbuphine	13.	C. PhenytoinD. EthosuximideMost specific Beta-2 agonist is :Delhi 1995A. NorepinephrineB. Dobutamine				
6.	Which of the following is a benzodiazepine antagonist?Alims-2006A. FlumazenilB. NaloxoneC. NubeD. Naloxone	14.	C. Phenylephrine D. Salbutamol Maximum muscarinic cholinergic activity is by :				
7.	C. Naltrexone D. Buprenorphine Prolonged use of one of the following anticonvulsant can produce weight loss : AIIMS 2006		Delhi 1995A. BethanecholB. CarbacholC. MethanecolD. Acetylcholine				
9	A. Gabapentin B. Oxcarbazepine C. Topiramate D. Valproic acid When listing harbiturates in order from shortest	15.	AIIMS 1988, 2000				
8.	When listing barbiturates in order from shortest acting to longest acting, which of the following is correct? AIIMS 1985, 96		A. ManiaB. DepressionC. Resistant Schizophrenia				
	 A. Thiopental, phenobarbital, pentobarbital B. Phenobarbital, pentobarbital, thiopental C. Pentobarbital, phentobarbital, thiopental D. Thiopental, pentobarbital, phenobarbital 	16.	 D. Chronic Schizophrenia Which of the following reduces sweating: AI 1993 A. Alpha blocker B. Beta blocker C. Atropine D. Eserine 				
Ans.	1. A 2. D 3. A 4. B 5. A 11. A 12. B 13. D 14. D 15. D		6. A 7. C 8. D 9. D 10. B 16. C				