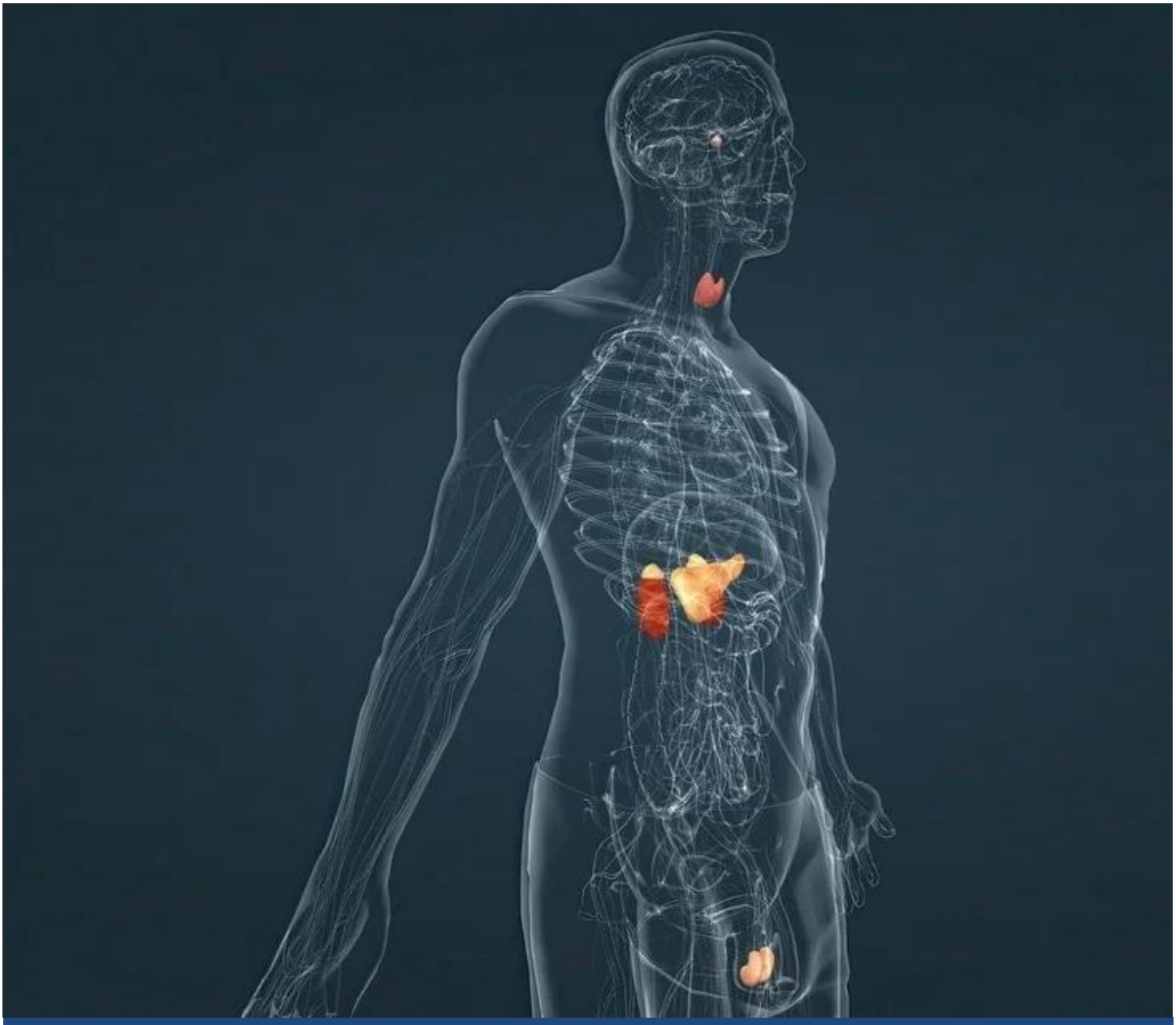

# Endocrine Pathology

Multiple Choice Questions

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Pathology

# Introduction

Welcome to **Endocrine Pathology MCQ**, a comprehensive question bank designed to enhance your understanding of microbiology. This ebook contains over 1900 multiple-choice questions (MCQs) covering a wide array of topics within the field of Pathology.

Whether you're a medical student preparing for exams, a postgraduate aspirant aiming for success in competitive entrance tests, or a healthcare professional looking to refine your expertise, this book will serve as an invaluable resource in your learning journey. The questions in this ebook are structured to reflect the patterns seen in major medical entrance exams such as NEET PG, USMLE, AIIMS, and others, making it a perfect tool for self-assessment and revision.

**Purpose**

The primary goal of this ebook is to provide a reliable and extensive resource that students and professionals can use to test their knowledge, improve their diagnostic skills, and solidify key pathology concepts. With the included detailed answers and explanations, this book goes beyond just helping you answer questions — it enables you to understand the reasoning behind each answer, facilitating deeper learning.

**How This Ebook Can Help You**

- **For Students**: The MCQs in this book are designed to match the rigor and format of real exam questions. By practicing regularly, you'll not only enhance your knowledge but also gain confidence in approaching exam challenges.
- **For Professionals**: This ebook helps professionals stay updated with the latest developments in pathology in medical science and refresh critical concepts required in day-to-day practice.
- **For Educators**: Teachers and educators can use this collection to formulate quizzes, exams, or as supplementary teaching material for their students.

**Compilation and Sources**

This ebook is a compilation of publicly available online content. Each question has been carefully selected and curated to ensure relevance and accuracy. While this material is sourced from multiple platforms, it has been reorganized and edited to provide a streamlined learning experience.

We hope this book becomes an essential part of your academic and professional toolkit, helping you achieve your goals in Pathology.

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# Questions

1-: Sign of diabetic ketoacidosis is-

1: Loss of sweating

2: Depression

3: Dehydration

4: Absent deep tendon reflexes

2-: Urine osmolality in Diabetes insipidus is

1: <150 mmol/L

2: <300 mmol/L

3: <600 mmol/L

4: <900 mmol/L

3-: 1-a hydroxylation in Vitamin-D metabolism takes place in

1: Skin

2: Liver

3: Kidney

4: Blood

4-: Storage form of thyroid hormone-

1: Tri-iodo tyrosine

2: Tri - iodo thyronine

3: Thyroglobulin

4: Di-iodo tyrosine

 

5-: Which of the following endocrine tumors is most commonly seen in MEN I ?

1: Insulinoma

2: Gastrinoma

3: Glucagonoma

4: Somatotrophinoma

6-: The diagnosis of diabetes mellitus is ceain in which of the following situations?

1: Abnormal oral glucose tolerance in a 24-yrs-old woman who has been dieting

2: Successive fasting plasma glucose concentrations of 8, 9, and 8.5 mmol/L in an asymptomatic, otherwise healthy businesswoman

3: A serum glucose level >7.8 mmol/L in a woman in her twenty-fifth week of gestation after a 50-g oral glucose load

4: Persistent asymptomatic glycosuria in a 30-yrs-old woman

7-: True about diabetic nephropathy -

1: Microalbuminiuria is not an indicator of long term cardiovascular morbidity.

2: Strict glycemic control cannot prevent microalbuminuria

3: b-islet cell\/pancreatic transplantation can improve the proteinuria in early stage.

4: Angiotensin receptor blockers have no additive advantage over other drugs except B.P. control.

8-: Diabetic neuropathy is a

1: Distal symmetric sensory polyneuropathy

2: Mononeuritis

3: Autonomic neuropathy

4: All of the above

9-: Drug of choice for pregnant female suspected of having a baby with congenital adrenal hyperplasia

1: Dexamethasone

2: Betamethasone

3: Hydrocoisone

4: Prednisolone

10-: Mechanism of action of the sulfonylureas is

1: K+ ATP channel blocker

2: Na ATP channel blocker

3: Cl ATP channel blocker

4: Ca ATP channel blocker.

11-: Prostaglandin was discovered from

1: Tear

2: Saliva

3: Seminal fluid

4: Blood

12-: Hypocalcemia with hyperphosphatemia are seen in.

1: CRF

2: Pseudobypoparathyoidsm

3: Vit-D deficiency

4: Vit-D deficiency

13-: Lymphoid tissues reach their maximum size:

1: In early childhood

2: During adolescence

3: At pubey

4: At 20 years of age

14-: The major regulator of platelet production is the hormone thrombopoietin (THPO), which is produced by

1: Kidneys

2: Liver

3: Liver and kidneys

4: Spleen and lymph nodes

15-: Testosterone production is mainly contributed by

1: Leydig cells

2: Seolie cells

3: Seminiferous tubules

4: Epididymis

16-: In thyroid gland, iodine is transpoed into the lumen of the follicles by

1: Endocytosis

2: Pendrin protein

3: Antipo

4: Primary active transpo

17-: A 35-year-old woman, on hemodialysis for chronic renal disease, complains of pain in the hands. On examination, the joints are normal with no inflammation or tenderness on palpation. Lab values reveal a low calcium, high phosphate, and high PTH level. What is the most likely diagnosis? (See Figure below.)

1: scleroderma

2: gout

3: secondary hyperparathyroidism

4: pseudogout

18-: Long thyroid stimulating agent is

1: Antibody to thyroid globulin

2: Antibody to thyroid cell receptors

3: Antibody to thyroxine

4: Antibody to thyroid cells

19-: Estimation of the following hormones is useful while investigating a case of gynecomastia except-

1: Testosterone

2: Prolactin

3: Estradiol

4: Luteinising hormone

20-: All are side effects of steroid EXCEPT

1: Skin atrophy

2: Telengectasia

3: Folliculitis

4: Photosensitivity

21-: Radiation induced thyroid cancer is -

1: Papillary

2: Follicular

3: Anaplastic

4: Medullary

22-: A patient presented with neck swelling. Cytology showed showed parafollicular cells along with clusters of plasmacytoid and few spindle shaped cells. What investigation should be done to follow up the patient?

1: Calcitonin

2: TSH level

3: Anti TPO antibody

4: TRH

23-: Which of the following is seen in Vitamin D deficiency-

1: Increased alkaline phosphatase

2: Decreased phosphate in urine

3: Hyperphosphatemia

4: Decreased alkaline phosphatase

24-: The drug X is used in osteoporosis. Its mechanism of action is shown in the Figure below. X is likely to

1: Teriparatide

2: Alendronate

3: Denosumab

4: Estrogen

25-: Insulin inhibits ketogenesis by all except

1: Inhibiting lipolysis

2: Increased esterification of fatty acids

3: Directing acetyl-CoA to TCA cycle

4: Increasing b-oxidation

26-: Oral hypoglycemic drug that is less likely to cause hypoglycemia is:

1: Repaglinide

2: Gliclazide

3: Rosiglitazone

4: Glimipiride

27-: All of the following can cause osteoporosis, except -

1: Hyperparathyroidism

2: Steroid use

3: Flurosis

4: Thyrotoxicosis

28-: Which of the following regulates lipolysis in adipocytes?

1: Activation of fatty acid synthesis mediated by cyclic AMP

2: Activation of triglyceride lipase as a result of hormone-stimulated increases in cyclic AMP levels

3: Glycerol phosphorylation to prevent futile esterification of fatty acids

4: Activation of cyclic AMP production by insulin

29-: Tumor that follows rule of 10 is

1: pheochromocytoma

2: Onocytoma

3: Lymphoma

4: Renal cell carcinoma

30-: All the following increase insulin release except

1: Rosiglitazone

2: Nateglinide

3: Glipizide

4: Exenatide

31-: The commonest cause of primary hyperparathyroidism is-

1: Carcinoma parathyroid

2: Solitary adenoma of parathyroid

3: Chronic renal failure

4: Hyperplasia of the parathyroid

32-: In Thyrotoxicosis, B-blockers do not control -

1: Anxiety

2: Termors

3: Tachycardia

4: Oxygen consumption

33-: Octreotide is used in all except:

1: Insulinoma

2: Glucagonoma

3: Glioma

4: Carcinoids

34-: Osteoporosis is seen in all the following except-

1: Thyrotoxicosis

2: Rheumatoid ahritis

3: Hypoparathyroidism

4: Steroid therapy

35-: Diagnostic feature of parathyroid carcinoma is

1: Cytology

2: Metastasis

3: Clinical features

4: All

36-: Feed forward mechanism is employmed in regulation of:

1: Temperature

2: Ph

3: Blood pressure

4: Blood volume

37-: All of the following drugs alter calcium hemostasis except-

1: Flouride

2: Indomethacin

3: Mithramycin

4: Thiazides

38-: A 52-year-old alcoholic notices a skin rash on his chest, and also has symptoms of diarrhea and abdominal pain. On examination, he has a scaly and pigmented rash on the sun-exposed areas of his skin, the abdomen is soft, and his short-term memory is impaired. He has dermatitis, diarrhea, and dementia syndrome.For the patient with vitamin deficiency or excess, select the most likely diagnosis

1: niacin

2: thiamine

3: pyridoxine

4: vitamin C

39-: A 19-year-old man presents to the clinic complaining of early fatigue and muscle cramps while playing sports. He is fine when walking or doing less intense levels of work. On physical examination, he appears well and the vital signs are normal. Muscle bulk, tone and strength in the proximal muscles are normal. There is no muscle fatigue with repetitive arm grip exercises. After an exercise stress test, his serum creatine kinase (CK) is elevated and lactate level is normal. Which of the following is the most likely diagnosis?

1: Gaucher disease

2: Tay-Sachs disease

3: McArdle disease (glycogen storage disease)

4: hemochromatosis

40-: Steroids are indicated in all of the following forms of tuberculosis except:

1: Meningitis

2: Pericarditis

3: Ileo-caecal tuberculosis

4: Adrenal involvement

41-: The diabetes control and complication trial (DCCT) provided definitive proof that reduction In chronic hyperglycemia helps to improve -

1: Microvascular complications of type 1 DM

2: Microvascular complications of type 1 DM

3: Microvascular complications of type 2 DM

4: Macro vascular complications of type 2 DM

42-: A 19-year-old woman presents to the clinic for evaluation of primary amenorrhea. Her physical examination is normal, and she has female sex characteristics and breast development. The only abnormality is the absence of body hair. Among other investigations she also has genetic testing that reveals an XY chromosome pattern. Which of the following mechanisms is most likely to explain her phenotypic pattern and amenorrhea?

1: estrogen receptor defect

2: excess hormone production

3: androgen receptor defect

4: decreased hormone production

43-: All are true about primary hyperparathyroidism except -

1: Nephrolithiasis

2: Increased alkaline phosphatase

3: Decreased calcium

4: Loss of lamina dura

44-: Carcinoma which arises in the thyroglosal cyst is -

1: Papillary carcinoma

2: Follicular

3: Anaplastic

4: Medullary

45-: Erythropoietin production is inhibited by -

1: Estrogen

2: Progesterone

3: Thyroxine

4: Testosterone

46-: Seoli cells play a key role in which of the following process

1: Spermiogenesis

2: Testosterone secretion

3: Secretion of seminal fluid

4: Production of germ cells

47-: Pheochromocytoma is associated with -

1: Vitiligo

2: Cafe-au-lait spots

3: Ash leaf amelanotic macusles

4: Acanthosis Nigricans

48-: A 30 year ols woman presented with secondary amenorrhoea for 3 years along with galactorrhea. The most likely cause of her symptoms would be -

1: Craniopharyngioma

2: Prolactinoma

3: Meningioma

4: Sub-arachnoid haemorrhage

49-: Cytochrome P450 is identified to 11-ss hydroxylase is known as

1: CYMA-IB

2: CYPA-2B

3: CYPA-3B

4: CYPA-4B

50-: A 25-year-old man requests cholesterol screening because of a family history of premature coronary artery disease (CAD). His lipid levels reveal an elevated total and LDL cholesterol. The high-density lipoprotein (HDL) and triglyceride values are normal. His physical examination is completely normal. Which of the following is the most common cause of genetic dyslipidemia?

1: familial combined hyperlipidemia

2: familial hypercholesterolemia

3: familial defective Apo B

4: Apo C-II deficiency

51-: SIADH true is all except -

1: Serum Na can be less than 135 meq\/1

2: Urine sodium is normal or slightly low

3: Vaptans are new FDA approved drugs for its Rx

4: Water loading test can be used

52-: About cushing syndrome, true Is -

1: Low dose dexamethasone suppress coisone secretion

2: CA of adrenal is more common than adenoma

3: Pituitary adenoma size > 2 cm (usually)

4: ACTH secretion is the commonest cause

53-: Hormone synthesized as peptide precursor is/are

1: Insulin

2: PTO

3: Renin

4: Thyroid hormone

54-: WHO recommended dose of misoprostol in the treatment of post partum hemorrhage is

1: 400 mcg oral

2: 600 mcg sublingual

3: 800 mcg sublingual

4: 1000 mcg oral

55-: Emergency contraceptive drugs are:

1: Levo-norgestrel

2: Estrogen + progesterone

3: Mifepristone

4: All of the above

56-: Seoli cell secrets

1: Androgen binding protein

2: Testosterone

3: LH

4: FSH

57-: Anterior scalloping of veabrae seen in -

1: Obsteogenesis imperfecta

2: Aoic aneurysm

3: Metastasis

4: Renal Cell Ca

58-: Pheochromocytoma may be associated with:

1: Medullary carcinoma of the thyroid

2: Papillary carcinoma of the thyroid

3: Anaplastic carcinoma of the thyroid

4: Follicular carcinoma of the thyroid

59-: Insulin causes all of the following except

1: Glycogenesis

2: Glycolysiis

3: Lipogenesis

4: Ketogenesis

60-: The number of major hormones produced by the anterior pituitary gland is

1: 4

2: 5

3: 6

4: 7

61-: A 28-year-old woman with diabetes presents with lesions on her leg. They are not painful, and have a central depression and raised irregular margin. Which of the following is the most likely diagnosis?

1: eruptive xanthomas

2: necrobiosis lipoidica diabeticorum

3: gangrene

4: staphylococcal infection

62-: Thyrotoxicosis can be differentiated from anxiety neurosis clinically by

1: Tachycardia

2: Sleeping pulse rate

3: Moist hands

4: Ankle's jerk

63-: Monogenic transmission of diabetes mellitus occurs in:

1: Insulin Dependent Diabetes Mellitus (IDDM)

2: Non-insulin Dependent Diabetes Mellitus (NIDDM)

3: Latent Autoimmune Diabetes in Adults (LADA)

4: Maturity Onset Diabetes of the Young (MODY)

64-: The drug of choice in an 80-year-old patient presenting with hyperglycemia and ketoacidosis -

1: Oral hypoglycemic drugs

2: Intermediate acting insulin

3: Oral drug with intermediate acting insulin

4: Sho acting insulin

65-: ACTH is increased in all except

1: Exercise

2: Emotions

3: Evening

4: Tumors

66-: All are absolute contraindication of OCP except:

1: Pregnancy

2: Thromboembolic disorder

3: Hepatic failure

4: Endometriosis

67-: Diabetes mellitus is associated with all except -

1: Pendred syndrome

2: Down's syndrome

3: Turner's syndrome

4: Klinefelters syndrome

68-: A 28-year-old woman with type 1 diabetes presents to the clinic for evaluation of skin lesions on her leg. They are not painful or itchy and have developed gradually over time. There is no history of previous trauma to the site either.On physical examination the skin changes have a central depression and raised irregular margin. The surrounding area is not red, tender, or indurated. They are shown in Figure below. Which of the following is the most likely diagnosis?

1: eruptive xanthomas

2: necrobiosis lipoidica diabeticorum

3: gangrene

4: staphylococcal infection

69-: Hashimoto's thyroiditis,all are TRUE except-

1: Neutrophilic infiltration

2: Maximum incidence in children

3: Pain in hyoid

4: None of the above

70-: A 26-year-old woman has episodic hypeension with headache, diaphoresis, and palpitation. Which of the following diagnostic procedures would be most useful in evaluating the possibility that pheochromocytoma might be the cause of these findings?

1: Serum C-peptide

2: Serum calcitonin

3: Urinary vanillylmandelic acid

4: Urinary aldosterone

71-: A 24-year-old accountant complains of a white discharge from his breasts. He is most likely experiencing which one of the following?

1: A tumor of the posterior pituitary that could be surgically removed

2: Excessive production of OT in the hypothalamus

3: Deficient testosterone receptors in the mammary glands

4: A prolactinoma that would decrease its secretory activity in response to bromocriptine (an analog of dopamine)

72-: All are actions of coisol on the skin and connective tissue except

1: Antiproliferative for fibroblasts

2: Antiproliferative for keratinocytes

3: Loss of collagen

4: Hyperpigmentation

73-: Half-life of T3

1: 10 hours

2: 2 day

3: 6 days

4: 10 days

74-: Which of the following is best diagnosis of this neonate who is excessively hungry, warm with flushed skin?

1: Neonatal Thyrotoxicosis

2: Neonatal lupus

3: Cretin

4: Progeria

75-: All the drugs have anti-androgenic effects except

1: Progesterone

2: Dutasteride

3: Flutamide

4: Spironolactone

76-: Which one of the following drugs is not a uterine relaxant?

1: Isoxsuprine

2: Dopamine

3: Salbutamol

4: Terbutaline

77-: Hypercalciuria is seen in -

1: Hyperparathyroidism

2: VitD intoxication

3: Sarcoidosis

4: All

78-: Cushing syndrome is characterized by all except *

1: Hypoglycemia

2: HT

3: Proximal myopathy

4: Centripetal obesity

79-: Edema feet is not a feature of:

1: Conn syndrome

2: Hypothyroid

3: CHF

4: Nephrotic syndrome

80-: A 43-year-old woman with chronic alcoholism presents with shortness of breath and edema. On examination, her blood pressure is 100/60 mm Hg, pulse 110/min, JVP is 8 cm, the cardiac apex is displaced and enlarged, there are bilateral inspiratory crackles, and there is pedal edema.For the patient with vitamin deficiency or excess, select the most likely diagnosis

1: niacin

2: thiamine

3: pyridoxine

4: vitamin C

81-: A 32-year-old woman is evaluated in the clinic for symptoms of polyuria and polydipsia. She has no significant past medical history and her only medication is the oral contraceptive pill.Her physical examination is entirely normal. Urine and serum biochemistry investigations are suggestive of central diabetes insipidus (DI). Which of the following is the most likely finding on magnetic resonance imaging (MRT) of the brain?

1: hypothalamic tumor

2: hyperintense signals in the cerebral cortex

3: agenesis of the corpus callosum

4: lack of hyperintense signals from the posterior pituitary

82-: Obesity in a child of age 2 years is defined as:

1: Weight for height more than double of expected

2: Weight for age more than double of expected

3: BMI >30

4: BMI >95th percentile

83-: Which of the following drugs is to be immediately stopped in a patient of diabetes with HTN and serum creatinine level of 5.6 mg?

1: Metformin

2: Insulin

3: Metoprolol

4: Linagliptin

84-: The following are consistent with pheochromocytoma except-

1: Episodic diarrhea

2: Episodic flushing of skin

3: Episodes of hypeension

4: Paroxysm, palpitation and sweating

85-: Spermatogenesis is mostly controlled by

1: Inhibin

2: FSH

3: LH

4: GnRH

86-: A patient presents with intermittent headache. On examination there is hypeension and a thyroid nodule. Which of the following steps is to be taken next -

1: Urine HIAA levels

2: Urine VMA and aspiration of the thyroickiodule

3: Ultrasound abdomen

4: Echocardiography

87-: Diabetes melitus is diagnosed if fasting blood glucose is ?

1: >100

2: >126

3: >110

4: >116

88-: A 50 years old male with 2 diabetes mellitus is found to have 24 hour urinary albumin of 250 mg. Which of the following drugs may be used to retard progression of renal disease -

1: Hydrochlohiazide

2: Enalapril

3: Amiloride

4: Aspirin

89-: Most common cause of primary hyperparathyroidism-

1: Iatrogenic

2: Medullary carcinoma thyroid

3: Parathyroid adenoma

4: Parathyroid hyperplasia

90-: Which of the following is used for acute variceal bleeding?

1: Octreotide

2: Oxytocin

3: Somatotropin

4: Dexamethasone

91-: A 56-year-old woman with diabetes, hypertension, and hyperlipidemia is found to have an A1C of 11 despite her best attempts at diet and faithfully taking her metformin and glyburide. The patient mentions that she has been unable to exercise much, partially due to severe fatigue and sleepiness in the daytime. On examination she is obese, has a full appearing posterior pharynx, clear lungs, a normal heart examination, and trace bilateral edema. Reflexes and skin are normal. Her TSH is 2.0 m/L (normal). The patient asks if there is anything else that can be done before adding another oral agent or switching to insulin. What is the best next step?

1: Educate the patient on sleep hygiene to ensure better rest and more energy.

2: Prescribe zolpidem as a sleep aid to help her sleep and increase her energy to exercise during the day.

3: Explore for possible depression as a contributor to the fatigue which is keeping her from exercising.

4: Arrange for a sleep study to check the patient for obstructive sleep apnea.

92-: The laboratory test of choice to confirm myxoedema coma is -

1: Thyroid stimulating hormone (TSH)

2: Thyrotropine releasing hormone (TRH)

3: Tri-iodothyronine (T3)

4: Tetra iodothyronine (T4)

93-: Secretion of estrogen is maximum at

1: Just before menopause

2: At pubey

3: At menstruation

4: Before ovulation

94-: In a seriously ill patient, addition of amino acids in diet results in a positive nitrogen balance. The mechanism for this is

1: Increased Growth hormones secretion

2: Enhanced rate of gluconegenesis

3: Increased absorption of amino acids from diet

4: Increased secretion of Insulin

95-: Which diuretic could be considered appropriate for combining with ACE inhibitors

1: Spironolactone

2: Eplerenone

3: Hydrochlorothiazide

4: Amiloride

96-: Increased LH secretion just before ovulation is due to

1: Positive feed-back by progesterone

2: Positive feed-back by estrogen

3: Positive feed-back by FSH

4: Positive feed-bad by relaxin

97-: Which of the following most strongly suggests the diagnosis of primary hyperparathyrodism?

1: Serum acid phosphatase above 120IU/L

2: Serum calcium above 11 mg/dL

3: Urinary calcium below 100 mg/day

4: Serum alkaline phosphatase abve 120 lU/L

98-: In children with type IDM when is ophthalmologic evaluation indicated

1: At the time of diagnosis

2: After 1 year

3: After 2 years

4: After 5 years

99-: Immediate treatment of hypercalcemia of malignancy is:

1: IV fluids

2: Bisphosphonates

3: Calcitonin

4: Glucocorticoids

100-: Dose of Carbetocin for post paum hemorrhage

1: 100 microgram intramuscular

2: 50 microorgam Inravenous

3: 150 microgram intravenous

4: 200 microgram intramuscular

101-: For diagnosis of diabetes mellitus, Fasting blood glucose level should be more than -

1: 126 mg/dl

2: 140 mg/dt

3: 100 mg/dl

4: 200 mg/dl

102-: Hypophosphatemia is seen in -

1: Pseudohypoparathyropdism

2: CRF

3: Rickets

4: Hyperparathyroidism

103-: In hyperparathyroidism, which of the following is not seen

1: Normal alkaline phosphatase

2: Decreased phosphate in urine

3: Increased calcium

4: Hypophosphatemia

104-: What is the naturally occurring form of vitamin D in the human skin?

1: Calciferol

2: 7 hydroeholesterol

3: 25 hydroxy cholecalciferol

4: 1,25 dihydroxy cholecalciferol

105-: Galactorrheamy be associated with the use of all the following drugs except -

1: Methyldopa

2: Tricyclic antidepressants

3: Pyridoxine

4: Phenothiazine

106-: Insulin secretion is inhibited by

1: Secretin

2: Epinephrine

3: Growth hormone

4: Gastrin

107-: Following condition is most likely seen in which of the following condition:

1: Hypothyroid

2: Acromegaly

3: Cushing syndrome

4: Grave Disease

108-: Most potent mineralocoicoid is

1: Aldosterone

2: DOCA

3: Fludrocoeisone

4: Triamcinolone

109-: A 55-year-old obese woman complains of declining visual acuity. Funduscopic examination shows peripheral retinal microaneurysms. Urinalysis reveals 3+ proteinuria and 3+ glucosuria. Serum albumin is 3 g/dL, and serum cholesterol is 350 mg/dL. These clinicopathologic findings are best explained by which of the following mechanisms of disease?

1: Peripheral insulin resistance

2: Increased peripheral insulin uptake

3: Irregular insulin secretion

4: none of the above

110-: Beta HCG is secreted by

1: Ovary

2: Pituitary

3: Corpus luteum

4: Placenta

111-: Two most impoant tests to be done in a comatose patient with blood glucose of 750 mg/dl will be -

1: Sr. creatinine

2: Sr. sodium

3: CSF examination

4: Blood pH

112-: Long acting insulin is?

1: Insulin glargine

2: Insulin Lispro

3: Insulin aspart

4: Insulin glulisine

113-: False about Wolman disease is -

1: It is a lysosomal storage disorder

2: It is characterized by deficient acid lysosomal lipase

3: It shows autosomal AR inheritance pattern

4: It is characterized by adrenal calcification and corneal clouding

114-: All of the following decrease bone resorption in osteoporosis except:

1: Alendronate

2: Etidronate

3: Strontium

4: Teriparatide

115-: Through which of the following does glucose mediated insulin release occur?

1: ATP sensitive K+ channels

2: cAMP

3: Carrier mediated

4: Receptor phosphorylation

116-: Which of the following is most characteristic of diabetic neuropathy?

1: it is usually bilateral

2: pain is not a feature

3: it most commonly affects the brain

4: it spares the autonomic system

117-: How to avoid lipodystrophy in diabetics?

1: Avoid insulin injection

2: Change injection sites

3: Give injection on same site

4: Give injection on alternate days

118-: Ovum is released due to

1: FSH

2: LH

3: Prolactin

4: HCG

119-: Osteoporosis is seen in -

1: Thyrotoxicosis

2: Cushmg's disease

3: Menopause

4: All of the above

120-: Alcaftadine trial used this concentration of drug:

1: 5%

2: 1%

3: 0.25%

4: 2.50%

121-: In which of the following, 'Zellballens' are seen?

1: Gastric carcinoma

2: Angiosarcoma

3: Pheochromocytoma

4: Colon carcinoma

122-: Euvolemic hyponatremia is seen in:

1: Adrenocortical failure

2: Burns

3: SIADH

4: Cirrhosis

123-: In Cushing syndrome, which of the following are seen -

1: |Aldosterone

2: |Aldosterone

3: |Epinephrine

4: |norEpinephrine

124-: Progesterone is added to estrogens in H to achieve wof effects

1: Decrease the estrogen action on the breast

2: Decrease the occurrence of endometrial cancers

3: Increase the effectiveness of the estrogens

4: Inhibit bone resorption

125-: RET gene mutation is associated with which malignancy -

1: Pheochromocytoma

2: Medullary carcinoma thyroid

3: Lymphoma

4: Renal cell carcinoma

126-: Oral glucose tolerance test in children is done with

1: 1.5 gm/kg glucose

2: 1.75 gm/kg glucose

3: 2 gm/kg glucose

4: 2.5 gm/kg glucose

127-: Estrogen beta receptors are found on

1: Uterus

2: Blood vessels

3: Ovary

4: Vagina

128-: The following statements regarding finasteride are true EXCEPT:

1: It is used in the treatment of benign prostatic hyperplasia

2: Impotence is well documented alter its use

3: It blocks the conversion of dihydrolestosteron to testosterone

4: It is a 5 a reductase inhibitor

129-: Which of the sulfonylureas is best choice in chronic kidney disease patients

1: Glimipride

2: Glibenclanide

3: Glipizide

4: Glyburide

130-: All are good prognostic factors for neuroblastoma except

1: Trk-A expression absent

2: Absence of 1 p loss

3: Absence of 17 p gain

4: Absence of 11 q loss

131-: Diabetes control is best monitored by -

1: Serum glucose

2: Post prandial blood glucose

3: HbA1c

4: HbA2c

132-: Dopamine agonist used in diabetes

1: Metformin

2: Bromocriptine

3: Cabergoline

4: Vanadium salts

133-: Flushing is common in patient taking which of the follwing oral hypoglycemic drug with alcohol:

1: Chlorprompamide

2: Phenformin

3: Glibenclamide

4: Tolazamide

134-: Most common cause of hypehyroidism-

1: Thyroid hyperplasia

2: Thyroid adenoma

3: Thyroid carcinoma

4: Grave disease

135-: Olopatadine is:

1: Mast cell stabilizer

2: Anti-histamine

3: Both mast cell stabilizer and anti histamine

4: None of the above

136-: Hypophosphatemia is seen in all except-

1: Acute renal failure

2: Rickets

3: Respiratory alkalosis\/COPD

4: Chronic alcoholism

137-: Weight gain Is seen In all except-

1: Cushings syndrome

2: Hypothyroidism

3: Pheochromocytoma

4: Insulinoma

138-: 100/0/0 maturation index indicates

1: Atrophic smear

2: Pregnancy

3: Reproductive age female

4: None

139-: Chronic adrenal insufficiency is characterized by all of the following except-

1: Excess pigmentation

2: Asthenia

3: Weight gain

4: Hypoglycemic episodes

140-: Most important side effect of insulin:

1: Hypoglycaemia

2: Lipodystrophy

3: Insulin resistance

4: Antibodies to insulin

141-: All are true regarding selective estrogen receptor down (SERD) Fulvestrant exept

1: Used for treatment of advanced breast cancer

2: Is a selective estrogen antagonist

3: Is slower, sho acting and less safer than SERMS

4: Administered as once month i.m. dose

142-: What laboratory test is most appropriate for this patient?

1: Alpha-fetoprotein

2: Beta2-microglobulin

3: Calcitonin

4: Insulin-like growth factor-1

143-: In osteoporosis there is -

1: Decrease in absolute amount of bone mass

2: More common in male

3: Radiographs show normal bone density

4: Hormonal replacement therapy

144-: Relaxation of skeletal muscle occurs by

1: Removal of Acetylcholine from synaptic cleft

2: Closure of nicotinic cholinergic receptor

3: Binding of calcium with troponin

4: Removal of sarcoplasmic calcium

145-: Which of the following drug is aipha-glucosidase inhibitor?

1: Pioglitazone

2: Miglitol

3: Met-formin

4: Nateglinide

146-: Which one has least mineralocoicoid activity?

1: Coisol

2: Prednisolone

3: Fludrocoisone

4: Methyl prednisolone

147-: The antibodies that are seen in Grave&;s disease are-

1: ANA

2: TSH receptor antibodies (TRAb)

3: Thyroid peroxidase antibodies

4: Anti-T3 antibodies

148-: All are proved to delay or prevent diabetes in those with impaired glucose tolerance, except

1: Lifestyle modification

2: Metformin

3: Orlistat

4: Atorvastatin

149-: The following is true about Nesidioblastosis except ?

1: Presents with hypoglycemic attacks

2: More common in adults than in children

3: Histopathology shows hyperplasia of islet cells

4: Diazoxide is used for treatment

150-: All of the following preparation if insulin are rapid and sho acting except

1: Lispro

2: Aspa

3: Glargine

4: NPH

151-: Common side effect of thiazolidinediones is:

1: Dysguesia

2: Hypoglycemia

3: Water retention with weight gain

4: Anemia

152-: Gestational hypehyroidism occurs due to

1: Beta HCG from placenta

2: Trans-placental transfer of TSH

3: TPO antibodies

4: Anti thyroglobulin antibody

153-: All of the following are histological features of Hashimoto thyroiditis, except:

1: Lymphocytic infiltrate with germinal center formation

2: Follicular destruction and atrophy

3: Huhle cell metaplasia

4: Orphan Annie eye nuclei

154-: Tolvaptan is approved for use in -

1: High Na

2: High K

3: High Cu

4: Low Na

155-: Conn&;s syndrome it characterised by all except -

1: Polyuria

2: Polydipsia

3: Weakness

4: Anasarca

156-: A perimenopausal woman presents with increasing swallowing difficulty and fatigue. Physical examination reveals that her thyroid is enlarged (palpable goiter). Laboratory examination of her serum reveals T4 of 4.9 mg/dL, free T4 of 2.5 ng/dL, and TSH of 5.5 mIU/mL. No thyroidstimulating immunoglobulins are identified in the serum, but antimicrosomal antibodies are present. Which one of the listed histologic findings, if present in a thyroid biopsy from this individual, would be most consistent with a diagnosis of Hashimoto's thyroiditis?

1: Lymphocytic infiltrate without follicle formation

2: Intense lymphoplasmacytic infiltrate with lymphoid follicles and scattered oxyphilic cells

3: Hyperplasia of follicular cells with scalloping of colloid at the margin of follicles

4: Granulomatous inflammation with multinucleated giant cells surrounding fragments of colloid

157-: Mechanism of aspirin action is

1: Conves inactive plasminogen into active plasmin

2: Inhibits COX and thus thromboxane synthesis

3: Enhances the interaction between antitrombin III and both thrombin and the factors involved in the intrinsic clotting cascade

4: Inhibits the glycoprotein IIb/IIIa complex

158-: All are required for conversion of progesterone to estrogen except

1: Lyase

2: 11-hydroxylase

3: Reductase

4: Isomerase

159-: Which of the following is contraindicated in diabetics with Congestive hea failure

1: Empagliflozin

2: Metformin

3: Linagliptin

4: Pioglitazone

160-: Androgen receptor blocking drug is :

1: Tamoxifen

2: Cyproterone acetate

3: Mifepristone

4: Nalondrone

161-: Man with gynaecomatsia and infeility, cause?

1: Cimetidine

2: Omeprazole

3: Erythromycin

4: Digitalis

162-: Increased insulin receptors are seen in

1: Obesity

2: Starvation

3: Acromegaly

4: None

163-: Which of the following gene defect is associated with development of medullary carcinoma of thyroid?

1: RET Proto Oncogene

2: Fap gene

3: Rb gene

4: BRCA 1 gene

164-: Features of hypothyroidism in infancy include the following except

1: Premature closure of posterior fontanelle

2: Coarse facies

3: Umbilical hernia

4: Constipation

165-: A 40-year-old man experiences weakness and easy fatigability of 2 months' duration. Physical examination yields no remarkable findings. Laboratory studies show a serum calcium of 11.5 mg/dL, inorganic phosphorus of 2.1 mg/dL, and serum parathyroid hormone of 58 pg/mL, which is near the top of the reference range. A radionuclide bone scan fails to show any areas of increased uptake. What is the most likely cause of these findings?

1: Chronic renal failure

2: Hypervitaminosis D

3: Medullary thyroid carcinoma

4: Parathyroid adenoma

166-: Maximum concentration of coisol is seen at which time of day?

1: Early morning

2: Noon

3: Late evening

4: Midnight

167-: All are true regarding SIADH, except -

1: Increased level of ADH (AHMS Nov 93)

2: Urine hvpoosmolar

3: Hyponatremia

4: Adequate hydration status

168-: After pituitary stalk resection, all hormones are affected except

1: Prolactin

2: FSH

3: ADH

4: ACTH

169-: A 22-year-old man has features of arm span greater than height, subluxed lenses, flattened corneas, and dilation of the aortic ring. Which of the following is the most likely diagnosis?

1: Ehlers-Danlos syndrome

2: Marfan syndrome

3: Werner's syndrome

4: Laurence-Moon-Biedl syndrome

170-: DAX 1 gene Mutation is associated with

1: Cushing's disease

2: Hashimoto's disease

3: Congenital adrenal hypoplaisa

4: Addison's disease

171-: Thiazides can cause

1: Hyperkalemic paralysis

2: Hypouricemia

3: Hypolipidemia

4: Impotence

172-: Sprinter gets its immediate energy from

1: Glycogen

2: Fatty acid

3: Creatine phosphate

4: None

173-: A 40-year old diabetic patient presents with proptosis of one eye and black eschar over palate. The likely organism is:

1: Pseudomonas

2: Candida

3: E. coli

4: Mucor

174-: Insulin stress test assay estimates -

1: Diabetes mellitus

2: Growth hormone

3: Glucagon assay

4: Catecholaines

175-: Which neuroendocrine tumour causes biliary obstruction

1: Somatostatinoma

2: Gastrinoma

3: Insulinoma

4: VIPoma

176-: Manifestations of endemic cretinism include:

1: Deafness and facial nerve involvement

2: Blindness and hypothyroidism

3: Strabismus and spastic diplegias

4: Multinodular goitre and mental retardation

177-: All are causes of hyperprolactinemia, except -

1: Bromocriptine

2: Phenothiazine

3: M ethyldopa

4: Metoclopramide

178-: Cause of death in diabetic ketoacidosis?

1: Cerebral edema

2: Dehydration

3: Electrolyte imbalance

4: Central pontine myelinosis

179-: A person sustains head trauma leading to transection of pituitary stalk. All can be consequence of this, except -

1: SIADH

2: Diabetes mellitus

3: Diabetes incipidus

4: Hyperprolactinemia

180-: The enzyme defect in von Gierke&;s disease (type-1 glycogen storage disease) is

1: Glycogen phosphorylase

2: Debranching enzyme

3: Phosphoglucomutase

4: Glucose-6-phosphate

181-: In congenital adrenal hyperplasia most common deficiency

1: 21- alpha hydroxylase deficiency

2: 11- beta hydroxylase deficiency

3: 17 - hydroxylase deficiency

4: 3 beta hydroxylase deficiency

182-: Which of the following is an indication for the use of coicosteroids

1: Psychosis

2: Herpes simplex

3: Loeffler syndrome

4: Subacute thyroiditis

183-: During labor and delivery, a specific hormone causes uterine contractions. This hormone is produced in which one of the following anatomical locations?

1: Hypothalamus

2: Anterior pituitary

3: Posterior pituitary

4: Adrenal cortex

184-: Drugs causing pharmacological adrenalectomy are all except

1: Ketoconozole

2: Mitotane

3: Aminoglutethemide

4: Methotrexate

185-: On giving a patient insulin, which of the following is expected to occur first?

1: Increased transpo of K+ into adipocytes

2: Stimulation of protein synthesis

3: Activation of glycolysis

4: Increase in mRNA for lipolysis

186-: Aldosterone receptors are present in all except

1: Liver

2: Colon

3: Hippocampus

4: Distal nephron

187-: A 33 year old lady present! with polydipsia and polyuria. Har symptoms staed soon after a road traffic accident 6 months ago. The blood pressure is 120/80 mm Hg with no postural drop. The daily urinary output Is 6-8 liters. Investigation showed, Na 130 mEq/L, KJ.5 mEq/L, urea 15mg/dL, sugar-65 mg/dL. The plasma osmolality is 268 mosmol/L and urine osmolatity 45 mosmol/L. The most likely diagnosis is-

1: Central diabetes insipidus

2: Nephrogenic diabetes insipidus

3: Resolving acute tubular necrosis

4: Psychogenic polydipsia

188-: Calcitonin is secreted from -

1: Ancinar cells of thyroid

2: Chief cells of parathyroid

3: "C" cells of thyroid

4: Oxyphil cells of parathyroids

189-: Which of the following is used for medical adrenalectomy?

1: Mitotane

2: Methotrerate

3: Doxorubicin

4: 5-Fluorouracil

190-: If a diabetic patient being treated with an oral hypoglycemic agent develops dilutional Hyponatremia, which one of the following could be responsible for this effect

1: Chlorpropamide

2: Tolbutamide

3: Glyburide

4: Glimepride

191-: A 28-year-old man is evaluated for recurrent peptic ulcer disease, apparently refractory to pharmacologic intervention. Serum gastrin is markedly elevated. These findings are most characteristic of which of the following?

1: Cushing syndrome

2: Glucagonoma

3: Whipple triad

4: Zollinger-Ellison syndrome

192-: Which of the following drugs causes osteoporosis on long term use:

1: Etidronate

2: Prednisolone

3: Phenytoin

4: Calcitriol

193-: Which of the following is a long acting insulin that never attains a peak concentration in plasma?

1: Insulin lispro

2: Insulin aspart

3: Insulin glulisine

4: Insulin glargine

194-: Conn syndrome is seen due to increased production of

1: Coisol

2: ACTH

3: CRH

4: Aldosterone

195-: The 5a reductase inhibitor that has been found to be effective both in benign prostatic hyperophy and male pattern baldness is:

1: Flutamide

2: Finasteride

3: Prazosin

4: Minoxidil

196-: Plasma half life of Carbimazole is

1: 4 hrs

2: 8 hrs

3: 16 hrs

4: 24 hrs

197-: True about oxytocin are all except

1: Synthesized by paraventricular nucleus of hypothalamus

2: Secreted by posterior pituitary

3: Causes uterine contraction of body

4: Causes contraction of upper segment

198-: In tumor lysis syndrome all are seen except -

1: Hyperuricemia

2: Hyperphosphatemia

3: Hyperkalemia

4: Hypercalcemdia

199-: Enzyme marker for pancreas

1: CPK

2: Amylase

3: SGOT

4: ALT

200-: Where does ADH not act?

1: PCT

2: Collecting duct.

3: Collecting tubules

4: DCT

201-: A 37-year-old woman presents to the emergency room after falling down some stairs at work. She reports no pre-monitory symptoms prior to the fall or any loss of consciousness. Recently she has noticed persistent symptoms of fatigue, muscle weakness, and unexpected weight gain. She has no past medical history and is not taking any medications.On examination, the blood pressure is 164/92 mm Hg and heart rate is 84/min. There are multiple skin bruises, facial fullness, and truncal obesity with red "stretch marks." Muscle strength in the proximal muscles is 4/5 and the reflexes are normal. Which of the following is the most appropriate initial diagnostic test?

1: computerized tomography (CT) scan of the abdomen

2: fasting glucose

3: overnight dexamethasone suppression test

4: electromyogram (EMG) studies

202-: A 25-year-old woman presents with intermittent symptoms of sweating, palpitations, and hunger. During each episode, her glucose level is less than 40 mg/dL. Her insulin level is low and glucagon level is high. Which of the following best describes the hormone function of glucagon?

1: promotes glycogenolysis and gluconeogenesis

2: a carbohydrate in structure

3: effective in lowering blood sugar levels

4: antigenically similar to insulin

203-: Follicular thyroid carcinoma is differenciated with follicular adenoma with

1: Hurthle cells

2: Capsular invasion

3: Clear cells

4: Hyperchromatic nuclei

204-: A 25 year old young woman has recurrent episodes of headache and sweating. Her mother had renal calculi and died after having a neck mass. The physical exaination reveals a thyroid nodule but no clinical sign of thyrotoxicosis. Before performig thyroid surgery, the surgeon should order :

1: Mesurement of thyroid hormones.

2: Serial determinations of serum calcium, phosphorus protein and alkaline phosphatase.

3: 24-hours urine test for 5 hydroxyindoleacetic acid excretion.

4: Serial 24 hours test for catecholamines, metanephrines and vanillylamandelic acid excertion.

205-: A study of patients more than 25 years of age with body mass index above 30, dyslipidemia, hypertension, and fasting glucose averaging 115 mg/ dL is performed. They have adipose tissue abnormalities including increased non-esterified fatty acid release, altered adipokines with decreased adiponectin, greater proinflammatory cytokine release, and diminished peroxisome proliferator-activated receptor gamma (PPARg) function. Which of the following is the best initial therapeutic intervention for these patients?

1: Adrenalectomy

2: Caloric restriction

3: Insulin injection

4: L-Thyroxine

206-: Wof glucocoicoid has significant (max) mineralocoicoid activity

1: Dexamethasone

2: Triamcinolone

3: Hydrocoisone

4: Betamethasone

207-: Sperm motility is increased in

1: Increased temperature

2: Acidic environment

3: Vaginal secretions

4: Seminiferous tubules

208-: Type 1 diabetes mellitus is associated with-

1: Male gender

2: Old age

3: Gestational diabetes

4: HLADR3

209-: Not a feature of Nonketotic hyperosmolar coma-

1: Occurs in Type-2 DM

2: Most commonly in elderly

3: Insidious onset

4: Hyperventilation occurs before coma

210-: All are involved MEN type II A except

1: parathyroid

2: Adrenal

3: Thyroid

4: Pituitary

211-: Acantholysis means

1: Diffuse epidermal hyperplasia

2: Loss of intercellular connections

3: Intercellular edema of the epidermis.

4: Abnormal keratinization

212-: Teriparatide is used in treatment of:

1: Osteoporosis

2: Breast cancer

3: PCOD

4: Hyperthyroidism

213-: Conn's syndrome is associated with all, except -

1: Hypeension

2: Muscle weakness

3: Hypokalemia

4: Edema

214-: Insulin-dependent entry of glucose is seen in

1: Liver

2: Brain

3: Hea

4: Kidney

215-: Sperms acquire motility in

1: Testis

2: Epididymis

3: VAS deferences

4: Seminal vesicles

216-: A 5-yr old boy presents with pubic hair development. He is tall and has increased pigmentation of his genitalia and phallic enlargement. Blood pressure is 130/90 mm Hg. Measurement of which of the following hormones would be most likely to be diagnostic?

1: Increase 17b hydroxyl progesterone

2: Increase cortisol

3: Increase aldosterone

4: Increase 11 deoxycortisol

217-: which one of the following is not the appropriate treatment of hypehyroidism due to subacute thyroiditis?

1: Propylthiouracil

2: Suppoive treatment

3: Subtotal thyroidectomy

4: beta blockers

218-: Which of the following is not an action of growth hormone:

1: Anti insulin effect

2: Increased cailage formation

3: Decreased lipolysis

4: Increased protein synthesis

219-: Which of the following organs is not involved in autoimmune polyendocrine syndrome 2

1: Parathyroid

2: Thyroid

3: Adrenal

4: Pancreas

220-: Which of the following drug helps in delay in absorption of carbohydrates?

1: Acarbose

2: Glipizide

3: Nateglinide

4: Pioglitazone

221-: All of the following are seen in adrenal insufficiency except

1: Hyperkalemia

2: Fever

3: Weight gain

4: Postural hypotension

222-: Most common cause of cervical neoplasia is

1: HPV 6

2: HPV 11

3: HPV 16

4: HPV36

223-: HbA1c reduction is maximum with use of

1: Metformin

2: Anagliptin

3: Voglibose

4: Rosiglitazone

224-: The most impoant regulator of serum 1,25 (OH)2 vitamin D concentration is

1: Serum calcium

2: Serum magnesium

3: Serum 25 (OH) vitamin D

4: Parathyroid hormone

225-: Treatment of Thyroid crisis are all EXCEPT

1: Neomethimazole

2: Propranol

3: Iodine

4: Iodide

226-: Glycemic control in diabetes is best assessed by-

1: HbA1c

2: Urinary glucose

3: Fasting glucose

4: Post prandial glucose

227-: In a chronic smoker which hemoptysis, he also gave a history of hypeension and obesity. Lab data showed raised ACTH levels, which are not suppressed by dexamethasone. The cause of Cushing's syndrome in the patient is -

1: MEN1

2: Pituitary adenoma

3: Adrenal coical adenoma

4: Ectopic ACTH secreting tumor

228-: Ovulation is primarily caused by preovulatory surge of

1: Estradiol

2: Luteinizing hormone

3: Progesterone

4: Follicle stimulating hormone

229-: All of the following are features of pheochromocytoma except-

1: Hypeensive paraoxysm

2: Headache

3: Ohostatic hypotension

4: Wheezing

230-: True about insulin is

1: Anabolic steroid

2: Induce lipolysis

3: Produced by a-cells

4: None

231-: Most common cause of hyperparathyroidism is-

1: Solitary adenoma

2: Chief cell hyperplasia

3: Multiple adenoma

4: Werner's syndrome

232-: Sterols are metabolized to

1: Coenzyme A

2: VIt A

3: Vit D

4: Vit E

233-: Free water clearance is decreased by

1: Vincristine

2: Vinblastine

3: Chlorpropamide

4: Furosemide

234-: A 60 years old male with history of 60-pack years of smoking is now diagnosed to be suffering from carcinoma lung. Histologic evaluation of the tumor revealed small, highly mitotic cells with hyperchromatic nuclei. Which of the following clinical presentation might occur in the patient during the course of illness?

1: Psychological changes

2: Frequent need for blood transfusions

3: Thin limbs and obese trunks

4: Enlarged breasts, increased hair all over the body

235-: Dose of insulin in stable diabetics is reduced in-

1: Thyrotoxicosis

2: Propanolol therapy

3: III trimester of pregnancy

4: CRF

236-: For which is cGMP second messenger?

1: Thyroxine

2: Atrial natriureptic peptide

3: GH

4: Coiosone

237-: Insulin-dependent glucose transpo is through

1: GLUT 2

2: GLUT 3

3: GLUT 4

4: GLUT 1

238-: A 63-year-old man develops edema, and dyspnea on exertion. He has no prior cardiac or renal conditions, and his examination is significant for macroglossia, elevated jugular venous pressure (JVP), hepatomegaly, and 3+ pedal edema. His investigations reveal 3.5 g/d of protein in the urine, anemia, normal fasting glucose, and serum immunoelectrophoresis is positive for a monoclonal immunoglobulin. Which of the following is the most characteristic neurologic finding associated with this condition?

1: peripheral motor and sensory neuropathy

2: spinal cord compression in the lumbar region

3: spinal cord compression in the thoracic region

4: a peripheral neuropathy associated with cerebral manifestations

239-: Cardiopulmonary manifestation of hypehyroidism-

1: Tachycardia

2: Sinus bradycardia

3: Cardiomegaly

4: Low output cardiac failure

240-: Longest acting Insulin among the following

1: Insulin Glargine

2: Insulin Detemir

3: Insulin Degludec

4: NPH

241-: Which level of Prolactin definitely suggest Prolactinoma?

1: >50 mg/L

2: >100 mg/L

3: >150 mg/L

4: >200 mg/L

242-: Which of the following is not administered by intra dermal route?

1: BCG

2: Insulin

3: Mantoux

4: Drug sensitivity injection

243-: A 27-year-old man has surgery for a testicular mass. Histologic sections reveal the mass to be a testicular yolk sac tumor. Which of the substance listed below is most likely to be increased in this patient's serum

1: Acid phosphatase

2: Human chorionic gonadotropin

3: Alkaline phosphatase

4: a-Fetoprotein

244-: Insulin of choice for the treatment of diabetes mellitus is:

1: Regular Insulin

2: NPH insulin

3: Insulin glargine

4: Insulin lispro

245-: Antabuse like effect caused by the oral hypoglycemic drug-

1: Acrabose

2: Chlorpropamide

3: Metaformin

4: Gliclazide

246-: Coisol increase all of the following component except

1: Platelets

2: RBC's

3: Eosinophils

4: Monocytes

247-: A 60-year-old woman with small cell carcinoma of the lung notes rounding of her face, upper truncal obesity, and muscle weakness. Physical examination reveals thin, wrinkled skin, abdominal striae, and multiple purpuric skin lesions. The patient's blood pressure is 175/95 mm Hg. Laboratory studies will likely show elevated serum levels of which of the following hormones?

1: Aldosterone

2: Coicotropin

3: Epinephrine

4: Prolactin

248-: Congenital adrenal hyperplasia, most commonly presents as:

1: Male pseudohermaphroditism

2: Female pseudohermaphroditism

3: True hermaphroditism

4: 46,XY intersex

249-: Which type diabetes is HLA associated-

1: Type I diabetes

2: Type II diabetes

3: Malnutrition related type disease

4: Pregnancy related type diabetes

 

250-: An analogue of Amylin approved for type I / type 2 Diabetes Mellitus is

1: Oral pramilintide

2: Injectable pramilintide

3: Intranasal pramilintide

4: All of the above

251-: Which of the following DPP IV inhibitors does not require dose modification in Chronic kidney disease patients

1: Sitagliptin

2: Vildagliptin

3: Linagliptin

4: All of the above

252-: Osteoporosis may be seen in all except -

1: Hyperparathyridism

2: Hypoparathyridism

3: Thyrotoxicosis

4: Heparin administration

253-: All are features of cushlngs disease except -

1: Central obesity

2: Episodic hypeension

3: Easy bruising

4: Glucose intolerance

254-: A 34-year-old man complains of sudden attacks of dizziness, blurred vision, and excruciating headaches of 4 months in duration. During one of these attacks, his blood pressure was 180/120 mm Hg. The patient's father had been treated for thyroid cancer about 15 years ago. Laboratory studies show normal serum levels of aldosterone, renin, and angiotensin. A 24-hour urinalysis reveals increased metanephrines. Episodic hypertension in this patient is most likely caused by a tumor in which of the following endocrine organs?

1: Adrenal

2: Kidney

3: Parathyroid

4: Pituitary

255-: All are involved in metabolism of vitamin D except

1: Liver

2: Kidney

3: Skin

4: Lungs

256-: All of the following drugs are useful in nephrogenic diabetes insipidus except

1: Amiloride

2: Indomethacin

3: Chlorpropamide

4: Thiazide diuretics

257-: All of the following are Glucocoicoid synthesis Inhibitors except?

1: Metyrapone

2: Mifepristone

3: Etomidate

4: Ketoconazole

258-: All are pas of MEN-1 except

1: Pituatory tumor

2: Parathyroid tumor

3: Pancreatic tumor

4: Medullary carcinoma of thyroid

259-: A 40-year-old woman came with the complaint of restlessness, nervousness, and sleeplessness since 8 months. Her physical examination revealed tremors, warm moist hands, and an enlarged thyroid gland. Her hea rate was 120 beats per minute. What will be her thyroid profile?

1: TSH: <0.1mIU/mL; T3: 20ng/dL; rT3: 5ng/dL; TSI : ++

2: TSH: 0.4mIU/mL; T3: 56ng/dL; rT3: 85ng/dL; TSI : ++

3: TSH: <0.1mIU/mL; T3: 192ng/dL; rT3: 25ng/dL; TSI : ++

4: TSH: 0.4mIU/mL; T3: 100ng/dL; rT3: 120ng/dL; TSI : ++

260-: Nelson's syndrome is most likely seen after -

1: Hypophysectomy

2: Adrenalectomy

3: Thyroidectomy

4: Orchidectomy

261-: Which of the following drugs does not cause hypoglycemia:

1: Acarbose

2: Insulin

3: Glimepride

4: Nateglinide

262-: A 52-year-old construction worker had an 8-month history of muscle weakness, easy bruising, backache, and headache. Physical examination revealed cutaneous hyperpigmentation, pronounced truncal obesity, purple striae with a "buffalo hump," and blood pressure of 180/100 mm Hg. Laboratory analyses revealed elevated concentrations of circulating coisol with an absence of a circadian rhythm. With high-dose administration of a glucocoicoid agonist, plasma coisol levels reduced significantly. What is the most likely cause of these symptoms?

1: Adrenocoical hypersecretion of pituitary origin

2: Congenital adrenal hyperplasia

3: Ectopic ACTH production in the lung

4: Primary hyperaldosteronism

263-: A 14-year-old boy presents for a pre-summer camp physical examination. Routine urinalysis discloses 3+ glucosuria. He admits to thirst and frequent urination, accompanied by a 4-kg (9-lb) weight loss over past few months. His parents note that he had a flu-like illness 5 months ago. His blood glucose is 220 mg/dL. Which of the following best explains the pathogenesis of hyperglycemia in this patient?

1: Excess dietary glucose

2: Increased peripheral insulin uptake

3: Irregular insulin secretion

4: Islet cell destruction

264-: For diagnosis of diabetes mellitus, Fasting blood glucose level should be more than-

1: 126mg\/dl

2: 140mg\/dl

3: l00mg\/dl

4: 200mg\/dl

265-: Which of the following is the least common cause of ambiguous genitalia in a female child

1: Fetal placental steroid sulfatase deficiency

2: Fetal placental aromatase deficiency

3: Congenital adrenal hyperplasia

4: WNT-4 gene mutation

266-: Diabetes mellitis diagnosed when -

1: Fasting blood glucose is 100 and post prandial 140

2: Fasting blood sugar 125 and 2 hour postprandial blood sugar is 199

3: Insulin level.....

4: HbA1c > 6.5%

267-: Progesterone has how many carbons

1: 18

2: 19

3: 20

4: 21

268-: Increased glycolysis and decreased gluconeogenesis

1: Insulin

2: Glucagon

3: Epinephrine

4: Coisol

269-: Which is a long acting insulin-

1: Lispro

2: Aspart

3: Glargine

4: Glulicine

270-: Oral contraceptive failure occurs with

1: Cimetidine

2: Rifampicin

3: Morphine

4: Ethanol

271-: Which of the following is a calcium sensiting agent?

1: Levosimendan

2: Cinacalcet

3: Alendronate

4: Teriparatide

272-: All the following statements about alpha-glucosidase inhibitors are true except:

1: Reduces intestinal absorption of carbohydrates

2: Effective in both type 1 and 2 diabetes

3: Hypoglycemia is a common and serious side effect

4: Can be used with other oral hypoglycemic agents

273-: A 55-year-old obese woman (body mass index =33 kg/m2) complains of declining visual acuity Funduscopic examination shows peripheral retinal microaneurysms. Urinalysis reveals 3+ proteinuria and 3+ glucosuria. Serum albumin is 3 g/dL, and serum cholesterol is 350 mg/dL. These clinicopathologic findings are best explained by which of the following mechanisms of disease?

1: Anti-insulin antibodies

2: Increased peripheral insulin uptake

3: Irregular insulin secretion

4: Peripheral insulin resistance

274-: PTH does not cause:

1: Maintains serum Ca2+

2: Ca2+ retention

3: Decreased PO43- excretion

4: May cause osteolysis

275-: A 25-year-old lady has put on weight and has oligomenorrhea followed by amenorrhea for 8 months. The blood pressure is 160/100 mm of Hg. Which of the following is the most appropriate investigation?

1: Serum electrolytes

2: Plasma cortisol

3: Plasma testosterone and USG

4: T3, T4 and TSH

276-: Dihydrotestosterone acts on

1: Pituitery

2: Extermal genitalia

3: Internal genitalia

4: Testis

277-: In SIADH all are found except-

1: Normlaurine

2: Hyponatremia

3: Hypotonic urine

4: Hyperuricemia

278-: A 19-year-old woman presents with primary amenorrhea. Her physical examination is normal, and she has female sex characteristics and breast development. The only abnormality is the absence of body hair. Genetic testing reveals an XY chromosome pattern. Which of the following mechanisms is most likely to explain her phenotypic pattern and amenorrhea?

1: estrogen receptor defect

2: excess hormone production

3: androgen receptor defect

4: decreased hormone production

279-: Tumor lysis syndrome is associated with all of he following laboratory feature except -

1: Hyperkalemia

2: Hypercalcemia

3: Hyperuricemia

4: Hyperphosphatemia

280-: All are causes of hypercalcemia, except:

1: Lithium therapy

2: Chronic renal failure

3: Multiple myeloma

4: Vitamin A intoxication

281-: Most common cause of Neonatal Hypothyroidism is

1: Throid dysgenesis

2: Transplacental maternal thyroid antibodies

3: Inherited genetic disorders

4: Decreased thyroglubin

282-: Adrenal cortex of fetus mainly releases which hormone during early part of pregnancy?

1: Cortisol

2: Corticosterone

3: Progesterone

4: DHEAS

283-: Intrauterine growth of fetus is affected by

1: Growth hormone

2: Insulin

3: Thyroxine

4: Glucocoicoids

284-: A 22-year-old female came with the chief complaint of significant weight loss and secondary amenorrhea. She has a high-intensity exercise regimen, is preoccupied with food, and seems to have an irrational fear of gaining weight. Decreased production of which of the following hormones leads to amenorrhea in anorexia nervosa?

1: Gonadotropin releasing hormone (GnRH)

2: Progesterone

3: Human chorionic gonadotropin (hCG)

4: Estradiol

285-: Drug used in type DM 1 apa from insulin?

1: Glibenclamide

2: Metformin

3: Pramlintide

4: Empagliflozin

286-: Which of the following method is sensitive for easy assessment of hormonal activity?

1: Chromatography

2: ELISA

3: Radio-immunoassay

4: Cytochemistry assay

287-: Which ofthe following statements is true regarding type 1 diabetes mellitus -

1: Family history is present in 90% cases

2: Dependent on insulin to prevent ketoacidosis

3: Time of onset is usually predictable

4: Autoimmune destruction of beta cells occur

288-: Pseudo hermaphroditism in a female child is most commonly due to:

1: 21-hydroxylase deficiency

2: 17-hydroxylase deficiency

3: 11-hydroxylase deficiency

4: 3-hydroxylase deficiency

289-: All are seen in DKA except,

1: Tachypnoea

2: Dehydration

3: Bradycardia

4: Abdominal pain/tenderness

290-: Which of the following is fastest calcium lowering agents

1: Calcitonin

2: Plicamycin

3: Etidronate

4: Zoledronate

291-: Diagnostic feature of parathyroid carcinoma is-

1: Cytology

2: Metastasis

3: Clinical features

4: All

292-: Which thyroid carcinoma has amyloid deposition?

1: Anaplastic

2: Follicular

3: Medullary

4: Papillary

293-: Drug used in type DM 1 apa from insulin

1: Glibenclamide

2: Metformin

3: Pramlintide

4: Empagliflozin

294-: Phosphaturia is seen in the following except

1: Metabolic alkalosis

2: Lead, cadmium or uranium poisonings

3: Hypervitaminosis D

4: Hyperparathyriodism

295-: All of the following are known to cause hyperprolactenemia except -

1: Methyldopa

2: Phenothiazines

3: Bromocriptine

4: Betoclopramide

296-: Which of the following is not a feature of hypothyroidism ?

1: Mental retardation

2: Large head

3: Calf muscle hyperophy

4: Microcephaly

297-: An obese NIDDM patient present with FBS=180 mg% and PPBS=260 mg% Management include-

1: Glibenclamide

2: Diettherapy+exercise

3: Dietmerapy+exercise+metforrnin

4: Insulin

298-: Hyponatremia may be seen in all of the following conditions except -

1: Mucoviscidosis

2: SIADH

3: Diabetes insipidus

4: Adrenal hyperplasia

299-: All of these is not a non contraceptive use of Levonorgestrel

1: Endometriosis

2: Pro menstrual tension

3: Complex endometrial hyperplasia

4: Emergency contraception

300-: Treatment of Hypercalcemia -

1: Calcitonin

2: Gallium nitrate

3: Ohophosphate

4: Thyroxin

301-: Pro-opimdanocain (POMC) releases all of the following except

1: ACTH

2: MSH

3: B2 -endorphins

4: FSH

302-: High calcium intake leads to:

1: Milk-Alkali syndrome

2: Cardiomyopathy

3: Osteoporosis

4: Osteopetrosis

303-: Which of the thyroid malignancy is associated with amyloidosis

1: Papillary carcinoma

2: Follicular carcinoma

3: Medullary carcinoma

4: Anaplastic carcinoma

304-: RamkaliBai, a 35 year old female presented with one year history of menstrual irregularity and galactorrhoea. She also had off and on headache her examination revealed bitemporal superior quadrantopia. Her fundus examination showed primary optic atrophy. Which of the following is most likely diagnosis in this case-

1: Craniopharyngioma

2: Pituitary macroadenoma

3: Ophthalamicicaaneurysm

4: ChiasmalGlioma

305-: True regarding Denosumab

1: Strong antiresorptive action

2: Binds RANKL & prevents its binding to receptor RANK

3: Atypical femoral fracture as one of the adverse effects

4: All of the above

306-: Effect of Potassium ionophore valinomycin on beta cells of pancreas is?

1: Decrease the secretion of insulin

2: Insulin secretion increases

3: C-peptide secretion increases

4: Increase secretion of both insulin and C- peptide

307-: The drug treatment in a female with complaints of occasional amenorrhea and milk ejection 5yrs after her last baby is born

1: Cabergoline

2: Atosiban

3: Methysergide

4: Ergotamine

308-: Increased alkaline phosphate are in seen in-

1: Multiple myeloma

2: Primary hyperparathyroidism

3: Chronic renal Mure

4: Osteoporosis

309-: insulin decreases the activity of:

1: c-AMP dependent protein kinase

2: HMG CoA-reductase

3: Phosphodiesterase

4: Acetyl CoA-carboxylase

310-: Female pseudohermaphroditism - M.C cause-

1: Maternal ovarian tumor

2: Materan drug intake

3: CAH

4: Chromosomal abnormalities

 

311-: Polyuria is urine output more than _____ lit/day

1: 1

2: 2

3: 3

4: 4

312-: Which hormone does not increase in burns?

1: Coisol

2: Glucagon

3: LH

4: Epinephrine

313-: The regimen used for postcoital emergency contraception is

1: Levonorgestrel 0.5 mg + ethinylestradiol 0.1 mg taken twice 12 hour apa

2: Mifepristone 600 mg single dose

3: Levonorgestrel 0.75 mg taken twice 12 hour apa

4: All of the above

314-: Thyroglossal cyst is associated with which type of thyroid Ca?

1: Papillary

2: Medullary

3: Anaplastic

4: Lymphoma

315-: which of the following Is not an adverse effect of growth hormone therapy?

1: Carpal tunnel syndrome

2: Hypoglycemia

3: Intracranial hypeension

4: Slipped femoral epiphysis

316-: Which is not a test for diabetes mellitus -

1: Fasting blood sampling

2: Random blood sampling

3: D-xylose

4: Oral glucose tolerance test

317-: Hypercalcemia is seen in all except-

1: Lithium

2: Multiple myeloma

3: Loop diuretics

4: HypervitaminosisD

318-: A 29yr old women comes to clinic because of heat intolerance, excess sweating, thinning of hair. She had family H/O of autoimmune disease, she is 8 wks pregnant and has had no other issues during pregnancy. Medical H/O includes hypehyroidism. Lab studies are positive for thyroid stimulating immunoglobulin. Wof drug is most appropriate for treatment

1: Methimazole

2: Propylthiouracil

3: Radioactive iodine

4: Oxytocin

319-: In treatment of hypothyroidism, thyroxine is preferred over levothyroxine:

1: High affinity for receptors

2: Long half life

3: Faster acting

4: Can be made with recombinant DNA technology

320-: Insulin stimulates all except

1: Glycolysis

2: Lipolysis

3: Protein synthesis

4: Lipogenesis

321-: Hyper alodosteronism causes All except

1: Hypernatremia

2: Hypokalamia

3: Metabolic acidosis

4: Hypeension

322-: Fastest acting antithyroid drug is

1: KI

2: Propylthiouracil

3: Carbimazole

4: Cholestyramine

323-: Which malignancy develops in long standing goiter is

1: Follicular

2: Papillary

3: Medullary

4: None

324-: A 28-year-old woman with bipolar disorder is taking lithium to control her symptoms. A test of her lithium level reveals a value of 2.3 mEq/L (normal range 0.6-1.25 mEq/L). Which of the following side effects is most likely to occur?

1: mania

2: depression

3: tremor

4: hyponatremia

325-: Thyroid carcinoma associated with hypocalcaemia is-

1: Follicular carcinoma

2: Medullary carcinoma

3: Anaplastic carcinoma

4: Papillary carcinoma

326-: Hurthle cells seen in -

1: Papillary carcinoma

2: Hashimoto Thyroiditis

3: Granulomatous thyroiditis

4: Thyroglossai cyst

327-: What is the impact on foetus in case of Indomethacin used in third trimester?

1: PDA

2: Early closure of PDA

3: VSD

4: ASD

328-: Orchidopex is done in cases of undescended testes at the age of

1: Neonate

2: 1-2 yrs

3: 5 yrs

4: Pubey

329-: In congenital adrenal hyperplasia, deficient enzyme is - most womon-

1: 11 hydroxylase deficiency

2: 21 a hydroxylase deficiency

3: 3a hydroxylase deficiency

4: 17a hydroxylase deficiency

330-: A 23-year-old man is being evaluated for the new development of a nodule in his neck. Physical examination finds a 3.5-cm thyroid nodule. The lesion is removed surgically, and histologic sections reveal groups of poorly differentiated tumors cells within a stroma with large areas of amyloid. This familial form of this type of malignancy is associated with abnormalities of which of the following protooncogenes

1: ras

2: ret

3: myc

4: erf

331-: Which of the following is the agent of choice for treating thyrotoxicosis during pregnancy ?

1: Carbimazole

2: Propylthiouracil

3: Methimazole

4: Radioactive I131

332-: Brown tumor of bone is seen in -

1: Hyperparathyroidism

2: Hypoparathyroidism

3: Hypo-thyroidism

4: Hyperthyroidism

333-: A 33-year-old man is complaining of feeling thirsty all the time and passing more urine than usual. His physical examination is normal, except for a JVP at the sternal angle. His serum sodium is 150 mEq/L, glucose 120 mg/dL, and osmolality 315 mOsm/kg. The urine sodium is 20 mE/L and osmolality 260 mOsm/kg. Which of the following drugs is most likely to cause this disorder?

1: lithium

2: cyclophosphamide

3: barbiturates

4: nicotine

334-: Increasedserumcakaumisseeninallexcept-

1: Myxedema

2: Myxedema

3: Sarcoidosis

4: Primary hyperparathyroidism

335-: Which of the following is amylin analogue-

1: Exenatide

2: Sitagliptin

3: Pramlintide

4: Glucomannan

336-: All are true about Hashimoto thyroiditis Except

1: Myoclonus

2: Seizures

3: Steroid responsive encephalopathy

4: EEG is normal

337-: Which of the following is not an insulin analogue?

1: Insulin glargine

2: Insulin lispro

3: Actrapid

4: Insulin aspart

338-: Metyrapone inhibits-

1: 11-B-hydroxylase

2: 21-B-hydroxylase

3: Both

4: None

339-: Most common route of administration of insulin:

1: Intramuscular

2: Subcutaneous

3: Intravenous

4: Intradermal

340-: Primary ciliary dyskinesia is associated with all except -

1: Sterility in males

2: Hypothyroidism

3: Sinusitis

4: Respiratory infection

341-: Prevention or treatment of osteoporosis in post- menopausal women may be acheived by all EXCEPT

1: Estrogen and progesterne hormone replacement therapy

2: Calcium and vitamin D supplementation

3: Bisphosphonates

4: Multivitamins

342-: Drug given for acute gout:

1: Aspirin

2: Indomethacin

3: Febuxostat

4: Allopurinol

343-: Zellballen pattern is seen in?

1: Pheochromocytoma

2: Schwannoma

3: Acoustic neuroma

4: Transistional renal cell carcinoma

344-: Last step of spermatogenesis takes place in

1: Lyedigs cells

2: Interstitial cellis

3: Seoli cells

4: Stromal cells

345-: All of the following glucocoicoids lack mineralocoicoid activity,except

1: Beclomethasone

2: Triamcinolone

3: Prednisolone

4: Dexamethasone

346-: Orphan annie eye nuclei appearance is characteristic of -

1: Papillary carcinoma thyroid

2: Carcinoma pituitary'

3: Paraganglioma

4: Meningioma

347-: A 15-year-old girl has been losing weight and exercising vigorously. She feels overweight and wants to lose more weight. On examination, she is thin with muscle wasting. Which of the following physical signs is also suggestive of the diagnosis?

1: salivary gland enlargement

2: coarse body hair

3: diarrhea

4: tachycardia

348-: The best marker for hypehyroidism -

1: T3

2: T4

3: TSH

4: Thyroglobulin

349-: A 20-year-old male presents with weight loss, heat intolerance, bilateral exophthalmos, a lid lag, sweating, and tachycardia. These symptoms are due to an increased production and secretion of a hormone that is derived from which one of the following?

1: Cholesterol

2: Dopamine

3: Tryptophan

4: Tyrosine

350-: A 63-year-old asymptomatic woman is seen in the clinic for investigation of a persistently elevated alkaline phosphatase (ALP) level. The elevated ALP is an isolated finding and the remaining liver enzymes are normal. She reports no abdominal symptoms suggestive of biliary colic or hepatitis.On physical examination, the vital signs are normal, she is not icteric, the heart sounds are normal and the lungs are clear. The abdomen is soft and the liver span is 12 cm in the mid- clavicular line.X-rays of the pelvis show multiple porotic and sclerotic lesions with characteristic whorls of trabeculation. Her excretion of urinary hydroxyproline is also elevated. Which of the following is the most likely diagnosis?

1: rickets and Osteomalacia

2: osteogenic sarcoma

3: vitamin D deficiency

4: Paget disease of bone

351-: Bromocriptine is indicated in the following conditions except -

1: Prolactin -secreting adenomas

2: Prolactin deficiency

3: Amenorrhea - Galactorrhea

4: Acromegaly

352-: In a patient of primary hypothyroidism, the hormonal profile will read -

1: Low T3, low T4, low TSH

2: Low T3, low T4 high TSH

3: High T3, high T4, high TSH

4: LowT3, low T4, normal TSH

353-: The commonest cause of congenital hypothyroidism is -

1: Thyroid dysgenesis

2: Pendred syndrome

3: Defective release

4: Deficiency of deiodinase

354-: Raised serum alkaline phosphatase is seen in all, EXCEPT-

1: Paget's disease

2: Multiple myeloma

3: Osteomalacia

4: Hypehyroidism

355-: Which of the following is a feature of primary adrenal coical failure ?

1: Hypopigmentation

2: Sodium and water depletion

3: Hypeension

4: Hypokalemia

356-: Treatment of choice for Renal osteodystrophy -

1: Phosphorus

2: Olendronate

3: Calcium restriction

4: Phosphate binder

357-: A 42-year-old woman has noted increasing fullness in her neck for the past 7 months. On physical examination, her thyroid gland is diffusely and asymmetrically enlarged and nodular. There is no lymphadenopathy. She undergoes thyroidectomy. Gross examination of the thyroid shows a multicentric thyroid neoplasm; microscopically, the neoplasm is composed of polygonal-to spindle-shaped cells forming nests and trabeculae. There is a prominent, pink hyaline stroma that stains positively with Congo red. Electron microscopy shows varying numbers of intracytoplasmic, membrane-bound, electron-dense granules. Immunohistochemical staining for which of the following antigens is most useful for the diagnosis of this neoplasm?

1: Calcitonin

2: CD3

3: Cytokeratin

4: Estrogen receptor

358-: Mineralocoicoid receptors are present in all except

1: Hippocampus

2: Colon

3: Liver

4: Kidney

359-: Neutrophilic leukocytosis, lymphopenia, and eosinopenia are most likely associated with which of the following disorders?

1: Endotoxic shock

2: Typhoid fever

3: Whooping cough

4: Cushing syndrome

360-: In which of the following ways does aldosterone react with renal tubular cells?

1: Increases transpo of ENaCs from the cytoplasm to the cell membrane

2: Binds to steroid receptor inside the nucleus of renal tubular cells

3: Binds to ENaC's on the cell membrane and increase Na+ transpo

4: Binds to G-protein coupled receptors on the cell surface

361-: True about glucagon

1: Hyperglycemia stimulate its release

2: Has no effect in muscle glycogenolysis

3: Stimulates glycolysis

4: Inhibits gluconeogenesis

362-: 39 year old obese patient present with features of UTI and RBS-200 mg/dl, urine shows pus cells, true about therapy is-

1: Glipizide is D.O.C.

2: Insulin can be given

3: Ciprofloxacin

4: Test for micro albumin to be bone

363-: Koenen&;s tumour is seen in

1: Tuberous sclerosis

2: Neurofibramatosis

3: VHL syndrome

4: Turcot syndrome

364-: Hypoglycemia in neonates occurs in blood glucose less than

1: 20 mg%

2: 40 mg%

3: 60 mg%

4: 10mg%

365-: True statement about primary hyperparathyroidism-

1: Adenoma commonest cause

2: serum calcium

3: Surgery if biochemical finding is abnormal in asymptomatic patient

4: MIBG isotope is useful in localization of tumor

366-: Efferent pathway for milk ejection reflex

1: Prolactin

2: Oxytocin

3: ACTH

4: Growth hormone

367-: Which of the following is a feature of primary hyperparathyroidism ?

1: Reversible growth of parathyroid gland

2: Irreversible growth of parathyroid gland

3: Hypercalcemia and hyperphosphatemia

4: Hypocalcemia and hyperphosphatemia

368-: A patient presents with Endocrinopathy, fibrous dysplasia of bone and hyperpigmentation. Diagnosis is?

1: McCune Albright syndrome

2: Addison's disease

3: Alagille syndrome

4: Lynch syndrome

369-: Which of the following drug promotes the release of endogenous insulin?

1: Acarbose

2: Glipizide

3: Metformin

4: Pioglitazones

370-: Which of the following indications for hospitalization is the most appropriate for patients with eating disorders?

1: when body weight is less than 90% of expected

2: when body weight is less than 75% of expected

3: when electrolyte disturbances occur

4: when body weight is less than 60% of expected

371-: Type l MEN involves all, except -

1: Pancreas

2: Adrenal

3: Pituitary

4: Parathyroid

372-: Most common type of pituitary adenoma?

1: GH secreting tumour

2: ACTH secreting tumor

3: TSH secreting tumor

4: Prolactinoma

373-: A 74-year-old woman is admitted to the hospital in an obtunded condition. Her temperature is 37deg C, pulse is 95/ min, respirations are 22/min, and blood pressure is 90/60 mm Hg. She appears dehydrated and has poor skin turgor. Her serum glucose level is 872 mg/dL. Urinalysis shows 4+ glucosuria, but no ketones, protein, or blood. Which of the following factors is most important in the pathogenesis of this patient's condition?

1: Autoimmune insulitis

2: Glucokinase gene mutation

3: HLA-DR3/HLA-DR4 genotype

4: Peripheral insulin resistance

374-: Which one of the following investigations is most sensitive for early diagnosis of diabetic nephropathy-

1: Serum creatinine level

2: Creatinine clearance

3: Glucose Tolerance Test

4: Microalbuminuria

375-: Recombinant human insulin is made by -

1: CDNA from any eukaryote cell

2: Genome of any eukaryote

3: CDNA of pancreatic cell

4: Genome of pancreatic cell

376-: Hyperkalemia stimulates secretion of

1: ADH

2: Secretin

3: Aldosterone

4: Parathormone

377-: Which of the following decreases thyroid hormone on a long term basis ?

1: T4

2: I131

3: Calcitriol

4: Fluorouracil

378-: Which of the following drugs causes hypothyroidism?

1: Haloperidol

2: Clozapine

3: Lithium carbonate

4: Amoxapine

379-: Extra-adrenal pheochromocytoma secretes -

1: Norepinephrine

2: Epinephrine

3: Metanephrine

4: Dopamine

380-: A tentatively female newborn has ambiguous genitalia. What appears to be a vagina is associated with a significantly enlarged clitoris resembling a penis. Other findings include

hyponatremia, hyperkalemia, and hypotension. Deficiency of which of the following is suggested by these findings?

1: 11-Hydroxylase

2: 17-Hydroxylase

3: 21-Hydroxylase

4: Amylin

381-: Excessive secretion of ACTH causes:

1: Cushing's syndrome

2: Addison's disease

3: Myxoedema

4: Thyrotoxicosis

382-: Ghrelin stimulates the release of which hormone?

1: PTH

2: LH

3: Prolactin

4: Growth hormone

383-: Magnesium deficiency is cause by-

1: Prolonged aificial ventilation

2: Small bowel resection

3: Renal disease

4: Liver cirrhosis

384-: All are used in treatment of hypercalcemia ,except-

1: Phosphate

2: Mithramycin

3: Vitamin D in high dose

4: Any of the above

385-: What is effect of coisol on metabolism?

1: | Neoglucogenesis

2: | Lipogenesis

3: | Proteolysis

4: Proteolysis

386-: A 35-year-old woman presents with fatigue, weakness, and weight gain. Her blood pressure is 155/90 mm Hg, pulse 80/min, and there is central obesity with skin striae. Investigations are shown in Table given below. Which of the following is the most likely diagnosis?Table given below is the case work-up NormalPatientPlasma ACTH pg/mL< 150< 50Plasma cortisol m/dL1735Urine 17-OH mg/24 h2 to 1025Urine 17-Ks mg/24 h5 to 1510Urine 17-OH response to:ACTH IVIncreasex5No responseDexamethasone 0.5 mg< 3.0No response2.0 mg< 3.0No responseMetyrapone 750 mgIncreasex 2No responseAbbreviation: ACTH--adrenocorticotropic hormone

1: adrenal hyperplasia secondary to hypothalamic dysfunction

2: adrenal adenoma with complete autonomy

3: exogenous steroids, iatrogenic

4: pituitary tumor

387-: DM+HTN+Obesity-Drug Of Choice

1: Glibenclamide

2: Metformin

3: Vildagliptin

4: Empagliflozin

388-: Which of the following is not true about diabetes mellitus?

1: Free fatty acids in the blood increase the risk of DM

2: Patients may have high insulin levels in some conditions

3: Commonest cause of death is renal failure

4: Regular physical activity improves the glycemic control

389-: The best marker to diagnose thyroid related order is-

1: T3

2: T4

3: TSH

4: Thyroglobulin

390-: DOC in adrenal insufficiency?

1: Hydrocoisone

2: Adrenaline 2012-13

3: Dexamethasone

4: Fludrocoisone

391-: Chemically, oestrogens are characterised by

1: Absence of O2 at D-17

2: Aromatic character at D-ring

3: Absence to methyl group at C-10

4: A 21-carbon steroid skeleton

392-: Which of the following is a rapid acting insulin?

1: Glargine

2: Detemir

3: Lente

4: Glulisine

393-: True about thyroid storm -

1: Bradycardia

2: Hypehermia

3: Hypercalcemia

4: Hypotension

394-: Selenocysteine residues are present in

1: Pyruvate carboxylase

2: Xanthine oxidase

3: Deiodinase

4: Lysyl oxidase

395-: Which of the following drugs does not cause hypoglycemia

1: Acarbose

2: Insulin

3: Glimepride

4: Nateglinide

396-: Causes of precocious puberty in girls are all except:

1: Hypothalamic hamartoma

2: Hypothyroidism

3: McCune Albright syndrome

4: Prader Willi syndrome

397-: Following drug is aromatase inhibitor:

1: Raloxifine

2: Tamoxifen

3: Leuprolide

4: Letrozole

398-: DeQuervains thyroiditis is also known as

1: Granulomatous thyroiditis

2: Struma lymphomatosa

3: Acute thyroiditis

4: Hashimotos thyroiditis

399-: Which thyroid cancer Occurs after radiation exposure?

1: Follicular

2: Papillary

3: Medullary

4: Anaplastic

400-: A family brings their 82-year-old grandmother to the emergency room stating that they cannot care for her anymore. They tell you, "She has just been getting sicker and sicker." Now she stays in bed and won't eat because of abdominal pain. She is too weak to go to the bathroom on her own. Her symptoms have been worsening over the past year, but she has refused to see a doctor. The patient denies symptoms of depression. Blood pressure is 90/54 with the patient supine; it drops to 76/40 when she stands. Heart and lungs are normal. Skin examination reveals a bronze coloring to the elbows and palmar creases. What laboratory abnormality would you expect to find in this patient?

1: Low serum Ca+

2: Low serum K+

3: Low serum Na+

4: Normal serum K+

401-: Steroids are used in all of the following conditions except

1: Chronic lymphoid leukemia

2: Hodgkin's lymphoma

3: Multiple myeloma

4: Kaposi sarcoma

402-: The 40-year-old woman shown below complains of weakness and amenorrhea. She has hypertension and diabetes mellitus. The clinical findings may be explained by

1: Pituitary tumor

2: Adrenal tumor

3: Ectopic ACTH production

4: Any of the above

403-: A 54-year-old man comes to the emergency room with severe pain in his right toe. He has had less severe episodes in the past, which he always treated with pain medications. The toe is red, inflamed, and exquisitely sensitive to movement. Needle aspiration of the toe confirms uric acid crystals, and he is treated with oral indomethacin (NSAID). One month later, he remains symptom free, and allopurinol is recommended for prevention of this condition. Which of the following is the most likely mechanism of action of allopurinol?

1: inhibition of xanthine oxidase

2: solubilization of uric acid

3: reactivity with hypoxanthine

4: anti-inflammatory effect on joint tissue

404-: Clinical features of "hypothyroidism" in a newborn are all except:

1: Sluggishness +++

2: Large tongue

3: Large posterior fontanel

4: Mental retardation

405-: Two regarding use of Bromocriptine for suppression of lactation includes

1: It can cause deep vein thrombosis

2: It can cause hypotension

3: Metaclopramide potentiates the action of Bromocriptine

4: It is given for 1 week only

406-: A 58-year-old man with a long-standing history of type 2 diabetes mellitus suffers a massive hemorrhagic stroke and expires. Examination of the pancreas shows hyalinization of many islets of Langerhans. Which of the following characterizes the material within the islets of Langerhans?

1: Amyloid

2: Collagen type IV

3: Fibrin

4: Fibronectin

407-: Cause of nephrocalcinosis in granulomatous ds -

1: Increased absorption

2: Increased conversion to 1,25 OH

3: Dystrophic calcification

4: Mutation in calcium sensing receptor

408-: Oral contraceptive failure can occur with:

1: Ketoconazole

2: Aminoglutethimide

3: metyrapone

4: Glucocoicoids

409-: A 35-year-old man has had recurrent attacks of abdominal pain and proximal motor neuropathy since puberty. The episodes are precipitated by infections and certain medications. During one of the attacks, the plasma porphobilinogen levels were increased. Which of the following medications is not considered safe in patients with this condition?

1: chlorpromazine

2: sulfonamide antibiotics

3: penicillin and derivatives

4: narcotics

410-: Weight gain is seen in all, EXCEPT:

1: Phaeochromocytoma

2: Insulinoma

3: Myxoedema

4: Cushing's disease

411-: Aldosterone mainly acts upon

1: PCT

2: Loop of Henle

3: Glomerulus

4: Distal renal tubule

412-: True about function of Angiotensin ll

1: Constriction of afferrent aeriole

2: Autoregulation of GER

3: Secreted from endothelial

4: Release aldosterone

413-: Long term ingestion of steroids lead to all of the following except

1: Avascular necrosis of Head of femur

2: Cataract

3: Glaucoma

4: Growth retardation

414-: 1st response to hypoglycemia

1: Increased insulin

2: Increased glucagon

3: Increased coisol

4: Increased nor epinephrine

415-: Lesion of which hypothalamic nuclei leads to loss of circadian rhythm

1: Dorsomedial

2: Ventromedial

3: Supraoptic

4: Suprachiasmatic

416-: Which of the following is most reliable feature of malignant transformation of pheochromocytoma?

1: Presence of mitotic figures

2: Presence of metastasis to other organs

3: Vascular/ capsular invasion

4: All of the above

417-: A 32-year-old woman presents to the clinic for evaluation of symptoms of heat intolerance, palpitations, diarrhea, weakness, and 10 lb weight loss. The symptoms started gradually but are worse over the past 1 week. She has no other medical history and is not taking any medications. Her family history is negative for thyroid diseases.On physical examination, her blood pressure is 90/60 mmHg, heart rate is 110/min, and she has a fine tremor in her hands. The TSH level is suppressed and T3 and T4 are elevated. Which of the following is most likely to precipitate this condition?

1: propylthiouracil administration (PTU)

2: high-dose prednisone therapy

3: beta-adrenergic blockade

4: pneumonia

418-: Which of the following substances acts to increase the release of Ca2+ from endoplasmic reticulum?

1: Inositol triphosphate

2: Parathyroid hormone

3: 1,25 dihydroxy cholecalciferol

4: Diacylglycerol

419-: Aldose reductase drugs are useful in

1: Cataract

2: Diabetes mellitus

3: Hereditary fructose intolerance

4: Essential fructosuria

420-: Drug used for sexual arousal is?

1: SSRI

2: Beta blocker

3: Alfa 2 antagonist

4: Alfa 1 antagonist

421-: Rarely indicates organic diseaseFor the above causes of sexual dysfunction, select the most likely clinical feature.

1: loss of sexual desire

2: failure of erection with absent nocturnal penile tumescence (NPT)

3: absence of emission

4: absence of orgasm with normal libido and erectile function

422-: A 27-year-old female came for treatment of infertility to OPD; bromocriptine was prescribed. What could be the possible reason?

1: Hyperprolactinemia

2: PCOD

3: Hypogonadotropic hypogonadism

4: PID

423-: Oral incretin analogue

1: Semaglutide

2: Dulaglutide

3: Exenatide

4: Liraglutide

424-: Which drug is essential in Sheehan's syndrome-

1: Estrogen

2: Coisone

3: Thyroxin

4: Growth hormone

425-: Bisphoshonates act by

1: Increasing the Osteoid formation

2: Increasing the mineralization of Osteoid

3: Decreasing the osteoclast mediated resorption of bone

4: Decreasing the parathyroid hormone receptors

426-: Hypercalcemia is caused by all except

1: Hyperparathyroidism

2: Secondary bone metastasis

3: Thyrotoxicosis

4: Tamoxifen

427-: Brown tumor is seen with:

1: Hyperparathyroid ism

2: Hypoparathvroidism

3: Hypothyroidism

4: Hyperthyroidism

428-: Gynecomastia in neonate is seen due to:

1: Mother's estrogen

2: Mother's progesterone

3: GnRH

4: Gonadotropins

429-: Adrenogential syndrome is most commonly caused by?

1: 21 a hydroxilase deficiency

2: 17 a hydroxilase deficiency

3: 3 b hydroxilase deficiency

4: Steroid sulfatase deficiency

430-: Siuins are associated with

1: Memory

2: Vision

3: Metabolism

4: Olfaction

431-: Which finding would be present following selective destruction of Seoli cells?

1: Increased plasma testosterone levels

2: Increased plasma inhibin levels

3: Increased plasma luteinizing hormone (LH) levels

4: Increased plasma follicle-stimulating hormone (FSH) levels

432-: Hurthle cells are found in -

1: Medullary carcinoma thyroid

 

2: Papillary carcinoma thyroid

3: Follicular adenoma thyroid

4: Pituitary adenoma

433-: Struma ovaril is composed entirely of

1: Mature thyroid tissue

2: Immature thyroid tissue

3: Pimary ovarian carcinoid tissue

4: None of the above

434-: Diabetes is present in all Except

1: Hemochromatosis

2: Ataxia telengeictasia

3: Friedreich's ataxia

4: MND

435-: A 67-year old-woman presents to the clinic for evaluation of numbness in her feet. The symptoms started gradually and are more noticeable now. There is no weakness in her feet or difficulty walking. Her past medical history is significant for Type 2 diabetes for the past 10 years and she currently takes metformin and glyburide. Physical examination confirms sensory loss in the feet to touch and vibration. Which of the following is most characteristic of diabetic neuropathy?

1: it is usually bilateral

2: pain is not a feature

3: it most commonly affects the brain

4: it spares the autonomic system

436-: The Lab ivestigationofpatient shows|T3,|T4, &|TSH.It cannotbe-

1: Primaryhypothyrodism

2: Pan-hypopmuarlsm

3: liverdisease

4: None of the above

437-: Which of the following is TRUE of adrenal suppression due to steroid therapy?

1: It is not associated with atrophy of the adrenal glands

2: It is less likely to occur in patients receiving inhaled steroids

3: It should be expected in anyone receiving >5 mg prednisolone daily

4: Following cessation, the stress response nor-malizes after 8 weeks

438-: Schmidt syndrome includes all of the following except:

1: Adrenal insufficiency

2: Hypothyroidism

3: Type-1 Diabetes Mellitus

4: Chronic Candidiasis

439-: Adult leydig cells are originated from

1: Fetal leydig cells

2: Undifferentiated progenitor cells which appear in testis before bih

3: Undifferentiated progenitor cells which appear in testis after bih

4: All of the above

440-: Waterhouse-Friderichsen Syndrome is

1: Adrenal failure due to rapid withdrawal of steroids

2: Massive adrenal hemorrhage following difficult delivery in neonates.

3: Massive adrenal hemorrhage following disseminated bacterial infection

4: Adrenal crisis in individuals with chronic adrenocoical insufficiency precipitated by any form of stress

441-: A man was diagnosed to have myositis ossificans progressiva at the age of 20 years. He died five years later. What is the most probable cause of his death-

1: Starvation and chest infection

2: Myocarditis

3: Hypercalcemia

4: Hyperphosphatemia

442-: Hyperaldosteronism is characterized by the following except -

1: Hypernatremia

2: Metabolic acidosis

3: Hypokalemia

4: Low plasma rennin levels

443-: Signs and symptoms of uncomplicated pituitary diabetes insipidus can be controlled using -

1: Mannitol

2: Glycerol

3: Desmopressin

4: Ethyleneglycol

444-: Molecule shown in the Illustration is a precursor of:

1: Insulin

2: Glucagon

3: Somatostatin

4: Lipase

445-: Thin limbs, central obesity, fat cheeks, a ruddy complexion, and an elevated blood glucose level.

1: Elevated blood levels of aldosterone and renin resulting from an atherosclerotic plaque in a renal artery.

2: Hyperprolactinemia due to a pituitary tumor.

3: Acromegaly due to a GH-producing tumor that developed in adulthood.

4: Cushing syndrome due to an adrenal tumor.

446-: Which of the following is not steroid -

1: Estrogen

2: Cholic acid

3: Leukotrians

4: Vitamin D

447-: In type 2 DM, increased fasting plasma glucose is predominantly due to

1: Increased hepatic glucose output

2: Decreased peripheral utilization of glucose

3: Decreased insulin secretion

4: Decreased transpo of glucose to tissue

448-: Which of the following is not seen in thyrotoxicosis

1: Palpitation

2: Anxiety

3: Weight loss

4: Menorrhagia

449-: True about cushing's syndrome is -

1: Adrenomedullary hyperplasia in association wift MEN syndrome is common cause

2: Bronchial &Mediastinal carcinoid causes wishing syndrome

3: It is diagnosed by hypokalemia in association wifo increased adrenal secretion

4: It is often fatal due to its coronary and cerebrovascular accidents

450-: All of the following are true about Hashimoto's thyroiditis, except

1: Follicular destruction

2: Increase in lymphocytes

3: Oncocytic metaplasia

4: Orphan Annie eye nuclei

451-: First line drug used for painful diabetic neuropathy is ?

1: Carbamazepine

2: Duloxetine

3: Venlafaxine

4: EMLA

452-: Starvation and Diabetes mellitus can lead to ketosis. Which of the following features are in or of ketosis in diabetes mellitus:

1: Increase in glucagon / insulin ratio, increased cAMP and increased blood glucose

2: Decreased insulin, increased free fatty acid which is equivalent to blood glucose

3: Decreased insulin, increased free fatty acid which is not equivalent to blood glucose

4: Elevated insulin and free fatty acid, equivalent to blood glucose

453-: Regarding furosemide true statement is

1: Acute pulmonary edema is an indication

2: Acts on PCT

3: Mild diuresis

4: Given only by parenteral route

454-: Somatostatin is produced by:

1: A cell

2: B cell

3: D cell

4: F cell

455-: True about Hashimoto's thyroiditis is all except

1: Patient can be hyperthyroid or even hypothyroid

2: Autoimmune disease

3: Commoner in males

4: Antithyroglobulin antibodies are characteristics

456-: For the following causes of sexual dysfunction, select the most likely clinical feature.Can be caused by high prolactin level.

1: loss of sexual desire

2: failure of erection with absent nocturnal penile tumescence (NPT)

3: absence of emission

4: absence of orgasm with normal libido and erectile function

457-: Treatment of lithium Induced diabetes Insipidus -

1: Vasopressin

2: Mineralocoicoid antagonist

3: Amiloride

4: Loop diuretic

458-: GNAS mutation is associated with malignancy of

1: Lactotrophs

2: Somatotrophs

3: Thyrotrophs

4: Coicotrophs

459-: Brown tumour is seen in-

1: Increased ptfcathyroid hormone

2: Increased thyroxine

3: Increase thyroid

4: Increased calcitonin

460-: Bisphosphonates act by

1: Increasing the osteoid formation

2: Increasing the mineralization of osteoid

3: Decreasing the osteoclast mediated resorption of bone

4: Decreasing the parathyroid hormone secretion

461-: Mode of contraception that should be avoided in epilepsy is

1: Oral contraceptive pills

2: Condoms

3: Intrauterine contraceptive devises

4: Post-coital pills

462-: All of the following hormones have receptors on the plasma membrane of target tissues except

1: Thyrotropin

2: Glucagon

3: Estradiol

4: Insulin

463-: A 29-year-old woman complains of nervousness and muscle weakness of 6 months in duration. She is intolerant of heat and sweats excessively. She has lost 9 kg (20 lb pounds) over past 6 months, despite increased caloric intake. She frequently finds her hea racing and can feel it pounding in her chest. She also states that she has missed several menstrual periods over past few months. Physical examination reveals warm and moist skin and bulging eyes (exophthalmos). Laboratory studies will likely reveal which of the following endocrine abnormalities in this patient?

1: Anti-thyroid DNA antibodies

2: Anti-TSH receptor antibodies

3: Decreased uptake of radioactive iodine in the thyroid

4: Increased serum TSH

464-: Brown tumor is seen in

1: Hypehyroidism

2: Hypothyroidism

3: Hyperparathyroidism

4: Hypoparathyroidism

465-: Impaired oral GTT indicated by-

1: Fasting plasma sugar > 126 mg\/dl

2: Random blood sugar > 200 mg\/dl

3: Fasting blood sugar < 90 mg\/dl

4: Fasting blood sugar <126 mg\/dl and two hours after glucose load 140-199 mg\/dL

466-: A patient of Mediterranean ancestry was given primaquine to protect against malaria when going on an overseas trip. The patient rapidly developed a hemolytic anemia due to a mostly silent mutation in which one of the following pathways or enzymes?

1: Malic enzyme

2: Glycolysis

3: Hexose monophosphate shunt

4: Gluconeogenesis

467-: In spider nevi, dilatation of blood vessels is due to

1: Testosterone

2: Estrogen

3: Hepatotoxins

4: FSH

468-: Retardation of skeletal maturity can be caused by all except-

1: Chronic renal failure

2: Hypothyroidism

3: Protein energy malnutrition (PEM)

4: Congenital adrenal hyperplasia

469-: The feature that differentiate a follicular carcinoma from a follicular adenoma of thyroid is

1: Nuclear pleomorphism

2: Huhle cell change

3: Capsular invasion

4: Absence of colloid

470-: Testosterone is secreted by

1: Gonadotropic cells

2: Leydig's cells

3: Acidophilic cells

4: Seoli cells

471-: Vasopressin antagonist acts on

1: Proximal convoluted tubule

2: Distal convoluted tubule

3: Coical collecting tubule

4: Medullary collecting duct

472-: Whipple's triad is seen in

1: Gastrinoma

2: Insulinoma

3: Vipomas

4: Somatostatinoma

473-: Delayed puberty is when primary amenorrhea is seen without development of secondary sexual characters beyond the age of?

1: 12 years

2: 14 years

3: 16 years

4: 18 years

474-: For the following explanations for hirsutism, select the most likely cause.Can be associated with anovulation, obesity, and amenorrhea.

1: drugs

2: adrenal tumor

3: polycystic ovarian disease (PCOD)

4: idiopathic hirsutism

475-: Diagnostic criteria for diabetes include all Except

1: A fasting plasma glucose >= 126 mg/dL

2: A random plasma glucose >= 200 mg/dL (in a patient with classic hyperglycemic signs)

3: 2-hour plasma glucose >= 200 mg/dL during an oral glucose tolerance test (OGTT) with a loading dose of 75 gm

4: A glycated hemoglobin (HbA1C) level >= 5.5%

476-: Nesidioblastoma is due to hyperplasia of-

1: Alpha cell

2: Beta cell

3: Acinus

4: D cells

477-: Which of the following is NOT essential for normal biosynthesis of thyroid hormone?

1: Iodine

2: Ferritin

3: Thyroglobulin

4: TSH

478-: Exenatide is drug prescribed for which disease:

1: Osteoporosis

2: Diabetes

3: Hyperthyroidism

4: Infertility

479-: Steroids cause

1: Increase TSH

2: Increased FSH

3: Prevent de-iodination

4: All of the above

480-: Gs alpha mutation is associated with all Except

1: Mc-cune Albright syndrome

2: Pitutary adenomas

3: Pseudohypoparathyroidism

4: Papillary carcinoma thyroid

481-: A 42-year-old woman presents to the clinic complaining of dry skin, fatigue, and weight gain over the past 3 months. She is not on any medications and there is no significant medical history.On physical examination, her blood pressure is 110/70 mm Hg, pulse 52/min, and heart and lungs are normal. Her skin feels rough and dry, but the rest of the examination is normal. Her biochemistry is normal but the thyroid-stimulating hormone

(TSH) level is 39 mU/L (0.5-5 mU/L). Which of the following is the most likely cause for her elevated TSH?

1: trauma

2: radioactive iodine ingestion

3: autoimmune hypothyroidism

4: parathyroid surgery

482-: Most common tumor of head which undergoes calcification is

1: Ependymoma

2: Medulloblastoma

3: Oligodendroglioma

4: Glioblastoma muliformae

483-: Radiofrequency ablation is done for:

1: Ventricular tachycardia

2: PSVT

3: WPW

4: Atrial tachychardia

484-: Orally active hormone is

1: TSH

2: Thyroxine

3: GH

4: Prolactin

485-: Thyroid peroxidase is not involved in

1: Oxidizes iodide to atomic iodine

2: Frequent epitope of autoantibodiesent epitope

3: Secretion of thyroglobulin into the colloid

4: Liberates iodine for addition on to thyrosine resideues on thyroglobulin

486-: Huhle cell carcinoma is a variant of

1: Papillary carcinoma

2: Follicular carcinoma

3: Lymphoma

4: Anaplastic carcinoma

487-: MODY 1 is caused by mutations in

1: HNF-4 alpha

2: HNF-1 alpha

3: HNF-1 beta

4: Glucokinase

488-: Feature of metabolic syndrome is-

1: Hypoinsulinemia

2: High HDL cholesterol

3: Hyperinsulinemia

4: Type 1 diabets mellitus

489-: One of the following diuretic does not require its presence in the tubular lumen for its pharmacological effects

1: Thiazide diuretics

2: Loop diuretics

3: Carbonic anhydrase inhibitors

4: Aldosterone antagonists

490-: Guardian angel against obesity name given to?

1: Adiponectin

2: Fibronectin

3: HDL

4: Insulin

491-: Oral contraceptives are not given with:

1: Streptomycin

2: Gresiofulvin

3: Pyraziniamide

4: Ethambutol

492-: Elevated levels of somatostatin is a pathologic condition associated with which of the blood hormone levels.

1: High prolactin (PRL)

2: High TSH

3: High cortisol

4: Low growth hormone (GH)

493-: Swiss cheese pattern of the endometrium is seen in

1: Carcinoma endometirum

2: Metropathia hemorrhagica

3: Hydatiform mole

4: Halban disease

494-: Which of the following does not dependent on insulin GLUT4 for glucose uptake?

1: Brain

2: Skeletal muscles

3: Cardiac muscle

4: Adipose tissue

495-: Which inhibits adenyl cyclase enzyme?

1: Somatostatin

2: Calcitonin

3: Epinephrine

4: Thyroxine

496-: All are symptoms of hyperglycaemia in a diabetic patient except

1: Polyuria

2: Weight gain

3: Fatigue

4: Recurrent skin infections

497-: The physical half life of radioactive iodine 131 is

1: 8 hours

2: 8 days

3: 16 days

4: 60 days

498-: Drugs that can induce diabetes mellitus include all except

1: Beta blockers

2: Protease inhibitors

3: Anti psychotics

4: Thiazide diuretics

499-: All of the following are recognized effects of combined oral contraceptives except

1: Breakthrough bleeding

2: Decreased risk of endometrial cancer

3: Increased risk of ischemic stroke

4: Increased risk of colon cancer

500-: In which of the following is medullary thyroid cancer is the most aggressive form

1: MEN type I

2: MEN type II a

3: MEN type II b

4: Sporadic cases

501-: True about tamoxifen is-

1: Selective estrogen receptor downregulator

2: Selective estrogen receptor modulator

3: Selective tissue estrogen activator regulator

4: Estrogen antagonist

502-: In hyperparathyroidism all seen except-

1: Osteopetrosis

2: Osteoporosis

3: Cysts

4: Brown tumor

503-: Which one of the following statements about Graves' disease is FALSE?

1: Results in hyperthyroidism

2: Autoimmune disorder

3: Common in Male

4: Referred as Toxic diffuse goitre

504-: Which of the following is associated with secondary hyperparathyroidism -

1: Parathyroid adenoma

2: Marked hypercalcemia

3: Chronic renal failure

4: Parathyroidectomy relieves the symptoms

505-: Drug of choice as antidiabetic in obese patient:

1: Glipizide

2: Insulin

3: Tolbutamide

4: Metformin

506-: NOT a feature of primary hyperaldosteronism is-

1: Pedal edema

2: Diastolic hypeension

3: Polyuria

4: Hypokalemia

507-: Mineralocoicoid receptors are found in all of the following except

1: Hippocampus

2: Kidney

3: Colon

4: Liver

508-: Insulin resistance is seen in all, Except:

1: Werner's syndrome

2: Addison's disease

3: Ataxia telengiectasia

4: Lipodystrophy

509-: Stimulates the production of IGF.

1: LH

2: PRL

3: TSH

4: GH

510-: Ejection of milk is caused by

1: Oxytocin

2: ADH

3: Progesterone

4: Thyroxine

511-: Central precocious puberty in a girl is defined as breast development before the age of?

1: 6 years

2: 8 years

3: 12 years

4: 10 years

512-: Which of the following topical steroids is the most potent?

1: Halobetasol propionate

2: Fluticasone

3: Hydrocortisone

4: Triamcinolone acetonide

513-: All are clinical features of pheochromocytoma, except-

1: Increased hematocrit

2: Ohostatic hypotension

3: Low Coisol level

4: Impaired glucose tolerance

514-: Which of the following is a GLP-1 agonist?

1: Pramlintide

2: Exenatide

3: Sitagliptin

4: None of the above

515-: In diabetics, the factor which is limiting for the synthesis of triglycerides in adipose tissue is:

1: NADPH

2: ATP

3: Acetyl CoA

4: Glycerol-3-P

516-: Which of the following is not seen after removal of testis in an adult?

1: Loss of libido

2: Impotence

3: Muscle weakness

4: Decrease FSH

517-: A 72-year-old woman with long history of type-2 DM presents with abdominal pain. Physical examination reveals neuromuscular weakness and hypeension. Laboratory studies show markedly reduced serum calcium and elevated PTH. A surgical exploration of the patient's neck demonstrates 4 symmetrically enlarged parathyroid glands. This patient's endocrinopathy may be caused by which of the following underlying disorders?

1: Adrenal insufficiency

2: Chronic liver disease

3: Insulin deficiency

4: Renal insufficiency

518-: Which one of the following is HLA-associated diabetes mellitus?

1: Type I diabetes mellitus

2: Type II diabetes mellitus

3: Stress related diabetes mellitus

4: Gestational diabetes mellitus

519-: The most common manifestation of osteoporosis is -

1: Compression fracture of the spine

2: Asymptomatic, detected incidentally by low serum calcium

3: Bowing of legs

4: Loss of weight

520-: Which one of the following is not seen in pheochromocytoma?

1: Episodic hypeension

2: Arrhythmias

3: Headaches

4: Diarrhea

521-: Which of the following is considered as a marker for epididymal function?

1: Fructose

2: Testosterone

3: Acid phosphatase

4: Carnitine

522-: Estrogen action on carbohydrate metabolism

1: Increases uptake of glucose through increase in insulin sensitivity

2: Glycolysis increases

3: Increasing central adipose deposition

4: Worsening of NIDDM

523-: A 4 week old female child with normal genitalia presents to the emergency depament with severe dehydration, hyperkalemia and hyponatremia. The measurement blood levels of which of the following will be helpful?

1: 17 hydroxy progresterone

2: Rennin

3: Coisol

4: Aldosterone

524-: Which hormone is under inhibitory control?

1: GH

2: Prolactin

3: FSH

4: LH

525-: The composition of Lugol&;s iodine

1: 10% KI with 5% Iodine

2: 5% KI and 15% Iodine

3: 5% Iodine with 20% KI

4: 10% Iodine and 20% KI

526-: All of the following are features of MEN IIa, except -

1: Pituitary tumor

2: Pheochromocytoma

3: Medullary carcinoma thyroid

4: Parathyroid hyperplasia

527-: A patient following head injury was admitted in Intensive care ward with signs of raised intracranial pressure. He was put on ventilator and staed on Intravenous fluids and diuretics. Twenty four hours later his urine output was 3.5 liters, serum sodium 156 mEq/1 and serum osmolality of 316 mOsm/kg. The most likely diagnosis based on these parameters is-

1: High output due to diuretics

2: Diabetes insipidus

3: Too much infusion of normal saline

4: Cerebral salt retaining syndrome

528-: A 32-year-old woman with diabetes mellitus delivers a child after 38 weeks of gestation. Which of the following is the most likely abnormality that might be encountered in this child at bih?

1: Cataracts

2: Hyperbilirubinemia

3: Hypoglycemia

4: Low bih weight

529-: All are used in painful diabetic neuropathy, except-

1: Phenytoin

2: Local use of capsicum

3: Dextroamphetamine

4: Amitriptyline

530-: Congenital Adrenal Hyperplasia is due to deficiency of:

1: 21 beta hydroxylase

2: 17 alpha hydroxylase

3: 5 alpha reductase

4: 17 beta reductase

531-: A 50-year old male presents with severe refractory hypeension, weakness, muscle cramps and hypokalemia, the most likely diagnosis is -

1: Hypoaldosteronism

2: Hyperaldosteronism

3: Cushing's syndrome

4: Pheochromocytoma

532-: A 14-year-old boy is brought to OPD with c/o increasing weakness, easy fatigability, and weight loss over the past 3 months. In addition, he has recently developed nausea, vomiting, and abdominal pain. His blood pressure is markedly decreased, and he has increased pigmentation of his skin creases. These findings are suggestive of

1: Cushing syndrome.

2: Secondary hyperaldosteronism

3: Osteitis fibrosa cystica

4: Addison disease.

533-: An autopsy is performed on an 8-year old child with diabetes mellitus of recent onset who has died en route to the hospital following an automobile accident. Which of the following autopsy findings would or the diagnosis of type 1 diabetes as contrasted to type 2 diabetes?

1: Amylin deposition in pancreatic islets

2: Armanni-Ebstein lesion

3: Insulitis

4: Kimmelstiel-Wilson nodules

534-: A 45-year-old man with recent history of bizarre behavior is seen by a psychiatrist. On physical examination, the patient appears moderately obese with mild hypeension, facial acne, fat accumulation in the supraclavicular fossae. Laboratory studies demonstrate a

neutrophilic leukocytosis, with a decrease lymphocytes and absence of eosinophils. There is a mild hypokalemia and mild metabolic alkalosis. The fasting serum glucose is within the reference range, but OGTT had glucose concentrations > 200 mg/dL. Laboratory studies show free urinary coisol of 156 mg/ 24 hours .Which of the following questions would be of most help in establishing a diagnosis?

1: Are you experiencing muscle weakness?

2: Are you experiencing shoness of breath?

3: Are you receiving coicosteroids for some other disease?

4: Do you have a family history of endocrine neoplasia?

535-: Plasma half life of carbimazole is:

1: 4 hours

2: 8 hours

3: 16 hours

4: 24 hours

536-: Increased calcium levels lead to

1: Increased 1,25 dihydroxycholecalciferol

2: Increased 24,25 dihydroxycholecalciferol

3: Decreased calcitonin

4: Increased parathormone

537-: Osteitis fibrosa cystica is seen in

1: Hyperparathyroidism

2: Hypoparathyroidism

3: Hypothroidism

4: Hypehyroidism

538-: Systemic steroids can cause all of the following except

1: Hypeension

2: Glaucoma

3: Cataract

4: Osteoporosis

539-: MEN 2B includes all except

1: MTC

2: Pheochromocytoma

3: Mucosal neuroma

4: Primary hyperparathyroidism

540-: Estimation of S. Ca2+ should be done only after-

1: Urine calcium

2: Total plasma protein

3: S. Phosphate

4: S.K+

541-: Lymphatic spread is most commonly seen in which type of thyroid malignancy:

1: Papillary carcinoma

2: Follicular carcinoma

3: Medullary carcinoma

4: Anaplastic carcinoma

542-: Huhle cells are seen in:

1: Granulomatous thyroid disease

2: Hashimoto's thyroiditis

3: Papillary carcinoma of thyroid

4: Thyroglossal cyst

543-: In a male newborn the adrenogenital syndrome (congenital hyperplasia of the adrenal glands) is most often associated with

1: Normal appearing genitalia

2: Hypoglycemia

3: Pseudohermaphroditism

4: Persistent paramesonephros (Mullerian ducts)

544-: True about pioglitazone are all except:

1: Metabolized in the liver by CYP3A4

2: Selective agonist for the nuclear peroxisome profilerator activated receptor gamma

3: It causes transcription of gene for carbohydrate and fat metabolism in the absence of insulin

4: It should be avoided in a patient with cardio-vascular disease

545-: A 27-year-old woman presents with weight loss, fatigue, and weakness. She also experiences nausea and vomiting but no dysphagia. Her physical examination is normal except for increased generalized skin pigmentation. Her serum sodium is low and potassium is high. Which of the following features is also most likely to be present? (See Figure below.)

1: the skin is shiny and pale

2: a diabetic glucose tolerance is characteristic

3: water diuresis is impaired

4: the urinary steroids are high

546-: G-proteins act as:

1: Hormone carriers

2: Hormone receptors

3: Second messengers

4: Signal transducers

547-: A female neonate with DiGeorge syndrome develops severe muscle cramps and convulsions soon after bih. Which of the following is the cause of convulsions in this neonate?

1: Acute hemorrhagic adrenalitis

2: Hypocalcemia

3: Hypoglycemia

4: Hypokalemia

548-: Lalloo, 50 years old, a chronic smoker, presents with history of hemoptysis. He was having truncal obesity and hypeension. He had an elevated ACTH level which was not suppressive with high dose dexamethasone. What would be the most probable diagnosis

1: Bilateral adrenal hyperplasia

2: Adrenal adenoma

3: Pituitary tumour

4: Ectopic| ACTH producing lung cancer

549-: After bilateral vasectomy which of the following substance deficiency is seen?

1: Fructose

2: Prostaglandin

3: Fibrinolysin

4: None

550-: Glucose is transpoed in muscle cells by

1: GLUT 1

2: GLUT 2

3: GLUT 3

4: GLUT 4

551-: Which of the following causes of hypercalcemia is not associated with high bone turnover?

1: Hyperthyroidism

2: Vitamin A intoxication

3: Vitamin D intoxication

4: Thiazides

552-: A patient develops hypoglycemia. He was on insulin and acarbose. For treatment of above what is to be given?

1: Glucose

2: Maltose

3: Sucrose

4: Starch

553-: For differentiating between Insulinoma and Sulfonylurea related hypoglycemia, the test which is useful is ?

1: Antibody to Insulin

2: Plasma C-peptide level

3: Plasma Insulin level

4: Insulin: Glucose ratio

554-: Drug therapy of Paget's disease (Osteitis Deformans) include all except-

1: Alendronate

2: Etidronate

3: Calcitonin

4: Plicamycin

555-: The most common cause of Addison's disease is:

1: Autoimmune adrenalitis

2: Meningococcal septicemia

3: Malignancy

4: Tuberculosis

556-: A 35 year old female presents to the OPD with headaches and high blood pressure. On investigations, increased aldosterone levels with low renin levels are seen and a diagnosis of Conn's syndrome is made. Excess secretion of aldosterone can cause all except

1: Slight increase in ECF volume

2: Increase in plasma Na+ > 7 meq/L

3: Hypeension

4: Hypokalemia

557-: All are features of cushing syndrome EXCEPT

1: Violaceous striae

2: Hyperkalemia

3: Thin skin

4: Hypertension

558-: Most commonly associated with Conn&;s syndrome

1: Coical carcinoma

2: Pheochromocytoma

3: Coical adenoma

4: Bilateral micronodular adrenal hyperplasia

559-: The occurrence of hypehyroidism following administration of supplemental iodine to subjects with endemic iodine deficiency goiter is known as-

1: Jod-Basedow effect

2: Wolff-Chaikoff effect

3: Thyrotoxicosis factitia

4: De Quervain's thyroiditis

560-: The first hormone secretion that is affected in a pituitary lesion is-

1: FSH,LH

2: ACTH

3: TSH

4: GH

561-: A five year old boy presents with precocious pubey and a Blood pressure of 130/80 mm Hg. Estimation of which of the following will help in diagnosis

1: 17 hydroxy - progesterone

2: Coisol

3: Aldosterone

4: 11 deoxycoisol

562-: Glucocoicoids act in inflammation mainly by

1: (downward arrow) Lipocoin

2: increasing IL-2

3: (upword arrow) Lipocoin

4: increasing CRP

563-: A 40-year-old woman has experienced chest pain on exertion for the past 2 months. A month ago, she had pneumonia with Streptococcus pneumoniae cultured from her sputum. On physical examination, she has a body mass index of 35. A random blood glucose value is 132 mg/dL. The next day, fasting blood glucose is 120 mg/dL, followed by a value of 122 mg/ dL on the following day. She is given an oral glucose tolerance test, and her blood glucose is 240 mg/dL 2 hours after receiving the standard 75-g glucose dose. On the basis of these findings, she is prescribed an oral thiazolidinedione (TZD) drug. After 2 months of therapy, her fasting blood glucose is 90 mg/ dL. The beneficial effect of TZD in this patient is most likely related to which of the following processes?

1: Activation of PPARg nuclear receptor in adipocytes

2: Decreased production of insulin autoantibodies

3: Greater density of insulin receptors in adipocytes

4: Increased half-life of circulating plasma insulin

564-: Most common cause of Conn's syndrome is -

1: Adrenal hyperplasia

2: Adrenal carcinoma

3: Adrenal adenoma

4: Pituitary ACTH hypersecretion

565-: The antimullerian hormone is secreted by

1: Granulosa cells

2: Seoli cells

3: Leydig cells

4: None

566-: What is the most likely underlying diagnosis?

1: Cirrhosis

2: Chronic renal failure

3: Hypothyroidism

4: Myeloma

567-: Investigation useful for detecting extra adrenal phecochromocytoma-

1: USG

2: CCT

3: T2-weighted MRI with gadolinium contrast

4: MIBG

568-: Immune rejection in fetus is prevented by

1: HCG

2: HPL

3: Oestrogen

4: Progesterone

569-: Insulin receptors are

1: Tyrosine Kinase receptors

2: Phosphodiesterase

3: Calcium calmodulin

4: Lipoprotein

570-: All are true regarding idiopathic edema of women except -

1: It is due in estrogen mediated sodium retention

2: It is not related to menstrual cycles

3: There is increased water retention in upright position

4: ACE inhibitors can be useful in some cases

571-: A pregnant female is taking carbimazole. Which of the following is not seen in the neonate ?

1: Choanal atresia

2: Scalp defects

3: Cleft lip/palate

4: Fetal goiter

572-: The differentiating feature b/w Ectopic ACTH secretion and Cushing syndrome is -

1: Hypokalemic alkalosis

2: Clinical features of cushing syndrome

3: Hyperpigmentation

4: Hypeension

573-: Greatest stimulator for ADH secretion

1: Hyperosmolarity

2: Hyponatremia

3: Hypotension

4: Hypovolemia

574-: Which of the following is serious adverse effects seen with Zoledronate

1: Acute renal failure

2: Ventricular fibrillation

3: Peptic ulcer

4: Anterior uveitis

575-: Addison's disease is characterized by following except-

1: Hyperkalemia

2: Hypotension

3: Hyponatremia

4: Hvnncalcemia

576-: Menopausal hot flushes coincide with

1: FSH secretion

2: Decrase in estrogen

3: LH surge

4: Increase in progesterone

577-: All of the following familial syndromes are associated with development of pheochromocytomas except:

1: MEN II A

2: Von hippel landau syndrome

3: MEN Type II B

4: Prader-Willi syndrome

578-: A 15-year-old type I diabetic faints after injecting himself with insulin. He is administered Glucagon and rapidly recovers consciousness. Glucagon induces activity of:

1: Glycogen synthase

2: Glycogen phosphorylase

3: Glucokinase

4: Hexokinase

579-: Commonest cause of hypothyroidism is

1: Defective synthesis of thyroxine

2: Defect of iodide transport

3: Defect of the thyroglobulin synthesis

4: Thyroid dysgenesis

580-: A 54-year-old man comes to the emergency room complaining of severe pain in his right toe. The pain is interfering with his ability to walk and he reports no prior trauma to the toe. He has had multiple less severe episodes in the past, which he always treats with pain medications.On physical examination, the toe is red, inflamed, and exquisitely sensitive to movement. An x-ray of the toe is normal and needle aspiration of the joint confirms uric acid crystals. He is treated with oral indomethacin (NSAID) for 7 days, and 1 month later he remains symptom free. Allopurinol is recommended for prevention of this condition. Which of the following is the most likely mechanism of action of allopurinol?

1: inhibition of xanthine oxidase

2: solubilization of uric acid

3: reactivity with hypoxanthine

4: anti-inflammatory effect on joint tissue

581-: How many pas are there in insulin receptor ?

1: 1

2: 2

3: 3

4: 4

582-: All of the following antidiabetic drugs act by enhancing insulin resistance except

1: Exenatide

2: Sitagliptan

3: Rosiglitazone

4: Repaglinide

583-: A 30 year old male with NIDDM has a blood pressure of 150/90. His urine examination reveals persistent albuminuria in traces. The most appropriated line of treatment would be -

1: Non treatment

2: Regular examination of urine and monitoring of blood sugar

3: Administering lisinopril and restriction of sodium

4: Restriction of sodium only

584-: A 56-year-old man presents with a change in skin color, fatigue, and abdominal pain. He has also noticed increased urine output and thirst. On examination, his skin appears bronze in color, his liver span is 16 cm, and there is loss of body hair, and testicular atrophy. His ferritin is 600 ng/mL (15-200 ng/mL), aspartate amino transferase (AST) 130 U/L (8-20 U/L), alanine amino transferase (ALT) 150 U/L (8-20 U/L), and total bilirubin 0.5mg/dL (0.1-1 mg/dL). Coagulation tests and albumin level are normal but the random glucose is elevated at 250 mg/dL. Which of the following is the most likely diagnosis?

1: diabetes mellitus (DM)

2: amyloidosis

3: Wilson's disease

4: hemochromatosis

585-: Features of tumor lysis syndrome are-

1: Hypocalcemia

2: Hyperphosphatemia

3: Alkalosis

4: Hypokalemia

586-: Wof are anti diabetic agents that acts by increasing insulin sensitivity, and so should be euglycemics

1: Phenformin

2: Pioglitazone

3: Sitagliptin

4: Liraglutide

587-: Temperature above which normal hormonal actions fails

1: 45degC

2: 35degC

3: 30degC

4: 25degC

588-: A five-year-old boy has precocious puberty along with BP 130/80 mm Hg. Estimation of which of the following will help in diagnosis?

1: 17-Hydroxyprogesterone

2: 11-Deoxycortisol

3: Aldosterone

4: DOCA

589-: Medullary ca of thyroid is associated with increase in

1: Calcitonin

2: Thyroglobulin

3: T3

4: T4

590-: Insulinoma is the most common functioning tumor of-

1: Pancreas

2: Liver

3: Gallbladder

4: Thyroid

591-: Which one of the following oral hypoglycemic agents is not an insulin secretogogue ?

1: Gliclazide

2: Glimiperide

3: Repaglinide

4: Rosiglitazone

592-: A 50-year-old woman is 5 ft 7 in tall and weighs 185 lb. There is a family history of diabetes mellitus. Fasting blood glucose (FBG) is 160 mg/dL and 155 mg/dL on two occasions. HgA1c is 7.9%. You educate the patient on medical nutrition therapy. She returns for reevaluation in 8 weeks. She states she has followed diet and exercise recommendations, but her FBG remains between 140 and 150 and HgA1C is 7.7%. She is asymptomatic, and physical examination shows no abnormalities. Which of the following is the treatment of choice?

1: A thiazolidinedione such as pioglitazone

2: A dipeptidyl peptidase-4 (DPP-4) inhibitor such as sitagliptin.

3: Insulin glargine at bedtime

4: Metformin

593-: WHO recommended dose of misoprostol I'm the treatment of post paum hemorrhage

1: 400 mcg oral

2: 600 mcg sublingual

3: 800 mcg sublingual

4: 1000 mcg oral

594-: Role of growth hormone in spermatogenesis

1: Late division of spermatocytes

2: Early division of spermatogonia

3: Formation of acrosome

4: Stimulation of Seoli and Leydig cells

595-: A 72-year-old man is prescribed hydrochlorothiazide for hypertension. Which of the following is the most likely symptomatic side effect?

1: increased serum potassium

2: metabolic acidosis

3: sexual impotence

4: respiratory alkalosis

596-: Insulin causes:

1: Na+ entry into cells

2: K+ exit from cells

3: Na+ exit/K+ entry

4: K+ entry into cells

597-: Based on the given mechanism of action as shown in the Figure, Drug A is likely to be:

1: Exenatide

2: Vildagliptin

3: Canagliflozin

4: Pramlintide

598-: A young female, Rama with amenorrhea, infeility and galactorrhoea was treated with a drug that successfully restored ovulation and menstruation. Before being given the drug, the woman was carefully questioned about previous mental health problems, which she did not have. She was advised to take the drug orally. The drug used to treat this patient was probably:

1: Bromocriptine

2: Desmopressin

3: Human gonadotropin hormone

4: Leuprolide

599-: What is the most likely diagnosis in a full-term neonate with electrolyte abnormalities and this exam finding?

1: Congenital adrenal hyperplasia

2: Hypospadias with cryptorchidism

3: Preterm ovarian hyperstimulation syndrome

4: Turner syndrome

600-: Action of progesterone is

1: Increased sensitivity of uterus to oxytocin

2: Inhibits LH secretion

3: Decreases basal body temperature

4: Causes proliferative changes in uterus

601-: New born 7 days old with vomiting and dehydration clinical examination was normal except for hyperpigmentation of nipple. Electrolytes Na: 120 meq. K: 9 meq. mostlikelydiagnosis -

1: Primary hypothyroidism

2: Cong, adrenal hyperplasia

3: Panhypopituitarism

4: Pyloric stenosis

602-: The principal steroid secreted by testes is

1: Testosterone

2: Dihydrotestosterone

3: Androstenedione

4: Dehydroepiandrosteione

603-: Which among the following is the most common thyroid cancer?

1: Papillary

2: Medullary

3: Follicular

4: Anaplatic

604-: Side effect of clomiphene citrate is:(1995)

1: Alopecia

2: Hotflushes

3: Hyperstimulation syndrome

4: All

605-: Which drug is not used in SIADH -

1: Fludrocoisone

2: Demeclocycline

3: Desmopressin

4: Hypeonic saline

606-: Enzymes not impoant in testosterone biosynthesis

1: 5-aplha reductase

2: Delta 5-4 isomerase

3: 18 hydroxylase

4: Alpha hydroxylase

607-: A lab technician notes that prolactin levels in a patients, blood sample is high. This could be due to all except

1: Sleep

2: Pregnancy

3: Stress

4: L-dopa

608-: The level of which one of the following hormones is likely to increase after hypothalamic ablation ?

1: Growth hormone

2: Prolactin

3: FSH

4: ACTH

609-: Hypertension and heart disease.

1: Elevated blood levels of aldosterone and renin resulting from an atherosclerotic plaque in a renal artery.

2: Hyperprolactinemia due to a pituitary tumor.

3: Acromegaly due to a GH-producing tumor that developed in adulthood.

4: Cushing syndrome due to an adrenal tumor.

610-: All of the following conditions are known to cause diabetes insipidus except -

1: Multiple sclerosis

2: Head injury

3: Histiocytosis

4: Viral encephalitis

611-: According to ADA guidelines, the diagnosis of diabetes is made when the fasting blood glucose is more than -

1: 126 mg/dl

2: 100 mg/dl

3: 140 mg/dl

4: 200mg/dl

612-: All are associated with MEN-2 except -

1: Pheochromocytoma

2: Islet cell hyperplasia

3: Medullary carcinoma thyroid

4: Parathyroid adenoma

613-: A 38-year-old woman presents to the clinic with new symptoms of palpitations, weight loss, and heat intolerance. On physical examination, she has a mild tremor of her outstretched hands, an enlarged thyroid, and resting tachycardia (heart rate 110/min). Biochemical tests confirm the diagnosis and she is started on methimazole. Which of the following is the most likely mechanism of this drug?

1: inhibition of iodine uptake

2: inhibition of thyroidal organic binding and coupling reactions

3: lowering serum calcium

4: adrenal suppression

614-: Which one of the following clinical features is NOT senn in pheochromocytoma?

1: Hypeension

2: Episodic palpitations

3: Weight loss

4: Diarrhea

615-: Addison disease is commonly associated with:

1: Autoimmune adrenalitis

2: Adrenocortical carcinoma

3: Hypernephroma

4: Medullary carcinoma of thyroid

616-: Ovary produces all except

1: Gonadotropin

2: Testosterone

3: Estrogen

4: Inhibin B

617-: Which of the following is/ are a side effect/s of Dapaglifozin?

1: Increased weight loss

2: Polyuria

3: Increased incidence of urinary tract infections

4: All the above

618-: JAK-STAT transducer mechanism is seen i

1: Somatostatin

2: Growth hormone

3: Insulin

4: Adenosine

619-: BMR depends on

1: Body weight

2: Surface area

3: Amount of adipose tissue

4: Amount of lean body mass

620-: Which one of the following drugs is used for fetal therapy of congenital adrenal hyperplasia ?

1: Hydrocoisone

2: Prednisolone

3: Fludrocoisone

4: Dexamethasone

621-: Male pseudo hermaphroditism:

1: XX genotype, male external genitalia

2: XY genotype, female external genitalia

3: Testis and ovary both present

4: Male external genitalia and ovary present

622-: Whenever availability of oxygen to tissues decreases immediately

1: Vasodilation and increase in blood supply to tissue takes place

2: Vasoconstriction and decreases in blood supply to tissue takes place

3: Venoconstriction and increase in tissue perfusion pressure occurs

4: Venodilation and decrease in tissue perfusion pressure occur

623-: The triad of diabetes, gallstones and steatorrhea is associated with -

1: Gastrinoma

2: Somatostatinoma

3: VlPoma

4: Glucagonoma

624-: All are examples of negative feedback except

1: Coagulation of the blood

2: Regulation of blood pressure

3: Regulation of blood CO2 level

4: Regulation of pituitary hormones

625-: Testosterone is produced in Leydig cells in fetus due to

1: FSH

2: ssHCG

3: Coisol

4: Estrogen

626-: Weight gain in seen in all, except -

1: Phaeochromocytoma

2: Insulinoma

3: Myxoedema

4: Cushing's disease

627-: A Young women with secondary amenorrhoea and galactorrhoea. MRI shows a tumous of < 10 mm diameter in the pituitary fossa. Treatment is -

1: Hormonal therapy for withdrawal bleeding

2: Radiotherapy

3: Chemotherapy

4: Bromocriptine

628-: Hung up reflex is seen

1: Myxedema

2: Hypehyroidism

3: Hypothyroidism

4: Pheochromocytoma

629-: In post-ovulatory phase thickness of endometrium is because of

1: Progesterone

2: Oestrogen

3: FSH

4: LH

630-: Which is produced by Phaeochromocytoma in M.E.N 2A Sipple syndrome?

1: Epinephrine

2: Norepinephrine

3: Dopamine

4: 5- H.I.

631-: Glucose-dependent release of insulin through

1: Cyclic AMP

2: Carrier's modulators

3: Recipients phosphorylation

4: ATP dependent K+ channel

632-: A 54-year-old obese man was diagnosed with NIDDM 1 year earlier. He was staed on glipizide and metformin. His other medications are propranolol and nifedipine for hypeension, and naproxen, which he began 2 weeks ago for severe osteoahritis. His BP is 154/92. His BUN is 29 mg/dL and a creatinine of 1.8 mg/dL; both had been normal 1 year earlier. Which medications are most likely responsible for the increase in BUN and creatinine?

1: Glipizide

2: Metformin

3: Naproxen

4: Nifedipine

633-: Nephrocalcinosis is associated with all of the following, except:

1: Hypoparathyroidism

2: Multiple myeloma

3: Milk-alkali syndrome

4: Hyperparathyroidism

634-: Spermatogenesis takes place in

1: Epididymis

2: Seminiferous tubule

3: Ductus deferens

4: Prostate

635-: Osteoporosis is caused by all except -

1: Methotrexate

2: Glucocoicoids

3: Heparin

4: Estradiol

636-: A common finding in osteomalacia is-

1: Low serum phosphate

2: Normal level of 1,25 di-hydroxy vit D3

3: Low serum calcium

4: Increased hydroxy proline in urine

637-: GnRH analogue used In hormonal treatment of carcinoma of prostate Is

1: Goserelin

2: Nilutamide

3: Cyproterone acetate

4: Finasteride

638-: Iv glucose tolerance is done in -

1: Children

2: Pregnancy

3: Gastrectomy

4: Old age

639-: At same concentration of steroids which of the following is most potent

1: Ointment

2: Cream

3: Lotion

4: Gel

640-: Diuresis produced by alcohol is due to

1: Decreased tubular reabsorption

2: Increased glomerular filtration rate

3: Osmotic diuresis

4: Inhibition of ADH secretion

641-: Hypehermia

1: Temperature > 41.5

2: > 40 with autonomic dysfunctuion

3: >37.5-38.3 degC

4: 36.5-37.5 degC

642-: Amyloid deposits are seen in which thyroid malignancy?

1: Medullary Ca

2: Papillary Ca

3: Anaplastic Ca

4: Follicular Ca

643-: In type I DM true about-

1: 90%femilyH/O

2: Antibodies aganist b cells

3: Insulin given to RxDKA

4: D.K.A occurence

644-: Which of the following statements about nateglinide is TRUE?

1: It is a long acting oral hypoglycemic drug

2: Taken just before a meal, it limits post prandial hyperglycemia in type 2 diabetes mellitus

3: It cannot be used in patients with renal impairment

4: It acts by opening K+ channels in myocytes and adipocytes

645-: Tumor lysis syndrome is associated with all ofhe following laboratory feature except -

1: Hyperkalemia

2: Hypercalcemia

3: Hyperuricemia

4: Hyperphosphatemia

646-: Which of the following statements about Pseudohypoprathyroidismistrue-

1: Caused by 'Gain of!ftmction' inherited mutation in Gsa subunit

2: Decreased formation of cyclic GMP is observed

3: Decreased formation of Inositol triphosphate is observed

4: Decreased formation of c-AMP is observed

647-: All of the following are contraindications for the use of metformin except -

1: Hypotensive state

2: Alcoholics

3: Renal failure

4: Hypokalemia

648-: Hormone acting by genetic modification is

1: Insulin

2: Thyroxine

3: GH

4: ACTH

649-: Which of the following hormones stimulates gluconeogenesis?

1: Progesterone

2: Glucagon

3: Aldosterone

4: Epinephrine

650-: Safest treatment for hyperthyroidism in pregnant women is

1: Radioactive iodine

2: Methimazole

3: Carbimazole

4: Propylthiouracil

651-: Which of the following act through tyrosine kinase receptor?

1: Insulin

2: Glucagon

3: Growth hormone

4: Follicle stimulating hormone

652-: Somatostatin is produced by

1: Alpha cells

2: Beta cells

3: Delta cells

4: PP cells

653-: Ulcers in Diabetes precipitated by all except

1: Trophic ulcers

2: Neuropathy

3: Microangiopathic changes in blood vessels

4: Macroangiopathy

654-: Which type of thyroid carcinoma is classically associated with calcitonin induced amyloid deposition?

1: Papillary

2: Follicular

3: Anaplastic

4: Medullary

655-: All are ADRs of metformin except

1: Diarrhoea

2: Wt gain

3: Nausea

4: Lactic acidosis

656-: Ectopic ACTH production is seen in -

1: Small cell carcinoma is lung

2: Anaplastic carcinoma of lung

3: Squamous cell carcinoma of lung

4: Adenocarcinoma of cerebellum

657-: Hyperpigmentation is seen with

1: FSH

2: LH

3: ACTH

4: TSH

658-: A 21-year-old woman experiences abruptio placentae with severe bleeding during the delivery of a term fetus. Five months later, she presents with profound lethargy, pallor, muscle weakness, failure of lactation, and amenorrhea. Which of the following pathologic findings is expected in this patient?

1: Atrophy of the endocrine pancreas

2: Autoimmune destruction of the adrenal cortex

3: Infarction of the pituitary

4: Pituitary prolactinoma

659-: Source of progesterone during normal menstrual cycle

1: Corpus luteum

2: Stroma

3: Surface epithelium of ovary

4: Seoli cells

660-: An obese lady aged 45 years, was brought to emergency in a semi comatose condition. The laboratory investigations showed K+ (5.8 mmol/L); Na+ (136 mmol/L); blood pH (7.1), HC03 (12 mmol/L),' ketone bodies (350 mg/dl). The expected level of blood glucose for this lady is:

1: < 45 mg/dl.

2: <120 mg/dl.

3: >180 mg/dl.

4: <75 mg/dl.

661-: Bisphosphonates are used in all EXPECT

1: Paget's disease

2: Vitamin D excess

3: Postmenopausal osteoporosis

4: Hypercalcemia of malignancy

662-: A 64-year-old woman with type 2 diabetes for 10 years now develops increasing fatigue, dyspnea, and pedal edema. On examination, her blood pressure is 165/90 mmHg, pulse 90/min, JVP is 4 cm, heart sounds are normal, lungs are clear, and there is 3+ pedal edema.Her urinalysis is positive for 3 gm/L of protein and no casts or red blood cells. An abdominal ultrasound reveals normal size kidneys and no hydronephrosis. Which of the following renal diseases is the most likely diagnosis in this patient?

1: acute glomerulonephritis (GN)

2: obstructive uropathy

3: glomerulosclerosis with mesangial thickening

4: renal infarction

663-: Most common Thyroid CA post radiation exposure -

1: Papillary CA

2: Medullary CA

3: Follicular CA

4: None

664-: Association of sexual precocity, multiple cystic bone lesions and endocrinopathies are seen in:

1: McCune-Albright's syndrome

2: Granulosa cell tumor

3: Androblastoma

4: Hepatoblastoma

665-: Exercise is also prescribed as an adjuvant treatment for depression. Most probably act by

1: Increasing pulse pressure

2: Improving hemodynamics

3: Raising endorphin levels

4: Inducing good sleep

666-: A 30-year-old man presents with recurrent flushing, diarrhea, and weight loss. His examination is normal. Lab investigations reveal an elevated urinary 5-hydroxyindoleacetic acid. Which of the following is the most likely diagnosis?

1: phenylketonuria

2: alkaptonuria

3: malignant melanoma

4: carcinoid syndrome

667-: In Addison's disease drug to be given is

1: Hydrocoisone

2: Betamethasone

3: Prednisolone

4: DOCA

668-: Decreased Radio iodine uptake is/are seen in -

1: Toxic multinodular goiter

2: Grave's disease

3: Subacute thyroiditis

4: Autonomous nodular goitre

669-: A 65-year-old woman with type 2 diabetes is on hemodialysis for chronic kidney disease. She now presents to the clinic with symptoms of pain in the hands. The symptoms started many months age and are now getting worse. She does not recall any injury to the hands and has not noticed any swelling or redness in the joints.On examination, the joints are normal with no inflammation or tenderness on palpation. There is full range of motion of the fingers and wrists.Lab investigations: calcium (7.2 mg/dL), phosphate (5.5 mg/dL), and PTH level (710 ng/L). (See Figure below) What is the most likely diagnosis?

1: scleroderma

2: gout

3: secondary hyperparathyroidism

4: pseudogout

670-: A 28-year-old lady has put on weight (10 kg over a period of 3 years), and has oligomenorrhea! followed by amenorrhea for 8 months. The blood pressure Is 160/100 mm of Hg. Which of the following Is the most appropriate investigation ?

1: Scrum electrolytes

2: Plasma Coisol

3: Plasma testosterone and ultrasound evaluation of pelvis

4: T3,T4andTSH

671-: A 6-year-old girl presents with precocious puberty, some bony lesions & hyperpigmented skin lesions as shown below. What is the most probable diagnosis?

1: Prader Willi syndrome

2: Laurence Moon syndrome

3: Cushing syndrome

4: McCune-Albright syndrome

672-: Oral contraceptive pill is useful in preventing all the following except

1: Carcinoma breast

2: Carcinoma ovary

3: Pelvic inflammatory disease

4: Anaemia

673-: Which of the following is most reliable feature of malignat transformation of pheochromocytoma?

1: Presence of mitotic figures

2: Capsular invasion

3: Vascular invasion

4: None

674-: Which of the following belongs to steroidal receptor superfamily?

1: Vitami D3

2: Encephalins

3: GH

4: Insulin

675-: All are side effects of steroids except

1: Skin atrophy

2: Telangiectasia

3: Folliculitis

4: Photosentivity

676-: Hypophosphatesia contraindicated treatment is:

1: Vitamin D

2: Calcium chelating agent

3: Enzyme replacement

4: Renal dialysis

677-: Weight gain is seen in all except -

1: Cushings syndrome

2: Hypothyroidism

3: Pheochromocytoma

4: Insulinoma

678-: All are functions of coicosteroids except

1: Promotes breakdown of proteins

2: Decrease the amount of lymphatic cells in the spleen and lymph nodes

3: Inhibits the peripheral utilization of glucose

4: Decreases the catabolism of immunoglobulins

679-: True about tumour lysis syndrome are except A/E-

1: Hyperuricemia

2: Hypercalcemia

3: Hyperkalemia

4: Hyperphosphatemia

680-: An agent of choice in acute hypercalcemia due to malignancy is

1: Calcitonin

2: Cholecalciferol

3: Teriperatide

4: Zolendronate

681-: A 40-year-old male presented with a thyroid swelling and dysphagia. He gave history of on and off watery diarrhea. Biopsy of the lesion is shown. What is your diagnosis?

1: Follicular Ca thyroid

2: Papilllary Ca thyroid

3: Medullary Ca thyroid

4: Anaplastic cell Ca Thyroid

682-: High calcium uptake leads to-

1: Milk alkali syndrome

2: Osteopoijosjs

3: Osteopetrosis

4: Cardiomyopathy

683-: Commonest thyroid tumor in MEN (multiple endocrine neoplasi

1: - a) Follicular

2: Papillary

3: Anaplastic

4: Medullary

684-: Aromatic enzyme complex is involved in the biosynthesis of:

1: Cholesterol

2: Adrenal hormones

3: Vitamin D3

4: Estradiol/estrogens

685-: Which of the following organ is not involved in calcium metabolism?

1: Lung

2: Liver

3: Spleen

4: Skin

686-: Which of the following are Inhalational insulins?

1: Afrezza

2: Exubera

3: Both

4: None

687-: Dyskeratosis

1: Leukoplakia

2: Hyperpigmentation

3: Nail dystrophy

4: Premature keratinisation

688-: A 35 years old man Ramu has fasting and post prandial blood sugar within normal limit but urine sugar is 3 plus (+++). The diagnosis is -

1: Renal Glycosuria

2: Pancreatic insufficiency

3: Alimentary glycosuria

4: High carbohydrate diet taken in the morning

689-: A 10-year-old boy was diagnosed with a recent onset of diabetes mellitus and requires daily insulin therapy. Injury to pancreatic islet cells in this patient was most likely mediated by which of the following mechanisms of disease?

1: Antibody-mediated islet cell destruction

2: Cell-mediated immunity

3: Direct viral cytopathic effects

4: Immune complex deposition

690-: A 33-year-old woman presents to your office because of abnormal hair growth. She has noticed gradually increasing coarse hair on her upper lip, chin, and lower abdomen for the past 3 years. She notices mild facial acne but denies frontal balding or deepening of voice. Her menses are irregular, occurring every 28 to 60 days. She and her husband use condoms for contraception. They have no children. She uses over-the-counter benzoyl peroxide for the acne but otherwise takes no medications or supplements. On examination, her BMI is 29.0 and her waist circumference is 36 in. Her voice is normal; she has mild facial acne. There is mild acanthosis nigricans of the axillae. Pelvic examination is normal without ovarian mass or clitoromegaly. Evaluation of her hirsutism should include which of the following?

1: Glucose tolerance test

2: Serum testosterone and dehydroepiandrosterone-sulfate (DHEA-S) level

3: Overnight dexamethasone suppression test with 8 am cortisol level

4: CT scan of adrenals

691-: Gene involved in medullary carcinoma thyroid is

1: Ret Proto Oncogene

2: Fap gene

3: Rb gene

4: BRCA 1 gene

692-: Hypothayoidism is seen in

1: Hashimotos thyroiditis

2: Graves disease

3: Toxic multinodular goitre

4: Struma ovarii

693-: Hypothalamus controls the hormone secretion of

1: Anterior hypophysis

2: Posterior hypophysis

3: Kidney

4: Pineal gland

694-: TSH acting through

1: Ion channels

2: Nuclear receptors

3: cAMP

4: Cytoplasmic receptors

695-: Long term glycaemic control in DM with

1: Total protein

2: Glycated haemoglobin

3: Total haemoglobin

4: Glucose tolerance test

696-: The final cleavage products of proopiomelanocoin (POMC) are all of the following except

1: MSH

2: Testosterone

3: Lipotropin

4: Endorphin

697-: Best test to detect benign form malignant thyroid is

1: FNAC

2: CT scan

3: Excision

4: MRI

698-: Which of the following not a glycoprotein?

1: FSH

2: LH

3: TSH

4: ADH

699-: In a chronic diabetes mellitus individual which vaccine can you give -

1: Meningococcal and pneumococcal at recommended interval and influenza vaccine annually

2: Meningococcal and tetanus at recommended interval and hepatitis B vaccine annually

3: Tetanus and pneumococcal at recommended interval andinfluenza vaccine annually

4: Meningococcal and pneumococcal at recommended interval and hepatitis vaccine annually

700-: Which of the following is the drug of choice for the treatment of inappropriate anti-diuretic hormone secretion -

1: Frusemide

2: Hydrochlorothiazide

3: Spironolactone

4: Demeclocycline

701-: Vitamin D resistant rickets occurs due to all Except

1: alpha 1 hydroxylase deficiency

2: Renal tubular acidosis

3: Fanconi syndrome

4: Drugs

702-: All are causes of Osteoporosis, except-

1: Thyrotoxicosis

2: Hypothyroidism

3: Chronic heparin therapy

4: Old age

703-: All of the following development events are dependent on the production of maternal or fetal glucocoicoid, except

1: Induction of thymic involution

2: Production of surfactant by type II alveolar cells

3: Functional thyroid

4: Functional hypothalamic pituitary axis

704-: Human insulin gene receptor found on chromosome

1: 11

2: 15

3: 19

4: 21

705-: Which of the following is not a feature of Sipple syndrome?

1: Pheochromocytoma

2: Medullary carcinoma thyroid

3: Hyperthyroidism

4: Hyperparathyroidism

706-: FNAC is not diagnostic of which of the following thyroid lesions

1: Papillary carcinoma

2: Follicular carcinoma

3: Lymphoma

4: Anaplastic carcinoma

707-: All of the following are features of De quervain thyroiditis except:

1: In early phase follicles are disrupted and replaced by neutrophils forming microabscesses

2: Inflammatory infiltrate composed of lymphocyte, plasma cell, macrophages with granuloma formation

3: Bacterial infection is a trigger in most patients

4: It is the most common cause of painful thyroid

708-: Pulsatile release of GnRH is impoant for?

1: Gonadotrophin stimulation

2: Ovulation induction

3: GnRH feedback inhibiton

4: Gonadotropin downregulation

709-: Which of the following is anabolic hormone:

1: Corticosteroids

2: Glucagon

3: Insulin

4: Somatostatin

710-: Rx of DI-

1: ADH

2: Thiazide

3: Loop diuretics

4: Insulin

711-: All are seen In myxedema coma except -

1: Hypothermia

2: Tachycardia

3: Hypotension

4: Hyponatremia

712-: Androgen binding protein is secreted by

1: Pituitary

2: Liver

3: Seoli cells

4: Leydig cells

713-: Flatbush diabetes is associated with:

1: Type 1 DM

2: Type 2 DM

3: Diabetes insipidus

4: Bronze diabetes

714-: Addison's disease is characterized by all except

1: Hyperglycemia

2: Hypotension

3: Hyperkalemia

4: hyponatremia

715-: Calcitonin levels increased in

1: Hypehyroidism

2: Hyperparathyroidism

3: Hypoparathyroidism

4: Cushing Syndrome

716-: Calcitonin is not given in which disease -

1: Paget's disease

2: Thyrotoxicosis

3: Hyperparathyroidism

4: Hypervitaminosis D

717-: Wof vitamin D preparations would be the most appropriate in a patient with poor renal function

1: Cholecalciferol

2: Calcitriol

3: Ergocalciferol

4: Calcifediol

718-: Levothyroxine is used in:

1: Thyroid storm

2: Cretinism

3: Endemic goiter

4: Grave's disease

719-: In osteomalacia which of the following biochemical feature is true?

1: Elevated serum calcium level

2: Elevated serum phosphate level

3: Elevated serum alkaline phosphatase

4: Elevated 25-hydroxyvitamin D3

720-: All of the following conditions require administration of GnRH agonist in a non-pulsatile manner except ?

1: Male infeility

2: Prostate cancer

3: Endometriosis

4: Precocious pubey

721-: Medullary thyroid carcinoma occurs due to the mutation of: (Repeat)

1: RET oncogene

2: P53 gene

3: RAS H-RAS, K-RAS, N-RAS

4: BRCA-I

722-: Failure of oral contraceptives occur when used with any Of these except.

1: Asprin

2: Tetracycline

3: Phenytoin

4: Rifampicin

723-: Pituitary secretes all hormones except

1: GH

2: Prolactin

3: Oxytocin

4: Thyroxine

724-: Which of the following cause low serum calcium?

1: Vit D deficiency

2: Parathyroid

3: GH

4: Glucocoicoids

725-: With reference to non-ketotic, hyperglycemia, hyperosmolar state (HHS) consider the following statements -

1: It is common in second and third decade of life

2: is typically seen in Type 2 diabetes mellitus

3: Blood sugar is usually above 500 mg/dl

4: seen in DKA

726-: Alkaline phosphatase is found in all organs, except-

1: Bone

2: Hea

3: Placenta

4: Lungs

727-: A 15-year-old boy with Albright hereditary osteodystrophy (AHO) is rushed to emergency room with severe muscle cramps and convulsions. The child has a history of mental retardation. Laboratory studies reveal hypocalcemia and elevated blood levels of PTH. Which of the following distinguishes this patient's endocrinopathy from hypoparathyroidism seen in DiGeorge syndrome?

1: Abnormalities in cardiac conduction and contractility

2: Accelerated degradation of PTH

3: Decreased neuromuscular excitability

4: End-organ unresponsiveness to PTH

728-: Drug causing Addison's disease is

1: Ketoconazole

2: Aminoglutethimide

3: Cyclosporine

4: Glucocoicoids

729-: Hirustism may be found in any of these disorders, except-

1: Cushing's syndrome

2: Hypothyroidism

3: Congenital adrenal hyperplasia

4: Polycystic ovarian syndrome

730-: A 20-year-old woman with Hirschsprung disease presents with acute leg pain. The patient had a glioma resected 3 years ago. An X-ray film of the leg reveals a fracture of the left tibia. Laboratory studies show elevated serum levels of calcium and PTH. A CT scan of the patient's neck demonstrates a solitary parathyroid mass. Two years later, the patient presents with hypeension, and a CT scan of the abdomen displays a 4-cm mass in the right adrenal. Genetic studies conducted on this patient would likely reveal germline mutations in which of the following protooncogenes?

1: BRCA1

2: Rb

3: RET

4: VHL

731-: Radiation is most commonly associated with the following thyroid cancer?

1: Papillary

2: Follicular

3: Medullary

4: Anaplastic

732-: Low calcium and high phosphate is seen in -

1: Hyperparathyroidism

2: Hypoparathyroidism

3: Hypehyroidism

4: Hypothyroidism

733-: Which of the following statements about iodine preparations is false?

1: Contraindicated in hypehyroidism

2: Causes iodism

3: Inhibits the release of thyroxine

4: Inhibits the synthesis of iodo thyroxine and iodo thyronine

734-: Which one of the following androgen is not produced by Leydig cells of testis?

1: Testosterone

2: Androstenedione

3: Dihydrotestosterone

4: Dehydroepiandrostenedione

735-: The drugs used in the treatment of idiopathic hypercalcemia except is -

1: Allopurinol

2: Furosemide

3: Acetazolamide

4: Thiazide

736-: This patient had hypercalcemia with a suppressed parathyroid hormone level. What is the diagnosis?

1: Hodgkin's lymphoma

2: Hyperthyroidism

3: Parathyroid carcinoma

4: Small-cell lung cancer

737-: Which of the following insulin is rapidly acting?

1: Insulin lispro

2: Regular insulin

3: Insulin glargine

4: NPH

738-: All of the following are natural estrogens EXCEPT:

1: Estradiol

2: Ethinylestradiol

3: Estriol

4: Estrone

739-: Which of the follow ing is not seen in Non-ketotic hyperosmolar coma?

1: Insidious onset

2: KussmauPs breathing

3: Seen in elderly

4: Seen in type 2 DM

740-: Oxytocin causes all except:

1: Lactogenesis

2: Milk ejection

3: Contraction of uterine muscle

4: Myoepithelial cell contraction

741-: Primary hyperaldosteronlsm does not have -

1: Ankle oedema

2: Polyuria

3: Hypeension

4: Hypokalemia

742-: MEN1 tumour suppressor gene is associated with all of the following, except:

1: Menin

2: JunD

3: KMT2A (MLL)

4: GDNF (glial-derived neurotrophic factor)

743-: Constriction of efferent aeriolar produces:

1: Biphasic response on GFR

2: Increased per-tubular oncotic pressure

3: Increased per-tubular absorption

4: All

744-: Which of the following is not a genetic syndrome associated with diabetes?

1: Down syndrome

2: Klinefelter syndrome

3: Turner syndrome

4: Angelman syndrome

745-: Which of the following production is noted in Cushing's Syndrome a tumour associated -

1: Decrease production of coisol

2: Increase production of coisol

3: Excessive production of epinephrine

4: Excessive production of vasopressin

746-: The best marker to diagnose thyroid related disorders is-

1: T3

2: T4

3: TSH

4: Thyroglobulin

747-: A 58-year-old man is referred to your office after evaluation in the emergency room for abdominal pain. The patient was diagnosed with gastritis, but a CT scan with contrast performed during the work-up of his pain revealed a 2-cm adrenal mass. The patient has no history of malignancy and denies erectile dysfunction (ED). Physical examination reveals a BP of 122/78 with no gynecomastia or evidence of Cushing syndrome. His serum potassium is normal. What is the next step in determining whether this patient's adrenal mass should be resected?

1: Plasma aldosterone/renin ratio

2: Estradiol level

3: Plasma metanephrines and dexamethasone-suppressed cortisol level

4: Testosterone level

748-: Which of the following drugs halts macrovascular as well as microvascular effects of DM?

1: Acarbose

2: Biguanides

3: Meglitinide

4: Algaliptin

749-: Male gynaecomastia is seen with:

1: Clomiphene

2: Testosterone

3: Spironolactone

4: Tamoxifen

750-: A 29-years-old male taking oral hypoglycemic drug never had ketonuria in his life. His BMI is 20.5. His grandfather had diabetes and his father who is only son of his grandfather too had the disease. Which type of DM this person will be most likely -

1: Pancreatic

2: MODY

3: Type I

4: Type II

751-: Clomiphene acts to induce ovulation by wof mechanisms

1: Diminishing ER-mediated negative feedback at the pituitary

2: Increasing the action of ER a in the ovary

3: Increasing the action of ER a in the hypothalamus

4: Increasing the amount of ER a

752-: Rate limiting enzyme in catecholamine biosynthesis is

1: Tyrosine hydroxylase

2: Dopa Decarboxylase

3: Dopamine beta-hydroxylase (DBH)

 

4: Phenylethanolamine-N-Methyltransferase (PNMT)

753-: Hormone replacement therapy is contraindicated in-

1: Atherosclerosis

2: Thromboembolism

3: Osteoporosis

4: Gall stones

754-: Which of the following is not a feature of hypercalcemia?

1: Diarrhea

2: Polyuria

3: Depression

4: Vomiting

755-: Ovulation of ovary is influenced by

1: LH

2: FSH

3: LH+FSH

4: GnRH

756-: A young male patient presents with LDL 600 mg/dl, triglycerides 160 mg/dl. What would be the most likely finding on physical examination?

1: Tendon xanthoma

2: Lipemia retinalis

3: Eruptive tuberous xanthomas

4: Xanthelesma

757-: Phaeochromocytoma arises from -

1: Adrenal gland

2: Mediastinum

3: Chest wall

4: Neck

758-: Inapproprite ADH secretion is characterised by the following except -

1: Hypo-osmolar urine

2: Water intoxication

3: Expanded fluid volume

4: Hypomagnesemia

759-: Longest acting glucocorticoids is -

1: Prednisone

2: Prednisolone

3: Cortisone

4: Dexamethasone

760-: Which of the tumours are unique to pregnancy

1: Luteoma

2: Serous cystadenoma

3: Mucinous cystadenoma

4: Teratoma

761-: Sperm acquires motility in

1: Seminal vesicle

2: Testes

3: Epididymis

4: Ejaculatory duct

762-: Which is not an insulin analogue?

1: Insulin glargine

2: Insulin lispro

3: Actrapid

4: Insulin aspart

763-: Most common cause of delayed pubey in males is

1: Kallaman syndrome

2: Klienfelter syndrome

3: Constitutional

4: Prader-willi syndrome

764-: A vasopressin analogue does not produce therapeutic effect through vasopressin V-2 receptor in which of the following -

1: Central diabetes insipidus

2: Bleeding esophageal varices

3: Type 1 van Willebrand's disease

4: Primary nocturnal enuresis

765-: In the adrenal gland, androgens are produced by the cells in the-

1: Zonaglomerulosa

2: Zonareticularis

3: Zonafasciculata

4: Medulla

766-: C terminal end of androgen receptor is concerned with

1: Ligand binding

2: Increasing biological half life

3: Increasing the affinity of receptor to DNA

4: Increasing the level of transcription

767-: A 55-year-old man has experienced increasing lethargy for the past 7 months. Physical examination shows the hyperpigmentation of the skin. Vital signs include a temperature of 36.9degC, pulse of 70/min, respirations of 14/min, and blood pressure of 95/65 mm Hg. Laboratory studies include a serum cortisol level of 3 mg/mL at 8:00 A.M. with a serum corticotropin level of 65 pg/mL. Which of the following diseases most often occurs in patients with this disorder?

1: Type 2 diabetes mellitus

2: Classic polyarteritis nodosa

3: Hashimoto thyroiditis

4: Systemic lupus erythematosus

768-: Increased blood levels of cholesterol that are seen in hypothyroidism are most likely due to

1: Decreased calorigenesis

2: Decreased production of LDL receptor in liver and the thus decreased clearance by liver

3: Decreased production of LDL receptor in the adipose tissue and increases release of cholesterol from adipose tissues

4: Increased breakdown of lipoproteins releasing releasing cholesterol in circulation

769-: Norplant contains how many capsules of levonorgestrel:

1: 4

2: 6

3: 8

4: 10

770-: A patient Shweta with raised serum alkaline phosphatase and raised parathormone level along with low calcium and low phosphate level is likely to have-

1: Primary hyperparathyroidism

2: Paget's disease

3: Osteoporosis

4: Vitamin D deficiency

771-: A female presents with anorexia, weight loss, hyperpigmentation, bowel changes, and light headedness on standing. The cosyntropin stimulation test shows random serum coisol of 11 mcg/dL (normal is greater than or equal to 20 mcg/dL). Serum coisol 1 hour after 0.25 mg cosyntropin N is 14 mcg/dL. (The rise in coisol is expected to be > 7 mcg/dL). Aldosterone level is 10 ng/dL. Which of the following is an appropriate treatment for this patient?

1: Hydrocoisone 15 mg daily for life

2: Prednisone 5 mg daily for life

3: Hydrocoisone 15 mg and fludrocoisone 0.1 mg daily for life

4: Prednisone 60 mg daily tapering to 10 mg a day and fludrocoisone 0.1 daily mg for life

772-: Which of the following is not steroid?

1: Estrogen

2: Cholic acid

3: Leukotrians

4: Vitamin D

773-: Tertiary hyperparathyroidism is -

1: Autonomous state due to monoclonal outgrowth of previously hyperplastic parathyroid glands

2: Increased sensitivity to serum calcium

3: Seen in patients with parathyroid adenoma

4: Dependent of hypothalamic stimulus

774-: A 40-year-old diabetic woman complains of flank pain and fever. Her temperature is 38.7degC (103degF), respirations are 25 per minute, and blood pressure is 150/90 mm Hg. Urinalysis reveals pyuria with WBC casts. Which of the following features of diabetes is the most impoant contributing factor in development of flank pain and fever in this patient?

1: Anti-insulin antibodies

2: Glycosylation of hemoglobin

3: Peripheral insulin resistance

4: Hyperglycemia

775-: Hypoglycemic unawareness that occurs in diabetic patients when transfered from oral hypoglycemics to insulin, is due to-

1: Autonomic neuropathy

2: Insulin resistance

3: Lipodystrophy

4: Somogi phenomenon

776-: Normal sperm count is

1: 20-40 million/ml

2: 40-60 million/ml

3: 60-80 million/ml

4: 15 million/ml

777-: Hypomagnesemia is seen in all Except

1: Gitelman syndrome

2: Hungry bone disease

3: Paget disease

4: Prolonged thiazide therapy

778-: Mechanism of action of Calcitriol is:

1: Decreased calcium resorption calcium from bone

2: Increase calcium absorption from intestine

3: Decreased calcium absorption from kidney

4: Decrease calcium absorption from intestine

779-: Anterior pituitary secrets all except

1: Growth hormone

2: FSH

3: Oxytocin

4: Prolactin

780-: RxofDI-

1: ADH

2: Thiazide

3: Loop diureticsd

4: Insulin

781-: False about thyroid stimulating hormone (TSH) is:

1: secretion is pulsatile In nature

2: normal plasma level is 0.2-0.5 micro IU/ml

3: secretion is entirely under control of hypothalamus

4: increases synthesis and release of thyroid hormones

782-: Which of the following antifungal drug can be used in the treatment of cushing syndrome?

1: Ketoconazole

2: Fluconazole

3: Itraconazole

4: Miconazole

783-: All of following are histomorphological features of Graves disease, except:

1: Symmetrical enlargement of thyroid gland

2: Tall and crowded follicular epithelial cells

3: Small papillae having fibrovascular core projecting into the follicular lumen

4: Pale colloid in the follicular lumen with scalloped margins

784-: Increased temperature after ovulation is due to

1: Estrogen

2: Progesteron

3: FSH

4: LH

785-: What will happen if insulin alone is given rapidly in diabetic Ketoacidosis?

1: Hypokalemia

2: Hypernatremia

3: Hyperkalemia

4: Hypocalcemia

786-: ADH is secreted by

1: Hypothalamus

2: Posterior pituitary

3: Anterior pituitary

4: Pineal gland

787-: Which of the following drugs is not used in the management of PCOD

1: Clomiphene

2: Tamoxifen

3: Oral contraceptives

4: Metformin

788-: Basal Metabolic Rate depends most closely on

1: Lean body mass

2: Body mass index

3: Obsesity

4: Body surface area

789-: Most commonly used insulin for emergencies of diabetes like diabetes ketoacidosis

1: Lispro

2: Regular

3: Aspa

4: Glargine

790-: Autonomic Polyglandular syndrome 2 is associated with Adrenocoical insufficiency and-

1: PGAl

2: Hashimata's thyroiditis

3: Islet cell adenoma

4: Type 1 diabetes

791-: Features of Laurence-Moon-Biedl syndrome include:

1: Hypogonadism

2: Obesity

3: Polydactyly

4: All of the above

792-: All of these hormones use cAMP as second messenger except

1: Coicotropin

2: Dopamine

3: Glucagon

4: Vasopressin

793-: Milk is stored before ejection in

1: Lactiferous ducts

2: Alveoli

3: Nipple

4: Stroma

794-: Which of the following is an aromatase inhibitor?

1: Tamoxifen

2: Letrozole

3: Danazol

4: Taxane

795-: Non pitting edema is seen in ?

1: Congestive cardiac failure

2: Myxedema

3: Liver failure

4: Renal failure

796-: Calcium does not bind to

1: Tropomyosin

2: Calmodulin

3: Troponin

4: None

797-: The progestogenic emergency contraceptive pills act by:

1: Altered cervical secretion

2: Inhibition of ovulation

3: Anti-implantation effect

4: Inhibition of LH secretion

798-: Proopiomelanocoin is released from

1: Hypothalamus

2: Liver

3: Adrenal

4: Lung

799-: Features of cafe au lait spots are all Except

1: Larger

2: Arise independent of sun exposure

3: Contain aggregates of melanosomes

4: Most common pigmented lesion

800-: A 55-year-old man who is on dialysis because of end-stage renal disease complains of pain in his jaw and left arm for 6 months. An X-ray of the left arm reveals multiple, small bone cysts and pathologic fractures. What is the appropriate diagnosis for this patient's bone lesions?

1: Chronic osteomyelitis

2: Marble bone disease

3: Osteitis fibrosa cystica

4: Osteoid osteoma

801-: Longest acting insulin

1: Degludec

2: Aspa

3: Regular insulin

4: Glargine insulin

802-: Hyperaldosteronism is associated with all except

1: Hypernatremia

2: Hypokalemia

3: Hypeension

4: Metabolic acidbsis

803-: Factors responsible for ketosis in a patient of von Gierke&;s disease are all, except

1: Hypoglycemia

2: Impaired gluconeogenesis

3: Impaired glycogenolysis

4: Low fat mobilzation

804-: All may be seen in hyperparathyroidism Except

1: Solitary adenoma

2: Its malignant

3: Thyroid malignancy

4: Osteomalacia

805-: A patient with polyuria and polydipsia is newly diagnosed with central diabetes insipidus (DI). Which of the following is the most likely finding on magnetic resonance imaging (MRI) of the brain?

1: hypothalamic tumor

2: hyperintense signals in the cerebral cortex

3: agenesis of the corpus callosum

4: lack of hyperintense signals from the posterior pituitary

806-: This patient presented with jaw pain and was found to have an elevated alkaline phosphatase and a normal serum creatinine. Which one of the following tests would confirm the diagnosis?

1: Bone scan

2: Insulin-like growth factor-1 level

3: Serum calcium

4: Abdominal ultrasound

807-: Hypophostemia is a caused by -

1: Primary hypothyroidism

2: Primary hyperparathyroidism

3: Primary hypehyroidism

4: Hypoparathyroidism

808-: Thyroid hormone receptors bind to DNA as a heterodimer with

1: Prolactin receptor

2: Growth hormone receptor

3: Retinoid X receptor

4: Insulin receptor

809-: Following are thyrotoxicosis signs EXCEPT -

1: Infrequent blinking

2: Inability to converge the eyeballs

3: Visible upper scleara on looking straight

4: Stridor on gently pressing lobes of thyroid

810-: In a patient with NIDDM which of the following condition is seen-

1: Ketosis commonly occurs on stopping treatment

2: Hyperiglyceridmia never occurs

3: Pancreatic beta cells stop producing insulin

4: There are increased levels of insulin in blood

811-: A large toxic retrosternal goiter is best treated by-

1: Antithyroid drugs

2: Radio iodine

3: Surgical resection

4: Lugol's iodine

812-: All are antithyroid drugs EXCEPT:

1: Propylthiouracil

2: Methimazole

3: Carbimazole

4: Carbamazepine

813-: True statement is -

1: Clomiphene acts as antiestrogen both on pitatary and hypothalamus

2: Danazol increases FSH and LH both

3: Methimazole inhibits thyroxine release from thyroid

4: Cyproterone is a potent antiandrogen

814-: Estrogen receptors are seen in

1: Microsomes

2: Membrane bound

3: Nucleus

4: Mitochondria

815-: A 5 year old girl presents with hypeension and virilization. There is also finding of hypokalemia what is the diagnosis

1: 21-hydroxylase deficiency

2: 3-ss hydroxy steroid deficiency

3: 11-ss hydroxylase deficiency

4: Conn's disease

816-: Which of the following statements about 21 alpha hydroxylase deficiency is false

1: Most common cause of congenital adrenal hyperplasia in children

2: Affected females present with ambiguous genitalia

3: Affected males present with prococious pubey

4: Hypokalemic alkalosis is seen

817-: Which of the following is recombinant PTH -

1: Teriparatide

2: Cinacalcet

3: Carisoprodol

4: Oxethazaine

818-: Drug of choice for precocious puberty:

1: Cyproterone acetate

2: Danazol

3: Medroxyprogesterone

4: GnRH agonists

819-: all of the following are features of thyrotoxicosis, except -

1: Diastolic murmur

2: tremors

3: Irregularly, irregular pulse

4: osteoporosis

820-: Dilutional Hyponatremia is seen in

1: Addinsons disease

2: Diabetes insipudus

3: Diuretic therapy

4: None

821-: Pancreatitis is an ADR of which antidiabetic?

1: Vildagliptin

2: Metformin

3: Glibenclamide

4: Insulin

822-: True about pseudohypoparathyroidism-

1: Heterotopic calcification

2: edCa2+

3: iedP04

4: TedPTH

823-: True about atosiban is?

1: Is an oxytocin receptor antagonist

2: Is an progesterone receptor antagonist

3: Is least effective in inhibiting preterm uterine Contractions

4: Is a anti-tocolytic drug

824-: Which of the following statements about Diabetic Ketoacidosis is true -

1: Decreased Bicarbonate

2: Increased Lactate

3: Normal anion gap

4: Glucose < 250 mg\/dl

825-: All of the following are true about Graves disease, except:-

1: More common in males

2: Autoimmune in etiology

3: May result in hypehyroidism

4: Non-thyroid manifestations can also be seen

826-: Following are second messengers

1: CAMP

2: CGMP

3: Inositol triphosphate

4: Diacylglycerol

827-: Somatomedin mediates

1: Deposition of chondroitin sulfate

2: Lipolysis

3: Gluconeogenesis

4: Decreased rate of glucose uptake by cells

828-: Association of sexual precocity, multiple cystic bone lesions and endocrinopathies are seen in

1: McCune-Albright's syndrome

2: Granulosa cell tumor

3: Androblastoma

4: Hepatoblastoma

829-: A 52 years old male with toxic adenoma, treatment of choice is -

1: Surgical-removal of adenoma

2: Radiotherapy

3: Radioactive Ij

4: Medical treatment

830-: True about febuxostat:

1: Anti-gout and Xanthine Oxidase inhibitor

2: Purine inhibitor

3: Dose adjustment required in renal impairment

4: Has uricosuric action

831-: Decreased activity of type I 5'-monodeiodinase could lead to which physiologic effects

1: Increased plasma triiodothyronine (T3)

2: Increased plasma reverse T3

3: Decreased plasma thyroxine T4

4: Increased TSH

832-: Can be caused by vascular diseaseFor the above causes of sexual dysfunction, select the most likely clinical feature.

1: loss of sexual desire

2: failure of erection with absent nocturnal penile tumescence (NPT)

3: absence of emission

4: absence of orgasm with normal libido and erectile function

833-: Causes of hypopituitarism are all, except -

1: Cancer breast

2: Cancer bronchus

3: Chromophilic adenoma

4: Acidophilic tumour

834-: GnRH analogue used in hormonal treatment of carcinoma prostate?

1: Goserelin

2: Nilutamide

3: Cyproterone acetate

4: Finasteride

835-: Ullipristal acetate is

1: GnRH agonist

2: Androgen antagonist

3: Selective estrogen receptor modulator

4: Selective progesterone receptor modulator

836-: the following are features of primary hyperaldosteronism -

1: Pedal edema

2: Polyurea

3: Hyperkalemia

4: Hypeension

837-: All these hormones use cAMP as the second messenger except

1: Coicotropin

2: Dopamine

3: Glucagon

4: vasopressin

838-: Seoli cells have receptors for

1: FSH

2: LH

3: Inhibin

4: Progesterone

839-: Which of the following is anti-androgenic drug?

1: Bicalutamide

2: Oxymetholone

3: Raloxifene

4: Stanozolol

840-: All are true statements about pheochromocytoma except?

1: 90% are malignant

2: 95% occur in the abdomen

3: They secrete catecholamines

4: They arise from sympathetic ganglia

841-: Steroid receptors at

1: Cellular membrane

2: Cytoplasm

3: Nucleus

4: All of the above

842-: Glucocoicoids without mineralcoicoid activity is seen in all except:

1: Triamcinolone

2: Betamethasone

3: Coisol

4: Dexamethosone

843-: Lesions of which of the hypothalamic nuclei cause diabetes insipidus:

1: Dorsomedial nuclei

2: Supraoptic and paraventricular nuclei

3: Median preoptic nuclei

4: Ventromedial nuclei

844-: Secretion of prolactin is inhibited by:

1: Dopamine

2: Nor-adrenaline

3: Adrenaline

4: Serotonin

845-: Which of the following is not involved in MEN II syndrome -

1: Pituitary tumor

2: Medullary carcinoma of thyroid

3: Pheochromocytoma

4: Parathyroid adenoma

846-: In diabetes and starvation, acidosis occur due to:

1: Glycogen

2: Ketone bodies

3: Glucose

4: Sphingolipids

847-: An 18-year-old girl is brought to hospital because of weakness. She feels well, but is under a lot of stress at school. Most of her time is spent studying, dieting, and exercising. On physical examination she is 5'8" weighs 85lbs, and appears unwell. The blood pressure is 85/70 mm Hg, heart rate is 50/min, and there is prominent muscle wasting. Which of the following is this patient most likely at risk for?

1: renal failure

2: ventricular tachyarrhythmias

3: DM

4: hyperthermia

848-: A young patient presented with HTN and VMA 14 mg/24, the causes is/are -

1: Medullary carcinoma thyroid

2: VonHippelLindau syndrome

3: Grave's disease

4: Pseudohypoparathyroidism

849-: Two litres of normal saline in 4 hours will stimulate secretion of-

1: Atrial natriuretic peptide

2: IL-2

3: TNF - alpha

4: Prostaglandins

850-: Along with insulin which is produced from beta cells of the pancreas? (REPEAT)

1: Amylin

2: C peptide

3: Both

4: None

851-: A sho statured boy with rhizomelic limbs and brachydactyly is a feature of

1: Achondroplasia

2: Laron dwarfism

3: Hypothyroidism

4: Morquio disease

852-: A 30 year old male presents with recurrent attacks of sweating and dizziness. Fuher workup reveals low blood glucose levels with inappropriatlely elevated insulin and C-peptide levels. Imaging shows a lesion in the pancreas. He is diagnosed with insulinoma and given diazoxide. Which of the following is the mechanism of action of this drug?

1: Opening of the sensitive K+ channels

2: Closing of the ATP sensitive K+ channels

3: Increase in number of GLUT-4 receptors

4: Opening of the volatage sensitive Ca+2 channels

853-: A patient has IDDM diagnosed at age of 15 years. The most reliable indicator for diabetic nephropathy is-A patient has IDDM diagnosed at age of 15 years. The most reliable indicator for diabetic nephropathy is-

1: Urine albumin < 50 mg per day in 3 consecutive samples

2: Urinary protein >550mg perday for3 consecutive samples

3: Development of diabetic retinopathy

4: Hematuria

854-: Which of the following is rapidly acting insulin?

1: Lente

2: Glargine

3: Ultralente

4: Lispro

855-: All of the following conditions are known to cause diabetes insipidus except-

1: Multiple sclerosis

2: Head injury

3: Histiocytosis

4: Viral encephalitis

856-: Hypercalcemia is seen in all, except-

1: Acute pancreatitis

2: Hypervitaminosis D

3: Addison's disease

4: Hyperparathyroidism

857-: Testoesterone receptor antagonist is -

1: Flutamide

2: Mifipristone

3: Danazol

4: Nonoxynol

858-: A patient presents with DKA. Initial management?

1: 3% saline

2: 5% dextrose

3: 0.9% saline

4: Colloids

859-: In which of the following conditions the level of creatinine kinase 1 increases?

1: Myocardial ischemia

2: Brain Ischemia

3: Kidney damage

4: Electrical cardioversion

860-: A common cause of Cushing syndrome is -

1: Cancer producing ectopic ACTH

2: Pituitary adenoma

3: Adrenal tuberculosis

4: None of the above

861-: The activity of which of the following enzymes is increased in Diabetes Mellitus?

1: CPT-1

2: Phosphoenol Pyruvate carboxykinase (PEPCK)

3: Glucose-6-Phosphatase

4: All

862-: Which drugs action needs insulin presence to produce its therapeutic action?

1: Glibenclamide

2: Nateglinide

3: Pioglitazone

4: Empagliflozin

863-: Which of the following is not directly related to Hashimoto's thyroiditis?

1: Hypothyroidism

2: Slow onset

3: Neuropathy

4: Autoimmune disease

864-: A man is given continuous testosterone. It would lead to

1: Azoospermia

2: Increased sperm motility

3: Increased spermatogenesis

4: Increased gonadotrophins

865-: A 56-year-old man with 14-year history of diabetes mellitus presents with poor vision, peripheral vascular disease, and mild proteinuria. Which of the following is best monitor of control of blood sugar levels in this patient?

1: Glycosylated hemoglobin

2: Islet cell autoantibody

3: Serum myoinositol

4: Serum sorbitol

866-: A 25 year old male presnents with weakness, occasional vomiting hypotension, skin and mucous membrane pigmentgation. The diagnosis can be best established by -

1: Metyrapone test

2: Basal plasma Coisol levle

3: 24-hour urinary 17-Ketosteroid

4: ACTH stimulation test

867-: Most common brain lesion causing central precocious puberty is:

1: Tuberculous meningitis

2: Tuberous sclerosis

3: Astrocytoma

4: Hypothalamic hamartoma

868-: The site of action of the furosemide is

1: Thick ascending limb of loop of Henle

2: Descending limb of loop of Henle

3: Proximal convoluted tubule

4: Distal convoluted tubule

869-: A 57 years old lady presents with type-ll diabetes mellitus with symptoms like polyuria, excessive thirst, fatigue and blurred vision. Further investigation reveals insulin resistance. Which one of the following drug is most appropriate for initiating treatment along with diet and exercise?

1: Pioglitazone

2: Metformin

3: Glimepiride

4: Repaglinide

870-: A 1 -year-old child is brought to the hospital with thyroid swelling. The child has abnormal weight gain and has poor activities. His TSH is found raised and T4 is very low. Which of the following is most likely cause of his disease?

1: Hypothalamic disease

2: Thyroid dysgenesis

3: Dyshormonogenesis

4: End organ receptor insensitivity

871-: 'A 46 years-old male patient has Cushing's syndrome due to the adrenal tumor. Which of the following drugs would be expected to reduce the symptoms in this case?

1: Betamethasone

2: Coisol

3: Fludrocoisone

4: Ketoconazole

872-: Which of the following is an indication for coicosteroids?

1: Psychosis

2: Herpes simplex

3: Loeffler's syndrome

4: Subacute thyroiditis

873-: For the following dyslipidemias, select the most characteristic finding.Type III hyperlipoproteinemia.

1: palmar plane xanthomas

2: triglycerides > 1000

3: subcutaneous extensor tendon xanthomas

4: low serum cholesterol

874-: Which of the following statements regarding Voglibose is FALSE?

1: It acts by inhibiting the enzyme alpha-glucosidase

2: It reduces post-prandial hyperglycemia

3: It decreases the progression of impaired glucose tolerance to ove diabetes mellitus

4: It can cause hypoglycemia

875-: Cushing's disease shows -

1: Increased ADH

2: Increased urinary catecholamines

3: Increased ACTH and decreased Coisol

4: Increased ACTH and increased Coisol

876-: Vanillyl mandelicacid (VMA) increased in

1: Parathyroidism

2: Pheochromocytoma

3: MEN-1

4: Addison's disease

877-: All are true about sitagliptin EXCEPT:

1: Always given with insulin

2: Preferentially reduce post prandial blood sugar

3: Less side effects

4: Lowers HbA1 C

878-: What percentage of beta cell mass is destroyed when type 1 diabetes becomes evident?

1: 20%

2: 40%

3: 60%

4: 80%

879-: In hypersmolar hyperglycemic non ketotic coma the blood glucose level is around -

1: 55mmol\/l

2: 20mmol\/l

3: 80mmol\/l

4: 5mmol\/l

880-: Drug of choice for pain relief in diabetic neuropathy is-

1: Gabapentin

2: Lamotrigene

3: Pregabalin

4: Mexiletene

881-: A 75years female patient with fracture neckof femur 1 month back,presents with 2 days history of altered sensorium & decreased urine output. Urea is 140 mg/dl, creatinine is 2 mg/dl, Ca is 15.5 mg/dl. All of will be useful in immediate treatment except -

1: Give NS

2: Furosemide

3: Hemodialysis

4: Bisphosphonates

882-: On insulin administration, change expected in ECF is

1: Hypocalcemia

2: Hyponatremia

3: Hypoglycemia

4: Hyperkalemia

883-: Insulin release due to K+ closure is seen with

1: Nateglinide

2: Acarbose

3: Exenatide

4: Sitagliptin

884-: Which of the following is found in primary hypothyroidism-

1: T3 decrease, T4 decrease, TSH increase

2: T3 decrease, T4 increase, TSH decrease

3: T3 normal, T4 normal, TSH increase

4: T3 decrease, T4 decrease, TSH normal

885-: Drug used for type I and type II Diabetes mellitus is-

1: Glipizide

2: Tolbutamide

3: Metformin

4: Insulin

886-: A 75 years female patient with fracture neck of femur 1 month back, presents with 2 days history of altered sensorium & decreased urine output Urea is 140 mg/dl, creatinine is 2 mg/dl, Ca is 15.5 mg/dl. All of will be useful in immediate treatment except -

1: GiveNS

2: Furosemide

3: Hemodialysis

4: Bisphosphonates

887-: A 36 year old female with symptoms of hyperparathyroidism, tumor in pancreas, adrenal cortical hyperplasia, pituitary adenomas, islet cell tumor with cutaneous angiofibromas. What is the diagnosis ?

1: MEN 1

2: MEN 2 A

3: MEN 2 B

4: MEN 2 C

888-: Insulin increases the entry of glucose into

1: All tissues

2: Renal tubular cells

3: The mucosa of the Small intestine

4: Skeletal muscle

889-: Which of the following contains as aromatic a ring?

1: Estradiol

2: Testosterone

3: Aldosterone

4: Coisol

890-: Most common cause of Cushing's syndrome is

1: Exogenous coicosteroids

2: Pituitary tumor

3: Adrenal adenoma

4: Adrenal carcinoma

891-: A 56-year-old man complains of increased thirst and increased urinary volume and frequency. He has also noticed new symptoms of constipation and generalized aches and pains. He has no significant past medical problems and his physical examination is normal. Initial investigations consist of a normal complete blood count (CBC) fasting blood glucose and urinalysis. His sodium, urea, and creatinine are normal, but calcium is 12.4 mg/dL (8.4-10.2 mg/dL). Further testing reveals an elevated PTH level. Which of the following is the most likely mechanism for the polyuria in this condition?

1: direct effect of PTH on the kidney

2: hypercalcemia-induced renal tubular acidosis (RTA)

3: hypercalcemia-induced chronic renal failure

4: hypercalcemia-induced defect in renal concentrating ability (nephrogenic diabetes insipidus)

892-: A 40-year-old woman presents to the clinic for evaluation of symptoms of light-headedness associated with sweating, palpitations, and hunger. The symptoms are most pronounced whenever she misses a meal.On physical examination, her vital signs are normal, as is the heart, lungs, and abdominal examination. Her past medical history is negative and she is not taking any medications. During one such episode, while in hospital, her blood glucose level was 30 mg/dL and the symptoms resolved with drinking some juice. Which of the following is the most likely diagnosis?

1: excess growth hormone

2: Cushing disease

3: thyrotoxicosis

4: tumor of the pancreatic beta-cells

893-: Uses of lanreotide are all except

1: Insulinoma

2: Carcinoid syndrome

3: Glioma

4: Glucagonoma

894-: Time about milk secretion

1: Neuroendocrine pa of post pituitary is involved

2: Secretion by contraction of lactiferous sinus oxytocin

3: Vasopressin hormone is involved

4: Affected by emotion

895-: The immediate treatment of 10 kg weight infants presented with tetany

1: IV Diazepam

2: IV calcium gluconate with cardiac monitoring

3: IV slow phenobarbitone

4: Wait and watch

896-: Drug of choice associated with pheochromocytoma

1: Phenoxybenzamine

2: Phentolamine

3: Labetalol

4: Esmolol

897-: A large, protruding jaw; large hands and feet; normal height; and an elevated blood glucose level.

1: Elevated blood levels of aldosterone and renin resulting from an atherosclerotic plaque in a renal artery.

2: Hyperprolactinemia due to a pituitary tumor.

3: Acromegaly due to a GH-producing tumor that developed in adulthood.

4: Cushing syndrome due to an adrenal tumor.

898-: Necrobiosis lipoidica is seen in -

1: DI

2: Lyme disease

3: Diabetes mellitus

4: Symmonds disease

899-: Sildenafil is used in treatment of:

1: Sterility

2: Priaprism

3: Erectile dysfunction

4: Decreased libido

900-: Cushing's disease presents with-

1: IncreasedACTH and increased Coisol

2: Decreased ACTH and decreased Coisol

3: IncreasedACTH and decreased Coisol

4: Increased catecholamines

901-: Growth hormone level decreased in

1: Hypoglycemia

2: Fastiny

3: Sleep

4: Exercise

902-: A 30-year-old female presents with a need to progressively buy larger and wider shoes. She also cannot wear any of her rings anymore because they are too small. A physical examination shows a prominent brow, protruding lower jaw, and spaces between all of her teeth. This woman may have a tumor in which one of the following organs/tissues?

1: Hypothalamus

2: Bone marrow

3: Adrenal glands

4: Pancreas

903-: If a diabetic patient being treated with an oral hypoglycemic agent, develops dilutional hyponatermia, which one of the following could be responsible for this effect -

1: Chlorpropamide

2: Tolazamide

3: Glyburide

4: Glimepride

904-: Which is not true about Beclomethasone

1: Indicated for chronic use

2: Inhalational steroid

3: Effective in acute asthma

4: Predispose to fungal infection

905-: Not done by insulin

1: Glycogen synthesis

2: Glycolysis

3: Lipogenesis

4: Ketogenesis 1

906-: Epinephrine is synthesized from norepinephrine by

1: Hydroxylation

2: N-methylation

3: Deamination

4: Carboxylation

907-: After first meiotic division, the primary oocyte remains arrested in

1: Diplotene stage

2: Pachytene stage

3: Metaphase

4: Telophase

908-: Niacin is dangerous in diabetes mellitus because:

1: It causes insulin resistance

2: It causes sudden hypoglycemia

3: It decreases glucagon secretion

4: It decreases effect of other OHA

909-: A 53-year-old woman with a past medical history of chronic kidney disease due to diabetic nephropathy is noted to have hyperphosphatemia and hypocalcemia on routine electrolyte measurement. The disturbance is likely a result of metabolic bone disease seen in patients with chronic kidney disease. Which of the following findings is most likely associated with this electrolyte disturbance?

1: lethargy

2: neuromuscular irritability

3: anorexia

4: tachyarrhythmias

910-: Treatment of neurogenic diabetes insipidus is?

1: Vasopressin

2: Desmopressin

3: Terlipressin

4: Amiodarone

911-: Anti thyrogiobulin antibodies seen in -

1: Hashimoto thyroiditis

2: Graves disease

3: De quervain thyroiditis

4: Subacute lymphocytic thyroiditis

912-: Mineralocoicoid receptors are present in all of the following sites, except

1: Hippocampus

2: Kidney

3: Colon

4: Liver

913-: A patient with diabetes, hyperkalemia, urinary pH<5.5 . Probable cause is -

1: Uremia

2: Pseudohyperaldosteronism

3: Type I Renal tubular acidosis

4: DKA

914-: Endothelium-Derived Relaxing Factor (EDRF) induced vasodilatation is mediated by

1: Increased intracellular CGMP

2: Decreased intracellular CGMP

3: Increased extracellular cyclic Amp

4: Decreased intracellular cyclic Amp

915-: Drug causing gynecomastia is

1: Spironolactone

2: Rifampicin

3: Penicillin

4: Bumetanide

916-: TOC for post menopausal osteoporosis is-

1: Raloxifene

2: Tamoxifene

3: Estrogen

4: Alendronate

917-: Seoli cell feedback mechanism involves

1: Decreased LH

2: Decreased FSH

3: Decreased TRH

4: Decreased CRH

918-: A 36-year-old woman presents with swelling in her neck that she first noticed 3 months ago. She also complains of intermittent watery diarrhea over the same time period. Physical examination reveals a nontender nodule in the left lobe of the thyroid. The patient's mother died of thyroid cancer 8 years ago. The thyroid nodule is found to be "cold" by radioiodine scintiscan. A needle biopsy of the nodule reveals malignant cells and homogeneous eosinophilic material The tumor in the patient described in Question 38 is removed, and a section stained with Congo red reveals birefringent amyloid stroma. Genetic studies show that this patient has a familial cancer syndrome. In addition to hyperparathyroidism, the patient is advised that she is at risk of developing which of the following neoplastic diseases?

1: Craniopharyngioma

2: Follicular adenoma of thyroid

3: Neuroblastoma

4: Pheochromocytoma

919-: Which of the following is/ are side effect/s of growth hormone administration?

1: Pain at injection site

2: Glucose intolerance

3: Hypothyroidism

4: All the above

920-: A 35 yr old woman presents with swelling of the small joints of the hands. On examination, swan neck deformity is present. Labs show elevated RA factor levels and high anti-CCP levels. She diagnosed with rheumatoid ahritis and staed on steroids for a sho duration. What is the mechanism by which steroids reduce inflammation?

1: Inhibition of phospholipase A2

2: Inhibition of cyclo-oxygenase

3: | activity of lipoprotein lipase

4: Inhibition of lipogenase

921-: Middle aged female with mass in sellaturcica hormone increased is-

1: Prolactin

2: Thyroxine

3: Extrogen

4: ADH

922-: Clinical manifestations of hoarse cry, umbilical hernia, hypotonia, mottling of skin, lethargy, prolonged jaundice is seen in:

1: Gaucher's disease

2: Mucopolysaccharidosis

3: Growth hormone deficiency

4: Congenital hypothyroidism

923-: A 35-year-old woman, on hemodialysis for chronic renal disease, complains of pain in the hands. On examination, the joints are normal with no inflammation or tenderness on palpation. Lab values reveal a low calcium, high phosphate, and high PTH level. What is the most likely diagnosis?

1: scleroderma

2: gout

3: secondary hyperparathyroidism

4: pseudogout

924-: 17-a hydroxylase is not involved in the pathway for synthesis of -

1: Cortisol

2: Aldosterone

3: Androsteredione

4: Testosterone

925-: Melatonin is derived from

1: Tyrosine

2: Tryptophan

3: Glutathione

4: None

926-: Hypocalcemia due to calcitonin is by

1: Decreased excretion in kidney

2: Decreased bone resorption

3: Decreased intestinal reabsorption

4: Decreased renal reabsorption

927-: Drug causing Nephrogenic diabetes insipidus are all except-

1: Lithium

2: Demeclocycline

3: Acyclovir

4: Amphotericin B

928-: Steroid hormone receptors have attachment site for all except

1: Steroid hormone

2: Transcription repressors

3: Hormone responsive element

4: Transcription activators

929-: Estrogen is secreted during pregnancy, mostly by

1: Maternal ovary

2: Fetal ovary

3: Pituitary

4: Hypothalamus

930-: In which of the following tissues is glucose transpo into the cell enhanced by insulin?

1: Brain

2: Lens

3: Red blood cells

4: Adipose tissue

931-: This is a specimen of stalk resection of pedunculated bony swelling. Diagnosis is

1: Osteochondroma

2: Chondroma

3: Osteoid osteoma

4: Osteoclastoma

932-: Patients with Hashimoto's thyroiditis are at increase risk of developing

1: Papillary carcinoma

2: Follicular carcinoma

3: T-cell lymphoma

4: B-cell lymphoma

933-: Which of the following is not secreted by Seoli cells?

1: Activin

2: Inhibin

3: Follistatin

4: Relaxin

934-: All of the following use c-AMP as a second messenger except

1: Coicotropin

2: Dopamine

3: Testosterone

4: Vasopressin

935-: A young hypeensive patient has serum K+ 2.8 meq/L and aldosterone level with increased plasma rennin activity. The likely cause is/are -

1: Renal aery stenosis

2: Ectopic ACTH syndrome

3: Diuretic therapy

4: Conn's syndrome

936-: A 74-year-old woman has metastatic bone disease on x-ray. Which of the following mediators is least likely to be involved?

1: interleukin-6 (IL-6)

2: ectopic parathyroid hormone (PTH)

3: tumor necrosis factor (TNF)

4: interleukin-1 (IL-1)

937-: 2 year old child presented with diarrhoea and failure to thrive, Blood examination shows - Na = 122, K-6. He is most probably suffering from

1: Bater syndrome

2: 21- Hydroxylase deficiency

3: 11 - ss Hydroxylase deficiency

4: 17-a Hydroxylase deficiency

938-: Most common cause of congenital adrenal hyperplasia?

1: 17- Hydroxylase deficiency

2: 11- Hydroxylase deficiency

3: 21- Hydroxylase deficiency

4: 16- Hydroxylase deficiency

939-: Which of the following is not true about medullary carcinoma of thyroid ?

1: Origin is from 'C' cells of thyroid

2: Component of MEN- 1

3: Multicentric in origin

4: Amyloid deposition

940-: The active transport of 'Ca' is regulated by _____ which is synthesized in kidneys:

1: Cholecalciferol

2: Ergosterol

3: 25-OH cholecalciferol

4: 1, 25-di OH-Cholecalciferol

941-: To diagnose hyperglycemia of two weeks old the best investigation retrospectively is -

1: Ketones bodies

2: Glycosylated haemoglobin

3: Glucose in the blood

4: Chromosomal study

942-: Steroids are contraindicated in all, except

1: Diabetes mellitus

2: Hypeension

3: Eczemtaous skin disease

4: Peptic ulcer disease

943-: all of the following decreases bone resorption in Osteoporosis except

1: Alendronate

2: Etidronate

3: Strontium

4: Teriparatide

944-: Site of 25-hydroxylation of cholecalciferol

1: Kidney

2: Skin

3: Liver

4: Lung

945-: A patient was surgically treated for bilateral pheochromocytoma. He has staed developing gait abnormality hence MRI head was done. What is the probable diagnosis?

1: Autoimmune polyglandular syndrome

2: Multiple endocrine neoplasia type 3

3: Multiple endocrine neoplasia type 4

4: Von Hippel Landau Syndrome

946-: Which of the following hormones can cause hyperglycemia without known effects on glycogen or gluconeogenesis?

1: Thyroxine

2: Epinephrine

3: Glucocorticoids

4: Epidermal growth factor

947-: Receptors of glucocorticoids are seen in:

1: Cytosol

2: DNA

3: Nucleus

4: Cell surface

948-: Which of the following is a physiological uncoupler?

1: Thyroxine

2: Insulin

3: Glucagon

4: Norepinephrine

949-: Which is long acting glucocarticoid-

1: Hydrocartisone

2: Prednisolone

3: Cortisol

4: Dexamethasone

950-: All the following are causes of hyperthermia except:

1: Hypothyroidism

2: Cerebral hemorrhage

3: Succinyl Choline

4: Pheochromocytoma

951-: Which of the following is not an adverse effect of growth hormone therapy

1: Carpal tunnel syndrome

2: Hypoglycemia

3: Intracranial hypeension

4: Slipped femoral epiphysis

952-: A common cause of Primary hyperparathyroidism is-

1: Multiple parathyroid adenomas

2: Solitary parathyroid adenoma

3: Solitary thyroid adenoma

4: Ectopic PTH production

953-: All are antithyroid drugs except

1: Propylthiouracil

2: Methimazole

3: Carbimazole

4: Carbamazepine

954-: Function of vasopressin

1: Absorption of water in PCT

2: Absorption of water in loop of Henle

3: Absorption of water in collecting duct

4: Absorption of Na+ in PCT

955-: Catecholamine hormones are synthesized in the:

1: Chromaffin cells of adrenal medulla

2: Zona glomerulosa of adrenal cortex

3: Zona fasciculate of adrenal cortex

4: Zona reticularis of adrenal cortex

956-: The most common organ involved in MEN I is -

1: Parathyroid

2: Thyroid

3: Adrenal

4: Testis

957-: Which of the following statements regarding treatment of hypothyroidism in a patient with Ischemic hea disease is true -

1: Low dose of Levothyroxine

2: Normal dose of Levothyroxine

3: Do not use Levothyroxine

4: Use thyroid extract

958-: Corpus luteum in pregnancy is maintained by which hormone

1: Progesterone

2: Oestrogen

3: LH

4: FSH

959-: Which of the following drugs is a SERM useful for treatment of osteoporosis

1: Raloxifen

2: Bisphoshonates

3: Strontium

4: Estradiol

960-: The following are features of primary hyperaldosteronism except -

1: Polyuria

2: Hypeension

3: Hypokalemia

4: Hyperkalemia

961-: A 45-year-old female presents with symptoms of thyrotoxicosis. The RAIU scan shows increased uptake. Which of the following is the most likely diagnosis?

1: Hashimoto's thyroiditis

2: Struma ovarii

3: Thyrotoxicosis factitia

4: Choriocarcinoma

962-: Pituitary adenomas are regarded as macroadenomas when their size is

1: > 1 cm

2: > 1.5 cm

3: > 2 cm

4: > 2.5 cm

963-: Octerotide is used in all except

1: Glucagonoma

2: Insulinoma

3: Carcinoid syndrome

4: Glioma

964-: Characteristic feature of primary aldosteronism is -

1: Low serum sodium

2: High plasma renin

3: Low serum potassium

4: High serum creatinine

965-: Which of the following is NOT a steroid?

1: Estrogen

2: Progesterone

3: Relaxin

4: Testosterone

966-: Albright's syndrome includes all except -

1: Polyostotic fibrous dysplasia

2: Precocious pubey in girls

3: Patchy pigmentation

4: Pseudo hypoparathyroidism

967-: Which of the following is secreted by beta cells of pancreas along with insulin

1: Somatostatin

2: Amylin

3: Pancreatic polypeptide

4: Glucose like polypeptide

968-: Which of the following is an antiandrogenic drug?

1: Fluconazole

2: Itracanazole

3: Ketoconazole

4: Terbinafine

969-: A 45year old patient is having FBS 111mg/dl, PPBS 181mg/dl, HbA1C 6.1%. The diagnosis is

1: Pre diabetes

2: Type 2 DM

3: Type 1 DM

4: Stress hyperglycenia

970-: A 37-year-old woman has had difficulty swallowing and a feeling of fullness in the anterior neck for the past week. She is recovering from a mild upper respiratory tract infection 1 month ago. On physical examination, her temperature is 37.4degC, pulse is 74/min, respirations are 16/min, and blood pressure is 122/80 mm Hg. Palpation of her diffusely enlarged thyroid elicits pain. Laboratory studies show an increased serum T4 level and a decreased TSH level. Two months later, she no longer has these complaints. The T4 the level is now normal. Which of the following conditions is most likely to have produced these findings?

1: Hashimoto thyroiditis

2: Medullary thyroid carcinoma

3: Subacute granulomatous thyroiditis

4: Toxic follicular adenoma

971-: What is the most likely underlying diagnosis in this 82-year-old patient with diabetes mellitus who had undergone a total hip replacement 10 years previously?

1: Colon cancer

2: Hypogammaglobulinemia

3: Hypophosphatasia

4: Osteosarcoma

972-: At 20-degree centigrade atmospheric temperature, body reacts by

1: Cutaneous vasoconstriction

2: Shivering

3: |BMR

4: All of the above

973-: Primary hyperaldosteronism what is seen

1: Hyperkalemia

2: Hyponatremia

3: Maetabolic alkolosis

4: Fall in aldosterone with sodium loading

974-: Secondary hyperparathyroidism are seen in all except -

1: Rickets

2: Osteomalacia

3: Osteoporosis

4: Renal failure

975-: Which is a feature of Dawn phenomenon-

1: Early morning hypoglycemia

2: Early morning hyperglycemia

3: Breakfast hypoglycemia

4: Postprandial coma

976-: Growth hormone secretion is decreased by

1: Exercise

2: Stress

3: Glucose

4: Glucagon

977-: Streak gonads are seen in -

1: Turner syndrome

2: Klinefelter's syndrome

3: Patau's syndrome

4: Down's syndrome

978-: Drug of choice for precocious puberty in girls is:

1: GnRH analogue

2: Danazol

3: Cyproterone acetate

4: Medroxy progesterone acetate

979-: The syndrome of inappropriate antidiuretic hormone is characterized by the following-

1: Hyponatremia and urine sodium excretion > 20 meq/1

2: Hypernatremia and urine sodium excretion > 20meq/1

3: Hyponatremia and hyperkalemia

4: Hypernatremia and hypokalemia

980-: Which type of thyroid carcinoma is classically with calcitonin induced amyloid deposition?

1: Papillary

2: Follicular

3: Anaplastic

4: Medullary

981-: Systemic adverse effects of long term inhaled steroids are evident only at doses more than -

1: 200 mcg/day

2: 400 mcg/day

3: 600 mcg/day

4: 800 mcg/day

982-: All of the following decrease bone resorption in osteoporosis except

1: Alendronate

2: Etidronate

3: Strontium

4: Teriparatide

983-: In a chronic smoker with mild haemoptysis. He also gave a history of hypeension and obesity. Lab data showed raised ACTH levels, which were not suppressed by dexamethasone. The cause for the Cushing's syndrome ha the patient is -

1: MEN I

2: Pituitary adenoma

3: Adrenal coical adenoma

4: Ectopic ACTH secreting tumor

984-: Activation of the renin stimulates -

1: Water excretion

2: Potassium retention

3: Sodium retention

4: Magnesium excretion

985-: In which of the following organ is the glucose transport under insulin control?

1: Heart

2: Kidney

3: Brain

4: Intestine

986-: A 68-year-old man has experienced increasing malaise for 3 years. Physical examination shows no remarkable findings. Laboratory findings include a serum creatinine level of 4.9 mg/dL and a urea nitrogen level of 45 mg/dL. Abdominal CT scan shows small kidneys. Which of the following endocrine glandular lesions has developed secondary to the underlying disease in this patient?

1: Adrenal atrophy

2: Islet cell hyperplasia

3: Multinodular goiter

4: Parathyroid hyperplasia

987-: What Is the best and most sensitive Investigation for hypothyroidism ?

1: TSH levels

2: TRH levels

3: T3

4: T4

988-: Osteoporosis is an ADR of which antidiabetic?

1: Metformin

2: Glibenclamide

3: Pioglitazone

4: Acarbose

989-: Best preparation of insulin for IV injection is:(1995)

1: Lente

2: Semi lente

3: Regular insulin

4: Humulin

990-: Binds to the receptors on Leydig cells.

1: LH

2: PRL

3: TSH

4: GH

991-: Increased glucose is due ta

1: Glucagon

2: Insulin

3: Secretin

4: None

992-: Amylin is secreted by which of the following cells of Islets of Langerhans?

1: a cells

2: b cells

3: d cells

4: F cells

993-: A patient is receiveing insulin and acarbose for diabetes mellitus and developed hypoglycemia. Which of the following should be used for treatment of hypoglycemia in this patient

1: Sucrose

2: Galactose

3: Glucose

4: Starch

994-: Most common presentation of sick euthyroid syndrome is?

1: Low T3, high T4, varible TSH

2: Low T3 levels with normal T4 and TSH level

3: Low T3, Low T4, High TSH

4: Low T3, Low T4, Low TSH

995-: Which of the following statements regarding acarbose is FALSE

1: It acts by inhibiting the enzyme alpha -glucosidase

2: It reduces post prandial hyperglycemia

3: It decreases the progression of impaired tolerance to ove diabetes mellitus

4: It can cause hypoglycemia

996-: Half-life of insulin receptor is

1: 3 hr

2: 7 hr

3: 12 hr

4: 24 hr

997-: Diabetes mellitus is diagnosed if fasting blood glucose is?

1: >100

2: >126

3: >110

4: >116

998-: All are anti-androgens except

1: Finasteride

2: Flutamide

3: Cyproterone acetate

4: Dihydrotestosteron

999-: Largest amounts of prostaglandins are seen in

1: Seminal fluid

2: CSF

3: Blood

4: Urine

1000-: Corpus luteum stas regressing after how many days of ovulation

1: 5 days

2: 10 days

3: 15 days

4: 20 days

1001-: Paracetamol causes:

1: Renal failure

2: Pancreatic toxicity

3: Neurotoxicity

4: Hepatotoxicity

1002-: Hyperostosis is associated with all except -

1: Hypothyroidism

2: VitA intoxication

3: Cushings syndrome

4: Radiation osteoma

1003-: Which of the following is NOT a feature of thyrotoxicosis?

1: Palpitation

2: Anxiety

3: Weight loss

4: Menorrhagia

1004-: Insulin resistance is seen in all, except-

1: Werner's syndrome

2: Addison's disease

3: Ataxia telengiectasia

4: Lipodystrophy

1005-: A patient with a known brain tumor learns that his pituitary stalk has been affected. Secretion of which of the following hormones is increased after the sectioning of the pituitary stalk?

1: Prolactin

2: TSH

3: ACTH

4: FSH

1006-: Insulin resistance syndrome includes-

1: Dyslipidemia

2: Hypotension

3: Hyperuricemia

4: High HDL

1007-: Features of Cushing&;s syndrome are except-

1: Proximal muscle weakness

2: Hyponatremia

3: Hirsutism

4: Edema

1008-: Androgen is secreted by

1: Leyding cell

2: Seoli cell

3: Cowper's gland

4: Intermediate cells

1009-: Pancreatitis, pituitary tumor and phaeochromocytoma may be associated with -

1: Medullary carinoma of thyroid

2: Papillary carinoma of thyroid

3: Anaplasticcarinoma of thyroid

4: Follicular carinoma of thyroid

1010-: MEN type I includes tumors of all except

1: Parathyroid

2: Pituitary

3: Pancreas

4: Medullary carcinoma of thyroid

1011-: Criteria for diagnosis of diabetes mellitus is

1: Fasting plasma glucose > 100 mg/dl

2: 2h plasma glucose after a glucose challenge >=140 mg/d

3: 2h plasma glucose after a glucose challenge >=180 mg/dl

4: Hemoglobin A1c (HbA1c) >= 6.5%

1012-: Treatment of 42 year old obese man with blood glucose 450 mg, urine albumin 2+ Sugar 4+ Ketone 1+ is :

1: Insulin

2: Glibenclamide

3: Glipizide

4: Metformin

1013-: All are true about Hypothyroidism except:

1: Delayed dentition

2: Widened fontanelle

3: Distended abdomen

4: All are true

1014-: Function of oxytocin

1: Milk ejection

2: Milk secretion

3: Ovulation

4: Maintenance of pregnancy

1015-: Acetazolamide is

1: Competitive and reversible carbonic anhydrase inhibitor

2: Non-competitive and reversible carbonic anhydrase inhibitor

3: Competitive and irreversible carbonic anhydrase inhibitor

4: Non-competitive and irreversible carbonic anhydrase inhibitor

1016-: Calicitonin causes hypocalcemia by

1: Inhibiting bone resorption

2: Promoting osteolysis

3: Decreasing renal tubular reabsorption of calcium

4: Decreasing absorption of phosphorus

1017-: Which of the following is an intermediate-acting insulin

1: Lispro

2: Regular insulin

3: NPH insulin

4: Glargine

1018-: Pre tibial myxedema occurs in?

1: Hypothyroid

2: Hyperthyroidism

3: Hashimoto

4: Graves' disease

1019-: Psammoma bodies are seen in

1: Papillary carcinoma of thyroid

2: Medullary carcinoma of thyroid

3: Follicular carcinoma of thyroid

4: Anaplastic carcinoma

1020-: Regarding Addisonian pigmentation, all are true except-

1: Involves moles and scars

2: Involves palmer creases

3: Does not involve oral mucosa

4: Decreased fibrosis

1021-: ADR of acarbose

1: Flatulence

2: Hypoglycemia

3: Periodic Hyperglycemia

4: Weight gain

1022-: Which of the following has the greatest effect on plasma osmolality?

1: Progesterone

2: Coisol

3: Vasopressin

4: Aldosterone

1023-: Congenital adrenal hyperplasia is the most common cause of

1: True hermaphroditism

2: Male pseudohermaphroditism (underandrogenized male 46XY)

3: Turner's syndrome

4: Female pseudohermaphroditism (androgenized female 46XX)

1024-: Which of the following is true about somatostatin, insulin, and glucagon?

1: Somatostatin stimulates insulin.

2: Glucagon blocks insulin and Somatostatin release.

3: Insulin increases glucagon release.

4: Somatostatin blocks release of insulin and glucagon.

1025-: Not associated with thymoma is

1: Red cell aplasia

2: Myasthenia gravis

3: Hypergammaglobulinemia

4: Compression of the mediastinum

1026-: A 27-year-old woman complains of pain in her left shin. X-rays of the leg reveal a stress fracture of the tibia, decreased cortical bone density, and increased radiolucency. She is suspected of having osteomalacia (impaired mineralization of bone matrix). Which of the following is the most common biochemical manifestation of osteomalacia?

1: hyperphosphatemia

2: hypoparathyroidism

3: decreased vitamin D

4: hypercalcemia

1027-: Steroids cause:

1: Increased TSH

2: Increased FSH

3: Prevent de-iodination

4: All of the above

1028-: Octreotide is given in all the following conditions except-

1: Bleeding esophageal varices

2: Secretory diarrhea

3: Infective diarrhea

4: Acromegaly

1029-: All of the following statements about nateglinide are true except

1: Decreses post prandial hyperglycemia

2: Hypoglycemia is less common than with Sulfonylureas

3: It decreases insulin resistance

4: It acts by releasing insulin

1030-: A patient with cushinoid features presents with hemoptysis: he shows no response to dexamethasone supression test; most likely diagnosis here Is

1: Adrenal hyperplasia

2: Adrenal adenoma

3: Ca lung with ectopic ACTH production

4: Pituitary microadenoma

1031-: In human being, the least useful physiological response to low environmental temperature is

1: Shivering

2: Vasoconstriction

3: Release of thyroxine

4: Piloerection

1032-: Which s not seen in MEN I

1: Parathyroid adenoma

2: Pancreatic cancer

3: Prolactinoma

4: Medullary carcinoma thyroid

1033-: Life threatening complications of diabetes mellitus are all except -

1: Malignant otitis externa

2: Rhinocerebral mucormycosis

3: Emphysematous pyelonephritis

4: Emphysematous appendicitis

1034-: Lymphatic spread is the most common route in which of the following thyroid carcinoma

1: Papillary

2: Follicular

3: Medullary

4: Anaplastic

1035-: Hypothyroidism causes CNS features because of presence of which receptor in brain?

1: TR alpha 1

2: TR alpha 2

3: TR beta 1

4: TR beta 2

1036-: A 35 year old woman presents with heat intolerance and menstrual abnormalities. On examination, a diffusely enlarged thyroid gland is present. Which of the following features will not be present in her?

1: Increased hea rate

2: Increased stroke volume

3: Decreased peripheral vascualar resistance

4: Decresed protein breakdown

1037-: A patient presents with endocrinopathy, fibrous dysplasia of bone and Hyperpigmentation. Diagnosis-

1: McCune Albright syndrome

2: Addison's disease

3: Alagille syndrome

4: Lynch syndrome

1038-: Growth factors promote cell growth by acting on-

1: C.AMP

2: Tyrosine Kinase

3: C.GMP

4: TM2

1039-: In congenital adrenal hyperplasia precocious puberty in male is due to -

1: 21 alpha hydroxylase deficiency

2: 11 Beta hydroxylase deficiency

3: Both

4: None

1040-: Hypercalcemia is not a feature of one of the following conditions -

1: Primary hyperparathyroidism

2: Multiple myeloma

3: Tumourlysis syndrome

4: Sarcoidosis

1041-: Somatostatin causes all except

1: Decreases insulin secretion

2: Stimulates gastrin secretion

3: Reduced gastric motility

4: inhibits secretion of motilin

1042-: Most common cause of primary hyperparathyroidism -

1: Hyperplasia

2: Solitary'- Adenoma

3: Carcinoma

4: Multiple adenomas

1043-: All are involved in MEN IIA except:

1: Pituitary

2: Parathyroid

3: Thyroid

4: Adrenal

1044-: Dawn phenomenon refers to-

1: Early morning hyperglycemia

2: Early morning hypolgycemia

3: Hypoglycemia followed by hyperglycemia

4: High insulin levels

1045-: An 18-year-old woman develops weakness, weight gain, amenorrhea, abdominal striae, and behavioral abnormalities. Physical examination reveals lateral visual field loss. Which of the following is the most likely diagnosis?

1: a functional pituitary tumor

2: adrenal hyperplasia

3: anorexia nervosa with bulimia

4: glioblastoma multiforme

1046-: Spermatogenesis is maintained by which hormones (s)

1: Testosterone

2: FSH

3: LH

4: Prolactin

1047-: ACTH secretion is inhibited by

1: Aldosterone

2: Epinephrine

3: Glucocoicoids

4: CRH

1048-: What is the action of oxytocin in small doses, when used as intravenous infusion in a full term uterus?

1: Relaxes uterus

2: Induces uterine contractions

3: Causes cervical dilatation

4: All

1049-: Which among the following is not a SERM?

1: flutamide

2: OrmeIoxifen

3: Tamoxifen

4: Raloxifen

1050-: DOC for addisons disease?

1: Hydrocoisone

2: Betamethasone

3: Prednisolone

4: DOCA

1051-: The following condition is most likely seen in which of the following condition:

1: Vitamin D Intoxication

2: Acromegaly

3: Hyper parathyroid

4: None of the above

1052-: A patient presents to a clinic with complaints of a headache, fatigue. Lab data show serum sodium, 122 mEq/L; serum osmolality, 240 mOsm/L; urine osmolality, 455 mOsm/L. which condition best correlates with these data?

1: Neurogenic diabetes insipidus

2: Nephrogenic diabetes insipidus

3: Diabetes mellitus

4: SIADH

1053-: Most common cause of Congenital adrenal hyperplasia is deficiency of:

1: 17 alpha hydroxylase

2: 21 alpha hydroxylase

3: 11 beta Hydroxylase deficiency

4: 3 beta-HSD deficiency

1054-: Normal testicular development requires which of the following chromosomes

1: XY

2: XX

3: Y chromosome

4: X chromosome

1055-: Insulin preperation with longest action

1: Aspa

2: Lispro

3: Glargine

4: NPH

1056-: All the following drugs do not produce hirsutism except

1: Cycloserin

2: Phenobarbitone

3: Phenytoin

4: Mycophenolate

1057-: In breast lactiferous ducts are formed under the influence of which hormone?

1: Estrogen

2: Progesterone

3: LH

4: FSH

1058-: Screening for nephropathy in prepubertal children with type 1 DM should be initiated after how many years of disease onset?

1: 2 years

2: 3 years

3: 4 years

4: 5 years

1059-: Anti GDla

1: AIDP

2: ASMAN

3: AMAN

4: Fisher syndrome

1060-: Hypothalamopituitary axis becomes active and functional at:

1: 20th week of gestation

2: 5th year of life

3: 5th week of life

4: 5th month of life

1061-: What percentage of pheochromocytomas are malignant?

1: 5

2: 10

3: 20

4: 15

1062-: A newborn baby presents with shock, hyperkalemia and hypoglycemia. What is the most likely diagnosis

1: Septicemia

2: Inborn error of metabolism

3: Diabetes mellitus

4: Congenital adrenal hyperplasia

1063-: Which of the following anti-diabetic drugs acts by inhibiting PRAR-g?

1: Sulfonylureas

2: Biguanides

3: Thiazolidinediones

4: Acarbose

1064-: Histologic sections of the thymus that reveal reactive follicles with germinal centers are diagnostic of

1: Acute inflammation

2: Chronic inflammation

3: Thymic hyperplasia

4: Thymic hypoplasia

1065-: Sexual ambiguity may be seen in which of the following condition -

1: Androgen insenstivity

2: Pure gonadal dysgenesis

3: Swyer syndrome

4: Mixed gonadal dysgenesis

1066-: Among the following all are hydrophilic hormones that act on cytosolic receptors except one which is a lipophilic hormone that acts on nuclear receptor:

1: Thyroxine

2: Epinephrine

3: GH

4: AUTH

1067-: Menopausal hot flushes occur due to

1: FSH secretion

2: Decrease in estrogen

3: Increase in estrogen

4: Increase in progesterone

1068-: The best advice to be given to a patient of newly diagnosed type 2 Diabetes mellitus-

1: Saturated fat intake <10% of total fat

2: Consistent calorie intake

3: Carbohydraterestrictitm

4: Exercise

1069-: Mechanism of action of Exenatide:

1: SGLT inhibitor

2: GLP-1 Analogue

3: DPP4 inhibitor

4: AMP kinase inhibitor

1070-: MEN I syndrome has all manifestations Except

1: Hyperparathyroidism

2: Zollinger-Ellison syndrome

3: Prolactinoma

4: Medullary cancer thyroid

1071-: Nelson syndrome is seen in:

1: Adrenalectomy

2: Hypopitutarism

3: Deficiency of beta cells

4: Deficiency of growth hormone

1072-: Monotherapy with which of the following antidiabetic drug can cause hypoglycemia?

1: Metformin

2: Gliclazide

3: Piogiltazone

4: All of the above

1073-: Insulin secretion is normally stimulated by

1: GLP-1

2: GLP-2

3: VIP

4: Adrenergic receptor

1074-: Which protein secreted by adipocytes prevents obesity?

1: Cathepsin

2: Leptin

3: Neuropeptide Y

4: Galanin

1075-: Calcium absorption from gut is enhanced by

1: Parathyroid hormone

2: Calcitonin

3: 1,25 dihydroxy cholecalciferol

4: All

1076-: Grave&;s disease is the most common cause of-

1: Hypothyroidism

2: Hypehyroidism

3: Thyroiditis

4: None of the above

1077-: Anti inflamatory action of coicosteroids is due to blocking of

1: 15 lipoxygenase

2: Prostaglandin synthetase

3: Thromboxane synthetase

4: Breakdown of phospholipids

1078-: Which one of the following biochemical measures would be most likely to be elevated in this patient?

1: Alkaline phosphatase

2: Calcium

3: Ferritin

4: Phosphorus

1079-: Nissl's bodies located intracytoplasmic are in

1: Perikaryon of neuron

2: Smooth muscle

3: Skeletal muscle

4: Cardiac muscle

1080-: Among the following, all are hydrophilic hormones that act on cytosolic receptors except one which is a lipophilic hormone that acts on nuclear receptor

1: Thyroxine

2: Epinephrine

3: GH

4: ACTH

1081-: Hyperaldosteronism causes all except:

1: Hypernatremia

2: Hypokalemia

3: Hypeension

4: Metabolic acidosis

1082-: A patient has hyperphosphatemia with sho metacarpals and associated cataract The diagnosis is-

1: Pseudohypoparathyroidism

2: Hypophosphatasia

3: Hyperparathyroidism

4: Osteomalacia

1083-: The most potent topical coicosteroid is:

1: Hydrocoison butyrate cream 0.1%

2: Betamethasone Valerate cream 0.1%

3: Clobetasol propionate cream 0.5%

4: Clobetasone butyrate cream 0.5%

1084-: In hypoglycemia, which hormone does not increase

1: Insulin

2: Coisol

3: Glucagon

4: Epinephrine

1085-: Mechanism of action of finasteride is -

1: Androgen receptor antagonist

2: 5 - a reductase inhibitor

3: 17 - a hydroxylase inhibitor

4: Aromatase inhibitor

1086-: Most common neuroendocrine tumour in MEN 1 is

1: Insulinoma

2: Glucaganoma

3: Gastrinoma

4: VIPoma

1087-: All of the following conditions are known to cause diabetes insipidus, except -

1: Multiple sclerosis

2: Head injury

3: Histiocytosis

4: Viral encephalitis

1088-: True about Psammoma bodies are all except

1: Seen in meningioma

2: Concentric whorled appearance

3: Contains Calcium deposits

4: Seen in teratoma

1089-: A alpha-glucosidase inhibitor is?

1: Pioglitazone

2: Maglitol

3: Metformin

4: Nateglinide

1090-: Which among the following is not an example of a steroid hormone?

1: Aldosterone

2: Testosterone

3: Thyroxine

4: Cortisol

1091-: Fine needle aspiration cytology is not able to detect which of the the following

1: Papillary carcinoma

2: Hashimotos thyroiditis

3: Follicular cancer

4: Medullary cancer

1092-: Sushila, 25 year old young lady presented with complaint of acute hirsuitism and hoarseness of voice. Which of the following should be the best investigation to be done for the diagnosis -

1: Blood pregnenolone levels

2: Blood DHEA levels

3: 17-ketosteroids level

4: LH and FSH levels

1093-: A 60-year-old man with diabetes mellitus complains of deep burning pain and sensitivity to touch over his hands and fingers. Nerve conduction studies show slow transmission of impulses and diminished muscle stretch reflexes in ankles and knees. Sensations to vibrations and light touch are also markedly diminished. The development of polyneuropathy in this patient correlates best with which of the following conditions?

1: Anti-insulin antibody titer

2: Hyperglycemia

3: Insulin deficiency

4: Intermittent hypoglycemia

1094-: Wof anti diabetic agent is used in both type 1 and type 2 dibetes

1: Voglibose

2: Linagliptin

3: Pramlintide

4: None of the above

1095-: Nilutamide is an:

1: Anti-convulsant

2: Anti-androgen

3: Anti-progestin

4: Anti-oestrogen

1096-: Select the FALSE combination of chromosomal pattern and the syndrome:

1: Mayer Rokitansky-46XY

2: Swyer's syndrome-46XY

3: Turner's syndrome-45XO

4: Klinefelter's syndrome-47XXY

1097-: Oxytocin antagonist is -

1: Nitrates

2: Sultraban

3: Atosiban

4: Rimonabant

1098-: Which is most common type of Diabetic neuropathy?

1: Sensory polyneuropathy

2: Autonomic neuropathy

3: Radiculopathy

4: Myelopathy

1099-: REGARDING MYXOEDEMA THE FOLLOWING ARE TRUE EXCEPT:

1: swollen oedematous look of the face

2: impotency,amenorrhoea

3: Increased BMR

4: Dullness, loss of memory

1100-: Conversion of chondrocyte into osteogenic cells is caused by

1: Insulin

2: IGF-1

3: Growth hormone

4: Thyroxine

1101-: Which one of the following does not cause small vessel vasculitis?

1: Churg - strauss syndrome

2: Henoch - Schonlein purpura

3: Kawasaki disease

4: Microscopic polyangiitis

1102-: Which Of The Following Is True Regarding Galactorrhea-

1: Bilateral

2: Seen in pregnancy and lactation

3: Associated with prolactinomas

4: endocrinopathies

1103-: Which of the following is not directly controlled by ACTH?

1: Glucocoicoids

2: Androstenedione

3: Dehydroepiandrosterone

4: Epinephrine

1104-: LH is secreted by

1: Ovary

2: Pituitary

3: Corpus luteum

4: Hypothalamus

1105-: Sexual ambiguity may be seen in which of the following conditions ?

1: Androgen insensitivity

2: Pure gonadal dysgenesis

3: Sawyer syndrome

4: Mixed gonadal dysgenesis

1106-: By the time of implantation in uterine endometrium the typical feilized ovum is divided into how many cells

1: 2

2: 4

3: 16

4: 750

1107-: A 23-year-old woman presents with tremor, restlessness, heat intolerance, palpitation, and unexplained weight loss. The thyroid is symmetrically enlarged, the pulse is rapid, the skin is moist and warm, and exophthalmos is apparent. This condition is considered to be

1: autoimmune.

2: congenital.

3: infectious.

4: iatrogenic.

1108-: Side effects of oral contraceptives are all EXCEPT:

1: Irregular bleeding

2: Headache

3: Thrombosis

4: Increased risk of ovarian cancer

1109-: A 16 year old female patient presents to the OPD with hirsutism and masculinization. Which of the following hormones of the adrenal coex is the likely culprit?

1: Dehydroepiandrosterone (DHEA)

2: Aldosterone

3: Coisol

4: Epinephrine

1110-: Pheochromocytoma predominantly secretes -

1: Epinephrine

2: Norepinephrine

3: Dopamine

4: DOPA

1111-: Thiazides diuretic causes all except

1: Hyperglycaemia

2: Increased calcium excretion

3: Useful in congestive hea failure

4: Decreased uric acid excretion

1112-: Zona glomerulosa secretes

1: Aldosterone

2: Coisol

3: Testosterone

4: Catecholamines

1113-: A 30-year-old woman has prominent cervical and dorsal fat pads, hirsutism, acne, purple abdominal striae, unexplained hypokalemia, and diabetes mellitus.Select the most likely disease process for the clinical syndromes described

1: Acromegaly

2: Exogenous human growth hormone (HGH) use

3: Empty sella syndrome

4: Cushing disease

1114-: Definition of Diabetes mellitus includes:

1: Fasting blood glucose >126 mg/dL

2: Random blood glucose >140 mg/dL

3: HbA1c <7%

4: Post prandial blood glucose >180 mg/dL

1115-: The principle of "Wolff-chaikoff effect" is used in

1: Iodide for thyrotoxic patients after surgery

2: Iodide for thyrotoxic patients before Surgery

3: Stimulation of hormone synthesis

4: Inereased vascularity of thyroid gland

1116-: A 29-years-old male taking oral hypoglycemic drug never had ketonuria in his life. His BMI is 20.5. His grandfather had diabetes and his father who is only son of his grandfather did not have the disease. Which type of DM this person will be most likely -

1: pancreatic

2: MODY

 

3: Type I

4: TypeII

1117-: Hormone necessary for water and sodium balance

1: Progesterone

2: Cortisol

3: Estrogen

4: Aldosterone

1118-: Progesterone is associated with the following except

1: Ovulation

2: Proliferative phase of menstrual cycle

3: Thermogenesis

4: Secretory phase of menstrual cycle

1119-: Grave's disease is the most common cause of-

1: Hypothyroidism

2: Hypehyroidism

3: Thyroiditis

4: None of the above

1120-: Following are features of Paget's disease except -

1: Deformity of bones

2: Secondary osteosarcoma

3: Lowered serum alkaline phosphatase

4: Increased Urinary excretion of hydroxyproline

1121-: Reason for thyroid storm after thyroid surgery are:

1: Infection

2: Inadequate preoperative preparation

3: Thyroiditis

4: Rough handling of thyroid at surgery

1122-: Naturally, occurring glucocoicoid is

1: Hydrocoisone

2: Coisol

3: Prednisolone

4: Coicosterone

1123-: A 42 years old male has strong positive Benedict's test, random blood sugar is > 163 mg%, fasting blood sugar is > 200 mg% Next line of investigation is -:

1: Urine glucose charting 5 hourly

2: Oral GTT

3: Repeat benedict's test

4: 24 hr. urine sugar estimation

1124-: Alkaline phosphatase is decreased in-

1: ypophosphatasia

2: Primary biliary cirrhosis

3: Hyperphosphatemia

4: Hepatitis A

1125-: Stimulates the synthesis of milk proteins.

1: LH

2: PRL

3: TSH

4: GH

1126-: In addison's disease, most diagnostic test is -

1: Serum Na+, K+, renin

2: S. Na+, K+, saline suppression

3: Serum creatinine\/urea ratio

4: ACTH stimulation test

1127-: GH secretion is

1: Greater in early morning

2: Greater in evening

3: Increases on preolonged fasting

4: Stimulates B-cells of pancreases directly

1128-: Which is not seen in Tumor lysis Syndrome?

1: Hypophosphatemia

2: Hypocalcemia

3: Hyperuricemia

4: Hyperkalemia

1129-: False statement about extra adrenal pheochromocytoma -

1: Constitute 50% of total

2: May occur in Bladder

3: May occur in thorax

4: Involve carotid body

1130-: A 45-year-old woman complains of tingling in her hands and feet, 24 hours after removal of follicular thyroid carcinoma. Her symptoms rapidly progress to severe muscle cramps, laryngeal stridor, and convulsions. Which of the following laboratory findings would be expected in this patient prior to treatment?

1: Decreased serum calcium and decreased PTH

2: Decreased serum calcium and increased PTH

3: Increased serum calcium and decreased PTH

4: Increased serum calcium and increased PTH

1131-: Oxytocin causes all except

1: Lactogenesis

2: Milk ejection

3: Contraction of uterine muscle

4: Myoepithelial cell contraction

1132-: All are risk factors for type 2 diabetes mellitus that warrant early screening for diabetes except

1: Family history

2: Hypeension

3: Polycystic ovary syndrome

4: Alcoholism

1133-: Mullerian inhibiting substance (MIS) is produced by

1: Stroma

2: Seoli cells

3: Leydig cells

4: Germ cells

1134-: Necrobiosis lipoidica is seen in

1: Diabetes insipudus

2: Lyme disease

3: Diabetes mellitus

4: Symmonds disease

1135-: Which is not an effect of T3 hormone?

1: It increases the hea rate

2: It increases the stroke volume

3: It decreases the peripheral resistance

4: It decreases pulse pressure

1136-: Which of the following is the most common type of pituitary adenoma?

1: Thyrotropinoma

2: Gonadotropinoma

3: Prolactinoma

4: Coicotropinoma

1137-: Which is true in diabetes mellitus type II -

1: Insulinitis of B cells

2: Hyalinisation of B cells

3: Atrophy of B cells

4: decrease of B cells

1138-: Procalcitonin is considered as marker for:

1: Sepsis

2: Medullary carcinoma of thyroid

3: Vitamin D resistant rickets

4: Parathyroid adenoma

1139-: Coicosteroids cause all except

1: Muscular hyperophy

2: Peptic ulcaeration

3: Psychosis

4: Suppression of Pituatory adrenal axis

1140-: Decreased protein: lipid ratio is seen in

1: Inner mitochondrial membrane

2: Outer mitochondrial membrane

3: Sarcoplasmic reticulum

4: Myelin sheath membrane

1141-: Heat acclimatization is due to which hormone?

1: Thyroxine

2: Insulin

3: Adrenaline

4: Aldosterone

1142-: Effect of coisol

1: Decreased bone matrix

2: Increased bone mattix

3: Increases lymphocytes

4: Increases RBCs

1143-: All of the following statements regarding Diabetes Mellitus are true, Except-

1: Insulin is not used in Type II Diabetes mellitus

2: Insulin levels may be increased in patients with Type II Diabetes mellitus

3: Insulin is essential to reverse Diabetic Ketoacidosis

4: Intravenous Insulin is administered as a sliding scale in the hospital setting

1144-: The most potent topical corticosteroid is -

1: Betamethasone valerate

2: Triamcinolone acetonide

3: Hydrocortisone acetate

4: Clobetasol propionate

1145-: Breast develop due to action of

1: Progesteron

2: Oestrogen

3: Activin

4: All of the above

1146-: Calcitonin is secreted by

1: Thyroid gland

2: Parathyroid gland

3: Adrenal glands

4: Ovaries

1147-: An obese lady aged 45 years, was brought to emergency in a semi comatose condition. The laboratory investigations showed K+ (5.8 nunol/L); Na+ (136 mmol/L); blood pH (7.1), HC03 (12 mmol/ L),&; ketone bodies (350 mg/dl). The expected level of blood glucose for this lady is -

1: < 45 mg\/dl

2: < 120 mg\/dl

3: >l 80 mg\/dl

4: < 75 mg\/dl

1148-: The most common cause of Cushing's syndrome is:

1: Pituitary adenoma

2: Adrenal adenoma

3: Ectopic ACTH

4: Iatrogenic steroids

1149-: An 8-day-old male infant is brought to the emergency department with vomiting, lethargy, dehydration and features of shock. Clinical examination reveals hyperpigmentation of the genital skin and normal external genitalia. Blood investigations reveal Sodium 124 mEq/L, potassium of 7 mEq/L and hypoglycemia. Which of the following is the most likely diagnosis?

1: Congenital Adrenal Hyperplasia (CAH)

2: Adrenal Hemorrhage

3: Acute Gastorenteritis with dehydration

4: Hyperaldosteronism

1150-: A patient with IDDM injects a mixture of NPH insulin and crystalline zinc (Regular) insulin before breakfast (at 7 AM) and before dinner (at 8 PM) each day. She repos the following average self-monitored RBS for the past weekTimeBlood glucose level (mg/dl)Before Breakfast115Before lunch190Before dinner135Bed time185These data indicate that the patient should adjust her insulin regimen by

1: Increasing the 7 AM dose of NPH insulin

2: Increasing both 7 AM and 8 PM doses of NPH insulin

3: Increasing the 7 AM dose of regular insulin

4: Increasing both the 7 PM and 8 PM dose of regular insulin

1151-: Inhibin is secreted by

1: Seoli cells

2: Stroma

3: Surface epithelium of ovary

4: Corpus luteum

1152-: Insulin causes all of the following except:

1: Glycogenesis

2: Glycolysis

3: Lipogenesis

4: ketogenesis

1153-: One oogonium gives how many ovum

1: 1

2: 2

3: 3

4: 4

1154-: Which of the following drugs is both anti-receptive and bone formative?

1: Strontium ranelate

2: Calcitonin

3: Ibadronate

4: Teriperatide

1155-: A young female Shagun comes to you in the gynaecology OPD and gives the history that she had intercourse with her boyfriend 5 hours back. Select the drug that can act as a single dose postcoital contraceptive for her:

1: Clomiphene citrate

2: Mifepristone

3: Danazol

4: Medroxyprogesterone acetate

1156-: Which of the following is/ are seen in Hyperparathy roidism?

1: Osteitisfibrosacystica

2: Osteoporosis

3: Dissecting osteitis

4: All the above

1157-: A 3-month old male child with normal genitalia presents to the emergency department with severe dehydration, hyperkalemia and hyponatremia. The measurement blood levels of which of the following will be helpful ?

1: 17-hydroxy progesterone

2: Renin

3: Cortisol

4: Aldosterone

1158-: Circumventricular organ is

1: Anterior pituitary

2: Posterior pituitary

3: Pineal gland

4: None

1159-: Hurthle cells are seen in?

1: Medullary carcinoma thyroid

2: Papillary carcinoma thyroid

3: Hashimoto's thyroiditis

4: Pituitary adenoma

1160-: Yellowing of the skin occurs in hypothyrodism because of -

1: Increased bilirubin

2: Increased obolesterol

3: Increased carotene

4: Increased

1161-: True about cushing syndrome *

1: Red striae present

2: sed adrenalin

3: Proximal muscle weakness

4: Edema

1162-: Treatment with anti-hypeensive drug spironolactone leads to formation of spironolactone bodies in:

1: Adrenal coex

2: Adrenal medulla

3: Renal coex

4: Renal medulla

1163-: A biopsy from a mass in the neck region revels the presence of parafollicular cells. Which of the following is the best marker for the follow up of this patient?

1: Calcitonin

2: Thyroglobulin

3: T4

4: T3

1164-: Which of the following drug is a SERM useful for treatment of osteoporosis?

1: Raloxifene

2: Bisphosphonate

3: Strontium

4: Estradiol

1165-: FSH and LH are both inhibited by

1: Coisol

2: Aldosterone

3: Estrogen

4: Progesterone

1166-: Which of the following is a serious adverse effect seen with zolendronate?

1: Acute renal failure

2: Ventricular fibrillation

3: Peptic ulcer

4: Anterior uveitis

1167-: Psammoma bodies are seen in following except-

1: Serous cystadenoma of ovary

2: Mucinous cystadenoma of ovary

3: Meningioma

4: Papillary carcinoma of thyroid

1168-: Major androgen precursor from adrenal coex is

1: Testosterone

2: Dihydrotestosterone

3: DHEA

4: Androstenedione

1169-: A 40 year old women presented with a CT scan of head showing an enlarged sellatursica. Neurological and endocrine work up in detail were found to be normal. The most likely diagnosis is-

1: Prolactinoma

2: Chromophobe adenoma

3: Craniophobe

4: Empty sella syndrome

1170-: Which of the following is an uncoupler?

1: Insulin

2: Epinephrine

3: GH

4: Thyroxine

1171-: A patient is receiving insulin and acarbose for diabetes mellitus and developed hypoglycemia. Which of the following should be used for treatment of hypoglycemia in this patient?

1: Sucrose

2: Galactose

3: Glucose

4: Starch

1172-: AGE-RAGE signaling axis is related to

1: Ageing

2: Oncogenesis

3: Diabetes

4: Alzheimer disease

1173-: Most common type of Congenital adrenal hyperplasia (CAH)?

1: 21-hydroxylase deficiency

2: 11-b hydroxylase deficiency

3: 3-b hydroxylase deficiency

4: 17-a hydroxylase deficiency

1174-: A 25-year-old man is brought to the emergency department. The patient is in a confused state, his colleagues report that he was working at his desk and suddenly started having intense headache with profuse sweating. In the meantime, it is observed that the patient starts rolling his eyes. After some time, his wife arrives and she reports that such events had happened in the past and have been resolved spontaneously, but the patient had been reluctant to visit hospital as he had no medical insurance. He smokes 20 packs of

cigarettes per year and drinks 2-3 beers on weekends. On clinical examination, he is confused and obeys simple commands. Deep tendon reflexes are intact, BP is 210/108 mm of Hg, and pulse is 124/min. Lab results are as follows: Na+ 142 meq/L K+ 3.8 meq/L BUN 30 mg/dL S creatinine 1.0 mg/dL Blood sugar 110 gm% According to the condition of the patient, what medication should be started before surgery?

1: Phentolamine and phenoxybenzamine

2: Propranolol

3: Nitroglycerine

4: Phenoxybenzamine and propranolol

1175-: Primary hyperparathyroidism is suggested by -

1: Increased serum calcium

2: Low urinary calcium <200

3: Decreased alkaline phosphatase

4: Calcitonin level

1176-: All of the following hormones use cyclic AMP as a second messenger except

1: Glucagon

2: Estrogen

3: Epinephrine

4: Luteinizing hormone

1177-: A 40-year-old woman has lipid investigations suggesting familial hypercholesterolemia (increased cholesterol, increased low-density lipoprotein , and normal triglycerides). This condition is characterized by increased risk for premature atherosclerosis and by the occurrence of tuberous and tendon xanthomas. Before making the assumption of familial hypercholesterolemia, secondary causes need to be considered. Which of the following conditions is most likely to cause secondary hyperlipidemia?

1: cholestatic liver disease

2: alcoholism

3: estrogen replacement

4: malabsorption syndromes

1178-: Drugs of the choice for central diabetes insipidus is

1: Desmopressin

2: Leuprolide

3: Thiazide diuretics

4: Insulin

1179-: Low levels of dopamine produced by the hypothalamus is a pathologic condition associated with which of the blood hormone levels.

1: High prolactin (PRL)

2: High TSH

3: High cortisol

4: Low growth hormone (GH)

1180-: Which of the following is not a pa of classical triad of Symptoms of diabetes?

1: Polyuria

2: Polyphagia

3: Polydipsia

4: Weight loss

1181-: Luteal phase dominant hormone

1: Estrogen

2: Progesterone

3: Prolactin

4: Oxytocin

1182-: Best advice to be given to a patient of newly diagnosed type 2 DM is:

1: Limit intake of carbohydrates

2: Follow consistent calorie diet intake.

3: Exercise

4: Intake of less than 20% of saturated fat

1183-: Which of following is the most common cause of hypergonadotrophichypogonadism in nuk>>-

1: Viral orchitis

2: Klinefelter's syndrome

3: Kallman's syndrome

4: Noonan syndrome

1184-: Primary hyperaldosteronism (Conn's syndrome) is characterized by-

1: High renin, high aldosteorone

2: Low renin, high aldosterone

3: Low renin, low aldosterone

4: High renin, low aldosterone

1185-: A 52 year-old postmenopausal patient has evidence of low bone mineral density. She and her physician are considering therapy with raloxifene or a combination of conjugated estrogens and medroxyprogesterone acetate. Which of the following patient characteristics is MOST likely to lead them to select raloxifene?

1: Previous hysterectomy

2: Recurrent vaginitis

3: Strong family history of breast cancer

4: Troublesome hot flushes

1186-: Zellballen pattern is found in histology of which of the following condition?

1: Neuroblastoma

2: Paraganglioma

3: Ewings Sarcoma

4: RCC

1187-: Cushing syndrome all are true except -

1: Purplestriae

2: Plethora

3: Hypoglycemia

4: Obesity

1188-: Bisphosphonates are prescribed to a patient with the following advice

1: Take empty stomach with plenty of water

2: Take after meals

3: Discontinue if gastritis develops

4: Discontinue if severe bone pain occurs

1189-: In the following food items, which one has the highest 'Glycemic Index'?

1: Corn-flakes

2: Brown rice

3: Ice-cream.

4: Whole wheat bread

1190-: Which of the following cause osteonecrosis -

1: Sickle cell anemia

2: Coicosteroid use

3: Die

4: SLE

1191-: Prolonged testosterone treatment to a man results in

1: increased spermatogenesis

2: Increased sperm motility

3: Azoospermia

4: Increased gonadotropins

1192-: A 50-year-old man has had a nonhealing ulcer on the bottom of his foot for 2 months. On examination, the 2-cm ulcer overlies the right first metatarsal head. There is a reduced sensation to pinprick in his feet. His visual acuity is reduced bilaterally. Laboratory studies show serum creatinine is 2.9 mg/dL. Which of the following laboratory test findings is he most likely to have?

1: Glucosuria

2: Hypoalbuminemia

3: Hypokalemia

4: Leukopenia

1193-: The most common type of neuropathy in diabetes mellitus is:

1: Distal symmetric polyneuropathy

2: Painful mononeuropathy

3: Autonomic neuropathy

4: Cranial neuropathy

1194-: Drug of choice for polycystic ovarian disease is:

1: Metformin

2: Estrogen

3: Estrogen and progesterone combination pill

4: Dopamine antagonist

1195-: Insulin release is by:

1: Endocytosis

2: Exocytosis

3: Active transport

4: Facilitated diffusion

1196-: Which of the following tests is most suited for early detection of diabetic nephropathy?

1: Ultrasonography

2: Creatinine clearance

3: Urine albumin

4: Serum Creatinine

1197-: True statement regarding follicular cell carcinoma of thyroid: (D. REPEAT 2013)

1: Hematogenous spread

2: Commonly multifocal

3: Readily diagnosed by FNAC

4: Most common carcinoma of thyroid

1198-: All of the following statements are true regarding craniopharyngioma, except:

1: Origin from Rathke's pouch

2: Aggressive malignant tumor

3: Papillary variant of the tumour is associated with BRAF V600E mutation

4: Adamantinomatous variant is associated with abnormality in WNT/CTNNB1 (b-catenin) pathway

1199-: Denosumab is used in treatment of -

1: Postmenopausal osteoporosis

2: Osteoclastoma

3: Osteosarcoma

4: Osteomalacia

1200-: Prolactin is synthesized in

1: Pituitary

2: Hypothalamus

3: Pineal gland

4: Thalamus

1201-: An elderly male patient presented with blurring of vision. Fundus examination revealed cotton wool spots on retina and systemic examination showed decreased peripheral sensations and increased urine output. What finding is the following renal biopsy showing?

1: Kimmelstien Wilson lesion

2: Amyloid deposits

3: Crescents

4: Hyaline atherosclerosis

1202-: All of the following are features of MEN IIb, except -

1: Pituitary tumor

2: Pheochromocytoma

3: Medullary carcinoma thyroid

4: Neuromas

1203-: Drug used in mild hemoplilia is

1: Coicosteroids

2: DDAVP

3: Vitamin K

4: Tranexamic acid

1204-: A 4 weeks old female child with normal genitalia presents to the emergency department with severe dehydration, hyperkalemia and hyponatremia. The measurement blood levels of which of the following will be helpful?

1: 17-hydroxy progesterone

2: Rennin

3: Cortisol

4: Aldosterone

1205-: Diffuse toxic goiter is characterize by-

1: Primary thyroid disease

2: Secondary thyroid disease

3: It is due to autoimmune thyrid hornone(TSH) antibody

4: It is dne to TSH receptor

1206-: Ambiguous genitalia is not seen in:

1: Gonadal agenesis

2: Gonadal dysgenesis

3: Hermaphroditism

4: Super female (47 XXX)

1207-: Most characteristic feature of diabetic nephropathy:

1: Kimmelstein Wilson change

2: Armani Ebstein change

3: Focal segmental glomerulosclerosis

4: Membrano proliferative glomerulonephritis

1208-: Aromatase enzyme

1: Conves estrogen to androgen

2: Conves androgen to estrogen

3: Helps in maintaining normal placental blood flow

4: Conves testosterone to dihydrotestosterone

1209-: Most common cause of Cushing syndrome

1: Pituitary adenoma

2: Adrenal adenoma

3: Exogenous steroids

4: Ectopic ACTH

1210-: Migratory necrolytic erythema is seen in -

1: Glucagonoma syndrome

2: Peutz-Jeghers syndrome

3: Sarcoidosis

4: Amyloidosis

1211-: A 65-year-old woman with a history of multinodular goiter complains of increasing nervousness, insomnia, and hea palpitations. She has lost 9 kg over the past 6 months. There is no evidence of exophthalmos. Laboratory studies show elevated serum levels of free T3 and T4. Serologic tests for antithyroid antibodies are negative. Which of the following is the likely endocrinopathy in this patient?

1: Thyroid storm

2: Thyrotoxicosis

3: Graves disease

4: Hypothyroidism

1212-: Bisphosphonates are used in all EXPECT:

1: Paget's disease

2: Vitamin D excess

3: Postmenopausal osteoporosis

4: Hypercalcemia of malignancy

1213-: Which of the following would be least likely seen 14 days after a rat is injected with a drug that kills all of its pancreatic B cells?

1: A rise in the plasma H+ concentration

2: A rise in the plasma aminoacid concentration

3: A fall in the plasma aminoacid concentration

4: A rise in plasma osmolality

1214-: Which drug given for painful tingling of diabetic neuropathy?

1: Gabapentin

2: Duloxetine

3: Pregablin

4: All of them

1215-: A female neonate with DiGeorge syndrome develops severe muscle cramps and convulsions soon after birth. Which of the following is the cause of convulsions in this neonate?

1: Acute hemorrhagic adrenalitis

2: Hypocalcemia

3: Hypoglycemia

4: Hypokalemia

1216-: Intranasal calcitonin used for:

1: Post menopausal Osteoporosis

2: Paget's disease

3: Secondary hypoparathyroidism

4: Hypercalcemia

1217-: A 25-year-old man presents with 3 months of polyuria and increased thirst. The patient suffered trauma to the base of the skull in a motorcycle accident 4 months ago. A 24-hour urine collection shows polyuria but no evidence of hematuria, glucosuria, or proteinuria. The pathogenesis of polyuria in this patient is most likely caused by a lesion in which of the following areas of the brain?

1: Adenohypophysis

2: Brain stem

3: Mammillothalamic tract

4: Neurohypophysis

1218-: Maximum glucocoicoid activity is seen with

1: Fludrocoisone

2: Prednisolone

3: Methyprednisolone

4: Triamcenolone

1219-: Hypospadias in the baby is caused by maternal use of which of the following drug?

1: Diethylstilbestrol

2: Tolbutamide

3: Clomiphene

4: Clobazam

1220-: HbA1c level in blood explains -

1: Acute rise of sugar

2: Long terms status of blood sugar

3: Hepatorenal syndrome

4: Chronic pancreatitis

1221-: Which of the following hormones is produced by the anterior lobe of the pituitary

1: Thyrotropin-releasing hormone (TRH)

2: Coicotropin-releasing hormone (CRH)

3: Growth hormone (somatotropin, GH)

4: Growth hormone-releasing hormone (GHRH)

1222-: True about tumor lysis syndrome -

1: Hyperkalemia

2: Hypercalcemia

3: Hypermagnesemia

4: Hyperurecemia

1223-: Increased Ca, decreased P04.Diagnosi-

1: Primary hyperparathyroidism

2: Secondary hyperparathyroidism due to Vit D deficiency

3: Malignancy

4: Osteoporosis

1224-: 17-OH progesterone level in congenital adrenal hyperplasia in 1 year old child (in ng/dl)-

1: >600

2: 150-300

3: 300-600

4: <150

1225-: Pheochromocytoma is the disease of:

1: Pituitary gland

2: Adrenal medulla

3: Pancreas

4: Adrenal cortex

1226-: All of the following are associated with hyper-gonadotrophic hypogonadism in males, except-

1: Viral orchitis

2: Klinefelter's syndrome

3: kallman's syndrome

4: Noonam syndrome

1227-: Carcinoid tumours commonly arise from:

1: G. cells in pancreas

2: Argentaffin cells of small intestine

3: Pancreatic endocrine tumour

4: Colon polyps

1228-: Wof sulfonylureas is used in treatment of neurogenic diabetes Insipidus

1: Nateglinide

2: Tolbutamide

3: Chlorpropamide

4: Glipizide

1229-: Bisphoshonates are prescribed to a patient with the following advice

1: Take empty stomach with plenty of water

2: Take after meals

3: Duscintunes if gastritis develops

4: Discontinues if severe bone pain occurs

1230-: Which of the following most closely represents the lowest detection limit for third generation TSH Assays-

1: 0.4 mlU/L

2: 0.04 mlU/L

3: 0.004 mlU/L

4: 0.0004 mlU/L

1231-: A patient presents with symptoms of hypoglycemia. Investigations reveal decreased blood glucose and increased insulin levels. C-peptide assay is done which shows normal levels of C-peptide. The most likely diagnosis is -

1: Insulinoma

2: Accidental sulfonylurea ingestion

3: Accidental exogenous insulin administration

4: Accidental metformin ingestion

1232-: Calcitriol causes all except

1: Increases renal tubular reabsorption of Ca2+

2: Reduce plasma Ca2+ concentration

3: Promotes intestinal absorption of Ca2+

4: Reduces Ca2+ resorption by bone

1233-: Osteoporosis is a major adverse effect caused by the glucocorticoids. It is due to their ability to(Lippincott's 3rd pharmacology)

1: Increases the excretion of calcium

2: Inhibit absorption of calcium

3: Stimulate the hypothalamic - pituitary adrenal axis

4: Decreases production of prostaglandins

1234-: Steroids with 8-10 c-atorm side chains at C-17 and an OH group at C3 are

1: Androgens

2: Andrenal coicoids

3: Progestins

4: Sterols

1235-: A 35-year-old woman is seen 6 months after giving bih to a normal infant. She suffered severe cervical lacerations during delivery, resulting in hemorrhagic shock. Following blood transfusion and surgical repair, postpaum recovery has so far been uneventful. She now complains of continued amenorrhea and loss of weight and muscle strength. Fuher investigation might be expected to demonstrate which of the following findings?

1: Decreased serum coisol

2: Hyperestrogenism

3: Hyperglycemia

4: Increased serum free thyroxine

1236-: A scientist has developed an adipocyte cell line that, at 42degC, cannot degrade triglycerides to glycerol and free fatty acids. At 25degC, the triglyceride degradation is normal. Which one of the following best reflects enzymes in which a temperature-sensitive mutation may lead to this phenotype?

1: Protein Kinase A - yes; Adenylate Kinase - no; Insulin Receptor - no; Glucagon Receptor - yes; Glycerol Kinase - yes

2: Protein Kinase A - no; Adenylate Kinase - no; Insulin Receptor - yes; Glucagon Receptor - no; Glycerol Kinase - yes

3: Protein Kinase A - yes; Adenylate Kinase - no; Insulin Receptor - no; Glucagon Receptor - yes; Glycerol Kinase - no

4: Protein Kinase A - no; Adenylate Kinase - yes; Insulin Receptor - yes; Glucagon Receptor - no; Glycerol Kinase - no

1237-: For the following causes of sexual dysfunction, select the most likely clinical feature.Rarely indicates organic disease.

1: loss of sexual desire

2: failure of erection with absent nocturnal penile tumescence (NPT)

3: absence of emission

4: absence of orgasm with normal libido and erectile function

1238-: What will happen if insulin alone us given rapidly in diabetic ketoacidosis

1: Hypokaelemia

2: Hypernatremia

3: Hyperkalemia

4: Hypocalcemia

1239-: Insulin sensitivity increases with following treatment except:

1: Metformin

2: Acarbose

3: Exercise

4: Fasting

1240-: The drug preferred to stop the growth of prostate in a 70 year old male with Benign hyperplasia of prostate is

1: Spironolactone

2: Ketoconazole

3: Finasteride

4: Flutamide

1241-: A 45 year old female patient presented with features of hypothyroidism. Histopathology is shown below. Based on histological features, what is your diagnosis?

1: Hashimoto thyroiditis

2: Granulomatous thyroiditis

3: Papillary carcinoma of thyroid

4: Reidel's thyroiditis

1242-: A 50-year-old man came with the complaint of a headache and raised intracranial tension. Radiological examination revealed a brain tumor compressing Supraoptic nucleus in the hypothalamus. Which of the following hormone is decreased?

1: Adrenocoicotropic hormone (ACTH)

2: Follicle-stimulating hormone (FSH)

3: Growth hormone

4: Antidiuretic Hormone

1243-: In osteogenesis imperfecta, which of the following is defective?

1: Posphate deposition in trabecular bone

2: Osteoblasts

3: Osteoclasts

4: Bone collagen

1244-: The clinical use of leuprolide include all the following EXCEPT:

1: Endometriosis

2: Osteoporosis

3: Prostate cancer

4: Precocious pubey

1245-: The antibodies that are seen in Grave's disease are-

1: ANA

2: TSH receptor antibodies (TRAb)

3: Thyroid peroxidase antibodies

4: Anti-T3 antibodies

1246-: Which of the following statements about Histamine is true?

1: Is found in mast cells

2: Increases gastric acid secretion

3: Related to arousal and blood pressure

4: All of the above

1247-: Oral contraceptive pills can cause all except:

1: Mastalgia

2: Dysmenorrhea

3: Chloasma

4: Breakthrough bleeding

1248-: Increased Ca, decreased PO4. Diagnosis : -

1: Primary hyperparathyroidism

2: Secondary hypoparathyroidism due to Vit D deficiency

3: Malignancy

4: Osteoporosis

1249-: Type 1 diabetes in children is most commonly associated with

1: Obesity

2: Celiac disease

3: Downs syndrome

4: Hypothyroidism

1250-: Hung up ankle reflex seen in -

1: Hypothyroidism

2: Thyrotoxicosis

3: Sipple syndrome

4: Wermer syndrome

1251-: Conn's syndrome is characterized by -

1: Hyperinsulinism

2: Hypehyroidism

3: Hypoadrenalism

4: Hyperaldosteronism

1252-: A 25-year-old man presents with 3 months of polyuria and increased thirst. The patient suffered trauma to the base of the skull in a motorcycle accident 4 months ago. A 24-houruri ne collection shows polyuria but no evidence of hematuria, glucosuria, or proteinuria. The pathogenesis of polyuria in this patient is most likely caused by a lesion in which of the following areas of the brain?

1: Adenohypophysis

2: Brain stem

3: Mammillothalamic tract

4: Neurohypophysis

1253-: For the following causes of sexual dysfunction, select the most likely clinical feature.Can be caused by vascular disease.

1: loss of sexual desire

2: failure of erection with absent nocturnal penile tumescence (NPT)

3: absence of emission

4: absence of orgasm with normal libido and erectile function

1254-: What stimulates the gonads in male at 8 week to secret testosterone

1: Inhibin from corpus luteum

2: GnRH from hypothalamus of baby

3: Placental HCG

4: All of above

1255-: Prolactin plays an impoant role in all of the following except:

1: Development of mammary glands

2: Milk secretion

3: Amenorrhoea

4: Milk ejection

1256-: All are associated with pituitary apoplexy except-

1: Hypehyroidism

2: Diabetes mellitus

3: Sickle cell anemia

4: Hypeension

1257-: Syndrome of inappropriate antidiuretic hormone secretion is diagnosed by all EXCEPT:

1: Hyponatremia

2: Decreased osmolality (< 280 mosm/kg)

3: Normal blood nitrogen

4: Normal thyroid function

1258-: Fat is maximum synthesized in

1: Liver

2: Adipose tissue

3: Intestine

4: Muscle

1259-: most comon type of carcinoma thyroid is

1: Anaplastic

2: Papillary

3: Follicular

4: Medullary

1260-: Most common Thyroid CA post radiation exposure

1: Papillary CA

2: Medullary CA

3: Follicular CA

4: None

1261-: Average reproductive lifespan of ovum is

1: 6-12 hrs

2: 12-24 hrs

3: 24-36 hrs

4: 3 days

1262-: Most common pancreatic tumor in MEN-1 is -

1: Gastrinoma

2: Insulinoma

3: Glucagonoma

4: Somatostatinoma

1263-: All are true about Hypothyroidism except

1: Delayed dentition

2: Widened fontanelle

3: Distended abdomen

4: Sho fontanelle

1264-: Organs take pa in vitamin D formation

1: Liver

2: Skin

3: Kidney

4: All of the above

1265-: Not a Glycoprotein hormone

1: EH

2: FSH

3: GH

4: Vasopressin

1266-: Tumor lysis syndrome, all are true except:

1: Hypocalcemia

2: Hyperuricemia

3: Hypophosphatemia

4: Hyperkalemia

1267-: All are canses 0f hypercalcemia, except-

1: Thyrotoxicosis

2: Sarcoidosis

3: VitarninAtoxiQity

4: Phenytoin toxicity

1268-: Glucagon acts on muscle to cause

1: Gluconeogenesis

2: Gycogenolysis

3: Glycolysis

4: Kreb's cycle

1269-: Hypeension with androgenisation of a female child is a feature of congenital adrenal hyperplasia due to deficiency of-

1: C-21 hydroxylase

2: C-11 hydroxylase

3: C-17 hydroxylase

4: Desmolaie

1270-: Which of the following drugs causes osteoporosis on long term use

1: Etidronate

2: Prednisolone

3: Phneytion

4: Calcitriol

1271-: Negative feedback in spermatogenesis is by

1: ABP

2: Inhibin

3: Progesterone

4: None

1272-: GLUT responsible for secretion of insulin from beta cells of pancreas

1: 1

2: 2

3: 3

4: 4

1273-: Acidophils of the anterior pituitary secrete

1: GH

2: TSH

3: ACTH

4: FSH

1274-: An obese patient presented in casualty with random blood sugar 400 mg%, urine sugar +++ and ketones 1-E Drug useful in management with be -

1: Glibenclamide

2: Troglitazsone

3: Insulin

4: Metformin

1275-: A child with decreased levels of LH, FSH and Testosterone presents with delayed pubey. Which of the following is the most likely Diagnosis

1: Klinfelter's syndrome

2: Kallman's syndrome

3: Androgen Insensitive syndrome

4: Testicular infection

1276-: Maximum amount of alkaline phosphatase is seen in:

1: Semen

2: Placenta

3: CSF

4: Plasma

1277-: All of the following are true about Hashimoto's thyroiditis, except -

1: Follicular destruction

2: Increase in lymphocytes

3: Oncocytic metaplasia

4: Orphan Annie eye nuclei

1278-: Acidophils secrete

1: GH

2: TSH

3: ACTH

4: FSH

1279-: Drugs used in treatment of obesity are all Except

1: Orlistat

2: Sibutramine

3: Rimonabant

4: Prednisone

1280-: Increased Ca, decreased PO^ Diagnosis is-

1: Primary' hyperparathyroidism

2: Secondary hyperparathyroidism due to Vit D deficiency

3: Malignancy

4: Osteoporosis

1281-: Medical adrenalectomy is seen with-

1: Vincristine

2: Vinblastine

3: Mitotane

4: Methotrexate

1282-: Not controlled directly by ACTH

1: Glucocoicoid

2: Aldosterone

3: Coisol

4: Epinephrine

1283-: Acidophilic cells of anterior pituitary secretes?

1: IH

2: THS

3: ACTH

4: GH

1284-: Tetany may be present in all the following conditions except -

1: Acute pancreatitis

2: Hysterical Hyperventiltion

3: Hyperkalemia

4: Hypomagnesemia

1285-: An obese patient presented in casualty in an unconscious state. His blood sugar measured 400mg% urine tested positive for sugar and ketones Drug most useful in management is -

1: Glibenclamide

2: Troglitazone

3: Insulin

4: Chlorpropamide

1286-: Ovulation in women with 28-day cycle occurs at

1: 14 days prior to mensturation

2: Just before LH surge

3: Just after corpus leuteal maturation

4: Due to progesterone rise

1287-: Which of the following drugs can cause galactorrhea

1: Bromocriptine

2: Pantoprazole

3: Metoclopramide

4: Omeprazole

1288-: Hypokalemia.may be a feature of all following diseases, except -

1: Addison's disease

2: Cushing's syndrome

3: Baer's syndrome

4: Guelman's syndrome

1289-: In maturity onset diabetes on the young ( mody) not found is.

1: Family history positive

2: Young onset

3: Insulin receptor resistance

4: Glucokinase deficiency

1290-: In diabetic nephropathy all of the following are true, except-

1: Cardiovascular abnormalities can occur

2: Micro and macro albuminuria can occur

3: ACE inhibitors can reduce micro albuminuria

4: Insulin requirement becomes high

1291-: All are true estrogen except

1: Causes cholestasis

2: Used in treatment of gynaecomastia

3: Used in hormone replacement therapy

4: Increased risk of breast cancer

1292-: Non-osmotic stimulus for ADH secretion is:

1: Uremia

2: Hyperglycemia

3: Haemorrhage

 

4: Excessive water ingestion

1293-: Calcium as a second messenger in hormone action involves all except

1: Gastrin

2: Oxytocin

3: ADH

4: Insulin

1294-: A 43-year-old male high-level executive presents to his physician due to a persistent dizziness when standing quickly. He also has been exhibiting chronic fatigue, some muscle weakness, and an unusual craving for salty foods. The physician notices that the patient has a constant "bronze tan," and blood obtained during the visit demonstrated not only normal cholesterol levels but also hypoglycemia, hyperkalemia, and hyponatremia. The underlying cause for these problems is which one of the following?

1: Adrenal insufficiency

2: Pituitary insufficiency

3: Lack of insulin

4: Lack of glucagon

1295-: Which of the following statements can be regarded as primary action of inhibin?

1: It inhibits secretion of prolactin

2: It stimulates synthesis of estradiol

3: It stimulates secretion of TSH

4: It inhibits secretion of FSH

1296-: Lactic acidosis is common with:

1: Metformin

2: Phenformin

3: Repaglinide

4: Rosiglitazone

1297-: Not an effect of bromocriptine is :

1: Dopamine agonist

2: Increases prolactin release

3: Decreases prolactin relesae

4: All of the above

1298-: Hypothyroidism in infancy is characterized by all EXCEPT

1: Constipation

2: Coarse facies

3: Wide open cranial sutures

4: Hyperthermia

1299-: Calcitonin is produced by

1: Thyroid

2: Pituitary

3: Pancreas

4: Hypothalamus

1300-: Parathormone (Parathyroid hormone/PTH) increase calcium levels and reduces phosphate level by acting on

1: Proximal tubules

2: Distal tubules

3: Thick ascending limb of Loop of Henle

4: All of the above

1301-: In spider nevi, dilatation of blood vessels is due to:

1: Testosterone

2: Estrogen

3: Hepatotoxins

4: FSH

1302-: Primary hyperaldosteronism presents with all of the following except-

1: Hypeension

2: Hyperkalemia

3: Periodic paralysis

4: Frontal headache

1303-: Which one of the following cell types are found in the least numbers in the pituitary?

1: Lactotrophs

2: Thyrotrophs

3: Gonadotrophs

4: Coicotrophs

1304-: Which of the following has highest glycemic index?

1: Com flakes

2: White-rice

3: Ice cream

4: Whole wheat bread

1305-: Regarding the action of insulin, which of the following is true?

1: Decreased K+ uptake in adipose tissue

2: Increased protein catabolism in Muscle

3: Activation of hormone sensitive lipase

4: Decreased ketogenesis in liver

1306-: Which insulin has the late onset of action, longer duration of action, and has no pronounced peak?

1: NPH

2: Glulisine

3: Glargine

4: Aspa

1307-: Polar bodies are formed during

1: Spermatogenesis

2: Organogenesis

3: Oogenesis

4: Morphogenesis

1308-: 2nd generation sulfonylurea drugs are all except

1: Glipizide

2: Gliclazide

3: Tolbutamide

4: Glibenclamide

1309-: What serves as a precursor of testosterone?

1: Aldosterone

2: Estrone

3: Methyltestosterone

4: Pregnenolone

1310-: In parathyroid carcinoma

1: 5-10% incidence

2: Increased parathromone, decreased calcium in bone

3: Cytology is diagnostic

4: Metastasis is essential

1311-: Which hormone acts on cytoplasmic membrane receptor?

1: TSH

2: Thyroxine

3: Androgen

4: Coisol

1312-: Tetraethyl ammonium acts by blocking which of the following channels?

1: Na+

2: Cl-

3: K+

4: Ca

1313-: Steroid hormone receptors have attachment site for all except:

1: Steroid hormone

2: Transcription repressors

3: Hormone responsive element

4: Transcription activators

1314-: Precocious puberty in girls is defined by the onset of secondary sexual characteristics before the age of:

1: 5 years

2: 7 years

3: 8 years

4: 9 years

1315-: Not a marker for hyperparathyroidism is -

1: Increase in serum calcium

2: Increase in 24 hour urinary calcium excretion

3: Increase in serum calcitonin

4: Subperiosteal resorption of phalanges

1316-: All of the following sho stature cases are caused by mechanisms independent of specific defects in growth hormone axis except

1: Gonadal dysgenesis

2: Kasper - Hauser syndrome

3: Laron dwarfism

4: Achondroplasia

1317-: The occurrence of hypehyroidism following administration of supplemental iodine to subjects with endemic iodine deficiency goiter is known as -

1: Jod-Basedow effect

2: Wolff-Chaikoff effect

3: Thyrotoxicosis factitia

4: De Quervain's thyroiditis

1318-: Psammoma bodies in a thyroid lesion or the adjacent metastatic lymph nodes increase the possibility of

1: Papillary carcinoma

2: Follicular carcinoma

3: Anaplastic carcinoma

4: Hurthle cell carcinoma

1319-: Delayed pubey seen in all except

1: Chronic disease

2: Hypothyroidism

3: Turnur's syndrome

4: Mac cune albright syndrome

1320-: All of the following statements about nateglinide are true except?

1: Decreases pot-prandial hyperglycemia

2: Hypoglycemia is less COmmon than with sulfo- nylureas

3: It decreases insulin resistance

4: It acts by releasing insulin

1321-: FSH is secreted by

1: Chrompphobes

2: Basophils

3: Acidophils

4: Theca interna Cells

1322-: SHBG is decreased in

1: Hypehyroidism

2: Increased androgen

3: Increased estrogen

4: Pregnancy

1323-: Testicular descent is controlled in pa by

1: Insulin like factor 3(INL 3)

2: RANKL

3: FSH

4: LH

1324-: The most common presentation of hypoparathyroidism beyond the neonatal period is

1: Syncope secondary to prolonged QT intervals

2: Tingling of extremities

3: Seizure

4: Bronchospasm

1325-: Patients with both Graves' disease and Cushing syndrome are overproducing hormones that have which one of the following in common?

1: Reacting with receptors in the cell membrane

2: Utilizing second messengers

3: Binding to intracellular receptors

4: Binding to RNA to produce physiologically active proteins

1326-: True about primary aldosteronnism -

1: Pedal oedema

2: Increased renin

3: Increased Na+

4: Decreased K+

1327-: Which of the following hormonal concentration decreases with age?

1: Parathormone

2: FSH

3: Growth hormone

4: Norepinephrine

1328-: Which of the following is false about pioglifazone?

1: It PPARY g agonist

2: It is metabolized in liver

3: Not given in case of diastolic dysfunction

4: It acts on insulin gene and even in absence of insulin helps in metabolism of carbohydrate

1329-: All are seen In myxoedema coma except -

1: Hypothermia

2: Tachycardia

3: Hypotension

4: Hyponatremia

1330-: Which of the following responsible for fasting hypoglycemia ?

1: Increased insulin level

2: Decreased insulin level

3: increased Glycogen

4: Increased Glucagon in liver

1331-: Which of the following is not common metabolite of progesterone excreted in urine?

1: Pregnanelone

2: Pregnanetriol

3: 17-hydroxy pregnenolone

4: Pregnanediol

1332-: Thyroid hormones belong to which class of hormone?

1: Steroids

2: Proteins

3: Polypeptides

4: Amino acid derivatives

1333-: Which of the following drugs does not cause hypo gycemia:

1: Acarbose

2: Insulin

3: Glimepride

4: Nateglinide

1334-: All of the following are associated with insulin resistance except -

1: Acanthosis nigricans

2: Lipodystrophy

3: Gout

4: Calcific aoic valve disease

1335-: Imaging of choice for parathyroid pathology is

1: CT scan

2: Gallium scan

3: Thallium scan

4: Tc 99 scan

1336-: Urinary metabolite of progesterone

1: Pregnanolone

2: Progestriol

3: 17-HydroxyPregnanolone

4: Pregnanediol

1337-: Drugs causing Addison's disease are all the following except

1: Skin atrophy

2: Telengectasia

3: Folliculitis

4: Photosensitivity

1338-: A 50 year old male with type 2 diabetes mellitus is found to have 24-hr urinary albumin of 250 mg. Which of thefollowing drugs may be used to retard progression of renal disease -

1: Hydrochlohiazide

2: Enalapril

3: Amiloride

4: Aspirin

1339-: GLUT responsible for secretion of insulin from beta cells of pancreas -

1: 1

2: 2

3: 3

4: 4

1340-: Spermatogenesis occurs at

1: Body temperature

2: Temperature lower than core body temperature

3: Temperature higher than core body temperature

4: Temperature does not play a role

1341-: Cutting of the pituitary stalk decreases all of the following hormones except-

1: ACTH

2: GH

3: Prolactind

4: FSH

1342-: All of the following are increased in Acute stress except

1: Growth hormone

2: Insulin

3: Epinephrine

4: Glucagon

1343-: All are true about Diabetes mellitus except -

1: DKA is commoner in type II

2: HHS is primarily seen in individuals with 2 DM

3: Serum sodium in DKA is 125-135 nmol/L

4: Serum bicarbonate in DKA is<15 meq/L

1344-: In a woman with polyuria of6L/day, which are the 2 most impoant investigations to be done -

1: Water deprivation test

2: Water loading

3: Plasma and urine osmolality

4: Plasma osmolality

1345-: Semen is released by

1: Epididymis

2: Testes

3: Vas deferens

4: Prostate

1346-: Which of the following are uses of danazol?

1: Endometriosis

2: Menorrhagia

3: Hereditary angioneurotic edema

4: All of the above

1347-: Which among the following is not an androgen receptor blocker?

1: Finasteride

2: Cyproterone

3: Flutamide

4: None

1348-: A 24-year-old male presented with a swelling on anterior aspect of neck. On examination the swelling was firm and moved with deglutination. Biopsy from the lesion has been shown. What is the typical finding and diagnosis?

1: Orphan Annie eye nuclei; Follicular Ca thyroid

2: Orphan Annie eye nuclei; Papillary Ca thyroid

3: Hurthle cell change; Follicular Ca thyroid

4: Hurthle cell change; Papillary Ca thyroid

1349-: Factitious hyperinsulinemia is differentiated from insulinoma by -

1: C - peptides

2: Insulin antibodies

3: Serum glucose levels

4: Hypernatremia and hypokalemia

1350-: Function of preoptic nucleus of hypothalamus

1: Temperature regulation

2: Thirst

3: Sexual behaviors

4: All of the above

 

1351-: A 48 years old woman presents with vulval pruritus. On examination, there is erythema of external genitalia. She is a known diabetic for 10 years. Her HbAlc level reduced to 6.6% when compared to previous value of 7.8% four months ago. The medication most probably responsible for her symptoms is

1: Sitagliptin

2: Canaglifozin

3: Acarbose

4: Exenatide

1352-: Following malignancies most frequently cause hypercalemia except -

1: Breast

2: Kidney

3: Lung

4: Hea

1353-: Which of the following is indication for using raloxifine:

1: Chronic renal failure

2: Hypothyroidism

3: Renal dystrophy

4: Post-menopausal osteoporosis

1354-: A 75-year-old woman with well-controlled diabetes complains of poor eyesight. A grayish-white opacification of lens is found during a comprehensive eye examination. Which of the following metabolic pathways is most likely involved in this lens abnormality?

1: Aldose reductase pathway

2: Amino acid degradation cycle

3: Citric acid cycle

4: Oxidative phosphorylation

1355-: Albinism is due to:

1: Marked deficiency of melanin pigment

2: Thymus disorder

3: Tumour of pineal gland

4: ACTH deficiency

1356-: The Lab investigation of a patient shows lower limit of normal T4, & increased TSH. Which of the following is the most likely diagnosis-

1: Grave's disease

2: Hashimoto's disease

3: Pituitary failure

4: Hypothalamic failure

1357-: Cardiac manifestations of Grave's disease would include all of the folloing except -

1: Wide pulse pressure

2: Atrial fibrillation

3: Pleuropericardial scratch

4: Aoic insufficiency

1358-: Which of the following is not seen in hypothyrodism?

1: Oedema

2: Coldskin

3: Diastolic hypeension

4: Atrial fibrillation

1359-: Drug used in renal osteodystrophy:

1: Vitamin D

2: Calcitriol

3: Calcifediol

4: All of the above

1360-: True of the following

1: Calcium reabsorbed in DCT

2: 90% calcium excreted by glomerulus

3: Parathormone (PTH) promotes absorption of Ca++ from intestine

4: PTH promote action of calcitonin

1361-: A 42 year old male has strong positive Benedict's test, random blood sugar is > 163 mg%, fasting blood sugar is >200 mg% Next line of investigation is-

1: Urine glucose chaing 5 hourly

2: OralGTT

3: Repeat benedict's test

4: 24 hr urine sugar estimation

1362-: Which of the following is not used for the treatment of insulin induced hypoglycemia?

1: Intravenous glucose

2: Glucagon

3: Adrenaline

4: Oral carbohydrates

1363-: Laron dwarfism is due to

1: GH deficiency

2: GHRH deficiency

3: GH receptor resistance

4: IGF-1 deficiency

1364-: Which of the following statements about Diabetes Insipidus is true -

1: Urine osmolality should be > 300 mosm\/L

2: Plasma osmolality should be < 280 mmol\/L

3: Water deprivation test is required

4: Plasma osmolality should be > 300 mosm\/L prior to H2O Deprivation test

1365-: The thyroid inhibitor which produces the fastest response is

1: Lugol's iodine

2: Propylthiouracil

3: Radioactive iodine

4: Lithium carbonate

1366-: All are causes of osteoporosis, except -

1: Rheumatoidahritis

2: Hypoparathyroidism

3: Chronic heparin therapy

4: Thyrotoxicosis

1367-: Feilization occurs at

1: Cervix

2: Uterus

3: Ampulla

4: Ovary

1368-: Has its release inhibited by thyroxine.

1: LH

2: PRL

3: TSH

4: GH

1369-: Shanti has been diagnosed to have brain tumor. You would prefer to give her betamethasone /dexamethasone over hydrocoisone as steroids to decrease her cerebral edema because:

1: They do not cause Na+ and water retention

2: They are more potent

3: They can be administered intravenously

4: They inhibit brain tumours

1370-: All of the following reduce T4 absorption except

1: Metformin

2: Iron salts

3: Raloxifen

4: Colsevelam

1371-: A 65-year-old woman with history of type 2 diabetes mellitus for the last 8 years dies in a hospital She had no other significant medical history. Which of the following is the most likely cause of her death?

1: Diabetic ketoacidosis

2: Myocardial infarction

3: Renal failure

4: Stroke

1372-: A 60-year-old white woman presents for an office visit. Her mother recently broke her hip, and the patient is concerned about her own risk for osteoporosis. She weighs 165 lb and is 5 ft 6 in tall. She has a 50-pack-year history of tobacco use. Medications include a multivitamin and levothyroxine 50 mg/d. Her exercise regimen includes mowing the lawn and taking care of the garden. She took hormone replacement therapy for 6 years after menopause, which occurred at age 49. Which recommendation for osteoporosis screening is most appropriate for this patient?

1: Nuclear medicine bone scan

2: Dual-x-ray absorptiometry (DXA) scan

3: Quantitative CT bone densitometry

4: Peripheral bone densitometry

1373-: An 83-year-old man with poor nutrition notices easy bruising and bleeding gums. On examination, he has inflamed bleeding gums, multiple areas of ecchymoses, and perifollicular hemorrhages. His coagulation profile and liver function is normal.For the patient with vitamin deficiency or excess, select the most likely diagnosis

1: niacin

2: thiamine

3: pyridoxine

4: vitamin C

1374-: Which is NOT a feature of primary hyperaldosteronism -

1: Hypokalemia

2: Hypeension

3: Hypernatremia

4: Increased renin level

1375-: What is the effect of calcitonin on bone resorption

1: Inhibits resorption

2: Promotes resorption

3: Both propeies

4: Enhances mineralisation

1376-: A 55-year-old woman presents with fatigue and malaise which has been worsening over the last 2 months. She also noticed loss of appetite and early satiety. Evaluation finds an ulcerative mass located along the lesser curvature of the stomach along with bilateral ovarian masses. Which of the following is this patient most likely to have

1: Krukenberg tumor

2: Gastric leiomyosarcoma

3: Meig syndrome

4: Ovarian dysgerminoma

1377-: Which of the following is aldosterone antagonist?

1: Eplerenone

2: Deoxicorticosterone

3: Fenoldopam

4: Frusemide

1378-: The-most common differential diagnosis of hyper-thyrodism in a young female is -

1: Hysteria

2: Essential tremor

3: Anxiety neurosis

4: Parkinsonism

1379-: Features of hypocalcemia areA/E -

1: Numbness & tingling

2: Circumoral paresthesis

3: Depressed tendon reflexes

4: Skin irritability & sensitivity

1380-: Tumour associated with primary aldosteronism -

1: Adrenal adenoma

2: Adrenal hyperplasia

3: Von Hippel-Lindau syndrome

4: Adrenal carcinoma

1381-: A 26-year-old primigravida develops gestational diabetes and remains hyperglycemic during the remainder of her pregnancy. Which of the following abnormalities in the newborn child is likely related to the maternal hyperglycemia?

1: Ambiguous genitalia

2: Cretinism

3: Increased bih weight

4: Sheehan syndrome

1382-: Which of the following is a case of diabetes mellitus?

1: HbA1C 6-5%

2: Random blood sugar 205 mg% with polyuria

3: Blood sugar 140 mg% after 6 hours of fating

4: Glucose 190 mg% after 2 hours of eating red meat

1383-: Brown tumour is found in

1: Hypoparathyroidism

2: Hyperparathyroidism

3: Hypocalcemia

4: Hypothyroidism

1384-: Most common neuopathy in DM is-

1: Distal symmetric neuropathy

2: Autonomic neuripathy

3: Mononeuropathy

4: Amyotrophy

1385-: A 30 year old women pretests a history of amenorrhoea and impaired vision of six month' duration. Physical examination shows everything except for pale optic discs and diminished visual acuity. The most likely diagnosis is -

1: Pituitary adenoma

2: Craniopharyngioma

3: Hypothalamic glioma

4: Benign intracranial hypeension

1386-: TSH on surface receptor uses second messenger as

1: cAMP

2: cGMP

3: Ca2+

4: IP3

1387-: Which of the following is glucocorticoid receptor blocker?

1: Aminoglutethemide

2: Mifepristone

3: Trilostane

4: Ketoconazole

1388-: GnRH is a

1: Peptide

2: Amine

3: Steroid

4: Lipid

1389-: A patient is on low calcium diet for 8 weeks. Following increases to maintain serum calcium levels

1: PTH

2: Calcitonin

3: Active 24,25 dihydroxy cholecaliferol

4: Serum phosphate level

1390-: Criteria for primary hyperaldosteronism, all except-

1: Diastolic hypeension without edema

2: Metabolic acidosis present

3: Low secretion of rennin

4: Low secretion of aldosterone in spite of reduced volume fluid

1391-: Which of the following are the extraintestinal manifestations of Sipple syndrome?

1: Cutaneous lichen

2: Amylodosis

3: Hirschsprung disease

4: All the above

1392-: Vasopressin is secreted by

1: Supraoptic

2: Preoptic

3: Paraventricular

4: Posterior nucleus

1393-: Conversion of T4 to T3 is inhibited by all except

1: Propanolol

2: Propylthiouracil

3: Amiodarone

4: Methimazole

1394-: Features not seen in Cushing&;s Syndrome

1: Hypoglycemia

2: Hypeension

3: Frank psychosis

4: Hypokalemia

1395-: A 36 year old female with symptoms of hyperparathyroidism, tumor in pancreas, adrenal coical hyperplasia, pituitary adenomas, islet cell tumor with cutaneous angiofibromas. What is the diagnosis ?

1: MENl

2: MEN2A

3: MEN2B

4: MEN2C

1396-: Which of the following would be least affected by injections of TSH?

1: Uptake of Iodine by Thyroid

2: Synthesis of thyroglobulin

3: cGMP in Thyroid cells

4: Production of TSH

1397-: Substrate-controlled hormone is

1: Glucagon

2: FSH

3: LH

4: TRH

1398-: A 26 year old woman with 32-day menstrual cycle planning for conception regularly checks her body temperature (orally) using a digital thermometer in the morning before getting out of bed. She noticed an increase in her body temperature on the 18th day of menstrual cycle. This is caused by

1: Oestradiol

2: Progesterone

3: LH peak

4: FSH peak

1399-: All of statements about exenatide are true except:

1: It is a GLP -1 analogue

2: It can be used for treatment of Type 1 diabetes mellitus

3: it is given subcutaneously

4: It decreases glucagon

1400-: Which of the following is characteristic of Cushing's disease:

1: Incresed ACTH. increased cortisol

2: Decreased ACTH, increased cortisol

3: Increased ACTH. decreased cortisol

4: Decreased ACTH. decreased cortisol

1401-: There is mutation of gene coding for the ryanodine receptors in malignant hypehermia. Which of the following statements best explains the increased hea production in malignant hypehermia

1: Increased muscle metabolism by excess of calcium ions

2: Thermic effect of food

3: Increased sympathetic discharge

4: Mitochondrial thermogenesis

1402-: Canagliflozin acts by

1: Decreases hepatic glucose production

2: Increases Urinary glucose excretion

3: Increase insulin secretion

4: Prolong endogenous GLP-1 action

1403-: Dose of clonidine in suppression test done for pheochromocytoma is?

1: 0-3 mg

2: 10 mg

3: 100 mg

4: 200 nig

1404-: All of the following statements about estrogen are TRUE EXCEPT:

1: Decreases HDL

2: Increases triglycerides

3: Increases turnover of LDL receptors

4: Increases apolipoprotein A

1405-: In which of the following conditions a low/controlled glycemic index diet is preferred?

1: Diabetes

2: hypertension

3: children

4: Normal adults

1406-: True about Type I diabetes melitus is ?

1: Autoimmune disorder

2: Insulin non-dependent

3: Insulin does not improve the symptoms

4: Late age of onset

1407-: A 15 year old girl with type 1 diabetes is brought to emergency complaining of dizziness. Laboratory findings include severe hyperglycemia, ketoacidosis and blood pH of 7.15. To achieve rapid control of severe ketoacidosis, appropriate drug is:

1: Crystalline zinc insulin

2: NPH insulin

3: Tolbutamide

4: Ultra lente insulin

1408-: Half-life of insulin is

1: 1-2 min

2: 4-6 min

3: 10-12 min

4: 12-16 min

1409-: Drug of choice for hyperthyroidism in pregnant female:

1: Propylthiouracil

2: Carbimazole

3: Sodium iodide

4: Radioactive iodine

1410-: Denosumab is used in:

1: Osteomalacia

2: Osteoarthritis

3: Osteoporosis

4: Osteosarcoma

1411-: Commonest cause of congenital adrenal hyperplasia is

1: 21 hydroxylase deficiency

2: 11 B-hydroxylase deficiency

3: 17 alpha-hydroxylase deficiency

4: 18 hydroxylase deficiency

1412-: Third generation OC pills are -

1: Decreased risk of thromboembolism

2: Decreased risk of myocardial infarction

3: Increased risk of breakthrough bleeding

4: More side effects

1413-: A 30-year-old man presents to the clinic with recurrent symptoms of flushing, diarrhea, and weight loss. He cannot associate the symptoms with any particular activity, time of day or food ingestion. His past medical history is negative and he is not taking any prescription or recreational medications.On physical examination, his blood pressure is 126/74 mmHg, and the heart rate is 72/min and regular. His remaining physical examination is completely normal. Lab investigations reveal an elevated urinary 5-hydroxyindoleacetic acid (5-HIAA) Which of the following is the most likely diagnosis?

1: phenylketonuria

2: alkaptonuria

3: malignant melanoma

4: carcinoid syndrome

1414-: Rugger jersy sign Is seen in -

1: Ankylosing spondylitis

2: TB spine

3: Osteoahritis

4: Myeloma

1415-: Main mechanism of combined OCP?

1: Feedback inhibition of pituitary (causing of LH surge)

2: Change in camicalmues

3: Decreased motility and secretion of the fallopian tube

4: Prevent amputation

1416-: Which of the following is used in the treatment of hyperprolactinemia?

1: Cimetidine

2: Methysergide

3: Bromocriptine

4: Ondansetron

1417-: Which of the following is the drug of choice for the treatment of syndrome of inappropriate Antidiuretic Harmone secretion?

1: Demeclocycline

2: Vasopressin

3: Thiazide diuretics

4: Chloropropamide

1418-: Alkaline phosphatase is elevated in all, except -

1: Rickets

2: Osteomalacia

3: Hypoparathyroidism

4: Hypophosphatemia

1419-: A 40-year-old alcoholic man is being treated for tuberculosis, but he has been only intermittently compliant with his medications despite the health department's best efforts at directly observed therapy. He complains of increasing weakness, fatigue, weight loss, and nausea over the preceding 3 weeks. He appears thin, and his blood pressure is 80/50 mm Hg. There is increased pigmentation over the elbows and in the palmar creases. Cardiac examination is normal. Which of the following is the best next step in evaluation?

1: CBC with iron and iron-binding capacity

2: Erythrocyte sedimentation rate (ESR)

3: Early morning serum cortisol and cosyntropin stimulation

4: Blood cultures

1420-: Amyloid stroma is seen with?

1: Papillary carcinoma Thyroid

2: Medullary carcinoma Thyroid

3: Follicular carcinoma Thyroid

4: Anaplastic carcinoma Thyroid

1421-: Breast feeding often

1: Stimulates FSH

2: Stimulates LH

3: Stimulates prolactin initiation

4: Stop suppression of FSH

1422-: Which of the following antibodies is involved in the tissue destructive process associated with hypothyroidism in Hashimoto's and atrophic thyroiditis?

1: Thyroperoxidase antibody

2: Thyroglobulin antibody

3: TSH receptor antibody

4: Thyroid stimulating antibody

1423-: A 34-year-old man is referred for evaluation of hypeension and persistent hypokalemia in spite of taking oral potassium supplements. Blood pressure is 180/110 mm Hg. Serum sodium is 149 mEq/L (normal 140 to 148 mEq/L); potassium, 3.3 mEq/L (normal 3.6 to 5.2 mEq/L); Bicarbonate, 29 mEq/L (normal 22 to 29 mEq/L); Chloride, 103 mEq/L (normal 98 to 107 mEq/L); and Urea nitrogen, 23 mg/dL (normal 7 to 18 mg/ dL). Computed tomography demonstrates a 3-cm mass in the right adrenal gland. The most likely diagnosis is

1: Conn syndrome

2: Addison disease.

3: Cushing syndrome.

4: Sipple syndrome.

1424-: Which of the following is given at intervals as a pusatile therapy?

1: GnRH

2: GH

3: PSH

4: Estrogen

1425-: Excessive production of aldosterone results in -

1: Metabolic acidosis

2: Severe hypotension

3: Potassium retention

4: Depressed plasma renin

1426-: Which of the following statements about iodine is false

1: Contraindicated in hypeension

2: Causes iodism

3: Inhibits the realese of thyroxine

4: Inhibits the synthesis of iodo thyroxine and iodo thyronine

1427-: Which of the following is the most likely effect of insulin at the cellular receptor level?

1: stimulating tyrosine kinase

2: binding to ion channels

3: binding to intracellular erb A receptors

4: stimulating guanylate cyclase

1428-: Pseudohypoparathyroidism is characterized by:

1: Normal serum Ca++ and decreased serum PTH

2: Decreased serum Ca++ and decreased serum PTH

3: Decreased serum Ca++ and Increased serum PTH

4: Normal serum Ca++ and Increased serum PTH

1429-: Most important features in cushing syndrome is

1: Centripetal obesity

2: Hypertension

3: Menorrhagia

4: Polyurea

1430-: A 55-year-old woman is noted to be taking tamoxifen to help with breast cancer. She also complains of vaginal bleeding. Wof is the best explanation for vaginal bleeding

1: It is an estrogen antagonist in the breast and uterus, leading to loss of endometrial cells.

2: It has an antagonist effect on the breast but an agonist effect on the uterus.

3: It has estrogen agonist effect of the breast and uterus, thereby leading to endometrial hyperplasia.

4: It has no effect on the uterus, and the vaginal bleeding is caused by something else.

1431-: A one year old child preents with sho stature, lethargy, & constipation. Clinical examination shows a palpable goiter. Laboratory investigations revealed a low T4 and elevated TSH which of the following is the most likely diagnosis

1: Thyroid Dyshormonogenesis

2: Thyroid Dysgenesis

3: Central Hypothyroidism

4: TSH Receptor Blocking Antibody

1432-: In development of male fetus following statements are true except

1: Gene on sho arm of Y chromosome directs tests on development

2: During intrauterine life testes has no endocrine role in fetus

3: Around 8 weeks internal and external genitalia differentiates into male pattern

4: Antimullerian hormone inhibits development of mullerian system in male fetus

1433-: Confirmatory investigation for acromegaly is-

1: Insulin induced hypoglycemia test

2: GH assay

3: ACTH infusion test

4: IGF levels

1434-: The most reliable test in the diagnosis of pheochromocytoma is

1: 24 hour urinary metanephrine

2: Urinary catecholamines

3: Urinary catecholamines

4: Basal plasma catecholamines

1435-: 15 million sperm/ml of semen with total 15% motile sperm signifies

1: Aspermia

2: Asthenozoospermia

3: Oligozoospermia

4: Oligoasthenozoospermia

1436-: All of the following are causes of hypercalcemia 'except-

1: Sacroidosis

2: Cancer bronchus

3: Hypothyroidism

4: Lithium toxicity

1437-: All are true about estrogen except

1: Causes cholestasis

2: Used in treatment of gynaecomastia

3: Used in hormone replacement therapy

4: Increased risk of breast cancer

1438-: Which one of the following is present intracellularly in muscle cells?

1: Insulin

2: Coicosteroid

3: Epinephrine

4: Glucagon

1439-: A 47-year old male, Kishore exhibited signs and symptoms of acromegaly. Radiologic studies showed the presence of a large pituitary tumor. Surgical treatment of the tumor was only paially effective in controlling the disease. At this point, which of the following drugs is most likely to be used as pharmacological therapy?

1: Desmopressin

2: Nafarelin

3: Octreotide

4: Somatropin

1440-: Which one is an example of sho loop negative feedback mechanism

1: TSH inhibiting TRH release from hypothalamus

2: T3, T4 inhibiting TSH release from anterior pituitary

3: TRH inhibiting its release from hypothalamus

4: T3, T4 inhibiting TRH release from hypothalamus

1441-: Insulin storage in the body requires which ion?

1: Cu

2: Zn

3: Mo

4: Se

1442-: GLUT2 receptors

1: Insulin dependent

2: Insulin independent

3: Found in cardiac muscle

4: Found in brain

1443-: True statement regarding insulin

1: Circulated in blood by binding with RBC

2: Made of 2 chains with 3 disulphide bonds

3: Synthesized by alpha cells of islet of langerhans

4: Elimination half life is 60 min. after subcutaneous injection

1444-: Causes of fasting hypoglycemia are following except-

1: Excess glucagon

2: Glucose 6 phosphatase deficiency

3: Uremia

4: Glycogen synthatase deficiency

1445-: The goals of therapy for type 1 or type 2 diabetes mellitus are all except

1: Eliminate symptoms related to hyperglycemia

2: Reduce or eliminate the long-term microvascular and macrovascular complications of DM

3: Allow the patient to achieve as normal a lifestyle as possible

4: Restore the function of Beta cells

1446-: The type of estrogen found in highest concentration in adult female is

1: Estrone

2: Estriol

3: Estradiol

4: None

1447-: Medical management of hyperparathyroidism includes which of the following?

1: Bisphosphonates

2: Calcitonin

3: Plicamycin

4: All the above

1448-: The insulin preparation of choice in diabetic ketoacidosis is

1: Regular insulin

2: Lente insulin

3: Isophane insulin

4: A 30:70 mixture of plain and isophane insulin

1449-: Investigation of choice of hyper-prolactinemia-

1: TRH estimation

2: LH estimation

3: Prolactin estimation

4: Estradiol estimation

1450-: Hypomagnesemia is associated with which of the following-

1: Alcoholism

2: Hypothyroidism

3: Both

4: None

1451-: GH deficiency is diagnosed by -

1: Bone age less than chronological age

2: Bone age more than chronological age

3: Bone age equal to chronological age

4: Ratio of upper to lower segment of body is increased

1452-: Pheochromocytoma is a neoplasm derived from

1: Chromaffin cells

2: Paraganglia in neck

3: An adrenal gland tumor due to nephrogenic rest

4: Primitive totipotential cells

1453-: 17 OH, steroid

1: Androgen

2: Progesterone

3: Estrogen

4: None

1454-: Which one of the following diseases or conditions predisposes a patient to acetaminophen toxicity?

1: Type 1 diabetes

2: Type 2 diabetes

3: Alcoholism

4: Pernicious anemia

1455-: Hypercalcemia associated with malignancy is most often mediated by

1: Parathyroid hormone (PTH)

2: Parathyroid hormone related protein (PTHrP)

3: Interleukin-6 (IL-6)

4: Calcitonin

1456-: Effect of steroids on calcium

1: Increased plasma level

2: Increased absorption from gut

3: Increased excretion from kidney

4: None

1457-: Prolactin secretion will be inhibited by:

1: haloperidol

2: GAB A( Gama aminobutyric acid)

3: Neurophysin

4: Dopamine

1458-: Long acting corticosteroid is -

1: Triamcinolone

2: Betamethasone

3: Hydrocortisone

4: Prednisolone

1459-: Thyroid storm can be treated by all the following drugs except-

1: Propylthiouracil

2: Dexamethasone

3: Propranolol

4: Aspirin

1460-: Which of the following agents is the drug of choice for Central Diabetes Insipidus -

1: Desmopressin

2: Demeclocycline

3: Thiazide Diuretics

4: Lithium

1461-: Phosphodiesterase inhibitor used for erectile dysfunction

1: Sildenafil

2: Amrinone

3: Milrinone

4: Tamoxifen

1462-: Which of the following drugs has maximum chances of causing hyperprolactinemia?

1: Clozapine

2: Olanzapine

3: Ziprasidone

4: Risperidone

1463-: Glucose transpoer in myocyte stimulated by insulin is

1: GLUT 1

2: GLUT 2

3: GLUT 3

4: GLUT 4

1464-: Intake of exogenous steroid causes.

1: Addison's disease

2: Cushing's syndrome

3: Pheochromocytoma

4: Conn's syndrome

1465-: Sarcodiosis can be associated with

1: Cranial diabetes insipidus

2: Psychogenic polydypsia

3: Nephrogenic diabetes insipidus

4: SAIDH

1466-: Sildenafil acts by inhibiting -

1: Phosphodiesterase - 2

2: Phosphodiesterase - 5

3: Adenyl cyclase

4: Guanyl cyclase

1467-: All of the following cause hypothyroidism except

1: PAS

2: Captopril

3: Lithium

4: Amiodarone

1468-: In a foetus, the insulin secretion begins by

1: 3rd month

2: 5th month

3: 7th month

4: 9th month

1469-: Which of the following progesterone is used in emergency contraception?

1: Levonorgesterol

2: Microised Progesterone

3: Norgesterone

4: Depot Medroxyprogesterone acetate

1470-: Antidiabetic Safe in liver and renal failure

1: Linagliptin

2: Insulin

3: None

4: Both

1471-: Long acting insulin:

1: Lispro

2: Aspart

3: Glargine

4: Zn suspension of insulin

1472-: Which of the following is not used in the management of thyroid storm?

1: Potassium iodide

2: Reserpine

3: Propranolol

4: Calcium channel blockers

1473-: Disorder associated with thyrotoxicosis but not associated with hypehyroidism is:

1: Graves disease

2: Hyperfunctioning ("toxic") multinodular goiter

3: Iodine-induced hypehyroidism

4: De Quervain thyroiditis

1474-: All the following familial syndromes are associated with development of pheochromocytoma except:

1: Sturge-Weber syndrome.

2: Von Recklinghausen disease.

3: MEN Type II.

4: Prader-Willi syndrome.

1475-: Longest acting insulin is

1: Global zinc suspension

2: Insulin- zinc suspension

3: Neutral protamine hagedorm (NPH)

4: Protamine- zinc insulin

1476-: Dehydration in ketoacidosis is best treated with-

1: Isolyte P

2: Isolyte M.

3: Normal saline

4: Molar 1\/6 lactate

1477-: Trpohic hormones refer to:

1: Hormones secreted from hypothalamus

2: Pituitary gland hormones

3: Hormones that stimulate the secretion of other endocrine glands

4: Hormones of posterior pituitary

1478-: Which of the following hormones is an example of a peptide hormone?

1: Parathormone

2: Adrenaline

3: Coisol

4: Thyroxine

1479-: Which one of the following statements about non insulin dependent diabetes mellitus (NIDDM) is NOT true-

1: Circulating islet cell antibodies are usually found

2: There is no HLA associaton

3: Ketosis is rare

4: Relative resistance to insulin is present

1480-: Which of the following effects is NOT SEEN in primary hyperaldosteronism (Conn's syndrome)?

1: Hypertension

2: Metabolic Alkalosis

3: Hyperkalemia

4: Expansion of Extracellular and Plasma volume

1481-: Progesterone is synthesized from

1: Pregnenolone

2: 17-Hydroxypregnenolone

3: Pregnanediol

4: Pregnanetriol

1482-: Which is the least common thyroid malignancy?

1: Papillary carcinoma

2: Follicular carcinoma

3: Medullary carcinoma

4: Anaplastic carcinoma

1483-: The most common cause of Cushing&;s syndrome is-

1: Pituitary adenoma

2: Adrenal adenoma

3: Ectopic ACTH

4: Iatrogenic steroids

1484-: HCG is produced by

1: Kidney

2: Placenta

3: Pituitary

4: Liver

1485-: Which one of the following variants of papillary carcinoma thyroid occurs in younger individuals including children with lymphonodal metastases in almost all cases and morphologically simulates Hashimoto thyroiditis is:

1: Tall-cell variant

2: Follicular variant

3: Diffuse sclerosing variant

4: Oncocyticvarient

1486-: Growth hormone is not produced during:

1: Deep sleep

2: Hypoglycemia

3: Low free fatty acid content in the body

4: Paradoxical sleep

1487-: The commonest cause of chronic renal failure is-

1: Diabetes mellitus

2: Hypeension

3: Pyelonephritis

4: Cystic disease of kidneys

1488-: The karyotype of a patient with androgen insensitivity Syndrome is

1: 46XX

2: 46XY

3: 47XXY

4: 45X0

1489-: Aldosterone antagonists are not useful in the treatment of

1: Hypeension

2: Congestive hea failure

3: Gynaecomastia

4: Hirsutism

1490-: Which of the following is a selective estrogen receptor modulator?

1: Centchroman

2: Mifepristone

3: Danazol

4: Anastozole

1491-: According to American diabetic association, which of the following indicates prediabetic condition?

1: Fasting plasma glucose - 100 to 125 mg/dl

2: 2-hour plasma glucose - 100 mg/dl

3: HbA1C > 6.5%

4: All of the above

1492-: Procalcitonin is used as a marker for?

1: Sepsis

2: Medullary carcinoma of thyroid

3: Vitamin D resistant rickets

4: parathyroid adenoma

1493-: Which of the following is not seen in humans?

1: Estrous cycle

2: Menstrual cycle

3: Endometrial cycle

4: Ovarian cycle

1494-: Menopausal hot flushes coincides with

1: FSH secretion

2: Decrease in estrogen

3: LH surge

4: Increase in progesterone

1495-: Which of the following drugs can affect male fertility?

1: Marijuana

2: Silodocin

3: Dutaseride

4: All the above

1496-: Hyperaldosteroism is -

1: Metabolic acidosis

2: Metabolic alkalosis

3: Respiratory acidosis

4: Respiratory alkalosis

1497-: In which of the following patients, thyrotoxicosis should not be suspected

1: Patients with unexplained weight loss

2: Patients with unexplained diarrhoea

3: Patients with distal muscle weakness

4: Patients with paroxysmal atrial tachycardia

1498-: A 52-year-old man complains of impotence. On physical examination, he has an elevated jugular venous pressure, S3 gallop, and hepatomegaly. He also appears tanned, with pigmentation along skin folds. He has joint pain and bony overgrowth primarily affecting the second and third metacarpophalangeal joints bilaterally. The plasma glucose is 250 mg/dL, and liver enzymes are elevated. Which of the following studies will help establish the diagnosis?

1: Detection of nocturnal penile tumescence

2: Determination of iron saturation

3: Determination of serum copper

4: Detection of hepatitis B surface antigen

1499-: About Neuropeptide Y, all are true except

1: It decreses the activity of melanocoieotropin hormone

2: Decreases thermogenesis

3: Its level decreases during starvation

4: Contains 36 Amino-acid residues

1500-: Choose the best Lab value for a patient with central diabetes insipidus- Urinary Osmolality & Serum Osmolality

1: 50 300

2: 500 260

3: 50 260

4: 500 100

1501-: Excess Aldosterone is associated with all the following except-

1: Hypokalemia

2: Hyperkalemia

3: Sodium retention

4: Hypeension

1502-: High calcium intake can lead to

1: Osteoporosis

2: Osteopotrosis

3: Milk alkali syndrome

4: Renal failure

1503-: A 14-year-old girl noticed gradual neck enlargement during the past 8 months. On physical examination, her thyroid gland is diffusely enlarged. Her serum TSH level is normal. A dietary history is most likely to reveal that she has begun eating more of which of the following foods?

1: Cabbage

2: Fava beans

3: Fish

4: Plantains

1504-: All are seen in DKA except -

1: Tachypnoea

2: Dehydration

3: Bradycardia

4: Abdominal pain\/tenderness

1505-: In Addison's disease drug to be given is:

1: Hydrocortisone

2: Betamethasone

3: Prednisolone

4: DOCA

1506-: Autoimmune thyroiditis is associated with all except

1: DM

2: Mysthenia gravis

3: SLE

4: Psoriasis

1507-: A 25 year old young woman has recurrent episodes of headache and sweating. Her mother had renal calculi and died after having a neck mass. The physical examination reveals a thyroid nodule but no clinical sign of thyrotoxicosis. Before performing thyroid surgery, the surgeon should order -

1: Measurement of thyroid hormones

2: Serial detenriinations of serum calcium,phosphorus, protein and alkaline phosphatase

3: 24-hours urine test for 5 hydroxyindoleacetic acid excretion

4: Serial 24 hours test for catecholamines, meta-nephrines and vanillylamandelic acid excretion

1508-: Most useful investigation in diagnosis of diabetic ketoacidosis -

1: Ketonemia

2: pH of blood

3: Urinary sugar

4: Urine ketone

1509-: Following is true about pheochromocytoma except -

1: Extra - adrenal tumors show zellballen pattern

2: Follows rule of 10s

3: 90% of non familial cases are bilateral

4: 10 % of pbeochromocytomas are extra adrenal

1510-: A 40-year-old woman has experienced increasingly frequent episodes of weakness accompanied by numbness and tingling in her hands and feet for the past year. On examination, her blood pressure is 168/112 mm Hg. Laboratory studies show sodium, 142 mmol/L; potassium, 2.9 mmol/L; chloride, 104 mmol/L; HCO3-, 28 mmol/L; and glucose, 74 mg/dL. Her plasma renin activity is low. Which of the following radiologic findings is most likely to be present in this woman?

1: Adrenal nodular enlargement

2: Pancreatic mass

3: Retroperitoneal mass

4: Thyroid nodular enlargement

1511-: Which of the following is not used in the treatment of thyroid storm

1: Potassium iodide

2: Reserpine

3: Propanolol

4: Calcium channel blockers

1512-: TheLab investigation of a patient shows excess T4 and decreased TSH. Which of the following is the most likely diagnosis-

1: Grave's disease

2: Hashimoto's disease

3: Pituitary Failure

4: Hypothalamic failure

1513-: Calorigenic hormone is

1: Epinephrine

2: Nor-epinephrine

3: Thyroid hormones

4: All of the above

1514-: The characteristic finding in diabetic nephropathy is-

1: Diffuse glomerulosclerosis

2: Nodular glomerulosclerosis

3: Armani -Ebstein reaction

4: Fibrin caps

1515-: Males and females show difference in the age of onset of pubey. The difference in the age of onset of pubey amongst males may be explained by

1: Increased Activin - A levels

2: Decreased Follistatin levels

3: Increased Inhibin levels

4: Easily releasable FSH pool

1516-: Medullary ca of thyroid is associated with increase in-

1: Calcitonin

2: Thyroglobulin

3: T3

4: T4

1517-: A 40 year old lady with temporal field defects and glactorrhoea is most likely to have-

1: Pituitary macroadenoma

2: Craniopharyngioma

3: Lactational failure

4: Pregnancy

1518-: Central diabetes insipidus is characterised by-

1: Low plasma and low urine osmolality

2: High plasma and high urine osmolality

3: Low plasma and high urine osmolality

4: Low urine and high plasma osmolality

1519-: Sucking releases which of the following from the anterior pituitary

1: Prolactin

2: Oxytocin

3: Somatostatins

4: Somatomedins

1520-: Lymphatic spread most commonly seen in which type of thyroid carcinoma?

1: Papillary

2: Medullary

3: Follicular

4: Lymphoma

1521-: The only oral drug (among the given options) effective for the treatment of the condition shown in the below is:

1: Octretide

2: Cabergoline

3: Pegvisomant

4: L- thyroxine

1522-: Male pseudohermaphroditism is seen in

1: 5- a redutase deficiency

2: 21 hydroxylase deficiency

3: 17 hydroxylase deficiency

4: Gonadal dysgenesis

1523-: A 53-year-old man with gout for many years usually experiences 4-5 attacks a year. He treats each flare with an over-the-counter nonsteroidal anti-inflammatory drug (NSAID), but is not taking any medications for gout prophylaxis.On physical examination, there are no active joints presently, but he does have some tophaceous deposits on his left hand. As part of his complete evaluation, screening for renal complications of gout is performed. Which of the following findings is most likely compatible with chronic gouty nephropathy?

1: nephrotic syndrome

2: decreased urinary concentrating ability and proteinuria

3: acute kidney injury

4: acute tubular necrosis (ATN)

1524-: Which of the following is true for patients treated with clomiphene -

1: Decreased risk of ovarian carcinoma

2: Causes decreased sexuality if given in males

3: Increased risk of ovarian hyperstimulation and polycystic ovaries

4: Risk of ectopic pregnancy

1525-: Hypothyroidism caused by a viral infection of the thyroid gland is a pathologic condition associated with which of the blood hormone levels.

1: High prolactin (PRL)

2: High TSH

3: High cortisol

4: Low growth hormone (GH)

1526-: Bone removing cells

1: Osteoblasts

2: Osteoclasts

3: Stem cells

4: Cytotoxic T cells

1527-: All are used in the treatment of hot flushes except

1: Tamoxifen

2: Venlafaxine

3: Gabapentin

4: clonidine

1528-: SIADH is associated With the following drug-

1: Vincristine

2: Erythromycin

3: 5-FU

4: Methotrexate

1529-: Drug X which inhibit the binding of RANKL to its receptor (RANK) in osteoporosis:

1: Teriparatide

2: Alendronate

3: Denosumab

4: Estrogen

1530-: Following clinical feature is seen in which condition?

1: Hyper parathyroid

2: Cushing disease

3: Addison Disease

4: Grave Disease

1531-: Pubarche is due to

1: GH

2: Prolactin

3: Estrogen

4: Testosterone

1532-: Mechanism of action of metformin is

1: Decreases hepatic glucose production

2: Increases GI glucose absorption

3: Increase insulin secretion

4: Prolong endogenous GLP-1 action

1533-: A 30-year-old female complains of palpitations, fatigue, and insomnia. On physical exam, her extremities are warm and she is tachycardic. There is diffuse thyroid gland enlargement and proptosis. There is a thickening of the skin in the pretibial area. Which of the following lab values would you expect in this patient?

1: Increased TSH, total thyroxine, total T3

2: Decreased TSH, increased total thyroxine

3: Increased T3 uptake, decreased T3

4: Decreased TSH, normal T4

1534-: 5 percent dextrose is

1: Hypotonic

2: Isotonic

3: Normotonic

4: Hypeonic

1535-: In hyperparathyroidism, all are seen except -

1: Osteopetrosis

2: Osteoporosis

3: Cysts

4: Brown tumor

1536-: Following organ/tissue have proven endocrine function/capability except

1: Hea

2: Adipocytes

3: Stomach

4: Salivary gland

1537-: ALL of the following are features of acromegaly except-

1: Glucose intolerance

2: Nonsuppressibility of growth hormone by glucose ingestion

3: Raised levels of plasma somatomedin D

4: Low serum phophate

1538-: All are primary causes of hypogonadism except:

1: Klinefelter syndrome

2: Cryptorchidism

3: Diabetes mellitus

4: Mumps orchitis

1539-: A 42-year-old woman has noticed dry skin, fatigue, and weight gain over the past 3 months. Her blood pressure is 110/70 mm Hg, pulse 60/min, and heart and lungs are normal. Her skin feels rough and dry, but the rest of the examination is normal. Her biochemistry is normal but the thyroid-stimulating hormone (TSH) is 39 mU/L (0.5-5 mU/L). Which of the following is the most likely cause for her elevated TSH?

1: trauma

2: radioactive iodine ingestion

3: primary hypothyroidism

4: parathyroid surgery

1540-: As per etiological classification of diabetes mellitus, Gestational diabetes mellitus is

1: Type IA

2: Type IB

3: Type II

4: Type IV

1541-: All of the following statements about Octreotide are true except

1: It is effective orally

2: It is used for the treatment of acromegaly

3: It can be used for the treatment of secretory diarrhea

4: It can be used in poal hypeension

1542-: Anuria is defined as urine output less than ?

1: 4 ml/hr

2: 8 ml/hr

3: 12 ml/hr

4: 16 ml/hr

1543-: Which of the following syndromes in relation to obesity are associated with hypogonadism in males but not in the females?

1: Prader Willi syndrome

2: Laurence Moon Biedl syndrome

3: AHLSTROM'S syndrome

4: COHEN'S syndrome

1544-: Obesity is not a feature of-

1: Hypothyroidism

2: Pheochromocytoma

3: Hypogonadism

4: Cushing's syndrome

1545-: Prolactin is secreted by

1: Anterior pituitary

2: Adrenal gland

3: Posterior pituitary

4: Ovary

1546-: Which thyroid carcinoma has amyloid deposition-

1: Anaplastic

2: Follicular

3: Medullary

4: Papillary

1547-: Insulin-like Growth factor II plays an impoant role in

1: Control of metablism

2: Skeletal growth

3: Cailage growth

4: Devolopment of foetus

1548-: The parents of a 4-week-old girl complain that their baby is apathetic and sluggish. On physical examination, the child's abdomen is large and exhibits an umbilical hernia. The skin is pale and cold, and the temperature is 35degC (95degF). Which of the following provides a plausible explanation for the signs and symptoms of this child?

1: Cystic fibrosis

2: Muscular dystrophy

3: Parathyroid hyperplasia

4: Thyroid agenesis

1549-: All of the following statements about alpha -glucosidase inhibitors are true except

1: Reduces intestinal absorption of carbohydrates

2: Effective in both type 1 and 2 diabetes

3: Hypoglycemia is a common and serious side effect

4: Can be used with other oral hypoglycemic agents

1550-: Which of the following is not a histological feature of adamantinomatous craniopharyngioma?

1: Nests and cords of squamous epithelium embedded in spongy reticulum

2: Compact, lamellar keratin formation ("wet keratin")

3: Dystrophic calcification and cholesterol crystals

4: Papillae lined by well-differentiated squamous epithelium

1551-: Adrenal hyperplasia due to 21 hydroxylase deficiency is treated with low dose:

1: Androgen

2: Estrogen

3: Cortisone

4: Anti androgen

1552-: A 55-year-old obese woman presents to the clinic for evaluation of multiple symptoms. She notes frequent episodes of vaginal yeast infections in the past 2 months, recent weight loss in spite of a large appetite, and waking up frequently at night to urinate. There is no history of fever or chills, and her only past medical illness is hypertension that is treated with ramipril. Which of the following is the most likely diagnosis?

1: diabetes mellitus (DM)

2: diabetes insipidus (DI)

3: vaginitis and cystitis

4: myxedema

1553-: For the following dyslipidemias, select the most characteristic finding.Hyperchylomicronemia.

1: palmar plane xanthomas

2: triglycerides > 1000

3: subcutaneous extensor tendon xanthomas

4: low serum cholesterol

1554-: Most active form of vitamin D

1: Calcefedial

2: Calcitriol

3: 7-dehydrocholecalciferal

4: Vitamin D3

1555-: Which of the following drug is a SERM is useful for treatment of osteoporosis?

1: Raloxifene

2: Bisphosphonate

3: Strontium

4: Estradiol

1556-: In DM type-II Insulin resistance develops due to

1: End organ target receptor insensitivity

2: DKA

3: HONK (Hyperosmolar nonketosis)

4: Genetic

1557-: SIADH - all are features except -

1: Decreased sodium, maintaining the concentrating ability of the urine osmolality (> 100 mOsm)

2: Normal sodium balance maintained indicating excess urinary sodium is due to efficient sodium intake

3: Hypouricemia

4: Low blood oressure due to volume depletion

1558-: Dilutionalhyponatremia is seen in -

1: Addison's disease

2: DI

3: Diuretic therapy

4: None

1559-: Following are the adverse effects of estrogens except

1: Supression of libido

2: Fusion of epiphyses

3: Hot flushes

4: Gynaecomastia in males

1560-: Anti-diabetic effect of sulfonylureas is by reducing:

1: Glucagon production

2: Insulin secretion

3: Tissue sensitivity to insulin

4: Tissue sensitivity to glycogen

1561-: All of the following are true regarding chlorpropamide except:

1: It is sho acting

2: It can cause hypoglycemia in elderly

3: Causes weight gain

4: Associated with alcoholic flush

1562-: Most common thyroid Cancer is

1: Papillary carcinoma

2: Follicular carcinoma

3: Medullary carcinoma

4: Anaplastic carcinoma

1563-: Anti-inflammatory action of steroids due to

1: Inhibiton of phospholipase A2

2: Inhibhition of cyclooxegenase

3: Increased activity of lipolipase

4: Inhibition of lipo oxegenase

1564-: Thyroid peroxidase is required for all of the following steps in thyroid hormones synthesis except:

1: IODIDE UPTAKE

2: OXIDATION OF IODIDE

3: IODINATION OF ACTIVE IODIDE

4: SYNTHESIS OF IODOTHYRONINES

1565-: Which among the following is human Insulin analogue?

1: Lispro

2: Regular

3: NPH insulin

4: Lente insulin

1566-: Diabetes mellitus is present in all except-

1: Fanconis anemia

2: Noonans syndrome

3: Ataxia telangiectasia

4: Myotonic dystrophy

1567-: Which of the following statement is not true about diuretics

1: Acetazolamide is a carbonic acid anhydrase stimulant

2: Thiazides act on coical diluting segment of nephron

3: Furosemide is a high ceiling diuretics

4: Spironolactone is an Aldosterone antagonist

1568-: Increased ratio of insulin to glucagon causes

1: Hypoglycemia

2: Decreased levels of lipoprotein lipase

3: Decreased amino acid synthesis

4: Enhanced lipolysis in adipose tissue

1569-: BMR is decreased in:

1: Cold temperature

2: Hyperthyroidism

3: Exercise

4: Hypothyroidism

1570-: Which of the following is not a function of insulin

1: Increased glucose uptake in muscle

2: Increased lipolysis in adipose tissue

3: Decreased gluconeogenesis in liver

4: Incresed protein synthesis in muscle

1571-: Wof bones is affected more with glucocoicoid induced osteoporosis

1: Humerus

2: Femur

3: Radius

4: veebra

1572-: Osteoclasts are inhibited by

1: Parathyroid hormone

2: Calcitonin

3: 1,25-dihydroxycholecalciferol

4: Tumor necrosis factor

1573-: Gs-alpha mutation my lead to?

1: Mccune Albright syndrome

2: Pseudohypoparathyroidism

3: Pituitary adenomas

4: All of the above

1574-: The features of neonatal hypehyroidism include all except

1: Triangular facies with craniosynostosis

2: Congestive cardiac failure

3: Advanced osseous maturation

4: Goiter is rare

1575-: True about adrenal pheochromocytoma is

1: Chromaffin negative

2: Mostly malignant

3: Bilateral in 10 percnt cases

4: Unilateral in 10 percnt cases

1576-: Thyrotoxicosis not associated with hypehyroidism is caused by all Except

1: Granulomatous thyroiditis

2: Struma ovarii

3: Factitious thyrotoxicosis

4: TSH-secreting pituitary adenoma

1577-: A 5-year-boy has developed features that suggest puberty over the past 6 months. On physical examination, the boy has secondary sex characteristics, including pubic hair and enlargement of the penis. Which of the following morphologic features is most likely to be seen in his adrenal glands?

1: Cortical atrophy

2: Cortical hyperplasia

3: Cortical nodule

4: Medullary atrophy

1578-: Treatment for hyperprolactenemia is -

1: Estrogen

2: Bromocriptine

3: GnRh analogue

4: Cimetidine

1579-: Continuous administration of GnRH

1: Stimulates hypothalamic - pituitary axis

2: Suppresses hypothalamic - pituitary axis

3: May suppress or stimulate hypothalomic -pituitary axis

4: Has no effect on hypothalamic - pituitary axis

1580-: Drug used in the treatment of CAH in a child is:

1: Dexamethasone

 

2: Betamethasone

3: Prednisolone

4: Hydrocortisone

1581-: All the following are important in the development of Type I diabetes mellitus except:

1: High sugar

2: Gluten

3: Smoked & red meat

4: Cow milk

1582-: All of the following are seen in reckets, except -

1: Bow legs

2: Gunstock deformity

3: Pot belly

4: Cranio tabes

1583-: HypertriglyceridemiaFor the above dyslipidemias, select the most characteristic finding.

1: palmar plane xanthomas

2: triglycerides > 1000

3: subcutaneous extensor tendon xanthomas

4: low serum cholesterol

1584-: Treatment of acute hypercalcemia-

1: Normal saline with forced diuresis with chlohiazide

2: Plicamycin

3: Gallium nitrate

4: Mithramycin

1585-: DPP-IV inhibitor used in renal failure:

1: Linagliptin

2: Sitagliptin

3: Vildagliptin

4: Saxagliptin

1586-: The formation of 25-hydroxycholecalciferol takes place in the-

1: Liver

2: Kidney

3: Intestines

4: Pancreas

1587-: Most common site for pheochromocytoma is?

1: Adrenal medulla

2: Adrenal cortex

3: Paravertebral ganglion

4: Paraaortic-sympathetic chain

1588-: A 6-week infant with ambiguous genitalia (as shown below) presents with an episode of dehydration & shock requiring hospitalization. What is the electrolyte abnormality that you expect in this baby?

1: Hypokalemia

2: Hyperkalemia

3: Hypocalcemia

4: Hypercalcemia

1589-: Common presentations of juvenile Hypothyroidism

1: Growth retardation

2: Mental retardation within 2 years

3: Delayed pubey

4: Umbilical Hernia

1590-: Type I MEN involves all, except -

1: Pancreas

2: Adrenal

3: Pituitary-'

4: Parathyroid

1591-: A 60-year-old woman comes to the emergency room in a coma. The patient's temperature is 32.2degC (90degF). She is bradycardic. Her thyroid gland is enlarged. There is diffuse hyporeflexia. BP is 100/60. Which of the following is the best next step in management?

1: Await results of T4 and TSH.

2: Obtain T4 and TSH; begin intravenous thyroid hormone and glucocorticoid.

3: Begin rapid rewarming.

4: Obtain CT scan of the head.

1592-: Finasteride acts by blocking

1: Alpha receptor

2: 5 alpha reductase enzyme

3: 5 alpha reductase enzyme

 

4: Beta receptors

1593-: Which of the following is associated with hypothyroidism Is sub Himalayan region?

1: Cu

2: Fe

3: Zinc

4: Selenium

1594-: Psammoma bodies can be seen in the following except?

1: Follicular Carcinoma of thyroid

2: Papillary carcinoma of thyroid

3: Meningioma

4: Serous cytadenoma of ovary

1595-: SIADH is associated with -

1: Small cell carcinoma lung

2: Adeno carcinoma lung

3: Squamous cell carcinoma lung

4: Mixed cell tumor lung

1596-: All are seen in DiGeorge syndrome Except

1: Immunodeficiency

2: Hea defects

3: Hypercalcemia

4: Cleft palate

1597-: All are true about hormone functions except

1: Thyroid hormones regulate metabolism

2: ADH regulates blood osmolality

3: Insulin regulates blood glucose

4: Coisol regulates plasma volume

1598-: Which of the following is structurally related to insulin-like growth factors I and II?

1: Preproinsulin

2: Proinsulin

3: Insulin

4: C peptide

1599-: A 22 yr old female, Neeta presented to you with complaints if headache and vomiting since 2 months b. She is having amenorrhea but urine pregnancy test is negative. She also complained big secretion big milk from the breasts. A provision diagnosis of hyper prolactinemia was made and MRI was suggested. MRI confimed the presence of large Pituatory Adenoma Neeta was advised surgery however she is not willing to undergoe surgery. Which of the following medications is most likely to be prescribed

1: Sumatriptan.

2: Bromocriptine

3: Ergotamine

4: Allopurinol

1600-: Pecentage of dose given as Basal insulin in bolus basal regimen in children is ?

1: 0-25%

2: 25-50%

3: 50-75%

4: 75-100%

1601-: Hypermagnesemia may be observed in:

1: Hyperparathyroidism

2: Diabetes mellitus

3: Kwashiorkor

4: Primary aldosteronism

1602-: The patient whose hands are developmentally delayed with a short, stocky build. Which of the following is the most likely diagnosis?

1: achondroplastic dwarf

2: Down syndrome

3: Klinefelter's syndrome

4: pseudohypoparathyroidism

1603-: IgG4-related disease is a newly recognized entity. Which of the following thyroid abnormality is associated with this condition?

1: De quervain thyroiditis

2: Postpaum thyroiditis

3: Reidel thyroiditis

4: Hashimoto thyroiditis

1604-: Psamomma bodies are seen in?

1: Papillary carcinoma thyroid

2: Medullary carcinoma thyroid

3: Follicular carcinoma thyroid

4: Anaplastic carcinoma

1605-: Primary oocyte is formed after

1: First meiotic division

2: Second meiotic division

3: Mitotic division

4: None of the above

1606-: A 7 yr old boy underwent neurosurgery for craniopharyngioma following which pituitary functions were lost. Which of the following hormone should be replaced first ?

1: Hydrocoisone

2: Thyroxine

3: Growth hormone

4: Prolactin

1607-: Which of the following increases during surgical stress?

1: Coisol

2: Glucagon

3: Insulin

4: Gastrin

1608-: Most potent analgesic:

1: COX-2 inhibitor

2: Remifentanil

3: Morphine

4: Sufentanil

1609-: 'Weak giants' are produced by:

1: Thyroid adenomas

2: Thyroid carcinomas

3: Parathyroid adenomas

4: Pituitary adenomas

1610-: Insulin stimulates all except -

1: Glycolysis

2: Lipolysis

3: Protein synthesis

4: Lipogenesis

1611-: Role of insulin in type 2 DM -

1: Acute illness

2: Polyurea

3: Secondary OHA failure

4: Obese patient

1612-: Most common cause of hypercalcemic crisis is -

1: Carcinoma breast

2: Parathyroid hyperplasia

3: Parathyroid adenoma

4: Paget's disease

1613-: All are required for formation of estradiol except

1: Lyase

2: 11b-hydrolase

3: Aromatase

4: Hydroxysteroid dehydrogenase

1614-: Which of the following is the most likely explanation for the dental abnormalities in bulimia nervosa (BN)?

1: self-induced physical trauma

2: self-induced vomiting

3: excess cortisol levels

4: osteoporotic changes

1615-: Insulin acts through which receptor? (REPEAT)

1: GPCR

2: Enzyme-linked

3: Intracellular

4: Ion channel

1616-: de Quervain's thyroiditis is characterized by-

1: Mononuclear cell infiltration

2: Histiocytic reaction

3: Giant cell infiltration

4: Eosinophilia

1617-: Which of the following is not a common clinical manifestation of thyrotoxicosis?

1: Gynaecomastia

2: Loss of libido

3: Goiter

4: Weight gain

1618-: Growth hormone increases all of the following except:

1: Blood glucose concentration

2: Blood free fatty acid concentration

3: Protein synthesis

4: Metabolism of carbohydrates

1619-: Goitrous hypothyrodism commonly occurs in all of the following except -

1: Hashimoto's thyroiditis

2: Dyshoromonognesis

3: Thyroprivic hypothyroidism

4: Iodine deficiency

1620-: A 57-year- old lady came with chief complaints of fatigue. On fuher questioning, she reveals that she has gained 5 kg weight in one month. She has been taking L-thyroxine for hypothyroidism since 10 years and fairly controlled. Recently she was staed on an anti-arrhythmic drug for treatment of his cardiac condition. The symptoms staed after sta of this drug. Most likely anti-arrhythmic drug she was prescribed is?

1: Lignocaine

2: Amiodarone

3: Procainamide

4: Verapamil

1621-: Most common tumor in lateral hemisphere of brain

1: Astrocytoma

2: Meningioma

3: Ependymoma

4: Medulloblastoma

1622-: Drug/s causing SIADH include -

1: Chlorpropamide

2: Oxytocin

3: Cyclophosphamide

4: All of the above

1623-: Most common symptoms of pheochromocytoma except -

1: Headache

2: Palpitation

3: Abdominal pain

4: Hypotension

1624-: Bromocriptine inhibits: (Repeat)

1: Prolactin

2: Vasopressin

3: Imipramine

4: Levodopa

1625-: Which of the following is the most common cause of insulin resistance?

1: Obesity

2: Post receptor defects

3: Liver dysfunction

4: Pancreatic dysfunction

 

1626-: Most common cause of Hyperparathyroidism is?

1: Parathyroid adenoma

2: Parathyroid hyperplasia

3: Thyroid carcinoma

4: Medullary carcinoma thyroid

1627-: Which of the following used to measurement in diabetes mellitus

1: HbA

2: HbS

3: HbA2

4: HbAlC

1628-: Multiple sclerosis affects

1: White matter

2: Gray matter

3: Both

4: None

1629-: Ductal development of breast is caused by

1: Estrogen

2: Progesterone

3: Prolactin

4: hCG

1630-: In addison's crisis the following is seen -

1: Hypernatremia

2: Hyperkalemia

3: Hyperglycemia

4: Hypeension

1631-: | HIAA urine levels are suggestive of

1: Carcinoid tumors

2: Colon cancer

3: Malignant melanoma

4: None of the above

1632-: Dilutional hyponatremia is seen in -

1: Addison's disease

2: DI

3: Diuretic therapy

4: None

1633-: Bisphosphonate-induced osteomalacia is common with

1: Alendronate

2: Pamidronate

3: Zolendronate

4: Etidronate

1634-: Parathormone has all of the following effects, except

1: Increased bone resorption

2: Increased Ca+2 reabsorption in kidney

3: Increased phosphate reabsorption in kidney J

4: Increased calcitriol synthesis

1635-: A 40-year-old woman develops light-headed episodes associated with sweating, palpitations, and hunger whenever she misses a meal. Her physical examination is normal, and she is not taking any medications. On one such episode, while in hospital, her blood glucose level was 30 mg/dL and the symptoms resolved with giving her juice. Which of the following is the most likely diagnosis?

1: excess growth hormone

2: Cushing's disease

3: thyrotoxicosis

4: tumor of the pancreatic beta-cells

1636-: Which of the following is not an indication for oxytocin:

1: Spontaneous premature labour

2: Post partum haemorrhage

3: Uterine inertia

4: Breast engorgement due to inefficient milk ejection reflex

1637-: Which of the following is an indication for the use of corticosteroids?

1: Psychosis

2: Herpes simplex

3: Loffler's syndrome

4: Subacute thyroiditis

1638-: A 22 year old female, Neeta presented to you with complaints of headache and vomiting since 2 months. She is having amenorrhea but urine pregnancy test is negative. She also complained of secretion of milk from the breasts. A provisional diagnosis of hyper prolactinemia was made and MRI was suggested. MRI confirmed the presence of a large pituitary adenoma. Neeta was advised surgery, however, she is not willing to undergo surgery. Which of the following medications is most likely to be prescribed?

1: Sumatriptan

2: Bromocriptine

3: Ergotamine

4: Allopurinol

1639-: Treatment of 42 year old obese man with blood glucose 450 mg, urine albumin 2+ Sugar 4+ Ketone 1+ is -

1: Insulin

2: Glibenclamide

3: Glipizide

4: Metformin

1640-: Endocrine causes for hypertension are all the following except:

1: Cushing's syndrome

2: Hypopituitarism

3: Hyperaldosteronism

4: Gigantism

1641-: Investigation of choice in pheochromocytomais-

1: CTscan

2: Urinary catecholamines

3: MlBGscan

4: Urinary calcium measurement

1642-: In relation to type 1A DM, honeymoon period is

1: Glycemic control achieved by OHA

2: Insulin requirement is nil or modest

3: Weight gain after insulin treatment

4: Weight loss after insulin treatment

1643-: True regarding acetazolamide is

1: Irreversible inhibitor of carbonic anhydrase

2: Structural resemblance to sulfonamides

3: It decrease so potassium excretion

4: It cause metabolic alkalosis

1644-: Indications of somatostatin include

1: Zollinger Ellison syndrome

2: Bleeding esophageal varices

3: Steatorrhoea

4: Macroprolactinoma

1645-: A thyroid nodule is found on a 40-year-old woman on routine evaluation. She has no prior history of thyroid disease and clinically feels well. There is a 15-mm nontender nodule on the right lobe of the thyroid with no associated lymphadenopathy. Thyroid function tests are normal. Which of the following is the most appropriate next step in management?

1: thyroid scan

2: fine needle aspiration (FNA) biopsy

3: repeat assessment in 6 months

4: partial thyroidectomy

1646-: Which of these organs are not affected in autoimmune polyglandular syndrome type 2?

1: Parathyroid

2: Thyroid

3: Adrenal

4: Pancreas

1647-: Normal FSh levels in adult male is

1: 10-20 IU/L

2: 20-40 IU/L

3: 40-60 IU/L

4: 60-80 IU/L

1648-: Orphan annie eye nuclei appearance is characteristic of-

1: Papillary carcinoma thyroid

2: Carcinoma pituitary

3: Paraganglioma

4: Meningioma

1649-: A 65-year-old woman with a history of multinodular goiter complains of increasing nervousness, insomnia, and heart palpitations. She has lost 9 kg (20 lb) over the past 6 months. Physical examination reveals a diffusely enlarged thyroid. There is no evidence of exophthalmos. Laboratory studies show elevated serum levels of T3 and T4. Serologic tests for antithyroid antibodies are negative. Which of the following is an important complication of this patient's endocrinopathy?

1: Autoimmune hepatitis

2: Cardiac arrhythmia

3: Follicular carcinoma of the thyroid

4: Medullary carcinoma of the thyroid

1650-: The most common cause of severe hypercalcemia is-

1: Vitamin D toxicity

2: Sarcoidosis

3: Chronic renal failure

4: Malignancy

1651-: Which set of hormones have nuclear receptor?

1: Estrogen, thyroxine & glucagon

2: Estrogen, thyroxine & TSH

3: Estrogen, TSH & Gonadotropin releasing hormone (GnRH)

4: None

1652-: In Pheochromocytoma, which of the following is increased in urine?

1: VMA

2: Aldosterone

3: Cortisol

4: 17 hydroxyprogesterone

1653-: A 24-year-old woman presents 6 months after the delivery of her first child, a healthy girl, for evaluation of fatigue. She suspects that the fatigue is related to getting up at night to breastfeed her baby, but she has also noticed cold intolerance and mild constipation. She recalls having a tremor and mild palpitations for a few weeks, beginning 3 months after delivery. On examination, her BP is 126/84 and her pulse rate is 56. The thyroid gland is two times normal in size and nontender. The rest of the physical examination is normal. Laboratory studies reveal a free T4 level of 0.7 ng/mL (normal 0.9-2.4) and an elevated thyroid-stimulating hormone (TSH) at 22 microU/mL (normal 0.4-4). What is the likely course of her illness?

1: Permanent hypothyroidism requiring lifelong replacement therapy

2: Eventual hyperthyroidism requiring methimazole therapy

3: Recovery with euthyroidism

4: Infertility

1654-: A 24-year-old woman is noted to have atypical cells on a Pap smear that are consistent with infection by human papillomavirus (HPV). Which of the following describes the characteristic cytopathic effect caused by infection with HPV

1: Hyperkeratosis

2: Koilocytosis

3: Parakeratosis

4: Apoptosis

1655-: A 38-year-old woman develops palpitations, weight loss, and heat intolerance. On examination, she has a mild tremor, an enlarged thyroid, and resting tachycardia. Biochemical tests confirm the diagnosis and she is started on methimazole. Which of the following is the most likely mechanism of this drug?

1: inhibition of iodine uptake

2: inhibition of thyroidal organic binding and coupling reactions

3: lowering serum calcium

4: adrenal suppression

1656-: Tolvaptan is used for

1: Von Willebrand Disease

2: Catecholamine resistant Shock

3: Central DI

4: SIADH

1657-: Thyroglossal cyst is associated with which type of thyroid carcinoma?

1: Follicular

2: Papillary

3: Medullary

4: Anaplastic

1658-: A 40-year-old woman with a history of hyperparathyroidism presents with a 2-month history of burning epigastric pain. The pain can be relieved with antacids or food. The patient also repos a recent history of tarry stools. She denies taking aspirin or NSAIDs. Laboratory studies show a microcytic, hypochromic anemia . Gastroscopy reveals a bleeding mucosal defect in the antrum. Which of the following best characterizes the pathogenesis of epigastric pain in this patient?

1: Decreased Calcium resorption by renal tubules

2: Decreased serum levels of PTH

3: Gastric nonresponsiveness to PTH

4: Increased secretion of Gastrin

1659-: Hormone which initiates milk ejection

1: Lactogen

2: Prolactin

3: LH

4: Oxytocin

1660-: Critical illness related coicosteroid insufficiency is seen in ?

1: Addison's disease

2: Septic shock

3: Acute MI

4: CVA

1661-: Ketone body formation without glycosuria is seen in

1: Diabetes mellitus

2: Diabetes insipidus

3: Starvation

4: Obesity

1662-: Which of the following does not cause hypoglycemia?

1: Insulin

2: Glitmepiride

3: Nateglinide

4: Acarbose

1663-: A 25-year-old male patient having seminiferous tubule dysgenesis was diagnosed as a case of Klinefelter&;s syndrome. All of the following are true about Seoli cells except

1: Seoli cells are large, complex glycogen-containing cells stretching from the basal lamina of the tubule to the lumen

2: Tight junctions between adjacent Seoli cells near the basal lamina form a blood-testis barrier

3: The Seoli cells secrete androgen-binding protein (ABP), relaxin, and MIS

4: They can produce estrogens

1664-: Which type thyroid carcinoma is classically associated with calcitonin induced amyloid deposition?

1: Papillary

2: Follicular

3: Anaplastic

4: Medullary

1665-: Sulfation factor is

1: Somatostatin

2: Somatomedian

3: GIP

4: VIP

1666-: Surgical causes of hyper Cai+ -

1: Hyperparathyroidism

2: MEN

3: Hypehyroidism

4: Pheochromocytoma

1667-: Hypercalcemia in sarcoidosis all are true except?

1: Parathormone level is increased

2: PTHrP level is increased

3: Calcitriol level is increased

4: Oral steroids are useful

1668-: True about rickets -

1: Decreased alkaline phosphatase

2: Hyperphosphatemia

3: Hypophosphatemia

4: Hypophosphaturia

1669-: Yellowing of the skin occurs in hypothyrodlsm bcausc of -

1: Increased bilirubin

2: Increased cholesterol

3: Increased carotene

4: Increased

1670-: Best for diagnosing carcinoid tumour is

1: 24 hour urinary HIAA

2: 24 hour catecholamine

3: 24 hour vaniylmandelic acid

4: 24 hour metanephrine levels

1671-: True aboutHypercalcemia-

1: Rx of the primary cause

2: Malignancy dose not produce hypercalcemia

3: L.V. fluid with Frusemide is given

4: amidronate is not effective

1672-: Which of the following is NOT a feature of Grave's disease:

1: Increased plasma levels of thyroid hormones

2: Increased plasma levels of TSH

3: Exophthalmos

4: Increased hea rate

1673-: Which of the following is Not associated with congenital hypothyroidism?

1: Thyroid agenesis

2: Wide open anterior fontanelle

3: Microcephaly

4: Drooling

1674-: False about type I diabetes

1: Prone to DKA

2: Obesity is a feature

3: Reduced serum insulin

4: Susceptibility gene is located on Chromosome 6

1675-: Leydig cells secrete

1: Inhibin

2: MIS

3: Testosterone

4: Androgen binding protein

1676-: A patient with severe shoulder pain resulting from inflammation is not responding to treatment with naproxen. You staed a course of treatment with oral dexamethasone. What is the basis that the glucocoicoid will be more effective as an anti-inflammatory agent

1: Glucocoicoids inhibit both prostaglandin production and inflammatory cells.

2: Glucocoicoids inhibit biosynthesis of both COX-1 and COX-2.

3: Glucocoicoids will reduce the edema in the inflamed area

4: Glucocoicoids are more potent inhibitors of cyclooxygenase than naproxen.

1677-: Most common site of pheochromocytoma after adrenal gland is

1: Hilum of kidney

2: Organs of Zuckerkandl

3: Neck

4: Urinary bladder

1678-: In which of the following disease is coicosteroids indicated ?

1: Osteoporosis

2: Peptic ulcer

3: Collagen vascular disease

4: Tuberculosis

1679-: Feilization takes place in which pa of fallopian tube

1: Interstitial pa

2: Ampulla

3: Isthmus

4: Fimbria

1680-: Which of the following anti-thyroid drugs are safe in pregnancy

1: Carbimazole

2: Iodine

3: Propylthiouracil

4: Methimazole

1681-: Insulin synthesis is stimulated by glucose levels above

1: 30 mg%

2: 40 mg%

3: 50 mg%

4: 70 mg%

1682-: All of the following statements about octreotide are true except:

1: It is effective orally

2: It is used for the treatment of acromegaly

3: It can be used for the management of secretory diarrhoea

4: It can be used in portal hypertension

1683-: Asymptomatic hyper - calcemia in a 30 year old young male is due to-

1: Occult primary malignancy

2: Primary Hyperparathyroidism

3: Familial hypocalciuria

4: Hyper-nephroma

1684-: The catabolite repression is mediated by a catabolite gene activator protein (CAP) in conjunction with:

1: AMP

2: GMP

3: c-AMP

4: C-GMP

1685-: Cushing's syndrome is not a feature of -

1: Adrenal carcinoma

2: Oat cell carcinoma of lung

3: Medulloblastoma

4: Pituitary adenoma

1686-: Which of the following is the most likely metabolic effect of insulin on adipose tissue?

1: decrease of glucose transport

2: decrease in glucose phosphorylation

3: decrease in lipolysis

4: decrease in lipoprotein lipase

1687-: A 45 year man is diagnosed with diabetes at his present visit for the first time. When should he visit an ophthalmologist-

1: On his 50th bihday

2: When dimness of vision stas

3: Before his 50th bihday

4: Immediately at time of diagnosis

1688-: True regarding use of bromocriptine for suppression of lactation includes:

1: It can cause deep vein thrombosis

2: It can cause hypotension

3: Metoclopramide potentiates the action of bromocriptine

4: It is given for 1 week only

1689-: The characteristic and common presentation of diabetic neuropathy is-

1: Amyotrophy

2: Mononeuropathy

3: Symmetrical sensory neuropathy

4: Autonomic neuropathy

1690-: Wolf Chaikoff effect-

1: Excess iodine intake causes hypothyroidism

2: Iodine induced hypehyroidism

3: Thyrotoxicosis due to excessive amount of iodine ingestion

4: Drug induced hypehyroidism

1691-: Main mechanism in thermoregulation-heat loss during intense physical activity is

1: Radiation

2: Evaporation

3: Conduction

4: Convection

1692-: Which hormone increases with age?

1: GH

2: Prolactin

3: Parathormone

4: Insiilfn

1693-: Indicators of osteoblastic activity -

1: Alkaline phosphatase

2: Osteocalcin

3: Hydroxyproline

4: Acid phosphatase

1694-: A 64-year woman with Type II diabetes for 10 years now develops increasing fatigue, dyspnea, and pedal edema. On examination, her blood pressure is 165/90 mm Hg, pulse 90/min, JVP is 4 cm, heart sounds are normal, lungs are clear, and there is 3+ pedal edema. Her urinalysis is positive for 3 gm/L of protein and no casts. Which of the following renal diseases is the most likely diagnosis in this patient?

1: acute glomerulonephritis

2: obstructive uropathy

3: glomerulosclerosis with mesangial thickening

4: renal infarction

1695-: All are recommended as pa of comprehensive medical care for patients with diabetes, except

1: HbA1c testing, 2-4 times per year

2: Annual nutrition education

3: Blood insulin levels annually

4: Annual lipid profile

1696-: Which of the following compound antagonizes the actions of insulin?

1: Neuropeptide Y

2: Growth hormone

3: Substance P

4: Vasoactive intestinal peptide

1697-: FNAC is least diagnostic in which thyroid carcinoma:

1: Anaplastic

2: Papillary

3: Follicular

4: Thyroiditis

1698-: a 45 year old man, known case of chronic renal failure develops rugger jersy spine. The probable Cause it-

1: aluminium intoxication

2: Secondary hyperparathyroidism

3: Osteoporosis

4: osteomalacia

1699-: Hormone replacement therapy is benefial for all the following conditions except?

1: Vaginal atrophy

2: Flushing

3: Osteoporosis

4: Coronary hea disease

1700-: Among the following conditions of hypercalcemia, PTH is not elevated in

1: Parathyroid adenoma

2: Familial hypocalciuric hypercalcemia

3: Parathyroid hyperplasia

4: Sarcoidosis

1701-: Commonest presentation of MEN I

1: Primary hyperparathyroidism

2: Hyperprolactinemia

3: Hypergastrenemia

4: Acromegaly

1702-: Abnormalities of bone metabolism is associated with excess of which vitamins -

1: Vitamin A

2: Thiamine

3: Vitamin B12

4: Vitamin D

1703-: In extreme cold, which is not a mechanism of thermogenesis

1: Shivering

2: Increased secretion of epinephrine

3: Increased thyroxine

4: Piloerection

1704-: All are true about pheochromocy except-

1: 90% are malignant

2: 95% occur in the abdomen

3: They secrete catecholamines

4: They arise from symathetic ganlions

1705-: Parenteral agent used in diabetes

1: Rosiglitazone

2: Exenatide

3: Repaglinide

4: Canagliflozin

1706-: Febuxostat:

1: Anti-gout and Xanthine Oxidase inhibitor

2: Purine inhibitor

3: Dose adjustment required in renal impairment

4: Has uricosuric action

1707-: Amyloidosis is most commonly seen in DM -

1: Maturity onset DM

2: Type I DM

3: Type II DM

4: Hypertension

1708-: The syndrome of growth failure, rash, and hypogonadism is due to deficiency of

1: Calcium

2: Copper

3: Zinc

4: Magnesium

1709-: Long acting dopamine agonist is

1: Bromocriptine

2: Lisuride

3: Cabergoline

4: Apomorphine

1710-: Pseudohermaphroditism in a female child is most commonly due to

1: 21- hydroxylase deficiency

2: 17-hydroxylase deficiency

3: 11-hydroxylase deficiency

4: 3-hydroxylase deficiency

1711-: Antithyroid drug of choice in pregnancy -

1: Carbimazole

2: Iodine therapy

3: Propylthiouracil

4: Metimazole

 

1712-: Advanced bone age is seen in all except-

1: Marfan's syndrome

2: Congenital adrenal hyperplasia

3: Precocious pubey

4: Obesity

1713-: A 7-year-old boy underwent neurosurgery for craniopharyngioma following which pituitary functions were lost. Which of the following hormone should be replaced first?

1: Hydrocortisone

2: Thyroxine

3: Growth hormone

4: Prolactin

1714-: A 20-year-old woman and her twin sister both experience increasing diplopia. Their conditions develop within 3 years of each other. On physical examination, they have exophthalmos and weak extraocular muscle movement. The thyroid gland is diffusely enlarged but painless in each sister, and there is no lymphadenopathy in either woman. Which of the following serum laboratory findings is most likely to be reported in these sisters?

1: Decreased free thyroxine level

2: Decreased thyroid-stimulating hormone level

3: High titer thyroid peroxidase autoantibodies

4: Increased thyrotropin-releasing hormone level

1715-: Conversion of T4 to T3 is inhibited by all except.

1: Propanolol

2: Propylthiouracil

3: Amiodarone

4: Methimazole

1716-: Insulin secretion is/are increased by all except

1: Glucose

2: Secretin

3: VIP

4: Glucagon

1717-: Which of the following drug is given subcutaneously for diabetes

1: Glipezide

2: Rapaglenide

3: Exenatide

4: Vildagliptin

1718-: Raised calcium and phosphorus are seen in -

1: CRF

2: Vitamin D intoxication

3: Hyperparathyroidism

4: pseudohypoparathyroidism

1719-: Paradoxical response of GH release to TRH is seen in-

1: Prolactinoma

2: Acromegaly

3: Malnutrition

4: Pitutary adenoma

1720-: Chemical process involved in conversion of progesterone to glucocoicoids is

1: Methylation

2: Hydroxylation

3: Carboxylation

4: None

1721-: 70 M presented to AIIMS OPD with fatigue. Fasting sugar was 110 mg%, PP was 180 mg%, Hbalc was 6.1 %. What is your diagnosis?

1: Prediabetes

2: Stress induced

3: Normal

4: Diabetes

1722-: Blood specimen for Neonatal thyroid screening is obtained on

1: Cord blood

2: 24 hours after bih

3: 48 hours after bih

4: 72 hours after bih

1723-: Aromatase produces estrogen from

1: Progesterone

2: Coisol

3: Aldosterone

4: Androgen

1724-: All of the following conditions are associated with Hypehyroidism, except -

1: Hashimoto's Thyroiditis

2: Grave's Disease

3: Toxic Multinodular Goiter

4: Struma ovary

1725-: Single best test for diagnosis of hypothyroidism is estimation of

1: T3

2: T4

3: TSH

4: RAIU

1726-: A 7-year-old boy has demineralized bones with pseudofractures. Physiologic doses of vitamin D do not result in improvement. Which of the following is most likely to be associated with this syndrome?

1: hyperphosphatemia

2: low 1,25(OH)2 vitamin D levels

3: alopecia

4: osteoporosis

1727-: The major adverse effect of glucocorticoids especially in children is -

1: Hyperkalemia

2: Hypoglycemia

3: Muscular weakness

4: Posterior subcapsular cataract

1728-: During a year-long training program, a 23-year-old female air force officer falls in class rank from first place to last place. She has also noted a lower pitch to her voice and coarsening of her hair, along with an increased tendency toward weight gain, menorrhagia,

and increasing intolerance to cold. Which of the following laboratory abnormalities is expected?

1: Increased serum free T4

2: Increased serum T3 resin uptake

3: Increased saturation of thyroid hormone-binding sites on TBG

4: Increased serum TSH

1729-: A 50-year-old woman presents with acute right flank pain of 72 hours in duration. Her temperature is 37degC, BP-140/85 mm Hg, and pulse 85/minute. A CBC is normal. Urinalysis reveals hematuria and urine cultures are negative. Imaging studies show stones in the right renal pelvis and ureter. This patient's condition may be associated with which of the following endocrine disorders?

1: Conn syndrome

2: Cushing syndrome

3: Hyperparathyroidism

4: Hypehyroidism

1730-: Not a Features of tumour lysis syndrome-

1: Hyperuricemia

2: Hypocalcemia

3: Hyperphosphatemia

4: Hypernatremia

1731-: Both decreased bone resorption and increased bone formation is caused by

1: Strontium ranelate

2: Ibadronate

3: Teriparatide

4: calcitonin

1732-: Ovarian follicles at bih in ovary are

1: 2 million

2: 7 million

3: 10 million

4: 20 million

1733-: Which of the following is not seen during capacitation?

1: Increased permeability to calcium

2: Decreased permeability to calcium

3: Removal of cholesterol from acrosome

4: Increased motility

1734-: Mechanism of action of propylthiouracil:

1: inhibition of organification of iodine

2: inhibition of oxidation

3: inhibition of coupling

4: all of the above

1735-: In diabetes mellitus which is/are found-

1: Encephalopathy

2: Myelopathy

3: Neuropathy

4: Myopathy

1736-: Obesity is seen in all Except

1: Pick wickian syndrome

2: Prader willi syndrome

3: Cushing syndrome

4: Sipple syndrome

1737-: The most common cause of Addison's disease is:--

1: Autoimmune adrenalitis

2: Meningococcal septicemia

3: Malignancy

4: Tuberculosis

1738-: At what value of one hour glucose challenge test will you recommend a standard glucose tolerance test-

1: 120 mg\/dl

2: 140 mg\/dl

3: 150 mg\/dl

4: 160 mg\/dl

1739-: Treatment for male pattern alopecia includes

1: Finasteride

2: Potassium channel blocker

3: Fulvestrant

4: Dexamethasone

1740-: Finasteride, all are false except:

1: Used in androgenic alopecia

2: Stimulates 5-alpha reductase

3: Loss of libido

4: Used in undescended testes

1741-: What is deposited in Bronze diabetes

1: Bronze

2: Copper

3: Iron

4: Carbon

1742-: Diabetes mellitus associated with -

1: |HDL

2: |Triglycerides

3: |Triglycerides

4: |Cholesterol

1743-: Tufting of the terminal phalanges is seen in -

1: Hypoparathyroidism

2: Hyperparathyroidism

3: Hypehyroidism

4: Hypothyroidism

1744-: Which of the following is a membrane-bound enzyme that catalyzes the formation of cyclic AMP from ATP?

1: Tyrosine kinase

2: Polymerase

3: ATP synthase

4: Adenylate cyclase

1745-: A 50-year-old man presents with feeling tired and unsteady on his feet. He has a poor appetite and has lost 10 lb. On examination, he appears cachectic, his heart and lungs are normal, but his liver span is 18 cm. His lab tests show a very low magnesium level (0.7 mEq/L). On further questioning, he reports drinking heavily since losing his job. Which of the following is the most likely explanation for his low magnesium level?

1: alcoholism

2: chronic malabsorption

3: diabetes mellitus (DM)

4: kwashiorkor

1746-: Which drug is not used for erectile dysfunction?

1: Phenylephrine

2: Apomorphine

3: Yohimbine

4: Vardenafil

1747-: Peripheral conversion of T4 to T3 is inhibited by-

1: Propranolol

2: Diltiazem

3: Sotalol

4: Sodium iodide

1748-: A 10-day-old male pseudohermaphrodite child with 46 XY karyotype presents with BP of 110/80 mm Hg. Most likely enzyme deficiency is:

1: 21 hydroxylase

2: 17 hydroxylase

3: 11 hydroxylase

4: 3-beta hydroxylase

1749-: In conn&;s syndrome the fallowing is/are true -

1: Diastolic HTN without oedema

2: Systolic HTN without oedema

3: Pseudotetany

4: Hyper Na+

1750-: All of the following statements about Exenatide are true except

1: It is a GLP-1 analogue

2: It can be used for treatment of type 1 diabetes mellitus

3: It is given subcutaneously

4: It decreases glucagon

1751-: Impoant difference between leuprolide and ganirelix is that ganirelix

1: Can be given orally

2: Immediately reduces gonadotropin secretion

3: Must be given in a pulsatile fashion

4: Initially stimulates release of LH and FSH

1752-: Octerotide is used in all except:

1: Glucogonoma

2: Insulinoma

3: Carcinoid syndrome

4: Glioma

1753-: Which of the following drugs is contraindicated in diabetic patients

1: Mannitol

2: Steroids

3: Enalapril

4: Glycerol

1754-: Acromegaly results due to excessive release of:

1: Thyroxine

2: Growth hormone

3: Insulin

4: Glucagon

1755-: Precursor of all steroid hormones -

1: Pregnenolone

2: Deoxycortisol

3: Androstenedione

4: Dehydroepiandrosterone

1756-: Gonads to testes differentiation

1: SRY gene

2: WNT-4 gene

3: DAXI gene

4: None

1757-: GLUT-5 is transpoer for

1: Glucose

2: Fructose

3: Mannose

4: Galactose

1758-: Spider naevi are due to action of -

1: Estrogen

2: Androgen

3: Steroids

4: Progesterone

1759-: A 53-year-old woman who is being treated for metastatic breast cancer is noted to have some lethargy, fatigue, and an elevated serum calcium level. She is brought into the ER for near comatose state, thought to be caused by the hypercalcemia. After addressing the ABCs (airway, breathing, circulation), wof is the best therapy for this patient

1: Bisphosphonates

2: IV estrogen therapy

3: Saline infusion and furosemide

4: Vitamin D

1760-: Energy expenditure in resting state depends on

1: Lean body mass

2: Adipose tissue

3: Resting hea rate

4: Exercise

 

1761-: Dawn phenomenon refers to -

1: Early morning hyperglycemia

2: Early morning hypoglycemia

3: Hypoglycemia followed by hyperglycemia

4: High insulin levels

1762-: Bisphosphonates are useful in all EXCEPT:

1: Hypercalcemia of malignancy

2: Vitamin D excess

3: Postmenopausal osteoporosis

4: Paget disease

1763-: At the same concentration of steroid which of the following is most potent?

1: Ointment

2: Lotion

3: cream

4: Gel

1764-: All of the following statements about pseudohypoparathyroidtom are true, except -

1: Decrease Serum PTH

2: Decrease Serum calcium

3: Increase Serum phosphate

4: Albright's hereditary osteodystrophy

1765-: A 35-year-old woman presents with amenorrhea and weight loss despite increased appetite. The history and physical examination reveal exophthalmos, fine resting tremor,

 

tachycardia, and warm, moist skin. Laboratory tests for thyroid function would be expected to yield a decreased value for which of the following?

1: Free T4

2: Radioactive iodine uptake

3: T3 resin uptake

4: Thyroid stimulating hormone

1766-: Which of the following is given at intervals as a pulsatile therapy?

1: GnRH agonist

2: Insulin

3: FSH

4: Estrogen

1767-: Which of the following anti diabetic drugs can cause vitamin B12 deficiency

1: Glipizide

2: Acarbose

3: Metformin

4: Pioglitazone

1768-: Patient presents with fasting sugar as 167mg/dl, skin pigmentation and hypogonadism. His liver enzymes showed SGOT as 678 and SGPT as 692. Most probable diagnosis is?

1: Alpha 1 antitrypsin deficiency

2: Wilson's disease

3: Hemochromatosis

4: Glycogen storage disease

 

1769-: In malignant hyperthermia the increased heat production is due to :

1: Increased muscle metabolism by excess of calcium ions

2: Thermic effect of food

3: Increased sympathetic discharge

4: Mitochondrial thermogenesis

1770-: Which of the following is not found commonly in Graves disease?

1: Thyroid-stimulating immunoglobulin (TSI)

2: Antibody against thyroglobulin

3: Antibody against thyroid peroxidase (TPO)

4: Antibody against thyroid stimulating hormone (TSH)

1771-: Bone resorption is enhanced by

1: PGD2

2: PDF2

3: PGE2

4: PGI2

1772-: A patient meets with an accident with resultant transection of the pituitary stalk; what will NOT occur-

1: Diabetes mellitus

2: Diabetes insipidus

3: Hyperprolactinemia

4: Hypothyroidism

1773-: Earliest finding in diabetic nephropathy

1: Shrunken kidney is hallmark

2: Fibrin caps

3: Elevated serum Creatinine

4: Urine albumin > 300mg/ 24 hrs

1774-: The following are characteristic of tumour lysis syndrome except -

1: Hyperkalemia

2: Hypercalcemia

3: Hyperuricemia

4: Hyperphosphatemia

1775-: Features of diabetic nonproliferative retinopathy are all except-

1: Neovascularisation

2: Soft exudates

3: Microaneurysms

4: IRMA

1776-: Which of the following is a long acting insulin preparation?

1: Insulin lente

2: Isophane insulin

3: Insulin lispro

4: Insulin detemir

1777-: All of the following are peptide-based except

1: ACTH

2: GnRH

3: Thyroxin

4: TRH

1778-: Which does not cause hypoglycemia -

1: Insulin

2: Glimipiride

3: Nateglinide

4: Acarbose

1779-: A thyroid biopsy obtained from a 29-year-old woman complains of nervousness and muscle weakness of 6 months in duration. She is intolerant of heat and sweats excessively. She has lost 9 kg (20 lb) pounds over past 6 months, despite increased caloric intake. She frequently finds her hea racing and can feel it pounding in her chest. She also states that she has missed several menstrual periods over the past few months. Physical examination reveals warm and moist skin and bulging eyes (exophthalmos). Which of the following best describes the pathologic findings?

1: Atrophy and fibrosis

2: Dense lymphoid infiltrate with germinal centers

3: Follicular hyperplasia with scalloping of colloid

4: Necrotizing parenchymal granulomas

1780-: All of the following are seen in MEN 2b except ?

1: Hyperparathyroidism

2: Neuromas

3: Medullary carcinoma thyroid

4: Pheochromocytoma

1781-: Rate limiting enzyme in testosterone synthesis

1: 17,20 lyase

2: 20,22-desmolase

3: 3-bHSD

4: 17-hydroxylase

1782-: Which of the following is an SGLT 2 inhibitor approved for treatment of type 2 diabetes Mellitus

1: Dulaglutide

2: Pramilintide

3: Canagliflozin

4: Nateglinide

1783-: Hypehyroid state is characterized by

1: Increased protein synthesis

2: Decreased glycolysis

3: Lipolysis

4: Increased cholestrol

1784-: Which of the following anti-diabetic drugs can cause vitamin B12 deficiency?

1: Glipizide

2: Acarbose

3: Metformin

4: Pioglitazone

1785-: Diabetes mellitus can lead to -

1: Cataract

2: Rubeosis iridis

3: Retinal detachement

4: IH,IV,andVInervespalsy

1786-: In which of the following intensive management of diabetes needed except-

1: Autonomicneuropathycausing postural hypotension

2: Pregnancy

3: Post kidney transplant in diabetic nephropathy

4: DM with acute MI

1787-: All of the following are the known causes of osteoporosis except -

1: Fluorosis

2: Hypogonadism

3: Hypehyroidism

4: Hyperparathyroidism

1788-: Natural light causes all except

1: Vitamin D synthesis

2: Destroys organ of coi

3: | Bilirubin level

4: Melanin synthesis

1789-: Treatment of osteoporosis includes -

1: Conjugated equines estrogen

2: Estradiol valerate

3: Raloxifene

4: Biphosphonate

1790-: All of the following preparations of insulin are rapid and sho-acting EXCEPT:

1: Lispro

2: Aspa

3: Glargine

4: NPH

1791-: The mechanism by which ergometrine stops postpaum hemorrhage is that it:

1: Causes vasoconstriction of uterine aeries

2: Increases tone of uterine muscle

3: Promotes coagulation

4: Induces platelet aggregation

1792-: Lactic acidosis is common in

1: Metformin

2: Phenformin

3: Repaglinide

4: Rosiglitazone

1793-: Most common glial tumor

1: Ependymomas

2: Astrocytoma

3: Meningioma

4: Neurofibroma

1794-: Long acting glucocorticoid is -

1: Dexamethasone

2: Triamcenolone

3: Prednisolone

4: Hydrocortisone

1795-: All of the following steps in synthesis of thyroid hormones is catalysed by thyroid peroxidase enzyme except

1: Coupling

2: Oxidation

3: Organification

4: Iodide trapping

1796-: The drug of choice for treatment of thyrotoxicosis during pregnancy is

1: Iodine therapy

2: Carbimazole

3: Propylthiouracil

4: Methimazole

1797-: Which is NOT a clinical feature of Addison's disease -

1: Hypoglycemia

2: Hyponatremia

3: Hypocalcemia

4: Hyperkalemia

1798-: A 25-year-old female presented with features of weight gain and loss of appetite and easy fatigue. On examination a swelling was noticed in anterior aspect of neck which moved

with deglutination. Biopsy performed from neck revealed the following. What is your diagnosis?

1: Reidel's thyroiditis

2: Hashimoto thyroiditis

3: Follicular carcinoma thyroid

4: Graves disease

1799-: Primary' hyperaldosteronism doesn't lead to -

1: Hyperkalemia

2: Hypernatremia

3: Hydrogen depletion and metablic alkalosis

4: Hypertension

1800-: A 19-year-old man has early fatigue and muscle cramps while playing sports. He is fine when walking or doing light levels of work. On examination, he appears well and the muscle strength in the proximal muscles is normal. There is no muscle fatigue with repetitive arm grip exercises. After an exercise stress test, his serum creatine kinase (CK) is elevated and lactate level is normal. Which of the following is the most likely diagnosis?

1: Gaucher's disease

2: Tay-Sachs disease

3: McArdle's disease (glycogen storage disease)

4: hemochromatosis

1801-: Wermer syndrome is

1: MEN1

2: MEN IIA

3: MEN IIB

4: AIP

1802-: Koenon tumor is seen in -

1: NF

2: Tuberous sclerosis

3: Turners syndrome

4: Sturg weber syndrome

1803-: Cyclic AMP acts as the second messenger for:

1: ADH

2: Glucagon

3: Calcitonin

4: All of these

1804-: Glucagon is secreted by

1: a cell

2: ss cell

3: d cell

4: G cell

1805-: Which of the following gene defect is associated with development of medullary carcinoma of thy roid-

1: RET Proto Oncogene

2: Fap gene

3: Rb gene

4: BRCA 1 gene

1806-: A 52-year-old woman is started on a low sodium diet. She feels well and is experiencing no symptoms. Her physical examination is normal except for a sustained cardiac apical impulse.For the patient placed on a dietary restriction, select the most likely diagnosis.

1: diabetes

2: obesity

3: hypertension

4: irritable bowel syndrome

1807-: Most reliable marker for hypothyroidism:

1: T3

2: T4

3: TSH

4: Thyroxine binding globulin

1808-: Type I MEN involves all except-

1: Pancreas

2: Adrenal

3: Pituitary

4: Parathyroid

1809-: All are functions of oxytocin except

1: Galactokinesis

2: Uterine contraction in non pregnant female

3: Contraction of smooth muscle of vas deferens GalactopoiesisContraction of smooth muscle of vas deferens Galactopoiesis

4: Galactopoiesis

 

1810-: Sulfonylureas act by:

1: Decreasing glucagon secretion from pancreas

2: Decreasing insulin secretion from pancreas

3: Increasing gluconeogenesis

4: Increasing insulin secretion from pancreas

1811-: A 50-year-old obese woman has long-standing type 2 diabetes mellitus inadequately controlled on metformin and pioglitazone. Insulin glargine (15 units subcutaneously at bedtime) has recently been started because of a hemoglobin A1C level of 8.4. Over the weekend, she develops nausea, vomiting, and diarrhea after exposure to family members with a similar illness. Afraid of hypoglycemia, the patient omits the insulin for 3 nights. Over the next 24 hours, she develops lethargy and is brought to the emergency room. On examination, she is afebrile and unresponsive to verbal command. Blood pressure is 84/52. Skin turgor is poor and mucous membranes dry. Neurological examination is nonfocal; she does not have neck rigidity.Laboratory results are as follows:Na: 126 mEq/LK: 4.0 mEq/LCl: 95 mEq/LHCO3: 22 mEq/LGlucose: 1100 mg/dLBUN: 84 mg/dLCreatinine: 3.0 mg/dLWhich of the following is the most likely cause of this patient's coma?

1: Diabetic ketoacidosis

2: Hyperosmolar nonketotic state

3: Syndrome of inappropriate antidiuretic hormone (ADH) secretion

4: Drug-induced hyponatremia

1812-: Thyroid hormone acts through receptors present on

1: Cell membrane

2: Cytoplasmic membrane

3: Nuclear membrane

4: DNA

1813-: Hypercalcemia caused by -

1: Thyrotoxicosis

2: VnDiotoneation

3: Saroidosis

4: Furosemide

1814-: Which condition is associated with Congenital Adrenal Hyperplasia?

1: Male pseudohermaphroditism

2: Female pseudohermaphroditism

3: Female true hermaphroditism

4: Sequential pseudohermaphroditism

1815-: Ovulation is associated with sudden rise in

1: Testosterone

2: Prolactin

3: LH

4: FSH

1816-: The drug of choice for the treatment of Thyrotoxicosis during pregnancy is:

1: Carbimazole

2: Iodine therapy

3: Propyl thiouracil

4: Metimazole

1817-: The drugs not used for treatment of osteoporosis are -

1: Biphosphonates

2: Steroids

3: Denosumab

4: Calciam

1818-: Which of the following drugs is not used for the therapy of congenital adrenal hyperplasia?

1: Hydrocortisone

2: Prednisolone

3: Antibiotics

4: Dexamethasone

1819-: The basal body temperature shift after ovulation is due to

1: FSH peak

2: LH peak

3: Estrodiol

4: Progesterone

1820-: A pragnant woman is diagnosed to suffering form Grave's disease. The most appropriate therapy for her would be-

1: Radio lodine therapy

2: Total thyroidectomy

3: Carbimazole parenteral

4: Propylthiouracil oral

1821-: Postmenopausal hormone that shows an increase is

1: Progesterone

2: Estrogen

3: FSH

4: Androgen

1822-: A 68-year-old patient developed atrophic gastritis and, 2 years later, developed a macrocytic, hyperchromic anemia. His anemia has most likely occurred due to which one of the following reasons?

1: The atrophic gastritis leads to vitamin B12 malabsorption.

2: The atrophic gastritis raises the pH in the duodenum, leading to folate malabsorption.

3: The terminal ileum is also involved, so iron is malabsorbed.

4: The atrophic gastritis leads to increased red blood cell absorption by the spleen.

1823-: Which one of the following drug is a Corticosteroid Synthesis Inhibitor?

1: Metyrapone

2: Finasteride

3: Flutamide

4: Mifepristone

1824-: Which of the following vessels have the function of capacitation?

1: Aeriole

2: Capillary

3: Male reproductive tract

4: Aery

1825-: A 50-year-old man with fasting blood glucose >140 mg/ dL on two occasions is put on a restricted caloric diet and started on a glucagon-like peptide-1 (GLP-1) receptor agonist. Which of the following laboratory studies is most likely to afford the best method of monitoring disease control in this man?

1: Cholesterol, total

2: Fasting plasma glucose

3: Glycosylated hemoglobin

4: Microalbuminuria E Random plasma glucose

1826-: Adverse effects of insulin include all of the following except:

1: Edema

2: weight loss

3: Lipodystrophy

4: hypoglycemia

1827-: Pituitary tumor most responsive to medical therapy is-

1: Growth hormone secreting tumor

2: ACTH secreting tumor

3: Prolactinoma

4: Thyrotropin secreting tumors

1828-: A 17-year-old girl was evaluated for complaints of weight gain, hair loss, constipation and weakness. Her free T4 level was low and TSH was increased. Which of the following is the most likely diagnosis?

1: Graves' disease

2: McCune-Albright syndrome

3: TSH-secreting pituitary adenoma

4: Hashimoto's thyroiditis

1829-: C-peptide occurs in

1: Proinsulin

2: Glucagon

3: Paratharmone

4: Thyroxine

1830-: Hyperprolactinoma causes

1: Inter menstrual bleeding

2: Prolonged menstruation

3: Oligomenorrhea

4: Polymenorrhea

1831-: Wolff-chaikoff effect is -

1: Reduced thyroxine synthesis by radiotherapy

2: Reduced thyroxine synthesis by propylthiouracil

3: Reduced thyroxine synthesis by iodides

4: None of the above

1832-: Which one of the following is not seen in pheochromocytoma

1: Hypeension

2: Episodic palpitations

3: Weight loss

4: Diarrhea

1833-: A previously healthy 6 weeks old female infant is found unresponsive in her crib. In the emergency department, she is notedto be well developed and well nourished with normal blood pressure and appearance of the genitalia but with increased pigmentation other skin. Blood glucose level is 30 mg/dl.. The most likely diagnosis is:

1: CAH due to 21-alpha hydroxylase deficiency

2: Familial glucocorticoid deficiency

3: Cushing syndrome

4: Insulinoma

1834-: Lady with central obesity & abd. Skin showing purple striae-

1: Conn's syndrome

2: Cushing's syndrome

3: Addison's disease

4: Hypothyroidism

1835-: A 30-year-old woman complains of headache, visual disturbances, deepening of the voice, and generalized weakness. She reports amenorrhea for the past year and states that she recently required a larger shoe size. Laboratory studies show impaired glucose tolerance. What other procedure would be useful for establishing your diagnosis?

1: CBC with differential count

2: CT scan of the abdomen

3: MRI of the sella turcica

4: Test for serum 21-hydroxylase

1836-: 2 weeks old baby having scrotal pigmentation along with hyponatremia, gypoglycemia and hyperkalemia enzyme deficient-

1: 11 beta hydroxylase

2: 21 a- hydroxylase

3: 3- Beta hydroxylase dehydrogenase

4: 17- hydroxylase deficiency

1837-: which of the following Is used in the treatment of hyperprolactineinia?

1: Cimetidine

2: Methysergide

3: Bromocriptine

4: Ondansetron

1838-: Can be associated with anovulation, obesity, and amenorrheaFor the above explanations for hirsutism, select the most likely cause.

1: drugs

2: polycystic ovarian disease (PCOD)

3: adrenal hyperplasia

4: idiopathic hirsutism

1839-: Characteristic feature of the urine in diabetes insipidus include the following EXCEPT

1: Has no proteins

2: Has no sugar

3: Specific gravity > 1.020

4: No casts

1840-: Insulin acts on glucose metabolism by

1: | permeability of glucose across cell membrane

2: | permeability of glucose across cell membrane against glucose gradient

3: | permeability of renal cells

4: | glucose transpo to brain

1841-: Which of the following increases BMR?

1: Starvation

2: Obesity

3: Ingestion of food

4: Sleep

1842-: Which of the following is seen in 95% of patient with diabetes mellitus -

1: HLAB27

2: HLAB3-B4

3: HLA DR3-DR4

4: HLAA3

1843-: Growth hormone secretion, true is

1: Continuous secretion

2: Stimulated by somatostatin

3: Stimulated by glucose

4: Stimulated by exercise

1844-: Low insulin/glucagon levels to increase in the activity of

1: Hexokinase

2: Glucokinase

3: Glucose-6-phosphatase

4: Pyruvate kinase

1845-: Treatment of hypoglycemia due to insulin is all except

1: Glucagon

2: Glucose IV

3: Adrenaline

4: Candy

1846-: Number of ovum at bih is

1: 2-3 million

2: 2-5 million

3: 7-10 million

4: 10-15 million

1847-: Thyroxine is synthesized from which amino acid

1: Arginine

2: Lysine

3: Methionine

4: Tyrosine

1848-: Which of the following inhibits peripheral conversion of Thyroxin to Triiodothyronine?

1: Lugol's Iodine

2: Carbimazole

3: Radioactive iodine

4: Propylthiouracil

1849-: All of the following factors are involved in altered patterns of hormone release except

1: Lights on throughout 24 hours of the day

2: Travel across time zones

3: Aging

4: Day time duties

1850-: Which of the following has a normal level of alpha fetoprotein value in serum?

1: Ovarian dysgerminoma

2: Hepatoblastoma

3: Embroynal carcinoma

4: Yolk sac tumours

1851-: A postmenopausal women with a family history of osteoporosis completes a bone mineral density work-up and you find her T-score is -2.6. She tried a sho course of teriparitide a year ago but complained of serious depression and mood changes. You decided to try an antibody-based therapy and schedule a time for an injection. Wof is the drug you have selected

1: Calcitonin

2: Dihydrotachysterol

3: Infliximab

4: Denusomab

1852-: A diabetic patient in hypoglycemia does not regain consciousness despite blood glucose restoration to normal. Which one of the following is the not likely condition ?

1: Cerebral edema

2: Alcohol intoxication

3: Post-ictal state

4: Cerebral haemorrhage

1853-: MEDNIK syndrome - which of the following is true

1: Caused by mutations in the AP1S1 gene

2: Disorder of copper metabolism

3: Mental retardation, deafness, neuropathy are seen in this disorder

4: All of the above

1854-: Vasopressin inhibited by:

1: Alcohol

2: Carbamazepine

3: Clofibrate

4: Chlorpropamide

1855-: First drug of choice in a patient with Diabetes mellitus and concomitant hypertension?

1: Calcium channel blockers

2: a-adrenergics

3: b-adrenergics

4: ACE inhibitors

1856-: The drug of choice for treatment of hypehyroidism during lactation period is -

1: Carbimazole

2: Propylthiouracil

3: Methimizole

4: Radioactive iodine

1857-: Biopsy from parathyroid gland from a 55-year old male who presented to nephrology department of AIIMS has been shown below. He is a known case of chronic kidney disease with hypertension and type II diabetes. He has recently developed bone pain, lesions in skin and recurrent stones in kidney

1: Water clear cells in parathyroid hyperplasia

2: Water clear cells in parathyroid Ca

3: TB parathyroid

4: Parathyroid Necrosis

1858-: True about conn&;s syndrome-

1: Increased K+

2: Decreased K+

3: Proximal myopathy

4: Ted plasma renin activity

1859-: A patient presents with low serum calcium, high phosphorus and etevated PTH. Which of the following investigations is least contributory to establish a diagnosis -

1: Vitamin D levels

2: Serum creatinine levels

3: Cyclic AMP response to PTH

4: Urine myoglobin

1860-: Which of the following is not a feature of MEN type

1: Pheochromocytoma

2: Parathyroid adenoma

3: Pituitary adenoma

4: Adrenocortical adenoma

1861-: False statement about MODY is -

1: Age < 25 years

2: Impaired secretion of insulin

3: Responds to sulfonylureas

4: Insulin dependent

1862-: All are TRUE about hyperparathyroidism, except-

1: Commonly occurs after thyroidectomy

2: May cause hypercalcemia

3: Solitary adenoma is the most common cause

4: None of the above

1863-: Steroids are indicated in all of the following forms of tuberculosis except.

1: Meningitis

2: Pericarditis

3: Ileo-caecal tuberculosis

4: Adrenal involvement

1864-: An 80-year-old woman is admitted to the intensive care unit with sepsis due to a urinary tract infection. While in the ICU she develops atrial fibrillation with rapid ventricular response and is treated with a loading dose of amiodarone. She converts to sinus rhythm and is sent home on amiodarone to prevent recurrences of atrial fibrillation. In the following weeks she develops increasing fatigue, dry skin, and constipation and her internist finds her TSH to be 25. She is in sinus rhythm. What is the best approach in this situation?

1: Stop the amiodarone and follow the TSH and the clinical response.

2: Start low dose levothyroxine and repeat TSH in 6 weeks.

3: Start a beta-blocker and begin weaning off the amiodarone.

4: Check for anti-TPO antibodies to help guide your decision.

1865-: A 40 yrs old female who is known case of ischemic hea disease (IHD) is diagnosed having hypothyroidism. Which of the following would be most appropriate line of management for her -

1: Sta levothyroxine at low dose

2: Do not sta levothyroxine

3: Uselevothyroxine

4: Thysoid extract is a better option

1866-: Which of the following does not occur in a patient with gastrinoma -

1: Epigastric pain

2: Diarrhoea

3: Basal acid output (BAO) less than 15 mEq/litre

4: Serum gastrin levels >200 pg/ml

1867-: Consider the following statements regarding thyroid hormones-

1: Majority of the circulating T3 remains in bound form

2: Only 50% of the circulating T3 is secreted by Thyroid

3: TSH estimation is not a sensitive test for diagnosis of primary hypothyroidism

4: Fatel pituitary-thyroid axis is dependent to a large extent on maternal pituitary-thyroid axis

1868-: Which of the following is not estrogen dependant carcinoma

1: Lobular carcinoma breast

2: Follicular thyroid carcinoma

3: Endomtrial leiomyosarcoma

4: Carcinoma prostrate

1869-: Pheochromocytoma are tumours of:

1: Adrenal cortex

2: Adrenal medulla

3: Pancreas

4: Bone

1870-: SIADH secretion is seen in all except -

1: Meningitis

2: Interstitial Nephritis

3: Hypothyrodism

4: lung cancer

1871-: About Cushing syndrome all are true except:

1: Purple striae

2: Plethora

3: Hypoglycemia

4: Obesity

1872-: Carbonic anhydrase inhibitors should not be given in

1: Sulfonamide hypersensitivity

2: Glaucoma

3: High altitude sickness

4: Metabolic acidosis

1873-: Syndrome x not found in

1: DM II

2: Dyslipidemia

3: High triglycerides

4: Weight loss

1874-: Wermer's syndrome (multiple endocrine neoplasia type I) is characterised by all of the following except-

1: Tumours of anterior pituitary

2: Tumours of parathyroids

3: Pancreatic adenomas

4: Phaeochromocytoma

1875-: Drug used in severe hypercalcemia -

1: Furosemide

2: Prednisolone

3: Pamidronate

4: All

1876-: Drug of choice for pregnant female suspected of having a baby with congenital adrenal hyperplasia is

1: Dexamethasone

2: Betamethasone

3: Hydrocoisone

4: Predinsolone

1877-: Capacitance of sperms takes place in

1: Seminiferous tubules

2: Epididymis

3: Vas deference

4: Uterus

1878-: A small Ca2+ binding protein that modifies the activity of many enzymes and other proteins m response to changes in Ca2+ concentration, is known as

1: Cycline

2: Calmodulin

 

3: Collagen

4: Kinesin

1879-: Chemically steroids are derivatives of

1: Cholesterol

2: Ergosterol

3: Fatty acids

4: Perhydrocyclopentanophenantherene

1880-: First line drug used for painful diabetic neuropathy is?

1: Carbamazepine

2: Duloxetine

3: Venlafaxine

4: EMLA

1881-: A 59-vear-old man with type 2 diabetes goes for a screening eve examination. The ophthalmologist reports that the patient has developed non-proliferative retinopathy. (List the findings.)For the above patient with a complication of diabetes, select the most likely diagnosis or findings.

1: microaneurysms and hemorrhage (dot and blot)

2: vitreal hemorrhage

3: dilated veins

4: open-angle glaucoma

1882-: luorescence is used in assessment of levels of which hormone commonly -

1: Thyroid

2: Steroid

3: Catecholamines

4: Leutenising releasing hormone

1883-: A 40-year-old man complains of nausea, vomiting, diarrhea, and cramping abdominal pain. His temperature is 38degC , blood pressure 90/60 mm Hg, and pulse rate 90/minute. On physical examination, the patient appears dehydrated, with sunken eyeballs, dry tongue, and poor skin turgor. Hyperpigmentation is noted in the palmar creases and the gingival margins. Laboratory results include fasting serum glucose of 62 mg/dL, BUN of 27 mg/dL, Na of 122 mEq/L, and K of 6.5 mEq/L. Which of the following is the most likely cause of this patient's symptoms?

1: Amyloidosis

2: Autoimmunity

3: Metastatic cancer

4: Sarcoidosis

1884-: Best screening test for pheochromocytoma?

1: Urinary VMA estimation

2: Serum catecholamine estimation

3: Clonidine suppression test

4: Urinarymetanephrine

1885-: PGs in semen is secreted by

1: Prostate

2: Seminal vesicle

3: Sperms

4: Testes

1886-: Not a mechanism of Action of Insulin

 

1: Tyrosine kinase-beta cell stimulation

2: Incroporation of GLUT-4 into cells

3: Inhibition of Na+K+ATPase

4: Hexokinase stimulation

1887-: Long term side effect of glucocorticosteroids:

1: Hepatotoxicity

2: Osteoporosis

3: Precocious puberty

4: Lupus like syndrome

1888-: Hypercalcemia is NOT seen in -

1: Primary hyperparathyroidism

2: Tumour lysis syndrome

3: Multiple sclerosis

4: Sarcoidosis

1889-: All of these hormones use cAMP as second messenger except:

1: Corticotropin

2: Dopamine

3: Glucagon

4: Vasopressin

1890-: Deep white matter lesion with bilateral deep bright thalamic appearance is suggestive of

1: Alexander disease

2: Canavan's diseases

3: Krabbe's disease

4: Metachromatic leukodystrophy

1891-: Which of the following is used in the treatment of hyperprolactinemia

1: Cimetidine

2: Methysergide

3: Bromocriptine

4: Ondansetron

1892-: Secretin stimulation test used for -

1: Gastrinoma

2: Pituitary adenoma

3: Incidenteloma

4: Insulinoma

1893-: Causes of reduced bioavailability of a drug includes

1: High first pass metabolism

2: Increased absorption

3: IV drug administration

4: High lipid solubility

1894-: Adrenal aldosteronoma is best diagnosed by -

1: HRCT

2: MRI

3: JVP

4: KUB

1895-: A 3-week-female infant is brought for ambiguous genitalia and hyperpigmentation of skin. She has hyponatremia and hyperkalemia. Which one of the following is the most likely diagnosis?

1: 21 hydroxylase deficiency

2: 17 alpha hydroxylase deficiency

3: 17, 20 lyase deficiency

4: 11 beta hydroxylase deficiency

1896-: Insulin is secreted along with the following molecule in a 1:1 ratio

1: Pancreatic polypeptide

2: Glucagon

3: GLP- 1

4: Somatostatin

1897-: The clinical use of leuprolide include all the following except

1: Endometriosis

2: Osteoporosis

3: Prostate cancer

4: Precocious pubey

1898-: An acutely ill 18-year-old female is brought to the emergency depament. The patient is febrile and markedly hypotensive, and her mental status is obtunded. Numerous petechial and purpuric hemorrhages are scattered over the trunk, and aspiration of a lesion reveals neutrophils engulfing gram-negative diplococci. Serum sodium is markedly decreased, and serum potassium is increased. Coagulation testing reveals increased prothrombin time, activated paial thromboplastin time, and fibrin-fibrinogen split products. Which of the following is most likely?

1: Conn syndrome

2: Hyperprolactinoma

3: Neuroblastoma

4: Waterhouse-Friderichsen syndrome

1899-: Acute adrenal insufficiency can present as

1: Acute abdomen with abdominal tenderness, nausea, vomiting and fever

2: Neurologic disease with decreased responsiveness progressing to stupor and coma

3: Hypovolemic shock

4: All of the above.

1900-: Which of the following mechanisms is not responsible for complications in DM

1: Non enzymatic glycosylation

2: Protein Kinase C activation

3: Disturbance in polyol pathway

4: Chronic inflammation

# Answers

| Question No | Answer Option | Answer |
|---|---|---|
| 1 | 3 | Dehydration |
| 2 | 1 | <150 mmol/L |
| 3 | 3 | Kidney |
| 4 | 3 | Thyroglobulin |
| 5 | 2 | Gastrinoma |
| 6 | 2 | Successive fasting plasma glucose concentrations of 8, 9, and 8.5 mmol/L in an asymptomatic, otherwise healthy businesswoman |
| 7 | 3 | b-islet cell\/pancreatic transplantation can improve the proteinuria in early stage. |
| 8 | 4 | All of the above |
| 9 | 1 | Dexamethasone |
| 10 | 1 | K+ ATP channel blocker |
| 11 | 3 | Seminal fluid |
| 12 | 1 | CRF |
| 13 | 3 | At pubey |
| 14 | 3 | Liver and kidneys |
| 15 | 1 | Leydig cells |
| 16 | 2 | Pendrin protein |
| 17 | 3 | secondary hyperparathyroidism |
| 18 | 2 | Antibody to thyroid cell receptors |
| 19 | 2 | Prolactin |
| 20 | 4 | Photosensitivity |
| 21 | 1 | Papillary |

 

| | | |
|---|---|---|
| 22 | 1 | Calcitonin |
| 23 | 1 | Increased alkaline phosphatase |
| 24 | 3 | Denosumab |
| 25 | 4 | Increasing b-oxidation |
| 26 | 3 | Rosiglitazone |
| 27 | 3 | Flurosis |
| 28 | 2 | Activation of triglyceride lipase as a result of hormone-stimulated increases in cyclic AMP levels |
| 29 | 1 | pheochromocytoma |
| 30 | 1 | Rosiglitazone |
| 31 | 2 | Solitary adenoma of parathyroid |
| 32 | 4 | Oxygen consumption |
| 33 | 3 | Glioma |
| 34 | 3 | Hypoparathyroidism |
| 35 | 2 | Metastasis |
| 36 | 1 | Temperature |
| 37 | 2 | Indomethacin |
| 38 | 1 | niacin |
| 39 | 3 | McArdle disease (glycogen storage disease) |
| 40 | 3 | Ileo-caecal tuberculosis |
| 41 | 1 | Microvascular complications of type 1 DM |
| 42 | 3 | androgen receptor defect |
| 43 | 3 | Decreased calcium |
| 44 | 1 | Papillary carcinoma |
| 45 | 1 | Estrogen |

 

| | | |
|---|---|---|
| 46 | 1 | Spermiogenesis |
| 47 | 2 | Cafe-au-lait spots |
| 48 | 2 | Prolactinoma |
| 49 | 2 | CYPA-2B |
| 50 | 1 | familial combined hyperlipidemia |
| 51 | 3 | Vaptans are new FDA approved drugs for its Rx |
| 52 | 4 | ACTH secretion is the commonest cause |
| 53 | 1 | Insulin |
| 54 | 3 | 800 mcg sublingual |
| 55 | 4 | All of the above |
| 56 | 1 | Androgen binding protein |
| 57 | 2 | Aoic aneurysm |
| 58 | 1 | Medullary carcinoma of the thyroid |
| 59 | 4 | Ketogenesis |
| 60 | 3 | 6 |
| 61 | 2 | necrobiosis lipoidica diabeticorum |
| 62 | 2 | Sleeping pulse rate |
| 63 | 4 | Maturity Onset Diabetes of the Young (MODY) |
| 64 | 4 | Sho acting insulin |
| 65 | 3 | Evening |
| 66 | 4 | Endometriosis |
| 67 | 1 | Pendred syndrome |
| 68 | 2 | necrobiosis lipoidica diabeticorum |
| 69 | 4 | None of the above |
| 70 | 3 | Urinary vanillylmandelic acid |

 

| | | |
|---|---|---|
| 71 | 4 | A prolactinoma that would decrease its secretory activity in response to bromocriptine (an analog of dopamine) |
| 72 | 4 | Hyperpigmentation |
| 73 | 2 | 2 day |
| 74 | 1 | Neonatal Thyrotoxicosis |
| 75 | 1 | Progesterone |
| 76 | 2 | Dopamine |
| 77 | 4 | All |
| 78 | 1 | Hypoglycemia |
| 79 | 1 | Conn syndrome |
| 80 | 2 | thiamine |
| 81 | 4 | lack of hyperintense signals from the posterior pituitary |
| 82 | 4 | BMI >95th percentile |
| 83 | 1 | Metformin |
| 84 | 1 | Episodic diarrhea |
| 85 | 3 | LH |
| 86 | 2 | Urine VMA and aspiration of the thyroickiodule |
| 87 | 2 | >126 |
| 88 | 2 | Enalapril |
| 89 | 3 | Parathyroid adenoma |
| 90 | 1 | Octreotide |
| 91 | 4 | Arrange for a sleep study to check the patient for obstructive sleep apnea. |
| 92 | 1 | Thyroid stimulating hormone (TSH) |
| 93 | 4 | Before ovulation |
| 94 | 4 | Increased secretion of Insulin |

 

| | | |
|---|---|---|
| 95 | 3 | Hydrochlorothiazide |
| 96 | 2 | Positive feed-back by estrogen |
| 97 | 2 | Serum calcium above 11 mg/dL |
| 98 | 4 | After 5 years |
| 99 | 1 | IV fluids |
| 100 | 1 | 100 microgram intramuscular |
| 101 | 1 | 126 mg/dl |
| 102 | 3 | Rickets |
| 103 | 2 | Decreased phosphate in urine |
| 104 | 1 | Calciferol |
| 105 | 3 | Pyridoxine |
| 106 | 2 | Epinephrine |
| 107 | 1 | Hypothyroid |
| 108 | 1 | Aldosterone |
| 109 | 1 | Peripheral insulin resistance |
| 110 | 4 | Placenta |
| 111 | 1 | Sr. creatinine |
| 112 | 1 | Insulin glargine |
| 113 | 4 | It is characterized by adrenal calcification and corneal clouding |
| 114 | 4 | Teriparatide |
| 115 | 1 | ATP sensitive K+ channels |
| 116 | 1 | it is usually bilateral |
| 117 | 2 | Change injection sites |
| 118 | 2 | LH |

 

| | | |
|---|---|---|
| 119 | 4 | All of the above |
| 120 | 3 | 0.25% |
| 121 | 3 | Pheochromocytoma |
| 122 | 3 | SIADH |
| 123 | 1 | \|Aldosterone |
| 124 | 2 | Decrease the occurrence of endometrial cancers |
| 125 | 2 | Medullary carcinoma thyroid |
| 126 | 2 | 1.75 gm/kg glucose |
| 127 | 2 | Blood vessels |
| 128 | 3 | It blocks the conversion of dihydrolestosteron to testosterone |
| 129 | 3 | Glipizide |
| 130 | 1 | Trk-A expression absent |
| 131 | 3 | HbA1c |
| 132 | 2 | Bromocriptine |
| 133 | 1 | Chlorprompamide |
| 134 | 4 | Grave disease |
| 135 | 3 | Both mast cell stabilizer and anti histamine |
| 136 | 1 | Acute renal failure |
| 137 | 3 | Pheochromocytoma |
| 138 | 1 | Atrophic smear |
| 139 | 3 | Weight gain |
| 140 | 1 | Hypoglycaemia |
| 141 | 3 | Is slower, sho acting and less safer than SERMS |
| 142 | 3 | Calcitonin |

 

| | | |
|---|---|---|
| 143 | 1 | Decrease in absolute amount of bone mass |
| 144 | 4 | Removal of sarcoplasmic calcium |
| 145 | 2 | Miglitol |
| 146 | 4 | Methyl prednisolone |
| 147 | 2 | TSH receptor antibodies (TRAb) |
| 148 | 4 | Atorvastatin |
| 149 | 2 | More common in adults than in children |
| 150 | 3 | Glargine |
| 151 | 3 | Water retention with weight gain |
| 152 | 1 | Beta HCG from placenta |
| 153 | 4 | Orphan Annie eye nuclei |
| 154 | 4 | Low Na |
| 155 | 4 | Anasarca |
| 156 | 2 | Intense lymphoplasmacytic infiltrate with lymphoid follicles and scattered oxyphilic cells |
| 157 | 2 | Inhibits COX and thus thromboxane synthesis |
| 158 | 2 | 11-hydroxylase |
| 159 | 4 | Pioglitazone |
| 160 | 2 | Cyproterone acetate |
| 161 | 1 | Cimetidine |
| 162 | 2 | Starvation |
| 163 | 1 | RET Proto Oncogene |
| 164 | 1 | Premature closure of posterior fontanelle |
| 165 | 4 | Parathyroid adenoma |
| 166 | 1 | Early morning |

 

| | | |
|---|---|---|
| 167 | 2 | Urine hvpoosmolar |
| 168 | 3 | ADH |
| 169 | 2 | Marfan syndrome |
| 170 | 3 | Congenital adrenal hypoplaisa |
| 171 | 4 | Impotence |
| 172 | 3 | Creatine phosphate |
| 173 | 4 | Mucor |
| 174 | 2 | Growth hormone |
| 175 | 2 | Gastrinoma |
| 176 | 3 | Strabismus and spastic diplegias |
| 177 | 1 | Bromocriptine |
| 178 | 1 | Cerebral edema |
| 179 | 2 | Diabetes mellitus |
| 180 | 4 | Glucose-6-phosphate |
| 181 | 1 | 21- alpha hydroxylase deficiency |
| 182 | 3 | Loeffler syndrome |
| 183 | 1 | Hypothalamus |
| 184 | 4 | Methotrexate |
| 185 | 1 | Increased transpo of K+ into adipocytes |
| 186 | 1 | Liver |
| 187 | 4 | Psychogenic polydipsia |
| 188 | 3 | "C" cells of thyroid |
| 189 | 1 | Mitotane |
| 190 | 1 | Chlorpropamide |
| 191 | 4 | Zollinger-Ellison syndrome |

 

| | | |
|---|---|---|
| 192 | 2 | Prednisolone |
| 193 | 4 | Insulin glargine |
| 194 | 4 | Aldosterone |
| 195 | 2 | Finasteride |
| 196 | 2 | 8 hrs |
| 197 | 4 | Causes contraction of upper segment |
| 198 | 4 | Hypercalcemdia |
| 199 | 2 | Amylase |
| 200 | 1 | PCT |
| 201 | 3 | overnight dexamethasone suppression test |
| 202 | 1 | promotes glycogenolysis and gluconeogenesis |
| 203 | 2 | Capsular invasion |
| 204 | 4 | Serial 24 hours test for catecholamines, metanephrines and vanillylamandelic acid excertion. |
| 205 | 2 | Caloric restriction |
| 206 | 3 | Hydrocoisone |
| 207 | 3 | Vaginal secretions |
| 208 | 4 | HLADR3 |
| 209 | 4 | Hyperventilation occurs before coma |
| 210 | 4 | Pituitary |
| 211 | 2 | Loss of intercellular connections |
| 212 | 1 | Osteoporosis |
| 213 | 4 | Edema |
| 214 | 3 | Hea |
| 215 | 2 | Epididymis |

 

| | | |
|---|---|---|
| 216 | 4 | Increase 11 deoxycortisol |
| 217 | 4 | beta blockers |
| 218 | 3 | Decreased lipolysis |
| 219 | 1 | Parathyroid |
| 220 | 1 | Acarbose |
| 221 | 3 | Weight gain |
| 222 | 3 | HPV 16 |
| 223 | 1 | Metformin |
| 224 | 4 | Parathyroid hormone |
| 225 | 3 | Iodine |
| 226 | 1 | HbA1c |
| 227 | 4 | Ectopic ACTH secreting tumor |
| 228 | 2 | Luteinizing hormone |
| 229 | 4 | Wheezing |
| 230 | 4 | None |
| 231 | 1 | Solitary adenoma |
| 232 | 3 | Vit D |
| 233 | 4 | Furosemide |
| 234 | 3 | Thin limbs and obese trunks |
| 235 | 4 | CRF |
| 236 | 2 | Atrial natriureptic peptide |
| 237 | 3 | GLUT 4 |
| 238 | 1 | peripheral motor and sensory neuropathy |
| 239 | 1 | Tachycardia |
| 240 | 3 | Insulin Degludec |

 

| | | |
|---|---|---|
| 241 | 4 | >200 mg/L |
| 242 | 2 | Insulin |
| 243 | 4 | a-Fetoprotein |
| 244 | 1 | Regular Insulin |
| 245 | 2 | Chlorpropamide |
| 246 | 3 | Eosinophils |
| 247 | 2 | Coicotropin |
| 248 | 2 | Female pseudohermaphroditism |
| 249 | 1 | Type I diabetes |
| 250 | 4 | All of the above |
| 251 | 3 | Linagliptin |
| 252 | 2 | Hypoparathyridism |
| 253 | 2 | Episodic hypeension |
| 254 | 1 | Adrenal |
| 255 | 4 | Lungs |
| 256 | 3 | Chlorpropamide |
| 257 | 2 | Mifepristone |
| 258 | 4 | Medullary carcinoma of thyroid |
| 259 | 1 | TSH: <0.1mIU/mL; T3: 20ng/dL; rT3: 5ng/dL; TSI : ++ |
| 260 | 2 | Adrenalectomy |
| 261 | 1 | Acarbose |
| 262 | 1 | Adrenocoical hypersecretion of pituitary origin |
| 263 | 4 | Islet cell destruction |
| 264 | 1 | 126mg\/dl |
| 265 | 1 | Fetal placental steroid sulfatase deficiency |

 

| | | |
|---|---|---|
| 266 | 4 | HbA1c > 6.5% |
| 267 | 4 | 21 |
| 268 | 1 | Insulin |
| 269 | 3 | Glargine |
| 270 | 2 | Rifampicin |
| 271 | 1 | Levosimendan |
| 272 | 3 | Hypoglycemia is a common and serious side effect |
| 273 | 4 | Peripheral insulin resistance |
| 274 | 3 | Decreased PO43- excretion |
| 275 | 2 | Plasma cortisol |
| 276 | 2 | Extermal genitalia |
| 277 | 3 | Hypotonic urine |
| 278 | 3 | androgen receptor defect |
| 279 | 2 | Hypercalcemia |
| 280 | 2 | Chronic renal failure |
| 281 | 1 | Throid dysgenesis |
| 282 | 1 | Cortisol |
| 283 | 2 | Insulin |
| 284 | 1 | Gonadotropin releasing hormone (GnRH) |
| 285 | 3 | Pramlintide |
| 286 | 2 | ELISA |
| 287 | 4 | Autoimmune destruction of beta cells occur |
| 288 | 1 | 21-hydroxylase deficiency |
| 289 | 3 | Bradycardia |
| 290 | 1 | Calcitonin |

 

| | | |
|---|---|---|
| 291 | 2 | Metastasis |
| 292 | 3 | Medullary |
| 293 | 3 | Pramlintide |
| 294 | 1 | Metabolic alkalosis |
| 295 | 3 | Bromocriptine |
| 296 | 4 | Microcephaly |
| 297 | 3 | Dietmerapy+exercise+metforrnin |
| 298 | 3 | Diabetes insipidus |
| 299 | 1 | Endometriosis |
| 300 | 1 | Calcitonin |
| 301 | 4 | FSH |
| 302 | 1 | Milk-Alkali syndrome |
| 303 | 3 | Medullary carcinoma |
| 304 | 2 | Pituitary macroadenoma |
| 305 | 4 | All of the above |
| 306 | 1 | Decrease the secretion of insulin |
| 307 | 1 | Cabergoline |
| 308 | 2 | Primary hyperparathyroidism |
| 309 | 1 | c-AMP dependent protein kinase |
| 310 | 3 | CAH |
| 311 | 3 | 3 |
| 312 | 3 | LH |
| 313 | 4 | All of the above |
| 314 | 1 | Papillary |
| 315 | 2 | Hypoglycemia |

 

| | | |
|---|---|---|
| 316 | 3 | D-xylose |
| 317 | 3 | Loop diuretics |
| 318 | 2 | Propylthiouracil |
| 319 | 2 | Long half life |
| 320 | 2 | Lipolysis |
| 321 | 3 | Metabolic acidosis |
| 322 | 1 | KI |
| 323 | 4 | None |
| 324 | 3 | tremor |
| 325 | 2 | Medullary carcinoma |
| 326 | 2 | Hashimoto Thyroiditis |
| 327 | 2 | Early closure of PDA |
| 328 | 2 | 1-2 yrs |
| 329 | 2 | 21 a hydroxylase deficiency |
| 330 | 2 | ret |
| 331 | 2 | Propylthiouracil |
| 332 | 1 | Hyperparathyroidism |
| 333 | 1 | lithium |
| 334 | 4 | Primary hyperparathyroidism |
| 335 | 3 | Pramlintide |
| 336 | 4 | EEG is normal |
| 337 | 3 | Actrapid |
| 338 | 1 | 11-B-hydroxylase |
| 339 | 2 | Subcutaneous |
| 340 | 2 | Hypothyroidism |

 

| | | |
|---|---|---|
| 341 | 4 | Multivitamins |
| 342 | 2 | Indomethacin |
| 343 | 1 | Pheochromocytoma |
| 344 | 3 | Seoli cells |
| 345 | 3 | Prednisolone |
| 346 | 1 | Papillary carcinoma thyroid |
| 347 | 1 | salivary gland enlargement |
| 348 | 3 | TSH |
| 349 | 4 | Tyrosine |
| 350 | 4 | Paget disease of bone |
| 351 | 2 | Prolactin deficiency |
| 352 | 2 | Low T3, low T4 high TSH |
| 353 | 1 | Thyroid dysgenesis |
| 354 | 2 | Multiple myeloma |
| 355 | 2 | Sodium and water depletion |
| 356 | 4 | Phosphate binder |
| 357 | 1 | Calcitonin |
| 358 | 3 | Liver |
| 359 | 4 | Cushing syndrome |
| 360 | 1 | Increases transpo of ENaCs from the cytoplasm to the cell membrane |
| 361 | 2 | Has no effect in muscle glycogenolysis |
| 362 | 2 | Insulin can be given |
| 363 | 1 | Tuberous sclerosis |
| 364 | 2 | 40 mg% |

 

| | | |
|---|---|---|
| 365 | 1 | Adenoma commonest cause |
| 366 | 2 | Oxytocin |
| 367 | 2 | Irreversible growth of parathyroid gland |
| 368 | 1 | McCune Albright syndrome |
| 369 | 2 | Glipizide |
| 370 | 2 | when body weight is less than 75% of expected |
| 371 | 2 | Adrenal |
| 372 | 4 | Prolactinoma |
| 373 | 4 | Peripheral insulin resistance |
| 374 | 4 | Microalbuminuria |
| 375 | 3 | CDNA of pancreatic cell |
| 376 | 3 | Aldosterone |
| 377 | 2 | I131 |
| 378 | 3 | Lithium carbonate |
| 379 | 1 | Norepinephrine |
| 380 | 3 | 21-Hydroxylase |
| 381 | 1 | Cushing's syndrome |
| 382 | 4 | Growth hormone |
| 383 | 2 | Small bowel resection |
| 384 | 2 | Mithramycin |
| 385 | 1 | \| Neoglucogenesis |
| 386 | 2 | adrenal adenoma with complete autonomy |
| 387 | 4 | Empagliflozin |
| 388 | 3 | Commonest cause of death is renal failure |
| 389 | 3 | TSH |

 

| | | |
|---|---|---|
| 390 | 1 | Hydrocoisone |
| 391 | 3 | Absence to methyl group at C-10 |
| 392 | 4 | Glulisine |
| 393 | 2 | Hypehermia |
| 394 | 3 | Deiodinase |
| 395 | 1 | Acarbose |
| 396 | 4 | Prader Willi syndrome |
| 397 | 4 | Letrozole |
| 398 | 1 | Granulomatous thyroiditis |
| 399 | 2 | Papillary |
| 400 | 3 | Low serum Na+ |
| 401 | 4 | Kaposi sarcoma |
| 402 | 4 | Any of the above |
| 403 | 1 | inhibition of xanthine oxidase |
| 404 | 4 | Mental retardation |
| 405 | 2 | It can cause hypotension |
| 406 | 1 | Amyloid |
| 407 | 2 | Increased conversion to 1,25 OH |
| 408 | 4 | Glucocoicoids |
| 409 | 2 | sulfonamide antibiotics |
| 410 | 1 | Phaeochromocytoma |
| 411 | 4 | Distal renal tubule |
| 412 | 1 | Constriction of afferrent aeriole |
| 413 | 3 | Glaucoma |
| 414 | 2 | Increased glucagon |

 

| | | |
|---|---|---|
| 415 | 4 | Suprachiasmatic |
| 416 | 2 | Presence of metastasis to other organs |
| 417 | 4 | pneumonia |
| 418 | 1 | Inositol triphosphate |
| 419 | 2 | Diabetes mellitus |
| 420 | 3 | Alfa 2 antagonist |
| 421 | 4 | absence of orgasm with normal libido and erectile function |
| 422 | 1 | Hyperprolactinemia |
| 423 | 1 | Semaglutide |
| 424 | 2 | Coisone |
| 425 | 2 | Increasing the mineralization of Osteoid |
| 426 | 4 | Tamoxifen |
| 427 | 1 | Hyperparathyroid ism |
| 428 | 1 | Mother's estrogen |
| 429 | 1 | 21 a hydroxilase deficiency |
| 430 | 3 | Metabolism |
| 431 | 4 | Increased plasma follicle-stimulating hormone (FSH) levels |
| 432 | 3 | Follicular adenoma thyroid |
| 433 | 1 | Mature thyroid tissue |
| 434 | 2 | Ataxia telengeictasia |
| 435 | 1 | it is usually bilateral |
| 436 | 1 | Primaryhypothyrodism |
| 437 | 2 | It is less likely to occur in patients receiving inhaled steroids |
| 438 | 4 | Chronic Candidiasis |

 

| | | |
|---|---|---|
| 439 | 3 | Undifferentiated progenitor cells which appear in testis after bih |
| 440 | 3 | Massive adrenal hemorrhage following disseminated bacterial infection |
| 441 | 1 | Starvation and chest infection |
| 442 | 2 | Metabolic acidosis |
| 443 | 3 | Desmopressin |
| 444 | 1 | Insulin |
| 445 | 4 | Cushing syndrome due to an adrenal tumor. |
| 446 | 3 | Leukotrians |
| 447 | 1 | Increased hepatic glucose output |
| 448 | 4 | Menorrhagia |
| 449 | 2 | Bronchial &Mediastinal carcinoid causes wishing syndrome |
| 450 | 4 | Orphan Annie eye nuclei |
| 451 | 2 | Duloxetine |
| 452 | 1 | Increase in glucagon / insulin ratio, increased cAMP and increased blood glucose |
| 453 | 1 | Acute pulmonary edema is an indication |
| 454 | 3 | D cell |
| 455 | 3 | Commoner in males |
| 456 | 2 | failure of erection with absent nocturnal penile tumescence (NPT) |
| 457 | 3 | Amiloride |
| 458 | 2 | Somatotrophs |
| 459 | 1 | Increased ptfcathyroid hormone |
| 460 | 3 | Decreasing the osteoclast mediated resorption of bone |

 

| | | |
|---|---|---|
| 461 | 1 | Oral contraceptive pills |
| 462 | 3 | Estradiol |
| 463 | 2 | Anti-TSH receptor antibodies |
| 464 | 3 | Hyperparathyroidism |
| 465 | 4 | Fasting blood sugar <126 mg\/dl and two hours after glucose load 140-199 mg\/dL |
| 466 | 3 | Hexose monophosphate shunt |
| 467 | 2 | Estrogen |
| 468 | 4 | Congenital adrenal hyperplasia |
| 469 | 3 | Capsular invasion |
| 470 | 2 | Leydig's cells |
| 471 | 4 | Medullary collecting duct |
| 472 | 2 | Insulinoma |
| 473 | 3 | 16 years |
| 474 | 3 | polycystic ovarian disease (PCOD) |
| 475 | 4 | A glycated hemoglobin (HbA1C) level >= 5.5% |
| 476 | 2 | Beta cell |
| 477 | 2 | Ferritin |
| 478 | 2 | Diabetes |
| 479 | 3 | Prevent de-iodination |
| 480 | 4 | Papillary carcinoma thyroid |
| 481 | 3 | autoimmune hypothyroidism |
| 482 | 3 | Oligodendroglioma |
| 483 | 3 | WPW |
| 484 | 2 | Thyroxine |

 

| | | |
|---|---|---|
| 485 | 3 | Secretion of thyroglobulin into the colloid |
| 486 | 2 | Follicular carcinoma |
| 487 | 1 | HNF-4 alpha |
| 488 | 3 | Hyperinsulinemia |
| 489 | 4 | Aldosterone antagonists |
| 490 | 1 | Adiponectin |
| 491 | 2 | Gresiofulvin |
| 492 | 4 | Low growth hormone (GH) |
| 493 | 2 | Metropathia hemorrhagica |
| 494 | 1 | Brain |
| 495 | 1 | Somatostatin |
| 496 | 2 | Weight gain |
| 497 | 2 | 8 days |
| 498 | 1 | Beta blockers |
| 499 | 4 | Increased risk of colon cancer |
| 500 | 3 | MEN type II b |
| 501 | 2 | Selective estrogen receptor modulator |
| 502 | 1 | Osteopetrosis |
| 503 | 3 | Common in Male |
| 504 | 3 | Chronic renal failure |
| 505 | 4 | Metformin |
| 506 | 1 | Pedal edema |
| 507 | 4 | Liver |
| 508 | 2 | Addison's disease |
| 509 | 4 | GH |

 

| | | |
|---|---|---|
| 510 | 1 | Oxytocin |
| 511 | 2 | 8 years |
| 512 | 1 | Halobetasol propionate |
| 513 | 3 | Low Coisol level |
| 514 | 2 | Exenatide |
| 515 | 4 | Glycerol-3-P |
| 516 | 4 | Decrease FSH |
| 517 | 4 | Renal insufficiency |
| 518 | 1 | Type I diabetes mellitus |
| 519 | 1 | Compression fracture of the spine |
| 520 | 4 | Diarrhea |
| 521 | 4 | Carnitine |
| 522 | 1 | Increases uptake of glucose through increase in insulin sensitivity |
| 523 | 4 | Aldosterone |
| 524 | 2 | Prolactin |
| 525 | 1 | 10% KI with 5% Iodine |
| 526 | 1 | Pituitary tumor |
| 527 | 1 | High output due to diuretics |
| 528 | 3 | Hypoglycemia |
| 529 | 3 | Dextroamphetamine |
| 530 | 1 | 21 beta hydroxylase |
| 531 | 2 | Hyperaldosteronism |
| 532 | 4 | Addison disease. |
| 533 | 3 | Insulitis |

 

| | | |
|---|---|---|
| 534 | 3 | Are you receiving coicosteroids for some other disease? |
| 535 | 2 | 8 hours |
| 536 | 2 | Increased 24,25 dihydroxycholecalciferol |
| 537 | 1 | Hyperparathyroidism |
| 538 | 2 | Glaucoma |
| 539 | 4 | Primary hyperparathyroidism |
| 540 | 3 | S. Phosphate |
| 541 | 1 | Papillary carcinoma |
| 542 | 2 | Hashimoto's thyroiditis |
| 543 | 4 | Persistent paramesonephros (Mullerian ducts) |
| 544 | 3 | It causes transcription of gene for carbohydrate and fat metabolism in the absence of insulin |
| 545 | 3 | water diuresis is impaired |
| 546 | 4 | Signal transducers |
| 547 | 2 | Hypocalcemia |
| 548 | 4 | Ectopic\| ACTH producing lung cancer |
| 549 | 4 | None |
| 550 | 4 | GLUT 4 |
| 551 | 3 | Vitamin D intoxication |
| 552 | 1 | Glucose |
| 553 | 1 | Antibody to Insulin |
| 554 | 4 | Plicamycin |
| 555 | 1 | Autoimmune adrenalitis |
| 556 | 2 | Increase in plasma Na+ > 7 meq/L |
| 557 | 2 | Hyperkalemia |

| | | |
|---|---|---|
| 558 | 4 | Bilateral micronodular adrenal hyperplasia |
| 559 | 1 | Jod-Basedow effect |
| 560 | 4 | GH |
| 561 | 4 | 11 deoxycoisol |
| 562 | 3 | (upword arrow) Lipocoin |
| 563 | 1 | Activation of PPARg nuclear receptor in adipocytes |
| 564 | 3 | Adrenal adenoma |
| 565 | 2 | Seoli cells |
| 566 | 1 | Cirrhosis |
| 567 | 3 | T2-weighted MRI with gadolinium contrast |
| 568 | 1 | HCG |
| 569 | 1 | Tyrosine Kinase receptors |
| 570 | 1 | It is due in estrogen mediated sodium retention |
| 571 | 3 | Cleft lip/palate |
| 572 | 1 | Hypokalemic alkalosis |
| 573 | 1 | Hyperosmolarity |
| 574 | 1 | Acute renal failure |
| 575 | 4 | Hvnncalcemia |
| 576 | 3 | LH surge |
| 577 | 4 | Prader-Willi syndrome |
| 578 | 2 | Glycogen phosphorylase |
| 579 | 4 | Thyroid dysgenesis |
| 580 | 1 | inhibition of xanthine oxidase |
| 581 | 4 | 4 |
| 582 | 3 | Rosiglitazone |

 

| | | |
|---|---|---|
| 583 | 3 | Administering lisinopril and restriction of sodium |
| 584 | 4 | hemochromatosis |
| 585 | 2 | Hyperphosphatemia |
| 586 | 2 | Pioglitazone |
| 587 | 1 | 45degC |
| 588 | 2 | 11-Deoxycortisol |
| 589 | 1 | Calcitonin |
| 590 | 1 | Pancreas |
| 591 | 4 | Rosiglitazone |
| 592 | 4 | Metformin |
| 593 | 3 | 800 mcg sublingual |
| 594 | 2 | Early division of spermatogonia |
| 595 | 3 | sexual impotence |
| 596 | 4 | K+ entry into cells |
| 597 | 2 | Vildagliptin |
| 598 | 1 | Bromocriptine |
| 599 | 1 | Congenital adrenal hyperplasia |
| 600 | 2 | Inhibits LH secretion |
| 601 | 2 | Cong, adrenal hyperplasia |
| 602 | 1 | Testosterone |
| 603 | 1 | Papillary |
| 604 | 4 | All |
| 605 | 3 | Desmopressin |
| 606 | 3 | 18 hydroxylase |
| 607 | 4 | L-dopa |

 

| | | |
|---|---|---|
| 608 | 2 | Prolactin |
| 609 | 1 | Elevated blood levels of aldosterone and renin resulting from an atherosclerotic plaque in a renal artery. |
| 610 | 1 | Multiple sclerosis |
| 611 | 1 | 126 mg/dl |
| 612 | 2 | Islet cell hyperplasia |
| 613 | 2 | inhibition of thyroidal organic binding and coupling reactions |
| 614 | 4 | Diarrhea |
| 615 | 1 | Autoimmune adrenalitis |
| 616 | 1 | Gonadotropin |
| 617 | 4 | All the above |
| 618 | 2 | Growth hormone |
| 619 | 4 | Amount of lean body mass |
| 620 | 4 | Dexamethasone |
| 621 | 2 | XY genotype, female external genitalia |
| 622 | 1 | Vasodilation and increase in blood supply to tissue takes place |
| 623 | 2 | Somatostatinoma |
| 624 | 1 | Coagulation of the blood |
| 625 | 2 | ssHCG |
| 626 | 1 | Phaeochromocytoma |
| 627 | 4 | Bromocriptine |
| 628 | 3 | Hypothyroidism |
| 629 | 1 | Progesterone |
| 630 | 1 | Epinephrine |

 

| | | |
|---|---|---|
| 631 | 1 | Cyclic AMP |
| 632 | 3 | Naproxen |
| 633 | 1 | Hypoparathyroidism |
| 634 | 2 | Seminiferous tubule |
| 635 | 4 | Estradiol |
| 636 | 1 | Low serum phosphate |
| 637 | 1 | Goserelin |
| 638 | 3 | Gastrectomy |
| 639 | 1 | Ointment |
| 640 | 4 | Inhibition of ADH secretion |
| 641 | 3 | >37.5-38.3 degC |
| 642 | 1 | Medullary Ca |
| 643 | 2 | Antibodies aganist b cells |
| 644 | 2 | Taken just before a meal, it limits post prandial hyperglycemia in type 2 diabetes mellitus |
| 645 | 2 | Hypercalcemia |
| 646 | 4 | Decreased formation of c-AMP is observed |
| 647 | 4 | Hypokalemia |
| 648 | 2 | Thyroxine |
| 649 | 2 | Glucagon |
| 650 | 4 | Propylthiouracil |
| 651 | 1 | Insulin |
| 652 | 3 | Delta cells |
| 653 | 3 | Microangiopathic changes in blood vessels |
| 654 | 4 | Medullary |

 

| | | |
|---|---|---|
| 655 | 2 | Wt gain |
| 656 | 1 | Small cell carcinoma is lung |
| 657 | 3 | ACTH |
| 658 | 3 | Infarction of the pituitary |
| 659 | 1 | Corpus luteum |
| 660 | 3 | >180 mg/dl. |
| 661 | 2 | Vitamin D excess |
| 662 | 3 | glomerulosclerosis with mesangial thickening |
| 663 | 1 | Papillary CA |
| 664 | 1 | McCune-Albright's syndrome |
| 665 | 3 | Raising endorphin levels |
| 666 | 4 | carcinoid syndrome |
| 667 | 1 | Hydrocoisone |
| 668 | 3 | Subacute thyroiditis |
| 669 | 3 | secondary hyperparathyroidism |
| 670 | 4 | T3,T4andTSH |
| 671 | 4 | McCune-Albright syndrome |
| 672 | 1 | Carcinoma breast |
| 673 | 4 | None |
| 674 | 1 | Vitami D3 |
| 675 | 4 | Photosentivity |
| 676 | 1 | Vitamin D |
| 677 | 3 | Pheochromocytoma |
| 678 | 4 | Decreases the catabolism of immunoglobulins |
| 679 | 2 | Hypercalcemia |

 

| | | |
|---|---|---|
| 680 | 1 | Calcitonin |
| 681 | 3 | Medullary Ca thyroid |
| 682 | 1 | Milk alkali syndrome |
| 683 | 4 | Medullary |
| 684 | 4 | Estradiol/estrogens |
| 685 | 3 | Spleen |
| 686 | 3 | Both |
| 687 | 4 | Premature keratinisation |
| 688 | 1 | Renal Glycosuria |
| 689 | 2 | Cell-mediated immunity |
| 690 | 2 | Serum testosterone and dehydroepiandrosterone-sulfate (DHEA-S) level |
| 691 | 1 | Ret Proto Oncogene |
| 692 | 1 | Hashimotos thyroiditis |
| 693 | 1 | Anterior hypophysis |
| 694 | 3 | cAMP |
| 695 | 2 | Glycated haemoglobin |
| 696 | 2 | Testosterone |
| 697 | 3 | Excision |
| 698 | 4 | ADH |
| 699 | 1 | Meningococcal and pneumococcal at recommended interval and influenza vaccine annually |
| 700 | 4 | Demeclocycline |
| 701 | 1 | alpha 1 hydroxylase deficiency |
| 702 | 2 | Hypothyroidism |
| 703 | 4 | Functional hypothalamic pituitary axis |

 

| | | |
|---|---|---|
| 704 | 1 | 11 |
| 705 | 3 | Hyperthyroidism |
| 706 | 2 | Follicular carcinoma |
| 707 | 3 | Bacterial infection is a trigger in most patients |
| 708 | 1 | Gonadotrophin stimulation |
| 709 | 3 | Insulin |
| 710 | 1 | ADH |
| 711 | 2 | Tachycardia |
| 712 | 3 | Seoli cells |
| 713 | 1 | Type 1 DM |
| 714 | 1 | Hyperglycemia |
| 715 | 2 | Hyperparathyroidism |
| 716 | 2 | Thyrotoxicosis |
| 717 | 2 | Calcitriol |
| 718 | 2 | Cretinism |
| 719 | 3 | Elevated serum alkaline phosphatase |
| 720 | 1 | Male infeility |
| 721 | 1 | RET oncogene |
| 722 | 1 | Asprin |
| 723 | 4 | Thyroxine |
| 724 | 1 | Vit D deficiency |
| 725 | 2 | is typically seen in Type 2 diabetes mellitus |
| 726 | 2 | Hea |
| 727 | 4 | End-organ unresponsiveness to PTH |
| 728 | 1 | Ketoconazole |

 

| | | |
|---|---|---|
| 729 | 2 | Hypothyroidism |
| 730 | 3 | RET |
| 731 | 1 | Papillary |
| 732 | 2 | Hypoparathyroidism |
| 733 | 1 | Contraindicated in hypehyroidism |
| 734 | 3 | Dihydrotestosterone |
| 735 | 4 | Thiazide |
| 736 | 1 | Hodgkin's lymphoma |
| 737 | 1 | Insulin lispro |
| 738 | 2 | Ethinylestradiol |
| 739 | 2 | KussmauPs breathing |
| 740 | 1 | Lactogenesis |
| 741 | 1 | Ankle oedema |
| 742 | 4 | GDNF (glial-derived neurotrophic factor) |
| 743 | 4 | All |
| 744 | 4 | Angelman syndrome |
| 745 | 2 | Increase production of coisol |
| 746 | 3 | TSH |
| 747 | 3 | Plasma metanephrines and dexamethasone-suppressed cortisol level |
| 748 | 2 | Biguanides |
| 749 | 3 | Spironolactone |
| 750 | 2 | MODY |
| 751 | 1 | Diminishing ER-mediated negative feedback at the pituitary |
| 752 | 1 | Tyrosine hydroxylase |

 

| | | |
|---|---|---|
| 753 | 2 | Thromboembolism |
| 754 | 1 | Diarrhea |
| 755 | 1 | LH |
| 756 | 1 | Tendon xanthoma |
| 757 | 1 | Adrenal gland |
| 758 | 1 | Hypo-osmolar urine |
| 759 | 4 | Dexamethasone |
| 760 | 1 | Luteoma |
| 761 | 3 | Epididymis |
| 762 | 3 | Actrapid |
| 763 | 3 | Constitutional |
| 764 | 2 | Bleeding esophageal varices |
| 765 | 2 | Zonareticularis |
| 766 | 1 | Ligand binding |
| 767 | 3 | Hashimoto thyroiditis |
| 768 | 3 | Decreased production of LDL receptor in the adipose tissue and increases release of cholesterol from adipose tissues |
| 769 | 2 | 6 |
| 770 | 4 | Vitamin D deficiency |
| 771 | 3 | Hydrocoisone 15 mg and fludrocoisone 0.1 mg daily for life |
| 772 | 3 | Leukotrians |
| 773 | 1 | Autonomous state due to monoclonal outgrowth of previously hyperplastic parathyroid glands |
| 774 | 4 | Hyperglycemia |
| 775 | 1 | Autonomic neuropathy |

 

| | | |
|---|---|---|
| 776 | 4 | 15 million/ml |
| 777 | 3 | Paget disease |
| 778 | 2 | Increase calcium absorption from intestine |
| 779 | 3 | Oxytocin |
| 780 | 1 | ADH |
| 781 | 3 | secretion is entirely under control of hypothalamus |
| 782 | 1 | Ketoconazole |
| 783 | 3 | Small papillae having fibrovascular core projecting into the follicular lumen |
| 784 | 2 | Progesteron |
| 785 | 1 | Hypokalemia |
| 786 | 1 | Hypothalamus |
| 787 | 2 | Tamoxifen |
| 788 | 1 | Lean body mass |
| 789 | 2 | Regular |
| 790 | 4 | Type 1 diabetes |
| 791 | 4 | All of the above |
| 792 | 4 | Vasopressin |
| 793 | 1 | Lactiferous ducts |
| 794 | 2 | Letrozole |
| 795 | 2 | Myxedema |
| 796 | 1 | Tropomyosin |
| 797 | 3 | Anti-implantation effect |
| 798 | 1 | Hypothalamus |
| 799 | 4 | Most common pigmented lesion |

 

| | | |
|---|---|---|
| 800 | 3 | Osteitis fibrosa cystica |
| 801 | 1 | Degludec |
| 802 | 4 | Metabolic acidbsis |
| 803 | 4 | Low fat mobilzation |
| 804 | 4 | Osteomalacia |
| 805 | 4 | lack of hyperintense signals from the posterior pituitary |
| 806 | 1 | Bone scan |
| 807 | 2 | Primary hyperparathyroidism |
| 808 | 3 | Retinoid X receptor |
| 809 | 4 | Stridor on gently pressing lobes of thyroid |
| 810 | 4 | There are increased levels of insulin in blood |
| 811 | 3 | Surgical resection |
| 812 | 4 | Carbamazepine |
| 813 | 4 | Cyproterone is a potent antiandrogen |
| 814 | 3 | Nucleus |
| 815 | 3 | 11-ss hydroxylase deficiency |
| 816 | 4 | Hypokalemic alkalosis is seen |
| 817 | 1 | Teriparatide |
| 818 | 4 | GnRH agonists |
| 819 | 1 | Diastolic murmur |
| 820 | 2 | Diabetes insipudus |
| 821 | 1 | Vildagliptin |
| 822 | 1 | Heterotopic calcification |
| 823 | 1 | Is an oxytocin receptor antagonist |
| 824 | 1 | Decreased Bicarbonate |

 

| | | |
|---|---|---|
| 825 | 1 | More common in males |
| 826 | 1 | CAMP |
| 827 | 1 | Deposition of chondroitin sulfate |
| 828 | 1 | McCune-Albright's syndrome |
| 829 | 3 | Radioactive Ij |
| 830 | 1 | Anti-gout and Xanthine Oxidase inhibitor |
| 831 | 2 | Increased plasma reverse T3 |
| 832 | 2 | failure of erection with absent nocturnal penile tumescence (NPT) |
| 833 | 4 | Acidophilic tumour |
| 834 | 1 | Goserelin |
| 835 | 4 | Selective progesterone receptor modulator |
| 836 | 4 | Hypeension |
| 837 | 4 | vasopressin |
| 838 | 1 | FSH |
| 839 | 1 | Bicalutamide |
| 840 | 1 | 90% are malignant |
| 841 | 4 | All of the above |
| 842 | 3 | Coisol |
| 843 | 2 | Supraoptic and paraventricular nuclei |
| 844 | 1 | Dopamine |
| 845 | 1 | Pituitary tumor |
| 846 | 2 | Ketone bodies |
| 847 | 2 | ventricular tachyarrhythmias |
| 848 | 1 | Medullary carcinoma thyroid |

 

| | | |
|---|---|---|
| 849 | 1 | Atrial natriuretic peptide |
| 850 | 3 | Both |
| 851 | 1 | Achondroplasia |
| 852 | 1 | Opening of the sensitive K+ channels |
| 853 | 2 | Urinary protein >550mg perday for3 consecutive samples |
| 854 | 4 | Lispro |
| 855 | 1 | Multiple sclerosis |
| 856 | 1 | Acute pancreatitis |
| 857 | 1 | Flutamide |
| 858 | 3 | 0.9% saline |
| 859 | 2 | Brain Ischemia |
| 860 | 2 | Pituitary adenoma |
| 861 | 4 | All |
| 862 | 3 | Pioglitazone |
| 863 | 3 | Neuropathy |
| 864 | 1 | Azoospermia |
| 865 | 1 | Glycosylated hemoglobin |
| 866 | 4 | ACTH stimulation test |
| 867 | 4 | Hypothalamic hamartoma |
| 868 | 1 | Thick ascending limb of loop of Henle |
| 869 | 2 | Metformin |
| 870 | 3 | Dyshormonogenesis |
| 871 | 4 | Ketoconazole |
| 872 | 3 | Loeffler's syndrome |
| 873 | 1 | palmar plane xanthomas |

 

| | | |
|---|---|---|
| 874 | 4 | It can cause hypoglycemia |
| 875 | 4 | Increased ACTH and increased Coisol |
| 876 | 2 | Pheochromocytoma |
| 877 | 1 | Always given with insulin |
| 878 | 4 | 80% |
| 879 | 1 | 55mmol\/l |
| 880 | 3 | Pregabalin |
| 881 | 2 | Furosemide |
| 882 | 3 | Hypoglycemia |
| 883 | 1 | Nateglinide |
| 884 | 1 | T3 decrease, T4 decrease, TSH increase |
| 885 | 4 | Insulin |
| 886 | 4 | Bisphosphonates |
| 887 | 1 | MEN 1 |
| 888 | 4 | Skeletal muscle |
| 889 | 1 | Estradiol |
| 890 | 1 | Exogenous coicosteroids |
| 891 | 4 | hypercalcemia-induced defect in renal concentrating ability (nephrogenic diabetes insipidus) |
| 892 | 4 | tumor of the pancreatic beta-cells |
| 893 | 3 | Glioma |
| 894 | 1 | Neuroendocrine pa of post pituitary is involved |
| 895 | 2 | IV calcium gluconate with cardiac monitoring |
| 896 | 1 | Phenoxybenzamine |
| 897 | 3 | Acromegaly due to a GH-producing tumor that developed in adulthood. |

 

| | | |
|---|---|---|
| 898 | 3 | Diabetes mellitus |
| 899 | 3 | Erectile dysfunction |
| 900 | 1 | IncreasedACTH and increased Coisol |
| 901 | 3 | Sleep |
| 902 | 1 | Hypothalamus |
| 903 | 1 | Chlorpropamide |
| 904 | 3 | Effective in acute asthma |
| 905 | 4 | Ketogenesis 1 |
| 906 | 2 | N-methylation |
| 907 | 1 | Diplotene stage |
| 908 | 1 | It causes insulin resistance |
| 909 | 2 | neuromuscular irritability |
| 910 | 2 | Desmopressin |
| 911 | 1 | Hashimoto thyroiditis |
| 912 | 4 | Liver |
| 913 | 2 | Pseudohyperaldosteronism |
| 914 | 1 | Increased intracellular CGMP |
| 915 | 1 | Spironolactone |
| 916 | 4 | Alendronate |
| 917 | 2 | Decreased FSH |
| 918 | 4 | Pheochromocytoma |
| 919 | 4 | All the above |
| 920 | 1 | Inhibition of phospholipase A2 |
| 921 | 1 | Prolactin |
| 922 | 4 | Congenital hypothyroidism |

 

| | | |
|---|---|---|
| 923 | 3 | secondary hyperparathyroidism |
| 924 | 2 | Aldosterone |
| 925 | 2 | Tryptophan |
| 926 | 2 | Decreased bone resorption |
| 927 | 3 | Acyclovir |
| 928 | 2 | Transcription repressors |
| 929 | 1 | Maternal ovary |
| 930 | 4 | Adipose tissue |
| 931 | 1 | Osteochondroma |
| 932 | 4 | B-cell lymphoma |
| 933 | 4 | Relaxin |
| 934 | 3 | Testosterone |
| 935 | 4 | Conn's syndrome |
| 936 | 2 | ectopic parathyroid hormone (PTH) |
| 937 | 2 | 21- Hydroxylase deficiency |
| 938 | 3 | 21- Hydroxylase deficiency |
| 939 | 2 | Component of MEN- 1 |
| 940 | 4 | 1, 25-di OH-Cholecalciferol |
| 941 | 2 | Glycosylated haemoglobin |
| 942 | 3 | Eczemtaous skin disease |
| 943 | 4 | Teriparatide |
| 944 | 3 | Liver |
| 945 | 4 | Von Hippel Landau Syndrome |
| 946 | 1 | Thyroxine |
| 947 | 1 | Cytosol |

 

| | | |
|---|---|---|
| 948 | 1 | Thyroxine |
| 949 | 4 | Dexamethasone |
| 950 | 1 | Hypothyroidism |
| 951 | 2 | Hypoglycemia |
| 952 | 2 | Solitary parathyroid adenoma |
| 953 | 4 | Carbamazepine |
| 954 | 3 | Absorption of water in collecting duct |
| 955 | 1 | Chromaffin cells of adrenal medulla |
| 956 | 1 | Parathyroid |
| 957 | 1 | Low dose of Levothyroxine |
| 958 | 3 | LH |
| 959 | 1 | Raloxifen |
| 960 | 4 | Hyperkalemia |
| 961 | 4 | Choriocarcinoma |
| 962 | 1 | > 1 cm |
| 963 | 4 | Glioma |
| 964 | 3 | Low serum potassium |
| 965 | 3 | Relaxin |
| 966 | 3 | Patchy pigmentation |
| 967 | 2 | Amylin |
| 968 | 3 | Ketoconazole |
| 969 | 1 | Pre diabetes |
| 970 | 3 | Subacute granulomatous thyroiditis |
| 971 | 1 | Colon cancer |
| 972 | 4 | All of the above |

 

| | | |
|---|---|---|
| 973 | 3 | Maetabolic alkolosis |
| 974 | 3 | Osteoporosis |
| 975 | 2 | Early morning hyperglycemia |
| 976 | 3 | Glucose |
| 977 | 1 | Turner syndrome |
| 978 | 1 | GnRH analogue |
| 979 | 1 | Hyponatremia and urine sodium excretion > 20 meq/1 |
| 980 | 4 | Medullary |
| 981 | 3 | 600 mcg/day |
| 982 | 4 | Teriparatide |
| 983 | 4 | Ectopic ACTH secreting tumor |
| 984 | 3 | Sodium retention |
| 985 | 1 | Heart |
| 986 | 4 | Parathyroid hyperplasia |
| 987 | 1 | TSH levels |
| 988 | 3 | Pioglitazone |
| 989 | 3 | Regular insulin |
| 990 | 1 | LH |
| 991 | 1 | Glucagon |
| 992 | 2 | b cells |
| 993 | 3 | Glucose |
| 994 | 2 | Low T3 levels with normal T4 and TSH level |
| 995 | 4 | It can cause hypoglycemia |
| 996 | 2 | 7 hr |
| 997 | 2 | >126 |

 

| | | |
|---|---|---|
| 998 | 4 | Dihydrotestosteron |
| 999 | 1 | Seminal fluid |
| 1000 | 2 | 10 days |
| 1001 | 4 | Hepatotoxicity |
| 1002 | 3 | Cushings syndrome |
| 1003 | 4 | Menorrhagia |
| 1004 | 2 | Addison's disease |
| 1005 | 1 | Prolactin |
| 1006 | 1 | Dyslipidemia |
| 1007 | 2 | Hyponatremia |
| 1008 | 1 | Leyding cell |
| 1009 | 1 | Medullary carinoma of thyroid |
| 1010 | 4 | Medullary carcinoma of thyroid |
| 1011 | 4 | Hemoglobin A1c (HbA1c) >= 6.5% |
| 1012 | 1 | Insulin |
| 1013 | 4 | All are true |
| 1014 | 1 | Milk ejection |
| 1015 | 2 | Non-competitive and reversible carbonic anhydrase inhibitor |
| 1016 | 1 | Inhibiting bone resorption |
| 1017 | 3 | NPH insulin |
| 1018 | 4 | Graves' disease |
| 1019 | 1 | Papillary carcinoma of thyroid |
| 1020 | 1 | Involves moles and scars |
| 1021 | 1 | Flatulence |

 

| | | |
|---|---|---|
| 1022 | 3 | Vasopressin |
| 1023 | 4 | Female pseudohermaphroditism (androgenized female 46XX) |
| 1024 | 4 | Somatostatin blocks release of insulin and glucagon. |
| 1025 | 3 | Hypergammaglobulinemia |
| 1026 | 3 | decreased vitamin D |
| 1027 | 3 | Prevent de-iodination |
| 1028 | 3 | Infective diarrhea |
| 1029 | 3 | It decreases insulin resistance |
| 1030 | 3 | Ca lung with ectopic ACTH production |
| 1031 | 4 | Piloerection |
| 1032 | 4 | Medullary carcinoma thyroid |
| 1033 | 4 | Emphysematous appendicitis |
| 1034 | 1 | Papillary |
| 1035 | 4 | TR beta 2 |
| 1036 | 4 | Decresed protein breakdown |
| 1037 | 1 | McCune Albright syndrome |
| 1038 | 2 | Tyrosine Kinase |
| 1039 | 3 | Both |
| 1040 | 3 | Tumourlysis syndrome |
| 1041 | 2 | Stimulates gastrin secretion |
| 1042 | 2 | Solitary'- Adenoma |
| 1043 | 1 | Pituitary |
| 1044 | 1 | Early morning hyperglycemia |
| 1045 | 1 | a functional pituitary tumor |

 

| | | |
|---|---|---|
| 1046 | 1 | Testosterone |
| 1047 | 3 | Glucocoicoids |
| 1048 | 2 | Induces uterine contractions |
| 1049 | 1 | flutamide |
| 1050 | 1 | Hydrocoisone |
| 1051 | 3 | Hyper parathyroid |
| 1052 | 4 | SIADH |
| 1053 | 2 | 21 alpha hydroxylase |
| 1054 | 3 | Y chromosome |
| 1055 | 3 | Glargine |
| 1056 | 3 | Phenytoin |
| 1057 | 1 | Estrogen |
| 1058 | 4 | 5 years |
| 1059 | 2 | ASMAN |
| 1060 | 1 | 20th week of gestation |
| 1061 | 2 | 10 |
| 1062 | 4 | Congenital adrenal hyperplasia |
| 1063 | 3 | Thiazolidinediones |
| 1064 | 3 | Thymic hyperplasia |
| 1065 | 4 | Mixed gonadal dysgenesis |
| 1066 | 1 | Thyroxine |
| 1067 | 2 | Decrease in estrogen |
| 1068 | 4 | Exercise |
| 1069 | 2 | GLP-1 Analogue |
| 1070 | 4 | Medullary cancer thyroid |

 

| | | |
|---|---|---|
| 1071 | 1 | Adrenalectomy |
| 1072 | 2 | Gliclazide |
| 1073 | 1 | GLP-1 |
| 1074 | 2 | Leptin |
| 1075 | 3 | 1,25 dihydroxy cholecalciferol |
| 1076 | 2 | Hypehyroidism |
| 1077 | 4 | Breakdown of phospholipids |
| 1078 | 1 | Alkaline phosphatase |
| 1079 | 1 | Perikaryon of neuron |
| 1080 | 1 | Thyroxine |
| 1081 | 4 | Metabolic acidosis |
| 1082 | 1 | Pseudohypoparathyroidism |
| 1083 | 2 | Betamethasone Valerate cream 0.1% |
| 1084 | 1 | Insulin |
| 1085 | 2 | 5 - a reductase inhibitor |
| 1086 | 3 | Gastrinoma |
| 1087 | 1 | Multiple sclerosis |
| 1088 | 4 | Seen in teratoma |
| 1089 | 2 | Maglitol |
| 1090 | 3 | Thyroxine |
| 1091 | 3 | Follicular cancer |
| 1092 | 2 | Blood DHEA levels |
| 1093 | 2 | Hyperglycemia |
| 1094 | 3 | Pramlintide |
| 1095 | 2 | Anti-androgen |

 

| | | |
|---|---|---|
| 1096 | 1 | Mayer Rokitansky-46XY |
| 1097 | 3 | Atosiban |
| 1098 | 1 | Sensory polyneuropathy |
| 1099 | 3 | Increased BMR |
| 1100 | 3 | Growth hormone |
| 1101 | 3 | Kawasaki disease |
| 1102 | 3 | Associated with prolactinomas |
| 1103 | 4 | Epinephrine |
| 1104 | 2 | Pituitary |
| 1105 | 4 | Mixed gonadal dysgenesis |
| 1106 | 3 | 16 |
| 1107 | 1 | autoimmune. |
| 1108 | 4 | Increased risk of ovarian cancer |
| 1109 | 1 | Dehydroepiandrosterone (DHEA) |
| 1110 | 1 | Epinephrine |
| 1111 | 2 | Increased calcium excretion |
| 1112 | 1 | Aldosterone |
| 1113 | 4 | Cushing disease |
| 1114 | 1 | Fasting blood glucose >126 mg/dL |
| 1115 | 2 | Iodide for thyrotoxic patients before Surgery |
| 1116 | 4 | TypeII |
| 1117 | 4 | Aldosterone |
| 1118 | 2 | Proliferative phase of menstrual cycle |
| 1119 | 2 | Hypehyroidism |
| 1120 | 3 | Lowered serum alkaline phosphatase |

 

| | | |
|---|---|---|
| 1121 | 2 | Inadequate preoperative preparation |
| 1122 | 2 | Coisol |
| 1123 | 2 | Oral GTT |
| 1124 | 1 | ypophosphatasia |
| 1125 | 2 | PRL |
| 1126 | 4 | ACTH stimulation test |
| 1127 | 3 | Increases on preolonged fasting |
| 1128 | 1 | Hypophosphatemia |
| 1129 | 1 | Constitute 50% of total |
| 1130 | 1 | Decreased serum calcium and decreased PTH |
| 1131 | 1 | Lactogenesis |
| 1132 | 4 | Alcoholism |
| 1133 | 2 | Seoli cells |
| 1134 | 3 | Diabetes mellitus |
| 1135 | 4 | It decreases pulse pressure |
| 1136 | 3 | Prolactinoma |
| 1137 | 4 | decrease of B cells |
| 1138 | 1 | Sepsis |
| 1139 | 1 | Muscular hyperophy |
| 1140 | 4 | Myelin sheath membrane |
| 1141 | 4 | Aldosterone |
| 1142 | 1 | Decreased bone matrix |
| 1143 | 1 | Insulin is not used in Type II Diabetes mellitus |
| 1144 | 4 | Clobetasol propionate |
| 1145 | 2 | Oestrogen |

 

| | | |
|---|---|---|
| 1146 | 1 | Thyroid gland |
| 1147 | 3 | >l 80 mg\/dl |
| 1148 | 4 | Iatrogenic steroids |
| 1149 | 1 | Congenital Adrenal Hyperplasia (CAH) |
| 1150 | 4 | Increasing both the 7 PM and 8 PM dose of regular insulin |
| 1151 | 1 | Seoli cells |
| 1152 | 4 | ketogenesis |
| 1153 | 1 | 1 |
| 1154 | 1 | Strontium ranelate |
| 1155 | 2 | Mifepristone |
| 1156 | 4 | All the above |
| 1157 | 1 | 17-hydroxy progesterone |
| 1158 | 2 | Posterior pituitary |
| 1159 | 3 | Hashimoto's thyroiditis |
| 1160 | 3 | Increased carotene |
| 1161 | 3 | Proximal muscle weakness |
| 1162 | 1 | Adrenal coex |
| 1163 | 1 | Calcitonin |
| 1164 | 1 | Raloxifene |
| 1165 | 3 | Estrogen |
| 1166 | 1 | Acute renal failure |
| 1167 | 2 | Mucinous cystadenoma of ovary |
| 1168 | 3 | DHEA |
| 1169 | 4 | Empty sella syndrome |
| 1170 | 4 | Thyroxine |

 

| | | |
|---|---|---|
| 1171 | 3 | Glucose |
| 1172 | 3 | Diabetes |
| 1173 | 1 | 21-hydroxylase deficiency |
| 1174 | 4 | Phenoxybenzamine and propranolol |
| 1175 | 1 | Increased serum calcium |
| 1176 | 2 | Estrogen |
| 1177 | 1 | cholestatic liver disease |
| 1178 | 1 | Desmopressin |
| 1179 | 1 | High prolactin (PRL) |
| 1180 | 4 | Weight loss |
| 1181 | 2 | Progesterone |
| 1182 | 3 | Exercise |
| 1183 | 2 | Klinefelter's syndrome |
| 1184 | 2 | Low renin, high aldosterone |
| 1185 | 3 | Strong family history of breast cancer |
| 1186 | 2 | Paraganglioma |
| 1187 | 3 | Hypoglycemia |
| 1188 | 1 | Take empty stomach with plenty of water |
| 1189 | 1 | Corn-flakes |
| 1190 | 4 | SLE |
| 1191 | 3 | Azoospermia |
| 1192 | 1 | Glucosuria |
| 1193 | 1 | Distal symmetric polyneuropathy |
| 1194 | 1 | Metformin |
| 1195 | 2 | Exocytosis |

 

| | | |
|---|---|---|
| 1196 | 3 | Urine albumin |
| 1197 | 1 | Hematogenous spread |
| 1198 | 2 | Aggressive malignant tumor |
| 1199 | 1 | Postmenopausal osteoporosis |
| 1200 | 1 | Pituitary |
| 1201 | 1 | Kimmelstien Wilson lesion |
| 1202 | 1 | Pituitary tumor |
| 1203 | 2 | DDAVP |
| 1204 | 4 | Aldosterone |
| 1205 | 1 | Primary thyroid disease |
| 1206 | 4 | Super female (47 XXX) |
| 1207 | 1 | Kimmelstein Wilson change |
| 1208 | 2 | Conves androgen to estrogen |
| 1209 | 3 | Exogenous steroids |
| 1210 | 1 | Glucagonoma syndrome |
| 1211 | 2 | Thyrotoxicosis |
| 1212 | 2 | Vitamin D excess |
| 1213 | 3 | A fall in the plasma aminoacid concentration |
| 1214 | 4 | All of them |
| 1215 | 2 | Hypocalcemia |
| 1216 | 1 | Post menopausal Osteoporosis |
| 1217 | 4 | Neurohypophysis |
| 1218 | 4 | Triamcenolone |
| 1219 | 3 | Clomiphene |
| 1220 | 2 | Long terms status of blood sugar |

 

| | | |
|---|---|---|
| 1221 | 3 | Growth hormone (somatotropin, GH) |
| 1222 | 4 | Hyperurecemia |
| 1223 | 1 | Primary hyperparathyroidism |
| 1224 | 1 | >600 |
| 1225 | 2 | Adrenal medulla |
| 1226 | 3 | kallman's syndrome |
| 1227 | 2 | Argentaffin cells of small intestine |
| 1228 | 3 | Chlorpropamide |
| 1229 | 1 | Take empty stomach with plenty of water |
| 1230 | 2 | 0.04 mlU/L |
| 1231 | 3 | Accidental exogenous insulin administration |
| 1232 | 2 | Reduce plasma Ca2+ concentration |
| 1233 | 2 | Inhibit absorption of calcium |
| 1234 | 4 | Sterols |
| 1235 | 1 | Decreased serum coisol |
| 1236 | 3 | Protein Kinase A - yes; Adenylate Kinase - no; Insulin Receptor - no; Glucagon Receptor - yes; Glycerol Kinase - no |
| 1237 | 4 | absence of orgasm with normal libido and erectile function |
| 1238 | 1 | Hypokaelemia |
| 1239 | 4 | Fasting |
| 1240 | 3 | Finasteride |
| 1241 | 1 | Hashimoto thyroiditis |
| 1242 | 4 | Antidiuretic Hormone |
| 1243 | 4 | Bone collagen |
| 1244 | 2 | Osteoporosis |

 

| | | |
|---|---|---|
| 1245 | 2 | TSH receptor antibodies (TRAb) |
| 1246 | 4 | All of the above |
| 1247 | 2 | Dysmenorrhea |
| 1248 | 1 | Primary hyperparathyroidism |
| 1249 | 2 | Celiac disease |
| 1250 | 1 | Hypothyroidism |
| 1251 | 4 | Hyperaldosteronism |
| 1252 | 4 | Neurohypophysis |
| 1253 | 2 | failure of erection with absent nocturnal penile tumescence (NPT) |
| 1254 | 3 | Placental HCG |
| 1255 | 4 | Milk ejection |
| 1256 | 1 | Hypehyroidism |
| 1257 | 3 | Normal blood nitrogen |
| 1258 | 1 | Liver |
| 1259 | 2 | Papillary |
| 1260 | 1 | Papillary CA |
| 1261 | 2 | 12-24 hrs |
| 1262 | 1 | Gastrinoma |
| 1263 | 4 | Sho fontanelle |
| 1264 | 4 | All of the above |
| 1265 | 4 | Vasopressin |
| 1266 | 3 | Hypophosphatemia |
| 1267 | 4 | Phenytoin toxicity |
| 1268 | 1 | Gluconeogenesis |

 

| | | |
|---|---|---|
| 1269 | 2 | C-11 hydroxylase |
| 1270 | 2 | Prednisolone |
| 1271 | 2 | Inhibin |
| 1272 | 2 | 2 |
| 1273 | 1 | GH |
| 1274 | 3 | Insulin |
| 1275 | 2 | Kallman's syndrome |
| 1276 | 1 | Semen |
| 1277 | 4 | Orphan Annie eye nuclei |
| 1278 | 1 | GH |
| 1279 | 4 | Prednisone |
| 1280 | 1 | Primary' hyperparathyroidism |
| 1281 | 3 | Mitotane |
| 1282 | 4 | Epinephrine |
| 1283 | 4 | GH |
| 1284 | 3 | Hyperkalemia |
| 1285 | 3 | Insulin |
| 1286 | 1 | 14 days prior to mensturation |
| 1287 | 3 | Metoclopramide |
| 1288 | 1 | Addison's disease |
| 1289 | 4 | Glucokinase deficiency |
| 1290 | 4 | Insulin requirement becomes high |
| 1291 | 2 | Used in treatment of gynaecomastia |
| 1292 | 3 | Haemorrhage |
| 1293 | 4 | Insulin |

 

| | | |
|---|---|---|
| 1294 | 1 | Adrenal insufficiency |
| 1295 | 4 | It inhibits secretion of FSH |
| 1296 | 2 | Phenformin |
| 1297 | 2 | Increases prolactin release |
| 1298 | 4 | Hyperthermia |
| 1299 | 1 | Thyroid |
| 1300 | 4 | All of the above |
| 1301 | 2 | Estrogen |
| 1302 | 2 | Hyperkalemia |
| 1303 | 2 | Thyrotrophs |
| 1304 | 1 | Com flakes |
| 1305 | 4 | Decreased ketogenesis in liver |
| 1306 | 3 | Glargine |
| 1307 | 3 | Oogenesis |
| 1308 | 3 | Tolbutamide |
| 1309 | 4 | Pregnenolone |
| 1310 | 2 | Increased parathromone, decreased calcium in bone |
| 1311 | 1 | TSH |
| 1312 | 3 | K+ |
| 1313 | 2 | Transcription repressors |
| 1314 | 3 | 8 years |
| 1315 | 3 | Increase in serum calcitonin |
| 1316 | 3 | Laron dwarfism |
| 1317 | 1 | Jod-Basedow effect |
| 1318 | 1 | Papillary carcinoma |

 

| | | |
|---|---|---|
| 1319 | 4 | Mac cune albright syndrome |
| 1320 | 3 | It decreases insulin resistance |
| 1321 | 2 | Basophils |
| 1322 | 2 | Increased androgen |
| 1323 | 1 | Insulin like factor 3(INL 3) |
| 1324 | 2 | Tingling of extremities |
| 1325 | 3 | Binding to intracellular receptors |
| 1326 | 4 | Decreased K+ |
| 1327 | 3 | Growth hormone |
| 1328 | 4 | It acts on insulin gene and even in absence of insulin helps in metabolism of carbohydrate |
| 1329 | 2 | Tachycardia |
| 1330 | 1 | Increased insulin level |
| 1331 | 4 | Pregnanediol |
| 1332 | 4 | Amino acid derivatives |
| 1333 | 1 | Acarbose |
| 1334 | 4 | Calcific aoic valve disease |
| 1335 | 4 | Tc 99 scan |
| 1336 | 4 | Pregnanediol |
| 1337 | 4 | Photosensitivity |
| 1338 | 2 | Enalapril |
| 1339 | 2 | 2 |
| 1340 | 2 | Temperature lower than core body temperature |
| 1341 | 3 | Prolactind |
| 1342 | 2 | Insulin |

 

| | | |
|---|---|---|
| 1343 | 1 | DKA is commoner in type II |
| 1344 | 1 | Water deprivation test |
| 1345 | 3 | Vas deferens |
| 1346 | 4 | All of the above |
| 1347 | 1 | Finasteride |
| 1348 | 2 | Orphan Annie eye nuclei; Papillary Ca thyroid |
| 1349 | 1 | C - peptides |
| 1350 | 4 | All of the above |
| 1351 | 2 | Canaglifozin |
| 1352 | 4 | Hea |
| 1353 | 4 | Post-menopausal osteoporosis |
| 1354 | 1 | Aldose reductase pathway |
| 1355 | 1 | Marked deficiency of melanin pigment |
| 1356 | 2 | Hashimoto's disease |
| 1357 | 4 | Aoic insufficiency |
| 1358 | 4 | Atrial fibrillation |
| 1359 | 4 | All of the above |
| 1360 | 3 | Parathormone (PTH) promotes absorption of Ca++ from intestine |
| 1361 | 2 | OralGTT |
| 1362 | 3 | Adrenaline |
| 1363 | 3 | GH receptor resistance |
| 1364 | 3 | Water deprivation test is required |
| 1365 | 1 | Lugol's iodine |
| 1366 | 2 | Hypoparathyroidism |

 

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|---|---|---|
| 1367 | 3 | Ampulla |
| 1368 | 3 | TSH |
| 1369 | 1 | They do not cause Na+ and water retention |
| 1370 | 1 | Metformin |
| 1371 | 2 | Myocardial infarction |
| 1372 | 2 | Dual-x-ray absorptiometry (DXA) scan |
| 1373 | 4 | vitamin C |
| 1374 | 4 | Increased renin level |
| 1375 | 1 | Inhibits resorption |
| 1376 | 1 | Krukenberg tumor |
| 1377 | 1 | Eplerenone |
| 1378 | 3 | Anxiety neurosis |
| 1379 | 3 | Depressed tendon reflexes |
| 1380 | 1 | Adrenal adenoma |
| 1381 | 3 | Increased bih weight |
| 1382 | 2 | Random blood sugar 205 mg% with polyuria |
| 1383 | 2 | Hyperparathyroidism |
| 1384 | 1 | Distal symmetric neuropathy |
| 1385 | 1 | Pituitary adenoma |
| 1386 | 1 | cAMP |
| 1387 | 2 | Mifepristone |
| 1388 | 1 | Peptide |
| 1389 | 1 | PTH |
| 1390 | 2 | Metabolic acidosis present |
| 1391 | 4 | All the above |

 

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|---|---|---|
| 1392 | 1 | Supraoptic |
| 1393 | 4 | Methimazole |
| 1394 | 1 | Hypoglycemia |
| 1395 | 1 | MENl |
| 1396 | 1 | Uptake of Iodine by Thyroid |
| 1397 | 1 | Glucagon |
| 1398 | 2 | Progesterone |
| 1399 | 2 | It can be used for treatment of Type 1 diabetes mellitus |
| 1400 | 1 | Incresed ACTH. increased cortisol |
| 1401 | 1 | Increased muscle metabolism by excess of calcium ions |
| 1402 | 2 | Increases Urinary glucose excretion |
| 1403 | 1 | 0-3 mg |
| 1404 | 1 | Decreases HDL |
| 1405 | 1 | Diabetes |
| 1406 | 1 | Autoimmune disorder |
| 1407 | 1 | Crystalline zinc insulin |
| 1408 | 2 | 4-6 min |
| 1409 | 1 | Propylthiouracil |
| 1410 | 3 | Osteoporosis |
| 1411 | 1 | 21 hydroxylase deficiency |
| 1412 | 2 | Decreased risk of myocardial infarction |
| 1413 | 4 | carcinoid syndrome |
| 1414 | 4 | Myeloma |
| 1415 | 1 | Feedback inhibition of pituitary (causing of LH surge) |
| 1416 | 3 | Bromocriptine |

| | | |
|---|---|---|
| 1417 | 1 | Demeclocycline |
| 1418 | 4 | Hypophosphatemia |
| 1419 | 3 | Early morning serum cortisol and cosyntropin stimulation |
| 1420 | 2 | Medullary carcinoma Thyroid |
| 1421 | 3 | Stimulates prolactin initiation |
| 1422 | 1 | Thyroperoxidase antibody |
| 1423 | 1 | Conn syndrome |
| 1424 | 1 | GnRH |
| 1425 | 4 | Depressed plasma renin |
| 1426 | 1 | Contraindicated in hypeension |
| 1427 | 1 | stimulating tyrosine kinase |
| 1428 | 3 | Decreased serum Ca++ and Increased serum PTH |
| 1429 | 1 | Centripetal obesity |
| 1430 | 2 | It has an antagonist effect on the breast but an agonist effect on the uterus. |
| 1431 | 1 | Thyroid Dyshormonogenesis |
| 1432 | 2 | During intrauterine life testes has no endocrine role in fetus |
| 1433 | 2 | GH assay |
| 1434 | 1 | 24 hour urinary metanephrine |
| 1435 | 4 | Oligoasthenozoospermia |
| 1436 | 3 | Hypothyroidism |
| 1437 | 2 | Used in treatment of gynaecomastia |
| 1438 | 2 | Coicosteroid |
| 1439 | 3 | Octreotide |
| 1440 | 1 | TSH inhibiting TRH release from hypothalamus |

 

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|---|---|---|
| 1441 | 2 | Zn |
| 1442 | 2 | Insulin independent |
| 1443 | 2 | Made of 2 chains with 3 disulphide bonds |
| 1444 | 1 | Excess glucagon |
| 1445 | 4 | Restore the function of Beta cells |
| 1446 | 3 | Estradiol |
| 1447 | 4 | All the above |
| 1448 | 1 | Regular insulin |
| 1449 | 3 | Prolactin estimation |
| 1450 | 1 | Alcoholism |
| 1451 | 1 | Bone age less than chronological age |
| 1452 | 1 | Chromaffin cells |
| 1453 | 3 | Estrogen |
| 1454 | 3 | Alcoholism |
| 1455 | 2 | Parathyroid hormone related protein (PTHrP) |
| 1456 | 3 | Increased excretion from kidney |
| 1457 | 4 | Dopamine |
| 1458 | 2 | Betamethasone |
| 1459 | 4 | Aspirin |
| 1460 | 1 | Desmopressin |
| 1461 | 1 | Sildenafil |
| 1462 | 4 | Risperidone |
| 1463 | 4 | GLUT 4 |
| 1464 | 2 | Cushing's syndrome |
| 1465 | 1 | Cranial diabetes insipidus |

 

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|---|---|---|
| 1466 | 2 | Phosphodiesterase - 5 |
| 1467 | 2 | Captopril |
| 1468 | 1 | 3rd month |
| 1469 | 1 | Levonorgesterol |
| 1470 | 4 | Both |
| 1471 | 3 | Glargine |
| 1472 | 2 | Reserpine |
| 1473 | 4 | De Quervain thyroiditis |
| 1474 | 4 | Prader-Willi syndrome. |
| 1475 | 4 | Protamine- zinc insulin |
| 1476 | 3 | Normal saline |
| 1477 | 3 | Hormones that stimulate the secretion of other endocrine glands |
| 1478 | 1 | Parathormone |
| 1479 | 1 | Circulating islet cell antibodies are usually found |
| 1480 | 3 | Hyperkalemia |
| 1481 | 1 | Pregnenolone |
| 1482 | 4 | Anaplastic carcinoma |
| 1483 | 4 | Iatrogenic steroids |
| 1484 | 2 | Placenta |
| 1485 | 3 | Diffuse sclerosing variant |
| 1486 | 4 | Paradoxical sleep |
| 1487 | 1 | Diabetes mellitus |
| 1488 | 2 | 46XY |
| 1489 | 3 | Gynaecomastia |

 

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|---|---|---|
| 1490 | 1 | Centchroman |
| 1491 | 1 | Fasting plasma glucose - 100 to 125 mg/dl |
| 1492 | 1 | Sepsis |
| 1493 | 1 | Estrous cycle |
| 1494 | 3 | LH surge |
| 1495 | 4 | All the above |
| 1496 | 2 | Metabolic alkalosis |
| 1497 | 3 | Patients with distal muscle weakness |
| 1498 | 2 | Determination of iron saturation |
| 1499 | 3 | Its level decreases during starvation |
| 1500 | 1 | 50 300 |
| 1501 | 2 | Hyperkalemia |
| 1502 | 3 | Milk alkali syndrome |
| 1503 | 1 | Cabbage |
| 1504 | 3 | Bradycardia |
| 1505 | 1 | Hydrocortisone |
| 1506 | 4 | Psoriasis |
| 1507 | 4 | Serial 24 hours test for catecholamines, meta-nephrines and vanillylamandelic acid excretion |
| 1508 | 1 | Ketonemia |
| 1509 | 3 | 90% of non familial cases are bilateral |
| 1510 | 1 | Adrenal nodular enlargement |
| 1511 | 2 | Reserpine |
| 1512 | 1 | Grave's disease |
| 1513 | 4 | All of the above |

 

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|---|---|---|
| 1514 | 2 | Nodular glomerulosclerosis |
| 1515 | 3 | Increased Inhibin levels |
| 1516 | 1 | Calcitonin |
| 1517 | 1 | Pituitary macroadenoma |
| 1518 | 4 | Low urine and high plasma osmolality |
| 1519 | 2 | Oxytocin |
| 1520 | 1 | Papillary |
| 1521 | 2 | Cabergoline |
| 1522 | 1 | 5- a redutase deficiency |
| 1523 | 2 | decreased urinary concentrating ability and proteinuria |
| 1524 | 3 | Increased risk of ovarian hyperstimulation and polycystic ovaries |
| 1525 | 2 | High TSH |
| 1526 | 2 | Osteoclasts |
| 1527 | 1 | Tamoxifen |
| 1528 | 1 | Vincristine |
| 1529 | 3 | Denosumab |
| 1530 | 4 | Grave Disease |
| 1531 | 4 | Testosterone |
| 1532 | 1 | Decreases hepatic glucose production |
| 1533 | 2 | Decreased TSH, increased total thyroxine |
| 1534 | 2 | Isotonic |
| 1535 | 1 | Osteopetrosis |
| 1536 | 4 | Salivary gland |
| 1537 | 4 | Low serum phophate |

 

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|---|---|---|
| 1538 | 3 | Diabetes mellitus |
| 1539 | 3 | primary hypothyroidism |
| 1540 | 4 | Type IV |
| 1541 | 1 | It is effective orally |
| 1542 | 1 | 4 ml/hr |
| 1543 | 3 | AHLSTROM'S syndrome |
| 1544 | 2 | Pheochromocytoma |
| 1545 | 1 | Anterior pituitary |
| 1546 | 3 | Medullary |
| 1547 | 4 | Devolopment of foetus |
| 1548 | 4 | Thyroid agenesis |
| 1549 | 3 | Hypoglycemia is a common and serious side effect |
| 1550 | 4 | Papillae lined by well-differentiated squamous epithelium |
| 1551 | 3 | Cortisone |
| 1552 | 1 | diabetes mellitus (DM) |
| 1553 | 2 | triglycerides > 1000 |
| 1554 | 2 | Calcitriol |
| 1555 | 1 | Raloxifene |
| 1556 | 1 | End organ target receptor insensitivity |
| 1557 | 4 | Low blood oressure due to volume depletion |
| 1558 | 1 | Addison's disease |
| 1559 | 3 | Hot flushes |
| 1560 | 1 | Glucagon production |
| 1561 | 1 | It is sho acting |
| 1562 | 1 | Papillary carcinoma |

 

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|---|---|---|
| 1563 | 1 | Inhibiton of phospholipase A2 |
| 1564 | 1 | IODIDE UPTAKE |
| 1565 | 1 | Lispro |
| 1566 | 1 | Fanconis anemia |
| 1567 | 1 | Acetazolamide is a carbonic acid anhydrase stimulant |
| 1568 | 1 | Hypoglycemia |
| 1569 | 4 | Hypothyroidism |
| 1570 | 4 | Incresed protein synthesis in muscle |
| 1571 | 4 | veebra |
| 1572 | 2 | Calcitonin |
| 1573 | 4 | All of the above |
| 1574 | 4 | Goiter is rare |
| 1575 | 3 | Bilateral in 10 percnt cases |
| 1576 | 4 | TSH-secreting pituitary adenoma |
| 1577 | 2 | Cortical hyperplasia |
| 1578 | 2 | Bromocriptine |
| 1579 | 2 | Suppresses hypothalamic - pituitary axis |
| 1580 | 4 | Hydrocortisone |
| 1581 | 1 | High sugar |
| 1582 | 2 | Gunstock deformity |
| 1583 | 2 | triglycerides > 1000 |
| 1584 | 4 | Mithramycin |
| 1585 | 1 | Linagliptin |
| 1586 | 1 | Liver |
| 1587 | 1 | Adrenal medulla |

 

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|---|---|---|
| 1588 | 2 | Hyperkalemia |
| 1589 | 1 | Growth retardation |
| 1590 | 2 | Adrenal |
| 1591 | 2 | Obtain T4 and TSH; begin intravenous thyroid hormone and glucocorticoid. |
| 1592 | 2 | 5 alpha reductase enzyme |
| 1593 | 4 | Selenium |
| 1594 | 1 | Follicular Carcinoma of thyroid |
| 1595 | 1 | Small cell carcinoma lung |
| 1596 | 3 | Hypercalcemia |
| 1597 | 4 | Coisol regulates plasma volume |
| 1598 | 2 | Proinsulin |
| 1599 | 2 | Bromocriptine |
| 1600 | 2 | 25-50% |
| 1601 | 2 | Diabetes mellitus |
| 1602 | 4 | pseudohypoparathyroidism |
| 1603 | 3 | Reidel thyroiditis |
| 1604 | 1 | Papillary carcinoma thyroid |
| 1605 | 3 | Mitotic division |
| 1606 | 1 | Hydrocoisone |
| 1607 | 1 | Coisol |
| 1608 | 4 | Sufentanil |
| 1609 | 4 | Pituitary adenomas |
| 1610 | 2 | Lipolysis |
| 1611 | 1 | Acute illness |

 

| | | |
|---|---|---|
| 1612 | 1 | Carcinoma breast |
| 1613 | 2 | 11b-hydrolase |
| 1614 | 2 | self-induced vomiting |
| 1615 | 2 | Enzyme-linked |
| 1616 | 3 | Giant cell infiltration |
| 1617 | 4 | Weight gain |
| 1618 | 4 | Metabolism of carbohydrates |
| 1619 | 3 | Thyroprivic hypothyroidism |
| 1620 | 2 | Amiodarone |
| 1621 | 1 | Astrocytoma |
| 1622 | 4 | All of the above |
| 1623 | 4 | Hypotension |
| 1624 | 1 | Prolactin |
| 1625 | 1 | Obesity |
| 1626 | 1 | Parathyroid adenoma |
| 1627 | 4 | HbAlC |
| 1628 | 1 | White matter |
| 1629 | 1 | Estrogen |
| 1630 | 2 | Hyperkalemia |
| 1631 | 1 | Carcinoid tumors |
| 1632 | 4 | None |
| 1633 | 4 | Etidronate |
| 1634 | 3 | Increased phosphate reabsorption in kidney J |
| 1635 | 4 | tumor of the pancreatic beta-cells |
| 1636 | 1 | Spontaneous premature labour |

 

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|---|---|---|
| 1637 | 3 | Loffler's syndrome |
| 1638 | 2 | Bromocriptine |
| 1639 | 1 | Insulin |
| 1640 | 2 | Hypopituitarism |
| 1641 | 2 | Urinary catecholamines |
| 1642 | 2 | Insulin requirement is nil or modest |
| 1643 | 2 | Structural resemblance to sulfonamides |
| 1644 | 2 | Bleeding esophageal varices |
| 1645 | 2 | fine needle aspiration (FNA) biopsy |
| 1646 | 3 | Adrenal |
| 1647 | 1 | 10-20 IU/L |
| 1648 | 1 | Papillary carcinoma thyroid |
| 1649 | 2 | Cardiac arrhythmia |
| 1650 | 4 | Malignancy |
| 1651 | 4 | None |
| 1652 | 1 | VMA |
| 1653 | 3 | Recovery with euthyroidism |
| 1654 | 2 | Koilocytosis |
| 1655 | 2 | inhibition of thyroidal organic binding and coupling reactions |
| 1656 | 4 | SIADH |
| 1657 | 2 | Papillary |
| 1658 | 4 | Increased secretion of Gastrin |
| 1659 | 4 | Oxytocin |
| 1660 | 2 | Septic shock |

 

| | | |
|---|---|---|
| 1661 | 3 | Starvation |
| 1662 | 4 | Acarbose |
| 1663 | 3 | The Seoli cells secrete androgen-binding protein (ABP), relaxin, and MIS |
| 1664 | 4 | Medullary |
| 1665 | 2 | Somatomedian |
| 1666 | 1 | Hyperparathyroidism |
| 1667 | 1 | Parathormone level is increased |
| 1668 | 3 | Hypophosphatemia |
| 1669 | 3 | Increased carotene |
| 1670 | 1 | 24 hour urinary HIAA |
| 1671 | 1 | Rx of the primary cause |
| 1672 | 2 | Increased plasma levels of TSH |
| 1673 | 3 | Microcephaly |
| 1674 | 2 | Obesity is a feature |
| 1675 | 3 | Testosterone |
| 1676 | 1 | Glucocoicoids inhibit both prostaglandin production and inflammatory cells. |
| 1677 | 2 | Organs of Zuckerkandl |
| 1678 | 3 | Collagen vascular disease |
| 1679 | 2 | Ampulla |
| 1680 | 3 | Propylthiouracil |
| 1681 | 4 | 70 mg% |
| 1682 | 1 | It is effective orally |
| 1683 | 2 | Primary Hyperparathyroidism |
| 1684 | 3 | c-AMP |

 

| | | |
|---|---|---|
| 1685 | 3 | Medulloblastoma |
| 1686 | 3 | decrease in lipolysis |
| 1687 | 4 | Immediately at time of diagnosis |
| 1688 | 2 | It can cause hypotension |
| 1689 | 3 | Symmetrical sensory neuropathy |
| 1690 | 1 | Excess iodine intake causes hypothyroidism |
| 1691 | 2 | Evaporation |
| 1692 | 3 | Parathormone |
| 1693 | 1 | Alkaline phosphatase |
| 1694 | 3 | glomerulosclerosis with mesangial thickening |
| 1695 | 3 | Blood insulin levels annually |
| 1696 | 2 | Growth hormone |
| 1697 | 3 | Follicular |
| 1698 | 2 | Secondary hyperparathyroidism |
| 1699 | 4 | Coronary hea disease |
| 1700 | 4 | Sarcoidosis |
| 1701 | 1 | Primary hyperparathyroidism |
| 1702 | 4 | Vitamin D |
| 1703 | 4 | Piloerection |
| 1704 | 1 | 90% are malignant |
| 1705 | 2 | Exenatide |
| 1706 | 1 | Anti-gout and Xanthine Oxidase inhibitor |
| 1707 | 3 | Type II DM |
| 1708 | 3 | Zinc |
| 1709 | 3 | Cabergoline |

 

| | | |
|---|---|---|
| 1710 | 1 | 21- hydroxylase deficiency |
| 1711 | 3 | Propylthiouracil |
| 1712 | 1 | Marfan's syndrome |
| 1713 | 1 | Hydrocortisone |
| 1714 | 2 | Decreased thyroid-stimulating hormone level |
| 1715 | 4 | Methimazole |
| 1716 | 3 | VIP |
| 1717 | 3 | Exenatide |
| 1718 | 2 | Vitamin D intoxication |
| 1719 | 2 | Acromegaly |
| 1720 | 2 | Hydroxylation |
| 1721 | 1 | Prediabetes |
| 1722 | 4 | 72 hours after bih |
| 1723 | 4 | Androgen |
| 1724 | 1 | Hashimoto's Thyroiditis |
| 1725 | 3 | TSH |
| 1726 | 3 | alopecia |
| 1727 | 4 | Posterior subcapsular cataract |
| 1728 | 4 | Increased serum TSH |
| 1729 | 3 | Hyperparathyroidism |
| 1730 | 4 | Hypernatremia |
| 1731 | 1 | Strontium ranelate |
| 1732 | 1 | 2 million |
| 1733 | 3 | Removal of cholesterol from acrosome |
| 1734 | 4 | all of the above |

 

| | | |
|---|---|---|
| 1735 | 3 | Neuropathy |
| 1736 | 4 | Sipple syndrome |
| 1737 | 1 | Autoimmune adrenalitis |
| 1738 | 2 | 140 mg\/dl |
| 1739 | 1 | Finasteride |
| 1740 | 1 | Used in androgenic alopecia |
| 1741 | 3 | Iron |
| 1742 | 2 | \|Triglycerides |
| 1743 | 2 | Hyperparathyroidism |
| 1744 | 4 | Adenylate cyclase |
| 1745 | 1 | alcoholism |
| 1746 | 1 | Phenylephrine |
| 1747 | 1 | Propranolol |
| 1748 | 2 | 17 hydroxylase |
| 1749 | 1 | Diastolic HTN without oedema |
| 1750 | 2 | It can be used for treatment of type 1 diabetes mellitus |
| 1751 | 2 | Immediately reduces gonadotropin secretion |
| 1752 | 4 | Glioma |
| 1753 | 2 | Steroids |
| 1754 | 2 | Growth hormone |
| 1755 | 1 | Pregnenolone |
| 1756 | 1 | SRY gene |
| 1757 | 2 | Fructose |
| 1758 | 1 | Estrogen |
| 1759 | 3 | Saline infusion and furosemide |

 

| | | |
|---|---|---|
| 1760 | 1 | Lean body mass |
| 1761 | 1 | Early morning hyperglycemia |
| 1762 | 2 | Vitamin D excess |
| 1763 | 1 | Ointment |
| 1764 | 1 | Decrease Serum PTH |
| 1765 | 4 | Thyroid stimulating hormone |
| 1766 | 1 | GnRH agonist |
| 1767 | 3 | Metformin |
| 1768 | 3 | Hemochromatosis |
| 1769 | 1 | Increased muscle metabolism by excess of calcium ions |
| 1770 | 4 | Antibody against thyroid stimulating hormone (TSH) |
| 1771 | 3 | PGE2 |
| 1772 | 1 | Diabetes mellitus |
| 1773 | 4 | Urine albumin > 300mg/ 24 hrs |
| 1774 | 2 | Hypercalcemia |
| 1775 | 1 | Neovascularisation |
| 1776 | 4 | Insulin detemir |
| 1777 | 3 | Thyroxin |
| 1778 | 4 | Acarbose |
| 1779 | 3 | Follicular hyperplasia with scalloping of colloid |
| 1780 | 1 | Hyperparathyroidism |
| 1781 | 2 | 20,22-desmolase |
| 1782 | 3 | Canagliflozin |
| 1783 | 3 | Lipolysis |
| 1784 | 3 | Metformin |

 

| | | |
|---|---|---|
| 1785 | 1 | Cataract |
| 1786 | 4 | DM with acute MI |
| 1787 | 1 | Fluorosis |
| 1788 | 2 | Destroys organ of coi |
| 1789 | 1 | Conjugated equines estrogen |
| 1790 | 3 | Glargine |
| 1791 | 2 | Increases tone of uterine muscle |
| 1792 | 2 | Phenformin |
| 1793 | 2 | Astrocytoma |
| 1794 | 1 | Dexamethasone |
| 1795 | 4 | Iodide trapping |
| 1796 | 3 | Propylthiouracil |
| 1797 | 3 | Hypocalcemia |
| 1798 | 2 | Hashimoto thyroiditis |
| 1799 | 1 | Hyperkalemia |
| 1800 | 3 | McArdle's disease (glycogen storage disease) |
| 1801 | 1 | MEN1 |
| 1802 | 2 | Tuberous sclerosis |
| 1803 | 4 | All of these |
| 1804 | 1 | a cell |
| 1805 | 1 | RET Proto Oncogene |
| 1806 | 3 | hypertension |
| 1807 | 3 | TSH |
| 1808 | 2 | Adrenal |
| 1809 | 4 | Galactopoiesis |

 

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|---|---|---|
| 1810 | 4 | Increasing insulin secretion from pancreas |
| 1811 | 2 | Hyperosmolar nonketotic state |
| 1812 | 3 | Nuclear membrane |
| 1813 | 1 | Thyrotoxicosis |
| 1814 | 2 | Female pseudohermaphroditism |
| 1815 | 3 | LH |
| 1816 | 3 | Propyl thiouracil |
| 1817 | 2 | Steroids |
| 1818 | 3 | Antibiotics |
| 1819 | 4 | Progesterone |
| 1820 | 4 | Propylthiouracil oral |
| 1821 | 3 | FSH |
| 1822 | 1 | The atrophic gastritis leads to vitamin B12 malabsorption. |
| 1823 | 1 | Metyrapone |
| 1824 | 3 | Male reproductive tract |
| 1825 | 3 | Glycosylated hemoglobin |
| 1826 | 2 | weight loss |
| 1827 | 3 | Prolactinoma |
| 1828 | 4 | Hashimoto's thyroiditis |
| 1829 | 1 | Proinsulin |
| 1830 | 3 | Oligomenorrhea |
| 1831 | 3 | Reduced thyroxine synthesis by iodides |
| 1832 | 4 | Diarrhea |
| 1833 | 2 | Familial glucocorticoid deficiency |
| 1834 | 2 | Cushing's syndrome |

 

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|---|---|---|
| 1835 | 3 | MRI of the sella turcica |
| 1836 | 2 | 21 a- hydroxylase |
| 1837 | 3 | Bromocriptine |
| 1838 | 2 | polycystic ovarian disease (PCOD) |
| 1839 | 3 | Specific gravity > 1.020 |
| 1840 | 2 | \| permeability of glucose across cell membrane against glucose gradient |
| 1841 | 3 | Ingestion of food |
| 1842 | 3 | HLA DR3-DR4 |
| 1843 | 4 | Stimulated by exercise |
| 1844 | 3 | Glucose-6-phosphatase |
| 1845 | 3 | Adrenaline |
| 1846 | 1 | 2-3 million |
| 1847 | 4 | Tyrosine |
| 1848 | 4 | Propylthiouracil |
| 1849 | 4 | Day time duties |
| 1850 | 1 | Ovarian dysgerminoma |
| 1851 | 4 | Denusomab |
| 1852 | 2 | Alcohol intoxication |
| 1853 | 4 | All of the above |
| 1854 | 1 | Alcohol |
| 1855 | 4 | ACE inhibitors |
| 1856 | 2 | Propylthiouracil |
| 1857 | 1 | Water clear cells in parathyroid hyperplasia |
| 1858 | 2 | Decreased K+ |

 

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|---|---|---|
| 1859 | 1 | Vitamin D levels |
| 1860 | 4 | Adrenocortical adenoma |
| 1861 | 4 | Insulin dependent |
| 1862 | 4 | None of the above |
| 1863 | 3 | Ileo-caecal tuberculosis |
| 1864 | 2 | Start low dose levothyroxine and repeat TSH in 6 weeks. |
| 1865 | 1 | Sta levothyroxine at low dose |
| 1866 | 3 | Basal acid output (BAO) less than 15 mEq/litre |
| 1867 | 1 | Majority of the circulating T3 remains in bound form |
| 1868 | 2 | Follicular thyroid carcinoma |
| 1869 | 2 | Adrenal medulla |
| 1870 | 2 | Interstitial Nephritis |
| 1871 | 3 | Hypoglycemia |
| 1872 | 1 | Sulfonamide hypersensitivity |
| 1873 | 4 | Weight loss |
| 1874 | 4 | Phaeochromocytoma |
| 1875 | 4 | All |
| 1876 | 1 | Dexamethasone |
| 1877 | 4 | Uterus |
| 1878 | 2 | Calmodulin |
| 1879 | 1 | Cholesterol |
| 1880 | 2 | Duloxetine |
| 1881 | 1 | microaneurysms and hemorrhage (dot and blot) |
| 1882 | 1 | Thyroid |
| 1883 | 2 | Autoimmunity |

 

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|---|---|---|
| 1884 | 1 | Urinary VMA estimation |
| 1885 | 2 | Seminal vesicle |
| 1886 | 3 | Inhibition of Na+K+ATPase |
| 1887 | 2 | Osteoporosis |
| 1888 | 2 | Tumour lysis syndrome |
| 1889 | 4 | Vasopressin |
| 1890 | 3 | Krabbe's disease |
| 1891 | 3 | Bromocriptine |
| 1892 | 1 | Gastrinoma |
| 1893 | 1 | High first pass metabolism |
| 1894 | 1 | HRCT |
| 1895 | 1 | 21 hydroxylase deficiency |
| 1896 | 3 | GLP- 1 |
| 1897 | 2 | Osteoporosis |
| 1898 | 4 | Waterhouse-Friderichsen syndrome |
| 1899 | 4 | All of the above. |
| 1900 | 4 | Chronic inflammation |

 