



**THE UNIVERSITY OF ZAMBIA  
SCHOOL OF MEDICINE**

**DEPARTMENT OF OBSTETRICS & GYNAECOLOGY  
OBG 5010 END OF TERM 1 THEORY EXAM  
DATE: 18<sup>TH</sup> December 2019**

**COMPUTER NUMBER.....**

**INSTRUCTIONS:**

1. Time allocated is 3 hours
2. There are 2 sections in this paper, which consists of six short structured essay questions and 40 single best answer questions
3. Answer the essays in the booklet provided. Ensure each answer starts on a separate paper as these will be separated and given to different markers.
4. This whole question paper with your computer number on it should be handed in at the end of the exam with your answer book.

**Section B-Structured Essay Questions. Answer all.**

1. Mrs Peggy Mwansa is a 22yrs old Primigravida who is a known sickle cell disease patient. She presents to the emergency ward at 30 weeks of gestation with an acute onset of chest pain and fever.

- Outline the effects of SCD on pregnancy. [5 marks]
- What are the effects of pregnancy on SCD? [5 marks]
- Briefly describe the investigations and treatment of the complications stated in (A) above. [10 marks]

2. A 36 year old lady, Ms Annie Malungo with no living child lost her 6<sup>th</sup> pregnancy at 20 weeks 8 months ago. Two years prior to this, she had a set of twins who were delivered prematurely at 28 weeks gestation but died in the Neonatal Intensive Care Unit on day 2 of birth. Her first pregnancy in 1995 went to term, delivered a 3.5kg baby who died due to meningitis at 2 years of age. Following that, she had a 3 spontaneous miscarriages at a gestational age of 16 weeks at an interval of two years.

She has come for her antenatal booking today.

- Fill in the past Obstetric record below (4 Marks)

Name:

Age

Gravidity

Parity.

| Year | Gestation | Mode of Delivery | Fetal outcome | Fetal Weight | Comments |
|------|-----------|------------------|---------------|--------------|----------|
|      |           |                  |               |              |          |
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History reveals that she has no symptoms except a slight headache, she appears slightly pale. Her vitals/ features are as follows:  
BP 145/90, Pulse 104/min, Weight 96kg, Urinalysis proteinuria 2+, Sugar 1+

- B. What routine tests do you know are done in pregnant women (3 marks)
- C. What routine medicines do you give for prophylaxis in pregnancy (3 marks)
- D. What risk factors/ danger signs can you identify in this patient (5 marks)
- E. What are the potential complications this lady may develop (3 marks)
- F. What additional tests would you ask for in this patient, giving your reasons (2 marks).

3. A 24-year-old primigravida with a body mass index of 40, at 23 weeks gestation presents to your antenatal clinic for the first time with a random blood sugar of 19.6 mmol/l. She gives history of her blood sugars being normal during her routine medical checks prior to falling pregnant.

- A. What is your diagnosis? (2 marks)
- B. What other investigations are you going to request for her? stressing the main focus for each (5 marks)
- C. Outline the possible maternal and fetal complications for this condition (10 marks)
- D. Give the general principles of managing this patient (3 marks)

4. Mrs Susan Mala is 26 years. She is married and nulliparous. She has a normal menstrual cycle and her last period was 10 days ago.

Today she comes in with complaints of right sided abdominal pain, with low fever and vomiting for 1 day

A pelvic ultra sound scan was ordered and shows; non-gravid uterus with a right sided adnexae mass measuring 7.2cm x 6.4 cm x 5 cm. There is some fluid collection in the pouch of Douglas.

Her full blood count reveals the following FBC: Hb: 10.2g/dL WBC:  $1.0 \times 10^6/L$   
Neutrophils= 78% and Lymphocytes=20%

- A. What is possible diagnosis? (2 marks)
- B. Mention any 3 differential diagnosis? (3 marks)
- C. What Further investigations would you like to carry out? (3 marks)
- D. How will you manage her? (2 marks)

5. Miscarriage is a common early pregnancy complication.

A. Fill in the missing details about the different types of miscarriage from 1-15 (Make a table in your answer sheet) (15 marks)

| Type of miscarriage | B-hCG                      | Uterine size       | Cervix | Blood loss | Pain     | management |
|---------------------|----------------------------|--------------------|--------|------------|----------|------------|
| Threatened          | 1.....                     | 2.....             | Closed | 3.....     | 4.....   | 5.....     |
| 6.....              | normal for gestational age | smaller than dates | open   | 7.....     | Present  | 8.....     |
| 9.....              | normal for gestational age | smaller than dates | Closed | 10.....    | 11.....  | 12.....    |
| Missed              | 13.....                    | Variable           | 14...  | Variable   | variable | 15.....    |

B. Give an example for each of the following causes of miscarriages: (1 mark each total=5)

- Endocrine disorders
- Infections
- Immunological disorders
- Chromosomal disorders
- Abnormalities of the uterus

6. Cervical cancer is one of the top causes of cancer related deaths in Zambian women.

- Briefly discuss the various methods used for screening for cervical cancer. (5 marks)
- List the methods of management of Cervical Intraepithelial Neoplasms (CIN). (3 marks)
- Which 2 Human Papilloma virus (HPV) strains are commonly implicated in causing cervical cancer? (2 marks)
- What are the HPV vaccines available? (3 marks)
- Which HPV vaccine is used in Zambia? (2 marks)

**END OF PAPER**