

National Board of Examinations

Question Paper Name : DrNB Clinical Immunology and Rheumatology Paper3
Subject Name : DrNB Clinical Immunology and Rheumatology Paper3
Duration : 180
Total Marks : 100
Display Marks: No

Maximum Instruction Time : 0

Question Number : 1 Question Id : 32718740684 Consider As Subjective : Yes

Please write your answers in the answer booklet within the allotted pages as follows:-

Question Number	Answer to be attempted within	Question Number	Answer to be attempted within
Q. 1	Page 1-5	Q. 6	Page 26-30
Q. 2	Page 6-10	Q. 7	Page 31-35
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Q. 4	Page 16-20	Q. 9	Page 41-45
Q. 5	Page 21-25	Q. 10	Page 46-50

1. a) 2019 ACR/EULAR classification criteria for SLE. [5]
- b) Instruments used to assess disease activity. [2]
- c) Definitions of low disease activity and remission. [3]

Question Number : 2 Question Id : 32718740685 Consider As Subjective : Yes

A 32-year-old woman presents with Raynaud's phenomenon, sclerodactyly, digital ulcers and dysphagia. Anti-Scl-70 is positive in ENA profile. HRCT thorax shows ILD with ground-glass opacities.

- a) Discuss how will you monitor the progress of disease in patient. [5]
- b) What are the treatment options available for progressive skin disease? [5]

Question Number : 3 Question Id : 32718740686 Consider As Subjective : Yes

A 46-year-old woman complains of dryness of mouth and eyes for 2 years, with fatigue and arthralgia. Schirmer's test is positive. ENA - anti-Ro/SSA positive, salivary gland biopsy shows focal lymphocytic sialadenitis. Discuss:

- a) USG findings in Sjogren's syndrome. [2]
- b) Evaluation of systemic involvement. [2]
- c) Pathogenesis Sjogren's syndrome. [3]
- d) Management of sicca symptoms and systemic disease. [3]

Question Number : 4 Question Id : 32718740687 Consider As Subjective : Yes

A 25-year-old woman referred for further evaluation in view of high-titer speckled pattern ANA, strongly positive anti-U1 RNP done for evaluation of arthralgia.

- a) Discuss the relevant further work-up in the outpatient department you would like to do. [4]
- b) Discuss the importance of antibody titers in diagnosis or monitoring of asymptomatic patients with or without pre-existing rheumatic disease. [6]

Question Number : 5 Question Id : 32718740688 Consider As Subjective : Yes

A 28-year-old woman presents with progressive proximal muscle weakness for 3 months, difficulty climbing stairs and Gottron's papules on MCP joints. CK 2400 IU/L, EMG shows myopathic changes, MRI thigh shows muscle edema.

- a) Discuss the role of myositis-specific antibodies in predicting course and prognosis in this patient. [4]
- b) How do you differentiate polymyositis, dermatomyositis and inclusion body myositis on biopsy? [6]

Question Number : 6 Question Id : 32718740689 Consider As Subjective : Yes

- a) Evolution of criteria over decades for diagnosing fibromyalgia syndrome. [4]
- b) Mechanisms for pain in fibromyalgia. [4]
- c) Somatic associations of fibromyalgia. [2]

Question Number : 7 Question Id : 32718740690 Consider As Subjective : Yes

A 72-year-old man presents with sudden-onset symmetrical swelling and pitting edema of both hands and feet for 3 months. He has morning stiffness, synovitis of wrists and MCPs, but no deformity. RF, anti-CCP and ANA are negative. ESR is 90 mm/hr. Ultrasound of hand shows extensor tenosynovitis. He reports 5 kg unintentional weight loss. Write about following regarding this case:

- a) Important differentials for this case. [2]
- b) Proposed pathogenesis and the hallmark imaging findings. [3]
- c) How would you differentiate RS3PE from elderly-onset RA and polymyalgia rheumatica? [3]
- d) Significance of malignancy in RS3PE. [2]

Question Number : 8 Question Id : 32718740691 Consider As Subjective : Yes

- a) Draw a schematic diagram of the inflammasome. [5]
- b) Discuss cryopyrinopathies. [5]

Question Number : 9 Question Id : 32718740692 Consider As Subjective : Yes

A 36-year-old female with systemic lupus erythematosus (SLE) treated with ELNT cyclophosphamide followed by maintenance with mycophenolate for 2 years presents with persistent proteinuria of 1.5 gm per day . She has no known co-morbidities. A repeat renal biopsy is done.

- a) Discuss the possible renal biopsy findings. [3]
- b) Assuming there is proliferative nephritis, discuss evidence for further options available for further therapy. [5]
- c) What is the likely effect on renal function in the event of a pregnancy? [2]

Question Number : 10 Question Id : 32718740693 Consider As Subjective : Yes

Regarding ANCA associated vasculitis:

- a) How do ANCAs contribute to the development of AAV? [3]
- b) Discuss the recommendations for performance of ANCA assays. [3]
- c) Discuss cardiac involvement and cardiac imaging in AAV. [4]