

National Board of Examinations

Question Paper Name :	DrNB Clinical Immunology and Rheumatology Paper2
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DrNB Clinical Immunology and Rheumatology Paper2

Group Number :	1
Group Id :	3271871919
Group Maximum Duration :	0
Group Minimum Duration :	180
Show Attended Group? :	No
Edit Attended Group? :	No
Group Marks :	100
Is this Group for Examiner? :	No
Examiner permission :	Cant View
Show Progress Bar? :	No

DrNB Clinical Immunology and Rheumatology Paper2

Section Id :	3271871922
Section Number :	1

Section type : Offline
Mandatory or Optional : Mandatory
Number of Questions to be attempted : 10
Section Marks : 100
Enable Mark as Answered Mark for Review and Clear Response : Yes
Maximum Instruction Time : 0
Sub-Section Number : 1
Sub-Section Id : 3271871926
Question Shuffling Allowed : No
Is Section Default? : null

Question Number : 1 Question Id : 32718718802 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

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
Q. 3	Page 11-15	Q. 8	Page 36-40
Q. 4	Page 16-20	Q. 9	Page 41-45
Q. 5	Page 21-25	Q. 10	Page 46-50

1. Regarding pathology based therapy in Psoriatic arthritis:

- What are the different prominent tissue specific pathogenic mechanisms in different tissues affected in psoriatic arthritis? [3]
- Role of small molecules in management of psoriatic arthritis. [4]
- Components of minimal disease activity in psoriatic arthritis. [3]

Question Number : 2 Question Id : 32718718803 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

A 45-year-old lady presented with 3 months' history of pain and swelling of small joints of hand and feet along with early morning stiffness of 45 min:

- a) Describe the determinants of progression of early-stage undifferentiated arthritis to rheumatoid arthritis. [5]
- b) Briefly discuss the clinical trials in early-stage undifferentiated arthritis. [5]

Question Number : 3 Question Id : 32718718804 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Enthesitis is one of the hallmarks of spondyloarthritis:

- a) Describe the contribution of enthesitis in pathophysiology of axial spondyloarthritis. [4]
- b) Describe the various imaging modalities to diagnose enthesitis. [3]
- c) Discuss the treatment approaches to enthesitis. [3]

Question Number : 4 Question Id : 32718718805 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

A 66-year-old lady presented with severe dryness of eyes and mouth with dental carries:

- a) Describe the main pathogenic pathways implicated in primary Sjogren's syndrome as evidenced by genetic and epigenetic studies. [6]
- b) What is the mechanism of action of Ianalumab? [2]
- c) Discuss the possible reasons for failure of clinical trials in Sjogren's syndrome. [2]

Question Number : 5 Question Id : 32718718806 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Glucocorticoid induced osteoporosis (GIOP):

- a) Describe the pathophysiology of glucocorticoid induced osteoporosis. [3]

b) How to investigate for GIOP. [3]

c) Management of GIOP. [4]

Question Number : 6 Question Id : 32718718807 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

In osteoarthritis:

a) Describe the role of MRI in diagnosis and management of osteoarthritis of knee. [4]

b) Write briefly on targeted drug delivery for treatment of osteoarthritis. [4]

c) Nerve growth factor directed therapy in osteoarthritis. [2]

Question Number : 7 Question Id : 32718718808 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

a) Discuss briefly the incidence and recurrence of congenital heart blocks(CHB) associated with anti-Ro/La antibodies. [2]

b) Describe pathogenic mechanisms in autoimmune CHB. [5]

c) Discuss evidence based immunomodulatory therapy for prevention of CHB. [3]

Question Number : 8 Question Id : 32718718809 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Basic calcium phosphate (BCP) crystal deposition disease:

a) Describe the clinical syndromes associated with BCP crystal deposition disease. [4]

b) What are the other differential diagnosis in a case of suspected BCP crystal disease. [3]

c) Identification of BCP crystals by microscopy. [3]

Question Number : 9 Question Id : 32718718810 Question Type : SUBJECTIVE Consider As

Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

A 33-year-old gentleman presented with acute pain and swelling of right 1st MTP joint of 2 days' duration. The gout was the most likely differential considered:

- a) Describe the role of fructose in generation of uric acid. [3]

- b) Describe the cellular response to uric acid crystals. [4]

- c) Discuss the CARES trial in brief comparing the cardiovascular and all cause mortality between febuxostat and allopurinol. [3]

Question Number : 10 Question Id : 32718718811 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Regarding reactive arthritis:

- a) Discuss the pathogenesis of Chlamydia induced reactive arthritis. [5]

- b) Diagnosis and management of Chlamydia induced reactive arthritis. [2+3]