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POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

MD (OBSTETRICS & GYNAECOLOGY) EXAMINATION – AUGUST 2022

Date:- 3rd August 2022

Time:- 1.00 p.m. – 4.00 p.m.

Answer **all six (06)** questions.

Each question should be answered in a **separate book**.

SHORT ANSWER QUESTIONS

1. Discuss evolution of concepts influencing the management of first stage of labour. (100 marks)
2. Briefly describe how the normal menstruation is regulated and describe the mechanisms of action of pharmacological agents in controlling heavy menstrual bleeding. Compare and contrast the use of locally acting agent as compared to endometrial ablation procedures in the management of heavy menstrual bleeding.

STRUCTURED ESSAY QUESTIONS

3. A 17-year-old girl presents with absence of menarche. Her breast development has been spontaneous and corresponds to Tanner Stage 4. Her FSH level is closer to lower limit of normal range.
 - 3.1. Mention the differential diagnoses. (25 marks)
 - 3.2. Outline the relevant features you would look for in the history and examination giving reasons. (35 marks)
 - 3.3. List the relevant investigations you would carry out and describe how you would arrive at a final diagnosis. (40 marks)

Contd..../2-

4. Preterm labour accounts for a significant burden of the global perinatal mortality and morbidity. In Sri Lanka it is a major financial, health and a social burden.

4.1. Briefly discuss the methods available for prediction of threatened preterm labour. (25 marks)

4.2. Evaluate the strategies available for prevention of preterm labour. (35 marks)

4.3. Briefly justify the principles of management of a woman at 28 weeks of gestation in preterm labour. (40 marks)

5.

5.1. List potential Rhesus sensitization events in pregnancy and delivery. (10 marks)

5.2. Briefly describe the management of following scenarios in relation to principles on prevention of Rhesus isoimmunization. (50 marks)

5.2.1. All D negative pregnant women who have not been previously sensitized.

5.2.2. Following delivery of a live baby.

5.2.3. In the event of an intrauterine death (IUD), where fetal blood sample has not been obtained.

5.2.4. Where intra-operative cell salvage (ICS) is used during Caesarean section in a D negative previously non-sensitised women, where cord blood group is confirmed as D positive.

5.3. A 34-year-old Rhesus negative pregnant women is referred to you at 27 weeks in her third pregnancy with anti-D antibody titers of 1:64. She has a past obstetric history of intra-uterine death at 29 weeks due to hydrops fetalis.

Discuss the management (40 marks)

Contd.../3-

6.

6.1. Briefly describe the pathogenesis of tissue adhesions following surgery.
(30 marks)

6.2. Outline the importance of adhesions in gynaecological practice.
(20 marks)

6.3. Critically evaluate the measures available to minimise postoperative adhesions.
(50 marks)