

**POSTGRADUATE INSTITUTE OF MEDICINE**  
**UNIVERSITY OF COLOMBO**

**MD (OBSTETRICS & GYNAECOLOGY) EXAMINATION –**  
**OCTOBER 2023**

Date: 4<sup>th</sup> October 2023

Time: 1.00 p.m. – 4.00 p.m.

**SHORT ANSWER QUESTIONS**

1. Critically evaluate the management options of pain and fertility associated with pelvic endometriosis throughout the life cycle of a woman.

(100 marks)

2. The World Health Organization has identified quality of care for women and children as a priority in addressing preventable maternal and child mortality and states that enhancing the provision of respectful maternity care can improve the obstetric outcomes in low middle income countries.

Discuss how Sri Lankan maternity services can enhance the quality of care by improving the components of respectful maternity care.

(100 marks)

**STRUCTURED ESSAY QUESTIONS**

3. A 34-year-old primigravida presents to the antenatal clinic for routine follow-up at confirmed 32 weeks of gestation. On examination, symphysis-pubis fundal height measurement is 28 cm. She is referred for fetal wellbeing assessment.

- 3.1. Explain the diagnostic criteria for early and late-onset fetal growth restriction in the absence of congenital anomalies. (25 marks)

- 3.2. Compare the clinical characteristics of early- and late-onset fetal growth restriction. (25 marks)

- 3.3. Discuss the scientific basis of available methods of antenatal fetal surveillance in the growth restricted fetus. (50 marks)

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4. A 35-year-old nulliparous woman attends gynaecology clinic to discuss how she can reduce her risk of developing ovarian cancer, because her mother and older sister have both been diagnosed with it.
  - 4.1. How would you assess her risk of developing ovarian cancer and what are the implications of this assessment for her and her family? (50 marks)
  - 4.2. If she chooses a surgical option, what issues should be discussed with her prior to surgery? (35 marks)
  - 4.3. Outline the tumour markers associated with histological types of ovarian malignancies. (15 marks)
  
5. A 29-year-old woman delivered her 3<sup>rd</sup> child vaginally half an hour ago. Her 2<sup>nd</sup> stage of labour was prolonged due to occipito-posterior position. The baby weighed 4kg and there was excessive liquor. After the delivery of the placenta, the patient developed post-partum haemorrhage (PPH) with a blood loss of over 1 liter.
  - 5.1. Outline the possible causes of PPH in this patient. (20 marks)
  - 5.2. Give a critical account of initial management modalities in this situation. (30 marks)
  - 5.3. Discuss the surgical options which might be necessary for this patient giving reasons. (30 marks)
  - 5.4. Outline strategies to reduce morbidity and mortality from PPH at an institutional level. (20 marks)
  
6.
  - 6.1. Outline how urinary continence is maintained in females. (15 marks)
  - 6.2. Discuss the surgical treatment options available to a 55-year-old mother of two children, with proven stress urinary incontinence, who has failed to respond to conservative management options. (40 marks)
  - 6.3. She presents to the clinic with persistence of urinary incontinence, one month after a surgical procedure for urinary incontinence. Outline the differential diagnosis. (10 marks)
  - 6.4. Describe the evaluation of this patient. (35 marks)