



D.PHARMA EXIT EXAM

ARAMBH SERIES

SUBJECT

PHARMACOLOGY



**TIME-
08:00 P.M**



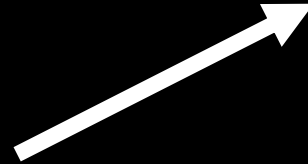
40 QUESTIONS WITH DETAILED EXPLANATION

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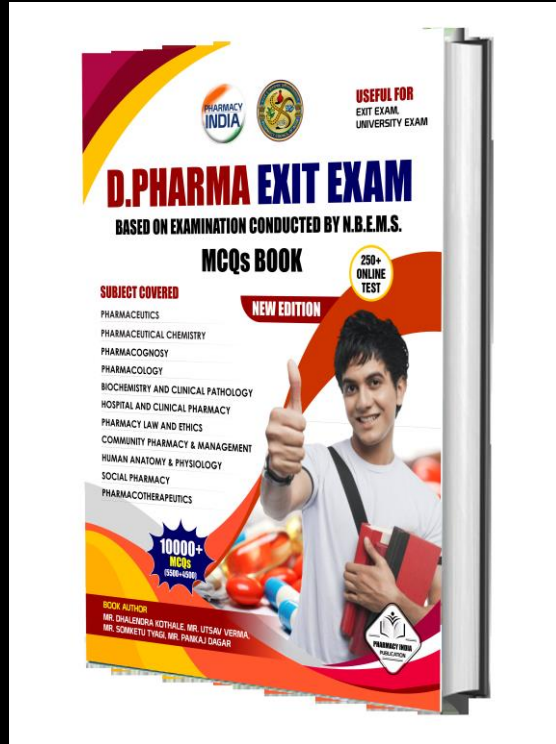
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1. Which of the following is a key pharmacokinetic difference between phenytoin and valproic acid?

A) Phenytoin undergoes zero-order kinetics, while valproic acid follows first-order kinetics.

B) Valproic acid is a highly protein-bound drug compared to phenytoin.

C) Phenytoin is primarily excreted unchanged in the urine, while valproic acid undergoes significant hepatic metabolism.

D) Valproic acid has a shorter half-life than phenytoin.





1. Which of the following is a key pharmacokinetic difference between phenytoin and valproic acid?

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C) Phenytoin is primarily excreted unchanged in the urine, while valproic acid undergoes significant hepatic metabolism.

D) Valproic acid has a shorter half-life than phenytoin.





Answer: A) Phenytoin undergoes zero-order kinetics, while valproic acid follows first-order kinetics.

Explanation:

Phenytoin exhibits zero-order kinetics at therapeutic levels, meaning that a constant amount of drug is eliminated per unit time, leading to potential toxicity at higher doses. Valproic acid, however, follows first-order kinetics, where a constant percentage of the drug is eliminated, allowing for a more predictable dosing relationship.





2. Which of the following is a contraindication for the use of direct oral anticoagulants (DOACs)?

- A) Atrial fibrillation
- B) Chronic kidney disease (CKD)
- C) Active gastrointestinal bleeding
- D) Recent joint replacement surgery





2. Which of the following is a contraindication for the use of direct oral anticoagulants (DOACs)?

- A) Atrial fibrillation
- B) Chronic kidney disease (CKD)
- C) Active gastrointestinal bleeding
- D) Recent joint replacement surgery





Answer: C) Active gastrointestinal bleeding

Explanation:

DOACs, such as rivaroxaban and apixaban, are contraindicated in patients with active gastrointestinal bleeding due to the increased risk of severe bleeding complications. Careful consideration must be given to patients with CKD, but they may still be prescribed under certain conditions with appropriate monitoring.





3. Which class of drugs is most effective in reducing mortality in patients with heart failure with reduced ejection fraction (HFrEF)?

- A) Diuretics**
- B) ACE inhibitors**
- C) Beta-blockers**
- D) Aldosterone antagonists**





3. Which class of drugs is most effective in reducing mortality in patients with heart failure with reduced ejection fraction (HFrEF)?

- A) Diuretics
- B) ACE inhibitors
- C) Beta-blockers**
- D) Aldosterone antagonists





Answer: C) Beta-blockers

Explanation:

Beta-blockers, specifically carvedilol, bisoprolol, and metoprolol succinate, have been shown to reduce mortality and hospitalizations in patients with HFrEF. They counteract the harmful effects of increased sympathetic nervous system activity and improve cardiac function over time.





4. What is the primary mechanism of action of clopidogrel?

- A) Inhibition of cyclooxygenase
- B) Inhibition of platelet glycoprotein IIb/IIIa receptors
- C) Inhibition of the P2Y₁₂ receptor
- D) Inhibition of thromboxane A₂ synthesis





4. What is the primary mechanism of action of clopidogrel?

- A) Inhibition of cyclooxygenase
- B) Inhibition of platelet glycoprotein IIb/IIIa receptors
- C) Inhibition of the P2Y₁₂ receptor**
- D) Inhibition of thromboxane A₂ synthesis





Answer: C) Inhibition of the P2Y12 receptor

Explanation:

Clopidogrel is an antiplatelet medication that irreversibly inhibits the P2Y12 receptor on platelets, preventing ADP-mediated activation and aggregation. This action helps to reduce the risk of thrombotic events in patients with cardiovascular diseases.





5. Which drug is considered the treatment of choice for acute exacerbations of chronic obstructive pulmonary disease (COPD)?

- A) Theophylline**
- B) Systemic corticosteroids**
- C) Long-acting beta-agonists (LABAs)**
- D) Anticholinergics**





5. Which drug is considered the treatment of choice for acute exacerbations of chronic obstructive pulmonary disease (COPD)?

- A) Theophylline
- B) Systemic corticosteroids**
- C) Long-acting beta-agonists (LABAs)
- D) Anticholinergics





Answer: B) Systemic corticosteroids

Explanation:

Systemic corticosteroids are the first-line treatment for acute exacerbations of COPD. They reduce inflammation in the airways, improve lung function, and hasten recovery. Short courses of oral prednisone are typically used during exacerbations.





6. Which of the following adverse effects is most commonly associated with the use of thiazide diuretics?

- A) Hyperkalemia
- B) Hyponatremia
- C) Hyperuricemia
- D) Hypocalcemia





6. Which of the following adverse effects is most commonly associated with the use of thiazide diuretics?

- A) Hyperkalemia
- B) Hyponatremia
- C) Hyperuricemia**
- D) Hypocalcemia





Answer: C) Hyperuricemia

Explanation:

Thiazide diuretics can lead to hyperuricemia, which may precipitate gout attacks. This occurs due to decreased renal clearance of uric acid. While hyponatremia is also a possible side effect, hyperuricemia is more characteristic of thiazide therapy.





7. Which of the following medications requires regular monitoring of serum levels due to its narrow therapeutic index?

- A) Amiodarone**
- B) Lithium**
- C) Metformin**
- D) Simvastatin**





7. Which of the following medications requires regular monitoring of serum levels due to its narrow therapeutic index?

- A) Amiodarone
- B) Lithium**
- C) Metformin
- D) Simvastatin





Answer: B) Lithium

Explanation:

Lithium has a narrow therapeutic index, meaning that the difference between therapeutic and toxic levels is small. Regular monitoring of serum lithium levels is essential to avoid toxicity, which can lead to serious neurological and renal complications.





8. What is the mechanism of action of metformin?

- A) Increases insulin secretion from the pancreas
- B) Inhibits hepatic glucose production
- C) Enhances glucose uptake in peripheral tissues
- D) Slows gastric emptying





8. What is the mechanism of action of metformin?

- A) Increases insulin secretion from the pancreas
- B) Inhibits hepatic glucose production**
- C) Enhances glucose uptake in peripheral tissues
- D) Slows gastric emptying





Answer: B) Inhibits hepatic glucose production

Explanation:

Metformin primarily works by decreasing hepatic glucose production, particularly from gluconeogenesis. It also enhances insulin sensitivity in peripheral tissues and has a modest effect on increasing glucose uptake, but its primary action is at the liver level.





9. Which of the following is a potential serious adverse effect of the medication lisinopril?

- A) Hyperkalemia
- B) Hypocalcemia
- C) Thrombocytopenia
- D) Hepatotoxicity

■





9. Which of the following is a potential serious adverse effect of the medication lisinopril?

- A) Hyperkalemia**
- B) Hypocalcemia**
- C) Thrombocytopenia**
- D) Hepatotoxicity**

■





Answer: A) Hyperkalemia

Explanation:

Lisinopril, an ACE inhibitor, can cause hyperkalemia due to its effect on renal function and the inhibition of aldosterone secretion, which normally promotes potassium excretion. Monitoring potassium levels is essential, especially in patients with renal impairment or those taking potassium-sparing diuretics.





10. What is the primary purpose of using a beta-agonist in the management of asthma?

- A) Decrease airway inflammation
- B) Relax bronchial smooth muscle
- C) Inhibit mucus production
- D) Enhance pulmonary compliance





10. What is the primary purpose of using a beta-agonist in the management of asthma?

A) Decrease airway inflammation

B) Relax bronchial smooth muscle

C) Inhibit mucus production

D) Enhance pulmonary compliance





Answer: B) Relax bronchial smooth muscle

Explanation:

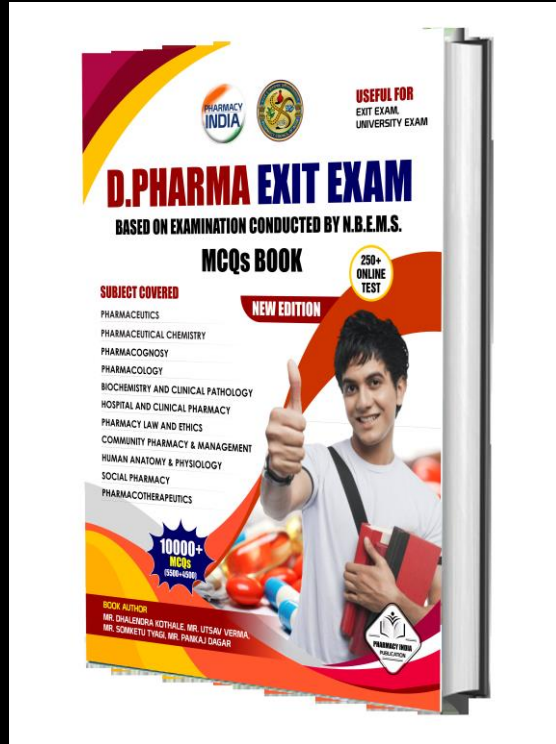
Beta-agonists, such as albuterol, primarily work by stimulating beta-2 adrenergic receptors in the bronchial smooth muscle, leading to bronchodilation and relief of acute asthma symptoms. They do not directly address inflammation, which is managed by corticosteroids.





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11. Which of the following antiretroviral agents is known to cause lipodystrophy?

- A) NRTIs**
- B) NNRTIs**
- C) Protease inhibitors**
- D) Integrase inhibitors**





11. Which of the following antiretroviral agents is known to cause lipodystrophy?

- A) NRTIs
- B) NNRTIs
- C) Protease inhibitors**
- D) Integrase inhibitors





Answer: C) Protease inhibitors

Explanation:

Protease inhibitors, such as indinavir and lopinavir, are associated with metabolic side effects, including lipodystrophy, characterized by fat redistribution (lipohypertrophy and lipoatrophy). These agents can also contribute to insulin resistance and dyslipidemia.





12. What is a common adverse effect of long-term use of proton pump inhibitors (PPIs)?

- A) Osteoporosis
- B) Hypomagnesemia
- C) Renal failure
- D) Gastric cancer





12. What is a common adverse effect of long-term use of proton pump inhibitors (PPIs)?

- A) Osteoporosis
- B) Hypomagnesemia**
- C) Renal failure
- D) Gastric cancer





Answer: B) Hypomagnesemia

Explanation:

Long-term use of PPIs can lead to hypomagnesemia, as they inhibit the absorption of magnesium in the intestines. This deficiency can result in muscle spasms, arrhythmias, and seizures. While osteoporosis is also a concern, hypomagnesemia is a direct consequence of PPI use.





13. Which of the following is the most significant risk factor for developing acute kidney injury (AKI) when using NSAIDs?

- A) Dehydration**
- B) Chronic liver disease**
- C) Age over 60**
- D) Concurrent use of aspirin**





13. Which of the following is the most significant risk factor for developing acute kidney injury (AKI) when using NSAIDs?

- A) Dehydration**
- B) Chronic liver disease**
- C) Age over 60**
- D) Concurrent use of aspirin**





Answer: A) Dehydration

Explanation:

Dehydration is a significant risk factor for AKI in patients taking NSAIDs because it can reduce renal blood flow and lead to acute tubular injury. NSAIDs can further compromise renal function by inhibiting prostaglandins, which are essential for maintaining renal perfusion.





14. Which of the following drugs is a potent CYP450 inhibitor that can lead to increased serum concentrations of other drugs metabolized by this pathway?

- A) Rifampin
- B) Ketoconazole
- C) St. John's Wort
- D) Carbamazepine





14. Which of the following drugs is a potent CYP450 inhibitor that can lead to increased serum concentrations of other drugs metabolized by this pathway?

- A) Rifampin
- B) Ketoconazole**
- C) St. John's Wort
- D) Carbamazepine





Answer: B) Ketoconazole

Explanation:

Ketoconazole is a potent inhibitor of the CYP450 enzyme system, particularly CYP3A4. It can increase the serum concentrations of other drugs metabolized by this pathway, potentially leading to toxicity. This property is critical when considering drug-drug interactions in patients on multiple medications.





15. Which medication is primarily used in the management of chronic heart failure and has been shown to improve both symptoms and mortality?

- A) Digoxin**
- B) Hydralazine**
- C) Sacubitril/valsartan**
- D) Furosemide**





15. Which medication is primarily used in the management of chronic heart failure and has been shown to improve both symptoms and mortality?

- A) Digoxin
- B) Hydralazine
- C) Sacubitril/valsartan**
- D) Furosemide





Answer: C) Sacubitril/valsartan

Explanation:

Sacubitril/valsartan (Entresto) combines a neprilysin inhibitor with an angiotensin receptor blocker (ARB). It has been shown to improve symptoms and reduce mortality in patients with chronic heart failure with reduced ejection fraction (HFrEF), making it a preferred choice in management.





16. What is the major mechanism of action of nitrates in the treatment of angina pectoris?

- A) Decrease heart rate
- B) Increase myocardial oxygen demand
- C) Dilate coronary arteries and reduce preload
- D) Inhibit platelet aggregation





16. What is the major mechanism of action of nitrates in the treatment of angina pectoris?

- A) Decrease heart rate
- B) Increase myocardial oxygen demand
- C) Dilate coronary arteries and reduce preload
- D) Inhibit platelet aggregation





Answer: C) Dilate coronary arteries and reduce preload

Explanation:

Nitrates primarily act by dilating vascular smooth muscle, which decreases preload (the volume of blood returning to the heart) and dilates coronary arteries, improving blood flow to the myocardium. This reduces myocardial oxygen demand and alleviates angina symptoms.





17. Which of the following is the primary side effect of antipsychotic medications, particularly first-generation (typical) agents?

- A) Weight gain**
- B) Extrapyramidal symptoms**
- C) Insomnia**
- D) Sexual dysfunction**





17. Which of the following is the primary side effect of antipsychotic medications, particularly first-generation (typical) agents?

- A) Weight gain
- B) Extrapyramidal symptoms**
- C) Insomnia
- D) Sexual dysfunction





Answer: B) Extrapyramidal symptoms

Explanation:

First-generation antipsychotics are associated with extrapyramidal symptoms, which include tremors, rigidity, bradykinesia, and tardive dyskinesia due to their dopamine D2 receptor antagonism in the basal ganglia. Second-generation antipsychotics may cause metabolic side effects, such as weight gain.





18. Which of the following drugs is known for its potential to cause serotonin syndrome?

- A) Fluoxetine**
- B) Gabapentin**
- C) Lithium**
- D) Dextromethorphan**





18. Which of the following drugs is known for its potential to cause serotonin syndrome?

- A) Fluoxetine**
- B) Gabapentin**
- C) Lithium**
- D) Dextromethorphan**





Answer: A) Fluoxetine

Explanation:

Fluoxetine is a selective serotonin reuptake inhibitor (SSRI) that increases serotonin levels in the brain. When combined with other serotonergic agents (e.g., MAOIs, certain opioids, or St. John's Wort), it can lead to serotonin syndrome, a potentially life-threatening condition characterized by agitation, hyperreflexia, and autonomic instability.





19. Which of the following vaccines is contraindicated in pregnancy?

- A) Influenza (inactivated)
- B) Tdap
- C) MMR
- D) Hepatitis B





19. Which of the following vaccines is contraindicated in pregnancy?

A) Influenza (inactivated)

B) Tdap

C) MMR

D) Hepatitis B





Answer: C) MMR

Explanation:

The MMR vaccine (measles, mumps, rubella) is a live attenuated vaccine and is contraindicated in pregnancy due to the theoretical risk of harm to the fetus. Pregnant women are advised to receive the vaccine before conception or postpartum if they are not immune.





20. Which of the following is a common side effect of thiazolidinediones (TZDs)?

- A) Hyperkalemia
- B) Weight gain
- C) Hypoglycemia
- D) Diarrhea





20. Which of the following is a common side effect of thiazolidinediones (TZDs)?

- A) Hyperkalemia
- B) Weight gain**
- C) Hypoglycemia
- D) Diarrhea





Answer: B) Weight gain

Explanation:

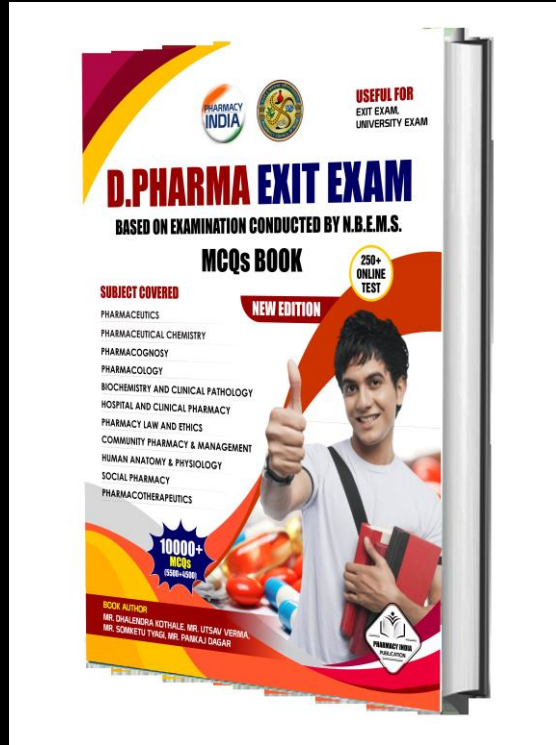
Thiazolidinediones, such as pioglitazone and rosiglitazone, can cause weight gain due to fluid retention and increased fat deposition. While they improve insulin sensitivity, the associated weight gain can be a concern, particularly in patients with heart failure.





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21. What is the primary role of atorvastatin in cardiovascular disease management?

- A) Decrease triglyceride levels
- B) Lower LDL cholesterol levels
- C) Increase HDL cholesterol levels
- D) Prevent platelet aggregation





21. What is the primary role of atorvastatin in cardiovascular disease management?

- A) Decrease triglyceride levels
- B) Lower LDL cholesterol levels**
- C) Increase HDL cholesterol levels
- D) Prevent platelet aggregation





Answer: B) Lower LDL cholesterol levels

Explanation:

Atorvastatin is a statin that primarily lowers low-density lipoprotein (LDL) cholesterol levels. This reduction in LDL cholesterol is crucial for reducing the risk of cardiovascular events, such as heart attacks and strokes.





22. Which of the following medications is effective for the prophylaxis of migraine headaches?

- A) Acetaminophen
- B) Propranolol
- C) Sumatriptan
- D) Ibuprofen





22. Which of the following medications is effective for the prophylaxis of migraine headaches?

- A) Acetaminophen
- B) Propranolol**
- C) Sumatriptan
- D) Ibuprofen





Answer: B) Propranolol

Explanation:

Propranolol, a beta-blocker, is commonly used for the prophylaxis of migraine headaches. It helps to reduce the frequency and severity of migraines, though its exact mechanism in this context is not completely understood.





23. Which of the following is a common side effect of long-term use of corticosteroids?

- A) Cushing's syndrome
- B) Hyperkalemia
- C) Bradycardia
- D) Respiratory depression





23. Which of the following is a common side effect of long-term use of corticosteroids?

- A) Cushing's syndrome**
- B) Hyperkalemia**
- C) Bradycardia**
- D) Respiratory depression**





Answer: A) Cushing's syndrome

Explanation:

Long-term use of corticosteroids can lead to Cushing's syndrome, characterized by weight gain, facial rounding, and increased blood glucose levels, among other symptoms. This condition results from excess cortisol exposure due to steroid therapy.





24. Which of the following is a significant interaction associated with warfarin therapy?

- A) Increased potassium levels with ACE inhibitors
- B) Decreased effectiveness with high-fiber diets
- C) Enhanced anticoagulant effect with macrolide antibiotics
- D) Increased absorption with antacids





24. Which of the following is a significant interaction associated with warfarin therapy?

- A) Increased potassium levels with ACE inhibitors
- B) Decreased effectiveness with high-fiber diets
- C) Enhanced anticoagulant effect with macrolide antibiotics**
- D) Increased absorption with antacids





Answer: C) Enhanced anticoagulant effect with macrolide antibiotics

Explanation:

Macrolide antibiotics can inhibit cytochrome P450 enzymes (particularly CYP3A4), which metabolize warfarin, leading to an increased risk of bleeding due to enhanced anticoagulant effects. Careful monitoring of INR is essential during such interactions.





25. Which of the following drugs is indicated for the management of hyperthyroidism?

- A) Levothyroxine
- B) Methimazole
- C) Radioactive iodine
- D) Both B and C





25. Which of the following drugs is indicated for the management of hyperthyroidism?

- A) Levothyroxine
- B) Methimazole**
- C) Radioactive iodine
- D) Both B and C





Answer: D) Both B and C

Explanation:

Both methimazole and radioactive iodine are used in the management of hyperthyroidism.

Methimazole inhibits thyroid hormone synthesis, while radioactive iodine selectively destroys hyperactive thyroid tissue, reducing hormone levels.





26. Which of the following is the primary mechanism of action of losartan?

- A) Calcium channel blockade
- B) Alpha-1 receptor blockade
- C) Angiotensin II receptor antagonism
- D) Inhibition of renin release





26. Which of the following is the primary mechanism of action of losartan?

- A) Calcium channel blockade
- B) Alpha-1 receptor blockade
- C) Angiotensin II receptor antagonism**
- D) Inhibition of renin release





Answer: C) Angiotensin II receptor antagonism

Explanation:

Losartan is an angiotensin II receptor blocker (ARB) that prevents angiotensin II from exerting its effects on blood vessels and aldosterone secretion, leading to vasodilation and reduced blood pressure.





27. Which of the following is a first-line treatment for generalized anxiety disorder (GAD)?

- A) Buspirone
- B) Lorazepam
- C) Fluoxetine
- D) Hydroxyzine





27. Which of the following is a first-line treatment for generalized anxiety disorder (GAD)?

- A) Buspirone
- B) Lorazepam
- C) Fluoxetine**
- D) Hydroxyzine





Answer: C) Fluoxetine

Explanation:

Selective serotonin reuptake inhibitors (SSRIs), such as fluoxetine, are considered first-line treatment options for generalized anxiety disorder (GAD) due to their efficacy in reducing anxiety symptoms and their favorable side effect profile compared to benzodiazepines, which are more suitable for short-term use.





28. What is the primary risk associated with the use of high-dose aspirin in patients with cardiovascular disease?

- A) Renal failure
- B) Gastrointestinal bleeding
- C) Hyperglycemia
- D) Liver toxicity





28. What is the primary risk associated with the use of high-dose aspirin in patients with cardiovascular disease?

- A) Renal failure
- B) Gastrointestinal bleeding**
- C) Hyperglycemia
- D) Liver toxicity





Answer: B) Gastrointestinal bleeding

Explanation:

High-dose aspirin can lead to gastrointestinal bleeding due to its effect on the gastric mucosa, where it inhibits cyclooxygenase and reduces protective prostaglandin synthesis. Regular monitoring and prophylactic measures are necessary for patients on high-dose aspirin therapy.





29. Which of the following medications is classified as an anticholinergic and is used for overactive bladder?

- A) Oxybutynin
- B) Duloxetine
- C) Tamsulosin
- D) Mirabegron





29. Which of the following medications is classified as an anticholinergic and is used for overactive bladder?

- A) Oxybutynin
- B) Duloxetine
- C) Tamsulosin
- D) Mirabegron





Answer: A) Oxybutynin

Explanation:

Oxybutynin is an anticholinergic medication used to treat overactive bladder by inhibiting involuntary bladder contractions, thus reducing urinary urgency and frequency. It works by blocking the action of acetylcholine at muscarinic receptors in the bladder.





30. Which class of antihypertensive agents is most effective in preventing heart failure in patients with hypertension?

- A) Calcium channel blockers
- B) Beta-blockers
- C) ACE inhibitors
- D) Diuretics





30. Which class of antihypertensive agents is most effective in preventing heart failure in patients with hypertension?

- A) Calcium channel blockers
- B) Beta-blockers
- C) ACE inhibitors**
- D) Diuretics





Answer: C) ACE inhibitors

Explanation:

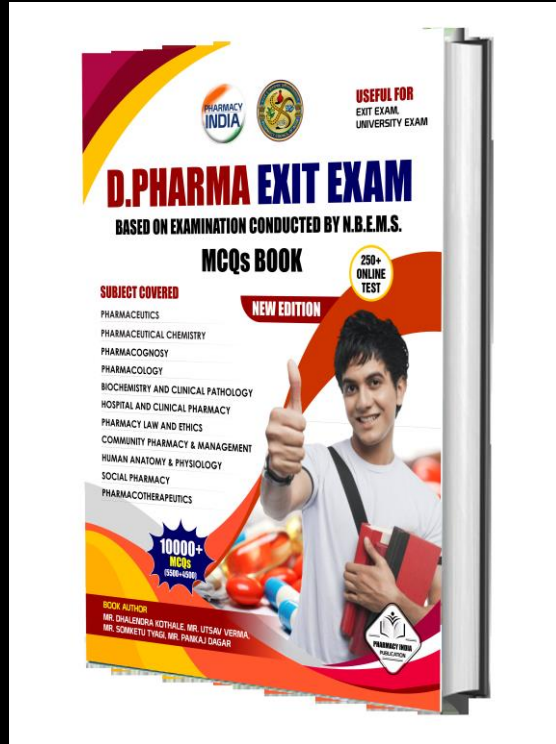
ACE inhibitors have been shown to not only effectively lower blood pressure but also reduce the risk of developing heart failure in patients with hypertension. They provide renal protection and have favorable outcomes in patients with diabetes and other comorbidities.





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31. What is the major side effect associated with the use of clindamycin?

- A) C. difficile infection
- B) Renal toxicity
- C) Ototoxicity
- D) Hemolytic anemia





31. What is the major side effect associated with the use of clindamycin?

- A) C. difficile infection**
- B) Renal toxicity**
- C) Ototoxicity**
- D) Hemolytic anemia**





Answer: A) C. difficile infection

Explanation:

Clindamycin is associated with a significant risk of Clostridium difficile infection, which can lead to severe diarrhea and colitis. This risk is due to the disruption of normal gut flora, allowing C. difficile to proliferate.





32. Which of the following is a common side effect of gabapentin?

- A) Weight loss
- B) Sedation
- C) Hypertension
- D) Hyperglycemia





32. Which of the following is a common side effect of gabapentin?

- A) Weight loss
- B) Sedation**
- C) Hypertension
- D) Hyperglycemia





Answer: B) Sedation

Explanation:

Gabapentin is known to cause sedation and drowsiness as common side effects. It is often used as an anticonvulsant and for neuropathic pain, but patients should be cautioned about potential sedation, especially when driving or operating heavy machinery.





33. Which of the following is the preferred agent for treating acute asthma exacerbations?

- A) Fluticasone
- B) Salmeterol
- C) Albuterol
- D) Montelukast





33. Which of the following is the preferred agent for treating acute asthma exacerbations?

- A) Fluticasone
- B) Salmeterol
- C) Albuterol**
- D) Montelukast





Answer: C) Albuterol

Explanation:

Albuterol, a short-acting beta-agonist, is the preferred treatment for acute asthma exacerbations due to its rapid onset of action, providing quick relief of bronchospasm and improving airflow.





34. What is a key contraindication for using metformin in patients?

- A) Type 1 diabetes
- B) Obesity
- C) Liver disease
- D) Hypertension





34. What is a key contraindication for using metformin in patients?

- A) Type 1 diabetes
- B) Obesity
- C) Liver disease
- D) Hypertension





Answer: C) Liver disease

Explanation:

Metformin is contraindicated in patients with significant liver disease due to the risk of lactic acidosis, a rare but serious side effect. Patients with impaired liver function may have decreased clearance of metformin, leading to accumulation and toxicity.





35. Which of the following medications is used as a rescue inhaler for acute bronchospasm?

- A) Budesonide
- B) Formoterol
- C) Levalbuterol
- D) Tiotropium





35. Which of the following medications is used as a rescue inhaler for acute bronchospasm?

- A) Budesonide
- B) Formoterol
- C) Levalbuterol**
- D) Tiotropium





Answer: C) Levalbuterol

Explanation:

Levalbuterol is a short-acting beta-agonist (SABA) used as a rescue inhaler for the rapid relief of acute bronchospasm in conditions like asthma. It works quickly to relax bronchial smooth muscle, allowing for improved airflow.





36. Which of the following best describes the mechanism of action of methylphenidate?

- A) Dopamine reuptake inhibitor**
- B) Serotonin reuptake inhibitor**
- C) Norepinephrine agonist**
- D) GABA agonist**





36. Which of the following best describes the mechanism of action of methylphenidate?

- A) Dopamine reuptake inhibitor**
- B) Serotonin reuptake inhibitor**
- C) Norepinephrine agonist**
- D) GABA agonist**





Answer: A) Dopamine reuptake inhibitor

Explanation:

Methylphenidate primarily works by inhibiting the reuptake of dopamine and norepinephrine in the central nervous system, increasing their availability and helping to alleviate symptoms of attention deficit hyperactivity disorder (ADHD).





37. What is the primary risk associated with abrupt discontinuation of benzodiazepines?

- A) Hypertension
- B) Seizures
- C) Tachycardia
- D) Depression





37. What is the primary risk associated with abrupt discontinuation of benzodiazepines?

- A) Hypertension
- B) Seizures**
- C) Tachycardia
- D) Depression





Answer: B) Seizures

Explanation:

Abrupt discontinuation of benzodiazepines can lead to withdrawal symptoms, including seizures, particularly in patients who have been using them for a prolonged period. Gradual tapering is recommended to minimize withdrawal risks.





38. Which of the following is a notable effect of long-term use of proton pump inhibitors (PPIs)?

- A) Increased gastric acidity**
- B) Clostridium difficile infection**
- C) Enhanced renal function**
- D) Decreased vitamin B12 absorption**





38. Which of the following is a notable effect of long-term use of proton pump inhibitors (PPIs)?

- A) Increased gastric acidity
- B) Clostridium difficile infection
- C) Enhanced renal function
- D) Decreased vitamin B12 absorption**





Answer: D) Decreased vitamin B12 absorption

Explanation:

Long-term use of PPIs can impair the absorption of vitamin B12 due to reduced gastric acidity, which is necessary for the release of B12 from food. This can lead to deficiency over time, potentially causing anemia and neurological complications.





39. Which of the following medications can cause “cheese effect” if consumed with tyramine-rich foods?

- A) Fluoxetine
- B) Phenelzine
- C) Paroxetine
- D) Sertraline





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- A) Fluoxetine
- B) Phenezine**
- C) Paroxetine
- D) Sertraline





Answer: B) Phenzelzine

Explanation:

Phenzelzine is a monoamine oxidase inhibitor (MAOI) that can cause hypertensive crises if taken with tyramine-rich foods (e.g., aged cheeses, cured meats). Tyramine can lead to excessive release of norepinephrine, causing dangerously high blood pressure.





40. Which of the following is a common side effect of systemic glucocorticoids?

- A) Hypoglycemia
- B) Weight loss
- C) Insomnia
- D) Bradycardia





40. Which of the following is a common side effect of systemic glucocorticoids?

- A) Hypoglycemia
- B) Weight loss
- C) Insomnia**
- D) Bradycardia





Answer: C) Insomnia

Explanation:

Systemic glucocorticoids can lead to insomnia and sleep disturbances due to their effects on metabolism and mood. Additionally, they can cause other side effects, including weight gain and hyperglycemia, but insomnia is a notable concern during therapy.





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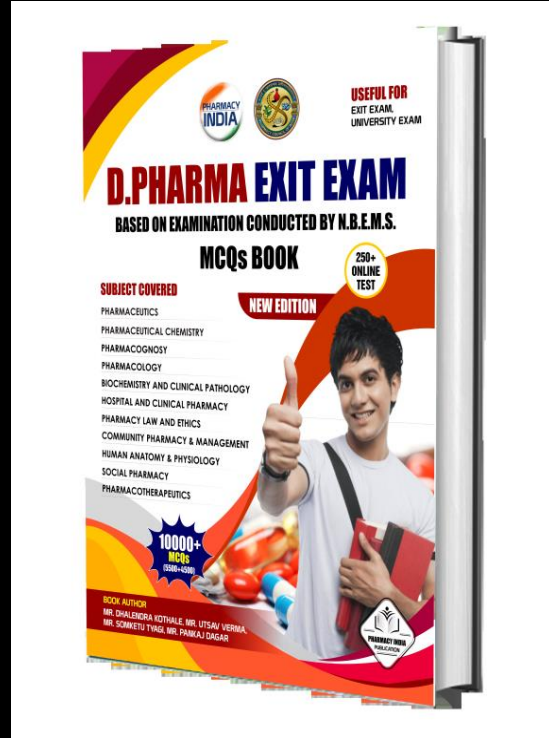
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