Unit 9 - Week 6

Assignment 6

The due date for submitting this assignment has passed. As per our records you have not submitted this assignment.

1. Which of the following anti-TB drugs has been approved for use by the International Tuberculosis Control Programme (ITCP)?
   - Isoniazid
   - Ethambutol
   - Pyrazinamide
   - Rifampicin
   - Streptomycin
   - No, the answer is incorrect.
   - Accepted Answer:
     - Rifampicin

2. The N&T clinical trial is a prospective open label randomized clinical trial to evaluate 6-month regimen in:
   - Patients with Early Drug Resistant TB (EDR-TB)
   - Patients with Extensively Drug Resistant TB (XDR-TB)
   - Patients with Multi Drug Resistant TB (MDR-TB)
   - No, the answer is incorrect.
   - Accepted Answer:
     - Patients with Multi Drug Resistant TB (MDR-TB)

3. Which of the following Mycobacteria is classified as a Rapid Grower?
   - Mycobacterium avium
   - Mycobacterium tuberculosis
   - Mycobacterium leprae
   - Mycobacterium fortuitum
   - No, the answer is incorrect.
   - Accepted Answer:
     - Mycobacterium avium

4. What is the most common adverse effect of Clofazimine?
   - Hypersensitivity
   - Asthenia
   - Discoloration of skin
   - No, the answer is incorrect.
   - Accepted Answer:
     - Discoloration of skin

5. If a patient on treatment for pulmonary TB develops nausea and vomiting and Liver Function Tests (LFT) show severe elevation of AST and ALT and ALT is elevated 5 times above normal:
   - Anti-TB treatment should be stopped and Liver Function Tests (LFT) should be repeated in 1 week and anti-TB treatment restarted if LFT is normal.
   - Anti-TB treatment should be stopped and Liver Function Tests (LFT) monitored every 2 days and anti-TB treatment restarted if LFT becomes normal.
   - Anti-TB treatment should be continued and Liver Function Tests (LFT) repeated every 2 weeks.
   - No, the answer is incorrect.
   - Accepted Answer:
     - Anti-TB treatment should be continued and Liver Function Tests (LFT) repeated every 2 weeks.

6. The common causes of 'Poor response' to treatment in a child on treatment for TB is:
   - Drug resistance
   - Nutritional status
   - Poor adherence to treatment
   - Presence of other co-infections
   - No, the answer is incorrect.
   - Accepted Answer:
     - Poor adherence to treatment

7. If a child with the WHO recommended dose of Isoniazid for a 10-year-old child on TB of the spine:
   - 10mg/kg body weight
   - 20mg/kg body weight
   - 30mg/kg body weight
   - No, the answer is incorrect.
   - Accepted Answer:
     - 10mg/kg body weight

8. The recommended treatment regimen of choice for patients with pulmonary Mycobacterium kansaii infection is:
   - Clarithromycin, Rifampicin and Isoniazid for 6 months after sputum culture conversion
   - Clarithromycin, Amikacin and Ofloxacin for 12 months after sputum culture conversion
   - Clarithromycin, Ofloxacin and Levofloxacin for 12 months after sputum culture conversion
   - No, the answer is incorrect.
   - Accepted Answer:
     - Clarithromycin, Rifampicin and Isoniazid for 6 months after sputum culture conversion

Due on 19.09.31, 23:59 IST.