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MPA-25

इस प्रश्न-पुस्तिका को तब तक न खोलें जब तक  
कहा न जाए। Do not open this Question  
Booklet until you are asked to do so.

पुस्तिका में पृष्ठों की संख्या : 24  
Number of Pages in Booklet : 24  
पुस्तिका में प्रश्नों की संख्या : 150  
No. of Questions in Booklet : 150



Paper Code : 82

Sub : Medical Gastroenterology

समय : 02:30 घण्टे + 10 मिनट अतिरिक्त\*  
Time : 02:30 Hours + 10 Minutes Extra\*

Exam Date: 04/07/2025 अधिकतम अंक : 150  
Maximum Marks : 150

प्रश्न-पुस्तिका के पेपर की सील/पॉलिथीन बैग को खोलने पर प्रश्न-पत्र हल करने से पूर्व परीक्षार्थी यह सुनिश्चित कर लें कि :

- प्रश्न-पुस्तिका संख्या तथा ओ.एम.आर. उत्तर-पत्रक पर अंकित बारकोड संख्या समान हैं।
- प्रश्न-पुस्तिका एवं ओ.एम.आर. उत्तर-पत्रक के सभी पृष्ठ व सभी प्रश्न सही मुद्रित हैं। समस्त प्रश्न, जैसा कि ऊपर वर्णित है, उपलब्ध हैं तथा कोई भी पृष्ठ कम नहीं है / मुद्रण त्रुटि नहीं है। किसी भी प्रकार की विसंगति या दोषपूर्ण होने पर परीक्षार्थी वीक्षक से दूसरा प्रश्न-पत्र प्राप्त कर लें। यह सुनिश्चित करने की जिम्मेदारी अभ्यर्थी की होगी। परीक्षा प्रारम्भ होने के 5 मिनट पश्चात् ऐसे किसी दावे/आपत्ति पर कोई विचार नहीं किया जायेगा।

On opening the paper seal/polythene bag of the Question Booklet before attempting the question paper, the candidate should ensure that :  
• Question Booklet Number and Barcode Number of OMR Answer Sheet are same.  
• All pages & Questions of Question Booklet and OMR Answer Sheet are properly printed. All questions as mentioned above are available and no page is missing/misprinted.

If there is any discrepancy/defect, candidate must obtain another Question Booklet from Invigilator. Candidate himself shall be responsible for ensuring this. No claim/objection in this regard will be entertained after five minutes of start of examination.

### परीक्षार्थियों के लिए निर्देश

1. प्रत्येक प्रश्न के लिये एक विकल्प भरना अनिवार्य है।
  2. सभी प्रश्नों के अंक समान हैं।
  3. प्रत्येक प्रश्न का मात्र एक ही उत्तर दीजिए। एक से अधिक उत्तर देने की दशा में प्रश्न के उत्तर को गलत माना जाएगा।
  4. OMR उत्तर-पत्रक इस प्रश्न-पुस्तिका के अन्दर रखा है। जब आपको प्रश्न-पुस्तिका खोलने को कहा जाए, तो उत्तर-पत्रक निकाल कर ध्यान से केवल नीले बॉल पॉइंट पेन से विवरण भरें।
  5. कृपया अपना रोल नम्बर ओ.एम.आर. उत्तर-पत्रक पर सावधानीपूर्वक सही भरें। गलत रोल नम्बर भरने पर परीक्षार्थी स्वयं उत्तरदायी होगा।
  6. ओ.एम.आर. उत्तर-पत्रक में करेशन पेन/व्हाइटनर/सफेदा का उपयोग निषिद्ध है।
  7. प्रत्येक गलत उत्तर के लिए प्रश्न अंक का 1/3 भाग काटा जायेगा। गलत उत्तर से तात्पर्य अशुद्ध उत्तर अथवा किसी भी प्रश्न के एक से अधिक उत्तर से है।
  8. प्रत्येक प्रश्न के पाँच विकल्प दिये गये हैं, जिन्हें क्रमशः 1, 2, 3, 4, 5 अंकित किया गया है। अभ्यर्थी को सही उत्तर निर्दिष्ट करते हुए उनमें से केवल एक गोले (बबल) को उत्तर-पत्रक पर नीले बॉल पॉइंट पेन से गहरा करना है।
  9. यदि आप प्रश्न का उत्तर नहीं देना चाहते हैं तो उत्तर-पत्रक में पाँचवें (5) विकल्प को गहरा करें। यदि पाँच में से कोई भी गोला गहरा नहीं किया जाता है, तो ऐसे प्रश्न के लिये प्रश्न अंक का 1/3 भाग काटा जायेगा।
  - 10.\* प्रश्न-पत्र हल करने के उपरान्त अभ्यर्थी अनिवार्य रूप से ओ.एम.आर. उत्तर-पत्रक जाँच लें कि समस्त प्रश्नों के लिये एक विकल्प (गोला) भर दिया गया है। इसके लिये ही निर्धारित समय से 10 मिनट का अतिरिक्त समय दिया गया है।
  11. यदि अभ्यर्थी 10% से अधिक प्रश्नों में पाँच विकल्पों में से कोई भी विकल्प अंकित नहीं करता है तो उसको अयोग्य माना जायेगा।
  12. मोबाइल फोन अथवा अन्य किसी इलेक्ट्रॉनिक यंत्र का परीक्षा हॉल में प्रयोग पूर्णतया वर्जित है। यदि किसी अभ्यर्थी के पास ऐसी कोई वर्जित सामग्री मिलती है तो उसके विरुद्ध आयोग द्वारा नियमानुसार कार्यवाही की जायेगी।
- चेतावनी : अगर कोई अभ्यर्थी नकल करते पकड़ा जाता है या उसके पास से कोई अनधिकृत सामग्री पाई जाती है, तो उस अभ्यर्थी के विरुद्ध पुलिस में प्राथमिकी दर्ज कराते हुए राजस्थान सार्वजनिक परीक्षा (भर्ती) में अनुचित साधनों की रोकथाम अधिनियम, 2022 तथा अन्य प्रभावी कानून एवं आयोग के नियमों-प्रावधानों के तहत कार्यवाही की जाएगी। साथ ही आयोग ऐसे अभ्यर्थी को भविष्य में होने वाली आयोग की समस्त परीक्षाओं से विवर्जित कर सकता है।

### INSTRUCTIONS FOR CANDIDATES

1. It is mandatory to fill one option for each question.
2. All questions carry equal marks.
3. Only one answer is to be given for each question. If more than one answers are marked, it would be treated as wrong answer.
4. The OMR Answer Sheet is inside this Question Booklet. When you are directed to open the Question Booklet, take out the Answer Sheet and fill in the particulars carefully with Blue Ball Point Pen only.
5. Please correctly fill your Roll Number in OMR Answer Sheet. Candidates will themselves be responsible for filling wrong Roll No.
6. Use of Correction Pen/Whitener in the OMR Answer Sheet is strictly forbidden.
7. 1/3 part of the mark(s) of each question will be deducted for each wrong answer. A wrong answer means an incorrect answer or more than one answers for any question.
8. Each question has five options marked as 1, 2, 3, 4, 5. You have to darken only one circle (bubble) indicating the correct answer on the Answer Sheet using BLUE BALL POINT PEN.
9. If you are not attempting a question then you have to darken the circle '5'. If none of the five circles is darkened, one third (1/3) part of the marks of question shall be deducted.
- 10.\* After solving question paper, candidate must ascertain that he/she has darkened one of the circles (bubbles) for each of the questions. Extra time of 10 minutes beyond scheduled time, is provided for this.
11. A candidate who has not darkened any of the five circles in more than 10% questions shall be disqualified.
12. Mobile Phone or any other electronic gadget in the examination hall is strictly prohibited. A candidate found with any of such objectionable material with him/her will be strictly dealt with as per rules.

Warning : If a candidate is found copying or if any unauthorized material is found in his/her possession, F.I.R. would be lodged against him/her in the Police Station and he/she would be liable to be prosecuted under Rajasthan Public Examination (Measures for Prevention of Unfair means in Recruitment) Act, 2022 & any other laws applicable and Commission's Rules-Regulations. Commission may also debar him/her permanently from all future examinations.

उत्तर-पत्रक में दो प्रतियाँ हैं - मूल प्रति और कार्बन प्रति। परीक्षा समाप्ति पर परीक्षा कक्ष छोड़ने से पूर्व परीक्षार्थी उत्तर-पत्रक की दोनों प्रतियाँ वीक्षक को सौंपेंगे, परीक्षार्थी स्वयं कार्बन प्रति अलग नहीं करें। वीक्षक उत्तर-पत्रक की मूल प्रति को अपने पास जमा कर, कार्बन प्रति को मूल प्रति से कट लाइन से मोड़ कर सावधानीपूर्वक अलग कर परीक्षार्थी को सौंपेंगे, जिसे परीक्षार्थी अपने साथ ले जायेंगे। परीक्षार्थी को उत्तर-पत्रक की कार्बन प्रति चयन प्रक्रिया पूर्ण होने तक सुरक्षित रखनी होगी एवं आयोग द्वारा माँगे जाने पर प्रस्तुत करनी होगी।



1. Which of the following is true regarding Malignancies related to celiac disease ?
- (1) Intestinal Lymphoma related to celiac disease are usually of beta cell origin.
  - (2) Enteropathy associated T cell Lymphoma usually respond to gluten-free diet.
  - (3) Enteropathy associated T cell Lymphoma (EATL) has poor prognosis.
  - (4) Even with a strict gluten-free diet, risk of malignancy is significantly increased.
  - (5) Question not attempted
2. Normal lipolysis can be maintained by what percentage of maximum pancreatic Lipase secretion ?
- (1) 5%                      (2) 15%
  - (3) 25%                    (4) 35%
  - (5) Question not attempted
3. Disease associated with SIBO are all, except
- (1) Chronic pancreatitis
  - (2) Ulcerative colitis
  - (3) Coeliac disease
  - (4) Cirrhosis
  - (5) Question not attempted
4. Which of the following is true about Whipples disease ?
- (1) It is caused by gram-negative bacteria.
  - (2) More common in female patients.
  - (3) Not seen in children.
  - (4) Symptomatic neurological manifestation is seen in 80% of patients.
  - (5) Question not attempted
5. Glidin is which component of gluten ?
- (1) Heat resistant fraction
  - (2) Alcohol soluble fraction
  - (3) Water soluble fraction
  - (4) Heat labile fraction
  - (5) Question not attempted
6. Which of the following is the most common site of involvement of intestinal tuberculosis ?
- (1) Jejunum              (2) Ileo-caecal
  - (3) Colon                (4) Rectum
  - (5) Question not attempted
7. A 30 year old man presents with H/O abdominal pain and watery diarrhoea for 4 days. CT scan of abdomen and pelvis demonstrates terminal ileal thickening without obstruction. Which of the following is known to cause terminal ileitis ?
- (1) V. Cholerae
  - (2) Yersinia enterocolitica
  - (3) EPEC
  - (4) EIEC
  - (5) Question not attempted
8. Which of the following condition is linked to SIBO ?
- (1) Colonic diverticulosis
  - (2) Hyperthyroidism
  - (3) Ileocaecal valve resection
  - (4) Hysterectomy
  - (5) Question not attempted



9. Which of the following medications works by activating chloride channels in the intestine ?

- (1) Lubiprostone
- (2) Alosetron
- (3) Prucalopride
- (4) Bisacodyl
- (5) Question not attempted

10. Which of the following statements is most accurate regarding the Marsh classification in celiac disease ?

- (1) Marsh 0 indicates severe villous atrophy with crypt hyperplasia.
- (2) Marsh 1 is characterized by increased IELs with normal villous architecture.
- (3) Marsh 3a indicates normal villous height with increased IELs.
- (4) Marsh 4 is characterized by only increased IELs.
- (5) Question not attempted

11. Which of the following drug is not used to treat Whipple's disease ?

- (1) Ceftriaxone
- (2) Metronidazole
- (3) Doxycycline
- (4) Rifampine
- (5) Question not attempted

12. Which of the following medication has the highest risk of predisposing to Clostridium difficile infection ?

- (1) Tetracycline
- (2) Omeprazole
- (3) Amoxicillin
- (4) Azithromycin
- (5) Question not attempted

13. All are true about omphalocele, except :

- (1) With large omphalocele liver and spleen are frequently inside abdominal cavity
- (2) Increased maternal serum AFP is suggestive of omphalocele
- (3) Prematurity is less common in children born to omphalocele than gastroschisis
- (4) Extra intestinal abnormalities are more common than gastroschisis
- (5) Question not attempted

14. A lesion with an amorphous non-structural pit pattern, under Kudos classification is most likely to be

- (1) Benign
- (2) Adenomatous
- (3) Hyperplastic
- (4) Cancerous
- (5) Question not attempted

15. OCTAVE trial for treatment of ulcerative colitis is for which of the following drugs ?

- (1) Infliximab
- (2) Tofacitinib
- (3) Adalimumab
- (4) Ustekinumab
- (5) Question not attempted



16. True about rheumatological complication of IBD:
- (1) Axial arthropathy parallels activity of bowel disease.
  - (2) Most patients with sacroiliitis are HLA B27 positive.
  - (3) Peripheral arthropathy are deforming and seronegative.
  - (4) Ankylosing spondylitis is more common than sacroiliitis.
  - (5) Question not attempted
17. Patients on long term azathioprine for IBD developing nodular regenerative hyperplasia diagnosed by liver biopsy, the most appropriate next step is :
- (1) Stop azathioprine
  - (2) Decrease dose of azathioprine to 50 mg
  - (3) Decrease dose of azathioprine to 50 mg and add allopurinol
  - (4) Check 6 Thioguanine nucleotide level
  - (5) Question not attempted
18. True about colonic diverticula are all, except :
- (1) Most diverticula in colon are pseudodiverticula.
  - (2) Giant colonic diverticula are defined as > 4 cm in diameter.
  - (3) In western countries 90% of patients have diverticulosis of left side of colon.
  - (4) Site of bleeding diverticula is distal colon in more than 50% of patients.
  - (5) Question not attempted
19. NOD2 gene is also known as
- (1) CARD 1
  - (2) CARD 5
  - (3) CARD 15
  - (4) CARD 18
  - (5) Question not attempted
20. False positive faecal occult blood result can occur after ingestion of all of the following, except:
- (1) Carrots
  - (2) High doses of Vitamin C
  - (3) Cauliflower
  - (4) Red meat
  - (5) Question not attempted
21. In Chron's disease, creeping fat is term given to
- (1) excessive enlargement of omentum
  - (2) necrosis of omentum
  - (3) fatty adhesion
  - (4) projection of thickened mesentery encasing bowel
  - (5) Question not attempted
22. True about Lynch syndrome is all, except :
- (1) Mean age at diagnosis is 45 years
  - (2) Initial cancers are more proximally located
  - (3) Increased risk of malignant tumors at other sites
  - (4) Prognosis is poor
  - (5) Question not attempted
23. Which of the following enhances trypsinogen activation ?
- (1) CFTR
  - (2) SPINK1
  - (3) PRSS1
  - (4) CTRC
  - (5) Question not attempted



24. True about interdigestive pancreatic secretion, except:

- (1) secretory pattern is cyclic
- (2) it follows pattern of migrating myoelectric complex (MMC)
- (3) the pattern reoccurs every 30-40 minutes
- (4) it helps in housekeeping function of MMC
- (5) Question not attempted

25. Which of the following scoring system can be used within the first 12 hours of admission for early identification of patients of pancreatitis at increased risk of in hospital mortality ?

- (1) Ranson score
- (2) BISAP score
- (3) APACHE 2 score
- (4) Blatchford score
- (5) Question not attempted

26. All are true about metabolic complication of acute pancreatitis, except :

- (1) Reduced ionised serum calcium can cause neuromuscular irritability
- (2) Non-ionised hypocalcemia requires no treatment
- (3) IV magnesium replacement is independent of serum calcium
- (4) IV calcium may induce serious dysarrhythmia
- (5) Question not attempted

27. True about biliary sludge are all, except :

- (1) Contains small stones <3 mm
- (2) Asymptomatic in most patients
- (3) Usually composed of Calcium carbonate and phosphate
- (4) On USG it does not produce acoutic shadow
- (5) Question not attempted

28. True about tropical pancreatitis is all, except :

- (1) Generally is a disease of young and early adulthood.
- (2) Exocrine insufficiency is rare.
- (3) Diabets is inevitable consequence.
- (4) Large intraductal calculi are present.
- (5) Question not attempted

29. All are diagnostic of type 1 autoimmune pancreatitis, except

- (1) Neutrophilic infiltration with Micro abscess
- (2) Lymphoplasmocytic sclerosing pancreatitis
- (3) Obliterative phlebitis
- (4) Storiform fibrosis
- (5) Question not attempted

30. Which of the following is a finding of ascitic fluid in Mucinous cystic neoplasm of pancreas ?

- (1) High amylase level
- (2) High CEA level
- (3) Low viscosity
- (4) Low CA 72-4
- (5) Question not attempted



31. Which of the following gene occurs early in the progression of pancreatic intraepithelial neoplasm into pancreatic adenocarcinoma ?
- (1) KRAS (2) SMAD4
  - (3) TP 53 (4) BRCA2
  - (5) Question not attempted
32. All are correct regarding insulinoma, except :
- (1) Usually occurs in patients between 20-75 years of age.
  - (2) Whipple's triad, namely hypoglycemic symptoms, blood sugar < 50 mg/dl and relief of symptoms following glucose ingestion is specific for insulinoma.
  - (3) Plasma insulin to blood glucose ratio over 0.3 is considered positive for insulinoma.
  - (4) Thiazide analogue, Digoxin is medical treatment.
  - (5) Question not attempted
33. Diarrhea is not a clinical feature in which of the following NET :
- (1) Insulinoma (2) Glucagonoma
  - (3) VIPOMA (4) Gastrinoma
  - (5) Question not attempted
34. CT scan criteria of mild to Moderate chronic pancreatitis include all, except :
- (1) Pancreatic duct irregularity
  - (2) Pancreatic duct dilatation more than 4 mm
  - (3) Cavity < 10 mm
  - (4) Intraductal filling defects
  - (5) Question not attempted
35. All are true about modified CTSI (CT severity index), except:
- (1) Pancretic or peripancreatic fluid collection is given 4 points
  - (2) Extrapaneacretic collection is given 2 points
  - (3) Necrosis > 30% is given 2 points
  - (4) Score between 4-6 is considered Moderate
  - (5) Question not attempted
36. Which of the following pancreatic cell type is responsible for the bulk of pancreatic secretion ?
- (1) Acinar cells
  - (2) Duct cells
  - (3) Pancreatic polypeptide cells
  - (4) Beta cells
  - (5) Question not attempted
37. Type I autoimmune pancreatitis patients who experience relapse following steroid withdrawal, the most appropriate next step in management is
- (1) Infliximab
  - (2) Tofacitinib
  - (3) Rituximab
  - (4) Ustekinumab
  - (5) Question not attempted
38. Which of the following laboratory tests is MOST useful for assessing exocrine pancreatic insufficiency in chronic calcific pancreatitis ?
- (1) Serum amylase
  - (2) Serum lipase
  - (3) Fecal elastase-1
  - (4) Serum glucose
  - (5) Question not attempted



39. Which of the following is not a parameter of Lille model score ?
- (1) Serum Creatinine
  - (2) PT INR
  - (3) Total Leukocyte count
  - (4) Age
  - (5) Question not attempted
40. All are histological features of NAFLD, except :
- (1) Ballooning hepatocyte degeneration
  - (2) Microvesicular steatosis
  - (3) Hepatocyte Necrosis
  - (4) Diffuse or Centrilobular steatosis
  - (5) Question not attempted
41. Patients without risk factors liver biopsy is indicated after how much cumulative dose of methotrexate ?
- (1) 3 gm
  - (2) 4 gm
  - (3) 5 gm
  - (4) 6 gm
  - (5) Question not attempted
42. All of the following drugs are causes of granulomatous hepatitis, except :
- (1) Allopurinol
  - (2) Carbamazepine
  - (3) Nitrofurantoin
  - (4) Hydralazine
  - (5) Question not attempted
43. Type 2 autoimmune hepatitis is associated with which HLA haplotype ?
- (1) HLADRB1
  - (2) HLADRB2
  - (3) HLADRB3
  - (4) HLADRB4
  - (5) Question not attempted
44. All are true about pruritus of primary biliary cirrhosis, except:
- (1) Pruritus occurs late in course of disease.
  - (2) Pruritus often resolves as disease progress.
  - (3) Pruritus is generally intermittent during the day.
  - (4) Pruritus is more troublesome in evening and night.
  - (5) Question not attempted
45. Which of the following is a cause of intrahepatic presinusoidal portal hypertension ?
- (1) Post necrotic cirrhosis
  - (2) Sinusoidal obstruction syndrome
  - (3) PBC
  - (4) Alcohol associated cirrhosis
  - (5) Question not attempted
46. High SAAG ascites is seen in all, except :
- (1) Myxoedema
  - (2) Sinusoidal obstruction syndrome
  - (3) Cardiac ascites
  - (4) Biliary ascites
  - (5) Question not attempted



47. All of the drugs are contraindicated in hepatorenal syndrome, except :

- (1) ACE inhibitors
- (2) NSAIDs
- (3) Calcium channel blockers
- (4) Aminoglycosides
- (5) Question not attempted

48. What is a key adjustment made in MELD 3-0 to address sex based disparity ?

- (1) Reducing the weight of kidney function in the score
- (2) Adding 1.33 points for male
- (3) Adding 1.33 points for female
- (4) Increasing the total MELD score limit
- (5) Question not attempted

49. HCV genotypes differ one from another in sequence homology by

- (1) 10%                      (2) 20%
- (3) 30%                      (4) 40%
- (5) Question not attempted

50. All are paraneoplastic manifestations associated with HCC, except :

- (1) Carcinoid syndrome
- (2) Hypocalcemia
- (3) Hypertension
- (4) Hypoglycemia
- (5) Question not attempted

51. True about fibrolamellar HCC:

- (1) More common in males
- (2) Typically occurs in elderly population
- (3) More likely to stain positive for GPC 3 on immunohistochemical examination
- (4) Almost always arises in non-cirrhotic liver
- (5) Question not attempted

52. Which factor is not associated with severe HCV recurrence following liver transplantation ?

- (1) CMV coinfection
- (2) HCV genotype 1b
- (3) Presence of pretransplantation HBV coinfection
- (4) High serum HCV RNA levels before and within two weeks after liver transplantation
- (5) Question not attempted

53. All are true about portal vein thrombosis with cirrhosis, except:

- (1) High MELD or CPT is risk factor.
- (2) Large oesophageal varices are risk factors.
- (3) Inherited prothrombotic factors may be present.
- (4) Thrombosis is usually occlusive.
- (5) Question not attempted



54. False about hepatic hydatid disease is:

- (1) Infection occurs when humans eat vegetables contaminated with dog faeces
- (2) Most patients with hydatid cyst in liver have no symptoms
- (3) Super infection can lead to pyrogenic liver abscess in upto 20% patients
- (4) *E. multilocularis* is less invasive than *E. granulosus*
- (5) Question not attempted

55. Sofosbuvir is best related to which of the following ?

- (1) NS3 protease inhibitor
- (2) NS5A protease inhibitor
- (3) NS5B nucleotide inhibitor
- (4) NS5B non-nucleoside inhibitor
- (5) Question not attempted

56. All are true about Wilson's disease, except:

- (1) Hepatic presentation is more common in younger patients.
- (2) Most patients with neurologic presentation have hepatic involvement.
- (3) Outcome of chelation therapy is best when started early/asymptomatic patients.
- (4) Only 5% of patients with neurological presentation have KF ring.
- (5) Question not attempted

57. The R ratio is used in DILI to determine:

- (1) The severity of liver fibrosis.
- (2) The pattern of liver injury.
- (3) The presence of portal hypertension.
- (4) The risk of hepatocellular carcinoma
- (5) Question not attempted

58. Arrange the following stages of chronic hepatitis B in the typical chronological order :

1. Inactive carrier state
2. Immune clearance
3. Immune tolerance
4. Reactivation

Which of the following represents the correct sequence ?

- (1) 3, 2, 1, 4      (2) 2, 3, 1, 4
- (3) 1, 3, 2, 4      (4) 4, 1, 2, 3
- (5) Question not attempted

59. Which of the following is the most abundant solute in bile in healthy individuals ?

- (1) Bile acids      (2) Bilirubin
- (3) Cholesterol      (4) Phospholipid
- (5) Question not attempted

60. All are true about syndromic paucity of Interlobular bile duct (Alagille syndrome), except:

- (1) Ratio of the number of interlobular portal bile duct to portal tract is between 0.5-1.
- (2) Most patients have jaundice during first two years of life.
- (3) Dysmorphic facies or triangular appearance of face is characteristic.
- (4) Butterfly vertebral and posterior embryotoxon may be associated.
- (5) Question not attempted



61. Which of the following is correct combination of sphincter of oddi dysfunction ?
- (1) Type I SOD - Biliary type pain, normal liver enzymes and bile duct > 9 mm
  - (2) Type II SOD - Biliary type pain, normal liver enzymes, normal bile duct
  - (3) Type III SOD - Biliary type pain, dilated bile duct
  - (4) None of these
  - (5) Question not attempted
62. Molecular aggregates (Micelles) are formed above what level of critical concentration of Bile acids ?
- (1) ~ 1 mm
  - (2) ~ 2 mm
  - (3) ~ 3 mm
  - (4) ~ 4 mm
  - (5) Question not attempted
63. Which of the following characteristic of gall stone is considered appropriate selection criteria for stone dissolution therapy ?
- (1) Stone larger than 10 mm
  - (2) Cholesterol stone
  - (3) Stones that are non-radiolucent on conventional radiograph.
  - (4) Stones associated with acute cholecystitis.
  - (5) Question not attempted
64. True regarding extracorporeal shockwave lithotripsy (ESWL) for treatment of gall stone:
- (1) ESWL is only effective against cholesterol stone
  - (2) ESWL can be used for multiple stones
  - (3) Suitable for stone <2 cm in diameter
  - (4) ESWL is safe in patients on anticoagulants
  - (5) Question not attempted
65. Which of the following is associated with increased risk of cholangiocarcinoma ?
- (1) Primary biliary cholangitis
  - (2) Choledocholithiasis
  - (3) Echinococcosis multilocularis
  - (4) Hepatolithiasis
  - (5) Question not attempted
66. Which of the following is false regarding primary Sclerosing cholangitis (PSC) in paediatric population ?
- (1) PSC in neonates is not associated with ulcerative colitis.
  - (2) An Overlap syndrome with autoimmune hepatitis is exhibited in 25% to 30% of children with PSC.
  - (3) Prednisolone and Azathioprine have some beneficial effect in paediatric population.
  - (4) PSC recurs after liver transplantation in more than 50% of children.
  - (5) Question not attempted



67. Which of the following is characteristic of acute acalculus cholecystitis?

- (1) Female predominance
- (2) Predominance among middle and younger aged population
- (3) Moratality risk is <10%
- (4) Prognosis is worse than acute calculus cholecystitis
- (5) Question not attempted

68. 60 year healthy man on abdominal ultrasound showing 11 mm gall bladder polyp and no gall stone, what is the appropriate management?

- (1) Repeat USG in 3 months
- (2) Repeat USG in 6 months
- (3) Laproscopic cholecystectomy
- (4) EUS
- (5) Question not attempted

69. Which of the following medication or substrate has been found to be protective against gall stone formation?

- (1) Ceftriaxone
- (2) Coffee
- (3) Octreotide
- (4) Clofibrate
- (5) Question not attempted

70. Rate limiting enzyme that suppress synthesis of bile acids

- (1) CYP3A4
- (2) CYP2A1
- (3) CYP2C19
- (4) CYP7A1
- (5) Question not attempted

71. Monaco classification is used

- (1) To define early chronic pancreatitis in Endoscopic ultrasound
- (2) To evaluate biliary lesions in cholangioscopy
- (3) For diagnosis of acute pancreatitis
- (4) For diagnosis of hepatocellular carcinoma
- (5) Question not attempted

72. Patient on long-term TPN developing hyperglycemia and elevated free fatty acid, which trace element is likely deficient?

- (1) Selenium
- (2) Copper
- (3) Chromium
- (4) Manganese
- (5) Question not attempted

73. Recommended daily requirement of copper in adult male is

- (1) 600  $\mu\text{g}$
- (2) 900  $\mu\text{g}$
- (3) 1100  $\mu\text{g}$
- (4) 1300  $\mu\text{g}$
- (5) Question not attempted

74. Adaptive responses of body in short-term starvation (1 to 14 days) are all, except

- (1) Decrease plasma insulin level
- (2) Decrease plasma epinephrine level
- (3) Increase lipolytic sensitivity to catecholamines
- (4) Increase in fatty acid delivery to the liver
- (5) Question not attempted



75. Which of the following measures is best to assess nutritional status in patients with cirrhosis, ascites, and severe alcoholic hepatitis ?

- (1) Body mass index
- (2) Mid arm circumference
- (3) Fist grip dynamometry
- (4) Serum transferrin level
- (5) Question not attempted

76. Which of the following is an important consideration when selecting an enteral nutrition (EN) formula for patients with malabsorption ?

- (1) High fiber content
- (2) Low fat content or use of medium-chain triglycerides (MCT)
- (3) High lactose content
- (4) High fructose content
- (5) Question not attempted

77. Identify the WHO-IGWE class of given pathology in image.



- (1) WHO class CE 1
- (2) WHO class CE 2
- (3) WHO class CE 3A
- (4) WHO class CE 3B
- (5) Question not attempted

78. A 35 yr old female known case Ulcerative colitis present in emergency with complaints of acute abdominal pain and abdominal distention. Her abdominal X-ray FPA is shown below. Which of the following statement is false ?



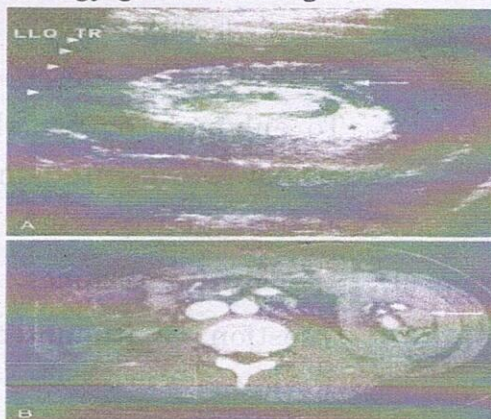
- (1) It is defined as acute colonic dilatation with a transverse colonic diameter of more than 6 cm with loss of haustrations in patients with a severe attack of colitis.
- (2) It occurs in approximately 1% patients of severe flare of ulcerative colitis.
- (3) Approximately 50% of acute dilatation resolves with medical therapy.
- (4) Anticholinergic drugs are precipitating factor for this condition.
- (5) Question not attempted



79. Identify the disease in given MRCP image and percutaneous cholangiogram of patient.



- (1) Benign biliary stricture
  - (2) Portal biliopathy
  - (3) Primary sclerosing cholangitis
  - (4) Ischemic cholangiopathy
  - (5) Question not attempted
80. Which of the following is false statement regarding bowel pathology given in image below ?



- (1) It is more common in children as compared to adults.
- (2) It only occurs in small bowel loops.
- (3) In symptomatic adult surgical exploration should be done.
- (4) It presents with classical "currant jelly" stool due to hemorrhagic mucosal necrosis.
- (5) Question not attempted

81. In TIPS (Transjugular intrahepatic portosystemic shunt) communication is created between

- (1) Intrahepatic branch of portal vein and hepatic vein
- (2) Extrahepatic branch of portal vein and hepatic vein
- (3) Intrahepatic branch of portal vein and IVC (inferior vena cava)
- (4) Extrahepatic branch of portal vein and IVC
- (5) Question not attempted

82. Which vein is typically assessed during BRTO (balloon-occluded retrograde transvenous obliteration) ?

- (1) Portal vein
- (2) Inferior mesenteric vein
- (3) Hepatic vein
- (4) Left renal vein
- (5) Question not attempted

83. MR defecography used in assessment of

- (1) Anorectal angle
- (2) Rectocele detection
- (3) Pelvic floor descent measurement
- (4) All of these
- (5) Question not attempted

84. COMB sign in CT abdomen is

- (1) Prominence of the Vasa recta due to increase vascularity
- (2) Segmental enhancement of part of small intestinal wall
- (3) Mural stratification
- (4) Bowel wall thickening and ulceration
- (5) Question not attempted



85. Calculate the modified CTSI score of a patient with acute pancreatitis showing peri pancreatic fluid collection with 40% pancreatic necrosis.
- (1) 2                      (2) 4
  - (3) 6                      (4) 8
  - (5) Question not attempted
86. Which liver lesion shows a bright T2 signal and no enhancement on contrast phase ?
- (1) Hepatocellular carcinoma
  - (2) Hepatic cyst
  - (3) Infantile hemangioma
  - (4) Regenerative nodule
  - (5) Question not attempted
87. A patient with a history of recurrent bleeding from esophageal varices undergoes a TIPS procedure. Post-procedure, a follow-up Doppler ultrasound reveals a patent TIPS stent with hepatofugal flow in the portal vein. Which of the following is the most likely clinical implication of this finding ?
- (1) Successful reduction in portal pressure and a low risk of recurrent variceal bleeding.
  - (2) Increased risk of hepatic encephalopathy due to altered portal blood flow dynamics.
  - (3) Potential for TIPS dysfunction or thrombosis.
  - (4) Inadequate decompression of the portal system, increasing the risk of persistent ascites.
  - (5) Question not attempted
88. Which of the following conditions might present with a "corkscrew esophagus" on barium swallow ?
- (1) Esophageal cancer
  - (2) Peptic stricture
  - (3) Diffuse esophageal spasm
  - (4) Esophagitis
  - (5) Question not attempted
89. What is the primary advantage of using intravenous contrast during a CT scan of the abdomen for the evaluation of suspected inflammatory bowel disease (IBD) ?
- (1) To better visualize the bowel lumen.
  - (2) To assess for bowel perforation.
  - (3) To enhance the visualization of bowel wall inflammation and vascularity.
  - (4) To identify gallstones.
  - (5) Question not attempted
90. Which of the following intragastric balloon used for endoscopic bariatric therapy is filled with gas ?
- (1) Obeira gastric balloon
  - (2) Obalon gastric balloon
  - (3) Reshape gastric balloon
  - (4) Spatz balloon
  - (5) Question not attempted



91. All of the following are EUS needle tip design which help to procure core biopsies, except:

- (1) Triangular tip cutting edge
- (2) Franseen tip
- (3) Fork tip
- (4) Reverse bevelled
- (5) Question not attempted

92. Which elastographic pattern is most characteristic of normal pancreatic parenchyma ?

- (1) Heterogeneous, predominantly blue
- (2) Homogeneous, predominantly green
- (3) Heterogeneous, predominantly red
- (4) Homogeneous, predominantly yellow
- (5) Question not attempted

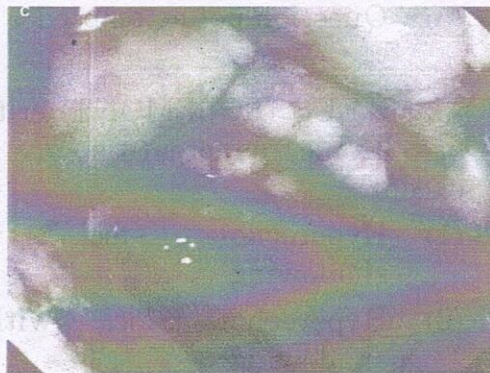
93. Alpha loop during colonoscopy can be straighten by which of the following maneuver ?

- (1) Anticlock wise torque and push
- (2) Anticlock wise torque and withdrawal
- (3) Clock wise torque and withdrawal
- (4) First anticlock wise then clock wise torque
- (5) Question not attempted

94. Which subepithelial lesion originates from the 3rd layer and appears anechoic with no Doppler signal ?

- (1) Varices
- (2) Duplication cyst
- (3) Schwannoma
- (4) Lymphangioma
- (5) Question not attempted

95. Which of the following diagnostic modality is used for given pathology in image ?



- (1) CT Angiography
- (2) Histopathology
- (3) Blood culture
- (4) PCR and other NAAT (Nucleic acid amplification test) of stool
- (5) Question not attempted



96. Histopathology of given pathology in image will show



- (1) Multinucleated giant cells with intracytoplasmic Cowdery type A inclusion bodies
- (2) Owl eye inclusion bodies
- (3) Multinucleated giant cells with intranuclear Cowdery type A inclusion bodies
- (4) Multinucleated giant cells with intracytoplasmic Cowdery type B inclusion bodies
- (5) Question not attempted

97. Major EUS (ROSEMONT) criteria of chronic pancreatitis are all, except.

- (1) Hyperechoic foci with shadowing
- (2) Hyperechoic foci without shadowing
- (3) Main Pancreatic duct calculi
- (4) Lobularity changes with honeycombing
- (5) Question not attempted

98. How many frames per second capsocam (small bowel capsule) can capture ?

- (1) Up to 5      (2) Up to 10
- (3) Up to 15      (4) Up to 20
- (5) Question not attempted

99. Which statement regarding SRUS is false ?

- (1) On biopsy smooth muscle fibers may be seen in mucosa.
- (2) Usually present on posterior wall.
- (3) Multiple ulcers or polypoidal lesions may be present.
- (4) Biofeedback has role in management.
- (5) Question not attempted

100. What is the typical preparation required for a capsule endoscopy procedure ?

- (1) High-fiber diet for several days.
- (2) Bowel preparation with laxatives.
- (3) Fasting for several hours and a clear liquid diet.
- (4) No specific preparation required.
- (5) Question not attempted

101. Which of the following findings on EUS in patient of esophageal cancer would most significantly alter the patient's treatment plan towards neoadjuvant chemoradiation followed by surgery, rather than surgery alone ?

- (1) Tumor invasion into the submucosa (T1b).
- (2) Tumor invasion into the muscularis propria (T2).
- (3) Tumor invasion into the adventitia (T3) with involvement of regional lymph nodes (N1).
- (4) Tumor confined to the mucosa (T1a).
- (5) Question not attempted



102. Which of the following EUS findings would most strongly suggest the presence of a pancreatic adenocarcinoma rather than a pseudotumoral inflammatory mass?

- (1) Homogeneous hypoechoic mass with well-defined borders.
- (2) Heterogeneous mass with irregular borders and invasion into the superior mesenteric artery.
- (3) Presence of multiple small calcifications within the mass.
- (4) A cystic mass with thin walls and no solid components.
- (5) Question not attempted

103. Which two phyla contribute to approximately 90% of the distal bowel microbiota?

- (1) Proteobacteria and Acinobacteria
- (2) Bacteroidetes and Firmicutes
- (3) Fusobacteria and Verrucomicrobia
- (4) Cyanobacteria and Spirochetes
- (5) Question not attempted

104. Pathobionts are defined as

- (1) Any disease-causing organism
- (2) Any biological entity mined from human microbiota and with proven biological effect
- (3) An organism that is a potential pathogen, but only causes diseases under given set of circumstances
- (4) Live microorganism that when administered in adequate amounts confer a health benefit on the host
- (5) Question not attempted

105. What aspect of the microbiota is characterized by intra-individual variation over long and cross-sectional axes of the intestine?

- (1) Stability
- (2) Resilience
- (3) Individuality
- (4) Plasticity and adaptability
- (5) Question not attempted

106. Which of the following is not a technique to assess Microbiota functionality?

- (1) Metagenomics
- (2) Next-generation sequencing
- (3) Meta transcriptomics
- (4) Metabolomics
- (5) Question not attempted

107. Which of the following intestinal microbiome is not found to have relative abundance in Crohn's disease?

- (1) Enterobacteriaceae
- (2) Pasteurellaceae
- (3) Clostridia
- (4) Fusobacteriaceae
- (5) Question not attempted

108. The fecal microbiome of obese individuals has increased numbers of

- (1) Bacteroidetes
- (2) Firmicutes
- (3) Akkermansia
- (4) All of these
- (5) Question not attempted



109. Which of the following drug is least associated with weight gain ?

- (1) Amitriptyline
- (2) Olanzapine
- (3) Prazosin
- (4) Topiramate
- (5) Question not attempted

110. All features are included in Carpenter syndrome, except

- (1) Obesity
- (2) Soft tissue syndactyly
- (3) Autosomal dominant
- (4) Hypogenitilism
- (5) Question not attempted

111. Obesity is not a risk factor for which of the following cancer ?

- (1) Prostate cancer
- (2) Non-small cell lung cancer
- (3) Endometrial cancer
- (4) Breast cancer
- (5) Question not attempted

112. Which of the following statement is false regarding anti-obesity drug Liraglutide ?

- (1) Dose of liraglutide for obesity is 1.8 mg/dl.
- (2) Liraglutide is contraindicated in patients who have family history of MEN2 syndrome.
- (3) It is US FDA approved for obesity.
- (4) Most common side-effect of this drug is GI symptoms like nausea, vomiting and abdominal pain.
- (5) Question not attempted

113. Which of the following statement about Endoscopic Submucosal Dissection (ESD) is false ?

- (1) It allows en bloc resection of large lesions.
- (2) It is commonly used for early gastric and colorectal cancers.
- (3) It has lower risk of perforation compared to Endoscopic Mucosal Resection (EMR).
- (4) It requires advanced endoscopic skills and training.
- (5) Question not attempted

114. What is the role of the submucosal tunnel during a POEM procedure ?

- (1) To deliver medication directly to the esophageal wall.
- (2) To dilate esophageal strictures.
- (3) To remove large esophageal tumors.
- (4) To create a safe working space for the myotomy.
- (5) Question not attempted

115. Which of the following is third space endoscopy for bariatric procedure ?

- (1) PDEM
- (2) GEM
- (3) POETRE
- (4) PREM
- (5) Question not attempted



116. Which of the following is not a tumor suppressor gene associated with GI cancer ?

- (1) APC                      (2) CDH1
- (3) BRAF                    (4) MUTYH
- (5) Question not attempted

117. Which of the following is the most abundant antibody in mucosal secretion ?

- (1) IGG                      (2) IGM
- (3) IGA                      (4) IGD
- (5) Question not attempted

118. Which of the following bacteria is an example of pathobiont ?

- (1) Salmonella
- (2) Shigella
- (3) Clostridium difficile
- (4) Campylobacter jejuni
- (5) Question not attempted

119. Which of the following immunoglobulins play important role in the intestinal response to helminths ?

- (1) IgE                      (2) IgG
- (3) IgM                      (4) IgA
- (5) Question not attempted

120. Which of the following is the main source of circulating leptin ?

- (1) Brain
- (2) Adipose tissue
- (3) Duodenum
- (4) Distal ileum
- (5) Question not attempted

121. At what age does the development of liver start ?

- (1) First week of gestation
- (2) Third week of gestation
- (3) Fifth week of gestation
- (4) Seventh week of gestation
- (5) Question not attempted

122. All are true regarding Trefoil factor, except

- (1) Contain six cysteine residue
- (2) Contain three di-sulphide bond
- (3) Expressed throughout small and large intestine
- (4) Clover leaf appearance that destabilise the peptide within the gut lumen
- (5) Question not attempted

123. All are true about PANETH cell, except

- (1) Derived from epithelial stem cell
- (2) Identified by eosinophilic granules
- (3) Contain alpha defensin
- (4) Increase number of ileal paneth cell seen in Crohn's disease
- (5) Question not attempted



124. Which of the following statement is false regarding Umbilical cord stem cells ?

- (1) They have very less HLA interactions.
- (2) They have late recovery time as compared to bone marrow stems cells.
- (3) They have very high chances of Graft vs host disease.
- (4) They are generally not contaminated with herpes viruses like CMV, HSV.
- (5) Question not attempted

125. In new-born with oesophageal atresia what other organ system is most likely to have an associated anomaly ?

- (1) Pancreas (2) Heart
- (3) Eye (4) Skin
- (5) Question not attempted

126. EGJOO (esophagogastric junction outflow obstruction) is diagnosed when

- (1) Integrated Relaxation Pressure (IRP) is normal.
- (2) Peristalsis is completely failed.
- (3) IRP is elevated, but peristalsis is preserved.
- (4) Distal Contractile Index (DCI) > 8000.
- (5) Question not attempted

127. First line treatment of herpes simplex virus in immuno competent host is

- (1) Fluconazole
- (2) Foscarnet
- (3) Valacyclovir
- (4) Prednisolone
- (5) Question not attempted

128. What is yearly rate of progression to cancer in patients with higher grade dysplasia in Barrett's oesophagus ?

- (1) 3% (2) 6%
- (3) 10% (4) 12%
- (5) Question not attempted

129. True regarding special technique used in endoscopy for detection of carcinoma oesophagus:

- (1) Methylene blue and Indigocarmine staining is used for squamous cell carcinoma.
- (2) Confocal laser endomicroscopy creates magnification upto 1000 times.
- (3) White light endoscopy has sensitivity of upto 80% in detecting early squamous cell carcinoma.
- (4) Dysplasia and inflammation can be differentiated by chromoendoscopy.
- (5) Question not attempted



130. On EUS examination a smooth submucosal mass with homogenous and hyperchoic echotexture, likely diagnosis is

- (1) Leiomyoma
- (2) Lipoma
- (3) GIST
- (4) Hamartoma
- (5) Question not attempted

131. Most common metastatic tumor to esophagus

- (1) Breast cancer
- (2) Lung cancer
- (3) Pancreatic cancer
- (4) Endometrial cancer
- (5) Question not attempted

132. Which of the following is the most likely histologic finding in Barrett's oesophagus ?

- (1) Squamous epithelium
- (2) Intestinal type epithelium with goblet cells
- (3) Intestinal type epithelium without goblet cells
- (4) Gastric foveolar epithelium
- (5) Question not attempted

133. Which of the following condition is not a contraindication for Transoral Incision-less Fundoplication (TIF) ?

- (1) BMI more than 35 kg per square meter
- (2) Esophageal stricture
- (3) History of gastric and esophageal surgery
- (4) Hiatal hernia less than 2 cm
- (5) Question not attempted

134. All are true regarding inlet patch, except :

- (1) Found in upto 10% endoscopies
- (2) Contains gastric mucosa
- (3) May be infected with H. pylori
- (4) No association with proximal adenocarcinoma
- (5) Question not attempted

135. "Large, deep ulcers" on endoscopy are most often attributed to which infection in immunocompromised patients ?

- (1) Candida albicans
- (2) Herpes simplex virus (HSV)
- (3) Cytomegalovirus (CMV)
- (4) Helicobacter pylori
- (5) Question not attempted

136. Jackhammer esophagus, according to the Chicago Classification, is defined by

- (1) Hypercontractile peristalsis with distal contractile integral (DCI) exceeding a specific threshold.
- (2) Weak peristalsis with low-amplitude contractions.
- (3) Intermittent, non-peristaltic contractions.
- (4) Normal peristalsis with occasional high-pressure waves.
- (5) Question not attempted



137. Which hormone is decreased after ingestion of meals and plays an important role in sensation of fullness ?

- (1) CCK
- (2) Leptin
- (3) Ghrelin
- (4) Glucagon like peptide-I
- (5) Question not attempted

138. Which of the following is found in gastric body ?

- (1) Parietal cell
- (2) Pyloric gland
- (3) G Cell
- (4) D Cell
- (5) Question not attempted

139. For diagnosis of atrophic gastritis, how many endoscopic biopsies are required ?

- (1) Three random biopsies from the gastric fundus, cardia and antrum
- (2) Single random biopsy from the gastric body
- (3) Five random biopsy from the gastric body, incisura and antrum
- (4) None of these
- (5) Question not attempted

140. All of the following are true about Menetrier's disease, except:

- (1) Risk of gastric cancer is increased.
- (2) Hyperplasia of surface mucous cells is due to overproduction of TGF alpha.
- (3) HSV may have role in aetiology.
- (4) Cetuximab may be treatment option.
- (5) Question not attempted

141. According to recent guideline for treatment of H. pylori, Rifabutine triple therapy contains:

- (1) Omeprazole, Clarithromycin, Rifabutin
- (2) Omeprazole, Amoxicillin, Rifabutin
- (3) Omeprazole, Metronidazole, Rifabutin
- (4) Omeprazole, Bismuth, Rifabutin
- (5) Question not attempted

142. Which of the following is the most commonly mutated gene in gastric cancer ?

- (1) Adenomatous polyposis coli gene (APC)
- (2) RAS gene
- (3) MutL homolog 1 (MLH1)
- (4) TP 53
- (5) Question not attempted



143. Which of the following is not a risk factor for gastric adenocarcinoma ?

- (1) Peutz Jeigher syndrome
- (2) EBV
- (3) Fundic gland polyp
- (4) H. Pylori infection
- (5) Question not attempted

144. Most common site of metastasis of primary gastric adenocarcinoma ?

- (1) Left Supraclavicular lymph node
- (2) Liver
- (3) Lung
- (4) Peri umbilical lymph node
- (5) Question not attempted

145. All are true regarding GIST, except :

- (1) Most GISTs arise in stomach
- (2) Commonly metastasise to lymph nodes
- (3) May cause hypothyroidism
- (4) Most GIST seen endoscopically are submucosal
- (5) Question not attempted

146. H. pylori was discovered by

- (1) Marshall B & Warren R
- (2) Howkey B and Bosch R
- (3) Chan C and Richter R
- (4) Emad B & Nikrad R
- (5) Question not attempted

147. Genetic defect in MEN1 is in

- (1) Short arm of chromosome 11
- (2) Short arm of chromosome 12
- (3) Long arm of chromosome 11
- (4) Long arm of chromosome 12
- (5) Question not attempted

148. Which of the following H. pylori virulence factors is associated with increased gastric inflammation and peptic ulcer disease due to its ability to induce IL-8 secretion ?

- (1) VacA                      (2) CagA
- (3) BabA                    (4) Urease
- (5) Question not attempted

149. Uptake of glucose via apical membrane of enterocyte is example of

- (1) Facilitated diffusion
- (2) Secondary active transport
- (3) Primary active transport
- (4) Simple diffusion
- (5) Question not attempted

150. All of the following are endogenous agonists of intestinal secretion, except :

- (1) Gastrin
- (2) Acetyl Choline
- (3) Substance P
- (4) Neuropeptide Y
- (5) Question not attempted



## रफ़ कार्य के लिए स्थान / SPACE FOR ROUGH WORK

143. Which of the following is not a risk factor for gastric adenocarcinoma?
- (1) Pyloric atrophy
  - (2) EBV
  - (3) Fundic gland polyp
  - (4) H. Pylori infection
  - (5) Question not attempted
144. Most common site of metastasis of primary gastric adenocarcinoma?
- (1) Left Suprahilar lymph node
  - (2) Liver
  - (3) Lung
  - (4) Periaortic lymph node
  - (5) Question not attempted
145. All are true regarding GIST, except:
- (1) Most GISTs arise in stomach
  - (2) Commonly metastasise to lymph nodes
  - (3) May cause hypochromism
  - (4) Most GIST seen endoscopically
  - (5) Question not attempted
146. H. pylori was discovered by
- (1) Marshall B & Warren R
  - (2) Howkey B and Bosch R
  - (3) Chan C and Richter R
  - (4) Elmad B & Nikrad R
  - (5) Question not attempted
147. Genetic defect in MEN1 is in
- (1) Short arm of chromosome 11
  - (2) Short arm of chromosome 12
  - (3) Long arm of chromosome 11
  - (4) Long arm of chromosome 12
  - (5) Question not attempted
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