पुस्तिका में पृष्ठों की संख्या—32 No. of Pages in Booklet -32 पुस्तिका में प्रश्नों की संख्या—180 No. of Questions in Booklet -180

BSAP-22

प्रश्न पुरितका संख्या / Question Booklet No. **2000013** 

Paper Code: 10

SUBJECT: Psychiatry

(Broad Speciality)

समय : 3.00 घण्टे Time: 3.00 Hours अधिकतम अंक : 180

Maximum Marks: 180

प्रश्न-पत्र पुस्तिका के पेपर सील / पॉलिथिन बैग को खोलने पर परीक्षार्थी यह सुनिश्चित कर लें कि प्रश्न पुस्तिका संख्या तथा ओ.एम.आर उत्तर-पत्रक पर अंकित बारकोड समान हैं। इसमें कोई भिन्नता हो तो परीक्षार्थी वीक्षक से दूसरा प्रश्न-पत्र प्राप्त कर लें। ऐसा सुनिश्चित करने की जिम्मेदारी अभ्यर्थी की होगी।

On opening the paper seal /polythene bag of the Question Booklet the candidate should ensure that Question Booklet Number and Barcode of OMR Answer Sheet must be same. If there is any difference, candidate must obtain another Question Booklet from Invigilator. Candidate himself shall be responsible for ensuring this.

## परीक्षार्थियों के लिए निर्देश

- 1. सभी प्रश्नों के उत्तर दीजिए।
- 2. सभी प्रश्नों के अंक समान हैं।
- 3. प्रत्येक प्रश्न का केवल एक ही उत्तर दीजिए।
- 4. एक से अधिक उत्तर देने की दशा में प्रश्न के उत्तर को गलत माना जाएगा।
- 5. प्रत्येक प्रश्न के चार वैकल्पिक उत्तर दिये गये हैं, जिन्हें क्रमशः
  1, 2, 3, 4 अंकित किया गया है। अभ्यर्थी को सही उत्तर निर्दिष्ट करते हुए उनमें से केवल एक गोले अथवा बबल को उत्तर-पत्रक पर नीले बॉल पॉइंट पेन से गहरा करना है।
- 6. OMR उत्तर-पत्रक इस परीक्षा पुस्तिका के अन्दर रखा है। जब आपको परीक्षा पुस्तिका खोलने को कहा जाए, तो उत्तर-पत्रक निकाल कर ध्यान से केवल नीले बॉल प्वॉइंट पेन से विवरण भरें।
- 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। किसी भी प्रश्न से संबंधित गोले या बबल को खाली छोड़ना गलत उत्तर नहीं माना जायेगा।
- मोबाइल फोन अथवा इलेक्ट्रॉनिक यंत्र का परीक्षा हॉल में प्रयोग पूर्णतया वर्जित हैं। यदि किसी अभ्यर्थी के पास ऐसी कोई वर्जित सामग्री मिलती है, तो उसके विरुद्ध आयोग द्वारा नियमानुसार कार्यवाही की जायेगी।
- कृपया अपना रोल नम्बर ओ.एम.आर. पत्रक पर सावधानीपूर्वक सही भरें। गलत अथवा अपूर्ण रोल नम्बर भरने पर 5 अंक कुल प्राप्तांकों में से काटे जा सकते हैं।
- 10. यदि किसी प्रश्न में किसी प्रकार की कोई मुद्रण या तथ्यात्मक प्रकार की त्रुटि हो, तो प्रश्न के हिन्दी तथा अंग्रेज़ी रूपान्तरों में से अंग्रेज़ी रूपान्तर मान्य होगा।

चेतावनी: अगर कोई अभ्यर्थी नकल करते पकड़ा जाता है या उसके पास से कोई अनिधकृत सामग्री पाई जाती है, तो उस अभ्यर्थी के विरुद्ध पुलिस में प्राथमिकी दर्ज कराते हुए विविध नियमों—प्रावधानों के तहत कार्यवाही की जाएगी। साथ ही विभाग ऐसे अभ्यर्थी को भविष्य में होने वाली विभाग की समस्त परीक्षाओं से विवर्जित कर सकता है।

## **INSTRUCTIONS FOR CANDIDATES**

- 1. Answer all questions.
- 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.
- Each question has four alternative responses marked serially as 1, 2, 3, 4. You have to darken only one circle or bubble indicating the correct answer on the Answer Sheet using BLUE BALL POINT PEN.
- The OMR Answer Sheet is inside this Test Booklet. When
  you are directed to open the Test Booklet, take out the
  Answer Sheet and fill in the particulars carefully with blue
  ball point pen only.
- 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. Leaving all the relevant circles or bubbles of any question blank will not be considered as wrong answer.
- 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 as per rules.
- Please correctly fill your Roll Number in O.M.R. Sheet.
   Marks can be deducted for filling wrong or incomplete Roll Number.
- If there is any sort of ambiguity/mistake either of printing or factual nature, then out of Hindi and English Version of the question, the English Version will be treated as standard.

**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 liable to be prosecuted. Department may also debar him/her permanently from all future examinations.

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

## **PSYCHIATRY**

	C/S		PSYCHIA	TRY	
1.	0	y's classical study of rhesus monk	evs the hah	y rhesus monkeys preferred soft-clothed, non-	
	$\mathbf{C}$				
	Treeding w	g surrogate mothers to hard, w	ire mesh, l	out food-providing surrogate mothers. This	
	illustra	ted the concept of -			
	(1)	imprinting	(2)	individuation	
	(3)	insecure attachment	(4)	contact comfort	
2.	A boy	recognizes that the amount of wa	ter remains	the same when transferred from a tall narrow	
	glass to	a wide-mouthed glass. Which st	age of Piage	et's developmental model is he likely to have	
	attaine	d?			
	(1)	Sensorimotor stage	(2)	Preoperational stage	
	(3)	Concrete operational stage	(4)	Formal operational stage	
3.	Which	one of the following terms was co	oined by Ma	ry Ainsworth?	
	(1)	Anaclitic depression	(2)	Transitional object	
	(3)	Separation individuation	(4)	Secure base	
4.	With w	hich of the following developmer	ntal phases i	s Margaret Mahler associated?	
	(1)	Autistic phase	(2)	Conventional morality phase	
	(3)	Individuality vs inferiority phase	(4)	Operational phase	
5.	Which	of the following refers to the m	nechanism b	y which several unconscious wishes can be	
	combined into a single image in the manifest dream content?				
	(1)	Symbolic representation	(2)	Secondary revision	
	(3)	Condensation	(4)	Dream work	
6.	Popula	tion genetics encompasses all of the	he following	g, except –	
	(1)	genetic epidemiology	(2)	genetic demography	
	(3)	molecular genetics	(4)	evolutionary genetics	
		****			

	Match the following Normality in context –						
	(A)	Autor	ormal		(a)		Person seen as normal by members of another society observing him or her.
	(B)	Autopathological			(b)		Person seen as unusual or pathological by members of another society observing him or her.
	(C)	Heter	onormal		(c)		Person seen as normal by his or her own society.
	(D)	Heter	opatholo	gical	(d)		Person seen as abnormal by his or her own society.
		(A)	(B)	(C)	(D)		
	(1)	a	Ъ	c	d		
	(2)	c	d	a	b		y
	(3)	c	a	d	b		<i>p</i>
^	(4)	С	b	d	a		
8.	Disinh	ibition is as	ssociated	with wl	hich of the	followi	ng brain areas or localizations?
	(1)	Left front	al lobe			(2)	Right frontal lobe
	(3)	Third from	ntal gyru	s		(4)	Left limbic area
9.	Which	of the fol	lowing s	tatistica	l procedui	res is us	sed to evaluate the frequency of events in a
	popula	tion?					-
	(1)	T-test				(2)	Chi-squared test
	(3)	Discrimin	ant anal	ysis		(4)	Z-score
10.	Which	of the follo	wing sta	tement i	is incorrec	t about I	Empathy?
	(1)	Empathy	is unders	standing	what the J	patient is	s thinking and feeling.
	(2)	An essent	ial ingre	dient in	empathy is	s retainii	ng subjectivity.
	(3)	If the psyc	chiatrist	is uncer	tain about	the patie	ent's experience, it's better not to guess.
	(4)	The major	rity of en	npathic	responses	in an int	erview are nonverbal.
11.	In which	ch of the fo	llowing	conditio	ns patients	are una	ware of their communication problems?
	(1)	Broca's a	phasia			(2)	Wernicke's aphasia
	(3)	Conduction	on aphasi	a		(4)	Global aphasia
[10]	<b>1</b> 1	<del>, , , , , , , , , , , , , , , , , , , </del>			Page 3 c	of 32	

[10]	<u> </u>	Page 4 of 3	22	
	(3)	Migrainous hallucinations	(4)	Haptic hallucinations
	(1)	Ictal hallucinations	(2)	Autoscopic hallucinations
	as mici	opsia and macropsia may occur –		
16.	Most o	f the time these are simple visual halluci	nation	as of geometric patterns, but phenomena such
	(3)	thought	(4)	cosmetic
	(1)	mood	(2)	perception
15.	Depers	onalisation is a disorder of –		
	(3)	Confrontation	(4)	Taking a medical history
	(1)	Open-ended questions	(2)	Acknowledgement of affect
14.	Which	of the following is a supportive interven	tion d	uring a clinical interview process?
	(3)	Interpretation	(4)	Reflecting
	(1)	Facilitation	(2)	Closed-ended question
	techniq	ue best describes the above statement?		•
	anxiou	s since these changes occurred at your	r worl	x place.' Which of the following interview
13.	During	a clinical interview the following state	ment i	is made by the clinician: 'So you have been
		Mamillary body → Anterior nucleus of	thala	mus.
	(4)	Anterior nucleus of thalamus → H	Iippoc	campal formation $\rightarrow$ Cingulate cortex $\rightarrow$
		Cingulate gyrus → Hippocampal forma	ation.	
	(3)	Hippocampal formation → Anterior	nucl	eus of thalamus $\rightarrow$ Mamillary body $\rightarrow$
		Cingulate gyrus $\rightarrow$ Mamillary body.		
	(2)	Mamillary body → Hippocampal f	ormat	ion $\rightarrow$ Anterior nucleus of thalamus $\rightarrow$
		Cingulate gyrus → Hippocampal forma	ation.	
	(1)	Hippocampal formation → Mamilla	ry bo	ody → Anterior nucleus of thalamus →

12.

Correct connecting sequence of Papez circuit is -

- 17. Which of the following is correct regarding differences between DSM-5 and DSM-IV pertaining to substance use disorders?
  - (1) The substance use disorder criterion of legal problems from the DSM-IV has been added
  - (2) In the DSM-IV, patients needed two or more symptoms present to be diagnosed with substance abuse, while the DSM-5 requires only one symptom in order to be diagnosed with substance use disorder
  - (3) The DSM-5 eliminated the physiological subtype and the diagnosis of polysubstance dependence
  - (4) In the DSM-5, substance use disorder has been broken into two separate diagnoses of substance abuse and substance dependence
- 18. Assessment of insight is an integral part of mental state examination in psychiatric practice. Regarding insight, which of the following statement is true?
  - (1) Patients with schizophrenia will never have insight into their illness.
  - (2) OCD being a neurosis, insight is always intact.
  - (3) Intellectual insight is present when patients' awareness and understanding of their symptoms lead to change in behaviour.
  - (4) Loss of insight is similar to the concept of anosognosia in neurological illness.
- 19. The following changes have been done in DSM-5 over DSM-IV TR in regard to sexual dysfunctions, except—
  - (1) In DSM-5, gender-specific sexual dysfunctions have been added
  - (2) For females, sexual desire and arousal disorders have been combined into one disorder female sexual interest / arousal disorder
  - (3) All of the DSM-5 sexual dysfunctions (except substance/ medication-induced sexual dysfunction) now require a minimum duration of approximately 1 month
  - (4) Sexual dysfunction due to a general medical condition and the subtype due to psychological versus combined factors have been deleted
- **20.** When true sensory input in one modality leads to hallucination in another modality, it is referred to as
  - (1) extracampine hallucination
- (2) synesthesia

(3) reflex hallucination

(4) kinesthetic hallucination

- 21. Ambivalence is typically seen in
  - (1) obsessive compulsive disorder and schizophrenia
  - (2) schizophrenia and conversion disorder
  - (3) obsessive compulsive disorder and dementia
  - (4) obsessive compulsive disorder and conversion disorder
- 22. Mutism and Akinesis in a person who appears awake is a feature of
  - (1) oneiroid state
  - (2) occupational delirium
  - (3) stupor
  - (4) twilight state
- 23. A thirty-six-years-old woman working in a nationalized bank is convinced that Managing Director of Bank is in love with her and they are planning to get married soon. Her family members and friends are not aware of this fact and deny the existence of this relationship. What is the type of delusion she is having?
  - (1) Delusion of Grandiosity
  - (2) Delusion of Persecution
  - (3) Erotomanic delusion
  - (4) Somatic delusion
- 24. Which of the following statement is true when enquiring about suicidal ideation?
  - (1) This should not be asked unless the patient volunteers information.
  - (2) Passive suicidal ideas must be enquired further for any plans made.
  - (3) Asking about suicidal ideation can instil suicidal ideas in a person.
  - (4) A person who intends to attempt suicide will never divulge.
- 25. Regarding a new thought as a repetition of a previous thought is known as -
  - (1) Deja entendu
  - (2) Deja pense
  - (3) Deja vu
  - (4) Jamais vu

26.	Which	h of the following is the most clinically useful method of diagnosing Alzheimer's disease?			
	(1)	Clinical interview			
	(2)	CT scans			
	(3)	Functional MRI			
	(4)	SPECT			
27.	Nihili	stic delusion is an example of –			
	(1)	disorder of continuity of self over time			
	(2)	disorder of ego boundary			
	(3)	disorder of unity of self			
	(4)	disorder of ego vitality			
28.	All of	the following are features of hallucination, except -			
	(1)	it is independent of will of the patient			
	(2)	sensory organs are not involved			
	(3)	it is as vivid as that in a true sense perception			
	(4)	it occurs in the absence of a perceptual stimulus			
29.	Autoso	copy can involve all of the following, except –			
	(1)	visual hallucinations of internal organs within bodily space			
	(2)	failure to perceive self in a mirror			
	(3)	visual hallucination of exact copy of the self in mirror image			
	(4)	projection of the observing self in extra personal space			
30.	The fo	llowing are examples of primary delusions, except –			
	(1)	Delusional intuition			
	(2)	Delusional misidentification			
	(3)	Delusional percept			
	(4)	Delusional atmosphere			
31.	The fol	lowing are true of confabulation, except –			
	(1)	it is a false memory			
	(2)	it can involve embellishment of actual memories			
	(3)	suggestibility is not a prominent feature			
	(4)	it is associated with organic amnesia			
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<del> </del>	(4)	There is clear phenomenological separ	ation	between early-onset and late-onset cases.	
	(3)	The early-onset type may have a more	rapid	y progressive course.	
	(2)	Brain imaging studies are used to exclu	ide of	her identifiable causes.	
	(1)	The age at onset is earlier in patients w	ith a f	amily history of the disease.	
37.		tatements about Alzheimer's disease incl			
	(4)	Bender-Gestalt test			
	(3)	Rorschach test			
	(2)	Thematic apperception test			
	(1)	Sentence completion test			
36.	Best p	sychological test for diagnosis of organic	ment	al disorder is –	
	(4)	Genetic linkage to chromosome 9 has l	oeen f	ound in frontotemporal dementia.	
	(3)	Progressive nonfluent aphasia is a fron	totem	poral dementia.	
	(2)	Frontotemporal dementia is more likely	y to af	fect older populations.	
	(1)	Pick bodies are found in all the frontoto	-		
the following statement is true?					
35.		•	ntia sl	nows frontal and temporal atrophy. Which of	
	(4)	progressive language dysfunction			
	(3)	cognitive decline caused by cerebrovas	cular	disease	
	(2)	recurrent detailed visual hallucinations			
	(1)	disturbance of consciousness			
34.	The co	ore features of dementia with Lewy bodie	s incl	ude –	
	(4)	altered level of consciousness			
	(3)	multi model hallucinations			
	(2)	seizures			
	(1)	coarse tremors			
33.	The fo	llowing are the core symptoms of deliriu	m trei	mens, except –	
	(3)	normalising statements	(4)	looped questions	
	(1)	closed questions	(2)	summary statements	
32.	Specifi	ic communication skill techniques includ	es all	of the following, except	

38.	Sensitivity of neuroleptics is a clinical feature of which type of dementia?			
	(1)	Alzheimer's dementia	(2)	Vascular dementia
	(3)	Dementia with Lewy body	(4)	Frontotemporal dementia
39.	Which	statement below about the interrelations	hip be	etween delirium and dementia is true?
	(1)	Delirium is a risk factor for the develop	oment	of dementia.
	(2)	Fully two-thirds of cases of dementia o	ccur i	n patients with delirium.
	(3)	The vulnerability of the brain in patie delirium.	ents v	vith dementia may predispose the patient to
	(4)	Dementia contributes to a loss of indep	ender	ice among patients with delirium.
40.	A 65-y	year-old patient has been drinking nearly	80 un	its of alcohol a week for the last 13 years. He
	has n	umerous physical complications of a	alcoho	ol use including cirrhosis and cerebellar
	degene	eration. Which of the following is not a fe	eature	of cerebellar dysfunction?
	(1)	Positive Romberg's sign	(2)	Positive heel shin test
	(3)	Dysdiadochokinesia	(4)	Pendular knee jerk
41.	Schizo	phrenia-like psychosis is a prominent	feati	are of which of the following dementing
	illness	es?		
	(1)	Pick's disease	(2)	Creutzfeldt-Jakob Disease (CJD)
	(3)	Vascular dementia	(4)	Huntington's dementia
42.	The co	ore features of dementia with Lewy bodies	s inclu	ude –
	(1)	disturbance of consciousness		
	(2)	recurrent detailed visual hallucinations		
	(3)	cognitive decline caused by cerebrovaso	cular o	disease
	(4)	progressive language dysfunction		
43.	Which	of the following best describes the triad of	charac	eteristic of normal pressure hydrocephalus?
	(1)	Incontinence, dementia, confabulation		
	(2)	Headaches, visual disturbances, dement	ia	
	(3)	Headaches, ataxia, dementia		
	(4)	Ataxia, dementia, incontinence		
[10]	<u> </u>	Page 9 of 3	2	

38.

- 44. Which of the following is a feature of cognitive dysfunction in Huntington's disease?
  - (1) Sparing of verbal recall
  - (2) Late-onset verbal memory and visuospatial dysfunction
  - (3) Sparing of procedural memory
  - (4) Early executive function loss
- **45.** Which of the following statement is true about brief psychotic disorder?
  - (1) Approximately 10 percent of patients diagnosed retain the diagnosis.
  - (2) Fifty percent of the cases evolve into either schizophrenia or major mood disorder.
  - (3) There are clear distinguishing features between brief psychotic disorder and acute-onset schizophrenia on initial presentation.
  - (4) Poor prognosis is associated with emotional turmoil.
- **46.** MRI studies of patients with schizophrenia have found evidence for
  - (1) increased cortical gray matter
  - (2) increased temporal cortex gray matter
  - (3) increased volume of the amygdala
  - (4) increased volume of basal ganglia nuclei
- 47. Investigations into the cause of schizophrenia have revealed that
  - (1) a monozygotic twin reared by adoptive parents has schizophrenia at the same rate as his or her twin raised by biological parents.
  - (2) a specific family pattern plays a causative role in the development of schizophrenia.
  - (3) the efficacy and potency of most antipsychotics correlate with their ability to act primarily as antagonists of the dopamine type 1 (D1) receptor.
  - (4) a particular defective chromosomal site has been found in all schizophrenic patients.
- 48. A Schizophrenic patient who states that he feels his brain burning is most likely experiencing a
  - (1) cenesthetic hallucination
  - (2) delusional perception
  - (3) extracampine hallucination
  - (4) derealization

- **49.** Which of the following is most likely to be associated with an increased risk of developing schizophrenia?
  - (1) Being born in an urban area
  - (2) Being recurrently placed in a 'double-bind' situation as a child
  - (3) Experiencing high expressed emotions in the family home
  - (4) Maternal alcohol use during pregnancy
- A 37-year-old man has an eccentric hobby of preserving animal carcasses found on roadside. He also has suspiciousness, magical thinking and obsessive ruminations though he does not resist them. He has never had a diagnosis of schizophrenia. This description best fits which of the following diagnosis?
  - (1) Schizoid personality

(2) Schizotypal disorder

(3) Hoarding disorder

- (4) Schizophreniform disorder
- 51. Which of the following with regard to cannabis use in schizophrenia is incorrect?
  - (1) Cannabis use could be a self medication attempt
  - (2) Psychosis in cannabis users may be mediated by polymorphisms in COMT
  - (3) Cannabis is associated with schizophrenia in a dose-dependent fashion
  - (4) Cannabis intoxication is indistinguishable from schizophrenia
- 52. With regard to the ventricular size in schizophrenia, which of the following statement is true?
  - (1) Patients with schizophrenia invariably demonstrate significant enlargement of the fourth ventricle only.
  - (2) Ventricular enlargement is a pathognomonic finding in schizophrenia.
  - (3) Ventricular changes in schizophrenia are likely to be specific for the pathophysiological processes underling this disorder.
  - (4) None of the above
- 53. Which of the following statement about the dopamine hypothesis of schizophrenia is true?
  - (1) Dysregulation of dopaminergic neurotransmission is caused by postsynaptic sensitivity.
  - (2) Dopamine release caused by amphetamine challenge is higher during remission.
  - (3) Higher amphetamine-provoked dopamine release predicts worsening of psychotic symptoms.
  - (4) Overactivity of dopamine in the subcortical basal ganglia contributes to negative symptoms.

All of the following therapies have got evidence in management of schizophrenic patient, except-54. cognitive behaviour therapy **(1)** systematic desensitization **(2)** (3) family therapy assertive community treatment **(4)** All of the following statements are true about neuroleptic malignant syndrome, except -55. women are affected more frequently than are men. **(1)** young persons are affected more commonly than are elderly person. **(2) (3)** mortality rate can reach 20 to 30%. high mortality with high doses of high-potency antipsychotics. **(4)** 56. Which of the following statement about the cause of negative symptoms in schizophrenia is false? Patients lose drive because circumstances eliminate them. **(1)** Excessive doses of antipsychotic medications cause blunting of affect. **(2)** Persecutory delusions can lead to social withdrawal. (3) None of the above **(4)** 57. True statement about violence and schizophrenia include all of the following, except -Patients with schizophrenia are more violent as a group than the general population. **(1)** It is more difficult to prevent most schizophrenic homicides compared with the general **(2)** population. Patients with disorganized schizophrenia are at much greater risk to commit violence than (3) those with paranoid schizophrenia. Command hallucinations do not appear to play a particularly important role in violence. **(4)** 58. Role of social skill training in schizophrenia is which level of prevention? **(1)** Secondary **Primary (2)** (3) Primary and Secondary **(4)** Tertiary

- 59. Seasonal Affective Disorder (SAD) is a popular concept but not formally considered as a separate category under current classificatory systems. Which of the following statement is true with regard to this condition?
  - (1) Seasonal depression carries higher familial risk of affective disorders than non-seasonal depression.
  - (2) In phototherapy for SAD, exposure to skin is more effective than exposure to eye.
  - (3) Early-morning light therapy is more effective than evening exposure.
  - (4) Conventional antidepressants have no effect on seasonal depression.
- 60. The defense mechanism most commonly used in depression is
  - (1) undoing
  - (2) sublimation
  - (3) projection
  - (4) introjection
- 61. All of the following neuroendocrine changes are noted in depression, except
  - (1) raised salivary cortisol measures
  - (2) abnormal dexamethasone suppression test
  - (3) reduced Corticotropin-Releasing Hormone (CRH) in cerebrospinal fluid
  - (4) down-regulated CRH receptors
- **62.** Which of the following antidepressants would not be the best choice for a patient with a history of suicidal ideation?
  - (1) Bupropion
  - (2) A selective serotonin reuptake inhibitor
  - (3) A tricyclic antidepressant
  - (4) Venlafaxine
- 63. Which of the following is true with regard to the longitudinal course of bipolar disorder?
  - (1) Initial episodes have more rapid onset than later episodes
  - (2) The interval between episodes decreases progressively
  - (3) Seasonal pattern is more common in bipolar type 1 than type 2
  - (4) Later episodes are more likely to be triggered by life events than the initial episodes

- **64.** Which of the following predicts a good prophylactic effect of lithium in bipolar disorder?
  - (1) Good antimanic efficacy during acute episode
  - (2) Absence of family history of bipolar disorder
  - (3) Presence of neurological signs
  - (4) 'Depression-mania-well interval' pattern of bipolar course
- 65. The most consistent Computed Tomography (CT) and Magnetic Resonance Imaging (MRI) abnormality observed in depressive disorders is
  - (1) cortical atrophy
  - (2) sulcal widening
  - (3) ventricular enlargement
  - (4) increased frequency of hyperintensities in subcortical regions
- A 27-year-old patient has been diagnosed with bipolar disorder. Before starting this patient on lithium for mood stabilization, which of the following laboratory tests should be obtained?
  - (1) Thyroid function tests, creatinine, pregnancy test
  - (2) Thyroid function tests, creatinine, liver function tests
  - (3) Thyroid function tests, creatinine, complete blood count
  - (4) Thyroid function tests, complete blood count, pregnancy test
- 67. All of the following statement are true about bipolar disorder, except
  - (1) Prevalence is more amongst females than males.
  - (2) Lifetime prevalence is between 1.4 and 2.1%.
  - (3) Mean age of onset is 20 years.
  - (4) Comorbid substance use disorders and anxiety disorders markedly increase the risk of suicide.
- 68. The symptoms hypersomnia, weight gain, hyperphagia occur in certain periods and which respond to phototherapy seen in -
  - (1) major depression
  - (2) dysthymia
  - (3) cyclothymia
  - (4) seasonal affective disorder

09.	A 25-5	vear-old female with BPAD – II wants to	get p	regnant, which drug should be preferred?		
	(1)	Divalproex sodium	(2)	Oxcarbazepine		
	(3)	Lithium carbonate	(4)	Lamotrigine		
70.	A 42-	year-old male with past history of mani	ic epi	sode, presents with an illness of one month		
	duratio	on characterized by depressed mood, anhedonia and profound psychomotor retardation. The				
	most a	ppropriate management strategy is prescr	ribing	combination of –		
	(1)	antipsychotic and antidepressant				
	(2)	antipsychotic and mood stabilizer				
	(3)	mood stabilizer and antidepressant				
	(4)	antidepressant and benzodiazepines				
71.	Buspir	one acts as a –				
	(1)	dopamine partial agonist useful in the t	reatm	ent of OCD		
	(2)	serotonin partial agonist useful in the treatment of OCD				
	(3)	dopamine partial agonist useful in the t	reatm	ent of generalized anxiety disorder		
	(4)	serotonin partial agonist useful in the tr	eatme	ent of generalized anxiety disorder		
72.	Brain 1	regions implicated in the pathophysiology	y of ol	osessive – compulsive disorder, except –		
	(1)	nucleus accumbens	(2)	anterior cingulate		
	(3)	orbitofrontal cortex	(4)	Striatum		
73.	A pers	on missing from home, found wandering	g purp	posefully, well groomed, has some degree of		
	amnesi	a. The diagnosis is of –				
	(1)	dissociative fugue	(2)	dissociative amnesia		
	(3)	schizophrenia	(4)	dementia		
74.	The be	st account for diagnosis of psychoneuros	is is d	erived from –		
	(1)	reaction to environment	(2)	visceral reaction		
	(3)	verbal account	(4)	motor behaviour		
75.	Sigmu	nd Freud postulated that the defense mech	hanisı	ns necessary in phobias are -		
	(1)	regression, condensation and dissociation	on			
	(2)	regression, condensation and projection	ı			
	(3)	regression, repression and isolation				
	(4)	repression, displacement and avoidance	<b>;</b>			
		· <del></del>				

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	(3)	Panic disorder	(4)	Generalized anxiety disorder
	(1)	Depressive disorder	(2)	Agoraphobia
	best fits	s which of the following diagno	sis?	
	for her	12-year-old son as she finds i	routine housev	work extremely demanding. This description
	home,	leading to loss of interest in leis	sure activities.	She feels guilty for not being a good mother
81.			•	c attacks. She feels low and cannot leave her
	(4)	Fear of vomiting in public may		,
	(3)	Blushing is more common that		ety disorders
	(2)	Symptoms more pronounced in	-	
JU.	(1)	Younger age of onset than other	_	nai piiuuia:
80.	(3) Which	Family history of OCD of the following is incorrect wit	(4)	Presence of depressive symptoms
	(1)	Male gender	(2)	Poor insight
79.		one of the following is not a po		
70	(4)	Autonomic arousal during trau		
	(3)	Panic attack during trauma		
	(2)	Emotional numbing during tra	uma	
		•	•	na
	(1)	Anterograde amnesia immedia	staly ofter trous	na
78.	of PTS	_	uring trauma h	as the capacity to predict future development
70	(4)			spinal fluid are abnormally high.
	(3)	-		imipramine are abnormally low.
	(2)	Dysregulation of serotonin is i		
	(1)	Serotonergic drugs are an effe		
,,,		_	•	
77.		_	_	ribes the role of serotonin in OCD?
	(4)	patients without comorbid ago		
	(3)	comorbid depression increases	•	
	(2)	excessive caffeine intake can		•
	(1)	patients become concerned aft	ter the first one	or two panic attacks

All of the following are true for the course of panic disorder, except -

**76.** 

82.	Which of the following disorder is not included in obsessive-compulsive and related disorders as per DSM-5?					
	(1)	Body dysmorphic disorder	(2)	Hypochondriasis		
	(3)	Skin picking disorder	(4)	Hair pulling disorder		
83.	Which	one of the following specific phobias is				
	(1)	Animal phobia	(2)	Space phobia		
	(3)	Blood injury injection phobia	(4)	Acrophobia		
84.	Which	•		to psychological impairment that could be		
		osed as an adjustment disorder?		to pojenorogical impairment that could be		
	(1)	Loss of a job	(2)	A plane crash		
	(3)	Rape	(4)	All of the above		
85.	Which	of the following selections is not associa	ated w	ith intermittent explosive disorder?		
	(1)	Patients may feel helpless before an ep	isode.	-		
	(2)	The disorder usually grows less severe with age.				
	(3)	A predisposing factor in childhood is encephalitis.				
	(4)	Dopaminergic neurons mediate behavi	oral in			
86.	Which	of the following does not resemble panie	c attac	k?		
	(1)	Symptoms of Pheochromocytoma	(2)	Illicit stimulants		
	(3)	Psychomotor Epilepsy	(4)	GTCS (Generalised Tonic Clonic Seizure)		
87.	All are	the examples of circadian rhythm sleep	disord	ers, except –		
	(1)	paradoxical insomnia	(2)	jet lag disorder		
	(3)	shift work disorder	(4)	delayed sleep-wake phase disorder		
88.	Follow	ing are NREM-related sleep disorders, e	xcept -			
	(1)	recurrent isolated sleep paralysis	(2)	confusional arousals		
	(3)	sleep walking	(4)	sleep terrors		
89.	A poor	prognostic factor for anorexia nervosa is	s –			
	(1)	absence of purging behaviour	(2)	early age of onset		
	(3)	poor academic achievement	(4)	male gender		
				<del>-</del>		

90. Which of the following statement is correct about people with dual role transvestism? Cross dressing results in sexual arousal and gratification. **(1)** (2)There is sexual motivation for the cross dressing. The individual has desire for a permanent change to the opposite sex. **(3)** The individual experiences a sense of appropriateness by wearing clothes of the other **(4)** gender. 91. A 29-year-old man presents with erectile dysfunction. His history reveals excessive stress at work. Which of the following indicates a psychogenic rather than an organic cause for his sexual dysfunction? **(1)** Sudden onset of the erectile problem Erectile dysfunction occurs in all settings **(2)** Loss of early-morning erections **(3) (4)** Preserved ejaculation despite impaired erection 92. Which impulse – control disorder is structured more like a substance use disorder? Pyromania **(1)** (2) Pathological gambling **(3)** Kleptomania Intermittent explosive disorder (4)93. A dysfunction in the hypocretin system plays a critical role in which of the following disorders? (1)Insomnia (2)Sleepwalking (3)Restless legs syndrome (4)Narcolepsy 94. Which of the following is the most common comorbid disorder associated with anorexia nervosa? (1)Body dysmorphic disorder **(2)** Bulimia Obsessive-compulsive disorder (3)Depression **(4)** 95. A useful diagnostic procedure for distinguishing between psychogenic and organic impotence is -24 – hours monitoring of serum gonadotropin hormone **(1)** (2)nasopharyngeal Electroencephalogram (EEG) recording (3)testosterone challenge test

**(4)** 

monitoring of penile tumescence during sleep

96.	Essential ingredient of Master and Johnson treatment of impotence is -			
	(1)	reassurance		
	(2)	therapeutic alliance		
	(3)	avoidance of the demand for performa	ance	
	(4)	adequate history taking		
97.	The E	Electroencephalogram (EEG) record sh	owing	sleep spindles and K-complex is normally
	record	ed during which stage of sleep?		
	(1)	Stage – I	(2)	Stage – II
	(3)	Stage – III	(4)	Stage – IV
98.	Follov	ving are the features of paranoid persona	lity dis	sorder, except –
	(1)	hyper-sensitivity	(2)	inability to relax
	(3)	expanded affectivity	(4)	pervasive suspiciousness
99.	A per	son with traits punctual, disciplinari	ian, pa	arsimonious, clean liking, orderliness has
	person		-	<i>G</i> ,
	(1)	dysthymia	(2)	narcissistic
	(3)	schizotypal	(4)	anankastic
100.	Charac	eteristic finding of schizoid personality is	s	
	(1)	emotional coldness	(2)	conversion disorder
	(3)	checking details of all things	(4)	not concerned with disease
101.	As per	DSM-5 general personality disorder, of	cluster	A includes all of the following personality
	disorde	ers, except –		
	(1)	avoidant personality disorder	(2)	schizoid personality disorder
	(3)	schizotypal personality disorder	(4)	paranoid personality disorder
102.	Which	personality disorder is characterised by	impul	siveness, labile mood, episodes of outbursts,
	poor se	elf image?		
	(1)	Histrionic personality disorder		
	(2)	Anankastic personality disorder		
	(3)	Narcissistic personality disorder		
	(4)	Emotionally unstable personality disor-	der	

103.	Which personality disorder is considered to be closely associated with bipolar diathesis?			
	(1)	Borderline personality	(2)	Narcissistic personality
	(3)	Antisocial personality	(4)	Schizoid personality
104.	_	ent has tenacious sense of personal rights onality disorder to be considered is –	s, lead	ing on to repeated quarrels with neighbours.
	(1)	anankastic personality disorder	(2)	passive aggressive personality disorder
	(3)	paranoid personality disorder	(4)	borderline personality disorder
105.	Antisod	cial personality disorder is associated wit	h an i	ncreased risk for –
	(1)	anxiety disorders	(2)	major depressive disorder
	(3)	somatization disorder	(4)	All of the above
106.	Which	of the following best differentiates hypoc	chond	riasis from somatoform disorder?
	(1)	Patients with hypochondriasis are conce	erned	about symptoms rather than diagnosis.
	(2)	Somatizing patients ask for treatment as	nd syr	nptom relief.
	(3)	Somatizing patients are concerned about	ıt diag	nosis.
	(4)	Hypochondriacal patients ask for treatn	nent ra	ther than investigations.
107.	True st	atement about diagnosing specific persor	nality	disorders include –
	(1)	The diagnosis may not be made in child	lren.	
	(2)	Antisocial personality disorder may be age.	diagn	osed in individuals younger than 18 years of
	(3)	There is a potential sex bias in diagnosi	ng pe	rsonality disorders.
	(4)	Real gender differences do not exist in	the pr	evalence of personality disorders.
108.	Which	of the following is true regarding compli	icated	and dysfunctional grief reactions?
	(1)	Chronic grief is often highlighted by bi	tterne:	ss and idealization of the dead person.
	(2)	Delayed grief refers to grief, which is b	oth ch	ronic and hypertrophic
	(3)	Hypertrophic grief frequently takes on	a shor	t term course but intense.
	(4)	Delayed grief occurs when social sup extended time.	ports	is unavailable to share the sorrow over the
109.	Culture	e-bound syndromes in which dissociative	fugue	e is a prominent feature include?
	(1)	Amok	(2)	Latah
	(3)	Piblokto	(4)	All of the above

110.	Which of the following is consistent with 'Da Costa's syndrome?					
	(1)	1) It is a culture bound syndrome found in North-America.				
	(2)	Symptoms are similar to those of cardiac dysfunction.				
	(3)	) It is closely associated with depression.				
	(4)	Syncope is prominent symptom.				
111.	Who c	coined the term 'Dhat syndrome'?				
	(1)	J. S. NEKI	(2)	Vidyasagar		
	(3)	N. N. Wig	(4)	J. C. Bose		
112.	A term	refers to an episode of sudden and into	ense a	nxiety that the penis (or in women, the vulva		
	and ni	pples) will recede into the body and poss	sible c	ause of death is –		
	(1)	koro	(2)	amok		
	(3)	latah	(4)	arctic hysteria		
113.	Which	statement regarding 'Brain Fag' is corre	ect?			
	(1)	It causes patient to have difficulty in remembering and concentrating.				
	(2)	It is condition of slowing of brain in elderly people.				
	(3)	It is a somatoform disorder.				
	(4)	It occurs as a result of eating brain infe	ected b	by prions.		
114.	A drug	which causes persistent penile erection	accon	npanied severe pain (priapism) is -		
	(1)	Fluoxetine	(2)	Bupropion		
	(3)	Thioridazine	(4)	Trazodone		
115.	Fever,	pancytopenia, hypoglycemic coma, ren	al failı	ure etc. are the common findings in a person		
	who tried to commit suicide by -					
	(1)	Tricyclic antidepressants	(2)	Olanzapine		
	(3)	Acetaminophen	(4)	Haloperidol		
116.	The ty	pe of suicide associated with people w	vhose	integration into society is so disturbed that		
	custom	ary norms cannot be followed -				
	(1)	egoistic suicide	(2)	altruistic suicide		
	(3)	anomic suicide	(4)	para-suicide		
		<del></del>				

- 117. Restraints are used when patients are too dangerous to themselves or others. Which of the following statement is true about restraints?
  - (1) are contraindicated in patients with unstable medical conditions
  - (2) may worsen symptoms of delirium
  - (3) should be removed one at a time after the patient is under control
  - (4) All of the above
- 118. When eliciting suicide risk, which of the following questions should be avoided if possible?
  - (1) Do you have any plans to kill yourself?
  - (2) Have you ever considered life is not worth living?
  - (3) Have you ever wanted to go to sleep and never wake up?
  - (4) None of the above
- 119. Which of the following statement about gender differences in suicide is false?
  - (1) The suicide completion rate for males is three time higher than that of females.
  - (2) Males attempt suicide three times as often as females.
  - (3) Females choose methods that are less painful.
  - (4) Females have a greater margin of safety after suicide attempts than men.
- 120. All of the following are true, except
  - (1) a person who commit suicide, give definite warning about their intentions.
  - (2) suicidal persons are fully intent on dying.
  - (3) suicidal person is suicidal only for a limited period of time.
  - (4) suicidal person is not necessarily mentally ill.
- 121. A patient presented to the causality with history of sudden onset of palpitation, fear of impending doom, sweating and breathlessness. This lasted for about 10 to 15 minutes. All the investigations done were normal. Most likely diagnosis is
  - (1) cannabis intoxication
  - (2) hypoglycemia
  - (3) panic attack
  - (4) partial seizure

	(1)	through psychiatric assessment					
	(2)	use of Electroconvulsive Therapy (ECT) for every suicidal patient					
	(3)	close observation and searching patients belonging and weapon					
	(4)	hospital admission for severely depressed an	d suicidal patient				
123.	Suicid	e among schizophrenic patients –					
	(1)	is most frequently secondary to command ha	llucinations				
	(2)	occurs most often in the later years of the illn	ness				
	(3)	occurs most often in older female patients					
	(4)	is approximately 10 percent					
124.	A sch	izophrenic patient who is also an alcoholic	had previously attempted suicides on two				
	occasi	ons. She recently divorced her husband of 4	years. Of the following factors, which poses				
	the gre	eatest risk factor for suicide in this patient?					
	(1)	Alcoholism					
	(2)	Divorce .					
	(3)	Gender					
	(4)	Previous suicide attempts					
125.	Which	of the following antipsychotics is a drug of ch	oice for a patient with hepatic impairment?				
	(1)	Risperidone (2)	Amisulpride				
	(3)	Olanzapine (4)	Quetiapine				
126.	Among	g the SSRIs, which drug appears to present the	e most risk of drug - drug interactions and is				
	metabo	olised by the enzyme CYP 3A4 –					
	(1)	paroxetine (2)	fluoxetine				
	(3)	fluvoxamine (4)	sertraline				
127.	When	comparing unilateral and bilateral ECT which	of the following is true?				
	(1)	Memory deficits are less common with bilate	ral than unilateral ECT				
	(2)	Unilateral ECT is most effective at 2.5 times	the seizure threshold				
	(3)	Unilateral ECT is more effective compared to	o bilateral				
	(4)	Bilateral ECT acts faster than unilateral ECT					
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In management of suicide, always follow these principles, except -

122.

128.	The lo	The lower incidence of extrapyramidal side-effects due to clozapine compared to haloperidol is				
	possibl	y related to				
	(1)	duration of D2 receptor occupancy				
	(2)	glutamate blockade				
	(3)	GABA release at basal ganglia				
	(4)	intrinsic partial agonistic activity at the	D2 re	eceptor		
129.	Which	of the following statement is true about p	olasm	a levels of clozapine?		
	(1)	Plasma level monitoring is recommended	ed on	ce weekly for the first 6 months.		
	(2)	Plasma level increase when a smoker st	ops s	moking.		
	(3)	In schizophrenia the recommended plas	sma le	evel is 150 μg/L.		
	(4)	Plasma level is decreased by fluoxetine	•			
130.	Califor	nia Rocket fuel is combination of the fol	lowin	g drugs –		
	(1)	venlafaxine and mirtazapine				
	(2)	desvenlafaxine and escitalopram				
	(3)	venlafaxine and lithium				
	(4)	desvenlafaxine and bupropion				
131.	Which	antipsychotic depot injection produces "	Post i	njection syndrome"?		
	(1)	Aripiprazole	(2)	Risperidone		
	(3)	Olanzapine	(4)	Paliperidone		
132.	Which	antipsychotic is known to cause most Q	Γ - int	terval prolongation?		
	(1)	Olanzapine	(2)	Ziprasidone		
	(3)	Risperidone	(4)	Haloperidol		
133.	A pati	ent treated with anti-psychotics for	5 - :	years, develops peri-oral-bucco-linguo and		
	mastic	atory movements, diagnosis is -				
	(1)	akathisia				
	(2)	muscular dystonia				
	(3)	tardive - dyskinesia				
	(4)	neuroleptic malignant syndrome				

157.	1116 00	osofete treatment in psychiatry is –		
	(1)	electro-convulsive therapy	(2)	psychosurgery
	(3)	insulin coma therapy	(4)	light therapy
135.	Atropi	ne is used before electro-convulsive thera	ару–	
	(1)	to give anesthesia	(2)	to reduce oral secretions
	(3)	to reduce memory loss	(4)	to fasten antidepressant effects
136.	Which	statement is wrong about clozapine drug	treati	ment?
	(1)	The risk of seizure is about 4% in patie	nts tal	king more than 600 mg a day.
	(2)	Agranulocytosis is most common drug	relate	d adverse effect.
	(3)	During the first 6 months of treatment	weekl	y WBC counts are indicated to monitor.
	(4)	Clozapine should be discontinued if the	wB0	C count is below 3000 cells / mm <sup>3</sup> .
137.	Which	statement is false regarding pharmacolog	gic ac	tions of Lithium?
	(1)	Rapidly and completely absorbed after	oral a	dministration.
	(2)	Lithium does not bind to plasma protein	ns, no	t metabolised.
	(3)	The Blood-Brain barrier permits rapid	passag	ge of lithium.
	(4)	The plasma half life is increased after n	nore t	han one year administration.
138.	A 45-	year-old man with schizoaffective dis	sorder	is on lithium, sertraline, lorazepam and
	olanza	pine. He develops low sodium levels an	d con	aplains of extreme lethargy. The most likely
	offend	ing agent is –		
	(1)	sertraline ,	(2)	lithium
	(3)	olanzapine	(4)	benzodiazepines
139.	Which	of the following statements about children	en are	correct?
	(A)	Children are passive recipients of know	/ledge	).
	(B)	Children are problem solvers.		
	(C)	Children are scientific investigators.		
	(D)	Children are active explorers of the env	/ironn	nent.
	Answe	er -		
	(1)	A, B, C, D	(2)	A, B and C
	(3)	A, B and D	(4)	B, C and D
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140.	Comm	Common form of pica is –					
	(1)	Trichophagia	(2)	Geophagia			
	(3)	Lithophagia	(4)	Pagophagia			
141.	Follow	ving are causes of fetal malformation, exc	cept –				
	(1)	diabetes mellitus in mother	(2)	ionising radiation			
	(3)	hypertension in mother	(4)	maternal infection (Rubella)			
142.	In an a	assessment of 7-year-old boy with ment	al reta	ardation, you observe large ears, large testes			
	with r	normal penis and absence of pubic ha	ir. W	hat is the most common cause of mental			
	retarda	ation?					
	(1)	Down's syndrome	(2)	XXY syndrome			
	(3)	Adrenogenital syndrome	(4)	Fragile – X – syndrome			
143.	Tics ty	pically present for the first time during w	vhich	development stage?			
	(1)	Infancy	(2)	Prepuberty			
	(3)	Latency	(4)	Adolescence			
144.	A two	-year-old girl child is brought to the out	patie	nt with features of hand wringing stereotype			
	moven	novement, impairment of language and communication development, breath holding spells, poor					
	social	skills and deceleration of head growth af	ter 6 r	nonths of age. The most likely diagnosis is -			
	(1)	Asperger's syndrome	(2)	Rett's syndrome			
	(3)	Fragile - X - syndrome	(4)	Atypical Autism			
145.	Pfropf	schizophrenia is –					
	(1)	schizophrenia with mood disorder					
	(2)	mental retardation with conduct disord	er				
	(3)	mental retardation with schizophrenia					
	(4)	schizophrenia with attention deficit hyp	perkin	etic disorder			
146.	Attenti	ion deficit hyperkinetic disorder leads all	, exce	pt –			
	(1)	intellectual backwardness					
	(2)	schizophrenia					
	(3)	conduct disorder					
	(4)	depression					

147.	Major	cause of severe mental retardation is –						
	(1)	Down's syndrome	(2)	Birth asphyxia •				
	(3)	Epilepsy	(4)	Korsakoff's syndrome				
148.	Follow	ving are true of infantile autism, except –						
	(1)	stereotyped movements	(2)	echolalia				
	(3)	communication defect	(4)	normal intellect				
149.	Which	criteria is not true about Autism spectrur	n diso	rder?				
	(1)	Sex ratio (M:F) is 4:1.						
	(2)	Family history of schizophrenia increas	es the	Autism spectrum disorder in offsprings.				
	(3)	Age of onset is during early developme	ntal p	eriod (Begins before age of 3 years).				
	(4)	Grand mal seizures in 4-32% of cases.						
150.	Which	of the following is not a test to assess Int	tellige	nce Quotient?				
	(1)	Raven's Progressive Matrices	(2)	Vineland Social Maturity Scale				
	(3)	Wisconsin Card Sorting Test	(4)	Binet Kamat Test				
151.	Who co	oined the term 'organ inferiority'?						
	(1)	Alfred Adler	(2)	Franz Alexander				
	(3)	Gordon Allport	(4)	Eric Berne				
152.		of the following disorders is general (ASD)?	ierally	not comorbid with Autism Spectrum				
	(1)	Attention-Deficit / Hyperactivity Disord	der (A	DHD)				
	(2)	Rett syndrome						
	(3)	Selective mutism		,				
	(4)	Intellectual disability (intellectual devel	opme	nt disorder)				
153.	Which	is not a neurotic trait?						
	(1)	Enuresis	(2)	Thumb sucking				
	(3)	Competitiveness	(4)	Stammering				

154.	The Tol	following are the clinical and diagnostic features of entresis, except –					
	(1)	voiding of urine or bed wetting atleast two times per week for 3 consecutive months duration					
	(2)	the child must exhibit a developmental	age of	f atleast 7 years			
	(3)	urinating into clothes can be voluntary					
	(4)	voiding of urine into clothes can be at o	lay tin	ne			
155.	All are	key factors in observational learning the	ory gi	ven by Bandura, except –			
	(1)	attention	(2)	retention			
	(3)	motivation	(4)	stimulus control			
156.	As per	Jean Piaget's theory, the development	stage	of concrete operations is having following			
	charact	teristics, except –					
	(1)	Operational thought	(2)	Syllogistic reasoning			
	(3)	Conservation and reversibility	(4)	Hypothetico-deductive thinking			
157.	Accord	ling to Mary Ainsworth, which type is a	severe	form of insecure attachment –			
	(1)	Insecure – Disorganised	(2)	Insecure – Avoidant			
	(3)	Insecure – Ambivalent	(4)	Insecure – Anxious			
158.	Which and add	h is the first non-stimulant drug effective for the treatment of ADHD in children, adolescent dult?					
	(1)	Armodafinil	(2)	Atomoxetine			
	(3)	Methylphenidate	(4)	Dextroamphetamine			
159.	When a	a child gets bored while doing a task, it is	s a sig	n that -			
	(1)	the task may have become mechanicall	у гере	titive			
	(2)	the child is not intelligent					
	(3)	the child is not capable of learning					
	(4)	the child needs to be disciplined					
160.	Coprol	alia is found in –					
	(1)	Alcoholic intoxication	(2)	Tourette's syndrome			
	(3)	Mania	(4)	Delirium			
161.	Operan	at conditioning procedures for increasing	a beh	aviour in children are all, except -			
	(1)	negative reinforcement	(2)	time out			
	(3)	modelling	(4)	positive reinforcement			

162.		Behaviour therapy to change maladaptive behaviour in children, using response as reinforcement, uses the principle of –					
	(1)	Classical conditioning	(2)	Modelling			
	(3)	Social learning	(4)	Operant conditioning			
163.		ine treatment for childhood depression in		-			
	(1)	tricyclic antidepressant	(2)	selective serotonin reuptake inhibitor			
	(3)	electro-convulsive therapy	(4)	individual psychotherapy			
164.		exetine is useful in children with ADHD					
	(1)	Norepinephrine reuptake inhibition	(2)	Serotonin potentiation			
	(3)	GABA potentiation	(4)	Membrane stabilization			
165.	All of	-	, ,	t' as per Thomas and Chess classification of			
		rament, except –		1			
	(1)	easy	(2)	difficult			
	(3)	slow to warm up	(4)	effortful control			
166.	Stimul	ants are useful in ADHD. The symptom	that be	est responds to stimulants is –			
	(1)	Insomnia	(2)	Hyperactivity			
	(3)	Inattention	(4)	Motor tics			
167.	Gross	coss cognitive function in geriatric patient is most commonly assessed by -					
	(1)	Mini – mental status examination					
	(2)	(2) Finger tapping					
	(3)	Boston naming test					
	(4)	Wechsler adult intelligence scale					
168.	A 70-y	vear-old patient was taking tablet sertra	line fo	r depression since 10 days as prescribed by			
	physic	ian, but his condition worsened, he	develo	ped nausea, headache, irritability, muscle			
	weakn	ess and cramps. What should be the next	t appro	ach?			
	(1)	No need to worry and advise to continu	ue the	same medicine			
	(2)	Urgent brain MRI is needed					
	(3)	Investigate for serum electrolyte espec	ially so	odium level			
	(4)	Increase the dose of sertraline					
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169.	The pr	imary inhibitory neurotransmitter, (gam	ma) -	aminobutyric acid (GABA), in the brain is		
	notably depleted in which of the following neuropsychiatric disorders?					
	(1)	Pick's disease	(2)	Vascular dementia		
	(3)	Creutzfeldt-Jakob disease	(4)	Huntington's disease		
170.	A 72-	year-old patient with bipolar illness exp	perien	ces more side-effects when taking the same		
	medica	ation that he was prescribed 30 years	ago,	when he was 42 years old. Which of the		
	following is a possible explanation?					
	(1)	Reduced proportion of body fat				
	(2)	Increased liver enzyme activity				
	(3)	Increased renal clearance of drugs				
	(4)	Increased protein-binding fraction				
171.	A 59-	year-old man has a small, spastic to	ngue	with significant difficulty in pronouncing		
		•		orisk jaw jerk. Which of the following is the		
	most li	ikely explanation for the above presentati	ion?			
	(1)	Bulbar palsy	(2)	Pseudo bulbar palsy		
	(3)	Myasthenia gravis	(4)	Extrapyramidal dysarthria		
172.	Preval	ence of major depression among patient	with d	ementia is –		
	(1)	10%	(2)	50%		
	(3)	15%	(4)	20%		
173.	All of	the following are side effects of donepez	il, exc	eept –		
	(1)	diarrhoea	(2)	tachycardia		
	(3)	loss of appetite	(4)	frequent urination		
174.	All of	the following are requirements for testan	nentar	y capacity, except –		
	(1)	a person is not under the effect of drug				
	(2)	age above 18 years				
	(3)	soundness of mind is confirmed				
	(4)	two close relatives are present				

175.	Out of the following, which one is not a Transcramal Brain Stimulation Technique?								
	(1)	ECT				(2)	rTMS		
	(3)	VNS				(4)	tDCS		
176.	Follov	Following are the objectives of National Mental Health Programme, except –							
	(1)	(1) To ensure availability and accessibility of minimum mental healthcare for all in the							
		foreseeable future.							
	(2)	To encourage application of mental health knowledge in general healthcare and in socia							
		developn	ient.						
	(3)	A mental	hospital	at ever	y district I	Headquart	ter of India.		
	(4)	To promo	ote comn	nunity p	articipatio	on in the r	nental health	service.	
177.	Accord	ding to MH	ICA - 20	)17, Ho	spitalizati	on / treati	ment under er	nergency conditions is valid up	
	to how	many hou	rs?						
	(1)	24 hours				(2)	72 hours		
	(3)	48 hours				(4)	12 hours		
178.	As per	MHCA – 2	2017, wh	o chairs	the Ment	al Health	Review Boar	d?	
	(1)	District C	Collector		,	(2)	District Psyc	chiatrist	
(3) District Judge (4) District Chief Medical Off						ef Medical Officer			
179.	Distric	t Mental Ho	ealth Pro	gramme	e in our co	ountry wa	s first implem	ented in July 1985 in –	
	(1)	Varanasi				(2)	Pondicherry		
	(3)	Bellary				(4)	Bangalore		
180.	Match 1	the following	าย						
	(A)	National 1	_	lealth P	rogramme	;	(a)	2017	
	(B)	National 1	Mental C	are Act	:		(b)	1982	
	(C)	Mental H	ealth Ac	t			(c)	1985	
	(D)	Narcotic l	Drugs an	d Psych	otropic Sı	ubstances	Act (d)	1987	
		(A)	(B)	(C)	(D)				
	(1)	b	a	d	c C				
	(2)	a	b	c	d				
	(3)	b	d	a	c				
	(4)	b	a	c	d				
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Space for Rough Work / रफ कार्य के लिए जगह

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