

MCQ**Antituberculosis drugs**

1. Which one is a mechanism of action of Anti-tuberculosis drugs:

- a/ 1. Inhibit cell wall synthesis
- b/ Cause leakage from cell membranes
- c/ Inhibit protein synthesis
- d/ all of above

2. Fatty acid synthetase1 (FAS1) catalyzes:

- a/ linkage of these chains.
- b/ the formation of hydrocarbon chains
- c/ none of them
- d/ both of them

3. First line drugs are

- A/ These drugs have high antitubercular efficacy
- B/ low toxicity
- C/ Are used routinely.
- D/ All of above

4. Isoniazid has the one of the following adverse effects

- A/ Rashes, fever, nausea, and vomiting.
- B /Hepatitis
- C/Flu-like syndrome with fever, chills, and myalgia
- D/ Blood dyscrasias

5. It is weakly tuberculocidal and more active in acidic medium

- a/ PYRAZINAMIDE - Z
- b/ RIFAMPIN - R
- c/ ISONIAZID (H)
- d/None of above

6. It is one of the least toxic (no hepatotoxic) antitubercular drug

A/ PYRAZINAMIDE - Z

B/ RIFAMPIN - R

C/ ISONIAZID -H

D/ ETHAMBUTOL - E

7. Initial intensive phase with:

a/ 1-2 drugs

b/ 3-4 drugs

c/ 4-5 drugs

d/ 2-3 drugs

8. Daily dose of DOTS- NTEP, isoniazid:

a/25 (20-30)

b/ 10 (8-12)

c/ 5 (4-6)

d/ None

9. Daily dose of DOTS- NTEP, Ethambutol:

a/25 (20-30)

b/ 15 (15-20)

C/ 5 (4-6)

d/ None

10. In Seriously ill patients (miliary or severe pulmonary TB, which drug is given:

a/Steroids

b/ dexamethasone

c/ prednisolone

d/ None of above

Please choose the most appropriate **Anti-tubercular drug** for the following questions:

Q1) Multiple choice questions:

1. is one of the first line Anti-tubercular drug which give orally.

(Ethionamide, Cycloserine, Streptomycin, **Ethambutol**)

2. is one of the first line Anti tubercular drug which is given by injection. (Ethionamide, Cycloserine, **Streptomycin**, Ethambutol)

3. is drug of choice for tuberculosis

(**Isoniazid**, Rifampin, Pyrazinamide, Ethambutol)

4. resistance occurs due to mutation in katG and inhA

(**Isoniazid**, Rifampin, Pyrazinamide, Ethambutol)

5. Hepatotoxicity is due to dose related damage to liver cells, but is reversible on stopping the drug.

(**Isoniazid**, Rifampin, Pyrazinamide, Ethambutol)

6. is the most sterilizing antitubercular drug.

(Isoniazid, **Rifampin**, Pyrazinamide, Ethambutol)

7. resistance occurs due to mutation in the rpoB gene.

(Isoniazid, **Rifampin**, Pyrazinamide, Ethambutol)

8. is weakly tubercidal and more active in acidic medium.

(Isoniazid, Rifampin, **Pyrazinamide**, Ethambutol)

9. is the most hepatotoxic Antitubercular drug.

(Isoniazid, Rifampin, **Pyrazinamide**, Ethambutol)

10..... inhibits the synthesis of arabinogalactan from galactose and arabinose. (Isoniazid, Rifampin, Pyrazinamide, **Ethambutol**)

1. is Drug of choice for TB.
 - A. Isoniazid
 - B. Ofloxacin.
 - C. cycloserin
 - D. all above
2. First line anti-tb drugs:
 - A. These drugs have high antitubercular efficacy
 - B. Low toxicity.
 - C. are used routinely
 - D. all above.
3. Resistance of rifampin is due to mutation in thereducing its affinity for the drug.
 - A. Kat G
 - B. rpoB gene
 - C. pncA gene
 - D. embB gene
4. Anti-TB drug that causes green vision
 - A. isoniazid
 - B. PYRAZINAMIDE
 - C. ethambutol
 - D. STREPTOMYCIN
5.catalyzes the formation of hydrocarbon chains.
 - A. Fatty acid synthetase1.
 - B. Fatty acid synthetase2.
 - C. Mycolic acid
 - D. none.
6. Which anti-TB is a prodrug
 - A. Isoniazid
 - B. Ofloxacin.
 - C. ethambutol
 - D. rifampin.
7. It is tuberculocidal, but less effective than INH or rifampin.
 - A. Isoniazid
 - B. Ethambutol
 - C. rifampin
 - D. streptomycin
8. Resistance of pyrazinamide is Due to mutation in the
 - A. Kat G
 - B. rpoB gene
 - C. pncA gene
 - D. embB gene
9. INH is effective against.....
 - A. extra-cellular mycobacteria
 - B. Intra cellular mycobacteria
 - C. both above
 - D. none.

10. Urine and secretions may become orange-red with administration of.....

- A. **Rifampin** C. pyrazinamide
 B. Isoniazid D. ethambutol

1. It has bactericidal activity against rapidly multiplying organism, and drug of choice for TB:
 (**ISONIAZID**, RIFAMPIN, PYRAZINAMIDE, ETHAMBUTOL)
2. Flu like syndrome is one of the adverse effects of the.....
 (**Rifampin**, streptomycin, ciprofloxacin, amikacin)
3. catalase-peroxidase is enzyme release from which gene.
 (**Kat-G**, rpoB, pncA, embAB)
4. MDR is defined as resistance to among first line drug and with or without resistance to other drugs.
 (Kanamycin-ofloxacin, levofloxacin-ciprofloxacin, **INH-rifampicin**, none of them)
5. Continuation phase include drugs lasting for 4-5 months.
 (**2-3** , 4-5 , 7-8 , 1-3)
6. In DOTS-plus programme-MDR drugs for months use
 (**6; 6-9** , 8;2-2 5;7-9 , 10;3-4)
7. In meningeal TB is used.
 (**Dexamethasone**, prednisolone, hydrocortisone, all of them)
8. The primary mechanism of action of INH is inhibition of synthesis of which is main component in cell of TB bacteria,
 (**mycolic acid**, fatty acid, glycolic acid, all of them)
9. Orange coloured urine is one of adverse effect of
 (**Rifampin**, INH, ethambutol, quinine)
10. Food decreases its absorption so we should take in empty stomach:
 (**Rifampin**, kanamycin, ethionamide, capreomycin)

1. Which of the following is an injectable antitubercular drug?
 - a. Ethionamide
 - b. Pyrazinamide
 - c. Kanamycin**
 - d. Ethambutol

2. Which of the following drugs is contraindicated in pregnancy?
 - a. Isoniazid
 - b. Streptomycin**
 - c. Ethambutol
 - d. Rifampicin

3. Which first-line drug is safest in renal failure?
 - a. Rifampicin**
 - b. Pyrazinamide
 - c. Isoniazid
 - d. Ethambutol

4. Ethambutol is mainly excreted by which of the following organs?
 - a. Lungs
 - b. Kidneys**
 - c. Liver
 - d. None of the above

5. Anti-tubercular drug which make the patient non-infectious earliest is:
 - a. Kanamycin
 - b. Ethionamide
 - c. Levofloxacin
 - d. Isoniazid**

6. Which of the following anti-tubercular drug is least hepatotoxic?
 - a. Ethambutol**
 - b. Streptomycin
 - c. Pyrazinamide
 - d. Rifampicin

7. Rifampicin resistance is due to mutation of which of the following genes?
- a. **RpoB gene**
 - b. pncA gene
 - c. Inh A gene
 - d. Emb Ab gene
8. Which anti-tuberculosis drug decreases visual acuity and loss of ability to differentiate red from green?
- a. Amikacin
 - b. **Ethambutol**
 - c. Ethionamide
 - d. Streptomycin
9. Which of the anti-tuberculosis drug causes peripheral neuritis as an adverse effect?
- a. Pyrazinamide
 - b. Rifampicin
 - c. Streptomycin
 - d. **Isoniazid**
10. Which of the following drugs is a fluroquinolone?
- a. **Moxifloxacin**
 - b. Kanamycin
 - c. Isoniazid
 - d. Ethambutol

Antimalarial drugs

- 1) Malaria is caused by ____ species of the protozoal parasite plasmodium.
a) 2 b) 6 c) 4 d) 1
- 2) The malarial parasites pass their life cycle in _____.
a) One host b) two hosts c) no host d) ten hosts
- 3) The sporozoite is the _____ form of the malarial parasite.
a) Infective b) non-infective c) none d) both
- 4) The sporozoites are present in the _____ of female anopheles' mosquitoes.
a) Brain b) face c) salivary gland d) none
- 5) Human cycle starts and comprises of the following stages:
a) Pre-erythrocytic schizogony
b) Erythrocytic schizogony
c) Gametogony
d) All of the above
- 6) Antimalarial drugs are classified into the following:
a) antibiotics b) biguanide c) cinchona alkaloid d) all of them
- 7) To prevent clinical attack of malaria.
a) prophylactic b) clinical curative c) radical curative d) none
- 8) To treat clinical attack of malaria.
a) prophylactic b) clinical curative c) radical curative d) none
- 9) symptoms of malaria include all **except**:
a) headache b) jaundice c) thrombocytopenia d) dysuria
- 10) diagnosis of malaria includes:**
a) best initial test b) confirmatory test
c) both d) none
- 11. Merozoites are liberated into blood in**
A. Pre-erythrocytic schizogony B. Erythrocytic schizogony C. Gemtogony D. All of them
- 12. Drugs used as slow acting erythrocytic schizonticidal Except**
A. Tetracycline B. Proguanil C. Quinine D. Pyrimethamine
- 13. Drugs acting on exoerythrocytic schizogony used to prevent relapse**
A. Phrophylaxis B. Clinical cure C. Radical cure D. None of them

14. **Aminoquinoline: amodiaquine Quinoline-methanol:**
 A. Quinine B. Primaquine C. **Mefloquine** D. Pyrimethamine
15. **Bull's eye maculopathy is an adverse effect of**
 A. Mefloquine B. **Chloroquine** C. Quinine D. Artemisinin
16. **Only administrated orally**
 A. **Dihydroartemisinin** B. Artesunate C. Artemether D. A+C
17. **All of them administrated by IM route Except**
 A. Artemether B. **Arterolane** C. α/β Arteether D. Artesunate
18. **Antimalarial drugs used for**
 A. Gemtocidal B. Clinical&Radical curative C. Prophylactic **D. All of them**
19. **Prevent the development of oocysts in the mosquito**
 A. Pyrimethamine B. Sulfadoxine C. Proguanil **D. A+C**
20. **Exoerythrocytic schizogony is absent in**
 A. P. Vivax B. P. Ovale **C. P. Falciparum** D. P. Malariae
21. ----- is a slow acting drug.
 a. Quinine **b. Proguanil** c. mefloquine d. artemisinin
22. **Chloroquine is active against -----**
 a. Entamoeba histolytica b. Giardia lamblia c. Extraintestinal amoebiasis **d. All of them**
23. **Halofantrine belong to -----class of anti-malarial drug**
 a. Sulfonamide b. biguanide **c. amino-alcohol** d. 4-aminoquinolines
24. **The parasite multiplication in ----- phase responsible for clinical attack**
 a. pre-erythrocytic **b. Erythrocytic** c. Gametogony d. Exo-erythrocytic
25. ----- has no gametocidal activity
 a. Artemisinin **b. Chloroquine** c. Pyrimethamine d. prguanil
26. **Route of administration of Artemether**
 a. IM b. Orally c. IV **d. a and b**
27. **To cutdown human to mosquito transmission**
 a. Prophylactic b. Clinical curative **C. Gametocidal** d. Radical curative

28. Adverse effect of chloroquine

- a. Nausea b. peripheral neuropathy c. loss of hearing **d. All of them**

29. Drugs acting on pre-erythrocytic schizogony will prevent infection of RBC and clinical attack of malaria, for falciparum:

- a. Proguanil b. Tetracycline c. Primaquine **d. a and b**

30. Drugs acting on erythrocytic schizogony will cause

- a. **Clinical cure** b. Causal prophylaxis C. Radical curative d. All of them

31. Peripheral neuritis, Hepatotoxic, Mutation of gene (inh A and Kat G) - Preg. OK

- a. **H-INH** b. Streptomycin c. Rifampicin d. all

32. Treatment of severe complicated malaria

- A. Artesunate **b. Quinine** c. Doxycycline d. all

33. PregnancyCQ (P. vivax)

- A. **1 st** b. 2nd 3. 3rd d. all

34. Adverse effects of artemisinin

- a. nausea b. vomit c. diarrhea **d. all**

35. Artemisinin derivatives

- a. Artemether b. α/β Arteether c. Dihydroartemisinin(DHA) and 5. Arterolane **d. all**

36. Cinchonism adverse effect

- a. Hypotension** b. Hypersensitivity reaction c. Black water d. all

37. Chloroquine –Quinine, Mefloquine, adverse effect

- a. Myopathy **b. skin rash** c. Ocular toxicity d. all

38. Hyperuricemia (increase uric acid level), High Hepatotoxic, Mutation of pncA gene, Preg- Avoided

- a. Pyrazinamide** b. Streptomycin c. Rifampicin d. Ethambutol

39. Symptoms of Malaria.....

- a. Headache b. nausea **c. a+b** d. none

40.is the only drug which acts on exo-erythrocytic schizogony

- a. Primaquine b. quinine **c. CQ** d. none

- 41. severe complicated malaria symptom is**
a. Shock b. hypoglycemia c. seizure d. **all**
- 42. Malaria, caused by _____ species of the protozoal parasite's plasmodium.**
a) 2 b) 3 c) **4** d) 6
- 43. Fast acting drug for malaria is**
a) **Quinine** b) proguanil c) tetracycline d) sulfonamide
- 44. These are symptoms of malarial infection, except**
a) Nausea and vomiting b) headache c) fever d) **polyuria**
- 45. Malarial parasites pass their lifecycle in**
a) One b) **two** c) four d) six
- 46. Adverse-effect of chloroquine is**
a) diarrhea b) **CNS toxicity** c) constipation d) skin redness
- 47. After erythrocytic schizogony, some merozoites develop into _____**
a) **gametocyte** b) gomecyte c) both d) none
- 48. Sporontocides are _____ and _____**
a) **proguanil, pyrimethamine** b) proguanil, mefloquine
c) atovaquone, pyrimethamine d) none
- 49. Controls most clinical attacks in _____ days with disappearance of parasites from peripheral blood.**
a) **1-2** b) 2 c) 2-4 d) 5
- 50. Symptoms of malaria include**
a). Headache b). Fever (misses a day)
c). Nausea vomiting d). All

51. Pyrimethamine give 30 mg daily for _____ days.

- a) 10 b) 12 c) 14 d) 15

52. It is d-isomer quinidine used as an _____

- a) malaria b) antiarrhythmic c) both d) none

Anticancer drugs:

1. Which of the following is highly emetogenic?

- a. Cisplatin b. Carboplatin c. Methotrexate d. Cyclophosphamide

2. Which of the following is cell cycle specific?

- a. Ifosfamide b. Dactinomycin c. Vinblastine d. Cyclophosphamide

3. For treatment of osteosarcoma, all are used except

- a. Methotrexate b. cyclophosphamide c. Vincristine d. Bleomycin

4. Which of the following causes persistent leucopenia?

- a. Cisplatin b. Vinblastine c. Doxorubicin d. Carmustine

5. Which antitumor drug is not an alkylating agent?

- a. Cyclophosphamide b. 5-FU c. Busulfan d. Melphalan

6. Which one of the following anti-cancerous drug is a peptide?

- a. Doxorubicin b. Valinomycin c. Bleomycin d. Aspartame

7. Drug of choice for chronic myeloid leukemia is

- a. Imatinib b. Hydroxyurea c. Cisplatin d. Methotrexate

8. Methotrexate is used in all except

- a. Sickle cell anemia b. psoriasis c. Rheumatoid arthritis d. Ankylosing spondylitis

9. Pulmonary fibrosis is not caused by

- a. Busulfan b. Doxorubin c. Methotrexate d. Bleomycin

10. Which one of the following drug is topoisomerase 1 inhibitor?

- a. Doxorubicin b. Irinotecan c. etoposide d. Vincristine

11. Infliximab is directed against:

- a. Tumor necrosis factor - α b. Interleukin-1 c. Interleukin 12 d. Intercellular adhesion molecule

12. Sterility is caused by
a. Vinca alkaloids b. **Alkylating agent** c. Antimetabolites d. Actinomycin D
13. Hemorrhagic cystitis is caused by
a. **Cyclophosphamide** b. Cisplatin c. Methotrexate d. 5FU.
14. Cyclophosphamide is a prodrug and is activated in
a. **Liver** b. kidney c. lung d. stomach
15. Cyclophosphamide is administered
a. intravenously b. orally c. rectally d. a&b
16. While using of the cisplatin Neuropathy is commonly seen with
A. low doses b. **High doses** c. One of them
17. What is the Adverse effects of the Cisplatin?
a. **Nephrotoxicity** b. loss vision c. None of them
18.adverse effects are megaloblastic anaemia, pancytopenia, hepatic fibrosis.
a. Cisplatin b. Methotrexate c. both
19. What is given to minimize the toxic effect of the methotrexate?
a. **Folinic acid** b. vitamin -D c. none of them
20. What is the major adverse effect of 6-MP?
a. Nephrotoxicity b. **Bone marrow depression** c. Otoxicity d. all of them
21. What is the Adverse effects of the Cisplatin?
a. hear loss b. ototoxicity c. nephrotoxicity d. All of them
22. What is the uses of Vinblastine?
a. Hodgkin's disease b. Carcinoma Breast c. Testicular tumours d. **none of them**
23. What is the uses of Vincristine?
a. **Childhood leukaemias** b. Carcinoma Breast c. Testicular tumors d. none of them