

D.M. – INFECTIOUS DISEASES

Paper III – GENERAL INFECTIOUS DISEASES INCLUDING HIV

Q.P. Code: 161493

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: **(2 x 15 = 30)**

1. List the common etiology and discuss the epidemiology of acute undifferentiated fevers in India. Describe the pathogenesis, clinical manifestations, diagnosis and management of severe Dengue.
2. Describe the etiology, clinical features, diagnosis and management of talaromycosis in people living with HIV infection.

II. Write notes on: **(10 x 7 = 70)**

1. U = U.
2. Pre-exposure prophylaxis (PrEP).
3. Management of invasive sino-orbito-cerebral mucormycosis.
4. Helicobacter pylori.
5. Non-cholera Vibrio infections.
6. Prosthetic valve endocarditis.
7. Septic shock.
8. Ibalizumab.
9. Genotypic resistance testing for HIV.
10. Waterhouse-Friderichsen syndrome.

(DM 0821)

AUGUST 2021

Sub. Code: 1493

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I. Elaborate on:

(2 x 15 = 30)

1. Describe in detail the risk factors, etiological agents, diagnosis, and management of acute pyogenic meningitis in adults. Mention briefly strategies for prevention among individuals at risk.
2. A 37-year-old male, diagnosed with HIV recently, with a CD4 of 87 cells presents with a 3-week history of progressive headache and 2 episodes of focal seizures with secondary generalization.
Enumerate the focal cerebral syndromes in individuals with advanced HIV infection.

Discuss the clinical features, diagnostic modalities, and treatment of cerebral toxoplasmosis.

II. Write notes on:

(10 x 7 = 70)

1. Fungal endocarditis.
2. Undulant fever.
3. Diagnosis of histoplasmosis.
4. Newer drugs for MDR- tuberculosis.
5. Streptococcal pharyngitis.
6. Diagnosis of non gonococcal urethritis.
7. Long acting integrase inhibitors.
8. HIV post-exposure prophylaxis.
9. Poncets disease.
10. Vaccines in the elderly.

THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY

[DM 0822]

AUGUST 2022

Sub. Code :1493

D.M. – INFECTIOUS DISEASES

Paper III – GENERAL INFECTIOUS DISEASES INCLUDING HIV

Q.P. Code: 161493

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on: (2 x 15 = 30)

1. 40-year-old male, known case of Immune Thrombocytopenic purpura, status post Splenectomy 3 years ago, presenting with 2-day history of fever, chills and vomiting. Comes to Emergency department with blood pressure of 80/50 mmHg. Discuss differential diagnosis, management and possible preventive strategies in this patient.
2. Enumerate the etiologies of chronic meningitis. Discuss the clinical features, lab diagnosis and newer advances in the management of Cryptococcal meningitis in HIV.

II. Write notes on: (10 x 7 = 70)

1. Culture negative endocarditis.
2. Shiga toxin.
3. MERINO trial.
4. Monkey Pox.
5. Human T Lymphotropic virus infection.
6. Splendore hoeppli phenomenon.
7. Melioidosis.
8. Toxic shock syndrome.
9. Lues Maligna.
10. Management of Multidrug resistant tuberculosis.

THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY

[DM 0124]

JANUARY 2024

Sub. Code :1493

D.M. – INFECTIOUS DISEASES

PAPER III – GENERAL INFECTIOUS DISEASES INCLUDING HIV

Q.P. Code: 161493

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. 40-year-old male, known case of HIV infection antiretroviral therapy naïve, baseline CD4 count of 100 cells/cu.mm presents with a history of subacute onset of a febrile neurological syndrome. Discuss the various differential diagnosis and their clinical features, diagnosis and management.
2. Enumerate clinical features, diagnosis and management modalities of skull base osteomyelitis.

II. Write notes on:

(10 x 7 = 70)

1. Coxiella burnetti.
2. Superantigens.
3. IRIS.
4. Giardiasis.
5. Management of Diphtheria.
6. Thimble bladder.
7. Mucormycosis.
8. Surgical indications for infective endocarditis.
9. Pyrexia of unknown origin.
10. Newer therapeutic options/regimens in Multidrug resistant tuberculosis.

THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY

[DM 0225]

FEBRUARY 2025

Sub. Code :1493

D.M. – INFECTIOUS DISEASES

PAPER III – GENERAL INFECTIOUS DISEASES INCLUDING HIV

Q.P. Code: 161493

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. 40-year-old male, known case of HIV infection antiretroviral therapy naïve, baseline CD4 count of 100 cells/cu.mm has a serodiscordant monogamous male sexual partner. Discuss the various preventive measures and PrEP (Preexposure prophylaxis) options available with their classification, mechanism of actions and side effects.
2. Enumerate clinical features, diagnosis and management modalities of prosthetic joint infections.

II. Write notes on:

(10 x 7 = 70)

1. One health approach.
2. Toxic shock syndrome.
3. CREDIBLE-CR trial.
4. Rheumatic fever.
5. *Stenotrophomonas maltophilia*.
6. Extensively drug resistant (XDR) Tuberculosis and management.
7. Chromoblastomycosis.
8. Surgical indications for Tuberculosis of the spine.
9. Lenacapavir.
10. Paradoxical reactions in tuberculosis.

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I. Elaborate on:

(2 x 15 = 30)

1. 40-year-old male, known case of HIV infection antiretroviral therapy naïve, baseline CD4 count of 100cells/cu.mm develops a headache and mild low grade fever. He is still deciding as to whether he wants to start anti-retroviral therapy. On examination, he is emaciated and no clear cut signs of meningeal irritation but is a bit Drowsy. Discuss an approach to global central nervous syndromes in an HIV infected individual not on ART. What algorithm would you employ here in this scenario and tests that you would perform to make a confirmatory microbiological diagnosis? How will you manage this patient?
2. Enumerate causative organisms, risk factors, clinical features, diagnostic criteria and management (medical and surgical) of infective endocarditis?

II. Write notes on:

(10 x 7 = 70)

1. Compare and contrast cohort and case control studies.
2. Jarisch Herxheimer reaction.
3. BLING-III-trial.
4. Brain abscess.
5. Sporothrix schenckii.
6. END-TB-trial.
7. Prototheca wickerhamii.
8. Infections in COVID.
9. Cabotegravir.
10. Melioidosis.
