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**POST GRADUATE DIPLOMA IN HIV
MEDICINE**

Term-End Examination

June, 2013

MCMM-004 : MANAGEMENT OF HIV/AIDS

Time : 3 Hours

Maximum Marks : 70

Note : Attempt all questions.

1. A 26 year old truck driver has been admitted with a history of irregular fever and cough for 1 month. His sputum is positive for AFB. On examination, there is extensive oral candidiasis and he is also complaining of dysphagia. He is found to be HIV +ve. There is no history of Anti tubercular drug intake in the past. His haemoglobin is 8 gm/dl.
- (a) To which clinical stage (WHO) does he belong ? 2
- (b) Is he a candidate for initiation of ART ? 1
- (c) Do you need to have a CD4 count before initiating ART in this patient ? 2
- (d) With what drugs will you immediately start his treatment ? 3
- (e) When will you start ART ? 2

- (f) What basic lab investigations will you do before starting ART ? 4
- (g) Write a prescription for his ART as per current NACO guidelines. 6
2. Classify the different ARV drugs giving examples. Name the ARV drugs used in our national programme which require dose adjustment in severe renal failure. 8+2
3. Discuss the merits and demerits of “breast feeding” vis-à-vis “replacement feeding” in infants born to HIV +ve mother. 10
4. Write short notes on : 3x10=30
- Presumptive diagnosis of HIV infection in infants
 - Major goals of using ART
 - Risk factors of IRIS
 - Definition of “Anti - retroviral Treatment Failure” in our national programme
 - Major adverse effects of NNRTIs used in national programme
 - ART in HIV/HBV co-infection
 - Drug interactions between ARV drugs used in national programme and anti tubercular drugs (Cat I and Cat II ATD)
 - Contraceptive use in HIV +ve women
 - PEP after accidental needle (18 G) stick injury with visibly contaminated blood
 - “Preparedness Counseling” before initiation of ART