

**King Saud University
College of Medicine
2nd Year, Endocrine
Block**



Revision File

**This work includes lectures from 3 to 9 and it Contains
50 MCQs .. Hope this work will help you to remember
the important thing about each drug,**

Good Luck



L3-osteoporosis

Q1: Old Lady had TB before and she have phenylketonuria and sever osteoporosis which of the following is the best for her case:

- A) Denosumab.**
- B) Zoledronate.**
- C) Raloxifene.**
- D) Tildronate.**

Q2: An osteoporotic patient was taking a drug and then he developed Eczema which didn't resolve even after 3 months. which of the following was this drug :

- A) Risedronate.**
- B) Strontium.**
- C) Denosumab.**
- D) SERMs**

Q3: Young female had to do hysterectomy and she developed osteoporosis. Which of the following drugs is suitable for her:

- A) Estrogen Alone.**
- B) Estrogen with Progestins.**
- C) Selective Estrogen Receptor Modulators "SERMs".**
- D) Androgen.**

Q4: Young female but her body doesn't produce Estrogen and her uterus is present and she developed osteoporosis which of the following is suitable for her case :

- A) Estrogen .**
- B) Androgen.**
- C) Raloxifene.**
- D) Denosumab.**

Q5: A women with osteoporosis was treated by a drug and then she developed Atrial fibrillation which of the following was this drug?

- A) Clodronate.**
- B) Zolidronate.**
- C) Denosumab.**

Q1: B.

Q2: C.

Q3: A.

Q4: C.

Q5: B.

L3-osteoporosis

Q6: Which on of these can cause MI as a side effect ?

- A) Denosumab.**
- B) Strontium.**
- C) Raloxifene.**
- D) Tildronate.**

Q7: A 62 years old women had paget's disease and she is using drug for treatment, with time she developed Osteo-necrosis of the jaw which drug can cause such side effect :

- A) I.V. Risedronate.**
- B) Oral Risedronate**
- C) Denosumab.**
- D) Raloxifene**

Q8: A patient was diagnosed with osteoporosis and during history taking he said that he has TB for 3 months ago which drug is contraindicated to give him :

- A) Strontium.**
- B) Clodronate**
- C) Raloxifene.**
- D) Denosumab.**

Q9: Young female but her body doesn't produce Estrogen and her uterus is present and she developed osteoporosis which of the following combination can be used in her case :

- A) Estrogen+ progestins .**
- B) Denosumab +Estrogen.**
- C) Raloxifene.+ Estrogen**

Q10: An osteoporotic patient with renal failure and phenylketonuria, which drug is contraindicated to give ?

- A) Raloxifene.**
- B) Zolidronate.**
- C) Strontium.**

Q6: B.

Q7: A.

Q8: D.

Q9: A.

Q10: C.

L4-used in calcium & vitamin D disorder

Q1: 56 old man was taking a medication for osteoporosis recently was diagnosed with osteosarcoma. Which of the following medications he was using :

- A) Calcitonin replacement.**
- B) Teriparatide.**
- C) Strontium.**

Q2: Continuous exposure to elevated PTH leads to :

- A) Bone resorption .**
- B) Treatment of severe osteoporosis .**
- C) Firstly activate osteoclast then osteoblast.**

Q3: Vitamin D3 comes from :

- A) Dietary intake.**
- B) Liver.**
- C) Sunlight.**

Q4: Used in treatment of Hypercalcemia :

- A) Calcitonin.**
- B) Calcitriol.**
- C) Continuous PTH.**

Q5: which of the following Combined in treatment of Paget's disease :

- A) Teriparatide.**
- B) PTH.**
- C) Calcitonin.**

Q6: Which one of the following drugs can cause kidney stones on long term use:

- A) Vit D.**
- B) Teriparatide.**
- C) Calcitonin.**

Q1: B.

Q2: A.

Q3: C.

Q4: A.

Q5: C.

Q6: B.

L5 – Corticosteroids

Q1: A new-born baby developed dermatitis. Which of the following topical corticosteroid is suitable for him :

- A) Fluticasone.
- B) Mometasone .
- C) Triamcinolone actonide .

Q2: Which of the following Mineralocorticoids is used in Addison's disease :

- A) Fludrocortisone .
- B) Parental Cortisol (hydrocortisone).
- C) Oral Cortisol.

Q3: An 8 years old girl developed anaphylactic shock after eating Peanut. Which of the following steroids we should give her :

- A) Prednisolone .
- B) Betamethasone.
- C) Cortisol .

Q4: fifteen years old boy had to do a brain surgery which of the following we should give him to decrease the Edema and prevent increase in intracranial pressure:

- A) Cortisone.
- B) Betamethasone.
- C) Prednisone

Q5: a women with sever dermatitis and we gave her Mometasone we should ask her to use it only at :

- A) Morning to mimic circadian rhythm .
- B) At night before she sleep.
- C) With the meal.

Q6: New-born to mothers taking high dose GCs what we should give him to avoid adrenocortical insufficiency :

- A) Low dose of GCs.
- B) Fludrocortisone.
- C) Corticosteroid antagonist
- D) Metotane.

Q1: A . Q2: A Q3: C. Q4: B. Q5: B. Q6: A.

L5 – Corticosteroids

Q7: A pregnant women diagnosed with Addison's disease and she had a history of liver cirrhosis which one of these drug is contraindicated for her :

- A) Fluticasone.
- B) Cortisone
- C) Cortisol.

Q8: what is the mechanism of action for METOTANE :

- A) Inhibit β -hydroxylase
- B) Inhibit 21-hydroxylase
- C) prevent AP-1 from binding to it's receptor

Q9: A pregnant women obese and she still gaining weight also she has striae and her face is moon like face ,during history taking she mentioned that she was using cortisol after adrenalectomy which drug we have give her to reduce such symptoms :

- A) Metotane .
- B) spironolactone.
- C) cortisol.

Q10: a patient came with Hyperaldosteronism, Hyponatremiam, Hypervolemiam Hypertension & Hypokalemia and he was diagnosed with Conn's syndrome which drug is suitable for him :

- A) Cortisone.
- B)Metotane.
- c) spironolactone.

Q7: B . Q8: A Q9: A. Q10: C.

L6 –treatment of diabetes mellitus

Q1: a pregnant woman brought to ER and she was in come due to hyperglycemia with shallow breath which drug should we give to her ?

- A) Novolin L
- B) Novolin R
- C) Lispro

Q2:diabetic patient with T1DM was in party and he can't wait to start eating what should we give him to start eating in 15 mins?

- A) aspart
- B) Detemir
- C) Lente .

Q3: Which one of the following drugs have less risk to develop postprandial hypoglycemia :

- A) Humulin R
- B) Novolin R
- C) Lispro

Q4: a diabetic lady Her blood glucose is not controlled even with the Regular insulin and she developed hyperglycemia between meals what can we add to the therapy in such a case :

- A) Lispro
- B) Detemir
- C) Isophane (NPH)

Q5: What is the main advantage of using glargine once daily :

- A) reduced risk of hypoglycemia epically during sleep
- B) More potent
- C)Has rapid onset of action

Q6:Which one of these is never can be used in DKA :

- A) lente
- B) Lispro
- C) Humulin R

Q1: B.

Q2: A.

Q3: C.

Q4: C.

Q5: A.

Q6: A.

L7 – Management of diabetic ketoacidosis and hypoglycemia

Q1: Patient came to the ER with thirst, polyuria, polydipsia, rapid & deep breath and he was diagnosed with diabetic ketoacidosis, which one of these steps must be done first?

- A) Insulin therapy**
- B) Fluid therapy**
- C) Bicarbonate therapy**

Q2: Type 1 diabetes patient he is doing excessive physical exercise suddenly his heart is palpating and he is sweating a lot, he continues his exercise after a period of time he falls and becomes unconscious, what is the treatment for him?

- A) Glucagon 1 mg I.M**
- B) Normal saline**
- C) Give him food**

Q3: Patient with diabetic ketoacidosis was treated in the ER after 1 hour of rehydration the arterial pH was 5.8, which one of the following should we give him?

- A) isotonic saline**
- B) Potassium therapy**
- C) Bicarbonate therapy**

Q1: B.

Q2: A.

Q3: C.

L8 – oral Hypoglycemic drugs Part1

Q1: Patient with renal impairment recently has been diagnosed with D.M type 2 which of the following is suitable for him:

- A) Glipizide.
- B) Tolbutamide.
- C) Metformin.

Q2: Cardiopulmonary dysfunction patient was taking a drug to treat his DM and then he develop Lactic acidosis which of the following he was taking ?

- A) Glipizide.
- B) Tolbutamide.
- C) Metformin.

Q3: Which one of the following increase HDL :

- A) Metformin.
- B) Repaglinide.
- C) Glipizide.

Q4: a diabetic lady got pregnant although she was using estrogen-containing oral contraceptives. What was the drug she use to treat her DM :

- A) Pioglitazone.
- B) Glipizide.
- C) Tolbutamide.

Q5: Which of the following can be used in type 1 DM :

- A) Tolbutamide
- B) Acarbose .
- C) Non of the above.

Q1: B.

Q2: C.

Q3: A.

Q4: A.

Q5: B.

L8 – oral Hypoglycemic drugs Part1

Q6: Type two diabetic patient is suffering from renal failure which of the following is drug of choice in such case :

- A) Glipizide.
- B) Repaglinide.
- C) Metformin.

Q7: what is the mechanism of action for Pioglitazone?

- A) Work on (PPAR- γ).
- B) Work on (PPAR- α).
- C) Inhibition of intestinal α -glucosidases.

Q8: type two diabetic patient known to have allergy to sulfur which drug is the safest drug to him:

- A) Repaglinide.
- B) Tolbutamide.
- C) Glipizide.

Q9: which one of these oral hypoglycemic drugs can cause hepatotoxicity as a side effect:

- A) Metformin.
- B) Glipizide.
- C) Pioglitazone.

Q10: which one of these oral hypoglycemic drugs can cause Crystalluria as a side effect:

- A) Tolbutamide.
- B) Acarbose.
- C) Metformin.

Q6: B.

Q7: A.

Q8: A.

Q9: C.

Q10: A.

L9 – oral Hypoglycemic drugs Part2

Q1: Which of the following drugs works on GIT :

- A) Tolbutamide.**
- B) Pioglitazone.**
- C) Acarbose.**

Q2: Which of the following drugs giving S.C :

- A) Dulaglutide.**
- B) Miglitol.**
- C) Tolbutamide.**

Q3: Which of the following drugs doesn't cause Hypoglycemia :

- A) Sulfonylureas.**
- B) Acarbose.**
- C) Repaglinide.**

Q4: Which of the following is contraindicated in Inflammatory bowel disorders :

- A) Miglitol.**
- B) Tolbutamide.**
- C) Metformin.**

Q5: Which of the following decrease glucagon secretion :

- A) Acarbose**
- B) Dulaglutide**
- C) Miglitol**

Q1: C.

Q2: A.

Q3: B.

Q4: A.

Q5: B.

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We hope that we made this lecture easier for you
Good Luck !