# MINISTRY OF HEALTH OF UKRAINIAN HEALTH ODESNI NATIONAL MEDICAL UNIVERSITY

### Department of general and clinical pharmacology and pharmacognosy http://info.odmu.edu.ua/chair/pharmacology

### PHARMACOLOGY DISCIPLINE

#### TRAINING MANUAL

for self-training students
3 course of pharmaceutical faculty
to a licensed test exam
"Step - 1. Pharmacology"

2007-2023

BBK 52.81x73 UDK 615.015(076)=20

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Printed according to the decision of Problem-cycle methodological commission of the Faculty of Pharmacy of Odessa National Medical University

Protocol №1 28.08. 2023

Training manual for self-training students 3 course of pharmaceutical faculty to a licensed test exam "Step - 1. Pharmacology" 2007-2023. / Y.V. Rozkovskiy, K. Shemonaeva V. Kresyun, P. Antonenko, K. Ostapchuk, K. Lobashova, K. Antonenko, N. Djavad. - Odessa: Odessa National Medical University, 2023. - 40 p

Training manual for the students of pharmaceutical faculty, who are learning pharmacology, contain the contains a database of tests from 2007-2023.

ВВК 52.81я73

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#### **INTRODUCTION**

The study guide is intended for preparing students of the 3rd year of the Faculty of Pharmacy for the Step-1 licensing exam. The guide contains a database of test tasks from brochures of 2007-2023. The study guide consists of multiple-choice test tasks. The correct answers are indicated and an explanation of the correct answers is given in each task. The correct answer for questions in the manual is A. All test tasks are divided by topics according to the curriculum and program for students of the 3rd year of the Faculty of Pharmacy and correspond to the topics of methodological recommendations.

Students can use the guide to prepare for classes and when checking practical skills on the topics of practical classes. During the practical classes, the teacher together with the students consider the specified test tasks orally and provide explanations for them. At the end of the lesson, they answer the test tasks in writing.

For the final test of knowledge, Rector's control, test tasks from the manual are used. A particularly useful guide for preparing for the Step-1 licensing exam.

### List of drugs recommended by KROK-1.

List of drugs recomm	lended by KKOK-1.
1. Lidocaine	37. Fluoxetine
2. Ultracain	38. Ambroxol
3. Atropine sulfate	39. Acetylcysteine
4. Neostigmine methyl sulfate	40. Glaucin
(Pro-zerin)	41. Digoxin
5. Pilocarpine hydrochloride	42. Dobutamine
6. Suxametonium (Dithylin)	43. Corglycon
7. Tiotropium bromide	44. Glycerol trinitrate (Nitro-
8. Epinephrine hydrochloride	glycerin)
(Adrenaline hydrochloride)	45. Verapamil
9. Phenylephrine (Mezaton)	46. Amiodarone
10. Salbutamol	47. Lisinopril
11. Doxazosin	48. Enalapril
12. Propranolol (Anaprilin)	49. Magnesium sulfate
13. Metoprolol	50. Atorvastatin
14. Reserpine	51. Amlodipine
15. Castor oil	52. Losartan
16. Morphine hydrochloride	53. Famotidine
17. Trimeperidine (Promedol)	54. Omeprazole
18. Fentanyl	55. Loperamide
19. Naloxone	56. Drotaverin
20. Acetylsalicylic acid	57. Sodium picosulfate
21. Diclofenac sodium	(Regulax, Guttalax)
22. Paracetamol	58. Aluminum / Magnesium
23. Celecoxib	Hydrochloride (Almagel)
24. Meloxicam	59. Bisacodil
25. Chlorpromazine (Aminazin)	60. Hydrochlorothiazide
26. Droperidol	61. Furosemide
27. Diazepam	62. Spironolactone
28. Nitrazepam	63. Potassium and Magnesium
29. Doxylamine (Donormil)	asparaginate (Asparcam)
30. Phenobarbital	64. Allopurinol
31. Sodium Valproate	65. Oxytocin
32. Levodopa + Carbidopa	66. Iron polymaltozate
33. Lamotrigine	67. Heparin
34. Caffeine benzoate	68. Warfarin
35. Piracetam	69. Menadione (Vikasol)
36. Amitriptyline	70. Calcium chloride

- 71. Clopidogrel
- 72. Cyanocobalamin
- 73. Retinol acetate
- 74. Pyridoxine
- 75. Ascorbic acid
- 76. Tocopherol acetate
- 77. Ergocalciferol
- 78. Levothyroxine
- 79. Insulin
- 80. Glibenclamide
- 81. Metformin
- 82. Prednisone
- 83. Fluticasone
- 84. Pancreatin
- 85. Aprotinin (Contrycal)
- 86. Diphenhydramine

#### (Dimedrol)

- 87. Loratadine
- 88. Iodine solution
- 89. Chlorhexidine
- 90. Potassium permanganate
- 91. Unithiol
- 92. Benzylpenicillin sodium

salt

93. Amoxicillin + clavulanic

#### acid

- 94. Doxycycline
- 95. Azithromycin
- 96. Ciprofloxacin
- 97. Lincomycin hydrochloride
- 98. Fluconazole
- 99. Isoniazid
- 100. Rifampicin
- 101. Interferon α
- 102. Acyclovir
- 103. Chingamin
- 104. Metronidazole
- 105. Mebendazole
- 106. Albendazole
- 107. Methotrexate
- 108. Tamoxifen

**UNIT 6-7: Pharmacology and its aims. General** 

## pharmacology. Pharmacokinetics

№	Test	Distractors (A-E)	Explanations
1.	of tetracyclines, if they are taken simultaneously with antacids, is an example of their:	A.*Pharmacokinetic incompatibility B.Pharmaceutical incompatibility C.Pharmacodynamic incompatibility D. Synergism E. Functional antagonism	The combination of tetracycline and antacids leads to a violation of the absorption of tetarcycline, which is called pharmacokinetic incompatibility
2.	Name the ability of a drug to accumulate within the patient's body:	<ul><li>A. * Cumulation</li><li>B. Antagonism</li><li>C. Synergism</li><li>D. Habituation</li><li>E. Allergy</li></ul>	The ability to accumulate in the body is called cumulation
3.	Which of these options is necessary condition for rapid penetration of the drug through the hematoencephalic barrier?	A. *High lipophilicity B. High hydrophilicity C. Sustained binds with proteins D. Ionized state E. The long half-life period	Only lipophilic drugs can penetrate the blood-brain barrier
4.	What is represented by such a pharmacokinetic value of a drug as its biological half-life (T1/2)?	A. *Time period in which plasma drug concentration decreases by 50%  B. Blood plasma volume cleared of drug within a time unit  C. Period of total body clearance  D. Renal clearance rate  E. Correlation between the drug clearance rate and plasma drug concentration	The half-life of a substance is a pharmacokinetic parameter that determines the time it takes for a substance to lose half its pharmacological, physiological or radioactive effect
5.	Paracetamol has anti- pyretic and analgesic effect. In the human body it is neutralized in the following organ:	A. * Liver B. Spleen C. Intestine	Liver is the main organ that is involved in drug biotransformation
6.	What is the name of the ability of drugs to accumulate in the hu- man body?	A. Cumulation B. Synergism C. Addiction D. Allergy	Some medicines are slowly removed from the body and remain in the tissues.

E. Antagonism

UNIT 8-9: General pharmacology. Pharmacodynamics. Pharmacotoxicodynamics

№	Test	Distractors (A-E)	Explanations
1.	A woman, who during the 5th-10th weeks of her pregnancy had been taking sodium valproate for treatment of epilepsy, gave birth to a child with pathology of the vertebral column (split spine). What side effect of the drug caused such malformation?	A. *Teratogenic B.Mutagenic C.Embryotoxic D. Fetotoxic E. Sensitizing	Teratogenic effect is the effect of the drug on the development of the fetus, leading to malformations
2.	A patient with chronic constipation had been prescribed bisacodyl. After 3 weeks of treatment the patient noticed a reduction of laxative effect. This is caused by the development of the following side-effect:	A.*Tolerance B.Dependence C.Sensibilization D.Cumulation E.Disbacteriosis	Tolerance is a decrease in the reaction of the organism to the reintroduction of the drug
3.	A child suffers from drug idiosyncrasy. What is the cause of such reaction?	A.*Hereditary enzymopathy B. Exhaustion of substrate interacting with pharmaceutical substance C. Accumulation of pharmaceutical substance D. Inhibition of microsomal liver enzymes E. Associated disease of target organ	Idiosyncrasy is a genetically determined reaction that occurs in response to the administration of a specific drug. Possible cause of development can be hereditary enzimopaty
4.	A patient taking clonidine for essential hypertension treatment was using alco-	A. *Effet potentiating B. Effect summation C. Cumulation	Potentiation is a type of drug interaction in which one drug (in this case alcohol) enhances the action of another

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	hol that caused intense inhibition of central nervous system. What may it be connected with?		
5.	A patient with frequent attacks of stenocardia was prescribed sustak-forte to be taken one tablet twice a day. At first the effect was positive but on the second day stenocardia attacks resumed. What can explain inefficiency of the prescribed drug?	A. *Tachyphylaxis B.Cumulation C.Sensibilization D. Idiosyncrasy E.Dependence	Tachyphylaxis is a specific reaction of the body, consisting in a rapid decrease in the therapeutic effect with repeated use of the drug
6.	A female patient with bronchial asthma had taken prednisolone tablets (1 tablet 3 times a day) for 2 months. Due to a significant improvement of her condition the patient suddenly stopped taking it. What complication is likely to develop in this case?	A. *Withdrawal syndrome B.Cushing's syndrome C.Gastrorrhagia D. Upper body obesity E.Hypotension	Withdrawal syndrome - the reaction of the body that occurs in case of sharp cessation or reduction of taking the drug and is manifested by the deterioration of the patient's condition
7.	A patient, who has been taking phenazepam for a month, came to the pharmacy. He insists that he needs to buy two more packages of this drug, because without it he feels unwell. The sideeffect of this drug that can be observed in this patient is based	B. Cumulation C. Idiosyncrasy D. After-effect	Addiction is the pharmacological effect that develops with repeated injections of the drug. It is characterized by a change in the psychoemotional state of the patient. As a result, the viability of the body in the previous mode becomes impossible.

	on the development of:		
8.	What is the name of the phenomenon when one drug enhances the effect of another?	B. Withdrawal C. Tachyphylaxis	Synergism is the simultaneous action in one direction of two or more substances, providing a higher overall effect than the action of each of them separately.
9.	Antibiotic treatment of infectious diseases belongs to the following type of pharmacotherapy:	<ul><li>B. Substitution</li><li>C. Stimulating</li></ul>	Antibiotics have an antimicrobial effect, that is, they act on the causative agent of the disease, which is an etiotropic effect.

UNIT 10: Cholinergic agonists (cholinomimetic drugs)

No	Test	Distractors (A-E)	Explanations
1.	A patient complaining of dry mouth, photophobia, and visual impairment has been delivered into an admission room. The skin is hyperemic and dry; pupils are dilated; tachycardia is observed. The patient was diagnosed with belladonna alkaloids intoxication. What drug would be advisable	A. *Proserin B. Aceclidine C. Pilocarpine D. Armin	The patient has belladonna poisoning (this is a group of anticholinergics). Prozerin is a cholinomimetic with competitive anticholinesterase mechanism of action. It is indicated for cholinoblockers poisoning.
2.	A patient has been administered a competitive inhibitor of cholinesterase.  Name it:	A. *Proserin B. Aspirin C. Sodium diclophenac D. Allopurinol E. Atropine sulfate	
3.	Recommend the patient with glaucoma an M-cholinomimetic agent:	A.*Pilocarpine hydrochloride B. Ephedrine hydrochloride C.Sulfacyl-sodium (Sulfacetamide)	Pilocarpine is a drug of the cholinomimetic group which constricts the pupils and lowers the intraocular pressure. Used to treat glaucoma.

4.	Specify the drug that constricts pupils and reduces intraocular pressure:	drochloride	
5.	Name the drug that causes miosis and lowers intraocular pressure.	E. Dithylinum  A. *Pilocarpine hydrochloride	
6.	A patient complains of general weakness, muscle weakness in the extremities (if the patient is asked to make a fist several times in a row, for example, the patient is capable of doing it only once), facial muscles are weak, swallowing is disturbed.  Administration of acetylcholinesterase drugs removes these disturbances to a certain degree.  Determine the pathology:	A. *Myasthenia B. Paralysis C. Paresis D. Hemiplegia E. Monoplegia	Myasthenia is a weakness of skeletal muscles, which is eliminated by anticholinesterase drugs.
7.	A sanitary-epidemic station employee has been poisoned when the premices were processed wi-th an organophosphorous insecticide. What enzyme is inhibited by organophosphorous	B. Lactate dehydrogenase C. Xanthine oxidase	Organophosphorus compounds belong to the group of acetylcholinesterase inhibitors

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	compounds?		
8.	Proserin was prescribed to a patient	C Pyridostigmine bromide D Isadrin	In case of an overdose of M,H-cholinomimetics, it is advisable to use cholinergic blockers, which block the stimulating effect of acetylcholine on receptors, that is, they act in the opposite way and eliminate intoxication.
9.	What anticholinesterase agent is used to stimulate intestinal peristalsis in the patients during the postoperative period?	C. Adrenaline hydrochloride	Prozerin is anticholinesterase agent, stimulate intestinal peristalsis in the patients during the postoperative period.

**UNIT 11: Cholinergic antagonists (cholinergic blockers)** 

№	Test	Distractors (A-E)	Explanations
1.	A child accidentally		
	took a drink from the	B. Carbachol	
	vial of grandmother's		
	medicine for glaucoma.		
	The medicine was	(Hexamethonium)	
	identified as pilocarpine		
		(Azamethonium bromide)	
	drug can be used as an		Atropine is a drug of the M-
	antidote?		anticholinergic antagonists group,
2.	In course of an	A. *Atropine	reduces the secretion of exocrine
	experiment a dog has		glands, has an antispasmodic ef-
	been injected a		fect, used in cholinomimetic
	preparation that reduces		poisoning (pilocarpine)
	secretory and motor	E. Gastrin	
	activity of stomach.		
	What preparation is it?		
3.	Which of the listed bio-	A. *Atropine	
	logically active com-		
	pounds inhibits the se-	C.Insulin	
	cretion of pancreatic	D. Gastrin	

	· · · ·		13
	juice?	E. Secretin	
4.	A patient with renal colic has been administered a spasmolytic from the group of M-cholinergic antagonists as a part of the complex therapy. Specify this drug:	A. *Atropine B. Proserin C. Galantamine D. Dithylinum E. Benzohexonium	
5.	The patient with hepatic colic has been prescribed spasmolytic of muscarinic receptor antagonists group as a part of his complex therapy. What drug is it?	C. Galantamine D. Dithylin	
6.	Name the most typical symptom of atropine poisoning:	A.*Dilated pupils unresponsive to light B.Constricted pupils unresponsive to light C. Excessive sweating D. Bradycardia E. Low intraocular pressure	Atropin poisoning manifested by dilation of the pupil, does not respond to light
7.	A man got an injection of curarelike substance causing the relaxation of all skeletal muscles. What is its mechanism of action?	A. *Block of cholinergic receptors of postsynaptic membrane B. Disturbance of acetylcholine synthesis C. Block of Ca2+channels of presynaptic membrane D. Disturbance of cholinesterase synthesis Disturbance of acetylcholine secretion	By blocking the N-cholinergic receptors of postsynaptic membrane we obtain the relaxation of skeletal muscles (muscle relaxant effect)
8.	What substance blocks the conduction of excitation in the neuromuscular synapses?	A. *Curare B. Noradrenaline C. Adrenaline D. Somatostatin E. Aspartate	Curare-like substances block excitation at the neuromuscular synapses.
9.	A 40-year-old patient has a history of bron-	A. * $M$ -anticholinergics B. $\beta$ -adrenergic blocking	M-cholinoblockers used for the treatment of asthma due to

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	chial asthma and brady- arrhythmia. In order to eliminate bron- chospasm, the drugs of the following pharma- cological group should be administered:	C. <i>M</i> -cholinergic agents D. Anticholinesterase agents E. Muscle relaxants	bronchodilating action
10.	What drug is used for treatment of organophosphate poisoning?	<ul><li>A. * Atropine sulfate</li><li>B. Izoniazid</li><li>C. Metronidazole</li><li>D. Aciclovir</li><li>E. Platyphylline</li></ul>	Atropine sulfate is a cholinergic antagonist that is used for poisoning with organophosphate compounds (cholinomimetics). Other medicines presented are not suitable.
11.	During a surgery, tubocurarin chloride was used as a muscle relaxant. What antagonist should the patient be given to restore spontaneous breathing?	mine) B. Benzohexonium (Hexamethonium) C. Dithylin (Suxamethonium)	Prozerin is a cholinomimetic with competitive anticholinesterase mechanism of action. It is indicated for cholinoblockers poisoning (tubocurarin chloride).
12.	During a surgery with application of tubocurarine as a muscle relaxant, the patient developed a respiratory disturbance. The disturbance was eliminated after the patient was administered proserin (neostigmine). What term can be used to describe the interaction between these two drugs?	A. Antagonism B. Cumulation C. Incompatibility D. Synergism E. Tachyphylaxis	Proserin blocks the enzyme acetylcholinesterase, acetylcholine is not released, tubocurarine accumulates and is released from the H-cholinergic receptor. A muscle relaxant is taken.
13.	Proserin was prescribed to a patient suffering from myasthenia gravis. After its introduction, the patient developed nausea, diarrhea, twitching of the tongue and skeletal muscles. What drug will help eliminate this	B Physostigmine C Pyridostigmine bromide D Isadrin	In case of an overdose of M,H-cholinomimetics, it is advisable to use cholinergic blockers, which block the stimulating effect of acetylcholine on receptors, that is, they act in the opposite way and eliminate intoxication.

			15
	intoxication?		
14.	A patient was brought to the receiving department with complaints of difficulty breathing, drooling, spastic abdominal pain, diarrhea, dizziness, decreased visual acuity. The diagnosis was established: poisoning by organophosphorus compounds. What drugs should be included in pathogenetic therapy?	dipiroxime B Sodium thiosulfate and bemegrid C Thetacin-calcium and unitiol D Nalorphine hydrochloride and bemegrid	acetylcholinesterase reactivator
15.	During the operation, tubocurarine chloride was used as a muscle relaxant. What antagonist agent should be administered to the patient to restore his independent breathing?	<ul><li>B. Benzohexonium</li><li>C. Etimizol</li><li>D. Cititon</li></ul>	According to the classification, Proserin belongs to anticholinesterase agents of reversible action. The tool reversely (temporarily) blocks the enzyme cholinesterase and causes accumulation of acetylcholine in cholinergic synapses, therefore it is an antagonist of tubocurarine.

**UNIT 12: Adrenergic agents. Adrenergic agonists (adrenomimetics)** 

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4.	A medical student needs to choose an adrenergic drug for treatment of anaphylactic shock. What would you recommend?  Phenylephrine (mezaton) was	line)	Phenylephrine stimulates $\alpha_1$ -adrenergic receptors located in
	administered to a patient with collapse for blood pressure correction. What is the mechanism of hypertensive action of this drug?	<ul> <li>B. Stimulates beta-adrenoceptors</li> <li>C. Stimulates muscarinic acetylcholine receptors</li> <li>D. Stimulates angiotensin receptors</li> <li>E. Stimulates nicotinic acetylcholine receptors</li> </ul>	arterioles. During the stimulation of these receptors, blood vessels narrow, and therefore blood pressure increases and the permeability of blood vessels decreases.
5.	The patient with bronchial asthma had been prescribed salbutamol, which led to disappearance of bronchiospasm symptoms. It happened due to stimulation of:	<ul> <li>B. α<sub>1</sub>-adrenoreceptors</li> <li>C. Muscarinic</li> <li>acetylcholine receptors</li> <li>D. Acetylcholine</li> <li>synthesis</li> </ul>	
6.	Adrenomimetic agents are differentiated into selective and non-selective. What drug is an agonist of $\beta_2$ -adrenergic receptors and can be used for treatment of bronchial asthma?		Salbutamol belongs to $\beta_2$ - adrenomimetics. Used to treat bronchial asthma
7.	A patient with bronchial asthma was prescribed a drug with the mechanism of action that is primarily based on the stimulation of β2adrenergic receptors. Name this drug:	C. Droperidol	
8.	Dobutamine has been administered to the 49-	A. * Stimulation of β1- adrenoreceptors	Dobutamine refers to adrenergic agonists. Mechanism of action -

		T	17
	year-old-patient with acute cardiac failure and cardiac glycoside intolerance. What is this drug's mechanism of action?	adrenoreceptors C. Blockade of K+-, N a+- adenosinetriphosphatase D. Suppression of phosphodiesterase activity E. Stimulation of M - cholinergic receptors	stimulation of β1-adrenoreceptors
9.	An ophthalmologist used a 1% mesaton solution for the diagnostic purpose (pupil dilation for eye-ground examination). What is the cause of mydriasis induced by the drug?	A. * Activation of alfa1- adrenoreceptors B. Activation of alfa2- adrenoreceptors C. Block of alfa1- adrenoreceptors D. Activation of beta1- adrenoreceptors E. Activation of M- cholinoreceptors	Mezaton refers to alpha adrenoagonistam, causes pupil dilation
10.	Patient with bronchial asthma was taking tablets which caused insomnia, headache, increased blood pressure. What medecine can cause such complications?	A. *Ephedrine B.Adrenaline C.Chromolin sodium D. Euphyline E. Izadrine	Ephedrine is an alpha adrenomimetic, well penetrates the blood-brain barrier, has side effects on the central nervous system
11.	Help a medical student choose an adrenergic drug for the treatment of anaphylactic shock:	A* Adrenaline hydrochloride B Isadrin C Galazolin D Clofelin E Fenoterol	Adrenaline is a non-selective alpha-beta adrenomimetic. Stimulation of alpha receptors leads to peripheral vasoconstriction and reduction of edema. Stimulation of beta adrenoceptors expands the bronchi and stimulates the socratic function of the myocardium

UNIT 13: Adrenergic antagonists (adrenolytics). Sympatholytics.

No	Test	Distractors (A-E)	Explanations
1.	It is required to	A. *β-adrenoreceptors	B1-adreno receptors are located in
	diminish pump	B. Nicotinic	the heart. Myocadial contractility
	function of patient's	cholinoreceptors	decreases during β1-receptor
	heart. This can be done	C. Muscarinic	blockade
	by means of blockers	cholinoreceptors	
	of the following	D. α-adrenoreceptors	
	membrane	-	

	cytoreceptors:	E. Dopamine receptors	18
2.	In a 44-year-old patient suffering from angina, therapy using anaprilin had a positive effect on the dynamics of the disease. What is the main mechanism of action of this drug?	A * Blockade of beta- adrenoceptors and reduction of myocardial oxygen demand B Reduction of oxidative metabolism in the myocardium as a result of the enzyme block of the Krebs cycle C Decrease in energy expenditure of the myocardium due to a decrease in load D Increased delivery of oxygen to the myocardium E Decrease in the need for increased oxygen delivery to the myocardium.	Anaprilin belongs to non-selective β1β2-adrenoblockers. When blocking β1-adrenoceptors, a decrease in the force of heart contractions is observed, the frequency of heart contractions decreases, which leads to a decrease in the work of the heart and a decrease in the myocardial oxygen demand.
3.	A patient with ischemic heart disease was prescribed a drug from the group of selective adrenoblockers that do not cause bronchospasm. Choose	A * Metoprolol B Indomethacin C Tryphtazine	
4.	a drug.  A doctor prescribed metoprolol to a patient, which helped to lower the patient's blood pressure. This drug belongs to the following pharmacological group:	<ul> <li>A. Beta-blockers</li> <li>B. Alpha-blockers</li> <li>C. Nicotinic antagonists</li> <li>D. Muscarinic antagonists</li> <li>E. Sympatholytics</li> </ul>	Metoprolol is a selective β1-adrenoblocker, that is, it blocks only β1-receptors of the heart and has no effect on β2-receptors of bronchial smooth muscles.
5.	A man diagnosed with diabetes mellitus has been taking insulin Semilente for 9 years to correct hyperglycemia. 10 days ago, the patient started taking anap-rilin	D Increasing the bioavailability of insulin Semilente	Anaprilin belongs to the non-selective $\beta 1\beta 2$ -adrenoblockers, therefore, due to the blockade of $\beta 2$ receptors, it suppresses glycogenolysis, the secretion of glucagon and insulin, which causes a decrease in the level of glucose in the blood of patients. Patients with diabetes mellitus.

drug, the	patient
developed	a
hypoglycemic	coma.
What is the me	chanism
of hypoglycem	ia when
using anaprilin?	

# **UNIT 15: Drugs irritating the receptors**

No	Test	Distractors (A-E)	Explanations
6.	A patient with symptoms of chronic bronchitis has been administered acetylcysteine. What is the mechanism of its expectorant action?	A. * Depolymerization of sputum mucopolysaccharides B. Stimulation of adrenergic receptors C. Inhibition of cough center D. Stimulation of respiratory center E. Anesthesia of respiratory mucosa	
7.	A patient with acute bronchitis was prescribed an expectorant that caused bronchial spasm after the patient had taken it. What drug of those listed below can cause such side effect?	A. *Acetylcysteine B. Salbutamol C. Validol (Menthyl isovalerate) D. Platyphyllin E. Prenoxdiazine (Libexin)	Acetylcysteine refers to a group of expectorants with mucolytic activity. Can cause side effect bronchial spasms
8. 9.	What mucolytic agent would you recommend for the patient with acute bronchitis to facilitate expectoration?  A patient suffers from	*A. Acetylcysteine B.Glaucine C.Codeine D.Libexin (Prenoxdiazine) E.Hydrocodone A. Acetylcysteine	
9.	intense cough with production of viscous sputum. What drug can thin the sputum and facilitate expectoration?	<ul><li>B. Butamirate</li><li>C. Prenoxdiazine</li><li>D. Codeine phosphate</li></ul>	
10.	A patient with chronic constipation has been	A. *Habituation B. Dependence	The patient developed a side effect of bisacoyl - habituation

	prescribed bisacodyl.		(addiction).
	After 3 weeks of	D.Cumulation	
	treatment, the patient	E. Dysbacteriosis	
	noticed a reduction of	-	
	laxative effect. This is		
	caused by the devel-		
	opment of the follow-		
	ing side-effect:		
11.	The elderly patient suf-	A.*Bisacodyl	Bisacodyl is a laxative that
	fers from constipation	B. Sodium sulfate	enhances the motility of the
	caused by large intes-	C. Castor oil	small intestine.
	tine hypotonia. What	D. Atropine sulphate	
	drug should be pre-	E. Procainamide	
	scribed?		

# **UNIT 16: Drugs protecting the receptors**

No	Test	Distractors (A-E)	Explanations
2.	What local anesthetic is given to patients with cardiac rhythm disturbance?  To perform conduction anesthesia a patient had been	A. *Lidocaine B. Paracetamol C. Morphine hydrochloride D.Caffeine and sodium benzoate E. Nitrazepam A.*Lidocaine B.Suxamethonium chloride C.Thiopental sodium D.Tubocurarin chloride	Lidocaine belongs to a group of local anesthetics. In intravenous administered, it has antiarrhythmic action. The symptoms of poisoning: central nervous system excitation with following paralysis, and acute cardiovascular insufficiency (collapse).

**UNIT 17: General anesthetics. Alcohols.** 

№	Test	Distractors (A-E)	Explanations
3.	Test One of the methods of methanol poisoning treatment requires administration of ethanol {per os or intravenously} in the amount that would have caused intoxication in a healthy person. Why is this treatment method effective?	A. Ethanol blocks alcohol dehydrogenase coenzyme  B. Ethanol inactivates alcohol dehydrogenase  C. Ethanol inhibits methanol diffusion  D. Ethanol competes with methanol for the active site of alcohol dehydrogenase	Explanations  Ethanol blocks the alcohol dehydrogenase coenzyme and prevents the formation of formaldehyde and formic acid, which are very toxic and cause damage to the optic nerve, brain cells, and parenchymal organs.
		ase E. Ethanol breaks down faster than methanol	

**UNIT 18: Hypnotic and anticonvulsive drugs** 

No	Test	Distractors (A-E)	Explanations
2.	A man is diagnosed with Parkinson's disease. What drug should be prescribed in this case?  The patient with parkinsonism has been prescribed a drug dopamine precursor to relieve muscular rigidity. Name this drug.	B.Nitrazepam C.Paracetamol D.Aminazine E.Anaprilin (Propranolol) A. *Levodopa B.Aminazine C.Paracetamol D.Scopolamine hydrobromide	Levadopa is an anti-parkinsonian drug.
3.	Due to prolonged taking of phenobarbital the epileptic patient has developed tolerance for this drug. What is this phenomenon based on?	acceleration B. Absorption process weakening C. Increase of receptor	Phenobarbital is a hypnotic, barbituric acid derivative. One of the side effects of which is the induction of microsomal oxidation of the liver.

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4.		A. *Phenobarbital	
	stimulate liver to	B.Heparin	
	synthesize enzyme		
	systems taking part in	bisulfite	
	drugs and toxines	D. Sulfanilamide	
	metaboli-sm. What	E. Aspirin	
	compound stimulates	-	
	drug metabolism in		
	liver microsomes?		
5.	A patient suffering from	A *Sodium valproate	Sodium valproate belongs to
	epilepsy and a	B Ethosuximide	antiepileptic drugs, in addition, it
	depressive reaction is	C Amitriptyline	has tranquilizing properties,
	prescribed a drug that	D Phenytoin	reduces the feeling of fear,
	reduces the	•	improves the mental state and
	manifestation of		mood of patients.
	epilepsy and improves		
	the mental state of the		
	patient. Name this drug.		
6.	Some derivatives of	A * Aminobarbital	A derivative of barbituric acid,
0.	barbituric acid are	B Penicillin	aminobarbital, suppresses the
			1 1
	capable of depressing	C Streptocide	
	the respiratory chain.	D Vikasol	cellular respiratio
	Name the drug that	E Levomycetin	
	inhibits cellular		
	respiration:		

UNIT 19: Non-narcotic analgesics – antipyretics. Non-steroidal antiinflammatory drugs (NSAIDS)

No	Test	Distractors (A-E)	Explanations
1.	What pharmacological	A. *Antiaggregant	
	effect of	B. Analgesic	
	acetylsalicylic acid	C. Antipyretic	
	allows its application	D. Ulcerogenic	
	in patients with	E. Anti-inflammatory	
	ischemic heart disease		
	for prevention of		Acetylsalicylic acid is a NSAIDs.
	thromboses?		Due to mechanism of action -
2.	A female patient asked	A. *Acetylsalicylic acid	Cyclooxygenase1 inhibition, it
		B.Codeine phosphate	couse antiplatelet effect.
	recommend her a drug		
	for headache with	D. Tramadol	
	antiplatelet effect.	E.Fentanyl	
	Specify this drug:		
3.	A patient with sten-	A. *Antiplatelet effect	
	ocardia has been ad-		

	1		23
	ministered acetylsali- cylic acid for:	<ul><li>B. Inhibition of blood fibrinolytic activity</li><li>C. Aggregate effect</li><li>D. Anti-inflammatory effect</li><li>E. Increase in blood fibrinolytic activity</li></ul>	
4.	Anti-inflammatory effect of a number of drugs is caused by the inhibition of arachidonic acid release. This acid is the precursor of:	A. * Prostaglandins B. Uric acid C. Urea D. Haem E. Cholesterol	
5.	Nonsteroid anti- inflammatory drugs are used in medical practice for treating the rheumatoid arthritis, osteoporosis, inflammatory dseases of the connective tissue. These preparations inhibit the activity of the following enzyme:	dehydrogenase D. Aminotransferase	NSAIDs due to inhibition of cyclooxygenase 2 there is a decrease in the production of prostaglandin inflammatory mediators
6.	A female student with a cold has been prescribed an antipyretic medication. Specify this drug:	A. *Paracetamol B. Ascorbic acid C. Oxytocin D. Famotidine E. Cyanocobalamin	
7.	A patient with headache consulted a pharmacist. The patient was prescribed a cyclooxygenase inhibitor - an aminophenol derivative. What drug was prescribed?	B. Acetylsalicylic acid C. Diclofenac	Paracetamol is an NSAID, has anti-inflammatory, analgesic and antipyretic activity.
8.	Paracetamol belongs to the following phar- macological group:	<ul><li>A. *Nonnarcotic analgetics</li><li>B. Soporifics</li><li>C. Diuretics</li><li>D. Hypotensive drugs</li></ul>	

			24
		E. Antianginal drugs	
9.	On the 4th day of treatment with indomethacin a male 55-year-old patient developed gastric bleeding due to the ulceration of the gastric mucosa. Ulcerogenic effect of the drug is associated with a decrease in the activity of the following enzyme:	A. *Cyclooxygenase-1 B. Cyclooxygenase-2 C. Lipoxygenase D. Thromboxane synthetase E. Prostacyclin synthase	Indomethacin is a NSAID, a non-selective inhibitor of cyclooxygenase 1 and 2. Inhibition of cyclooxygenase 1 leads to ultirogenic action
10.	The patient with rheumatoid arthritis and concomitant duodenal ulcer has to be prescribed nonsteroid antiinflammatory drug. Which one of the drugs listed below is a drug of choi-ce in the given case?  The patient, who suf-	A. *Celecoxib B. cetylsalicylic acid C. Paracetamol D. Metamizole E. Diclofenac sodium  A. *Celecoxib	Celecoxib is an NSAID, a selective cyclooxygenase 2 inhibitor. It does not have an
	fers from rheumatoid arthritis and concomitant duodenal ulcer should be prescribed a non-steroidal anti-inflammatory drug. What drug is most suitable in this case?	B. Diclofenac sodium C.Acetylsalicylic acid D.Metamizole E. Paracetamol	ulcerogenic effect.
12.	A patient has been taking diclofenac sodium for a long time. A family physician withdrew this drug and prescribed celecoxib. What disease was the cause of drug substitution?	B. Bronchial asthma C. Urolithiasis	Diclofenac sodium NSAID is not selectively inhibit cyclooxygenase 1 and 2. Side effect - ulcerogenic effect
13.	A doctor has pre- scribed a nonsteroidal	A. *Diclofenac sodium B. Glibenclamide	

antiinflammatory drug to relieve inflamma-	D. Prednisolone	
tion and pain syndrome. Name this drug:	E.Calcium chioride	

UNIT 20: Psychotropic drugs. psychodisleptic drugs. Narcotic analgesics

No	Test	Distractors (A-E)	Explanations
1.	A 25-year-old woman with signs of acute	1	
	morphine intoxication	B. GABA receptor	
	was administered naloxone, which	C. Serotonin receptor	
	rapidly improved her condition. What is the mechanism of action	blockade  D. Dopamine receptor	
	of this drug?	blockade E. Benzodiazepine receptor blockade	Naloxone is an opioid receptor antagonist, used for intoxication
2.	What naloxone indications are there?	<ul><li>A. *Narcotic analgetics</li><li>acute poisoning</li><li>B. Heavy metals poison-</li></ul>	with opioid analgesics due to competitive anatgonism with opiate receptors
		ing C. Cardiac glycosides poisoning	
		D. Ergot alkaloids poison-	
		ing E. Atropine sulphate poisoning	
3.	Explain to an intern, what is the mechanism		Morphine is a narcotic analgesic, the mechanism of action of
	of analgesic action of morphine	B. Histamine receptors blockade	activation of opiate receptors
	hydrochloride:	C. Phosphodiesterase	
		blockade D. Adenylate cyclase	
		stimulation E. Choline esterase blockade	
4.	A patient with a diagnosis of drug poisoning has been admitted to the resuscitation	A. *Inhibition of the respiratory center function B. Impaired function of spinal cord motoneurons C. Impaired function of	One of the undesirable effects of narcotic analgesics is the inhibition of the respiratory center.

			Δ0
	department. The	the neuromuscular system	
	patient is in grave	D. Diminished chest mo-	
	condition. Respiration	bility	
	is rapid, superficial,	•	
	1 . 1	2. I difficulty dystaliction	
	with periods of apnea		
	(Biot's respiration).		
	What was the main		
	cause of the		
	development of		
	periodic breathing in		
	the patient?		
5.	•	۸ به تاسیم می مین بازی م	
3.		A. *Trimeperidine	
	drugs listed below is	B. Acetylsalicylic acid	
	potentially addictive?	C. Naloxone	
		D. Diclofenac sodium	
		E. Paracetamol	
6.	A narcotic analgesic	A. *Promedol	
5.	with accompanying	B. Doxylamine	Promedol (trimeperidin) is a
	1 0		`
	antispasmodic effect		narcotic analgesic, the
	was appointed for the	D. Ketorolac	undesirable effect of which is
	patient to relieve of	E. Buprenorphine	addiction, but to a lesser extent
	renal colic attack.		has a suppressive effect on the
	Specify the drug.		respiratory center (used for ob-
			stetric aid). It also has an
7.	A woman is to	A. *Promedol (Trimeperi-	antispasmodic effect.
	be prescribed a	dine)	
	narcotic analgesic for	,	
	_	B. Morphine	
	labor pain relief. What	C. Papaveretum (Om-	
	drug is indicated in	nopon)	
	this case?	D. Codeine	
		E. Fentanyl	
8.	An interhospital phar-	A. *Fentanyl	Fentanyl is a narcotic analgesic
	macy received a short-	B. Naltrexone	with the most pronounced
	acting narcotic analge-	C. Naloxone	analgesic activity.
	sic that is times more	D. Analgin (Metamizole)	
	active than morphine.	E. Ketanov (Ketorolac)	
	Name this drug:	L. Retailov (Retoloiae)	
	rame uns urug.		
	Consider 41 1	Λ *Mo.,, 1- :	Mambina : -1'C' 1
9.	Specify the analgesic	A. *Morphine	Morphine is classified as a
	that affects opiate re-	B. Phenobarbital	narcotic analgesic. The rest of
	ceptors and can cause	C.Medazepam	the proposed drugs are not
	development of toler-	D.Voltaren (Diclofenac	narcotic analgesics.
	ance and dependence:	sodium)	
	1	E.Haloperidol	
10	Вкажіть анальгетич-	А *Морфін	Механізм дії наркотичних ана-
10.	ний засіб, який взає-	В Фенобарбітал	
	пии засто, який взае-	в феноваропал	льгетиків полгає у взаємодії з

модіє з опіатними рецепторами, викли- кає толерантність та залежність:	С Медазепам D Вольтарен Е Галоперидол	опіатними рецепторами.
11. Пацієнту з переломом стегна призначений наркотичний анальгетик. Аналгетична активність цієї речовини обумовлена взаємодією з наступними рецепторами:	А*Опіатними рецепторами В Адренорецепторами С Холинорецепторами D Бензодіазепіновими рецепторами Е ГАМК-ергічними рецепторами	Механізм знеболюючої дії наркотичних анальгетиків зумовлений взаємодією з опіатними рецепторами, які відповідають за біль.

UNIT 21: Neuroleptic drugs. Tranquilizers. Psychosedatives

№	Test	Distractors (A-E)	Explanations
1.	A woman suffering	A. *Nitrazepam	Nitrazepam is a hypnotic,
	from neurosis has dis-	B. Phenobarbital	benzodiazepine derivative,
	turbed sleep. What	C. Aethaminalum-	tranquilizer.
	drug is optimal for in-	natrium (Pentobarbital)	
	somnia treatment?	D. Bromisoval	
		E. Valerian tincture	
2.	A woman complaining		
	of sleep disturbance,	1	
	fearfulness, and	C. Nitroglycerine	
	anxiety came to a	D. Oxytocin	
	neurologist. What drug	E. Lisinopril	
	should be prescribed in		
	this case?		
3.	What pharmacological	A. *Anticonvulsant	
		B. Analgesic	
	allows its application	1.0	Diazepam is a hypnotic
	for termination of	D. Anti-inflammatory	benzodiazepine derivative,
	convulsions?	E. Hypnotic	tranquilizer (anxiolytic). It has
4.	The patient with	A. *Diazepam	anticonvulsant activity.
	neurosis has been	B. Atropine sulphate	anticonvarsant activity.
	prescribed anxiolytic		
	derivative of		
	benzodiazepine. Name	E. Trihexyphenidyl	
	this drug		
5.	A doctor prescribed	A. *Anxiolytic	
	diazepam to a patient	B.Anticonvulsant	
	with anxiety disorders.	C.Anti-inflammatory	
	What pharmacological	D. Antianginal	
	effect is the reason for	E. Hypotensive	

	such a prescription?		28
6.	such a prescription?  An anxiolytic agent, a benzodiazepine derivative, was prescribed to a patient with a neurosis in order to reduce its signs. What medicine belongs to this group of drugs?	B.Nandrolone	
7.	A 33-year-old woman was admitted into a psychiatric hospital with an anxiety disorder of neurotic origin. What drug is indicated in this case?	<ul><li>B. Naloxone</li><li>C. Droperidol</li><li>D. Levodopa</li><li>E. Valerian extract</li></ul>	Diazepam is tranquilizer (anxiolytic). It is used for anxiety, neurosis, stress.
8.	A patient suffering from neurosis associated with feelings of anxiety and fear was prescribed diazepam. What pharmacological effect of this drug allows using it in treatment of this condition?	<ul><li>B. Hypotensive</li><li>C. Antianginal</li><li>D. Antiarrhythmic</li></ul>	Diazepam is a benzodiazepine tranquilizer, has an anxiolytic (anti-anxiety) effect.
9.	Neuroleptanalgesia has been applied in the case of cardiac infarc- tion. What neuroleptic is most often applied along with fentanyl?		Neuroleptoelngegy is a combination of a narcotic
10.	To quickly relieve the state of acute psychosis, the patient was prescribed a rapid/short-acting psychotropic drug. Name this drug:	A. *Droperidol B. Piracetam C. Caffeine and sodium benzoate D. Valerian extract E. Amitriptyline	analgesic (fentanyl) with the neuroleptic (droperidol)
11.		A.*Psychosedatives B.Cholinergic antagonists C.Adrenergic drugs D.Diuretics E. Emetics	All psychotropic drugs cause yawning and addiction with long-term use.
12.	The patient took the	A *Sodium chloride	Sodium chloride accelerates the

drug prescribed by the	B Glucose solution 5%	excretion of bromine in the urine.
neurologist for 2 weeks.		
He noted an	D Polyglukin	
improvement in his	E -	
condition, but developed		
apathy, conjunctivitis,		
rashes, delirium, and		
memory impairment.		
Diagnosed with		
bromism. What drug		
should be prescribed to		
reduce symptoms?		

**UNIT 22: Antidepressants. normothymics. Psychostimulants** 

№	Test	Distractors (A-E)	Explanations
1.	Caffeine inhibits phosphodiesterase which converts cAMP to AMP. The most typical feature of caffeine intoxication is the reduced intensity of:	B. Protein phosphorylation C.Pentose phosphate pathway D. Glycolysis	Caffeine is a phosphodiesterase inhibitor. One of the side effects is a decrease in glycogen synthesis
2.	Depressive states can be treate by means of drugs inhibiting the enzyme that inactivates biogenic amines. Specify this enzyme:	oxidase) B. LDH (lactate dehydrogenase) C. CPK (creatine phosphokinase) D. AST (aspartate aminotransferase) E. ALT (alanine aminotransferase)	Antidepressants are medicinal substances, one of the mechanisms of action of which is
3.	Antidepressants can increase the concentartion of catecholamines in the synaptic cleft. What is the mechanism of action of these drugs?	<ul><li>ine oxidase</li><li>B. Activation of monoamine oxidase</li><li>C. Inhibition of xanthine</li></ul>	inhibition of monoamine oxidase (MAO).
4.	Name the drug that has an analeptic and	A * Caffeine-sodium benzoate	Caffeine enhances positive reflexes, increases motor activity,

	psychostimulant effect:	B Proserin	mental and physical performance,
		C Diazepam	reduces fatigue and drowsiness,
		D Korglikon	stimulates the respiratory and
		E Diclofenac sodium	vascular centers
5.	One of the alkaloids of	A.* Hypertensive disease	Caffeine stimulates the vascular
	tea and coffee is	B. Hypotension	center and increases blood
	caffeine. What is a	C. Migraine	pressure.
	contraindication for the	D. Fatigue	
	use of caffeine?	E. Suppression of nervous	
		activity	

UNIT 23: Nootropic drugs. Adaptagens. Analeptics. Drugs of abuse

No	Test	Distractors (A-E)	Explanations
1.	A patient after craniocerebral trauma	A. *Nootropic agents B. Non-narcotic	
		analgesics C. Tranquilizers D. General anesthetics	
	group does this drug belong to?	E. Antipsychotics	Piracetam is a group of nootropic
2.	the patient was pre- scribed a drug to im-	<ul><li>B. Metoclopramide</li><li>C. Tabex (Cytisine)</li><li>D. Diphenin (Phenytoin)</li></ul>	drugs that improves the higher cognitive functions of the brain.
3.	Name the psychostimulant with analeptical action, which is a purine derivative:	B. Tramadol	Caffeine refers to psychostimulants with analeptic activity

UNIT 24: Cardiotonic drugs. Cardiac glycosides. Non – glycoside cardiotonics. Cardiostimulants

№	Test	Distractors (A-E) Explanations
	A patient with acute heart	A. *Increased heart force   Corglikon is a cardiac glycoside
	failure was administered	B. Decreased heart force   with a quick short action. It has
	corglycon. What effect of	C. Coronary vessels a positive inotropic effect
	this drug results in	dilatation (increases the force of
	improvement of the	D. Increased heart rate myocardial contraction). Used to
	patient's condition?	E. Decreased oxygen treat acute heart failure.

			01
		demand of myocardium	
	Choose the most efficient way of convallariae glycoside administration for acute cardiac failure treatment.	<ul><li>A. *Intravenous</li><li>B. Intramuscular</li><li>C. Subcutaneous</li><li>D. Internal</li><li>E. Inhalational</li></ul>	
	What drug should be administered in case of acute cardiac insufficiency?	A. *Corglycon B. Salbutamol C. Pilocarpine hydrochloride D. Naloxone E. Heparin	
	During treatment of chronic cardiac failure with digitoxin a patient developed the drugspecific signs of intoxication. A doctor prescribed Unithiol (Dimercaptopropansulfonate sodium). Explain its mechanism of action of Unithi-ol in case of cardiac glycoside intoxication:	A. *Restoration of *-N a*-adenosine triphosphatase activity B. Binding of calcium ions C. Increase of sodium concentration in cardiac hystiocytes D. Increase of calciun permeability of cardiac hystiocytes E. Binding of glycosides into complex compound	Unithiol is a donor of sulfhydryl groups, recovery of activity + -N a + -adenosine triphosphatase
	A patient with acute heart failure and cardiac glycosides intolerance was given an injection of dobutamine. What is the mechanism of its action?		Dobutamine is a beta1 adrenergic mimetic
. (	A patient with chronic heart failure has been taking digitalis for a long time. In connection with the violation of the medication regimen, the woman developed symptoms of intoxication. What is associated with the	A *Material accumulation B Tachyphylaxis C Idiosyncrasy D Antagonism E Sensitization	In the blood plasma, digitalis preparations form complexes with albumins, so they slowly penetrate the tissues, are slowly metabolized, so they accumulate (cumulate) in the body.

appearance of these symptoms?		
The patient complains of weakness, shortness of breath, swelling of the lower extremities. Diagnosis: chronic heart failure. What drugs should be prescribed first?	A * Digitoxin B Caffeine C Papaverine D Propranolol E Raunatin	Digitoxin increases the strength and speed of myocardial contraction, leads to an increase in stroke and minute blood volume, a decrease in myocardial oxygen demand, decreases the frequency of heart contractions, therefore it is used in heart failure.

### **UNIT 25: Antiarrhythmic drugs**

No	Test	Distractors (A-E)	Explanations
1.	A patient with a heart rhythm disorder has been given lidocaine. Apart from the local anesthetic effect, this drug has the following pharmacological effect:  A patient suffering from ciliary arrhythmia with anamnesis of bronchial asthma should be prescribed an antiarrhythmic drug. What antiarrhythmic drug is <b>CONTRAINDICATED</b>	A. *Antiarrhythmic B. Hypnotic C. Antipyretic D. Antidepressant E. Nootropic  A.*Anaprilin (Propranolol) B. Ajmaline C. Verapamil D. Nifedipine	Lidocaine is an antiarrhythmic agent with local anesthetic activity.  Anaprilin is contraindicated in bronchial asthma because it is a non-selective beta receptor blocker and can cause bronchospasm.
3.	in this case?  A patient developed an atrioventricular block. What drug is indicated in this case?	A. *Atropine B. Clophelin (Clonidine) C. Metoprolol D. Anaprilin (Propranolol) E. Pirenzepine	M-cholinoblocker atropine improves conductivity, has a positive droidotropic effect

### UNIT 26-27: Antianginal preparations. Complex therapy of myocardial infarction

No	Test	Distractors (A-E)	Explanations
1.	The 55-year-old pa-	A. *Amlodipine	Amlodipine is an antianginal,
	tient had been diag-	B. Atenolol	calcium channel blocker.
	nosed with angina pec-	C. Guanethidine	

	<u> </u>		33
	toris. Calcium channel- blocking agent was prescribed for treat- ment. Name this agent.	D. Reserpine E. Labetalol	
2.	Which of the drugs listed below quickly arrests angina pectoris attack when taken sublingually?	A. *Nitroglycerine B.Digoxin C.Amiodarone D. Lisinopril E.Convallariae glycoside	Nitroglycerin - antianginal drug, nitrovasodilator. The main route
3.	What drug can quickly stop an angina pectoris attack, when taken sublingually?	A. *Nitroglycerine B. Corglycon C.Amiodarone D.Digoxin E.Lisinopril	of administration is sublingually (under the tongue)
4.	To quickly stop an attack of angina pectoris, a 55-year-old patient was prescribed an organic nitrate drug. What drug is it?	C. Octadine	Nitroglycerin belongs to organic nitrates.
5.	What drug group has the most pronounced vasodilatory action, and has little effect on cardiac conduction system and miocardial activity?		Derivatives of dihydropyridine (amlodipine) have the most pronounced vasodilating effect and have little effect on the cardiac conduction system and myocardial activity
6.	A patient with coronary artery disease was admitted to the cardiological department. For stenocardia prevention a drug from the group of beta-adrenoceptor blockers was administered. What drug is it?	A. *Metoprolol B.Atropine sulfate C.Morphine hydrochloride D. Oxytocin E.Furosemide	Metoprolol is a selective beta 1 adrenergic blocker, has antianginal activity
7.	A patient with coronary heart disease took the drug several times a day to prevent angina attacks. An	A *Organic nitrates B Alpha-blockers C Blockers of calcium channels D Adenosine preparations	Nitroglycerin and its prolonged forms are organic nitrates that dilate blood vessels and reduce the heart's need for oxygen. In case of an overdose, blueness of

			J <del>4</del>
	overdose of this drug caused intoxication. Objectively: bluish skin and mucous membranes, sharp drop in blood pressure, tachycardia, respiratory depression. The concentration of methemoglobin in the blood increased. To which group does this	E Myotropic antispasmodics	the skin and mucous membranes, a sharp drop in blood pressure, tachycardia, respiratory depression occurs.
8.	preparation belong: A patient with angina takes isosorbide mononitrate. In addition, he was prescribed a drug with an antiplatelet effect. What kind of drug is this?	A * Acetylsalicylic acid B Nitroglycerin C Propranolol D Nifedipine E Validol	Acetylsalicylic acid exhibits an anti-aggregant effect as a result of inhibiting the synthesis of prostaglandins, which are regulators of platelet aggregation and microcirculation.

UNIT 28: Diuretic drugs. Complex therapy of congestive heart failure. Uricosuric drugs

No	Test	Distractors (A-E)	Explanations
1.	purine nucleotide me- tabolism is disturbed. A doctor prescribed the patient allopurinol that	dehydrogenase C. Alcohol	
2.	urine revealed increased concentration of the uric acid. The patient was prescribed allopurinol. What is the biochemical mechanism of its action?	<ul> <li>B. Cyclooxigenase activation</li> <li>C. Desaminase inhibition</li> <li>D. Phosphorylase inhibition</li> <li>E. Nucleosidase inhibition</li> </ul>	Allopurinol is an anti-gout agent, a competitive inhibitor of xanthine oxidase (a terminal enzyme of catabolism of surine nucleotides)
3.	prescribed allopurinol - a competitive inhibitor of xanthine oxidase.	B. Glycoproteins	

tabolism of:		
4 A patient with hypertensive crisis should be administered a diuretic as a part of complex therapy. What drug should be given the patient?  5 The patient with acute poisoning needs forced	A. *Furosemide B.Diacarb C.Spironolactone D. Triamterene E. Amiloride  A. * Furosemide B.Caffeine and sodium	
diuresis. What drug can be used for this purpose?	benzoate C.Galantamine hydrobromide D. Enalapril E.Piracetam	
6 Diuretic should be prescribed to treat cerebral edema. What drug is to be administered?	A. *Furosemide B.Hydrochlorothiazide C.Caffeine and sodium benzoate D. Diacarb (Acetazolamide) E.Spironolactone	Furosemide is a loopback diuretic, with a strong effect. Used in the treatment of hypertension, forced dieresis, edemas.
7 Choose the potent fast- acting diuretic to induce forced diuresis:	A. * Furosemide B. Hydrochlorothiazide C. Spironolactone D. Triamterene E. Acetazolamide	
8 Forced diuresis needs to be induced in a patient with acute medication poisoning. What drug must be used for this purpose?	B.Diphenhydramine C.Bisacodil D.Strophantin	
A patient has toxic pulmonary edema. What drug must be used for emergency aid in this case?	A. *Mannitol B. Hydrochlorothiazid e C. Diacarb (Acetazolamide) D. Spironolactone E.Indapamide	Mannitol has a pronounced diuretic effect due to an increase in the osmotic pressure of plasma and filtration without subsequent tubular reabsorption, leads to water retention in the tubules and an increase in the volume of urine, increasing the osmolality of the plasma, causes the

			, , , , , , ,
			movement of fluid from the tissues into the vascular bed.
10	A patient with epilepsy	A.*Diacarb	Diacarb is a diuretic, an
	is prescribed a diuretic.	(Acetazolamide)	inhibitor of carbanhydrase.
	Name this drug:	B. Verospiron	Used to treat epilepsy,
	C	C. Furosemide	glaucoma
		D.Hypothiazid	
		(Hydrochlorothiazide)	
		E. Mannitol	
1	During furosemide ther-	A. *Potassium chloride	Furosemide is a strong
	apy of a patient with	B. Thiamine bromide	potassiumuretic (excreting
	chronic edematous syn-	C. Ascorutin (Ascorbic	potassium in the urine).
	drome, his plasma-	acid + Rutoside)	Therefore, to replenish
	cation concentration was	D. MagneB6	potassium, it is necessary
	disturbed. What drug	E. Aspirin	to introduce potassium
	should be used in this	1	chloride to the patient.
	case?		1
1.	In a patient with severe	A * Spironolactone	The diuretic effect of
	peripheral edema. The	B Manit	spironolactone is associated
	use of chlorothiazide,	C Clopamid	with its antagonism in
	ethacrynic acid and lasix	D Urea	relation to the hormone of
	did not give results. An	E Amiloride	the adrenal cortex -
	increase in the		aldosterone. It is used in the
	concentration of		presence of
	aldosterone was found		hyperaldosteronism, the
	in the blood. Specify the		deficiency syndrome caused
	drug to which it should		by chronic heart failure,
	be prescribed.		cirrhosis of the liver.
1.	Hypotensive agents	A * Kaliy saving	Potassium-sparing diuretics
	belonging to the group	B Thiazides	are aldosterone antagonists.
	of angiotensin-	C Petlovi	Angiotensin-converting
	converting enzyme	D Xanthines	enzyme inhibitors also
	inhibitors CANNOT be	E Osmotic	inhibit the renin-angiotensin
	prescribed		system.
	simultaneously with		
	which group of		
	diuretics?		

UNIT 29-30: Drug affecting on blood presure. Antihypertensive, hypertensive drugs

No	Test	Distractors (A-E)	Explanations
1.	A woman with	A. *Lisinopril	Lisinopril, captopril - an
	hypertension came to	B. Atenolol	antihypertensive agent, an
	a doctor complaining	C. Nifedipine	angiotensin converting enzyme

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	of dry cough that developed against the background of her therapy. What antihypertensive drug was she taking?		(ACE) inhibitor. One of the side effects is a dry cough.
2.	What side effect is characteristic of captopril?	<ul> <li>A. *Dry cough</li> <li>B.Increase of arterial pressure</li> <li>C. Hyperglycemia</li> <li>D. Cardiac rate disorder</li> <li>E. Hypokaliemia</li> </ul>	
3.	A patient with essential hypertension was prescribed lisinopril. What is the mechanism of action of this drug?	<ul> <li>A. *Inhibits angiotensin-converting enzyme</li> <li>B. Blocks β-adrenergic receptors</li> <li>C. Blocks muscarinic receptors</li> <li>D. Stimulates β-adrenergic receptors</li> <li>E. Blocks α-adrenergic receptors</li> </ul>	
4.	A patient with hypertension was prescribed a nonselective beta-adrenergic blocking agent. Name this drug:	<b>,</b>	Anaprilin - nonselective beta 1,2 adrenoblocker
5.	A patient with hypertension has been prescribed a drug that	B. Nifedipine C. Prazosin D. Captopril	Losartan - an antihypertensive agent, an angiotensin receptor blocker
6.	A patient was prescribed losartan for treatment of arterial hypertension. What mechanism of action does this drug have?	converting enzyme C. Inhibition of phos-	Losartan is classified as antihypertensive, angiotensin receptor blockers

7.	A patient with hypertensive crisis has been given an intravenous injection of clonidine. What mechanism underlies the antihypertensive effect of clonidine?	aptic central α2- adrenoceptors B. Blockade of peripheral α1-adrenoceptors C. Blockade of β- adrenoceptors D. Blockade of N - cholinergic receptors E. Direct myotropic effect on blood vessels	Clonidine is an antihypertensive agent, centrally acting, stimulates alpha 2 adrenoreceptors
8.	A woman with essential hypertension developed a dry hacking cough as a result of taking angiotensin-converting enzyme inhibitors. What drugs that inhibit the renin-angiotensin system should be prescribed in this case?	<ul> <li>A. *Angiotensin II receptor antagonists</li> <li>B. Sympatholytics</li> <li>C. Diuretics</li> <li>D. Calcium channel blockers</li> <li>E. Beta-blockers</li> </ul>	Antagonists of angiotensin II receptors do not lead to a dry cough, they do not have such a side effect.
9.	What drugs can be classified as angiotensin-converting enzyme (ACE) inhibitors?	<ul> <li>A. *Captopril, enalapril</li> <li>B. Dibazol (bendazol),</li> <li>papaverine</li> <li>C. Raunatin, reserpine</li> <li>D. Losartan, irbesartan</li> <li>E. Nifedipine, diltiazem</li> </ul>	Lisinopril, captopril - an antihypertensive agent, an angiotensin converting enzyme (ACE) inhibitor

UNIT 33: Hormonal preparations of polypeptide and aminoacid structure. Antihormonal drugs

No	Test	Distractors (A-E)	Explanations
1.	After an insulin injection	A. * Hypoglycemic coma	One of the major complications of
	a 45-year-old woman	B. Hyperosmolar coma	insulin therapy is hypoglycemia
	with a long history of	C. Hyperglycemic coma	(decrease in blood glucose levels)
	diabetes mellitus has	D. Hyperketonemic coma	
	developed weakness,	E. Uremic coma	
	paleness, palpitation,		
	anxiety, double vision,		
	numbness of lips and the		
	tip of tongue. Blood		
	glucose is at the rate of		
	2,5 mmol/l. What		

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2.	complication has developed in the patient?  A parturient woman diagnosed with uterine inertia has been delivered to the maternity ward. The doctor gave her an injection of the drug that activates the contraction of smooth muscles of the uterus. What hormone is a component of this drug?	A. *Oxytocin B. Gastrin C. Secretin D. Angiotensin E. Bradykinin	Oxytocin - a hormone of the
3.	What drug is administered in case of uterine inertia?	A. *Oxytocin B. No-spa C. Progesterone D. Vikasolum E. Fenoterol	posterior lobe of the pituitary gland that increases the contractility of the uterus, is used to stimulate labor and stop postpartum atonic bleeding
4.	Neurohypophysis hormone is used to stimulate labor. Specify this hormone:	<ul><li>A. *Oxytocin</li><li>B. Gastrin</li><li>C. Secretin</li><li>D. Angiotensin</li><li>E. Bradykinin</li></ul>	
5.	Specify the hormonal preparation for stimulation of childbirth:	A. * Oxytocin B. Insulin C. Glucagon D. Thyroxine E. Testosterone	
6.	Examination of a 70 year old patient revealed insulin-independent diabetes. What drug should be administered?	A. *Glibenclamid B. Insulin C. Mercazolilum D. Parathyroidin E. Cortisone	Glibenclamide is a synthetic glucose-lowering drug.
7.	What drug has a hypoglycemic effect because it stimulates pancreatic beta- cells?	<ul> <li>A. *Glibenclamide</li> <li>B. Retabolil (Nandrolone)</li> <li>C. Prednisolone</li> <li>D. Heparin</li> <li>E. Adrenaline</li></ul>	Glibenclamide increases the secretion of insulin by b-cells.
8.	A doctor needs to pre- scribe the patient a drug for replacement therapy after thyreoidectomy.	A. *L-thyroxine B. Insulin C. Prednisolone D. Parathyroidin	L-thyroxine is a thyroid hormone. It is used as a replacement therapy for hypothyroidism (insufficiency of

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	What drug would you	E. Thiamazole	thyroid gland function)
	recommend?		
9.	A patient with hyperpro-	A.*Iodide peroxidase	Merkazolil is an antithyroid drug.
	duction of thyroid hor-	B.Reductase	The mechanism of action is the
	mones has been pre-	C.Decarboxylase	inhibition of peroxidase activity -
	scribed Merkazolilum.	D.Aminotransferase	an enzyme involved in the
	This drug inhibits the fol-	E.Aromatase	iodination of thyroid hormones
	lowing enzyme partici-		of the thyroid gland, which leads
	pating in iodothyronine		to a violation of their synthesis.
	synthesis:		
10.	A diabetic patient	A * Insulin	Insulin reduces the concentration
	developed a	B Prednisolone	of glucose in the blood, increases
	hyperglycemic coma.	C Retinol acetate	the permeability of plasma
	Specify the drug for	D L-thyroxine	membranes for glucose, activates
	emergency care.	E Ergocalciferol	the enzymes of glycolysis,
			stimulates the conversion of
			glucose into glycogen, and
			enhances the synthesis of fats and
			proteins.

UNIT 34-35: Steroid hormonal preparations, their analogues and antagonists

N₂	Test	Distractors (A-E)	Explanations
1.	A patient who had been continuously treated with glucocorticoids was found to have a duodenal ulcer. What mechanism plays a major part in its development?	juice secretion and acidity B. Accelera tion of histamine inactivation in the stomach	Glucocorticoids (prednisolone) are adrenocortical hormones.
2.	Addison's (bronze) disease is treated with glucocorticoids. Their effect is provided by the potentiation of the following process:	A. *Gluconeogenesis B. Glycolysis C. Pentose phosphate cycle D. Glycogenolysis	Potentiate gluconeogenesis. Side effects - peptic ulcer of the stomach due to overproduction of hydrochloric acid, increased blood pressure
3.	The 33-year-old female patient, who undergoes long-term treatment due to her chronic polyarthritis, complains of increased arterial	<ul><li>B. Indometacin</li><li>C. Phenylbutazone</li><li>D. Fluocinolone acetonide</li></ul>	

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4	pressure, adipose tissue redistribution and menstrual irregularities. What drug does the patient take?	A . C1	
4.	A 48-year-old patient has been intravenously administered prednisolone solution to arrest severe attack of bronchial asthma. What group of hormonal agents does prednisolone belong to?	<ul><li>B. Gestagenic drugs</li><li>C. Estrogenic drugs</li><li>D. Mineralocorticoid</li></ul>	
5.	A man has been suffering from rheumatoid arthritis for 10 years. Due to its exacerbation he had been taking acetylsalicylic acid and prednisolone. The patient complains of stomachache, eructation, nausea, sensation of full epigastrium, and meteorism. On gastroscopy there was an erosion (0,5x0,5 cm) of gastric mucosa detected. What is the cause of gastric mucosa defect development?	aspirin and hormones B. Immune-mediated destruction of gastric mucosa C. Dysbacteriosis development	
6.	A patient with allergic dermatitis came to the hospital. What anti-inflammatory and anti-allergic drug must be prescribed in this case?	B. Ethamide	Prednisolone is a steroid hormone (glucocorticoid). It
7.	A 48-year-old patient has been intravenously administered prednisolone solution to arrest severe attack of bronchial asthma. What group of hormonal agents does prednisolone belong to?	B. Gestagenic drugs C. Estrogenic drugs	has immunosuppressive activity (can provoke the development of oropharyngeal candidiasis), anti-inflammatory, anti-allergic effect.
8.	What is the most common side-effect of inhaled cor-	A. *Oropharyngeal candidiasis	

ticosteroids?	B. Increased body mass	
	C. Subcapsular cataract	
	D. Osteoporosis	
	E. Arterial hypertension	

**UNIT 36: water-soluble vitamins** 

Nº	Test	Distractors (A-E)	Explanations
1.	A patient suffers from hyperchromic B12-deficiency anemia. What vitamin preparation should be prescribed in this case?	A. *Cyanocobalamin B. Riboflavin C. Vicasol (Menadione) D. Thiamine chloride E. Retinol acetate	Cyanocobalamin (vitamin B12) is a water-soluble vitamin used to treat hyperchromic anemia
2.	A patient complains about gingival haemorrhage, petechial haemorrhages. What vitamin preparation should be recommended?		Ascorutin is a vitamin preparation that contains ascorbic acid (vitamin C)
3.	Diet of a human must contain vitamins. What vitamin is usually prescribed for treatment and prevention of pellagra?	<ul><li>B. Vitamin C</li><li>C. Vitamin A</li><li>D. Vitamin B<sub>1</sub></li></ul>	Nicotinic acid (vitamin PP) is used to treat pelagra
4.	Water-soluble vitamins take coenzyme form in an organism. Thiamine diphosphate is the coenzyme of the following vitamin:	C.C	Thiamine diphosphate is a coenzyme of vitamin B1 (thiamine)
5.		A. *C B. K C. D D. A E. E	Ascorbic acid stimulates collagen synthesis and is involved in the regulation of capillary permeability.

			4
	hemorrhages. What vitamin does		
	it contain?		
6.	A patient suffers from diarrhea, dermatitis, and dementia. What vitamin is likely to be deficient in this patient, causing the patient's condition?	C. Tocopherol D. Vitamin D	The disease, which is characterized by the development of diarrhea, dementia, dermatitis (3 "D") is called pellagra. It develops as a result of insufficient intake of vitamin PP (nicotinic acid) with food
7.	Ascorutin vitamin preparation is used for treatment of bleeding gums and punctate hemorrhages. What vitamin does this preparation contain?	B. E C. A	Ascorutin is a combined medicine. It contains ascorbic acid (vitamin C).

UNIT 37: Lipid – soluble vitamins. Enzyme preparations and enzyme inhibitors. Different preparations influencing the methabolism

No	Test	Distractors (A-E)	Explanations
1.	A patient consulted an ophthalmologist about deterioration of twilight vision and xerophthalmus. What drug should the doctor prescribe?	<ul><li>B. Pyridoxine</li><li>C. Tocopherol</li><li>D. Ascorbic acid</li></ul>	
2.	ophthalmologist diagnosed a 21-year-old woman with visual impairment - hemera-	<ul><li>B. Ergocalciferol</li><li>C. Suprastin (Chloropyramine)</li><li>D. Cholecalciferol</li><li>E. Sustac forte (Nitroglyc-</li></ul>	Retinol (vitamin A) fat soluble vitamin drug is used in violation of twilight vision (hemeralopia).
3.	A 21-year-old patient during routine exami- nation by an ophthal-		

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mologist was diagnosed with a visual impairment - gemeralopia (''night blindness''). What drug should she be prescribed to reduce the signs of this condition?	D.Nitroglycerin E.Chloropyramine	
4. In case of hypovitaminosis of a certain vitamin, disturbed proliferation of epithelial and connective tissue can be observed. Patients with this type of hypovitaminosis usually present with impaired vision and spatial orientation. Name this drug:	<ul><li>B. Tocopherol</li><li>C. Pyridoxine</li><li>D. Riboflavin</li></ul>	One of the early manifestations of hypovitaminosis A is a violation of the processes of differentiation and maintenance of the normal state of epithelial cells, hemeralopia
5. Increased concentration of active oxygen forms is a mechanism of pathogenesis in a number of diseases. To prevent this process, antioxidants are prescribed. Select an antioxidant from the list below:	B. Glucose C. Calciferol D. Cobalamine	Tocopherol (vitamin E) is a
6. A woman, who had undergone mastectomy due to breast cancer, was prescribed a course of radiation therapy. What vitamin preparation has marked antiradiation effect due to its antioxidant activity?	C. Riboflavin	vitamin preparation with antioxidant activity.
7. To treat the patients with purulent wounds, a dressing with a certain immobilized enzyme is used. Name	<ul><li>B. Arginase</li><li>C. Catalase</li><li>D. Alkaline phosphatase</li></ul>	Trypsin is an enzyme of the class of hydrolases that breaks down peptides and proteins. Capable of selectively cleaving tissues that have undergone necrosis.

this enzyme:

 $\mbox{UNIT 38: }\mbox{Drugs affecting the erythropoiesis. Blood substitutes. Preparations of electrolytes}$ 

No	Test	Distractors (A-E)	Explanations
1.	In order to restore a	A. *0, 9%	Concentration isotonic solution of
	man's circulating	B. 0, 3%	NaCl is 0.9%
	blood volume he was	C. 0, 5%	
	transfused with blood	D. 1%	
	substitute - isotonic	E. 3%	
	solution NaCl. What is		
	the concentration of		
	this solution?		
2.	A patient suffers from	A. * Cyanocobalamin	Cyanocobalamin (Vitamin B12) is
	hyperchromic B12-	B. Riboflavin	a water-soluble vitamin that is
	deficiency anemia.	C. Vicasol (Menadione)	used to treat hyperchromic (B12-
	What vitamin	D. Thiamine chloride	folic acid deficiency) anemia.
	preparation should be	E. Retinol acetate	
	prescribed in this case?		

UNIT 39: Drugs affecting the leucopoiesis, blood coagulation

№	Test	Distractors (A-E)	Explanations
1.	A 45-year-old woman,	A. *Vicasol (Menadione)	
	who for two weeks has	B. Protamine sulfate	
	been taking neodicou-	C. Sodium citrate	
	marin (ethyl bis-	D. Heparin	
	coumacetate) due to	E. Aminocapronic acid	
	trombophlebitis, dur-		
	ing a regular examina-		
	tion was detected to		Vikasol (synthetic Vitamin K)
	have decreased blood		refers to drugs that increase blood
	content of prothrom-		coagulation, antagonist
	bin, in urine there is		neodikumarina. Indications for
	microhematuria. What		use: hemorrhagic syndrome asso-
	drug should be admin-		ciated with hypoprothrom-
	istered as a neodicou-		binemia, recurrence after wounds,
	marin antagonist?		injuries and surgical interventions
2.	A woman noticed that		injuries and surgical interventions
	a cut on her skin was		
	still bleeding even af-		
	ter minutes had passed.		
	What vitamin deficien-	E. Vitamin $B_{12}$	
	cy causes such condi-		
	tion?		

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3.	A patient with high risk of hemorrhages is recommended to take vicasol (menadione) by his physician. This drug is the structural analog of:	<ul><li>B. Vitamin A</li><li>C. Vitamin B5</li><li>D. Vitamin B12</li></ul>	
4.	A patient developed a hemorrhage caused by a long-term use of neodicumarin (ethyl biscoum acetate). What neodicumarin antagonist must be used in this case?	<ul><li>C. Etamsylate</li><li>D. Fibrinogen</li></ul>	Vikasol acts opposite to neodicumarin, increases blood coagulation due to increased synthesis in the liver of II, VII, IX and X factors of hemocoagulation and stabilization of convertin.
5.	Antivitamins are substances of various structure that limit utilization of vitamins in an organism and have an opposite to them action. Name antivitamin of vitamin K:	D. Aminopterin	Dicumarol - Vitamin K antivitamin
6.	Heparin is the directacting anti-coagulant that reduces blood coagulation and prevents thrombosis. Its action is based upon the following phenomenon:	colloids B. Syneresis	
7.	A patient with myocardial infarction has been administered intravenously a direct anticoagulant, namely:	<ul><li>B. Neodicumarinum</li><li>C. Vikasol</li><li>D. Thrombin</li><li>E. Calcium gluconate</li></ul>	Heparin - is a direct anticoagulant. It is used for the prevention and treatment of thromboembolic diseases
8.	A patient with acute myocardial infarction received anticoagulation therapy. What compound will have anticoagulation effect?	A. * Heparin B. Hyaluronic acid C. Chondroitin sulfate D. Dermatan sulfate E. Keratan sulfate	
9.	Coumarins, vitamin K antagonists, suppress the processes of blood	A. *Prothrombin B. Gamma globulin C. Albumin	Coumarins block the formation of prothrombin, proconvertin, and other coagulation factors in

coagulation. What protein synthesis is blocked by coumarins?		the liver (they have an anticoagulant effect).
10. Fibrinolytic drugs are able to dissolve already formed blood clots in the human body. Which pharmaceutical preparation has fibrinolytic activity?	<ul><li>B. Phenobarbital</li><li>C. Riboflavin</li><li>D. Menadione</li></ul>	Enzymes are able to dissolve blood clots in blood vessels.
11. A fibrinolysis inhibitor was used to stop postpartum bleeding. Name this drug.	B. Thrombin	Fibrinolytics activate fibrinolysis, dissolve intravascular thrombi, normalize blood supply and eliminate tissue hypoxia.

#### UNIT 40: Immunotropic agents and antiallergic drugs

№	Test	Distractors (A-E)	Explanations
2.	Consult a patient on which antihistamine drug DOES NOT have sedative and hypnotic effect:  The student asks the pharmacist to recommend him the drug to relieve allergic rhinitis symptoms he suffers from when lime tree is in bloom. What drug can be recommended in this case?	A. *Loradatine B. Diphenhydramine C. Promethazine D. Suprastinum E. Tavegil (Clemastine) A. *Loratadine B.Epinephrine C.Propranolol D. Ambroxol	Loratadine is an antiallergic drug that blocks the histamine receptor H1, the second generation. It does not have sedative and hypnotic effects. Therefore, it can be used in the daytime, for drivers, etc.
3.	An engine driver complains of his seasonal allergy symptoms. What nonsedating drug should be prescribed in this case?	C. Fenofibrate D. Analgine (Metamizole)	
4.	A patient with allergic	A. *H1-antagonists	

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loratadine. This drug	C.Membrane stabilizers		
belongs to the	D.H2-antagonists		
following group of	E.Leukotriene receptor		
antiallergic agents:	antagonists		
An oncological patient	A. *Pyrimidine	Fluorouracil is an antimetabolite.	
was prescribed	nucleotides synthesis	As a pyrimidine antagonist, it	
fluorouracil that is a	B. Carbohydrate	disrupts DNA synthesis and thus	
competitive inhibitor	disintegration	inhibits the division of tumor	
of thymidine synthase.	C. Purine nucleotides	cells.	
It inhibits the process	synthesis		
of:	D. Purine nucleotides		
	disintegration		
	E. Lipids synthesis		
Allergic urticaria was	A. *Loratidine	Loratadine blocks histamine	
found in the sick driver.	B. Adrenaline	receptors and reduces allergy	
What drug is indicated?	C. Cromolyn sodium	symptoms.	
	D. Euphilin	• •	
	E. Diphenhydramine		
The man developed	A. *Adrenaline	Adrenaline stimulates	
anaphylactic shock after	hydrochloride	adrenoceptors and reduces the	
vaccination. Name the	B. Anaprilin	manifestations of an allergic	
drug of choice.	C. Ditylin	reaction.	
	•		
	E. Salbutamol		
	loratadine. This drug belongs to the following group of antiallergic agents:  An oncological patient was prescribed fluorouracil that is a competitive inhibitor of thymidine synthase. It inhibits the process of:  Allergic urticaria was found in the sick driver. What drug is indicated?  The man developed anaphylactic shock after vaccination. Name the	belongs to the following group of antiallergic agents:  An oncological patient was prescribed fluorouracil that is a competitive inhibitor of thymidine synthase. It inhibits the process of:  Allergic urticaria was found in the sick driver. What drug is indicated?  The man developed anaphylactic shock after vaccination. Name the drug of choice.  D. H2-antagonists  E.Leukotriene receptor antagonists  A. *Pyrimidine nucleotides synthesis  D. Purine nucleotides synthesis  A. *Loratidine B. Adrenaline C. Cromolyn sodium D. Euphilin E. Diphenhydramine  A. *Adrenaline hydrochloride B. Anaprilin C. Ditylin D. Naphthysin	

### **UNIT 41: Disinfectants and antiseptics**

N₂	Test	Distractors (A-E)	Explanations
1.	Select the halogenated	A. *Iodine alcoholic	Alcohol iodine solution is a
	antiseptic that would	solution	halogen-containing antiseptic
	be preferable for a	B. Brilliant green	
	child to pack in the	C. Copper sulfate	
	first aid kit, when	D. Methylene blue	
	going to a summer	E. Formaldehyde solution	
	camp:	•	
2.	A patient with	A. *Oxidants	Potassium permanganate refers to
	gingivitis was	B. Dyes	antiseptics of the oxidizing group
	prescribed oral cavity	C. Detergents	
	irrigation with 0,02%	D. Alcohols	
	potassium	E. Nitrofurans	
	permanganate solution.		
	What group of		
	antiseptics does this		
	drug belong to?		
3.	Colloidal protection is	A. *Protargol	Protargol is a colloidal silver
	used while		drug protected by proteins

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	manufacturing drug preparations. Name the preparation of colloidal silver protected by proteins:	<ul><li>B. Festal</li><li>C. Enzymtal</li><li>D. Argentum</li><li>E. Collagen</li></ul>	
4.	Before a surgical operation, a surgeon treated his hands with an alcohol-containing solution. Which group of drugs does this solution relate to?	D. Detergents E. Surface-active	Alcohol solutions belong to the group of antiseptics
5.	Having completed work in a laboratory, a student must tidy up the workspace, perform disinfection of the workbench and tools. What chemicals should be used for disinfection?	B. Hydrochloric acid C. Formalin	Chloramine is a disinfectant
6.	A patient with a small cut on the palm came to the dispensing chemist. What antiseptic would be advisable in this case?	B. Doxycycline hydrochloride C. Ketoconazole	Hydrogen peroxide is an antiseptic, belongs to the group of oxidizing agents. It is the only representative of the group of the proposed answers.
7.	What is the main mechanism of action underlying the bactericidal effect of benzylpenicillin on coccus flora?	A * Violation of the synthesis of the microbial cell wall B Suppression of protein synthesis C Damage to the permeability of the cytoplasmic membrane D Activation of the immune system of the macroorganism E Increase in phagocytic activity of leukocytes	Benzylpenicillin has a bactericidal effect on sensitive microorganisms by inhibiting the biosynthesis of the cell wall
8.	You work in a pharmacy, which is located on the territory of a skin and venereological	A* Benzylpenicillin sodi- um salt B Polymyxin M sulfate	Benzylpenicillin sodium salt has a bacteriostatic effect and is the drug of choice in the treatment of syphilis.

	dispensary. (	Consult an	ride	
i	internist,	which	E Streptomycin sulfate	
8	antibiotic is t	he drug of		
	choice fo	or the		
t	treatment of s	syphilis?		

# **UNIT 42-44: Chemotherapeutic agents. Antibiotics**

№	Test	Distractors (A-E)	Explanations
1.	A patient was prescribed	A. *Actinomycin	Actinomycin is an antibiotic
	with an antitumoral	B. Tetracycline	with antitumor activity
	antibiotic that inhibits	C.Nystatin	
	synthesis of nucleic	D.Lincomycin	
	acids in the cells. What	E. Erythromycin	
	of the following		
	antibiotics has such a		
	mechanism of action?		
2.	Antibiotics are classified	A. *Gramicidin	Gramicidin antibiotic of bacterial
	by sources of	B. Penicillin	origin
	production. Name an	<b>.</b>	
	antibiotic of bacterial	D. Lysozyme	
	origin:	E. Gentamycin	
3.	Antibiotics can be	A.*Inhibitors of cell wall	
	classified according to	synthesis	that inhibit cell membrane
	various principles.	B. Inhibitors of protein	synthesis
	According to the action	synthesis	
	mechanism	C. Inhibitors of	
	cephalosporins relate to	respiratory processes	
	the following group:	D. Inhibitors of oxidative	
		phosphorilation	
		E. Inhibitors of	
		cytoplasmic membrane	
		synthesis	
4.	Bacteria eventually		
	become resistant to	1	
	_	B.Permeability of the cell	
	Resistance of gram-	wall	
	-		Bacteria produce resistance to
	penicillin antibiotics is	D. Active transport of	
	caused by:	antibiotic	of penicillinase. Penicillin can
	1	E. Protein synthesis	cause anaphylactic shock
5.	1 minute after the	A. *Anaphylactic shock	
	patient had been	B. Traumatic shock	
	administered penicillin	C. Cardiogenic shock	
	the patient's arterial	D. Septic shock	

	1		J1
pressure dropped, pul- thready, cold and clonic c began. Na condition.	se became I sweating convulsions	E. Burn shock	
6. In the c bronchitis pharmacother patient has dyspeptic photodermatit hepatic fail drug can c disorders?	apy, the developed disorders, is and ure. What	A. *Doxycycline B. Paracetamol C. Ascorbic acid D. Acetylcysteine E. Codeine phosphate	Side effects of doxycycline: dyspeptic disorders, photodermatitis and liver failure
7. What drug is treatment repetic ulcer eliminate H pylori?	gimen for B disease to C elicobacter D	A. *Clarithromycin B. Tienam C. Biseptol D. Chloridine E. Sulfalene	Clarithromycin - an antibiotic with anti-helicobacter activity
8. A pharmaceut facture product that is an animotic. Point out among those low:	ces a drug, and antibited this drug	A. *Lysozyme B. Gramicidin C. Novobiocin D. Phaseolin E. Chloramphenicol	Lysozyme - an antibiotic of animal origin
9. A pharmaceu prise offers von fantimicrob Select the brum an agent:	wide range B bial agents. C road spec- D	A. *Tetracycline B. Rimantadine C. Nystatin D. Griseofulvin E. Phthalazolum	Tetracyclines - broad-spectrum antibiotics
10. Antibiotics de various speci nomycetes a used in medic Point out the among those low:	es of acti- (series widely circular practice. Hese drugs in the control of the co	A.*Aminoglycosides streptomycin, monomy- in) B.Penicillin, cephalospor- n, griseofulvin C. Polymyxin, bacitracin D. Chloreline, arenarinum E. Lysozyme, erytrinum	Aminoglycosides - antibiotics derived from actinomycetes
	_	A. *Broad spectrum anti- acterial agents	Chemotherapeutic agent, which is active against Gr + and Gr -

effect against strepto- cocci, staphylococci, bacilli, and clostridia. According to its action spectrum this drug be- longs to the following group:	B.Narrow spectrum anti- bacterial agents C.Broad spectrum anti- fungal agents D.Antiviral agents E.Antituberculous agents	microorganisms, is classified as a broad-spectrum drug
12. What is the main mechanism of benzylpenicillin bactericidal action on the coccal flora?	A. *Disturbed synthesis of microbial cell wall B. Inhibition of protein synthesis C.Disturbed cytoplasmic membrane permeability D.Activation of macroorganism immune system E. Increased phagocytic activity of leukocytes	Benzylpenicillin is an antibiotic of the biosynthetic penicillin group. It has a bactericidal effect due to enzymatic inhibition of the synthesis of the cell wall of microorganisms.
13. You work in the pharmacy located at the premises of the dermatovenerologic clinic.  Consult an intern what antibiotic is a drug of choice for treatment of syphilis:	A. *Benzylpenicillin sodium salt B. Streptomycin sulfate C. Polymyxin M sulfate D. Lincomycin hydrochloride	Benzylpenicillin is active against Treponema pallidum (causative agent of syphilis)
14. Long-term use of antibiotics can result in development of dysbiosis. What method can detect intestinal dysbiosis?		Dysbacteriosis is diagnosed with the help of bacterial examination of feces
15. What groups of antibiotics can be classified as beta-lactam antibiotics?	A. *Penicillins, cephalosporins, monobactams, carbapenems B. Penicillins, cephalosporins, tetracyclines C. Penicillins, cephalosporins, macrolides, carbapenems D. Cephalosporins, macrolides E. Cephalosporins, monobactams, aminoglycosides  E. Cephalosporins, monobactams, aminoglycosides	Beta-lactam antibiotics (β-lactam antibiotics, β-lactams) are a group of antibiotics united by the presence of a β-lactam ring in the structure. 1 — penicillins, 2 — cephalosporins. Beta-lactams include subgroups of penicillins, cephalosporins, carbapenems and monobactams.

UNIT 45-46: Sulfonamides. Antimicrobial preparation of a different chemical structure.

No	Test	Distractors (A-E)	Explanations
1.	Sulfonamides are widely used as bacteriostatic agents. The mechanism of antimicrobial action of sulfonamides is based on their structural similarity to:	A. *Para-aminobenzoic acid B. Glutamic acid	
2.	Sulfanilamides are widely used as bacteriostatic agents. The mechanism of antimicrobial action of Para-aminobenzoic acid	A.*Glutamic acid B.Folic acid C. Nucleic acid D. Antibiotics	The mechanism of action of sulfonamides is based on
3.	Sulfanilamides inhibit the growth and development of bacteria. The mechanism of their action is based on the impairment of the following acid synthesis:	A. *Folic B. Lipoic C. Nicotinic D. Pantothenic E. Pangamic	structural similarity in para- aminobenzoic acid, violate foliec acid synthesis. Possess bacteristatic activity. Side effects: the development of hemolytic anemia in patients with a genetic defect of glucose-
4.	Sulfanilamides are applied as antimicrobal agents in clinical practice. Sulfanilamide treatment, however, can result in hemolytic anemia development in patients that suffer from genetic defect of the following enzyme of pentose phosphate metabolism in erythrocytes:	C. Transketolase D. Transaldolase	6-phosphate dehydrogenase

UNIT 47-48: Antituberculosis, antispirochetal, and antiprotozoal drugs

№	Test	Distractors (A-E)	Explanations
1.	What antiprotozoal drug		
	can be recommended to	B. Primaquine	Metronidazole is an
	a woman with	C. Chloridine	antiprotozoal drug. It is used
	trichomoniasis?	D.Solusurminum(Sodiumsti	to treat Trichomonas, amebic
		-bogluconate)	dysentery, possesses anti-
		E. Chiniofon	helicobacter activity.
2.	What drug is more ad-	A. *Metronidazole	

3.	visable for the patient with amebic dysentery?  To prevent wound infec-	B. Pyrantel C. Levamisole D. Bicillin-5 E. Benzylpenicillin sodium salt (Penicillin G sodium salt) A.*Metronidazole	
	tion associated with surgical procedures a patient was given a synthetic antiprotozoan drug demonstrating high activity against <i>Helicobacter pylori</i> . Specify this drug:	B. Doxycycline hydrochloride C. Chingamin D. Acyclovir	
4.	Patients ill with tuberculosis take a drug that is an antivitamin of nicotinic acid. Name this substance:	B.Sulfanilamide	
5.	What synthetic drug of the hydrazide group is typically prescribed for pulmonary tuberculosis?	B.Rifampicin	
6.	The patient has been prescribed drug with antibacterial effect on tuberculosis mycobacteria. What drug is used in tuberculosis treatment and is pyridoxine antivitamin?	B. Heparin C. Trimethoprim/sulfameth oxazole (Cotrimoxazole) D. Streptomycin	Isoniazid is a first-line anti- TB drug. Continuous intake of the drug leads to a deficiency of pyridoxine (vitamin B6)
7.	A 30 year-old patient suffering from pulmonary tuberculosis, has been prescribed isoniazid. Continuous taking of this drug may lead to the deficiency of the following vitamin:	B.Tocopherol C.Cobalamin D.Ergocalciferol	
8.	A 40-year-old female	A. *Antibiotic B. Donor immunoglobulin	Antibiotics are used to treat brucellosis.

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	<u> </u>	C. Inactivated therapeutic	
	brucellosis and		
	administered causal	D. Polyvalent bacteriophage	
	chemotherapy. What	E. Antitoxic serum	
	group of drugs will be		
	used for this purpose?		
9.	A patient with	A. *Ftivazide	Ftivazid - anti-tuberculosis
	tuberculosis has been	B. Furacilinum	drug
	prescribed some anti-TB		
	preparations. Which of		
		E. Phtalazolum	
		E. Filtalazolulli	
	chemotherapeutic drugs has an effect on the		
1.0	tuberculosis pathogen?		~
10	What drug is advisable	$\mathcal{E}$	Chingamin - antiprotozoan
	for individual malaria	_ ·	drug, used to prevent malaria
	prophylaxis?	C. Ampicillin	
		D. Gentamicin	
		E. Trime-	
		thoprim/sulfamethoxazole	
		(Co-trimoxazole)	
11	The 32-year-old patient		Rifampicin - an anti-
	has been taking an-	B. Isoniazid	tuberculosis drug
	tituberculosis drugs.		
	Later he noticed that his	,	
	urine had become redor-	E. Streptomycin sulphate	
	ange in color. What drug	2. Suchomyem surpliate	
	phenomenon?		
10	<b>-</b>	A *Isopiazid	Isoniarid is an anti TD dim-
12	$\boldsymbol{\mathcal{C}}$		Isoniazid is an anti-TB drug.
	vitamin PP (nicotinic	_ <del>_</del>	Isonicotinic acid hydrazide
	acid) is used as an an-	C. Riboflavin	
	tituberculous medicine.	D. Tetracycline	
	Name this medicine?	E. Aspirin	

#### UNIT 49-50: Anthelmintic, antifungal, and antiviral drugs

№	Test	Distractors (A-E)	Explanations
1.	What is the mechanism of	A. *Inhibition of nu-	The mechanism of action of
	action of the antiviral drug	cleic acid synthesis	acyclovir is based on inhibition of
	acyclovir?	B. Blockade of cellu-	DNA synthesis. The thymidine
		lar wall synthesis	kinase enzyme, which is induced
		C. Antagonism with	by the virus, facilitates the
		para-aminobenzoic	penetration of acyclovir into the
		acid	cell and its intracellular
		D. Inhibition of	phosphorylation.

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		protein synthesis  E. Increase of cellular membrane permeability	
2.	A patient developed herpetic rashes. What drug should be prescribed in this case?		
3.	It is known that infectious type B hepatitis is a systemic disease caused by the type B hepatitis virus and characterized by a predominant liver affection. Choose from the below given list the drugs for the etiotropic therapy of this infection:	A. *Acyclovir B.Penicillin C.Tetracycline D.Sulfanilamides E. Fluoroquinolones	Acyclovir - antiviral drug, active against the herpes virus, viral hepatitis
4.	Select the drug with anti- herpesvirus activity that can be used for prevention and treatment of herpetic lesions on skin and muco- sa:	A. *Aciclovir B. Rifampicin C. Ranitidine D. Nystatin E. Atropine	
5.	A female patient has been treated with antibiotics for a long time. Thereafter examination of smears form vaginal secretion revealed oval cells with well-defined nucleus, some cells gemmate. What preparations can help to confirm the diagnosis "candidosis"?	B. Antibacterial	Antifungal agents are used to treat condose (fungal infection)
6.	Epidemic of influenza was announced in a town. Which drug can be recommended for the nonspecific prophylaxis of influenza?	A. *Leukocytic interferon B. Anti-influenza vaccine C. Antibiotics D. Anti-influenza immunoglobulin E. Anti-influenza	Interferons - antiviral drug. Blocks virus protein synthesis and used to prevent influenza

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7.         8.	A drugstore received a supply of a drug that is widely used for treatment of many virus diseases since it is not virus specific. What drug is it?  A local general practitioner recommends taking interferon for influenza prevention. What is the mechanism of action of this drug?	B. Remantadin C. Metisazone D. Immunoglobulin E. Vaccine  A.*Blocks virus protein synthesis B. Blocks virus stripping C. Inhibits virion exit from cells	
		<ul><li>D. Prevents adsorption of virus in cell receptors</li><li>E. Disrupts the process of virus assembly</li></ul>	
9.	The defensive mechanisms against some infectious diseases can be greatly reinforced with interferon. Interferon preparations will be the most advisable in cases of the following type of infections:	A.* Viral B.Helminthic C.Protozoal D.Microbioses E. Fungal	
10.	type of infections:  Mother of a 10-year-old child came to the pharmacy to obtain a drug for prevention of upper respiratory tract infections. What drug would be recommended by the dispensing chemist?	B. Benzoteph C. Carvedilol D. Tetracycline	
11.	A patient fell ill the day before, the disease is acute with a predominance of general toxic symptoms. With an account for the epidemic situation in the city, the doctor diagnosed the patient with influenza A. What emergency etiotropic treatment must be administered to this patient?	B.Oxolinic ointment C.Gentamicin	Remantadin - antiviral drug used to treat viral diseases such as influenza

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12.	Pharmacy has received viricides. Choose the viri-		
		B.Metisazone	
	cide used for influenza	C.Levamisole	
	treatment from the list giv-	D.Azidothimidine	
	en below.	E. Acyclovir	
13.	A pharmacy has received a	A. *Rimantadine	
	batch of drugs for treat-	B. Methisazone	
	ment of upper respiratory	C. Levamisole	
	tract infection. What drug	D. Idoxuridine	
	is used to treat influenza?	E. Doxycycline	
14.	A female patient bitten by	A. *Immunization with	Rabies vaccine used to prevent
	a stray dog came to a sur-	the antirabic vaccine	rabies
	gery. Wide lacerated	B. Combined antibiotic	
	wounds were localized on	therapy	
	the patient's face. What	C. Hospitalization,	
	treatment and prevention	injection of diphtheria-	
	aid should be rendered in	pertussis-tetanus	
	order to prevent rabies?	vaccine	
	order to prevent ruores.	D. Hospitalization,	
		medical surveillance	
		E. Urgent injection of	
15.	Aurococcus culture was	globulin	Nystatin is not an antibiotic. This
15.		A. *Nystatin	- I
	obtained from the nasal	B. Ampicillin	is an antifungal medication.
	cavity of a child suffering	C. Tetracycline	
	from chronic tonsillitis.	D. Levomycetin	
	Causative agent's sensi-	_	
	tivity towards a number of	E. Erythromycin	
	antibiotics was tested to		
	choose the optimal drug.		
	What drug WAS NOT		
	included in antibiotic		
	susceptibility testing?		
16.	A child that attends a day	A. *Measles vaccine	The most effective way to
	care center fell ill with	The state of the s	prevent measles is vaccination.
	measles. What is used to		The measles vaccine is safe and
	prevent this disease in the	C. Antibiotics	effective.
	contact persons?	D. Sulfanilamides	
	Contact persons.	E. Immunostimulants	
		L. Illimanosumualus	

UNIT 51-52: Drugs affecting on the gastrointestinal system

<b>№</b> Test Distractors (A-E) Explanations	
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2.	A pregnant woman was diagnosed with vaginal dysbacteriosis. What drug should be prescribed in this case?  It is known that a peroral drug contains over 1 billion of living microbal cells per 1 millilitre. Nonetheless the drug was accepted as applicable. What drug group does it relate to?  A 3,5-year-old child has been diagnosed with dysbacteriosis in the form of critical reduction of gram positive.	B. Antibiotic C. Bacteriophage D. Interferon E. Polyvitamins A.*Eubiotics B. Antibiotics C. Vitamins D. Sulfanilamides E. Immunostimulants  A.*Bifidumbacterin B.Colibacterin C.Coli-Proteus bacteriophage	Probiotics (Bifidumbacterin) are drugs that normalize the normal microflora of mucous membranes.
	gram-positive anaerobic bacteria and increased number of staphylococci and yeast fungi. What preparation should be used for the correction of dysbacteriosis?		
4.	A 45-year-old patient with a gastric ulcer needs the reduction of H Cl secretion. Which drug provides this effect due to inhibition of the proton pump?	B. Atropine C. Quamatel D. Benzohexonium	
5.	A patient with gastric ulcer has been administered omeprazole. What is the mechanism of its action?	+K+-ATPase B. Blockade of	Omeprazole is a proton pump inhibitor, thereby reducing the secretion of gastric juice
6.	A 37-year-old patient with peptic gastric ulcer disease was prescribed a medicine as a	A. *Omeprazole B. Famotidine C. Gastrozepin (Pirenzepine)	

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	part of his multimodality therapy. The medicine lowers acidity of gastric juice, inhibits +, +- adenosine triphosphatase, decreases the volume of gastric secretion and pepsinogen producti-on. It is a prodrug. Name this medicine:	E. Phosphalugel (Aluminium phosphate)	
7.	A 28-year-old man with peptic ulcer of the stomach was prescribed a drug that inhibits gastric juice secretion. Specify this drug:	B. Ethacrynic acid	
8.	Fatty degeneration of liver is prevented by lipotropic substances. Which of the following substances relates to them?	B. Cholesterol C. Bilirubin	Methionine is a lipotropic substance that helps with fatty liver
9.	A doctor prescribed a herbal drug with flavonoid complex of Silybum marianum to a patient suffering from chronic hepatitis. This hepatic protector stimulates protein synthesis, normalizes phospholipid metabolism, acts as an antioxidant. Name this drug:	B.Essentiale C.Galstena	Silymarin refers to the hepatoprotectors of plant origin.
10.	Contrykal is used to prevent pancreatic autolysis. This drug is the inhibitor of the following enzymes:	A. *Proteases B. Lipases C. Glycosidases D. Nucleases E. Synthetases	Contrycal inhibits pancreatic enzymes.
11.	To stop diarrhea the doctor prescri-bed a drug that affects opiate receptors of the intestine and decreases its peri-stalsis. Name this drug:	D. Voltaren	Loperamide - a drug with an opiate mechanism of action, normalizes intestinal motility. Use as an antidiarrheal medicine

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12.	A patient came to the pharmacy to obtain an antidiarrheal agent. What drug would be recommended by the dispensing chemist?	<ul><li>B. Dicaine (Tetracaine)</li><li>C. Ranitidine</li><li>D. Picolax (Sodium)</li></ul>	
13.	To treat peptic ulcer disease of the stomach a patient has been prescribed famotidine. Specify the mechanism of action of this drug:	nels of cell membranes	Famotidine blocks the H2
14.	A patient, who was prescribed famotidine to treat peptic ulcer disease, came to the pharmacy. What is this drug's mechanism of action?	B. H1-histamine receptor blockade	histamine receptors of the gastrointestinal tract
15.	Select the hepatoprotective drugs from the list below:	A. *Essentiale (Phospholipides), Thiotriasoline B. No-Spa (drotaverine), papaverine hydrochloride C. Allochol, Cholenzym D. Festal, Panzinorm (Pancreatin) E. Oxaphenamide (Osalmid), Nicodin	Essentiale and thiotriazolin are the only hepatoprotective drugs from the proposed answers
16.	A patient came to the pharmacy to obtain a drug that contains pancreatic enzymes and can be taked for chronic pancreatitis. What drug would be recommended by the dispensing chemist?	A. * Pancreatine B. Triamcinolone C. Gordox (Aprotinin) D. Pirenzepine E. Omeprazole	Pancreatin is an enzyme preparation that contains pancreatic enzymes

UNIT 53: Drugs affecting on the respiratory system

No	Test	Distractors (A-E)	Explanations
1.	To relieve dry cough a patient with bronchitis was prescribed a drug that is an alkaloid of yellow horned-poppy. Name this drug:	hydrochloride B.Codeine phosphate	Glaucine hydrochloride alkaloid yellow horned poppy
2.	What non-narcotic centrally-acting antitussive drug can be used for dry cough?	A.*Glaucine B. Codeine C. Acetylcysteine D. Ambroxol E. Mucaltinum	
3.	A pharmacy dispenses glaucine hydrochloride to a patient with chronic bronchitis. The patient must be warned about the following typical side effect of the drug:	A. * Blood pressure fall B. Excitation of the central nervous system C. Arrhythmia D. Rise of intraocular pressure E. Allergic skin rash	
4.	Pharmacy sells glaucine hydrochloride to the patient with chronic bronchitis. What common side effect should he be warned about?	A. *Decrease of arterial pressure B. Excitation of central nervous system C. Disruption of cardiac rate D. Increase of intraocular pressure E. Allergic skin rashes	Glaucine - non-narcotic antitussive drug. It does not have a depressing effect on breathing, does not cause dependence. Side effect - lowering blood pressure
5.	A patient with tracheitis was prescribed a centrally acting antitussive drug that does not depress respiration, causes no addict, and lowers blood pressure. Name this drug:	A.*Glaucine hydrochloride B. Codeine phosphate C. Prenoxdiazine D. Acetylcysteine	
6.	A 34-year-old woman with bronchitis presents with persistent dry non-productive	<ul><li>A. *Glaucine</li><li>B. Mucaltin</li><li>C. Ambroxol</li><li>D. Bromhexine</li></ul>	

	cough. Her physician	E.Acetylcysteine	
	prescribed her a cen-		
	trally acting antitussive		
	drug. Name this drug.		
7.	What drug can be used	A. *Salbulamol	Salbutamol reduces the tone of
	to stop a bron-	B. Amoxicillin	bronchial smooth muscles, the
	chospasm?	C. Aspirin_	bronchi expand.
		D. Atenolol	
		E. Omnoponum	

# UNIT 59-60: Pharmacotoxycodynamics.

No	Test	Distractors (A-E)	Explanations
1.	A patient with signs of mercury poisoning has been delivered into an admission room. What antidote should be prescribed in this case?	A. *Unithiol B.Atropine sulfate C.Proserin D. Naloxone E.Calcium chloride	Unithiol - an antidote for heavy metal poisoning
2.	Treatment with sodium bromide resulted in development of bromism in the patient: rhinitis, cough, conjunctivitis, and skin rashes. What should the patient be prescribed to treat this condition?	B. Potassium chloride C. Sodium iodide D. Sodium sulfate	Sodium chloride is introduced in case of bromine poisoning
3.	A patient with myo- cardial infarction was receiving heparin as a part of the complex therapy. With time the patient developed he- maturia. What drug should be given as an antidote in this case?	B. Neodicumarin C. Aminocaproic acid	Protamine sulfate is a specific heparin antagonist