#### MINISTRY OF HEALTH OF UKRAINIAN HEALTH ODESNI NATIONAL MEDICAL UNIVERSITY

Department of 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"

# 2007-2022

Authors:

Y.Rozkovskiy, K.Shemonaeva, P.Antonenko, V.Kresyun, K.Ostapchuk, K.Lobashova, K. Antonenko, N.Djavad.

Approved on meeting of the subject cycle methodical commission f pharmacology protocol № 3 from 16.09. 2022.

Correct answer:A\*

ODESSA -2022

#### UNIT 6-7: Pharmacology and its aims. General pharmacology. Pharmacokinetics

N⁰	Test	Distractors (A-E)	Explanations
1.	Decreased absorption 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 antac- ids leads to a violation of the absorption of tetarcycline, which is called pharmacoki- netic incompatibility
2.	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>	called cumulation
3.	Which of these options is necessary condition for rapid penetration of the drug through the hema- toencephalic barrier?	<ul> <li>A. *High lipophilicity</li> <li>B. High hydrophilicity</li> <li>C. Sustained binds with proteins</li> <li>D. Ionized state</li> <li>E. The long half-life period</li> </ul>	Only lipophilic drugs can penetrate the blood-brain barrier
4.	What is represented by such a pharmacokinetic value of a drug as its bio- logical half-life (T1/2)?	<ul> <li>A. *Time period in which plasma drug concentration decreases by 50%</li> <li>B. Blood plasma volume cleared of drug within a time unit</li> <li>C. Period of total body clearance</li> <li>D. Renal clearance rate</li> <li>E. Correlation between the drug clearance rate and plasma drug concentration</li> </ul>	The half-life of a substance is a pharmaco- kinetic parameter that determines the time it takes for a substance to lose half its pharmacological, physiological or radioac- tive effect
5.	Paracetamol has antipyret- ic and analgesic effect. In the human body it is neu- tralized in the following organ:	A. * Liver B. Spleen C. Intestine D. Lungs E. Heart	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 human body?	A. Cumulation B. Synergism C. Addiction D. Allergy E. Antagonism	Some medicines are slowly removed from the body and remain in the tissues.

## UNIT 8-9: General pharmacology. Pharmacodynamics. Pharmacotoxicodynamics

N⁰	Test	Distractors (A-E)	Explanations
1.	A woman, who during the	A. *Teratogenic	Teratogenic effect is the effect of the drug
	5th-10th weeks of her	B. Mutagenic	on the development of the fetus, leading
	pregnancy had been	C. Embryotoxic	to malformations
	taking sodium valproate	D. Fetotoxic	
	for treatment of epilepsy,	E. Sensitizing	
	gave birth to a child with	_	

2.	pathology of the vertebral column (split spine). What side effect of the drug caused such malformation? A patient with chronic constipation had been prescribed bisacodyl. Af- ter 3 weeks of treatment the patient noticed a re- duction of laxative effect. This is caused by the de- velopment of the follow- ing side-effect:	A. *Tolerance B. Dependence C. Sensibilization D. Cumulation E. Disbacteriosis	Tolerance is a decrease in the reaction of the organism to the re-introduction of the drug
3.	A child suffers from drug idiosyncrasy. What is the cause of such reaction?	<ul> <li>A. *Hereditary enzymopa- thy</li> <li>B. Exhaustion of substrate interacting with pharma- ceutical substance</li> <li>C. Accumulation of phar- maceutical substance</li> <li>D. Inhibition of microsomal liver enzymes</li> <li>E. Associated disease of target organ</li> </ul>	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- hol that caused intense inhibition of central nerv- ous system. What may it be connected with?	<ul> <li>A. *Effet potentiating</li> <li>B. Effect summation</li> <li>C. Cumulation</li> <li>D. Intoxication</li> <li>E. Idiosyncrasy</li> </ul>	Potentiation is a type of drug interaction in which one drug (in this case alcohol) enhances the action of another
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 ex- plain 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 tak- en prednisolone tablets (1 tablet 3 times a day) for 2 months. Due to a signifi- cant improvement of her condition the patient sud- denly stopped taking it. What complication is like- ly 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 cessa- tion 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 phar- macy. He insists that he needs to buy two more packages of this drug, because without it he feels unwell. The side-effect of this drug that can be ob- served in this patient is based on the development of:	<ul><li>A. * Addiction</li><li>B. Cumulation</li><li>C. Idiosyncrasy</li><li>D. After-effect</li><li>E. Tolerance</li></ul>	Addiction is the pharmacological effect that develops with repeated injections of the drug. It is characterized by a change in the psycho-emotional state of the patient. As a result, the viability of the body in the previous mode becomes impossible.

## UNIT 10: Cholinergic agonists (cholinomimetic drugs)

N⁰	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 E. Dipiroxim	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:	<ul> <li>A. *Proserin</li> <li>B. Aspirin</li> <li>C. Sodium diclophenac</li> <li>D. Allopurinol</li> <li>E. Atropine sulfate</li> </ul>	
3.	Recommend the patient with glaucoma an M- cholinomimetic agent:	<ul> <li>A.*Pilocarpine</li> <li>hydrochloride</li> <li>B. Ephedrine hydrochloride</li> <li>C.Sulfacyl-sodium</li> <li>(Sulfacetamide)</li> <li>D. Atropine sulfate</li> <li>E.Levomycetin</li> <li>(Chloramphenicol)</li> </ul>	
4.	Specify the drug that constricts pupils and reduces intraocular pressure:	<ul> <li>A.*Pilocarpine hydrochlo- ride</li> <li>B. Fenofibrate</li> <li>C. Nitrazepamum</li> <li>D. Atropine sulfate</li> <li>E. Dithylinum</li> </ul>	Pilocarpine is a drug of the cholinomimetic group which constricts the pupils and lowers the intraocular pressure. Used to treat glaucoma.
5.	Name the drug that caus- es miosis and lowers in- traocular pressure.	<ul> <li>A. *Pilocarpine hydrochlo- ride</li> <li>B. Fenofibrate</li> <li>C. Nitrazepam</li> <li>D. Atropine sulphate</li> </ul>	

		E. Suxamethonium chloride	
6.	A patient complains of	A. *Myasthenia	Myasthenia is a weakness of skeletal
	general weakness,	B. Paralysis	muscles, which is eliminated by
	muscle weakness in the	C. Paresis	anticholinesterase drugs.
	extremities (if the patient	D. Hemiplegia	
	is asked to make a fist	E. Monoplegia	
	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:		
7.	A sanitary-epidemic	A. *Acetylcholinesterase	Organophosphorus compounds belong to
	station employee has	B. Lactate dehydrogenase	the group of acetylcholinesterase
	been poisoned when the	C. Xanthine oxidase	inhibitors
	premices were processed	D. Catalase	
	wi-th an	E. Pepsin	
	organophosphorous		
	insecticide. What enzyme		
	is inhibited by		
	organophosphorous		
	compounds?		
8.	Proserin was prescribed	A *Atropine sulfate	In case of an overdose of M,H-
	to a patient suffering	B Physostigmine	cholinomimetics, it is advisable to use
	from myasthenia gravis.	C Pyridostigmine bromide	cholinergic blockers, which block the
	After its introduction, the	D Isadrin	stimulating effect of acetylcholine on
	patient developed nausea,	E Mesaton	receptors, that is, they act in the opposite
	diarrhea, twitching of the		way and eliminate intoxication.
	tongue and skeletal		
	muscles. What drug will		
	help eliminate this		
	intoxication?		

# UNIT 11: Cholinergic antagonists (cholinergic blockers)

N⁰	Test	Distractors (A-E)	Explanations
1.	A child accidentally took a drink from the vial of grandmother's medicine for glaucoma. The medicine was identified as pilocarpine hydrochloride. What drug can be used as an antidote?	<ul> <li>A. *Atropine</li> <li>B.Carbachol</li> <li>C.Aceclidine</li> <li>D. Benzohexonium</li> <li>(Hexamethonium)</li> <li>E.Pentamin (Azamethonium bromide)</li> </ul>	Atropine is a drug of the M- anticholinergic antagonists group, reduces the secretion of exocrine glands, has an antispasmodic effect,
2.	In course of an experiment a dog has been injected a preparation that reduces secretory and motor activity of stomach. What	<ul><li>A. *Atropine</li><li>B. Histamine</li><li>C. Secretin</li><li>D. Acetylcholine</li><li>E. Gastrin</li></ul>	(pilocarpine)

	preparation is it?		
3.	Which of the listed biologi- cally active compounds inhibits the secretion of pancreatic juice?	<ul><li>A. *Atropine</li><li>B. Acetylcholine</li><li>C. Insulin</li><li>D. Gastrin</li><li>E. Secretin</li></ul>	
4.	A patient with renal colic has been administered a spasmolytic from the group of M-cholinergic antago- nists as a part of the com- plex therapy. Specify this drug:	<ul><li>A. *Atropine</li><li>B. Proserin</li><li>C. Galantamine</li><li>D. Dithylinum</li><li>E. Benzohexonium</li></ul>	
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?	<ul><li>A. *Atropine</li><li>B. Proserin</li><li>C. Galantamine</li><li>D. Dithylin</li><li>E. Benzohexonium</li></ul>	
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?	<ul> <li>A. *Block of cholinergic receptors of postsynaptic membrane</li> <li>B. Disturbance of acetylcholine synthesis</li> <li>C. Block of Ca2+-channels of presynaptic membrane</li> <li>D. Disturbance of cholinesterase synthesis</li> <li>Disturbance of acetylcholine secretion</li> </ul>	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 bronchial asthma and bradyarrhythmia. In order to eliminate bron- chospasm, the drugs of the following pharmacological group should be adminis- tered:	A. $*M$ -anticholinergics B. $\beta$ -adrenergic blocking agents C. <i>M</i> -cholinergic agents D. Anticholinesterase agents E. Muscle relaxants	M-cholinoblockers used for the treatment of asthma due to bronchodilating action
10.	What drug is used for treatment of organophos- phate poisoning?	<ul><li>A. * Atropine sulfate</li><li>B. Izoniazid</li><li>C. Metronidazole</li></ul>	Atropine sulfate is a cholinergic antagonist that is used for poisoning with organophosphate compounds

		D. Aciclovir E. Platyphylline	(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?	<ul> <li>A. *Proserin (Neostigmine)</li> <li>B. Benzohexonium (Hexamethonium)</li> <li>C. Dithylin (Suxamethonium)</li> <li>D. Aethimizole (Methylamide)</li> <li>E. Cytitone (Cytisine)</li> </ul>	Prozerin is a cholinomimetic with competitive anticholinesterase mechanism of action. It is indicated for cholinoblockers poisoning (tubocurarin chloride).
12.	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 intoxication?	A *Atropine sulfate B Physostigmine C Pyridostigmine bromide D Isadrin E Mesaton	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.
13.	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?	A*Atropine sulfate and dipiroxime B Sodium thiosulfate and bemegrid C Thetacin-calcium and unitiol D Nalorphine hydrochloride and bemegrid E Glucose and bemegrid	Dipiroxime is an acetylcholinesterase reactivator and an antidote for organophosphorus poisoning.
14.	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>A. *Proserin</li><li>B. Benzohexonium</li><li>C. Etimizol</li><li>D. Cititon</li><li>E. Ditylin</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)

N⁰	Test	Distractors (A-E)	Explanations
1.	A man developed cardiac arrest due to thoracic trauma. Name the drug that should be introduced into the cavity of the left ventricle in this case:	<ul><li>A. *Adrenalin hydrochloride</li><li>B.Salbutamol</li><li>C.Lisinopril</li><li>D. Proserin</li><li>E.Metoprolol</li></ul>	Adrenaline is an alpha-beta adrenerg agonist that has vasoconstriction, i
2.	Epinephrine is used to prolong the effect of novocaine during infiltration anesthesia. What epinephrine action is this effect caused by?	<ul> <li>A. *Vasoconstriction</li> <li>B. Potentiation of novocaine action at CNS level</li> <li>C. Suppression of nerve endings and conductors functioning</li> </ul>	creases blood pressure, and bronchodi- lation. Used for cardiac arrest, hypoten- sion, anaphylactic shock

		D. Vasodilatation E. Suppression of tissue	
		esterases	
3.	A medical student needs to	A. *Adrenaline hydrochloride	
	choose an adrenergic drug	B. Galazolin (Xylometazoline)	
	for treatment of anaphylac-	C. Clophelin (Clonidine)	
	tic shock. What would you	D. Izadrin (Isoprénaline)	
	recommend?	E. Fenoterol	
4.	The patient with bronchial	A. $*\beta_2$ -adrenoreceptors	
	astrina nad been	B. $\alpha_1$ -adrenoreceptors	
	which led to disappearance	C. Muscarinic acetylcholine	
	of bronchiospasm	D A catylcholine synthesis	
	symptoms It happened due	E $\beta_{1-2}$ drenore centors	
	to stimulation of:		
5.	Adrenomimetic agents are	A. *Salbutamol	
	differentiated into selective	B. Metoprolol	
	and non-selective. What	C. Atenolol	Salbutamal balance to $\theta_{i}$
	drug is an agonist of $\beta_2$ -	D. Anaprilin (Propranolol)	adrenomimetics Used to treat bron-
	adrenergic receptors and	E. Nebivolol	chial asthma
	can be used for treatment		
	of bronchial asthma?		
		* 4 0 11 4 1	
0.	A patient with bronchial	*A. Salbutamol	
	drug with the mechanism	C. Droperidol	
	of action that is primarily	D. Clonidine	
	based on the stimulation of	E. Isadrine (Isoprenaline)	
	B2adrenergic receptors.		
	Name this drug:		
7.	Dobutamine has been ad-	A. * Stimulation of $\beta$ 1-	Dobutamine refers to adrenergic ago-
	ministered to the 49-year-	adrenoreceptors	nists. Mechanism of action -
	old-patient with acute car-	B. Stimulation of $\alpha$ 1-	stimulation of $\beta$ 1-adrenoreceptors
	diac failure and cardiac	adrenoreceptors	
	What is this drug's mache	C. Blockade of K+-, N a+-	
	nism of action?	D Suppression of	
		phosphodiesterase activity	
		E. Stimulation of M -	
		cholinergic receptors	
8.	An ophthalmologist used a	A. * Activation of alfa1-	Mezaton refers to alpha
	1% mesaton solution for	adrenoreceptors	adrenoagonistam, causes pupil dilation
	the diagnostic purpose	B. Activation of alfa2-	
	(pupil dilation for eye-	adrenoreceptors	
	ground examination). What	C. Block of alfa1-	
	is the cause of mydriasis	adrenoreceptors	
	maucea by the drug?	D. Activation of betal-	
		aurenoreceptors	
		cholinoreceptors	
9	Patient with bronchial	Δ *Ephedrine	Enhedrine is an alpha adrenomimetic
/.	asthma was taking tablets	B Adrenaline	well penetrates the blood-brain barrier
	which caused insomnia.	C. Chromolin sodium	has side effects on the central nervous
	headache, increased blood	D. Euphyline	system
	pressure. What medecine	E. Izadrine	

	can cause such complica- tions?		
10.	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.

N⁰	Test	Distractors (A-E)	Explanations
1.	It is required to diminish pump function of patient's heart. This can be done by means of blockers of the following membrane cytoreceptors:	<ul> <li>A. *β-adrenoreceptors</li> <li>B.Nicotinic cholinoreceptors</li> <li>C.Muscarinic cholinoreceptors</li> <li>D. α-adrenoreceptors</li> <li>E.Dopamine receptors</li> </ul>	B1-adreno receptors are located in the heart. Myocadial contractility decreases during β1-receptor blockade
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 $\beta 1\beta 2$ -adrenoblockers. When blocking $\beta 1$ -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 drug.	A * Metoprolol B Indomethacin C Tryphtazine D Fenozepam E Galantamine(	Metoprolol is a selective $\beta$ 1- adrenoblocker, that is, it blocks only $\beta$ 1- receptors of the heart and has no effect on $\beta$ 2-receptors of bronchial smooth muscles.
4.	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 for the treatment of hypertension. One hour after administration of the antihypertensive drug, the patient developed a hypoglycemic coma. What is the mechanism of	A * Suppression of glycogenolysis B Decrease in half-life of glucagon C Increase in half-life of insulin Semilente D Increasing the bioavailability of insulin Semilente E Decrease in glucose absorption	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.

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

N⁰	Test	Distractors (A-E)	Explanations
5.	A patient with symptoms of chronic bronchitis has been administered acetylcysteine. What is the mechanism of its expectorant action?	<ul> <li>A. * Depolymerization of sputum mucopolysaccharides</li> <li>B. Stimulation of adrenergic receptors</li> <li>C. Inhibition of cough center</li> <li>D. Stimulation of respiratory center</li> <li>E. Anesthesia of respiratory mucosa</li> </ul>	
6.	A patient with acute bron- chitis 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?	<ul> <li>A. *Acetylcysteine</li> <li>B. Salbutamol</li> <li>C. Validol (Menthyl isovalerate)</li> <li>D. Platyphyllin</li> <li>E. Prenoxdiazine (Libexin)</li> </ul>	Acetylcysteine refers to a group of expectorants with mucolytic activity. Can cause side effect bronchial spasms
7. 8.	What mucolytic agent would you recommend for the patient with acute bronchitis to facilitate ex- pectoration? A patient suffers from in- tense cough with produc	*A. Acetylcysteine B.Glaucine C.Codeine D.Libexin (Prenoxdiazine) E.Hydrocodone A. Acetylcysteine B. Butamirate	
	tion of viscous sputum. What drug can thin the sputum and facilitate ex- pectoration?	C. Prenoxdiazine D. Codeine phosphate E. Glaucine	
9.	A patient with chronic constipation has been pre- scribed 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:	<ul><li>A. *Habituation</li><li>B. Dependence</li><li>C. Sensibilization</li><li>D. Cumulation</li><li>E. Dysbacteriosis</li></ul>	The patient developed a side effect of bisacoyl - habituation (addiction).
10.	The elderly patient suffers from constipation caused by large intestine hypoto- nia. What drug should be prescribed?	<ul><li>A. *Bisacodyl</li><li>B. Sodium sulfate</li><li>C. Castor oil</li><li>D. Atropine sulphate</li><li>E. Procainamide</li></ul>	Bisacodyl is a laxative that enhances the motility of the small intestine.

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

N⁰	Test	Distractors (A-E)	Explanations
	•		

1.	What local anesthetic is given to patients with cardiac rhythm disturb- ance?	A. *Lidocaine B.Paracetamol C.Morphine hydrochloride D.Caffeine and sodium benzoate E.Nitrazepam	
2.	To perform conduction anesthesia a patient had been administered a drug used in dental sur- gery. It was followed by the symptoms of poisoning: central nerv- ous system excitation with following paraly- sis, and acute cardio- vascular insufficiency (collapse). Additionally there were allergic reac- tions (itching, swelling, erythema). Name this drug.	<ul> <li>A. *Lidocaine</li> <li>B. Suxamethonium chloride</li> <li>C. Thiopental sodium</li> <li>D. Tubocurarin chloride</li> <li>E. Pipecuronium bromide</li> </ul>	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 18: Hypnotic and anticonvulsive drugs

N⁰	Test	Distractors (A-E)	Explanations
1.	A man is diagnosed with Parkinson's disease. What drug should be prescribed in this case?	A. *Levodopa B.Nitrazepam C.Paracetamol D.Aminazine E.Anaprilin (Propranolol)	
2.	The patient with parkinsonism has been prescribed a drug - dopamine precursor - to relieve muscular rigidity. Name this drug.	<ul><li>A. *Levodopa</li><li>B. Aminazine</li><li>C. Paracetamol</li><li>D. Scopolamine hydrobromide</li><li>E. Atropine sulphate</li></ul>	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?	<ul> <li>A.*Biotransformation</li> <li>acceleration</li> <li>B. Absorption process</li> <li>weakening</li> <li>C. Increase of receptor</li> <li>sensitivity</li> <li>D. Biotransformation</li> <li>suppression</li> <li>E. Substance accumulation in</li> <li>body</li> </ul>	Phenobarbital is a hypnotic, barbituric acid derivative. One of the side effects of which is the induction of
4.	Certain drugs can stimulate liver to synthesize enzyme systems taking part in drugs and toxines metaboli-sm. What compound stimulates drug metabolism in liver	A. *Phenobarbital B. Heparin C. Menadione sodium bisulfite D. Sulfanilamide E. Aspirin	microsomal oxidation of the liver.

	microsomes?		
5.	A patient suffering from epilepsy and a depressive reaction is prescribed a drug that reduces the manifestation of epilepsy and improves the mental state of the patient. Name this drug.	A *Sodium valproate B Ethosuximide C Amitriptyline D Phenytoin E Phenobarbital	Sodium valproate belongs to antiepileptic drugs, in addition, it has tranquilizing properties, reduces the feeling of fear, improves the mental state and mood of patients.
6.	Some derivatives of barbituric acid are capable of depressing the respiratory chain. Name the drug that inhibits cellular respiration:	A * Aminobarbital B Penicillin C Streptocide D Vikasol E Levomycetin	A derivative of barbituric acid, aminobarbital, suppresses the respiratory chain and inhibits cellular respiratio

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

N⁰	Test	Distractors (A-E)	Explanations
1.	What pharmacological effect of acetylsalicylic acid allows its application in patients with ischemic heart disease for prevention of thromboses?	<ul><li>A. *Antiaggregant</li><li>B.Analgesic</li><li>C.Antipyretic</li><li>D. Ulcerogenic</li><li>E.Anti-inflammatory</li></ul>	
2.	A female patient asked a pharmacist to recommend her a drug for headache with antiplatelet effect. Specify this drug:	<ul><li>A. *Acetylsalicylic acid</li><li>B. Codeine phosphate</li><li>C. Promedol</li><li>D. Tramadol</li><li>E. Fentanyl</li></ul>	Acetylsalicylic acid is a NSAIDs. Due to mechanism of action - Cyclooxygenase1 inhibition, it couse antiplatelet effect.
3.	A patient with stenocardia has been administered acetylsalicylic acid for:	<ul> <li>A. *Antiplatelet effect</li> <li>B. Inhibition of blood fibrino- lytic activity</li> <li>C. Aggregate effect</li> <li>D. Anti-inflammatory effect</li> <li>E. Increase in blood fibrinolyt- ic 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:	<ul><li>A. * Prostaglandins</li><li>B. Uric acid</li><li>C. Urea</li><li>D. Haem</li><li>E. Cholesterol</li></ul>	
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:	<ul> <li>A. *Cyclooxygenase</li> <li>B. Hexokinase</li> <li>C. Succinate dehydrogenase</li> <li>D. Aminotransferase</li> <li>E. Xanthine oxidase</li> </ul>	NSAIDs due to inhibition of cyclooxygenase 2 there is a decrease in the production of prostaglandin inflammatory mediators
6.	A female student with a	A. *Paracetamol	Paracetamol is an NSAID, has anti-

	cold has been prescribed an antipyretic medication. Specify this drug:	<ul><li>B. Ascorbic acid</li><li>C. Oxytocin</li><li>D. Famotidine</li><li>E. Cyanocobalamin</li></ul>	inflammatory, analgesic and antipyretic activity.
7.	A patient with headache consulted a pharmacist. The patient was prescribed a cyclooxygenase inhibitor - an aminophenol deriva- tive. What drug was pre- scribed?	<ul> <li>A. *Paracetamol</li> <li>B. Acetylsalicylic acid</li> <li>C. Diclofenac</li> <li>D. Ketorolac</li> <li>E. Ibuprofen</li> </ul>	
8.	Paracetamol belongs to the following pharmacological group:	<ul> <li>A. *Nonnarcotic analgetics</li> <li>B. Soporifics</li> <li>C. Diuretics</li> <li>D. Hypotensive drugs</li> <li>E. Antianginal drugs</li> </ul>	
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:	<ul> <li>A. *Cyclooxygenase-1</li> <li>B. Cyclooxygenase-2</li> <li>C. Lipoxygenase</li> <li>D. Thromboxane synthetase</li> <li>E. Prostacyclin synthase</li> </ul>	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 rheuma- toid arthritis and concomi- tant 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?	<ol> <li>*Celecoxib</li> <li>Acetylsalicylic acid</li> <li>Paracetamol</li> <li>Metamizole</li> <li>Diclofenac sodium</li> </ol>	Celecoxib is an NSAID, a selective
11.	The patient, who suffers from rheumatoid arthritis and concomitant duodenal ulcer should be prescribed a non-steroidal anti- inflammatory drug. What drug is most suitable in this case?	A. *Celecoxib B.Diclofenac sodium C.Acetylsalicylic acid D.Metamizole E.Paracetamol	cyclooxygenase 2 inhibitor. It does not have an ulcerogenic effect.
12.	A patient has been taking diclofenac sodium for a long time. A family physi- cian withdrew this drug and prescribed celecoxib. Wh at disease was the cause of drug substitution?	<ul><li>A. *Peptic ulcer</li><li>B. Bronchial asthma</li><li>C. Urolithiasis</li><li>D. Arterial hypertension</li><li>E. Chronic hepatitis</li></ul>	Diclofenac sodium NSAID is not selectively inhibit cyclooxygenase 1 and 2. Side effect - ulcerogenic effect

13. A doctor has prescribed a nonsteroidal antiinflam- matory drug to relieve inflammation and pain syndrome. Name this drug:A. *Diclofenac sodium B. Glibenclamide C. Loratadine D. Prednisolone E.Calcium chloride				
	13.	A doctor has prescribed a nonsteroidal antiinflam- matory drug to relieve inflammation and pain syndrome. Name this drug:	<ul><li>A. *Diclofenac sodium</li><li>B. Glibenclamide</li><li>C. Loratadine</li><li>D. Prednisolone</li><li>E.Calcium chloride</li></ul>	
				L

# UNIT 20: Psychotropic drugs. psychodisleptic drugs. Narcotic analgesics

N⁰	Test	Distractors (A-E)	Explanations
1.	A 25-year-old woman with signs of acute morphine intoxication was administered naloxone, which rapidly improved her condition. What is the mechanism of action of this drug?	<ul> <li>A. * Opioid receptor blockade</li> <li>B. GABA receptor blockade</li> <li>C. Serotonin receptor blockade</li> <li>D. Dopamine receptor blockade</li> <li>E. Benzodiazepine receptor blockade</li> </ul>	Naloxone is an opioid receptor antagonist, used for intoxication with
2.	What naloxone indications are there?	<ul> <li>A. *Narcotic analgetics acute poisoning</li> <li>B. Heavy metals poisoning</li> <li>C. Cardiac glycosides poisoning</li> <li>D. Ergot alkaloids poisoning</li> <li>E. Atropine sulphate poisoning</li> </ul>	anatgonism with opiate receptors
3.	Explain to an intern, what is the mechanism of analgesic action of morphine hydrochloride:	<ul> <li>A. *Opiate receptors</li> <li>stimulation</li> <li>B. Histamine receptors</li> <li>blockade</li> <li>C. Phosphodiesterase blockade</li> <li>D. Adenylate cyclase</li> <li>stimulation</li> <li>E. Choline esterase blockade</li> </ul>	Morphine is a narcotic analgesic, the mechanism of action of activation of opiate receptors
4.	A patient with a diagnosis of drug poisoning has been admitted to the resuscitation department. The patient is in grave condition. Respiration is rapid, superficial, with periods of apnea (Biot's respiration). What was the main cause of the development of periodic breathing in the patient?	<ul> <li>A. *Inhibition of the respiratory center function</li> <li>B. Impaired function of spinal cord motoneurons</li> <li>C. Impaired function of the neuromuscular system</li> <li>D. Diminished chest mobility</li> <li>E. Pulmonary dysfunction</li> </ul>	One of the undesirable effects of narcotic analgesics is the inhibition of the respiratory center.
5.	Which one of the drugs listed below is potentially addictive?	<ul> <li>A. *Trimeperidine</li> <li>B. Acetylsalicylic acid</li> <li>C. Naloxone</li> <li>D. Diclofenac sodium</li> <li>E. Paracetamol</li> </ul>	Promedol (trimeperidin) is a narcotic analgesic, the undesirable effect of which is addiction, but to a lesser ex- tent has a suppressive effect on the
6.	A narcotic analgesic with accompanying antispas- modic effect was appoint-	A. *Promedol B. Doxylamine C. Phenobarbital	respiratory center (used for obstetric aid). It also has an antispasmodic effect.

	ed for the patient to relieve	D. Ketorolac	
	of renal colic attack. Spec-	E. Buprenorphine	
	ify the drug.		
7.	A woman is to	A. *Promedol (Trimeperidine)	
	be prescribed a	B. Morphine	
	narcotic analgesic for labor	C. Papaveretum (Omnopon)	
	pain relief. What drug is	D. Codeine	
	indicated in this case?	E. Fentanyl	
8.	An interhospital pharmacy	A. *Fentanyl	Fentanyl is a narcotic analgesic with
	received a short-acting	B. Naltrexone	the most pronounced analgesic
	narcotic analgesic that is	C. Naloxone	activity.
	times more active than	D. Analgin (Metamizole)	
	morphine. Name this drug:	E. Ketanov (Ketorolac)	
9.	Specify the analgesic that	*A.Morphine	Morphine is classified as a narcotic
	affects opiate receptors	B Phenobarbital	analgesic. The rest of the proposed
	and can cause develop-	C Medazenam	drugs are not narcotic analysics
	ment of tolerance and de-	D Voltaren (Diclofenac sodi-	and be not narcotte analgestes.
	pendence.	um)	
	pendenee.	E Haloperidol	
10	Вкажіть анальгетичний	A *Mondin	Механізм дії наркотичних анальге-
10.	засіб який взаємодіє з	В Фенобарбітац	тиків полгає у взаємодії з опіатними
	опіатними рецепторами	С Мелазепам	рецепторами
	рикликає толерантністі		рецепторами.
	та залежність	Е Ганонеринон	
		Еталоперидол	
11.	Пацієнту з переломом	А *Опіатними рецепторами	Механізм знеболюючої лії наркотич-
	стегна призначений нар-	В Адренорецепторами	них анальгетиків зумовлений взаємо-
	котичний анальгетик.	С Холинорецепторами	лією з опіатними рецепторами, які
	Аналгетична активність	D Бензоліазепіновими реце-	вілповілають за біль.
	пієї речовини обумовлена	пторами	,
	взаємолією з наступними	Е ГАМК-ергічними рецеп-	
	рецепторами:	Торами	
	<u>    ' - r</u>		1

## UNIT 21: Neuroleptic drugs. tranquilizers. Psychosedatives

N⁰	Test	Distractors (A-E)	Explanations
1.	A woman suffering from neurosis has disturbed sleep. What drug is optimal for insomnia treatment?	<ul> <li>A. *Nitrazepam</li> <li>B.Phenobarbital</li> <li>C.Aethaminalum-natrium</li> <li>(Pentobarbital)</li> <li>D. Bromisoval</li> <li>E. Valerian tincture</li> </ul>	Nitrazepam is a hypnotic, benzodiazepine derivative, tranquilizer.
2.	A woman complaining of sleep disturbance, fearfulness, and anxiety came to a neurologist. What drug should be prescribed in this case?	<ul> <li>A. *Diazepam</li> <li>B. Levodopa</li> <li>C. Nitroglycerine</li> <li>D. Oxytocin</li> <li>E. Lisinopril</li> </ul>	Diazepam is a hypnotic benzodiazepine derivative, tranquilizer (anxiolytic). It has anticonvulsant ac-
3.	Whatpharmacologicaleffectofdiazepamallowsitsapplicationfor	<ul><li>A. *Anticonvulsant</li><li>B. Analgesic</li><li>C. Antipyretic</li></ul>	

	termination of convulsions?	D. Anti-inflammatory E. Hypnotic	
4.	The patient with neurosis has been prescribed anxiolytic derivative of benzodiazepine. Name this drug	A. *Diazepam B. Atropine sulphate C. Piroxicam D. Nandrolone E. Trihexyphenidyl	
5.	pam to a patient with anxi- ety disorders. What phar- macological effect is the reason for such a prescrip- tion?	<ul><li>A. *Antiolytic</li><li>B. Anticonvulsant</li><li>C. Anti-inflammatory</li><li>D. Antianginal</li><li>E. Hypotensive</li></ul>	
6.	An anxiolytic agent, a ben- zodiazepine derivative, was prescribed to a patient with a neurosis in order to reduce its signs. What medicine belongs to this group of drugs?	A.*Diazepam B.Nandrolone C.Piroxicam D.Trihexyphenidyl E.Atropine sulphate	
7.	Neuroleptanalgesia has been applied in the case of cardiac infarction. What neuroleptic is most often applied along with fenta- nyl?	<ul> <li>A. *Droperidol</li> <li>B. Perphenazine (Aethaperazinum)</li> <li>C. Levomepromazine</li> <li>D. Clozapine</li> <li>E. Sulpiride</li> </ul>	Neuroleptoelngegy is a combination of a narcotic analgesic (fentanyl) with the
8.	To quickly relieve the state of acute psychosis, the patient was prescribed a rapid/short-acting psycho- tropic drug. Name this drug:	<ul> <li>A. *Droperidol</li> <li>B. Piracetam</li> <li>C. Caffeine and sodium benzo- ate</li> <li>D. Valerian extract</li> <li>E. Amitriptyline</li> </ul>	neuroleptic (droperidol)
9.	What group of drugs is characterized by develop- ment of drug addiction as a side effect?	<ul> <li>A. *Psychosedatives</li> <li>B. Cholinergic antagonists</li> <li>C. Adrenergic drugs</li> <li>D. Diuretics</li> <li>E. Emetics</li> </ul>	All psychotropic drugs cause yawning and addiction with long-term use.
10.	The patient took the drug prescribed by the neurologist for 2 weeks. He noted an improvement in his condition, but developed apathy, conjunctivitis, rashes, delirium, and memory impairment. Diagnosed with bromism. What drug should be prescribed to reduce symptoms?	A *Sodium chloride B Glucose solution 5% C Asparkam D Polyglukin E -	Sodium chloride accelerates the excretion of bromine in the urine.

# UNIT 22: Antidepressants. normothymics. Psychostimulants

№TestDistractors (A-E)Explanations
------------------------------------

1.	Caffeine inhibits phosphodiesterase which converts cAMP to AMP. The most typical feature of caffeine intoxication is the reduced intensity of:	<ul> <li>A. *Glycogen synthesis</li> <li>B. Protein phosphorylation</li> <li>C. Pentose phosphate pathway</li> <li>D. Glycolysis</li> <li>E. Lipolysis</li> </ul>	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:	<ul> <li>A. *MAO (monoamine oxidase)</li> <li>B. LDH (lactate dehydrogenase)</li> <li>C. CPK (creatine phosphokinase)</li> <li>D. AST (aspartate aminotransferase)</li> <li>E. ALT (alanine aminotransferase)</li> </ul>	Antidepressants are medicinal substances, one of the mechanisms of
3.	Antidepressants can increase the concentartion of catecholamines in the synaptic cleft. What is the mechanism of action of these drugs?	<ul> <li>A. *Inhibition of monoamine oxidase</li> <li>B. Activation of monoamine oxidase</li> <li>C. Inhibition of xanthine oxidase</li> <li>D. Activation of acetylcholinesterase</li> <li>E. Inhibition of acetylcholinesterase</li> </ul>	action of which is inhibition of monoamine oxidase (MAO).
4.	Name the drug that has an analeptic and psychostimulant effect:	A * Caffeine-sodium benzoate B Proserin C Diazepam D Korglikon E Diclofenac sodium	Caffeine enhances positive reflexes, increases motor activity, mental and physical performance, reduces fatigue and drowsiness, stimulates the respiratory and vascular centers
5.	One of the alkaloids of tea and coffee is caffeine. What is a contraindication for the use of caffeine?	<ul> <li>A.* Hypertensive disease</li> <li>B. Hypotension</li> <li>C. Migraine</li> <li>D. Fatigue</li> <li>E. Suppression of nervous activity</li> </ul>	Caffeine stimulates the vascular center and increases blood pressure.

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

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient after craniocerebral trauma has been prescribed piracetam. What pharmacological group does this drug belong to? After ishemic stroke the patient was prescribed a drug to improve his intel- lectual functioning and memory. What drug would he obtain in the pharmacy?	<ul> <li>A. *Nootropic agents</li> <li>B.Non-narcotic analgesics</li> <li>C.Tranquilizers</li> <li>D. General anesthetics</li> <li>E. Antipsychotics</li> <li>A. * Piracetam</li> <li>B. Metoclopramide</li> <li>C. Tabex (Cytisine)</li> <li>D. Diphenin (Phenytoin)</li> <li>E</li> </ul>	Piracetam is a group of nootropic drugs that improves the higher cognitive functions of the brain.
3.	Name the	A. *Caffeine and sodium	Caffeine refers to psychostimulants

psychostimulant with analeptical action, which is a purine derivative:	benzoate B. Tramadol C. Medazepam D. Sodium bromide	with analeptic activity
	E. Sulpiride	

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

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient with acute heart failure was administered corglycon. What effect of this drug results in improvement of the patient's condition? Choose the most efficient way of convallariae glyco- side administration for acute cardiac failure treatment.	<ul> <li>A. *Increased heart force</li> <li>B. Decreased heart force</li> <li>C. Coronary vessels dilatation</li> <li>D. Increased heart rate</li> <li>E. Decreased oxygen demand of myocardium</li> <li>A. *Intravenous</li> <li>B. Intramuscular</li> <li>C. Subcutaneous</li> <li>D. Internal</li> <li>E. Inhalational</li> </ul>	Corglikon is a cardiac glycoside with a quick short action. It has a positive inotropic effect (increases the force of myocardial contraction). Used to treat acute heart failure.
3.	What drug should be admin- istered in case of acute car- diac insufficiency?	<ul> <li>A. *Corglycon</li> <li>B. Salbutamol</li> <li>C. Pilocarpine hydrochloride</li> <li>D. Naloxone</li> <li>E. Heparin</li> </ul>	
4.	During treatment of chronic cardiac failure with digitox- in a patient developed the drugspecific signs of intoxi- cation. A doctor prescribed Unithiol (Dimercaptopro- pansulfonate sodium). Ex- plain its mechanism of ac- tion of Unithi-ol in case of cardiac glycoside intoxica- tion:	<ul> <li>A. *Restoration of <sup>+</sup>-N a<sup>+</sup>- adenosine triphosphatase ac- tivity</li> <li>B. Binding of calcium ions</li> <li>C. Increase of sodium concen- tration in cardiac hystiocytes</li> <li>D. Increase of calciun permea- bility of cardiac hystiocytes</li> <li>E. Binding of glycosides into complex compound</li> </ul>	Unithiol is a donor of sulfhydryl groups, recovery of activity + -N a + - adenosine triphosphatase
5.	A patient with acute heart failure and cardiac glycosides intolerance was given an injection of dobutamine. What is the mechanism of its action?	<ul> <li>A*.Stimulation of β1- adrenoceptors</li> <li>B. Stimulation of α1- adrenoceptors</li> <li>C. Blockade of K+-, N a+- ATPase</li> <li>D. Inhibition of phosphodiesterase activity</li> <li>E. Stimulation of M - cholinergic receptors</li> </ul>	Dobutamine is a beta1 adrenergic mimetic
6.	A patient with chronic heart failure has been taking digitalis for a long time. In connection with the violation of the medication	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

	regimen, the woman developed symptoms of intoxication. What is associated with the appearance of these symptoms?		accumulate (cumulate) in the body.
7.	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

N⁰	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. *Antiarrhythmic B.Hypnotic C.Antipyretic D. Antidepressant E.Nootropic	Lidocaine is an antiarrhythmic agent with local anesthetic activity.
2.	A patient suffering from ciliary arrhythmia with anamnesis of bronchial asthma should be pre- scribed an anti-arrhythmic drug. What antiarrhythmic drug is <b>CONTRAINDI-</b> <b>CATED</b> in this case?	A.*Anaprilin (Propranolol) B. Ajmaline C. Verapamil D. Nifedipine E. Novocainamide (Procaina- mide)	Anaprilin is contraindicated in bronchial asthma because it is a non- selective beta receptor blocker and can cause bronchospasm.

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

N⁰	Test	Distractors (A-E)	Explanations
1.	The 55-year-old patient	A. *Amlodipine	Amlodipine is an antianginal, calcium
	had been diagnosed with	B.Atenolol	channel blocker.
	angina pectoris. Calcium	C.Guanethidine	
	channel-blocking agent	D. Reserpine	
	was prescribed for treat-	E.Labetalol	
	ment. Name this agent.		
2.	Which of the drugs listed	A. *Nitroglycerine	
	below quickly arrests an-	B. Digoxin	
	gina pectoris attack when	C. Amiodarone	Nitroglycerin - antianginal drug,
	taken sublingually?	D. Lisinopril	nitrovasodilator. The main route of
		E. Convallariae glycoside	administration is sublingually (under
			the tongue)
3.	What drug can quickly	A. *Nitroglycerine	
	stop an angina pectoris	B.Corglycon	

4.	attack, when taken sublin- gually? What drug group has the most pronounced vasodila- tory action, and has little effect on cardiac conduc- tion system and miocardial activity? A patient with coronary artery disease was admit- ted to the cardiological department. For stenocar- dia prevention a drug from the group of beta- adrenoceptor blockers was administered. What drug is it?	<ul> <li>C.Amiodarone</li> <li>D.Digoxin</li> <li>E.Lisinopril</li> <li>A. *Dihydropyridine derivatives</li> <li>B. Phenylalkylamine derivatives</li> <li>C. Benzodiazepine derivatives</li> <li>D. Sulfonylurea preparations</li> <li>E. β-adrenoceptor agonist</li> <li>A. *Metoprolol</li> <li>B. Atropine sulfate</li> <li>C. Morphine hydrochloride</li> <li>D. Oxytocin</li> <li>E. Furosemide</li> </ul>	Derivatives of dihydropyridine (amlodipine) have the most pronounced vasodilating effect and have little effect on the cardiac conduction system and myocardial activity Metoprolol is a selective beta 1 adrenergic blocker, has antianginal activity
6.	A patient with coronary heart disease took the drug several times a day to prevent angina attacks. An 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 preparation belong:	A *Organic nitrates B Alpha-blockers C Blockers of calcium channels D Adenosine preparations E Myotropic antispasmodics	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 the skin and mucous membranes, a sharp drop in blood pressure, tachycardia, respiratory depression occurs.
7.	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

N⁰	Test	Distractors (A-E)	Explanations
1.	Gout develops when purine	A. *Xanthine oxidase	Allopurinol is an anti-gout agent,
	nucleotide metabolism is dis-	B.Succinate	a competitive inhibitor of xanthine

2.	turbed. A doctor prescribed the patient allopurinol that is a competitive inhibitor of: Analysis of a patient's urine revealed increased	dehydrogenase C.Alcohol dehydrogenase D. Lactate dehydrogenase E.Hexokinase A. *Xanthine oxidase inhibition	oxidase (a terminal enzyme of catabolism of surine nucleotides)
	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>	
3.	A patient with gout was pre- scribed allopurinol - a com- petitive inhibitor of xanthine oxidase. Xanthine oxidase is a terminal enzyme of catabo- lism of:	<ul> <li>A. * Purine nucleotides</li> <li>B. Glycoproteins</li> <li>C. Phospholipids</li> <li>D. Higher fatty acids</li> <li>E. Heteropolysaccharides</li> </ul>	
4.	A patient with hypertensive crisis should be administered a diuretic as a part of complex therapy. What drug should be given the patient?	A. *Furosemide B. Diacarb C. Spironolactone D. Triamterene E. Amiloride	
5.	The patient with acute poison- ing needs forced diuresis. What drug can be used for this purpose?	<ul> <li>A. * Furosemide</li> <li>B. Caffeine and sodium</li> <li>benzoate</li> <li>C. Galantamine hydro-</li> <li>bromide</li> <li>D. Enalapril</li> <li>E. Piracetam</li> </ul>	
6.	Diuretic should be prescribed to treat cerebral edema. What drug is to be administered?	<ul> <li>A. *Furosemide</li> <li>B. Hydrochlorothiazide</li> <li>C. Caffeine and sodium</li> <li>benzoate</li> <li>D. Diacarb</li> <li>(Acetazolamide)</li> <li>E. Spironolactone</li> </ul>	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:	<ul> <li>A. * Furosemide</li> <li>B. Hydrochlorothiazide</li> <li>C. Spironolactone</li> <li>D. Triamterene</li> <li>E. Acetazolamide</li> </ul>	
8.	Forced diuresis needs to be induced in a patient with acute medication poisoning. What drug must be used for this purpose?	A. * Furosemide B.Diphenhydramine C.Bisacodil D.Strophantin E.Progesterone	
9.	A patient with epilepsy is pre- scribed a diuretic. Name this drug:	A. *Diacarb (Acetazolamide) B. Verospiron	Diacarb is a diuretic, an inhibitor of carbanhydrase. Used to treat epilepsy, glaucoma

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

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

N⁰	Test	Distractors (A-E)	Explanations
1.	A woman with hypertension came to a doctor complaining of dry cough that developed against the background of her therapy. What antihypertensive drug was she taking?	A. *Lisinopril B.Atenolol C.Nifedipine D. Furosemide E.Dichlothiazide (Hydrochlorothiazide)	Lisinopril, captopril - an antihypertensive agent, an angiotensin converting enzyme (ACE) inhibitor.
2.	What side effect is char- acteristic 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>	One of the side effects is a dry cough.
3.	A patient with hypertension was prescribed a nonselective beta-adrenergic blocking agent. Name this drug:	<ul><li>A. *Anaprilin (Propranolol)</li><li>B. Prazosin</li><li>C. Proserin</li><li>D. Adrenalin hydrochloride</li><li>E. Labetalol</li></ul>	Anaprilin - nonselective beta 1,2 adrenoblocker
4.	A patient with hypertension has been prescribed a drug that blocks angiotensin receptors. Specify this drug:	<ul><li>A. *Losartan</li><li>B. Nifedipine</li><li>C. Prazosin</li><li>D. Captopril</li><li>E. Apressin</li></ul>	Losartan - an antihypertensive agent, an angiotensin receptor blocker
5.	A patient was prescribed	A. *Angiotensin-receptor block-	Losartan is classified as

	losartan for treatment of arterial hypertension. What mechanism of action does this drug have?	<ul> <li>ade</li> <li>B. Inhibition of angiotensin- converting enzyme</li> <li>C. Inhibition of phosphodiester- ase</li> <li>D. Activation of centralα- adrenoceptors</li> </ul>	antihypertensive, angiotensin receptor blockers
		E. Calcium channel blockade	
6.	A patient with hypertensive crisis has been given an intravenous injection of clonidine. What mechanism underlies the antihypertensive effect of clonidine?	<ul> <li>A. *Stimulation of presynaptic central α2-adrenoceptors</li> <li>B. Blockade of peripheral α1-adrenoceptors</li> <li>C. Blockade of β-adrenoceptors</li> <li>D. Blockade of N -cholinergic receptors</li> <li>E. Direct myotropic effect on blood vessels</li> </ul>	Clonidine is an antihypertensive agent, centrally acting, stimulates alpha 2 adrenoreceptors

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

N⁰	Test	Distractors (A-E)	Explanations
1.	After an insulin injection a 45-year-old woman with a long history of diabetes mellitus has developed weakness, 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 complication has developed in the patient?	<ul> <li>A. * Hypoglycemic coma</li> <li>B. Hyperosmolar coma</li> <li>C. Hyperglycemic coma</li> <li>D. Hyperketonemic coma</li> <li>E. Uremic coma</li> </ul>	One of the major complications of insulin therapy is hypoglycemia (decrease in blood glucose levels)
2.	A parturient woman diag- nosed with uterine inertia has been delivered to the materni- ty 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?	<ul><li>A. *Oxytocin</li><li>B. Gastrin</li><li>C. Secretin</li><li>D. Angiotensin</li><li>E. Bradykinin</li></ul>	
3.	What drug is administered in case of uterine inertia?	<ul><li>A. *Oxytocin</li><li>B.No-spa</li><li>C. Progesterone</li><li>D. Vikasolum</li><li>E. Fenoterol</li></ul>	Oxytocin - a hormone of the 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:	A. *Oxytocin B.Gastrin C.Secretin D. Angiotensin E.Bradykinin	
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?	<ul><li>A. *Glibenclamid</li><li>B. Insulin</li><li>C. Mercazolilum</li><li>D. Parathyroidin</li><li>E. Cortisone</li></ul>	Glibenclamide is a synthetic glucose- lowering drug.
7.	A doctor needs to prescribe the patient a drug for re- placement therapy after thyreoidectomy. What drug would you recommend?	<ul> <li>A. *L-thyroxine</li> <li>B. Insulin</li> <li>C. Prednisolone</li> <li>D. Parathyroidin</li> <li>E. Thiamazole</li> </ul>	L-thyroxine is a thyroid hormone. It is used as a replacement therapy for hypothyroidism (insufficiency of thyroid gland function)
8.	A patient with hyperproduc- tion of thyroid hormones has been prescribed Merkazoli- lum. This drug inhibits the following enzyme participat- ing in iodothyronine synthe- sis:	A.*Iodide peroxidase B.Reductase C.Decarboxylase D.Aminotransferase E.Aromatase	Merkazolil is an antithyroid drug. The mechanism of action is the inhibition of peroxidase activity - an enzyme involved in the iodination of thyroid hormones of the thyroid gland, which leads to a violation of their synthesis.
9.	A diabetic patient developed a hyperglycemic coma. Specify the drug for emergency care.	A * Insulin B Prednisolone C Retinol acetate D L-thyroxine E Ergocalciferol	Insulin reduces the concentration of glucose in the blood, increases the permeability of plasma membranes for glucose, activates 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

N⁰	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?	<ul> <li>A. *Increase of gastric juice secretion and acidity</li> <li>B. Accelera tion of histamine inactivation in the stomach</li> <li>C. Inhibition of gastrin secretion in the stomach</li> <li>D. Excess production of prostaglandin E</li> <li>E. Hyperglycemia</li> </ul>	
2.	Addison's (bronze) disease is treated with glucocorticoids. Their effect is provided by the potentiation of the following process:	<ul><li>A. *Gluconeogenesis</li><li>B. Glycolysis</li><li>C. Pentose phosphate cycle</li><li>D. Glycogenolysis</li><li>E. Ornithine cycle</li></ul>	Glucocorticoids (prednisolone) are adrenocortical hormones. Potentiate gluconeogenesis. Side effects - peptic ulcer of the stomach due to overproduction of hydrochloric ac- id in grassed blood processor
3.	The 33-year-old female patient, who undergoes long- term treatment due to her chronic polyarthritis, complains of increased arterial pressure, adipose tissue redistribution and menstrual irregularities. What drug does the patient take?	<ul><li>A. *Prednisolone</li><li>B. Indometacin</li><li>C. Phenylbutazone</li><li>D. Fluocinolone acetonide</li><li>E. Diclofenac sodium</li></ul>	iu, increased biood pressure
4.	A 48-year-old patient has been	A. *Glucocorticoids	

	intravenously administered prednisolone solution to arrest severe attack of bronchial asthma. What group of hor- monal agents does predniso- lone belong to?	<ul><li>B. Gestagenic drugs</li><li>C. Estrogenic drugs</li><li>D. Mineralocorticoid</li><li>E. Anabolic steroids</li></ul>	
5.	A man has been suffering from rheumatoid arthritis for 10 years. Due to its exacerba- tion he had been taking acetyl- salicylic acid and predniso- lone. The patient complains of stomachache, eructation, nau- sea, sensation of full epigas- trium, and meteorism. On gas- troscopy there was an erosion (0,5x0,5 cm) of gastric muco- sa detected. What is the cause of gastric mucosa defect de- velopment?	<ul> <li>A.*Prolonged taking of aspirin and hormones</li> <li>B. Immune-mediated destruc- tion of gastric mucosa</li> <li>C. Dysbacteriosis development</li> <li>D. Age-related changes of mucosa</li> <li>E. Prolonged hypersthenia of gastric muscles</li> </ul>	
6.	A patient with allergic derma- titis came to the hospital. What anti-inflammatory and anti-allergic drug must be pre- scribed in this case?	<ul> <li>A. * Prednisolone</li> <li>B. Ethamide</li> <li>C. Oxytocin</li> <li>D. Insulin</li> <li>E. Retabolil (Nandrolone)</li> </ul>	
7.	A 48-year-old patient has been intravenously administered prednisolone solution to arrest severe attack of bronchial asthma. What group of hor- monal agents does predniso- lone belong to?	<ul> <li>A. *Glucocorticoids</li> <li>B. Gestagenic drugs</li> <li>C. Estrogenic drugs</li> <li>D. Mineralocorticoid</li> <li>E. Anabolic steroids</li> </ul>	Prednisolone is a steroid hormone (glucocorticoid). It 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 cortico-steroids?	<ul> <li>A. *Oropharyngeal candidiasis</li> <li>B. Increased body mass</li> <li>C. Subcapsular cataract</li> <li>D. Osteoporosis</li> <li>E. Arterial hypertension</li> </ul>	

#### **UNIT 36: water-soluble vitamins**

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient suffers	A. *Cyanocobalamin	Cyanocobalamin (vitamin B12) is a
	from hyperchromic	B. Riboflavin	water-soluble vitamin used to treat
	B12-deficiency	C. Vicasol (Menadione)	hyperchromic anemia
	anemia. What	D. Thiamine chloride	
	vitamin preparation	E. Retinol acetate	
	should be prescribed		
	in this case?		
2.	A patient complains	A.*Ascorutinum	Ascorutin is a vitamin preparation
	about gingival	B. Thiamine hydrochloride	that contains ascorbic acid (vitamin
	haemorrhage,	C.Cyanocobalamin	C)
	petechial	D.Nicotinic acid	
	haemorrhages. What	E. Pyridoxine hydrochloride	

3.	vitamin preparation should be recommended? Diet of a human must contain vitamins. What vitamin is usu- ally prescribed for treatment and preven- tion of pellagra?	A. *Vitamin PP B. Vitamin C C. Vitamin A D. Vitamin $B_1$ E. Vitamin D	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:	A. $*B_1$ B. $B_2$ C. C D. $B_6$ E. $B_{12}$	Thiamine diphosphate is a coenzyme of vitamin B1 (thiamine)
5.	A patient suffers from diarrhea, dermatitis, and dementia. What vitamin is likely to be deficient in this patient, causing the patient's condition?	<ul> <li>A. * Nicotinic acid</li> <li>B. Retinol</li> <li>C. Tocopherol</li> <li>D. Vitamin D</li> <li>E. Vitamin K</li> </ul>	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
6.	Ascorutin vitamin preparation is used for treatment of bleeding gums and punctate hemorrhages. What vitamin does this preparation contain?	A. *C B. E C. A D. K E. D	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

N⁰	Test	Distractors (A-E)	Explanations
1. 2.	A patient consulted an ophthalmologist about deterioration of twilight vision and xerophthalmus. What drug should the doctor prescribe? Upon examination the	<ul> <li>A. *Retinol</li> <li>B.Pyridoxine</li> <li>C.Tocopherol</li> <li>D. Ascorbic acid</li> <li>E.Cocarboxylase</li> <li>A. *Retinol acetate</li> </ul>	Retinol (vitamin A) fat soluble vitamin
	ophthalmologist diagnosed a 21-year-old woman with visual impairment - hem- eralopia ("night blind- ness"). What drug should this patient take to restore her vision?	<ul><li>B. Ergocalciferol</li><li>C. Suprastin (Chloropyramine)</li><li>D. Cholecalciferol</li><li>E. Sustac forte (Nitroglycerin)</li></ul>	vision (hemeralopia).
3.	A 21-year-old patient dur-	A. *Retinol acetate	

	ing routine examination by	B.Cholecalciferol	
	an ophthalmologist was	C.Ergocalciferol	
	diagnosed with a visual	D.Nitroglycerin	
	impairment - gemeralopia	E.Chloropyramine	
	("night blindness"). What	17	
	drug should she be pre-		
	scribed to reduce the signs		
	of this condition?		
4	In case of hypovitaminosis	A *Retinol	One of the early manifestations of
	of a certain vitamin dis-	B. Tocopherol	hypovitaminosis A is a violation of the
	turbed proliferation of epi-	C Pyridoxine	processes of differentiation and mainte-
	the lial and connective tis-	D Riboflavin	processes of anterentiation and manne nance of the normal state of enithelial
	sue can be observed Pa-	E Cholecalciferol	cells hemeralonia
	tients with this type of	E. Cholecalenciol	cens, nemeratopia
	hypovitaminosis usually		
	present with impaired vi-		
	sion and spatial orienta-		
	tion Name this drug:		
5	Increased concentration of	A *Alpha tocopharol	
5.	active ovygon forms is a		
	machanism of pathogana	D. Glucose C. Calaifaral	
	sis in a number of discusses	C. Calchelomine	
	To provent this process	D. Cobalamine	
	antiovidants are pro-	E. Glicerol	
	antioxidants are pre-		
	dent from the list below:		
	dant from the list below.		Tocopherol (vitamin E) is a vitamin
6	A woman who had under	A *Topopharol apotato	preparation with antioxidant activity
0.	A woman, who had under-	A. * Tocopherol acetate	preparation with antioxidant activity.
	breast cancer was pre-	D. Elgocalcheloi	
	scribed a course of radia	C. Ribollavili D. Cyanooshalamin	
	tion thereasy. What vitamin	D. Cyanocobaranini E. Ealia agid	
	non merapy. What vitaling	E. Folic acid	
	preparation has marked		
	antiradiation effect due to		
	its annoxidant activity?		
7	To treat the natients with	A *Trinsin	Trypsin is an enzyme of the class of
/.	purulent wounds a dress-	B Aroinase	hydrolases that breaks down pentides
	ing with a certain immobi-	C Catalase	and proteins Canable of selectively
	lized enzyme is used	D Alkaline phosphatase	cleaving tissues that have undergone
	Name this enzyme	E. Acid phosphatase	necrosis.
6.	To prevent this process, antioxidants are pre- scribed. Select an antioxi- dant from the list below: A woman, who had under- gone mastectomy due to breast cancer, was pre- scribed a course of radia- tion therapy. What vitamin preparation has marked antiradiation effect due to its antioxidant activity? To treat the patients with purulent wounds, a dress- ing with a certain immobi- lized enzyme is used. Name this enzyme:	<ul> <li>E. Glicerol</li> <li>A. *Tocopherol acetate</li> <li>B. Ergocalciferol</li> <li>C. Riboflavin</li> <li>D. Cyanocobalamin</li> <li>E. Folic acid</li> </ul> A. *Tripsin <ul> <li>B. Arginase</li> <li>C. Catalase</li> <li>D. Alkaline phosphatase</li> <li>E. Acid phosphatase</li> </ul>	Tocopherol (vitamin E) is a vitamin preparation with antioxidant activity. Trypsin is an enzyme of the class of hydrolases that breaks down peptides and proteins. Capable of selectively cleaving tissues that have undergone necrosis.

# UNIT 38: Drugs affecting the erythropoiesis. Blood substitutes. Preparations of electrolytes

N⁰	Test	Distractors (A-E)	Explanations
1.	In order to restore a man's	A. *0, 9%	Concentration isotonic solution of NaCl
	circulating blood volume	B.0, 3%	is 0.9%
	he was transfused with	C.0, 5%	
	blood substitute - isotonic	D. 1%	
	solution NaCl. What is the	E.3%	
	concentration of this		
	solution?		
2.	A patient suffers from	A. * Cyanocobalamin	Cyanocobalamin (Vitamin B12) is a
	hyperchromic B12-	B. Riboflavin	water-soluble vitamin that is used to
	deficiency anemia. What	C. Vicasol (Menadione)	treat hyperchromic (B12-folic acid defi-

vitamin p	reparation should	D. Thiamine chloride	ciency) anemia.
be prescri	bed in this case?	E. Retinol acetate	

#### UNIT 39: Drugs affecting the leucopoiesis, blood coagulation

N⁰	Test	Distractors (A-E)	Explanations
1.	A 45-year-old woman, who for two weeks has been taking neodicoumarin (ethyl biscoumacetate) due to trombophlebitis, during a regular examination was detected to have decreased blood content of pro- thrombin, in urine there is microhematuria. What drug should be adminis- tered as a neodicoumarin antagonist?	A. *Vicasol (Menadione) B.Protamine sulfate C.Sodium citrate D. Heparin E.Aminocapronic acid	Vikasol (synthetic Vitamin K) refers to drugs that increase blood coagulation, antagonist neodikumarina. Indications for use: hemorrhagic syndrome associ-
2.	A woman noticed that a cut on her skin was still bleeding even after minutes had passed. What vitamin deficiency causes such condition?	A. * Vitamin $K$ B. Vitamin $A$ C. Vitamin $D$ D. Vitamin $E$ E. Vitamin $B_{12}$	ated with hypoprothrombinemia, recur- rence after wounds, injuries and surgi- cal interventions
3.	A patient with high risk of hemorrhages is recommended to take vicasol (menadione) by his physician. This drug is the structural analog of:	A. *Vitamin K B. Vitamin A C. Vitamin B5 D. Vitamin B12 E. Vitamin B6	
4.	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:	<ul><li>A. *Dicumarol</li><li>B. Sulfapyridasine</li><li>C. Deoxypyridoxine</li><li>D. Aminopterin</li><li>E. Isoniazid</li></ul>	Dicumarol - Vitamin K antivitamin
5.	Heparin is the directacting anti-coagulant that reduces blood coagulation and prevents thrombosis. Its action is based upon the following phenomenon:	<ul><li>A. *Protective power of colloids</li><li>B. Syneresis</li><li>C. Thixotropy</li><li>D. Micelle formation</li><li>E. Dialysis</li></ul>	
6.	A patient with myocardial infarction has been administered intravenously a direct anticoagulant, namely:	<ul> <li>A. *Heparin</li> <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 treat- ment of thromboembolic diseases
/.	A patient with acute myocardial infarction received anticoagulation therapy. What compound	<ul> <li>A. * Heparin</li> <li>B. Hyaluronic acid</li> <li>C. Chondroitin sulfate</li> <li>D. Dermatan sulfate</li> </ul>	

	will have anticoagulation	E. Keratan sulfate	
	effect?		
8.	Coumarins, vitamin K	A. *Prothrombin	Coumarins block the formation of
	antagonists, suppress the	B. Gamma globulin	prothrombin, proconvertin, and other
	processes of blood	C. Albumin	coagulation factors in the liver (they
	coagulation. What protein	D. Transferrin	have an anticoagulant effect).
	synthesis is blocked by	E. Ceruloplasmin	
	coumarins?		
9.	Fibrinolytic drugs are able	A. * Streptokinase	Enzymes are able to dissolve blood
	to dissolve already formed	B. Phenobarbital	clots in blood vessels.
	blood clots in the human	C. Riboflavin	
	body. Which	D. Menadione	
	pharmaceutical preparation	E. Isoniazid	
	has fibrinolytic activity?		

# UNIT 40: Immunotropic agents and antiallergic drugs

N⁰	Test	Distractors (A-E)	Explanations
1.	Consult a patient on which antihistamine drug DOES NOT have sedative and hypnotic effect:	A. *Loradatine B.Diphenhydramine C.Promethazine D. Suprastinum E. Tayegil (Clemastine)	
2.	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. *Loratadine B. Epinephrine C. Propranolol D. Ambroxol E. Losartan	Loratadine is an antiallergic drug that blocks the histamine receptor H1, the second generation. It does not have sedative and hypnotic effects. There-
3.	An engine driver complains of his seasonal allergy symptoms. What nonsedating drug should be prescribed in this case?	<ul> <li>A. *Loratadine</li> <li>B. Novocaine</li> <li>C. Fenofibrate</li> <li>D. Analgine (Metamizole)</li> <li>E. Atenolol</li> </ul>	fore, it can be used in the daytime, for drivers, etc.
4.	A patient with allergic rhinitis was prescribed loratadine. This drug belongs to the following group of antiallergic agents:	A. *H1-antagonists B.Glucocorticoids C.Membrane stabilizers D.H2-antagonists E.Leukotriene receptor antagonists	
5.	An oncological patient was prescribed fluorouracil that is a competitive inhibitor of thymidine synthase. It inhibits the process of:	<ul> <li>A. *Pyrimidine nucleotides synthesis</li> <li>B. Carbohydrate disintegration</li> <li>C. Purine nucleotides synthesis</li> <li>D. Purine nucleotides disintegration</li> <li>E. Lipids synthesis</li> </ul>	Fluorouracil is an antimetabolite. As a pyrimidine antagonist, it disrupts DNA synthesis and thus inhibits the division of tumor cells.
6.	Allergic urticaria was found in the sick driver. What drug is indicated?	<ul> <li>A. *Loratidine</li> <li>B. Adrenaline</li> <li>C. Cromolyn sodium</li> <li>D. Euphilin</li> <li>E. Diphenhydramine</li> </ul>	Loratadine blocks histamine receptors and reduces allergy symptoms.

7.	The man developed	A. *Adrenaline hydrochloride	Adrenaline stimulates adrenoceptors
	anaphylactic shock after	B. Anaprilin	and reduces the manifestations of an
	vaccination. Name the drug	C. Ditylin	allergic reaction.
	of choice.	D. Naphthysin	
		E. Salbutamol	

## UNIT 41: Disinfectants and antiseptics

N⁰	Test	Distractors (A-E)	Explanations
1.	Select the halogenated antiseptic that would be preferable for a child to pack in the first aid kit, when going to a summer camp:	<ul><li>A. *Iodine alcoholic solution</li><li>B. Brilliant green</li><li>C. Copper sulfate</li><li>D. Methylene blue</li><li>E. Formaldehyde solution</li></ul>	Alcohol iodine solution is a halogen- containing antiseptic
2.	A patient with gingivitis was prescribed oral cavity irrigation with 0,02% potassium permanganate solution. What group of antiseptics does this drug belong to?	<ul><li>A. *Oxidants</li><li>B. Dyes</li><li>C. Detergents</li><li>D. Alcohols</li><li>E. Nitrofurans</li></ul>	Potassium permanganate refers to antiseptics of the oxidizing group
3.	Colloidal protection is used while manufacturing drug preparations. Name the preparation of colloidal silver protected by proteins:	<ul><li>A. *Protargol</li><li>B. Festal</li><li>C. Enzymtal</li><li>D. Argentum</li><li>E. Collagen</li></ul>	Protargol is a colloidal silver drug protected by proteins
4.	Before a surgical operation, a surgeon treated his hands with an alcohol-containing solution. Which group of drugs does this solution relate to?	<ul> <li>A. *Antiseptics</li> <li>B. Disinfectants</li> <li>C. Sterilizing solutions</li> <li>D. Detergents</li> <li>E. Surface-active substances</li> </ul>	Alcohol solutions belong to the group of antiseptics
5.	Having completed work in a laboratory, a student must tidy up the work- space, perform disinfection of the workbench and tools. What chemicals should be used for disin- fection?	<ul><li>A. *Chloramine</li><li>B. Hydrochloric acid</li><li>C. Formalin</li><li>D. Chloroform</li><li>E. Ether</li></ul>	Chloramine is a disinfectant
6.	A patient with a small cut on the palm came to the dispensing chemist. What antiseptic would be advis- able in this case?	<ul><li>A. *Hydrogen peroxide</li><li>B. Doxycycline hydrochloride</li><li>C. Ketoconazole</li><li>D. Lidocaine hydrochloride</li><li>E. Flemoxin (Amoxicillin)</li></ul>	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 syn- thesis C Damage to the permeability	Benzylpenicillin has a bactericidal effect on sensitive microorganisms by inhibiting the biosynthesis of the cell wall

		of the cytoplasmic membrane	
		D Activation of the immune	
		system of the macroorganism	
		E Increase in phagocytic activi-	
		ty of leukocytes	
8.	You work in a pharmacy,	A* Benzylpenicillin sodium	Benzylpenicillin sodium salt has a
	which is located on the	salt	bacteriostatic effect and is the drug of
	territory of a skin and	B Polymyxin M sulfate	choice in the treatment of syphilis.
	venereological dispensary.	C Levorin sodium salt	
	Consult an internist, which	D Lincomycin hydrochloride	
	antibiotic is the drug of	E Streptomycin sulfate	
	choice for the treatment of		
	syphilis?		

## UNIT 42-44: Chemotherapeutic agents. Antibiotics

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient was prescribed with an antitumoral antibiotic that inhibits synthesis of nucleic acids in the cells. What of the following antibiotics has such a mechanism of action?	<ul><li>A. *Actinomycin</li><li>B. Tetracycline</li><li>C. Nystatin</li><li>D. Lincomycin</li><li>E. Erythromycin</li></ul>	Actinomycin is an antibiotic with antitumor activity
2.	Antibiotics are classified by sources of production. Name an antibiotic of bacterial origin:	<ul><li>A. *Gramicidin</li><li>B.Penicillin</li><li>C.Tetracycline</li><li>D. Lysozyme</li><li>E.Gentamycin</li></ul>	Gramicidin antibiotic of bacterial origin
3.	Antibiotics can be classified according to various principles. According to the action mechanism cephalosporins relate to the following group:	<ul> <li>A.*Inhibitors of cell wall synthesis</li> <li>B. Inhibitors of protein synthesis</li> <li>C. Inhibitors of respiratory processes</li> <li>D. Inhibitors of oxidative phosphorilation</li> <li>E. Inhibitors of cytoplasmic membrane synthesis</li> </ul>	Cephalosporins are antibiotics that inhibit cell membrane synthesis
4.	Bacteria eventually become resistant to antibacterial agents. Resistance of gram- positive bacteria to penicillin antibiotics is caused by:	<ul> <li>A. *Beta-lactamase production</li> <li>B.Permeability of the cell wall</li> <li>C.Active synthesis of</li> <li>peptidoglycan</li> <li>D. Active transport of</li> <li>antibiotic</li> <li>E. Protein synthesis</li> </ul>	Bacteria produce resistance to
5.	1 minute after the patient had been administered penicillin the patient's arterial pressure sharply dropped, pulse became thready, cold sweating and clonic convulsions began. Name this condition.	<ul><li>A. *Anaphylactic shock</li><li>B. Traumatic shock</li><li>C. Cardiogenic shock</li><li>D. Septic shock</li><li>E. Burn shock</li></ul>	penicillinase. Penicillin can cause anaphylactic shock

6.	In the course of bronchitis pharmacotherapy, the patient has developed dyspeptic disorders, photodermatitis and hepatic failure. What drug can cause such disorders?	<ul><li>A. *Doxycycline</li><li>B. Paracetamol</li><li>C. Ascorbic acid</li><li>D. Acetylcysteine</li><li>E. Codeine phosphate</li></ul>	Side effects of doxycycline: dyspeptic disorders, photodermatitis and liver failure
7.	What drug is used in treat- ment regimen for peptic ulcer disease to eliminate Helicobacter pylori?	<ul><li>A. *Clarithromycin</li><li>B. Tienam</li><li>C. Biseptol</li><li>D. Chloridine</li><li>E. Sulfalene</li></ul>	Clarithromycin - an antibiotic with anti-helicobacter activity
8.	A pharmaceutical manufac- ture produces a drug, that is an animal antibiotic. Point out this drug among those listed below:	<ul><li>A. *Lysozyme</li><li>B. Gramicidin</li><li>C. Novobiocin</li><li>D. Phaseolin</li><li>E. Chloramphenicol</li></ul>	Lysozyme - an antibiotic of animal origin
9.	A pharmaceutical enterprise offers wide range of antimi- crobial agents. Select the broad spectrum antimicrobi- al agent:	<ul> <li>A. *Tetracycline</li> <li>B. Rimantadine</li> <li>C. Nystatin</li> <li>D. Griseofulvin</li> <li>E. Phthalazolum</li> </ul>	Tetracyclines - broad-spectrum antibiotics
10.	Antibiotics derived from various species of actinomy- cetes are widely used in medical practice. Point out these drugs among those listed below:	A.*Aminoglycosides (strep- tomycin, monomycin) B.Penicillin, cephalosporin, griseofulvin C. Polymyxin, bacitracin D. Chloreline, arenarinum E. Lysozyme, erytrinum	Aminoglycosides - antibiotics derived from actinomycetes
11.	A chemotherapeutic agent has bactericidal effect against streptococci, staphy- lococci, bacilli, and clostrid- ia. According to its action spectrum this drug belongs to the following group:	<ul> <li>A. *Broad spectrum antibacterial agents</li> <li>B.Narrow spectrum antibacterial agents</li> <li>C.Broad spectrum antifungal agents</li> <li>D.Antiviral agents</li> <li>E.Antituberculous agents</li> </ul>	Chemotherapeutic agent, which is active against Gr + and Gr - microorganisms, is classified as a broad-spectrum drug
12.	What is the main mechanism of benzylpenicillin bacteri- cidal action on the coccal flora?	<ul> <li>A. *Disturbed synthesis of microbial cell wall</li> <li>B. Inhibition of protein synthesis</li> <li>C.Disturbed cytoplasmic membrane permeability</li> <li>D.Activation of macroorganism immune system</li> <li>E. Increased phagocytic activity of leukocytes</li> </ul>	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 clin- ic. Consult an intern what	<ul> <li>A. *Benzylpenicillin sodium salt</li> <li>B. Streptomycin sulfate</li> <li>C. Polymyxin M sulfate</li> </ul>	Benzylpenicillin is active against Treponema pallidum (causative agent of syphilis)

antib for t	biotic is a drug of choice treatment of syphilis:	D. Lincomycin hydrochloride E. Levorin sodium salt	
----------------	---	---	--

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

N⁰	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:	<ul> <li>A. *Para-aminobenzoic acid</li> <li>B. Glutamic acid</li> <li>C. Folic acid</li> <li>D. Nucleic acid</li> <li>E. Antibiotics</li> </ul>	
2.	Sulfanilamides are widely used as bacteriostatic agents. The mechanism of antimicrobial action of Para- aminobenzoic acid	<ul><li>A. *Glutamic acid</li><li>B. Folic acid</li><li>C. Nucleic acid</li><li>D. Antibiotics</li></ul>	The mechanism of action of
3.	Sulfanilamides inhibit the growth and development of bacteria. The mechanism of their action is based on the impairment of the following acid synthesis:	<ul><li>A. *Folic</li><li>B. Lipoic</li><li>C. Nicotinic</li><li>D. Pantothenic</li><li>E. Pangamic</li></ul>	sulfonamides is based on 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 glu-
4.	Sulfanilamides are applied as antimicrobal agents in clinical practice. Sulfanilamide treat- ment, however, can result in hemolytic anemia develop- ment in patients that suffer from genetic defect of the following enzyme of pentose phosphate metabolism in erythrocytes:	<ul> <li>A. *Glucose-6-phosphate dehydrogenase</li> <li>B. Hexokinase</li> <li>C. Transketolase</li> <li>D. Transaldolase</li> <li>E. Pyruvate kinase</li> </ul>	cose-6-phosphate dehydrogenase

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

N⁰	Test	Distractors (A-E)	Explanations
1.	What antiprotozoal drug can	A. *Metronidazole	
	be recommended to a	B.Primaquine	
	woman with trichomoniasis?	C.Chloridine	
		D.Solusurminum(Sodiumsti-	
		bogluconate)	
		E.Chiniofon	Metronidazole is an antiprotozoal
2.	What drug is more advisable	A. *Metronidazole	drug. It is used to treat
	for the patient with amebic	B. Pyrantel	Trichomonas, amebic dysentery,
	dysentery?	C. Levamisole	possesses anti-helicobacter activity.
		D. Bicillin-5	
		E. Benzylpenicillin sodium salt	
		(Penicillin G sodium salt)	
3.	To prevent wound infection	A. *Metronidazole	
	associated with surgical pro-	B. Doxycycline hydrochloride	

	cedures a patient was given a synthetic antiprotozoan drug demonstrating high activity against <i>Helicobacter</i> <i>pylori</i> . Specify this drug:	C. Chingamin D. Acyclovir E. Isoniazid	
4.	Patients ill with tuberculosis take a drug that is an antivitamin of nicotinic acid. Name this substance:	<ul><li>A. *Isoniazid</li><li>B. Sulfanilamide</li><li>C. Acrichine</li><li>D. Isoriboflavin</li><li>E. Oxythiamine</li></ul>	
5.	What synthetic drug of the hydrazide group is typically prescribed for pulmonary tuberculosis?	<ul> <li>A. *Isoniazid</li> <li>B. Rifampicin</li> <li>C. Acyclovir</li> <li>D. Metronidazole</li> <li>E. Doxycycline hydrochloride</li> </ul>	
6.	The patient has been pre- scribed drug with antibacte- rial effect on tuberculosis mycobacteria. What drug is used in tuberculosis treat- ment and is pyridoxine an- tivitamin?	<ul> <li>A. *Isoniazid</li> <li>B. Heparin</li> <li>C. Trimethoprim/sulfamethoxaz ole (Co-trimoxazole)</li> <li>D. Streptomycin</li> <li>E. Sulfanilamide</li> </ul>	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:	<ul><li>A. *Pyridoxine</li><li>B. Tocopherol</li><li>C. Cobalamin</li><li>D. Ergocalciferol</li><li>E. Retinol</li></ul>	
8.	A 40-year-old female farmworker has been diagnosed with brucellosis and administered causal chemotherapy. What group of drugs will be used for this purpose?	<ul> <li>A. *Antibiotic</li> <li>B. Donor immunoglobulin</li> <li>C. Inactivated therapeutic vaccine</li> <li>D. Polyvalent bacteriophage</li> <li>E. Antitoxic serum</li> </ul>	Antibiotics are used to treat brucellosis.
9.	A patient with tuberculosis has been prescribed some anti-TB preparations. Which of the following chemotherapeutic drugs has an effect on the tuberculosis pathogen?	<ul> <li>A. *Ftivazide</li> <li>B. Furacilinum</li> <li>C. Methisazonum</li> <li>D. Sulfadimezinum</li> <li>E. Phtalazolum</li> </ul>	Ftivazid - anti-tuberculosis drug
10	What drug is advisable for individual malaria prophy- laxis?	<ul> <li>A. *Chingamin</li> <li>B. Rifampicin</li> <li>C. Ampicillin</li> <li>D. Gentamicin</li> <li>E.</li> <li>Trimethoprim/sulfamethoxazole</li> <li>(Co-trimoxazole)</li> </ul>	Chingamin - antiprotozoan drug, used to prevent malaria
11	. The 32-year-old patient has been taking antituberculosis	A. *Rifampicin B. Isoniazid	Rifampicin - an anti-tuberculosis drug

	drugs. Later he noticed that his urine had become redor- ange in color. What drug is conductive to this phenome- non?	<ul><li>C. Pyrazinamide</li><li>D. Ethambutol</li><li>E. Streptomycin sulphate</li></ul>	
12.	A structural analog of vita- min PP (nicotinic acid) is used as an antituberculous medicine. Name this medi- cine?	<ul> <li>A. *Isoniazid</li> <li>B. Streptocide</li> <li>C. Riboflavin</li> <li>D. Tetracycline</li> <li>E. Aspirin</li> </ul>	Isoniazid is an anti-TB drug. Isonicotinic acid hydrazide

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

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient developed herpetic rashes. What drug should be prescribed in this case?	A. *Acyclovir B.Gentamicin C.Clotrimazole D. Benzylpenicillin E.Biseptol (Co- trimoxazole)	
2.	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:	<ul><li>A. *Acyclovir</li><li>B. Penicillin</li><li>C. Tetracycline</li><li>D. Sulfanilamides</li><li>E. Fluoroquinolones</li></ul>	Acyclovir - antiviral drug, active against the herpes virus, viral hepatitis
3.	Select the drug with anti- herpesvirus activity that can be used for prevention and treat- ment of herpetic lesions on skin and mucosa:	<ul><li>A. *Aciclovir</li><li>B. Rifampicin</li><li>C. Ranitidine</li><li>D. Nystatin</li><li>E. Atropine</li></ul>	
4.	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"?	<ul><li>A. *Antifungal</li><li>B. Antibacterial</li><li>C. Antichlamydial</li><li>D. Antiviral</li><li>E. Antiprotozoal</li></ul>	Antifungal agents are used to treat condose (fungal infection)
5.	Epidemic of influenza was announced in a town. Which drug can be recommended for the nonspecific prophylaxis of influenza?	<ul> <li>A. *Leukocytic interferon</li> <li>B. Anti-influenza vaccine</li> <li>C. Antibiotics</li> <li>D. Anti-influenza</li> <li>immunoglobulin</li> <li>E. Anti-influenza serum</li> </ul>	Interferons - antiviral drug. Blocks virus protein synthesis and used to
6.	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?	<ul><li>A. *Interferon</li><li>B. Remantadin</li><li>C. Metisazone</li><li>D. Immunoglobulin</li><li>E. Vaccine</li></ul>	prevent influenza

	7.	A local general practitioner	A.*Blocks virus protein	
		recommends taking interferon	synthesis	
		for influenza prevention. What	B. Blocks virus stripping	
		is the mechanism of action of	C. Inhibits virion exit from	
		this drug?	cells	
		C	D. Prevents adsorption of	
			virus in cell receptors	
			F Disrupts the process of	
			virus assembly	
	8	The defensive mechanisms	A * Viral	
	0.	against some infectious diseas	A. Vital P. Holminthio	
		against some infectious diseas-	C Protozoal	
		es can be greatly reminiced	C.FI01020al	
		with interferon. Interferon	D.Microbioses	
		preparations will be the most	E. Fungal	
		advisable in cases of the fol-		
		lowing type of infections:		
	9.	Mother of a 10-year-old child	A. *Interferon	
		came to the pharmacy to obtain	B. Benzoteph	
		a drug for prevention of upper	C. Carvedilol	
		respiratory tract infections.	D. Tetracycline	
		What drug would be recom-	E. Doxorubicin	
		mended by the dispensing		
		chemist?		
	10.	A patient fell ill the day before,	A. *Rimantadine	
		the disease is acute with a pre-	B. Oxolinic ointment	
		dominance of general toxic	C. Gentamicin	
		symptoms. With an account for	D. Inactivated influenza	
		the epidemic situation in the	vaccine	
		city, the doctor diagnosed the	E. Human gamma	
		patient with influenza A. What	globulin	
		emergency etiotropic treatment	6	
		must be administered to this		
		patient?		Remantadin - antiviral drug used to
ľ	11.	Pharmacy has received viri-	A *Rimantadine	treat viral diseases such as influenza
		cides. Choose the viricide used	B. Metisazone	
		for influenza treatment from	C Levamisole	
		the list given below	D Azidothimidine	
			F Acyclovir	
ŀ	12	A pharmacy has received a	A *Rimantadine	
	14.	batch of drugs for treatment of	B Methicazone	
		upper respiratory treat infec	C Levenisole	
		tion What drug is used to treat	D. Idovuridino	
		influenze?	E Dovugueling	
	12	A fomale nationt bitton by a	A Immunization with the	Pabias vaccing used to provent rebias
	13.	stray dog come to a surger	A. minumzation with the	Radies vaccine used to prevent radies
		Wide leasested wounds were	B Combined antibiotic	
		localized on the noticet's free	b. Comomen anubiotic	
		What treatment and	C Haggitalization	
		what treatment and prevention	C. Hospitalization,	
		ald should be rendered in order	injection of diphtheria-	
		to prevent rables?	pertussis-tetanus vaccine	
			D. Hospitalization,	
			medical surveillance	
			E. Urgent injection of	
ŀ		A 1	normal gamma-globulin	
	14.	Aurococcus culture was ob-	A. *Nystatin	Nystatin is not an antibiotic. This is an

tained from the nasal cavity of a child suffering from chronic tonsillitis. Causative agent's sensitivity towards a number of antibiotics was tested to choose	<ul><li>B. Ampicillin</li><li>C. Tetracycline</li><li>D. Levomycetin</li><li>(Chloramphenicol)</li><li>E. Erythromycin</li></ul>	antifungal medication.
the optimal drug. What drug WAS NOT included in antibiotic susceptibility testing?	E. Erythromychi	

# UNIT 51-52: Drugs affecting on the gastrointestinal system

N⁰	Test	Distractors (A-E)	Explanations
1.	A pregnant woman was diagnosed with vaginal dysbacteriosis. What drug should be prescribed in this case?	A. *Probiotic B.Antibiotic C.Bacteriophage D. Interferon E.Polyvitamins	
2.	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?	<ul> <li>A. *Eubiotics</li> <li>B. Antibiotics</li> <li>C. Vitamins</li> <li>D. Sulfanilamides</li> <li>E. Immunostimulants</li> </ul>	Probiotics (Bifidumbacterin) are drugs that normalize the normal microflora of
3.	A 3,5-year-old child has been diagnosed with dysbacteriosis in the form of critical reduction of gram-positive anaerobic bacteria and increased number of staphylococci and yeast fun- gi. What preparation should be used for the correction of dysbacteriosis?	<ul> <li>A. *Bifidumbacterin</li> <li>B. Colibacterin</li> <li>C. Coli-Proteus bacteriophage</li> <li>D. Furazolidone</li> <li>E. Lactoglobulin</li> </ul>	mucous membranes.
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?	<ul><li>A. *Omeprazole</li><li>B. Atropine</li><li>C. Quamatel</li><li>D. Benzohexonium</li><li>E. Proglumide</li></ul>	
5.	A patient with gastric ulcer has been administered omeprazole. What is the mechanism of its action?	<ul> <li>A. *Inhibition of H +K+- ATPase</li> <li>B. Blockade of histamine</li> <li>H2-receptors</li> <li>C. M -cholinergic receptor</li> <li>blockade</li> <li>D. Neutralization of H Cl</li> <li>E. Stimulation of mucus</li> <li>production</li> </ul>	Omeprazole is a proton pump inhibitor, thereby reducing the secretion of gastric juice
6.	A 37-year-old patient with peptic gastric ulcer dis- ease was prescribed a medicine as a part of his multimodality therapy. The medicine lowers	<ul> <li>A. *Omeprazole</li> <li>B. Famotidine</li> <li>C. Gastrozepin (Pirenzepine)</li> <li>D. Ranitidine</li> </ul>	

	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 pre- scribed a drug that inhibits gastric juice secretion. Specify this drug:	<ul><li>A. * Omeprazole</li><li>B. Ethacrynic acid</li><li>C. Duphalac (Lactulose)</li><li>D. Lidocaine</li><li>E. Fenofibrate</li></ul>	
8.	Fatty degeneration of liver is prevented by lipotropic substances. Which of the following substances relates to them?	<ul><li>A. *Methionine</li><li>B. Cholesterol</li><li>C. Bilirubin</li><li>D. Glycine</li><li>E. Glucose</li></ul>	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 pa- tient suffering from chronic hepatitis. This hepatic protec- tor stimulates protein synthe- sis, normalizes phospholipid metabolism, acts as an antioxi- dant. Name this drug:	<ul> <li>A. *Silymarin</li> <li>B. Essentiale</li> <li>C. Galstena</li> <li>D. Thiotriasoline</li> <li>E. Ursodeoxycholic acid</li> </ul>	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:	<ul><li>A. *Proteases</li><li>B. Lipases</li><li>C. Glycosidases</li><li>D. Nucleases</li><li>E. Synthetases</li></ul>	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:	<ul> <li>A. *Loperamide</li> <li>B. Heparin</li> <li>C. Levorin</li> <li>D. Voltaren (Diclofenac)</li> <li>E. Tetracycline</li> </ul>	Loperamide - a drug with an opiate
12.	A patient came to the pharma- cy to obtain an antidiarrheal agent. What drug would be recommended by the dispens- ing chemist?	<ul> <li>A. *Loperamide</li> <li>B. Dicaine (Tetracaine)</li> <li>C. Ranitidine</li> <li>D. Picolax (Sodium picosulfate)</li> <li>E. Anesthesin (Benzocaine)</li> </ul>	intestinal motility. Use as an antidiar- rheal medicine
13.	To treat peptic ulcer disease of the stomach a patient has been prescribed famotidine. Specify the mechanism of action of this drug:	<ul> <li>A. * H<sub>2</sub> histamine receptors block</li> <li>B. Effect on ion channels of cell membranes</li> <li>C. Antienzyme action</li> <li>D. Physicochemical interaction</li> <li>E. Effect on cell membrane transport system</li> </ul>	Famotidine blocks the H2 histamine receptors of the gastrointestinal tract

14.	A patient, who was prescribed famotidine to treat peptic ulcer disease, came to the pharmacy. What is this drug's mechanism of action?	<ul> <li>A. *H2-histamine receptor blockade</li> <li>B. H1-histamine receptor blockade</li> <li>C. Muscarinic receptor blockade</li> <li>D. Inhibition of hydrogen potassium ATPase</li> <li>E. Ganglionic receptor blockade</li> </ul>	
15.	Select the hepatoprotective drugs from the list below:	<ul> <li>A. *Essentiale (Phospholipides), Thiotriasoline</li> <li>B. No-Spa (drotaverine), papaverine hydrochloride</li> <li>C. Allochol, Cholenzym</li> <li>D. Festal, Panzinorm (Pancreatin)</li> <li>E. Oxaphenamide (Osalmid), Nicodin</li> </ul>	Essentiale and thiotriazolin are the only hepatoprotective drugs from the proposed answers
16.	A patient came to the pharma- cy to obtain a drug that con- tains pancreatic enzymes and can be taked for chronic pan- creatitis. What drug would be recommended by the dispens- ing chemist?	<ul><li>A. * Pancreatine</li><li>B. Triamcinolone</li><li>C. Gordox (Aprotinin)</li><li>D. Pirenzepine</li><li>E. Omeprazole</li></ul>	Pancreatin is an enzyme preparation that contains pancreatic enzymes

## UNIT 53: Drugs affecting on the respiratory system

N⁰	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:	A. *Glaucine hydrochloride B.Codeine phosphate C.Libexin (Prenoxdiazine) D. Oxeladin E.Codterpin	Glaucine hydrochloride alkaloid yellow horned poppy
2.	What non-narcotic central- ly-acting antitussive drug can be used for dry cough?	<ul> <li>A. *Glaucine</li> <li>B. Codeine</li> <li>C. Acetylcysteine</li> <li>D. Ambroxol</li> <li>E. Mucaltinum</li> </ul>	
3.	A pharmacy dispenses glaucine hydrochloride to a patient with chronic bronchitis. The patient must be warned about the following typical side ef- fect of the drug:	<ul> <li>A. * Blood pressure fall</li> <li>B. Excitation of the central nervous system</li> <li>C. Arrhythmia</li> <li>D. Rise of intraocular pressure</li> <li>E. Allergic skin rash</li> </ul>	Glaucine - non-narcotic antitussive drug. It does not have a depressing effect on breathing, does not cause dependence. Side effect - lowering blood pressure
4.	Pharmacy sells glaucine hydrochloride to the pa- tient with chronic bronchi- tis. What common side effect should he be warned about?	<ul> <li>A. *Decrease of arterial pressure</li> <li>B. Excitation of central nervous system</li> <li>C. Disruption of cardiac rate</li> <li>D. Increase of intraocular</li> </ul>	

	pressure E. Allergic skin rashes	
5. A patient with tracheitis was prescribed a centrally acting antitussive drug that does not depress respira- tion, causes no addict, and lowers blood pressure. Name this drug:	<ul> <li>A. *Glaucine hydrochloride</li> <li>B. Codeine phosphate</li> <li>C. Prenoxdiazine</li> <li>D. Acetylcysteine</li> <li>E. Morphine hydrochloride</li> </ul>	

#### UNIT 59-60: Pharmacotoxycodynamics.

N⁰	Test	Distractors (A-E)	Explanations
1.	A patient with signs of mercury poisoning has been delivered into an ad- mission room. What anti- dote should be prescribed in this case?	<ul> <li>A. *Unithiol</li> <li>B. Atropine sulfate</li> <li>C. Proserin</li> <li>D. Naloxone</li> <li>E. Calcium chloride</li> </ul>	Unithiol - an antidote for heavy metal poisoning
2.	Treatment with sodium bromide resulted in devel- opment of bromism in the patient: rhinitis, cough, conjunctivitis, and skin rashes. What should the patient be prescribed to treat this condition?	<ul><li>A. *Sodium chloride</li><li>B. Potassium chloride</li><li>C. Sodium iodide</li><li>D. Sodium sulfate</li><li>E. Calcium chloride</li></ul>	Sodium chloride is introduced in case of bromine poisoning
3.	A patient with myocardial infarction was receiving heparin as a part of the complex therapy. With time the patient developed hematuria. What drug should be given as an anti- dote in this case?	<ul> <li>A. *Protamine sulfate</li> <li>B. Neodicumarin</li> <li>C. Aminocaproic acid</li> <li>D. Vicasol (Menadione)</li> <li>E. Fibrinogen</li> </ul>	Protamine sulfate is a specific heparin antagonist