

## UNIVERSITY OF JAFFNA, SRI LANKA D EXAMINATION FOR MEDICAL DEGREES – SEPTEMBER 2019 COMMUNITY & FAMILY MEDICINE PART II

Date: 10.10.2019 Time: 9am-12pm (3 hours)

## ANSWER ALL THE SIX QUESTIONS

Answer each question in a separate answer book.

- 1. A 65 year old lady presented to the Family Health Centre (FHC) with multiple complaints. A detailed clinical evaluation revealed that she was suffering from "Empty Nest Syndrome".
  - 1.1. Outline "Empty Nest Syndrome".

(20 marks)

1.2. List five (5) health problems, highly prevalent in elders.

(20 marks)

1.3. Briefly discuss the detailed clinical evaluation in helping the diagnosis of Empty Nest Syndrome. (

(40 marks)

1.4. List five (5) facts to be considered in prescribing medications to elders.

(20 marks)

2.

- 2.1. Name two national health programmes implemented in the prevention and control of cervical cancer. (20 marks)
- 2.2. Briefly describe the issues on successful implementation of these programmes mentioned in 2.1. (40 marks)
- 2.3. Briefly describe the role of community empowerment in improving the provision of these programmes mentioned in 2.1. (40 marks)
- A study was conducted to determine the increased risk of non-alcoholic fatty liver disease (NAFLD) among women with Polycystic Ovary Syndrome (PCOS) when compared to women without PCOS.

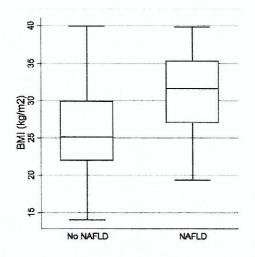


Figure 1: Association between Body Mass Index (BMI) and NAFLD

3.1. Name the type of graph in Figure 1.

(10 marks)

(20 marks) 3.2. Interpret the finding in Figure 1. 3.3. A t-test for the association between BMI and NAFLD status had the following t-value = -12.5, degrees of freedom = 68,414 and p-value = <0.0001Comment on choice of this statistical test. (20 marks) Giving reason, indicate if the association is significant or not. (15 marks) 3.3.2. 3.4. Women with PCOS had higher prevalence of NAFLD compared to women without PCOS (Relative risk= 2.23; 95% confidence interval = 1.86 to 2.66). Comment on the choice of this measure of risk (relative risk). (15 marks) (20 marks) 3.4.2. Giving reason, indicate if the association is significant or not. 4. In 2018, the Ministry of Health adopted the 'Healthcare Delivery for Universal Health Coverage' policy. Under this new policy, primary care centres (divisional hospitals and primary medical care units) are to be strengthened across the country. 4.1. List 5 possible benefits of enhancing Universal Health Coverage for the people residing in rural areas of Sri Lanka. (10 marks) 4.2 Explain how this policy could enhance the delivery of secondary and tertiary care (30 marks) services in Sri Lanka. 4.3 Describe the challenges the Ministry of Health may face in implementing this policy. (40 marks) 4.4 List four other than the aspects of healthcare delivery that may need to be addressed to improve the quality of primary care. (20 marks) 5. Maternal suicides are one of the emerging health issues in Sri Lanka. As Nallur MOH, you are tasked with prevention of maternal suicide through mental health promotion in your area. 5.1. List 5 non-health sector stakeholders you could involve in maternal suicide (10 marks) prevention in your division. 5.2. Explain the role of the area Public Health Midwife in maternal suicide prevention. (20 marks) 5.3 Describe the key steps you would follow in designing a mental health promotion intervention in your area. (30 marks) 5.4 Discuss the socio-demographic and cultural factors that you would consider when designing a mental health promotion intervention in the Nallur MOH area. (40 marks) 6. Write short notes on 6.1. Breaking bad news (25marks) 6.2. Cohort study (25marks) 6.3. Cancer registry (25marks) 6.4. Child growth monitoring practices (25marks)