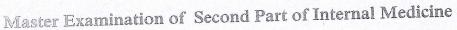


Aswan University - Faculty of Medicine

Internal Medicine Department



Paper V

Date: 6/11/2022

Round: Oct. 2022

(Total marks: 125)

Time allowed: (3 hours)



Give an account on (25 marks for each)

Case 1:

History

A 66-year-old woman, a retired nurse, consults her general practitioner (GP) with a 4-month history of tiredness, slight breathlessness on exertion and loss of weight from 71 to 65 kg. Her appetite is unchanged and normal; she has no nausea or vomiting, but over the last 2 months she has had an altered bowel habit with constipation alternating with her usual and normal pattern. She has not seen any blood in her faeces and has had no abdominal pain. She has had no postmenopausal bleeding. There is no relevant past or family history, and she is on no medication. She has smoked 20 cigarettes daily for 48 years and drinks 20-28 units of alcohol a week.

Examination

She has slight pallor but otherwise looks well. No lymphadenopathy is detected, and her breasts, thyroid, heart, chest and abdomen, including rectal examination, are all normal. The blood pressure is 148/90 mmHg.

		Normal
Haemoglobin Talendon	10.1 g/dL	11.7–15.7 g/dL
Mean corpuscular volume (MCV)	76fL	80-99 fL
White cell count	4.9 x 10 ⁹ /L	$3.5-11.0 \times 10^{9}/L$
Platelets	277 x 10°/L	150-440 × 10%L
Sodlum	142 mmol/L	135–145 mmol/L
Potassium	4.4 mmol/L	3.5-5.0 mmol/L
Urea	5.2 mmol/L	2.5–6.7 mmol/L
Creatinine	106 µmol/L	70–120 µmol/L
Urinalysis: no protein, no blood		
Blood film shows a microcytic hypoch	romic picture.	en e

Questions

- What is the likeliest diagnosis?
- How would you investigate the patient?