

# Pharmacology week 21 – Gastrointestinal tract

'Gastrointestinal Tract' makes up 5% of the pharmacology MCQ matrix.

**Reference:** Katzung's Basic and Clinical Pharmacology, 14th edition. Chapter 62

Class mechanism of action makes for an easy MCQ

Antiemetics are a popular topic

Make sure you understand **HOW** the proton pump inhibitors work and how this affects prescribing

## Learning Outcomes LOA 1

- Antiemetics
- Antiulcer medication: proton pump inhibitors

## Learning Outcomes LOA 2

- Antiulcer medication: H2 receptor antagonists
- Antispasmodics

## Learning Outcomes LOA 3

- Antiulcer medication: other agents not previously specified
- Antidiarrhoeals
- Laxatives
- Topical rectal agents

## Questions to consider

- Revise the pathophysiology of nausea and vomiting - what are the targets of antiemetics?
- How does metoclopramide work? When should it be avoided/used with caution?
- Tell me about ondansetron
- Outline the drugs used in the treatment of reflux and peptic ulcer disease
- What are some strategies to increase the effectiveness of proton pump inhibitor use? Why is an IV infusion preferred to a bolus?
- Why isn't cimetidine more widely used?
- How do the antidiarrhoeals work? When are they indicated?
- Outline the mechanism of action of the different classes of laxatives
- What medications are used in inflammatory bowel disease? How do they work?

# Physiology week 21 – Revision and Catch-up



Use this week to revise renal physiology  
(weeks 11-12)



If you haven't already, start looking at  
and practicing from past Vivas - if you  
can't explain a concept, you probably  
don't really understand it....



Practice describing how the renin-  
angiotensin system works, and the fate  
of water, H<sup>+</sup> and electrolytes

# Pathology week 21 - Environmental

'Environmental Pathology' makes up 5% of the pathology MCQ matrix.

**Reference:** Robbins and Cotran Pathologic Basis of Disease, 9th edition. Chapter 9



This weeks is a bit broad, try to keep your momentum going - only 2 weeks of the study guide are left!



Look carefully at lead, how it's effects vary with age, and with exposure levels



Obesity, smoking and geographical burdens of disease crop up

## Learning Outcomes LOA 1

- Therapeutic drugs
- Nontherapeutic agents
- Physical injuries

## Learning Outcomes LOA 3

- Personal exposure
- Air pollution
- Heavy metals and industrial exposure
- Radiation
- Nutritional pathology

## Questions to consider

- How has the burden of disease changed globally over time?
- What are the most common causes of death in developed versus developing countries? How does this change for paediatric mortality?
- What are the potential effects of the different air pollutants?
- What happens in acute CO poisoning? How about chronic exposure?
- Describe the varying clinical picture with increasing lead levels on exposure. Why are children more susceptible?
- Briefly outline the clinical presentation with mercury, arsenic and cadmium poisoning
- Outline the diseases known to be associated with occupational exposures
- What is the effect of the different constituents of tobacco smoke? What are the organ effects and disease states associated with smoking?
- What is the effect of smoking on survival? Does this change if smoking is ceased?
- Outline the key changes and effects associated with alcohol consumption. How does it mediate these effects on a cellular level?
- Outline the toxic effects of some common therapeutic agents and drugs of abuse
- Outline the effects of thermal and electrical injury and ionising radiation
- Outline the common recognised nutritional diseases
- What is the role of obesity in disease?

# Anatomy week 21 – Revision and Catch-up



Make sure you've spent time looking at the anatomical models



This is the ONLY catch-up week for anatomy



Go back to any content you have missed (feet anyone??)