

Answer Sheet – Hong Kong Medical Journal December 2014 Issue

Name: _____

Hong Kong Academy of Medicine	Hong Kong Medical Association
<i>For Academy Fellows:</i> College: _____ Fellowship No: _____ <i>For MCHK CME Registrants:</i> MCHK Reg. No. _____	HKMA Membership or CME No.: _____ HKID No: ____ - ____ - ____ X X (X) Contact Telephone No.: _____ Signature: _____

I. Subthalamic nucleus deep brain stimulation for Parkinson's disease: evidence for effectiveness and limitations from 12 years' experience	<i>True</i>	<i>False</i>
A. Which of the following disabling symptom(s) of Parkinson's disease is/are effectively controlled by subthalamic nucleus deep brain stimulation? 1. Tremor 2. Rigidity 3. Bradykinesia 4. Dyskinesia 5. Dysarthria	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
B. Which of the following brain region(s) is/are the target(s) selected for deep brain stimulation for Parkinson's disease? 1. Ventralis intermedius thalamic nucleus 2. Globus pallidus interna 3. Subthalamic nucleus 4. Cingulate gyrus 5. Pedunculo pontine nucleus	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
II. Management of secondary lymphoedema	<i>True</i>	<i>False</i>
A. Which of the following statement(s) about the surgical management of lymphoedema is/are true? 1. Surgery is the mainstay for management of primary lymphoedema. 2. Lymphaticovenular anastomosis can be performed under local anaesthesia. 3. Liposuction for lymphoedema can reduce the need to wear pressure garments postoperatively. 4. Diuretics can be a useful adjunct in the medical management of lymphoedema. 5. Low-level laser therapy has not been shown to have any benefit in the management of lymphoedema.	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
B. Which of the following statement(s) regarding post-mastectomy lymphoedema is/are true? 1. Symptomatic lymphoedema affects more than half of the patients after mastectomy. 2. Sentinel node biopsy reduces the risk of developing lymphoedema when compared with axillary dissection. 3. Surgery is not considered useful in early-stage lymphoedema. 4. Lymph node transfer for the treatment of lymphoedema can be performed at the same time as breast reconstruction. 5. Charles procedure is the treatment of choice for arm lymphoedema.	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>