

RAN-2006000101030001

Ist MBBS Examination November - 2023

Biochemistry: Paper - I

Set - 1

l:/I	ıstru	ctions		
		► નિશાનીવાળી વિગતો ઉત્તરવહી <mark>:</mark>		
1 3 1 1		ly the details of r signs on	your answe	r book
	of the	Examination:		
1				
_		Subject : mistry : Paper - I - Set - 1		
Subjec	ct Code	No.: 2006000101030001		Student's Signature
		Section	on - A : MC	CQ 20 Mar
1.	9	subcellular organelle kno	own as 'Suid	cidal bag' is :
1.	(a)	subcellular organelle kno Peroxisome	own as 'Suic b)	cidal bag' is : Lysosome
1.	9	subcellular organelle kno	own as 'Suid	cidal bag' is :
1.	a) c)	subcellular organelle kno Peroxisome	own as 'Suic b)	cidal bag' is : Lysosome
	a) c)	subcellular organelle kno Peroxisome Centrosome	own as 'Suic b)	cidal bag' is : Lysosome
	a) c) Me	subcellular organelle kno Peroxisome Centrosome mbrane lipids constitute:	own as 'Suic b) d)	cidal bag' is : Lysosome Nucleosome
	a) c) Mer a) c)	subcellular organelle kno Peroxisome Centrosome mbrane lipids constitute: Phospholipids	b) d) b) d)	Lysosome Nucleosome Sphingolipids All of the above
2.	a) c) Mer a) c)	subcellular organelle kno Peroxisome Centrosome mbrane lipids constitute: Phospholipids Cholesterol	b) d) b) d)	Lysosome Nucleosome Sphingolipids All of the above
2.	a) c) Meta) c) The	subcellular organelle kno Peroxisome Centrosome mbrane lipids constitute: Phospholipids Cholesterol	b) d) b) d) d in synovia	cidal bag' is: Lysosome Nucleosome Sphingolipids All of the above
2.	a) c) Met a) c) The a) c)	subcellular organelle knot Peroxisome Centrosome mbrane lipids constitute: Phospholipids Cholesterol e glycosaminoglycan foun Hyaluronic acid Heparan sulphate	b) d) d in synovia b) d)	Lysosome Nucleosome Sphingolipids All of the above al fluid is: Heparin Keratan sulphate
2.	a) c) Met a) c) The a) c)	subcellular organelle knot Peroxisome Centrosome mbrane lipids constitute: Phospholipids Cholesterol e glycosaminoglycan foun Hyaluronic acid Heparan sulphate	b) d) d in synovia b) d)	Cidal bag' is: Lysosome Nucleosome Sphingolipids All of the above Il fluid is: Heparin

5.	The	coenzyme of transketolase is	3:	
	a)	TPP	b)	PLP
	c)	NAD+	d)	Biotin
6.	Acc	cumulation of sorbitol in tissu	e leads	to:
	a)	Cataract formation	b)	Peripheral neuropathy
	c)	Nephropathy	d)	All of the above
7.	Wh	ich of the following is Poly u	nsaturai	ted fatty acid?
	a)	Palmitic acid	b)	Palmitoleic acid
	c)	Linoleic acid	d)	Oleic acid
8.	The	transport form of dietary lipi	ds is :	
	a)	Chylomicrons		Fatty acids
	c)	Monoacylglycerol	d)	Triacylglycerol
9.	Rat	e limiting step of fatty acid sy	nthesis	is:
	a)	Acetyl CoA carboxylase	b)	Glycerol kinase
	c)	Hormone sensitive lipase	d)	Co-lipase
10.	The	e apolipoprotein specific for Ll	DL is :	
	a)	Apo B 100	b)	Apo B 48
	c)	Apo C I	d)	Apo C II
11.	Ace	etyl CoA metabolite is derived	from:	
	a)	Carbohydrates	b)	Proteins
	c)	Lipids	d)	All of the above
12.	Ref	erence range of Serum total ca	ılcium i	S:
	a)	8.5 - 10.5 mg/dL	b)	8.5 - 10.5 gm/dL
	c)	8.5 – 10.5 mg/L	d)	8.5 – 10.5 gm/L
13.	Hor	mone involved in uncoupling	of oxid	ative phosphorylation is:
	a)	Insulin	b)	Thyroxine
	c)	Epinephrine	d)	All of the above
14.	The	principal anion of ECF is:		
	a)	Chloride	b)	Bicarbonate
	c)	Protein	d)	Phosphates

1	5.	Total	l pCO ₂ is increased in:		
	A. A	a)	Respiratory acidosis	b)	Metabolic alkalosis
		c)	Metabolic acidosis	d)	Respiratory alkalosis
	16.	Prote	einuria is defined as :		
		a)	\geq 50 mg/day protein in urine		
		b)	≥ 100 mg/day protein in urine		Council de Fares de Paris de Company
		c)	≥ 150 mg/day protein in urine		
		d)	≥ 200 mg/day protein in urine		
	17.	Para	meter(s) assessed to test the syr	thetic	function of liver:
		a)	Prothrombin	b)	Ceruloplasmin
		c)	al-Antitrypsin	d)	All of the above
	18.	The	RDA for proteins is:		
		a)	15 - 25gm/Kg/day	b)	0.75 - 0.8 gm/Kg/day
		c)	0.2-0.4 gm/Kg/day	d)	5 - 10 gm/Kg/day
	19.	Cyt	ochrome P450 is involved in det	toxifica	ation by:
		a)	Hydrolysis	b)	Oxidation
		c)	Conjugation	d)	Reduction
	20.	The	following are the characteristic	s of fre	ee radicals, EXCEPT :
		a)	Highly reactive		
		b)	Short half-life	1916	
		c)	Cytotoxic		
		d)	Not produced during normal r	netabo	lism
			Section	- B	40 Marks
			or section B and C:		
(1)			/black ball point pen only.		
(2)			bers to the right indicates full magrams wherever necessary.	arks.	
				110	14. Maria da 1964 de 1 Notas de 1964
Q. 2.	A.		ng Answer Questions. (ANY Tocuss source, RDA, metabolism ($(2 \times 10 = 20)$ otion, transport, and storage)
		and	d functions of Iron. Add a note o		ous anemias related to iron
		def	iciency and overload.		(1+1+3+2+3=10)

- B. Explain beta-oxidation of 16 carbon atom saturated fatty acid. How it is regulated? Explain how many ATPs are synthesized? (6 + 2 + 2)
- C. Define glycogenesis and glycogenolysis. Write the reactions of glycogenesis and glycogenolysis in liver, Add a note on Glycogen storage disorders.

Q. 3. Write Brief Answer / Justifications / Biochemical basis. (ANY TEN) $(10 \times 2 = 20)$

- a) Glucose is required for the absorption of Na+.
- b) Muscle glycogen cannot contribute to blood glucose level.
- c) Respiratory Distress Syndrome (RDS) is observed in premature babies.
- d) HDL cholesterol is good cholesterol.
- e) In uncontrolled diabetes mellitus cataract is developed at early age
- f) Aspirin is used as anti-inflammatory drug.
- g) Brain cannot utilise fatty acid for energy purpose.
- h) Inhibitors of ETC?
- i) Why there is oedema in protein malnutrition?
- j) Blood is collected in fluoride bulb for estimation of blood glucose level.
- k) Examples of ketone bodies and functions (any two).

Section - C

40 Marks

Q. 4. Short answer questions. (ANY FOUR)

 $(4\times 5=20)$

- A. Renal Function Test.
- B. Outline doctor patient communication. Add a short answer on components of communication in medical encounters.
- C. Protein Energy Malnutrition (PEM).
- D. Detoxification reactions.
- E. Complications of Diabetes mellitus.

Case - 1:

A 65 year old man was brought to the hospital in a semiconscious state. The patient displayed a typical hyperventilatory breathing pattern with fruity smell in his breath. The pulse was feeble and hypotension was noted. The laboratory reports were ordered and were as below:

pH: 7.10, pCO $_2$ 39.0 mm of Hg, HCO $_3^-$: 14.0 mmol /L, Serum Na $^+$: 135.5 mmol /L, K $^+$: 6.5 mmol/L, C1 $^-$: 90 mmol/L, Random Blood Sugar: 451 mg/dl.

- 1) Identify the acid base disorder in above case with justification?
- 2) Calculate Anion Gap. Give any 2 causes of High Anion Gap Metabolic Acidosis.
- 3) Give biochemical basis of 'fruity smell' in this patient.
- 4) Explain the basis of hyperkalemia in this case.
- 5) Mention normal serum values for pH & blood gases.

Case - 2:

A 40-year man consulted an ophthalmologist to obtain a prescription for reading glasses. The ophthalmologist noticed that the patient had bilateral arcus senilis and recommended to consult physician. Physician noticed that he also had tendon xanthomata arising from Achilli's tendons. Family history revealed his father had died of heart attack at the age of 40. An ECG taken at rest was normal but ischemic changes developed on exercise. Analysis of fasting blood for lipids showed the following:

Parameter	Patient's results	Normal range
Total cholesterol	530 mg/dL	< 200 mg/dl
Serum triglycerides	110mg/dL	< 150 mg/dl
LDL cholesterol	440 mg/dL	< 130 mg/dl
HDL cholesterol	64 mg/dL	> 60 mg/dl

- 1. This patient is suffering from which type of hyperlipidemia?
- 2. What is the possible cause of this condition?
- 3. Justify- LDL is termed as bad cholesterol.
- 4. What are the apo proteins? Mentions its functions.
- 5. Write down the important functions of cholesterol.



RAN-2006000101030002

Ist MBBS (Biochemistry) Examination November - 2023

Biochemistry: Paper - II

Set - 2

ne: 3 H	ours	1			[Total Ma	rks: 100		
ના : / In	struc	ctions						
Fill up	strictl	∼ નિશાનીવાળી વિગતો ઉત્તર y the details of 🖝 sign	વહી પર અવશ્ય લખવી is on your answer	l.	ok Seat No.:			
		Examination:		-				
180		(Biochemistry)		-				
		Subject :						
		nistry : Paper - II - Set -						
Subjec	t Code	No.: 2006000101030002	2		Student's Signa	ature		
) All	questi	ons are compulsory.						
	MC	O has only one corre	-4					
	Each MCQ has only one correct answer. One mark for correct answer. No negative marking.							
to the last		시간에서 사용하다 그 그 사람이 하는 사람이 없어 없었다.		kin	ıg.			
The state of the s		시간에서 사용하다 그 그 사람이 하는 사람이 없어 없었다.		kin	ng.			
to the last		for correct answer.				20 Mark		
) One	mark	for correct answer.	No negative man	ÇQ		20 Mark		
to the last	mark	for correct answer.	No negative man	CQ na le		20 Mark		
) One	mark Gou	for correct answer.	No negative man	CQ na le	evels of	20 Mark		
) One	Gou a. c.	for correct answer. Solution is characterized by Urea Creatine	No negative man Section - A: MC increased plasm b. d.	CQ na le U	evels of Uric acid	7		
) One	Gou a. c.	for correct answer. So that is characterized by Urea Creatine ch-Nyhan syndrome,	No negative man Section - A: MC increased plasm b. d.	CQ na le (evels of Uric acid Creatinine essive disorder is due to t			
) One	Gou a. c. Less	t is characterized by Urea Creatine ch-Nyhan syndrome, t of the enzyme:	No negative man Section - A: MC increased plasm b. d.	CQ na le (evels of Uric acid Creatinine essive disorder is due to t			
) One	Gou a. c. Less lack a.	t is characterized by Urea Creatine ch-Nyhan syndrome to of the enzyme: Hypoxanthine-gua	No negative man Section - A: MC increased plasm b. d. the sex linked r	CQ na le (evels of Uric acid Creatinine essive disorder is due to t	7		
) One	Gou a. c. Less lack a. b.	t is characterized by Urea Creatine ch-Nyhan syndrome t of the enzyme: Hypoxanthine-gua Xanthine oxidase	No negative man Section - A: MC increased plasm b. d. the sex linked ranine phosphorib	CQ na le (evels of Uric acid Creatinine essive disorder is due to t	7		
) One 1. 2.	Gou a. c. Less lack a. b. c. d.	t is characterized by Urea Creatine ch-Nyhan syndrome t of the enzyme: Hypoxanthine-gua Xanthine oxidase Adenine phosphor Adenosine deamin	No negative man Section - A: MC increased plasm b. d. the sex linked r inine phosphorib	CQ na le ((() () () () () () () () (evels of Uric acid Creatinine essive disorder is due to t	7		
) One 1. 2.	Gou a. c. Less lack a. b. c. d.	t is characterized by Urea Creatine ch-Nyhan syndrome t of the enzyme: Hypoxanthine-gua Xanthine oxidase Adenine phosphor Adenosine deamin	No negative man Section - A: MC increased plasm b. d. the sex linked r inine phosphorib	CQ lana le la	evels of Uric acid Creatinine essive disorder is due to to	7		

34 34				
4.	The	anti-egg white injury factor i	s:	
	a.	Avidin	b.	Choline
	c.	Biotin	d.	Isoniazid
5.	Imn	nunoglobulin present in body	secret	ion is:
	a.	Ig M	b.	Ig D
	c.	Ig E	d.	Ig A
6.	The	number of amino acids in ant	idiure	tic hormone is
	a.	9	b.	18
	c.	27	d.	36
7.	A no	on-functional plasma enzyme	is	
	a.	Psudocholinesterase		경기(1) 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전 1 전
	b.	Lipoprotein lipase		
	c.	Proenzyme of blood coagula	tion	
	d.	Alanine Transaminase		
8.	In co	ompetitive enzyme inhibition:		
	a.	The structure of inhibitor ger	nerally	resembles that of the substrate
	b.	Inhibitor decreases apparent	Km	
	c.	Km remains unaffected		
	d.	Inhibitor decreases Vmax wi	thout a	affecting Km
9.	Niac	in is synthesized in the body fi	rom:	
	a.	Tryptophan	b.	Tyrosine
	c.	Glutamate	d.	Aspartate
10.	activ	min K serves as a coenzyme in ity of several enzymes of bloowing amino acid modifications Aspartate to β-carboxyasparta	d coag requi	ulation cascada William
	b.	Glutamate to y-carboxyglutan		
	c.	Lysine to hydroxylysine		
	d.	Lysine to 8 mathed 1		

	a.	a. Proteolytic enzymes activated by hydrolysis					
	b.	Enzymes with identical primary structure					
	c.	Similar enzymes that catalyse different reaction					
	d.	Chemically, immunological forms of an enzyme		나는 사람들이 아름다면 생각하는 사람이 하네요? 그는 이 것			
12.	Pyrimidine Dimers are seen in :						
	a.	Gout	b.	Xeroderma pigmentosa			
	c.	Lesch Nyhan Syndrome	d.	Mutation by alkylating agents			
13.		most of the ultraviolet absorper content of:	otion of	proteins above 240 nm is due to			
	a.	Tryptophan	b.	Aspartate			
	c.	Glutamate	d.	Alanine			
14.	Sak	taguchi's reaction is specific for	or				
	a.	Tyrosine	b.	Proline			
	c.	Arginine	d.	Cysteine			
15.	Ma	genta tongue is found in the d	eficienc	y of the vitamin:			
	a.	Riboflavin	b.	Thiamine			
	c.	Nicotinic acid	d.	Pyridoxine			
16.	In brain, the major metabolism for removal of ammonia is the formation of						
	a.	Glutamate	b.	Aspartate			
	c.	Asparagine	d.	Glutamine			
17.	Th	e sparing action of methioning	e is :	Stage High supplies			
	a.	Tyrosine	b.	Cystine			
	c.	Arginine	d.	Tryptophan			
18.		Which of the following plasma protein prevents loss of hemoglobin in Urine?					
	a.	Haptoglobin	b.	Albumin			
	c.	Transferrin	d.	Hemopexin			

- 19. Following are the applications of Polymerase Chain Reaction (PCR), EXCEPT:
 - a. Prenatal diagnosis and carrier detection
 - b. Splicing of DNA
 - c. Forensic analysis of DNA samples
 - d. Detection of Viral and bacterial infections
- 20. The two nitrogens of the pyrimidine ring are contributed by
 - a. Ammonia and glycine
 - b. Aspartate and carbamoyl phosphate
 - c. Glutamine and ammonia
 - d. Aspartate and ammonia

Section - B

40 Marks

Instructions for section B and C:

- (1) Use blue/black ball point pen only.
- (2) The numbers to the right indicates full marks.
- (3) Draw diagrams wherever necessary
- Q. 2. Long Answer Questions. (ANY TWO)

 $(2 \times 10 = 20)$

- A. Describe the process of replication of DNA in a prokaryotic cell.
 What are different types of mutations? Write a note on different
 DNA repair mechanisms. (5 + 3 + 2)
- B. Describe the Catabolism of heme. Add a note on hyperbilirubinemias. (5 + 5)
- C. Describe primary and secondary structure of protein with example.
 Add a note on functions of plasma proteins. (6+4)
- Q. 3. Write Brief Answer / Justifications / Biochemical basis. (ANY TEN)

 $(10 \times 2 = 20).$

- a) Adenosine deaminase deficiency cause severe combined immuno-deficiency disorder.
- b) Mention 4 biochemical functions of Albumin
- c) Vitamin D Acts as a hormone. Justify.
- d) Biologically important peptides.
- e) Write down two clinical applications of ELISA
- f) Blue fluorescent light is used in the treatment of neonatal jaundice.

- g) Blood urea levels depletes in liver disease. Justify.
- h) Post-transcriptional modifications
- i) Telomerase inhibitors can be use in treatment of malignancy,
- j) Functions of vitamin C (any four).
- k) Zwitter ions have least buffering & amp; solubility capacity.

Section - C

40 Marks

Q. 4. Short answer questions. (ANY FOUR)

 $(4\times5=20)$

- a) Diagnostic applications of enzymes.
- b) Gout.
- c) Tumor markers.
- d) Vitamin A .: Functions and Deficiency disorders.
- e) Recombinant DNA technique.

Q. 5. Clinical Cases. (ALL COMPULSORY)

 $(10 \times 2 = 20)$

Case - 1:

A 55-year-old man attended OPD with complaints of pain in lower limbs, generalized fatigue for last 4 months. He was vegetarian by diet. His laboratory investigations showed low Vitamin B_{12} levels, elevated Homocysteine level and normal folate level. Peripheral smear shows macrocytic anemia. Physician prescribed the vitamin B_{12} injection and symptoms were improved.

- 1. Enumerate causes of vitamin B_{12} deficiency. What is a daily requirement of vitamin B_{12} for adult?
- 2. What is folate trap?
- 3. Why increased homocysteine level leads to cardiovascular problem?
- 4. Mentioned the Coenzyme form of vitamin B_{12} . Write reactions catalyzed by each of them.
- 5. Why vitamin B₁₂ deficiency leads to macrocytic anemia and neurological symptoms?

Case - 2:

52 years old patient was admitted to the casualty department of hospital in a serious condition. He had become increasingly depressed after the death of his wife. His daughter found him in an unconscious state when she had come to see him in the morning. One and a half empty bottles of alcohol were found in the room. When the alcohol was examined for its contents, it was found to be containing high amount of methanol. Doctors on duty diagnosed that it was a case of methanol intoxication and decided to start treatment with ethanol.

- 1. Enumerate various classes of enzymes. Which class of enzymes is required to metabolize alcohols?
- 2. Why methanol is toxic?
- 3. Explain ethanol is used in the treatment of methanol poisoning.
- 4. Enumerate salient differences between competitive and non competitive inhibition.
- 5. Why in competitive inhibition K_m is increased but V_{max} is not affected?