



THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain
Reg No 1955/000003/08Part I Examination for the Fellowship of the
College of Clinical Pharmacologists of South Africa

30 June 2016

Paper 1

(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 a) Redraw and complete the table below comparing the objectives, sample sizes and inclusion / exclusion criteria for Phase 1, 2a and 2b clinical trials on a novel inhaled bronchodilator. (12)

	Phase 1	Phase 2a	Phase 2b
Primary objective/s			
Sample size range (approximate)			
Inclusion criteria			
Exclusion criteria			

- b) Discuss how the objectives, sample sizes and inclusion / exclusion criteria for a Phase 1 study of a novel chemotherapy for pancreatic cancer would differ from those for a novel inhaled bronchodilator. (3)

[15]

- 2 Outline your analysis plan to compare the cost effectiveness of a fixed dose combination (FDC) inhaler containing the inhaled long acting beta-agonist salmeterol and the inhaled corticosteroid fluticasone with the co-administration of two inhalers, one containing salmeterol and the other fluticasone (dual inhalers). You have access to individual patient data from 16 500 patients enrolled in Phase 2, 3 and 4 studies comparing the FDC inhaler with the dual (co-administered) inhalers.
- a) What are the main factors that you consider could alter the cost-effectiveness of the FDC over dual inhaler therapy? (3)
 - b) List key study end points that you would cost. (7)
 - c) Discuss the limitations of your cost-effectiveness evaluation for informing policy for the South African Essential Medicines List. (5)
- [15]
- 3 Briefly describe the function of three voltage-gated ion channels and give two examples of drugs targeting each ion channel. [15]
- 4 Describe the different types of agonists and antagonists, and give one example of a drug for each group. [25]
- 5 Discuss the principal investigator's responsibilities after an approved prospective study of human subjects has been concluded. [10]
- 6 Describe the principles of obtaining informed consent. [10]
- 7
- a) A new treatment for stroke provides a good outcome in 20% of those treated compared with a good outcome in 10% of those treated with placebo. A major bleeding complication occurs in 10% of those treated with the new drug and 5% of those treated with placebo. Determine the numbers needed to treat and to harm, and indicate how you calculated these. (5)
 - b) Briefly discuss key points important in the critical evaluation of a meta-analysis. (5)
- [10]



FC Clin Pharm(SA) Part I

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1 July 2016

Paper 2

(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 Discuss the actions of morphine and describe the pharmacological mechanisms of opiate tolerance and dependence. [20]
- 2 Describe the three main mechanisms of action of the anti-epileptic drugs, giving one example of a drug for each mechanism. [15]
- 3 Predict the effects of the muscarinic antagonist atropine by using first principles of explaining the effect of acetylcholine on muscarinic receptors. [15]
- 4 Discuss the steps involved in adrenergic neurotransmission. [10]
- 5 Describe five common genetic disorders/polymorphisms that predispose to abnormal drug response and illustrate each one with the clinical effect on one drug example. [15]
- 6 Answer the following questions about spontaneous reporting systems for suspected adverse drug reactions
 - a) What is meant by the term "signal" in a spontaneous reporting system? (1)
 - b) List four limitations of spontaneous reporting systems for suspected adverse drug reactions. (4)
 - c) Outline two study designs which you might use to confirm or refute a signal. List the strengths and weaknesses of each study design. (10)
- 7 Write short notes on drug desensitisation for drug hypersensitivity reactions. [10]