

ASSESSMENT OF 15 MCQS

FPSC NO : 107

MCQS ON ACHIEVING MUSCLE AND METABOLIC HEALTH

SUBMISSION DEADLINE: 16 MAY 2023, 12 NOON

INSTRUCTIONS

- To submit answers to the following multiple choice questions, you are required to log on to the College Online Portal (<https://lms.wizlearn.com/cfps/>)
- Please contact sfp@cfps.org.sg if you have not received an email on the new LMS account.
- Attempt ALL the following multiple-choice questions.
- There is only ONE correct answer for each question.
- The answers should be submitted to the College of Family Physicians Singapore via the College Online Portal before the submission deadline stated above.
- There will be NO further extension of the submission deadline

1. An 80-year-old man noticed difficulty climbing stairs in the past three months. Which of the following is essential for the diagnosis of “Possible Sarcopenia” by Asian Working Group for Sarcopenia (AWGS) 2019 criteria?
 - A. Handgrip strength <18 kg
 - B. History of recurrent falls
 - C. Low muscle mass on DXA
 - D. Sit to stand test >12 s
 - E. Usual gait speed <1.0 m/s
2. In which of the following circumstances would the use of SARC-F to screen for sarcopenia in a 65-year-old lady be inappropriate?
 - A. Body mass index of 22 kg/m²
 - B. Chronic heart failure
 - C. Dentition problems
 - D. Statin treatment
 - E. Type 2 Diabetes Mellitus
3. Which of the following about proper measurement of handgrip strength is correct?
 - A. Average value of 2-3 trials
 - B. Flexed elbow in a standing position
 - C. Single attempt from the dominant hand
 - D. Sitting position using Jamar dynamometer
 - E. The type of dynamometer does not matter
4. Which of the following is the recommended modality when it is necessary to determine muscle mass for a confirmatory diagnosis of sarcopenia in clinical practice?
 - A. Bioelectrical impedance analysis (BIA)
 - B. Dual-energy X-ray Absorptiometry (DXA)
 - C. Magnetic Resonance Imaging (MRI)
 - D. Ultrasound
 - E. Urinary creatinine
5. Which of the following is most beneficial for increasing muscle strength in older adults with Sarcopenia?
 - A. Aerobic exercise
 - B. Leucine supplementation
 - C. Resistance exercise
 - D. Testosterone treatment
 - E. Vitamin D supplementation
6. Modest and sustained weight loss in overweight patients with T2DM has been shown to improve:
 - A. Blood pressure and lipid
 - B. Glycaemia
 - C. Quality of life
 - D. Reduced need for medications
 - E. All of the above
7. For overweight patients with T2DM, which of the following would be most appropriate in the diabetes management with potential of improved glycaemic control and promoting significant weight loss?
 - A. Lixisenatide and glargine (Soliqua)
 - B. Liraglutide and dapagliflozin
 - C. Metformin and acarbose
 - D. Metformin and dapagliflozin
 - E. Metformin and linagliptin
8. Based on the Look AHEAD studies, which of the following statement is FALSE?
 - A. The study was designed specifically to examine the effect of weight loss on a primary outcome of cardiovascular events in overweight and obese patients with T2DM
 - B. Weight loss can lower cardiovascular events in overweight T2DM
 - C. Weight loss was associated with a significant reduction of glycosylated haemoglobin (HbA1c) levels and improvement in several other cardiovascular risk factors

- D. Patients with substantial weight loss, shorter duration of diabetes, a lower HbA1c level at entry, and those not using insulin had the highest rates of remission or partial remission
- E. There seemed to be a correlation between weight loss and improvements in cardiovascular risk factors, with larger weight losses associated with greater benefits

9. The following statements about weight loss in overweight patients with T2DM are true except:

- A. Even modest amounts of weight loss have been shown to improve glycaemic control
- B. Dietary energy restriction with a very low-calorie diet (600 kcal/day) for 8 weeks normalised beta-cell function and resulted in a reversal of T2DM
- C. The study showed that it is not possible to achieve, and maintain, substantial weight loss for many individuals by non-surgical methods in primary care settings
- D. T2DM is not necessarily a lifelong condition, and it is reversible by weight loss
- E. A higher chance of T2DM remission can be achieved with ≥ 10 kg weight loss

10. The following statements are true about medical nutritional therapy (MNT) in overweight patients with T2DM except:

- A. Strong evidence supports cost effectiveness of MNT intervention with A1C absolute decrease up to 3%
- B. Using a meal replacement plan is not considered as part of MNT intervention
- C. Significant weight loss can be attained with MNT that create an energy deficit, of 500-750 kcal/day, regardless of macronutrient composition
- D. A and B
- E. B and C

11. Regarding obesity as a disease, which of the following statements is TRUE?

- A. Obesity is not a chronic disease as it is the result of a person's choice of lifestyle
- B. Obesity is a disease as there is a distinct disruption to physiology, resulting from distinct multiple causes
- C. Socio-economic factors and food insecurity decrease one's likelihood of consuming highly processed, energy-dense foods
- D. If a mother loses a lot of weight during her early pregnancy, her child is less predisposed to childhood obesity and insulin resistance
- E. Weight discrimination and stigma result in people living with obesity receiving more treatment in general

12. Within the Motivational interviewing (MI) framework, advice may be given by a General Practitioner to a patient:

- A. At any time
- B. When the patient requests it
- C. After the general practitioner receives permission to give it
- D. A and B
- E. B and C

13. For improved prognosis, GPs can provide effective nutritional counselling for which of the following diseases or disorders

- A. Overweight and obesity
- B. Type 2 diabetes
- C. Cancer
- D. Cardiovascular disease
- E. All of the above

14. The management of overweight and obesity should include ALL of the following EXCEPT:

- A. Sustainable dietary changes
- B. Physical activity
- C. Behaviour modification
- D. Social support
- E. Crash diets

15. Improving Adherence to Medical Nutrition Therapy with Behaviour Modification Embedded in Practice can be deployed to increase physical activity. Which of the following is NOT a behavioural strategy for increasing physical activity?

- A. Provision of rewards
- B. Health education
- C. Self-monitoring
- D. Goal setting
- E. Enhancing self-efficacy

FPSC105 "Chronic Disease Management 2023" Answers to 30 MCQs Assessment

1.	C	11.	C	21.	C
2.	E	12.	E	22.	A
3.	B	13.	E	23.	A
4.	D	14.	E	24.	A
5.	A	15.	D	25.	A
6.	E	16.	E	26.	C
7.	E	17.	E	27.	D
8.	A	18.	B	28.	D
9.	C	19.	A	29.	D
10.	B	20.	D	30.	E