



**Africa HEALTH** CPD Challenge  
Questions

Were you paying attention? Test your retentive capacities on issues raised in this edition of *Africa Health*. You can quietly test yourself, or – and we're particularly keen on this – you could make it a part or the foundation of a Journal Club in your department or health institution. Life-long learning is a collaborative exercise and the whole health team can be positively stimulated by being involved in such discussion.

### 1. Urban malaria: myth and reality

Q: In what sort of water do malaria-carrying mosquitoes prefer to lay their eggs?

- Still, clean, sun-exposed water
- Moving river water
- Stagnant sun-exposed water

Q: Name three other illnesses that urban residents confuse with malaria.

Q: In the targeting of insecticide-treated net distribution what local knowledge would prove useful?

### 2. Coping with cholera: the importance of co-ordinated planning

Q: How many cholera bacteria are there?

- 15
- 24
- 60

Q: Contaminated vegetables are one source of cholera infection. Give two reasons for this happening.

Q: The asymptomatic carrier status of cholera may persist for several months. Is this statement

- True
- False

Q: When preparing an emergency pit latrine what is it important to remember about the bottom of the pit?

Q: What is the simplest and most cost-effective method of sanitising water in the home?

### 3. The Global Fund

Q: Which four countries have achieved universal access to ART prophylaxis for PMTCT?

Q: What is the leading cause of death among people infected with HIV?

- Malaria
- Tuberculosis
- Cholera

### 4. Emergency obstetric services

Q: Why did the hospital staff decide the pregnant mother needed a caesarean section?

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Q: Why are subsequent caesarean sections a more complicated operation?

### 5. Diagnostic approach to tropical skin infections

Q: In the diagnosis of skin infection certain aspects of the patient's medical history are essential. Name two.

Q: Cutaneous leishmaniasis can be broadly divided into two classifications. What are they?

Q: How is onchocerciasis (river blindness) transmitted?

Q: The tumbu fly is the commonest of the *Cordylobia* species. Where does it typically lay its eggs?

Q: In tungiasis, the fertilised jigger flea burrows into the skin. Where on the body does this usually take place?

### 6. Clinical Review

Q: At the end of 2009, the estimated number of people living with HIV/AIDS in sub-Saharan Africa was:

- 18.5 million
- 22.5 million
- 26.5 million

Q: At the end of 2009, the number of people on anti-retroviral therapy in sub-Saharan Africa was:

- 1.4 million
- 3.9 million
- 8.2 million

Q: In the CAPRISA 004 trial, the use of vaginal 1% tenofovir gel in HIV-negative women was associated with an overall protective efficacy of:

- 39%
- 54%
- 65%

Q: In Uganda, a campaign for male circumcision is being rolled out. Which other existing public measures are in place to reduce the risk of HIV infection?

Q: Who discovered oxygen?

Q: What percentage of room air is oxygen?

### 7. Medicine Digest

Q: Around the world what ratio of people are thought to have been infected with the hepatitis E virus?

Q: Of the more than 170 million people infected with hepatitis C how many will develop cirrhosis?

- 1 in 3

- b. 1 in 10
- c. 1 in 5

Q: Evidence of beta-cell autoimmunity may precede the onset of type 1 diabetes. What is thought to contribute towards this?

Q: In studying the risk of colorectal cancer a lifestyle index was calculated. On what was this based?

Q: Antipsychotic drug treatment may be associated with an increased risk of venous thromboembolism (VTE). When is this most likely to happen?





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- Q1 i. Answer a.
- ii. Dengue, West Nile virus, Rift Valley fever
- iii. Knowing the location of breeding sites
- Q2 i. Answer 60.
- ii. They are fertilised with human excreta or 'freshened' with contaminated water.
- iii. True.
- iv. The bottom should never penetrate the groundwater table.
- v. Chlorination of water in a storage container using household bleach.
- Q3 i. Botswana, South Africa, Namibia, Swaziland
- ii. Answer b.
- Q4 i. Her labour was obstructed due to malpresentation.
- ii. A previous scar can have adhesions
- Q5 i. Travel history; type of activity undertaken while travelling; timing of skin lesions.
- ii. 'Old world' and 'new world'.
- iii. By blackflies.
- iv. On drying clothes.
- iv. On the patient's feet.
- Q6 i. Answer b.
- ii. Answer b.
- iii. Answer a.
- iv. Abstinence, fidelity, condom use.
- v. Joseph Priestley
- vi. 21%
- Q7 i. 1 in 3
- ii. C. 1 in 5.
- iii. Brief or no breast feeding and early exposure to complex dietary proteins.
- iv. Physical activity, waist circumference, smoking, alcohol intake, diet, and anthropometry
- v. Within the first 3 months of treatment, with use of atypical or low potency drugs, and in older patients.