CVS PHARMACOLOGY TEST BANK-FINAL

Final material = 3 lectures = 5 marks

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1) The treatment of hyperlipidemic patients with nicotinic acid (niacin) results in:

A. increases in VLDL.
B. decreases in both plasma cholesterol and TGs.
C. inhibition of HMG-CoA reductase.
D. decreases in HDL.
E. no change in total cholesterol in the plasma.

Ans: B

2) Which one of the following drugs decreases cholesterol synthesis by inhibiting the enzyme 3-hydroxy-3-methylglutaryl coenzyme A reductase?

A. Fenofibrate.
B. Niacin.
C. Cholestyramine.
D. Lovastatin.

Ans: D

3) A 42-year-old man who was started on niacin sustained-release tablets 2 weeks ago for elevated triglycerides and low HDL levels. He is complaining of an uncomfortable flushing and itchy feeling that he thinks is related to the niacin. Which of the following options can help him manage this adverse effect of niacin therapy?

A. Administer aspirin 30 minutes prior to taking niacin.

B. Administer aspirin 30 minutes after taking niacin.

C. Increase the dose of niacin to 1000 mg.

D. Change the sustained-release niacin to immediate-release niacin.

Ans: A

4) Patient comes into the ER with gallstones, after further investigations You find out that he is on drugs to treat his hyperlipidemia. Which of the following drugs could have caused his gall stones?

A. Niacin.

B. Fenofibrate

C. Ezetimibe

D. Lovastatin

Ans: B

5) Patient with diabetes has hyperlipidemia, Which drug of the following can NOT be used in his case due the risk of development of Hyperglycemia?

A. Niacin
B. Statins
C. Colestipol.
D. Ezetimibe.

Ans: A

6) The drug that inhibits the absorption of cholesterol by forming a complex with bile acids is:

A. Simvastatin
B. Ezetimibe
C. Gemfibrozil
D. Colestipol

Ans: D

7) Which of the following receptors are present on the liver?

(A) LDL receptors

(B) VLDL receptors

(C) HDL receptors

(D) Chylomicron receptors

Ans: A

8) The absorption drugs like chlorothiazide, digoxin and warfarin is decreased by:

(A) Clofibrate

(B) Cholestyramine

(C) Fish oil

(D) Lovastatin

Ans: B

- **9) Patient with hypercholesterolemia taking a combination of two anti hyperlipidemic drugs, After 4 days the patient complaining of severe myalagia and increase in creatine kinase. Which drugs did this patient use?**

A) Cholestyramine & Lovastatin.

B) Fenofibrate & Ezetimibe.

C) Lovastatin & Gemfibrozil.

D) niacin & Ezetimibe.

Ans: C

- **10) Patient went to the hospital to check his blood cholesterol level and he had an increase in LDL, The doctor prescribes one of the anti-hyperlipidemia drugs with vitamins D and E supplement, What is the most likely drug the doctor prescribed?**

A) Statins.

B) Colestipol.

C) Ezetimibe.

D) Nicotinic acid

Ans: B

- **11) Which one of the following is the most common side effect of anti-hyperlipidemic drug therapy?**

A) Elevated blood pressure.

B. Gastrointestinal disturbance.

C. Neurologic problems.

D. Heart palpitations.

Ans: B

- **12) A patient who is treated for hyperlipidemia with Pravastatin for the past 6 months.. Her physician wants to add an additional agent to block absorption of exogenous cholesterol. Which of the following choices is the best option?**

A) Niacin.

B) colestipol.

C) Gemfibrozil.

D) Ezetimibe.

Ans: D

- **13) these 2 drugs have the Same antiarrhythmic classification: disopyramide and...**

A. propranolol
B. adenosine
C. procainamide
D. sotalol
E. Diltiazem

Ans: C

- **14) A reversible lupus erythematous-like syndrome is most likely associated with this antiarrhythmic drug.**

A. quinidine gluconate
B. adenosine
C. carbamazepine
D. procainamide
E. lidocaine

Ans: D

- **15) which of the following Antiarrhythmic drugs is most likely to cause seizures (at high concentrations) due to CNS effects:**

A. quinidine gluconate
B. amiodarone
C. lidocaine
D. diltiazem
E. Propranolol

Ans: C

- **16) Antiarrhythmic drug, that acts on potassium channels:**

A. adenosine
B. sotalol
C. diltiazem
D. esmolol
E. quinidine

Ans: B

- **17) Cinchonism: adverse effect associated with which of the following antiarrhythmic drugs?**

A. procainamide

B. sotalol

C. diltiazem

D. adenosine

E. Quinidine

Ans: E

- **18) Changes in cardiac automaticity is most directly associated with changes in which slope of the pacemaker action potential?**

A. Phase 0

B. Phase 1

C. Phase 3

D. Phase 4

E. Phase 2

Ans: D

- **19) which of the following is ONLY classified as Class II antiarrhythmic drug:**

A. adenosine

B. atropine

C. sotalol

D. lidocaine

E. Mexiletine

Ans: A

- **20) Class III antiarrhythmic drug may be effective in treating ventricular arrhythmias; prolongs phase 3 (repolarization); potassium channel blocker**

A. esmolol

B. amiodarone

C. lidocaine

D. propafenone

E. moricizine

Ans: B

- **21) Which LDL-C-lowering drug class includes three yearly-administrations via subcutaneous injection?**

A. PCSK9 monoclonal antibodies
B. ATP citrate lyase inhibitor therapy
C. Cholesterol absorption inhibitor therapy
D. siRNA therapy

Ans: D

- **22) Bempedoic Acid can be combined with which of the following?**

A. PCSK9 monoclonal antibodies
B. Statins
C. Inclisiran
D. Ezetimibe
E. Volaneseron

Ans: B+D

- **23) which of the following drugs is considered a pro-drug and where is it activated?**

A. **Bempedoic Acid, in skeletal muscles.**

B. **Inclisiran, in the liver.**

C. **Bempedoic Acid, in liver and skeletal muscle.**

D. **Bempedoic Acid, in the liver only.**

E. **PCSK9 monoclonal antibodies**

Ans: D

- **24) Which one of the following drugs causes a decrease in liver triglyceride synthesis by limiting available free fatty acids needed as building blocks for this pathway?**

A. **Niacin.**

B. **Fenofibrate.**

C. **Cholestyramine.**

D. **Gemfibrozil.**

E. **Lovastatin.**

Ans: A

25) Which one of the following drugs binds bile acids in the intestine, thus preventing their return to the liver via the enterohepatic circulation?

A. Niacin.

B. Fenofibrate.

C. Cholestyramine.

D. Fluvastatin.

E. Lovastatin

Ans: C

26) Jack is a 65-year-old man who presents to his physician for management of hyperlipidemia. His most recent lipid panel reveals an LDL cholesterol level of 165 mg/ dL. His physician wishes to begin treatment to lower his LDL cholesterol levels. Which of the following therapies is the best option to lower JS's LDL cholesterol levels?

A. Fenofibrate.

B. Colesevelam.

C. Niacin.

D. Simvastatin.

E. Ezetimibe.

Ans: D

- **Which of the following patient populations is more likely to experience myalgia (muscle pain) or myopathy with use of HMG CoA reductase inhibitors?**

- A. Patients with diabetes mellitus.
  B. Patients with renal insufficiency.
  C. Patients with gout.
  D. Patients with hypertriglyceridemia.
  E. Patients taking warfarin (blood thinner).

- Correct answer = B. Patients with a history of renal insufficiency have a higher incidence of developing myalgias, myopathy, and rhabdomyolysis with use of HMG CoA reductase inhibitors (statins), especially with those that are renally eliminated as drug accumulation can occur. The other populations have not been reported to have a higher incidence of this adverse effect with HMG CoA reductase inhibitors.