## ASSESSMENT OF 30 MCQs

## FPSC NO: 47 MCQs on OBESITY: PREVENTION & MANAGEMENT Submission DEADLINE: 25 FEBRUARY 2012

## INSTRUCTIONS

- To submit answers to the following multiple choice questions, you are required to log on to the College On-line Portal (www.cfps2online.org).
- 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 On-line Portal before the submission deadline stated above.
- In the National Health Survey conducted in Singapore in 2010, obesity was defined as BMI equal or more than X kg/m². What is X?
  - A. 25.
  - B. 27.5.
  - C. 30.
  - D. 35.
  - E. 40.
- In the National Health Survey conducted in Singapore in 2010, abdominal fatness or truncal obesity for males is defined as X. What is X?
  - A. Waist hip ratio of more than 1.0.
  - Waist hip ratio of more than 0.85.
  - C. Waist circumference of 30 inches or greater.
  - D. Waist circumference of 35 inches or greater.
  - E. Waist hip ratio of more than 0.85 and waist circumference of 35 inches or greater.
- 3. In the National Health Survey conducted in Singapore in 2010, what was the prevalence of obesity for Malay Singapore residents aged 18 to 69 years?
  - A. 7.9%.
  - B. 9.5%.
  - C. 10.8%.
  - D. 16.9%
  - E. 24.0%.
- 4. The prevalence of obesity of Singaporeans in the 2010 National Health Survey with respect to household incomes was analysed. In which household income bracket would you expect to have the HIGHEST prevalence of obesity?
  - A. Less than SGD 2,000 per month.
  - B. SGD 3,000 per month.
  - C. SGD 4,000 per month.
  - D. SGD 5,000 per month
  - E. SGD 6,000 per month.

- 5. In the Singapore survey done in 2008 by AC Nielsen, on the question on what action the respondent would take to lose weight which of the following statements is correct?
  - A. 40% chose playing tennis.
  - B. 50% chose doing tai qi.
  - C. 65% chose doing physical exercise.
  - D. 75% chose to modify their diet.
  - E. 50% chose ten pin bowling.
- 6. About health promotion programmes developed by the Health Promotion Board in Singapore, which of the following is a school programme?
  - A. HEALTH Award.
  - B. Healthier Canteen Certification Program.
  - C. Healthier Dining Program.
  - D. Lose to Win.
  - E. CHERISH Award.
- 7. Childhood obesity is defined as BMI equal or greater than Xth percentile for age and sex, what is X?
  - A. 97.
  - B. 95.
  - C. 93.
  - D 90
  - E. 85.
- 8. In which of the following scenarios is there an increased likelihood of future obesity?
  - A. The overweight child is older than 3 years.
  - B. One parent is also obese.
  - C. Both parents are also obese.
  - D. The overweight child is older than 6 years.
  - E. All of the above.
- 9. A child with obesity is diagnosed to have a pathological cause for the obesity, Which of the following clinical feature is likely to be present?
  - Shorter than age matched peers.
  - B. Height velocity of 4 cm/year or more.
  - C. Increased linear growth.
  - D. Advanced bone age.
  - E. None of the above.

- 10. A 10-year old child is brought by the mother to see you because she thinks that the child is obese. Which of the following is LEAST likely to be a pathological cause for the obesity?
  - A. Hypothyroidism.
  - B. Growth hormone deficiency.
  - C. Cushing's syndrome.
  - D. Down's syndrome.
  - E. Prader Willi syndrome.
- II. In obese children, X percent of them will have two or more of the risk factors of hypertension, dyslipidemia, insulin resistence or glucose intolerance. What is X?
  - A. 28.
  - B. 38.
  - C. 48.
  - D. 58.
  - E. 68.
- 12. With regards to intervention in a child with obesity, which of the following is the MOST appropriate?
  - Educating the parents alone on the need for lifestyle changes.
  - B. Stimulus control, which includes limiting the amount of unhealthy food stocked at home.
  - C. Educating the child alone on the need for lifestyle changes
  - D. Orlistat for morbid obesity.
  - E. Bariatric surgery.
- 13. About motivational interview which of the following is a component of this behavioural change technique?
  - A. Client-centred, non-directive method of behaviour change.
  - Enhancing extrinsic motivation to change.
  - C. Argues for change.
  - Explores and resolves ambivalence.
  - E. All of the above are components.
- 14. Professor Ken Resnicow has described motivational interview (MI) using the analogy of a ship. The healthcare professional's use of MI is like using the X of the ship. What is X?
  - A. Compass.
  - B. Telecommunication system.
  - C. Rudder.
  - D. Engine.
  - E. Fuel.
- 15. One of the four broad guiding principles that underline motivational interview as described by Miller and Rollnick is "express empathy". The attitude underlying this principle of empathy is X. What is X?
  - Accepting the patient's perspective.
  - B. Agreeing with the patient's perspective.
  - C. Approving the patient's perspective.
  - D. Endorsing the patient's perspective.
  - E. All the above are correct.

- 16. "Developing discrepancy" is one of the four broad principles in motivational interview. Which of the following about developing discrepancy is CORRECT?
  - A. Create a discrepancy in the patient between present behaviour and his broader goals and values.
  - Help the patient resolve his internal conflicts.
  - C. Present the reasons for change for the patient.
  - D. Voice concerns about the patient.
  - E. All the above are correct.
- 17. "Roll with resistance" is one of the four broad principles in motivational interview. Which of the following about rolling with resistance is CORRECT?
  - A. Downplay the patient's resistance.
  - B. Try and solve the problem for the patient.
  - C. Invite the patient to reflect on his resistance to change.
  - D. Directly oppose the resistance to change.
  - E. Attempt to keep the momentum going by inviting the patient to consider new perspectives.
- 18. "Support self-efficacy" is one of the four broad principles in motivational interview. Which of the following about supporting self-efficacy is CORRECT?
  - A. To analyse the patient's inability to change.
  - Enhance the patient's self confidence in the capability to succeed in change.
  - C. To counsel the patient on the mechanics of change.
  - D. To set goals for the patient to change.
  - E. To make a case on why change is necessary.
- 19. The relative risk (RR) for cancer in patients with obesity is slightly increased namely 1-2. Which of the following cancer is associated with obesity?
  - A. Ovarian cancer.
  - B. Lung cancer.
  - C. Prostatic cancer.
  - D. Breast cancer.
  - E. Tongue cancer.
- 20. There are several conditions that have a relative risk (RR) of more than 3 in patients with obesity. Which of the following is one such condition?
  - A. Stress incontinence.
  - B. Varicose veins.
  - C. Obstructive sleep apnoea.
  - D. Back pain.
  - E. Hernia.
- 21. Children born to mothers with diabetes are at a significantly increased risk of developing X even in the pre-adolescent age group. What is X?
  - A. Impaired glucose tolerance.
  - B. Hypertension.
  - C. Cardiovascular disease.
  - D. Osteroarthritis.
  - F Asthma

- 22. In the Diabetes Prevention Program (DPP), it was found that patients in the standard arm with both impaired fasting glucose (IFG) and impaired glucose tolerance (IGT) had an annual progression to type 2 diabetes mellitus of X percent. What is X?
  - A. 15.
  - B. 14.
  - C. 13.
  - D. 12.
  - E. 11.
- 23. Intensive lifestyle intervention confers the greatest benefit in the prevention of type 2 diabetes mellitus in people who are obese. In such a program the goal of weight loss is X% through a reduced fat intake to less than 25% total calories and at least Y minutes per week of moderate physical activity. What is X and Y?
  - A. X = 7 and Y = 150 minutes.
  - B. X = 10 and Y = 100 minutes.
  - C. X = 15 and Y = 100 minutes.
  - D. X = 10 and Y = 200 minutes.
  - E. X = 14 and Y = 200 minutes.
- 24. In the Swedish Obesity Study which prospectively examined the effects of more drastic weight loss through bariatric surgery in the morbidly obese compared with conventional treatment, there was a drastic reduction of overall mortality of X%. What is X?
  - A. 25.
  - B. 30.
  - C. 35.
  - D. 40.
  - E. 45.
- 25. In the National Health Survey of 2010, the results show that X% of residents do not obtain sufficient physical activity. What is X?
  - A. 18.1.
  - B. 29.1.
  - C. 39.1.
  - D. 49.1.
  - E. 59.1.
- 26. A volume of exercise of I50 minutes of moderate intensity physical activity per week for those who are 19 years and older will in X% lower risk of premature death. What is X?
  - A. 15 45.
  - B. 20 50.
  - C. 25 55.
  - D. 30 60.
  - E. 35 65.

- 27. Participants in sports and recreational activities shouldbeencouragedtocompleteaself-administered pre-participation screening questionnaire and consult a doctor if the questionnaire indicates it. How often should the pre-participation screening questionnaire be completed?
  - A. Every six months.
  - B. Annually.
  - C. Once every two years.
  - D. Once every three years.
  - E. Once every five years.
- 28. For a pre-participation screening, what does the process include?
  - A. Chest Xray.
  - B. ECG.
  - C. Exercise threadmill testing
  - D. Echocardiogram.
  - E. Personal history, family history, and physical examination.
- 29. The impact of brief physical activity advice of 2-4 minutes has been evaluated. How many percent of those counseled will take up the advice to increase cardiovascular fitness?
  - A. 6.
  - B. 8.
  - C. 10.
  - D. 15.
  - E. 20.
- 30. The Physical Activity Advice Tool (PAAT) is designed by physicians for physicians to provide a quick, safe, and effective physical activity advice to patients. Which of the following is NOT a feature of this tool?
  - It provides physical activity advice for moderate intensity physical activities.
  - It has questions to identify the low fit, low activity individuals.
  - It attempts to interest patients to adopt regular physical activity.
  - D. It helps the patient choose an appropriate level of participation in terms of intensity, duration, and frequency.
  - E. It advises patients with existing heart disease and contraindicated conditions.