

blood urea 2.1 mmol/l, serum creatinine 62 µmol/l. Which of the following are true:

- (a) A urinary sodium concentration of 83 mmol/l makes unlikely the diagnosis of syndrome of inappropriate secretion of antidiuretic hormone (SIADH)
- (b) Demonstration of elevated plasma vasopressin is necessary to clinch the diagnosis of SIADH
- (c) There is a risk of seizures at this plasma sodium concentration
- (d) Intravenous saline is contraindicated
- (e) Demeclocycline may be useful in chronic hyponatraemia

10 A 16-year-old boy presents with polyuria, polydipsia, weight gain and headaches.

Investigations show blood glucose 4.1 mmol/l, plasma calcium 2.43 mmol/l, plasma sodium 148 mmol/l, plasma potassium 4.0 mmol/l, blood urea 6.1 mmol/l, serum prolactin 860 mU/l (reference range 50-300 mU/l), urine osmolality 122 mOsm/kg. Magnetic resonance imaging shows a large suprasellar tumour with calcification and cystic areas.

- (a) The likely diagnosis is a prolactinoma
- (b) The patient has DI
- (c) Measurement of plasma vasopressin is needed to make the diagnosis of DI in this case
- (d) Treatment of choice is oral desmopressin
- (e) Desmopressin therapy may be complicated by hyponatraemia due to water retention

## SELF-ASSESSMENT QUESTIONNAIRE ON GASTROENTEROLOGY CLINICAL MEDICINE SEPTEMBER/OCTOBER 2002

We regret that because of ambiguities in some of the questions, 2b, 3b, 3d, 4c, 6b,8d, 8e, 9a,10a and 10c have been excluded from this assessment. Your scores therefore, have been derived from the remaining 40 possible answers. We apologise for this lapse in quality control.

## CME Psychiatry SAQs

### Answers to the CME SAQs published in *Clinical Medicine* November/December 2002

Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10
a) F	a) F	a) F	a) T	a) F	a) T	a) T	a) F	a) T	a) F
b) T	b) T	b) T	b) F	b) T	b) F	b) F	b) T	b) F	b) T
c) T	c) T	c) F	c) T	c) T	c) F	c) T	c) T	c) T	c) T
d) T	d) T	d) T	d) F	d) F	d) F	d) F	d) F	d) T	d) F
e) T	e) T	e) F	e) T	e) F	e) F	e) F	e) T	e) F	e) T

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