#### **UNIVERSITY COLLEGE LONDON**

University of London

### **EXAMINATION FOR INTERNAL STUDENTS**

For The Following Qualification:-

B.Sc.

Health Sciences HSC33: Theory of Podiatric Medicine (II)

COURSE CODE : HESC0033

UNIT VALUE : 1.00

DATE

: 12-MAY-03

TIME

: 10.00

TIME ALLOWED : 3 Hours

# HSC 33 – BSc (Hons) Podiatry, University College London Theory of Podiatric Medicine II May 2003

#### **TIME ALLOWED: - 3 HOURS**

## **ANSWER 5 (FIVE) QUESTIONS**

#### START EACH ANSWER IN A SEPARATE ANSWER BOOKLET

1	a) Discuss the treatment of:	
	i. inflammatory tenosynovitis	(5)
	ii. mechanical tenosynovitis	(5)
	b) Write brief notes on the two types of bursae that are found in the body. Include in the answer the function of both types.	(10)
2	a) Describe, with the use of diagrams where appropriate, the difference between a claw toe, a hammer toe, a mallet toe and a retracted toe.	(10)
	b) Discuss flexor stabilisation. Include in the answer when, why and how it occurs as well as what it may result in.	(10)
3	A 14-year-old boy complains of pain in his left rear foot when playing sport. On examination he shows a unilateral flat foot and no sub talar joint motion in the left foot, pain on inversion and peroneal spasm.	
	a) What is your diagnosis?	( 2)
	b) What investigations would be requested to confirm your diagnosis. What would they show?	(8)
	c) How would you manage this case conservatively?	(10)
4	a) Outline the anatomical features of the forefoot that are thought to contribute to the development of plantar digital neuritis.	(10)
	b) Describe your management of a case of diagnosed Morton's Neuroma at the 3 <sup>rd</sup> and 4 <sup>th</sup> interspace of the right foot in an otherwise healthy 45-year-old female receptionist.	(10)

**TURN OVER** 

Describe the pathological changes that occur with hallux abducto-valgus 5 explaining how these give rise to the classic clinical features associated with the deformity. (20)6 Discuss the aetiology, pathology, clinical signs and treatment of a patient presenting with acute plantar fasciitis. (20)7 Hallux rigidus is a painful limitation of dorsiflexion at the first metatarsophalangeal joint. a) Describe the pathological changes associated with hallux limitus. (12)b) Describe the management of an acute episode of hallux limitus in a 40-year-old female patient. (8)

#### **END OF PAPER**