Question Paper

MANIPAL ACADEMY OF HIGHER EDUCATION

Instructions: Answer ALL questions.

Pharmacoepidemiology and Pharmacoeconomics [PPR 5.2T-S2]

Marks: 70   **Duration: 180 mins.**

Section A

Answer all the questions.

Long Answer Questions (3 x 10 marks = 30 marks)

1)		Define drug utilization review (DUR). Explain the steps involved in establishing a DUR programme in a hospital setup.	(10)
2)		Define pharmacoepidemiology. Explain the need and applications of pharmacoepidemiology.	(5)
	A)		
	B)	Describe prescribed daily dose (PDD) and defined daily dose (DDD).	(5)
3)		Define and describe cost-utility analysis (CUA) and cost-benefit analysis (CBA).	(10)

Section B

Answer all the questions.

Short Answer Questions (6 x 5 marks = 30 marks)

4)	Explain the importance and limitations of the spontaneous reporting system.	(5)
5)	Compare medical records and administrative databases and explain the administrative database.	(5)
6)	Define the record linkage system and explain deterministic and probabilistic record linkage methods.	(5)
7)	Explain direct costs and indirect costs in pharmacoeconomic analysis.	(5)
8)	Discuss the different Ad-hoc data sources used to study drug safety for long-term use in a larger population.	(5)
9)	Describe case reports and case series, citing an example of each.	(5)

Section C

Answer all the questions.

Give Reasons for the Following (5 x 2 marks = 10 marks)

10)	Decisions about how to distribute resources more broadly among various diseases cannot be guided by cost-effectiveness analysis.	(2)
11)	Only cost minimization analysis cannot be taken into account when including medications in hospital formulary.	(2)
12)	Post-marketing surveillance enables the best description of drug use in the general population when compared to pre-marketing trials.	(2)
13)	We cannot select the medication with the lowest cost per additional year of life by looking at the ACERs.	(2)
14)	The time trade-off method is more advantageous than the rating scale method.	(2)

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