



Modified Essay Questions

SCORING KEY

AUGUST 2019

INSTRUCTIONS: 

- Please use pencil ONLY, preferably 2B
- Do not fold or bend
- Erase mistakes fully
- Make no stray marks
- Completely fill in the oval

Please MARK LIKE THIS ONLY:

0 1 2 3 4

Modified Essay 5

Each question within this modified essay will be marked by a different examiner. The examiner marking this question will not have access to your answers to the other questions. Therefore, please ensure that you address each question separately and specifically. Answer this question fully, even if you believe that you have partly covered its content in your answers to other questions.

You are a junior consultant psychiatrist in an Aged Persons Mental Health Unit. Mrs Hilton is a 69-year-old retired school teacher, who is referred by her family doctor to you. She comes to the appointment with her husband and is agreeable to him joining her in the assessment. Mr Hilton says his wife has "not been her usual self lately". In particular, he reports that she is no longer getting out of the house, has lost interest in things and looks sad. In retrospect, he feels that these changes have gradually evolved over the past two years. Recently she has occasionally become disorientated, losing her way whilst driving and becoming flustered in a new shopping centre. She is sometimes forgetful, leaving the stove on and accusing him of hiding her reading glasses. Her sleep is disturbed. Although they have both always enjoyed a small drink in the evening, recently he has noticed an increase in the amount of alcohol she is drinking, finding numerous empty bottles in the bin. Mrs Hilton's vision and hearing are unimpaired.

You diagnose Mrs Hilton as having early dementia. Mr Hilton says that he wants to care for his wife at home. He asks how he can manage her condition.

Question 5.1

Describe (list and explain) what information you can give Mr Hilton about how dementia is managed at home.

Please note: a list with no explanation will not receive any marks. (10 marks)

A.	Interventions to promote cognition, independence and wellbeing: <ul style="list-style-type: none"> • Offer a range of activities to promote wellbeing that are tailored to the person's preference: supportive maintenance of previous recreational activities; gentle daily exercise; meaningful occupational activity. • Offer group cognitive stimulation therapy to those with mild-to-moderate dementia. • Consider group reminiscence therapy. • Consider cognitive rehabilitation or OT to support functional ability in those with mild-moderate dementia. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4
B.	Biological: <ul style="list-style-type: none"> • Avoiding alcohol or medications that increase confusion. Minimise the use of medicines associated with increased anti-cholinesterase burden; consider alternatives. • Good medical/dental management. • Medications for dementia. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2
C.	Psychological: <ul style="list-style-type: none"> • Provide information about dementia. • Supportive grief counseling. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2
D.	Social: <ul style="list-style-type: none"> • Strategies to relieve carer/family stress/burden. • Support services for dementia. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2
E.	Legal: <ul style="list-style-type: none"> • Driving. <ul style="list-style-type: none"> • Capacity. • Financial Management. • Power of Attorney: for health, welfare decisions; decisions pertaining to property and financial affairs. • Advance Care Planning: takes patient's wishes, preference; beliefs into account; ability to refuse treatment; to nominate place of care and place of death. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2
F.	Environmental: <ul style="list-style-type: none"> • Stable daily routine avoid big or sudden changes. • Orientating cues e.g. large figure clock, calendar, family photographs. • Make home safe - stove/fire/hot water. 	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2
G.	Spare (only to be used after approval from Co-Chairs, Writtens Subcommittee)	<input type="radio"/> 1
H.	Did not attempt	<input type="radio"/>
I.	Did handwriting affect marking?	<input type="radio"/>

Note to Examiner: Please mark all bubbles even if the total adds up to more than 10.

Note to NDS: Please set the maximum mark to 10.

Marker ID

Initials

ID No.:

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Modified Essay 5

The information that is presented in italics in this question is a repetition of the earlier sections of the case vignette.

You are a junior consultant psychiatrist in an Aged Persons Mental Health Unit. Mrs Hilton is a 69-year-old retired school teacher, who is referred by her family doctor to you. She comes to the appointment with her husband and is agreeable to him joining her in the assessment. Mr Hilton says his wife has "not been her usual self lately". In particular, he reports that she is no longer getting out of the house, has lost interest in things and looks sad. In retrospect, he feels that these changes have gradually evolved over the past two years. Recently she has occasionally become disorientated, losing her way whilst driving and becoming flustered in a new shopping centre. She is sometimes forgetful, leaving the stove on and accusing him of hiding her reading glasses. Her sleep is disturbed. Although they have both always enjoyed a small drink in the evening, recently he has noticed an increase in the amount of alcohol she is drinking, finding numerous empty bottles in the bin. Mrs Hilton's vision and hearing are unimpaired.

You diagnose Mrs Hilton as having early dementia. Mr Hilton says that he wants to care for his wife at home. He asks how he can manage her condition.

Mr Hilton requests advice about managing periods of agitation.

Question 5.2

Outline (list and justify) the non-pharmacological strategies you would suggest to Mr Hilton.

Please note: a list with no justification will not receive any marks. (8 marks)

A.	<p>Prevention:</p> <ul style="list-style-type: none"> • Reduce caffeine and alcohol use. • Good sleep routine. • Regular medical team reviews, targeted behavioural support or medication. • Exercise: walks etc. • Minimise sensory impairment: regular vision and hearing tests. • Neurocognitive intervention technology: puzzles, tablet computer, etc. • Caregiver interventions: psychoeducation, support, linking with external organisations/services; help-lines, respite care; extended family if available. 	<p><input type="radio"/> 0</p> <p><input type="radio"/> 1</p> <p><input type="radio"/> 2</p> <p><input type="radio"/> 3</p> <p><input type="radio"/> 4</p> <p><input type="radio"/> 5</p>
B.	<p>Prevention: Psychological / Social:</p> <ul style="list-style-type: none"> • Staying calm, reassuring re distressing beliefs. • Clear simple instructions. • Maintenance of routine. • Look at Antecedents, Behaviour, Consequences if pattern of outbursts occurring. • Avoid known triggers in Mrs. Hilton for catastrophic responses. • Social contact: pet therapy; one-on-one visits. • Sensory enhancement/relaxation: hand massage, sensory modulation. • Purposeful activity: helping tasks/volunteer roles/ group activities. 	<p><input type="radio"/> 0</p> <p><input type="radio"/> 1</p> <p><input type="radio"/> 2</p> <p><input type="radio"/> 3</p> <p><input type="radio"/> 4</p>
C.	<p>Management: Psychological:</p> <ul style="list-style-type: none"> • Management of specific outbursts. • Removal to a low stimulus environment. • Strategies to deal with intransigence. • Positively rewarding appropriate behaviour. • Try to distract onto another subject. 	<p><input type="radio"/> 0</p> <p><input type="radio"/> 1</p> <p><input type="radio"/> 2</p> <p><input type="radio"/> 3</p>
D.	Spare (only to be used after approval from Co-Chairs, Writtens Subcommittee)	<input type="radio"/> 1
E.	Did not attempt	<input type="radio"/>
F.	Did handwriting affect marking?	<input type="radio"/>

Note to Examiner: Please mark all bubbles even if the total adds up to more than 8.

Note to NDS: Please set the maximum mark to 8.

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