



SUMMER – 2022 EXAMINATION

Subject Name: Social Pharmacy

Model Answer

Subject Code: 20115

Important Instructions to examiners:

- 1) The answers should be examined by key words and not as word-to-word as given in the model answer scheme.
- 2) The model answer and the answer written by candidate may vary but the examiner may try to assess the understanding level of the candidate.
- 3) The language errors such as grammatical, spelling errors should not be given more Importance (Not applicable for subject English and Communication Skills).
- 4) While assessing figures, examiner may give credit for principal components indicated in the figure. The figures drawn by candidate and model answer may vary. The examiner may give credit for any equivalent figure drawn.
- 5) Credits may be given step wise for numerical problems. In some cases, the assumed constant values may vary and there may be some difference in the candidate's answers and model answer.
- 6) In case of some questions credit may be given by judgement on part of examiner of relevant answer based on candidate's understanding.
- 7) For programming language papers, credit may be given to any other program based on equivalent concept.
- 8) As per the policy decision of Maharashtra State Government, teaching in English/Marathi and Bilingual (English + Marathi) medium is introduced at first year of AICTE diploma Programme from academic year 2021-2022. Hence if the students in first year (first and second semesters) write answers in Marathi or bilingual language (English +Marathi), the Examiner shall consider the same and assess the answer based on matching of concepts with model answer.



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Q. No.	Sub Q. N.	Answer	Marking Scheme
1.		Attempt any SIX of the following:	6 x 5= 30 marks
1.	(a)	<p>Define Health and discuss various indicators of Health.</p> <p>Definition of Health: (1 Mark)</p> <p>“A state of complete physical, mental and social well being and not merely an absence of disease or infirmity”.</p> <p style="text-align: center;">OR</p> <p>“A condition or quality of the human organism expressing the adequate functioning of the organism in given conditions, genetic and environmental”.</p> <p>Various indicators of health:</p> <p>(4 Marks for explanation of any of the following 4 indicators, one mark for each indicator)</p> <p>Different Indicators of human health are as –</p> <ol style="list-style-type: none">1) Mortality indicators2) Morbidity indicators3) Disability rates4) Nutritional status indicators5) Health care services indicators6) Utilization rates7) Indicators of social and mental health8) Environmental indicators9) Socio economic indicators <p>1) Mortality Indicators:</p> <p>The meaning of mortality is number of deaths occurring in a given area of specific origin</p> <p>The important mortality indicators are as follows.</p> <ul style="list-style-type: none">• Crude death rate: It is defined as the number of deaths per 1000 population per year in a given community.• Life expectancy: life expectancy at birth is defined as average no. of years that will be	<p>1M</p> <p>4M</p>



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lived by those born alive into the population.

• **Infant mortality indicator:** it is the ratio of deaths under one year of age in a given year to the total no. of birth in the same year, usually expressed as rather per 1000 live births.

• **Child mortality rate:** no. of deaths at age 1 to 4 years in a given year per 1000 children in that age group at the midpoint of the year concerned.

• **Maternal mortality rate:** It indicates the proportion of deaths among women of reproductive age.

• **Disease specific mortality:** these are the rates due to specific diseases. For e.g. mortality rate due to cancer, cardiovascular diseases etc.

2) **Morbidity Indicators:** Meaning of morbidity indicator is the rate at which a disease occurs in the population (proportion of disease to health in a community). These Indicators are used to describe the health of those who are actually suffering from diseases.

3) **Disability rate:** Between two extremities of mortality rates and morbidity rates there are persons who remain disabled for some time or lifelong on recovery from disease or illness.

4) **Nutritional status indicators:** It is a positive health indicator that mainly considers anthropometric measurements (scientific study of measurement and proportions of the human body) of pre-school children, children at school entrance age, and prevalence of low birth weight (less than 2.5 Kg).

5) **Health care services indicators:** The availability of health services measured in terms of doctor population ratio, population bed ratio, population health center ratio is used as indicators of health.

6) **Utilization Rates:** These indicate the extent to which health care facilities and services are used by the population in a particular area for a given time. It is influenced by individual additives, services availability and services accessibility.

7) **Indicators of Social and Mental Health:** These are indirect indicators and include the incidents of suicide, murder, other violent act, crimes, road accidents, drug abuse, alcoholism, neglected youth, battered wife and battered children etc. These indicators provide guide to social action for improving health of people

8) **Environmental indicators:** the means by which community health is protected are



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		<p>grouped under the heading sanitation. The term covers care of food, disposal of excreta and regulation of the environment.</p> <p>9) Socioeconomic indicators: measurement of social economic development in terms of population growth rate, per capita income, level of unemployment, literacy rates etc. is indicative of social economic health status of a community.</p>	
1.	(b)	<p>What are problems of over population? How the population can be controlled?</p> <p>Problems of overpopulation (3 Marks)</p> <p>Overpopulation or overabundance is a phenomenon in which a species' population becomes larger than the carrying capacity of its environment.</p> <p>Population Problem of India:</p> <p>It is because of over population of India; the country is facing variety of problems as – India has only 2.4 % of the total land area of the world and possesses 16.7 % of the total world population. Present population of India is about 140 crores.</p> <p>1) Biological consequences: Young population is growing tremendously. This causes a great pressure on pediatric care, education, health and other such facilities.</p> <p>2) Economic consequences: Population adversely affects the rate of per capita income. Majority of India's total population lives below the poverty line. Poverty is one of the important causative factors in the epidemiology of diseases.</p> <p>3) Social consequences: More population means less job opportunities, inadequate education facilities, increased illiteracy, inadequate and poor housing facilities, overcrowding which can lead to deterioration in law and order situations.</p> <p>4) Health consequences: Malnutrition, inadequate medical facilities can cause higher death rates in infants and children. There can be high maternal deaths. Increased population leads to increased industrialization, which finally causes pollution problems.</p> <p>Population control measures: (2 Marks for any 2 measures ,1 mark for each measure)</p> <p>Some of the important methods to control overpopulation are:</p> <p>1. Education 2. Age of marriage 3. Family planning methods</p> <p>1) Education:</p>	<p>3M</p> <p>2M</p>



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People, particularly those in the reproductive age group, should be educated about the advantages of a small family and ill-effects of large families and overpopulation along with various other things such as Contraception awareness, Nutrition, spacing of children, Fertility etc.

2) Age of marriage:

Demographers explain that postponement of the female marriage age from 18 years to 20 or 22 years would bring down the birth rate by 20 to 30 per cent. Even a year's postponement in each age group will decrease the total fertility rate much less than the present 2.68 per cent for the country.

3) Family planning methods:

Various family planning methods suitable in various categories of individuals like use of IUDs and permanent contraception in case of Couples who have completed their family. Newly married couples use various temporary physical as well as chemical methods of contraception since an increase in contraceptive use leads to a reduction in the number of births which, all other things being equal, means fewer maternal deaths, fewer stillbirths, and fewer children exposed to the risk of mortality.

1.

(c)

Discuss in detail about importance of breast feeding, write ill effects of infant milk substitutes.

Importance of breast feeding: (2 ½ Marks)

Breastfeeding is the best way to satisfy the nutritional and psychological needs of the baby.

Mother's milk (breast milk, human milk) contains all nutrients in correct proportions necessary for the growth and development of the baby.

It has inherent anti-infective properties which no other milk has. This protective function of human milk is particularly important in India where exposure to infections is common.

It is essential that the baby gets the first breast-milk called colostrum which is thicker and yellowish than later milk and comes only in small amount in the first few days. Colostrum is good for the baby; it will take care of the first hunger. Colostrum is all the food and fluid needed at this time-no supplements are necessary, not even water.

Many essential components are in concentrated amounts in colostrum as compared to

2 ½ M



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mature milk, compensating for the low output during early lactation. Breast milk provides good quality proteins, fat, vitamins, calcium, iron and other minerals even beyond four months. Following are the importance of breastfeeding from different perspectives as follows:

1) For the Baby

Less illness: Babies who are fed breast milk have a lower risk of:

Infections in the middle ear, urinary tract, gastrointestinal tract (e.g, diarrhoea and vomiting), respiratory tract etc.

Cancers in children.

Sudden infant death syndrome.

Atopic dermatitis (including eczema and asthma).

Obesity in childhood and adulthood.

Type 1 and type 2 diabetes can occur in childhood or later in life.

Development and growth: Breast milk contains important components that aid in the protection and development of a baby's developing immune system. Breast milk is easier to digest than infant formulae, and it adapts from feed to feed to fit each baby's individual needs, making it the optimal diet for healthy growth and development.

Psychological advantages: Breastfeeding can improve bonding and emotional attachment between mother and baby due to close interaction and frequent skin-to-skin contact.

For the mother:

Breastfeeding has been shown in studies to have significant health benefits for mothers.

Following are the benefits of breastfeeding for mothers:

1. May reduce the risk of type II diabetes in mothers who have gestational diabetes.
2. Can assist women in losing weight following the birth of their child.
3. Reduces the risk of ovarian and premenopausal breast cancer.
4. Osteoporosis risk may be reduced.
5. Assists the uterus in returning to its pre-pregnancy state as quickly as possible.

III Effects Of Infant Milk Substitutes: (2 ½ Marks)

Infant milk Substitute formula: It is a cow milk substitute that contains hydrolyzed cow milk protein or goat milk protein as the protein source. There are many ill effects of early

2 ½ M



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weaning and are the leading cause of rising infant mortality.

The ill effects observed are as follows.

(i) Weaning foods at the early stage may weaken a baby's immune system: Breast milk has been found in research to assist a baby's immune system to develop and improve Weaning meals and formula milk, on the other hand, are deficient in important and natural nutrients. Also Enzyme Amylase is usually detected in the child at the seventh month only, hence digestion of external carbohydrate food starts only after six months .Early weaning may cause problems related to indigestion of carbohydrates. Chances of infections, Diarrheal diseases and Anemia are common in children with early weaning, because breast milk contains the best bioavailable Iron.

(ii) Weaning foods and Bottle feeding affects the mother-baby bonding: For both the mother and the infant, feeding is a bonding process. When the newborn latches on to the mother's breasts, skin-to-skin contact is established. Bottle-feeding may obstruct this bonding process.

(iii) Breastfeeding protects the mother's health: Breastfeeding mothers, as opposed to bottle-feeding mothers, have a lower risk of developing breast cancer, ovarian cancer, and osteoporosis, according to some studies. Exclusive breast feeding also boosts mother's immune system, delays next pregnancy and reduces insulin needs of diabetic patients.

1. (d) Write symptoms, prevention and treatment of tuberculosis, write full form of DOTS.

Ans.

Tuberculosis:

Symptoms : (2 Marks)

- 1) Prolonged cough
- 2) Rise in temperature in the evening
- 3) loss of weight
- 4) loss of appetite
- 5) Weakness
- 6) Blood in sputum
- 7) Chest pain
- 8) Night sweating etc.

2 M



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		<p>Prevention and Treatment: (2 Marks)</p> <ol style="list-style-type: none">1. Early detection and cases2. Immunization with BCG vaccine. Importance of boiling milk should be taught.3. Isolation of case at home and at hospital in the well-ventilated area.4. Exclusion of contact children from school for 2 weeks.5. Rehabilitation of patients by providing work which will suit his abilities.6. Importance of a balanced diet should be taught.7. People should be educated not to spit in the public places.8. Preventive treatment i.e. Chemoprophylaxis by INH, Rifampicin, Ethambutol or combination of them. <p>Full form of DOTS: (1Mark) Directly Observed Treatment, Short course.</p>	<p>2 M</p> <p>1M</p>
1.	(e) Ans.	<p>Write causative organism ,mode of transmission, prevention and control of AIDS</p> <p>AIDS</p> <p>Causative organism: (1 Mark)</p> <p>AIDS is a viral infection caused by Human Immunodeficiency virus (HIV)</p> <p>Mode of transmission: (2Marks)</p> <ol style="list-style-type: none">1. Through sexual contact with the infected person it is transmitted through vaginal, anal or oral sex.2. Through contaminated needles and syringes especially those used by drug addicts.3. Maternal transmission through placenta.4. Blood contacts through transfusion of contaminated blood and blood products. <p>Prevention and control: (2 Marks)</p> <ol style="list-style-type: none">1. Screening of blood donors for HIV.2. Use of disposable syringes for injection.3. Screening of high risk groups like prostitutes and drug addicts.4. Avoid going to prostitutes for sexual intercourse.5. Do not indulge in oral or anal sex.	<p>1M</p> <p>2M</p> <p>2M</p>



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		<p>6. Avoiding promiscuous sexual contact.</p> <p>7. Have only one uninfected sexual partner and do not indulge with multiple sex partners.</p> <p>8. Use of contraceptives like nirodh.</p> <p>9. Instruments used for piercing the nose, tattooing etc. carry a high risk of transmitting the disease properly sterilized.</p> <p>10. Treatment with antiviral agents like azidothymidine.it can prolong the life of a patient.</p> <p>11. Health education about AIDS, its problems and methods of prevention.</p>	
1.	(f) Ans.	<p>Write about causative agent and prevention of Typhoid Fever and Chikungunya.</p> <p>Typhoid</p> <p>Causative agent: (1Mark)</p> <p>It is caused due to bacteria Salmonella typhi</p> <p>Prevention and control: (1 ½ Mark)</p> <ol style="list-style-type: none">1. Control of the reservoir.2. Early diagnosis by culture of stool and blood.3. Isolation of the patient to prevent the spread of infection.4. Disinfection of stool and urine.5. Water and milk should be consumed only after proper boiling.6. Education of people for sanitary measures like safe drinking water, food and personal hygiene.7. Immunization with TAB vaccine containing S. typhi, S. paratyphi A and S. paratyphi B.8. Treatment with antibiotics such as chloramphenicol. <p>Chikungunya</p> <p>Causative agent: (1 Mark)</p> <p>Chikungunya virus (CHIKV)</p> <p>Prevention and control: (1 ½ M)</p> <ol style="list-style-type: none">1. Mosquito Control. Paracetamol to reduce fever and pain.2. Do not take aspirin and other non-steroidal anti-inflammatory drugs (NSAIDS until	<p>1M</p> <p>1 ½ M</p> <p>1M</p> <p>1 ½ M</p>



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- v. Inter-sectoral coordination for zoonotic diseases.

2.Revised National Tuberculosis Control Programme (RNTCP) :

Objectives:

VISION: TB-Free India with zero deaths, disease and poverty due to tuberculosis.

GOAL: To achieve a rapid decline in burden of TB, morbidity and mortality while working towards elimination of TB in India by 2025.

Functioning and Outcome:

- i. New Scheme evolution by The Ministry of Health & Family Welfare (MOHFW) in the private sector too for suitable incentives to the private doctors and patients benefits.
- ii. A robust, modern Management and Information Service (MIS) system will be developed to monitor the newly diagnosed as well as existing cases of TB on delivery of the drug kit to the patient, compliance to treatment regimen etc.
- iii. The availability of rapid molecular tests for patients referred by any private doctor or institute.
- iv. To improve the compliance of the TB patients to the treatment regimen, MoHFW will start customized SMS services to the individual patients on a regular basis reminding them about the time to consume the drugs.
- v. The MOHFW will establish mechanisms for facilitating nutritional support to the TB patients, including financial support through different modes.
- vi. TB Corpus Fund: To improve financial sustainability in the TB sector.

3.National Leprosy Eradication Programme (NLEP)

Objectives:

- i. To reduce the prevalence rate of leprosy less than 1/10,000 population at sub-national and district level.
- ii. To-reduce grade II disability % <1 among new cases at national level.
- iii. To reduce grade II disability cases <1 case per million population at national level.



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- iv. Zero disabilities among new child cases.
- v. Zero stigma and discrimination against the persons affected by leprosy.

Functioning and Outcome:

- i. NLEP functions under the National Health Mission (NHM).
- ii. Diagnosis and treatment of leprosy.
- iii. Capacity building.
- iv. Disability Prevention and Medical Rehabilitation.
- v. NGO services.

4.National Rabies Control Programme (NRCP)

Objectives:

- i. Training of healthcare professionals on appropriate Animal bite management and Rabies Post Exposure Prophylaxis.
- ii. Advocacy for states to adopt and implement inter-dermal routes of post-exposure prophylaxis for Animal bite victims and post-exposure prophylaxis for high-risk categories.
- iii. Strengthen Human Rabies Surveillance System. Strengthening of Regional Laboratories under NRCP for Rabies Diagnosis.
- iv. Creating awareness in the community through advocacy, communication and social mobilization.

Functioning and Outcome:

- i. Training and capacity building.
- ii. Guidelines and technical support to states. Rabies and animal bite surveillance.
- iii. Laboratory strengthening for rabies diagnosis
- iv. IEC activities.
- v. Inter-sectoral coordination for Rabies control.
- vi. Operational research.

5.Programme for Prevention and Control of Leptospirosis (PPCL)

Objective:



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To reduce morbidity and mortality due to Leptospirosis in humans.

Functioning and Outcome

- i. Development of trained manpower.
- ii. Strengthening the surveillance of Leptospirosis in humans.
- iii. Strengthen diagnostic laboratories in programmed states.
- iv. Create awareness regarding timely detection and appropriate treatment of patients.
- v. Advocacy for strengthening of patient management facilities in programmed states
- vi. Strengthening inter-sectoral coordination at state and district level for out-break detection, prevention and control of leptospirosis.

6.National Vector Borne Disease Control Programme (NVBDCP)

Launched in 2003-04 by merging National anti -malaria control programme ,National Filariasis Control Programme and Kala Azar Control programmes .Japanese B Encephalitis and Dengue/DHF have also been included in this Program Directorate of NAMP is the nodal agency for prevention and control of major Vector Borne Diseases

List of Vector Borne Diseases Control Programme Legislations:

- i. National Anti - Malaria programme
- ii. Kala - Azar Control Programme
- iii. National Filaria Control Programme
- iv. Japanese Encephalitis Control Programme
- v. Dengue and Dengue Hemorrhagic fever
- vi. Chikungunya

Objectives for Vector-borne Diseases:

- i. To prevent mortality due to Vector Borne Diseases namely Malaria, Yala star, Dengue/DHF and Japanese Encephalitis
- ii. To reduce morbidity due to Malaria. Dengue/DHF, Chikungunya and Japanese Encephalitis.
- iii. Elimination of Kala-azar and Lymphatic Filariasis.



7 National Rabies Control Programme (NRCP)

Objectives:

- i. Training of healthcare professionals on appropriate Animal bite management
- ii. and Rabies Post Exposure Prophylaxis.
- iii. Advocacy for states to adopt and implement inter-dermal routes of post-
- iv. exposure prophylaxis for Animal bite victims and post-exposure prophylaxis
- v. for high-risk categories.
- vi. Strengthen Human Rabies Surveillance System. Strengthening of Regional Laboratories under NRCP for Rabies Diagnosis.
- vii. Creating awareness in the community through advocacy, communication and social mobilization.

Functioning and Outcome:

- i. Training and capacity building.
- ii. Guidelines and technical support to states. Rabies and animal bite surveillance.
- iii. Laboratory strengthening for rabies diagnosis
- iv. IEC activities.
- v. Inter-sectoral coordination for Rabies control.
- vi. Operational research.

8. National Viral Hepatitis Surveillance Programme (NVHSP)

Objectives:

- i. To establish a laboratory network for laboratory based surveillance of viral hepatitis in different geographical locations of India.
- ii. To ascertain the prevalence of different types of viral hepatitis in different zones of the country.
- iii. To provide laboratory support for outbreak investigation of hepatitis through an established network of laboratories.
- iv. To develop technical material for generating awareness among healthcare providers & in the community about waterborne and blood borne hepatitis.



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Functioning and Outcome:

- i. Establishment of laboratory based surveillance for hepatitis in the country for collection of data, development of testing and surveillance guidelines and its dissemination.
- ii. A network of laboratories with quality testing for hepatitis markers.
- iii. Training of manpower/healthcare providers in 10 regional laboratories.
- iv. Development of IEC for providers and community.
- v. Establishment of baseline data for hepatitis to see the impact.
- vi. Pharmacists have a role in disaster management.

9. National AIDS Control Programme (NACP) :

Objectives:

Specific objectives of the policy are indicated below:

- i. To provide care and support to people living with HIV/AIDS and to mobilize support of a large number of Non-Government Organizations (NGOs/Community Based Organizations CBOS) for an enlarged community initiative for prevention and alleviation of the HIV/AIDS problem.
- ii. To decentralize HIV/AIDS control program to the field level with adequate financial and administrative delegation of responsibilities.
- iii. To prevent women, children and other socially weak groups from becoming vulnerable to HIV infection by improving health education, legal status and economic prospects.
- iv. To constantly interact with international and bilateral agencies for support and cooperation in the field of research in vaccines, drugs, emerging systems of health care and other financial and managerial inputs.
- v. To ensure availability of adequate and safe blood and blood products for the general population through promotion of voluntary blood donation in the country.
- vi. To promote better understanding of HIV infection among people especially students, youth and other sexually active sections to generate greater awareness



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about the nature of its transmission and to adopt safe behavioral practices for prevention.

Functioning and Outcome:

Prevention Services:

- i. Targeted Interventions (TI) for High Risk Groups and Bridge Population, Female Sex Workers (FSW), Men who have Sex with Men (MSM), Transgenders/Hijras, Injecting Drug Users (IDU), Truckers & Migrants.
- ii. Needle-Syringe Exchange Programme (NSEP) and Opioid Substitution Therapy (OST) for IDUs.
- iii. Prevention Interventions for Migrant population at source, transit and destinations.
- iv. Link Worker Scheme (LWS) for High Risk Groups and vulnerable population in rural areas;
- v. Prevention & Control of Sexually Transmitted Infections/Reproductive Tract Infections (STI/RTI); Blood Transfusion Services.
- vi. HIV Counseling & Testing Services.
- vii. Prevention of Parent to Child Transmission.
- viii. Condom promotion;
- ix. Information, Education & Communication (IEC) and Behavior Change Communication (BCC)–Mass Media Campaigns through Radio & TV, Mid-media campaigns through Folk Media, display panels, banners, wall writings etc., special campaigns through music and sports, flagship programmes, such as Red Ribbon Express; Social Mobilization, Youth Interventions and Adolescence Education Programme; Mainstreaming HIV/AIDS response and Workplace Interventions.

2. Attempt any TEN of the following:

10x3=30
marks

(a) Describe National Health Policy: (3 Marks)



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		<p>The Alma-Ata Declaration of 1978 emerged as a major milestone of the twentieth century in the field of public health, and it identified primary health care as the key to the attainment of the goal of "Health for All" around the globe.</p> <p>Health policy of a nation is its strategy for controlling and optimizing the social uses of its health knowledge of intended objectives. The Ministry of Health and Family Welfare, Govt. of India, released a National Health Policy in 1983 till 2002. It stressed the need for comprehensive primary health care services.</p> <p>Revised NHP came into effect in 2002 and in 2017, the next NHP was announced. It also identifies seven priority areas for improving the environment for health. These priority areas needing coordinated action include:</p> <p>a) The Swachh Bharat Abhiyan</p> <p>b) Balanced, healthy diets and regular exercises.</p> <p>c) Addressing tobacco, alcohol and substance abuse</p> <p>a) Yatri Suraksha - preventing deaths due to rail and road traffic accidents.</p> <p>b) Nirbhaya Nari - action against gender violence.</p> <p>c) Reduced stress and improved safety in the workplace</p> <p>d) Reducing indoor and outdoor air pollution</p>	3M
2.	(b)	<p>Write about ill effects of air pollution and its prevention</p> <p>Effects of air pollution : (2 marks)</p> <p>i. Air pollution causes several effects on health and it has contributed to increase in morbidity and mortality.</p> <p>ii. Respiratory tract disorders are common such as asthma, bronchitis and lung cancer.</p> <p>iii. Air pollution also affects respiratory system of animals</p> <p>iv. It also causes retardation of growth in plants, spotting, burning of leaves etc.</p> <p>v. It causes damage to the historic buildings and cause blackening.</p> <p>Prevention:(1 mark)</p>	2M



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		v. Purification of water on a large scale and household level	
2.	(d)	<p>What is malnutrition ? Write ill effects of junk food</p> <p>Malnutrition:(1 Mark)</p> <p>Malnutrition refers to when a person's diet does not provide enough nutrients or the right balance of nutrients for optimal health. Malnutrition causes several health problems and poses higher risk of infections.</p> <p>Ill effects of Junk Food (any 4 of the following 2 Marks)</p> <ul style="list-style-type: none">i. Weight gain and Obesityii. Lack of proper nutrition, affects immunityiii. Possibility of developing several Non-communicable diseases such as<ul style="list-style-type: none">a. Diabetes,Hypertension ,heart diseaseiv. Learning and memory problemsv. Loss of appetite and indigestionvi. Inadequate growth and developmentvii. Causes fluctuations in blood sugar levelsviii. Can cause kidney or liver damageix. It causes fatigue and weaknessx. It affects the brain functionxi. affects the microflora in the gut	1M 2M
2.	(e)	<p>Write functions and daily requirements of proteins</p> <p>Functions of Proteins :(2 Marks)</p> <p>Proteins are the complex organic compounds with C, H, O, N and occasionally also contain iron, phosphorous, sulfur and other elements</p> <ul style="list-style-type: none">1) Bodybuilding, repair and maintenance of tissues2) For formation of antibodies, plasma proteins ,hemoglobin, enzymes and hormones3) Strengthening of immune system3) For production of heat and energy4) Balancing of fluids and of osmotic pressure5) Maintenance of proper pH in body	2M



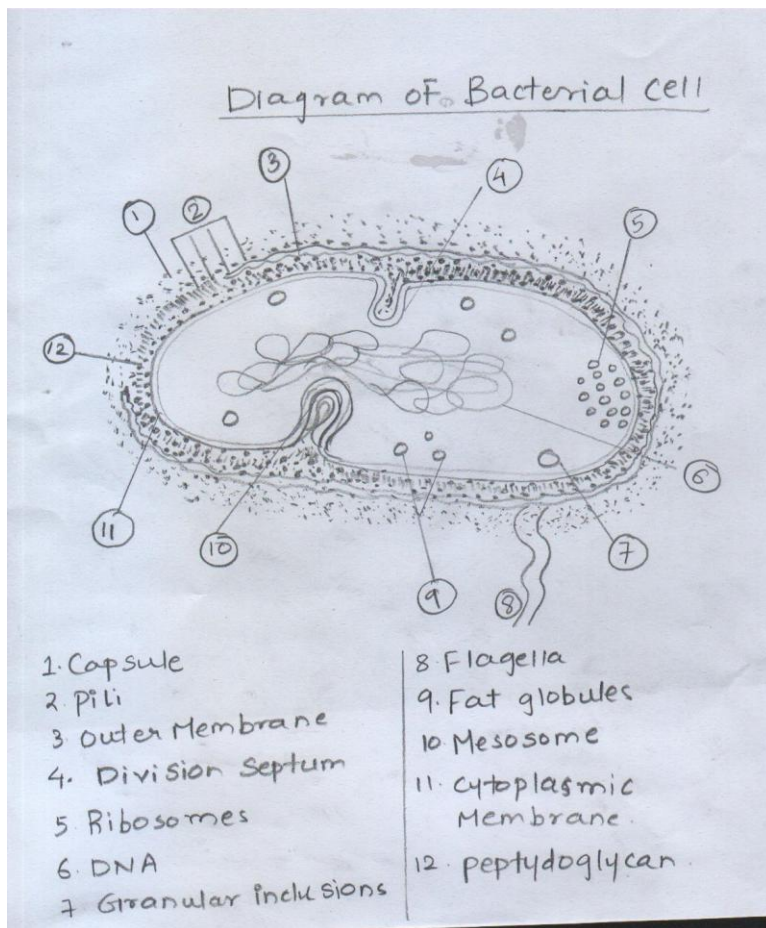
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		Requirement of Proteins: (1 Mark) As per Indian Council of Medical Research (ICMR) for Indians, 0.8 to 1 gm protein per kg body weight per day is sufficient to meet the basic nutritional requirements.	1M
2.	(f)	Write clinical presentation and control of malaria. Clinical Presentation: (1 Mark) Chills, fever at certain time intervals (Hot Stage)followed by sweating (Cold stage), headache, vomiting, diarrhea, abdominal pain, splenomegaly (enlargement of spleen) and hepatomegaly (liver enlargement) Control of Malaria: (2 Marks) Mosquito control is necessary for control of Malaria 1) Environmental Control: it produces long lasting effects. It can be achieved by eliminating of breeding places, filling and drainage operation, proper disposal of refuse and other wastes cleanliness in and around the houses, carefully planned water management, water supply through pipes. 2) Chemical Control: Insecticides belonging to the organo-chlorine, organo-phosphorus, carbamate group of compounds can be used for vector control. Malathion, lindane, biomethoate, fenthion can be used to control arthropods. Larvae of mosquito can be killed by Paris green in a concentration of 2% dust spread on water surface or mineral oil spread over the water. 3)Biological Control: the use of larvivorus fish like Gambusia can be used for the control of mosquitoes. 4) Protective measures: Screening of the houses, hospitals, offices by fine gauge screens ,use of Various mosquito repellants.	1M 2M
2.	(g)	Draw the diagram of a typical bacterial cell and name the components: (3 marks) Diagram:	3M



2.

(h)

Describe Gram Staining method of Bacteria.(3 marks)

Gram staining: This is a widely used differential technique for bacteria. Technique:

Procedure:

- i) Smear (thin microbial film) is prepared on a clean glass slide.
- ii) Smear is air dried and fixed by gentle heating.
- iii) Crystal violet solution is applied on smear as primary stain for about 1 to 2 min.
- iv) Potassium iodide solution (gram's iodine solution) is applied on smear for 1 to 2 min
- v) Slide is gently washed with water.
- vi) Alcohol (95% soln.) Now it is applied on smears as a decolouriser.
- vii) The secondary stain as counterstain like eosin or safranin is applied on a smear for 20 to 30 sec.

3M



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- beneficiaries) covered across the country.
- iii. All families listed in the Socio Economic and Caste Census(SECC) database as per defined criteria will be covered.
 - iv. No cap on family size and age of members.
 - v. Priority to girl child, women and and senior citizens.
 - vi. Free treatment available at all public and empaneled private hospitals in times of need.
 - vii. Covers secondary and tertiary care hospitalization.
 - viii. 1,350 medical packages covering surgery, medical and day care treatments, cost of medicines and diagnostics.
 - ix. All pre-existing diseases covered. Hospitals cannot deny treatment.
 - x. Cashless and paperless access to quality health care services.
 - xi. Hospitals will not be allowed to charge any additional money from beneficiaries for the treatment.
 - xii. Eligible beneficiaries can avail services across India, offering benefit of national portability.
 - xiii. Can reach out for information, assistance, complaints and grievances to a 24X7 helpline number - 14555

2. (k) **What is health insurance? Give its types.**

Health Insurance is a type of insurance which covers medical and health related expenses due to hospitalization,medicines,diagnostics etc. **(1 Mark)**

Types of Health Insurance: (2 Marks)

- 1) Individual health insurance
- 2) Family health insurance
- 3) Critical Illness Insurance (eg.Cancer, Stroke, heart diseases etc.)
- 4) Senior Citizens' Health Insurance
- 5) Group health Insurance
- 6) Maternity Health Insurance

1M

2M



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		OR	
		There are two main types 1) Fixed benefit policies are those that pay a fixed amount following a claim. 2) Indemnity plans are those that provide reimbursement for the money spent on medical treatment.	
3.		Solve the following multiple choice questions	20X1=20 marks
3.	(a)	Write a full form of SDG. SDG: Sustainable Development Goals.	1M
3.	(b)	Write full form of NHP. NHP: National Health Policy. OR NHP: National Health Program.	1M
3.	(c)	BCG stands for _____. BCG: Bacillus Calmette Guerin.	1M
3.	(d)	MTP stands for _____. MTP stands for Medical Termination of Pregnancy.	1M
3.	(e)	Write deficiency disorder caused by deficiency of vitamin C. Deficiency vitamin C causes Scurvy.	1M
3.	(f)	Name any one pandemic disease. (Any one disease 1 Mark) Pandemic diseases are COVID-19, SARS, HIV/AIDS, H3N2, Small pox, Plague, Tuberculosis, Polio, Influenza, Cholera, Russian Flu of 1889, Spanish Flu etc.	1M
3.	(g)	Write the name of one vaccine to prevent COVID-19. (For any one vaccine 1 Mark) Vaccine to prevent COVID-19: Covishield, Covaxin, Sputnik V etc.	1M
3.	(h)	Name the micro-organism causing cholera. The micro-organism causing cholera is Vibrio cholerae.	1M



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3.	(i)	Write the name of one National Health Programme focussing on NCDs. (For any one of the following National Health Programmes focussing on NCDs 1Mark) 1.National Tobacco Control Programme (NTCP) 2.National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS) 3.National Programme for Control Treatment of Occupational Diseases 4.National Programme for Prevention and Control of Deafness (NPPCD) 5.National Mental Health Programme 6.National Programme for Control of Blindness& Visual Impairment 7. Pradhan Mantri National Dialysis Programme 8. National Programme for the Health Care for the Elderly (NPHCE) 9. National Programme for Prevention & Management of Burn Injuries (NPPMBI) 10. National Oral Health programme 11. National Programme For Palliative Care (NPPC) 12. National Programme For Prevention & Control Of Flurosis (NPPCF) 13. National Iodine Deficiency Disorders Control Programme	1M
3.	(j)	What is HMO? HMO is Health Maintenance Organization	1M
3.	(k)	Carcinogens cause (a) Cancer (b) Diabetes (c) Hypertension (d) T.B. Answer: (a) Cancer	1M
3.	(l)	Lifestyles are learnt from (a) Parents (b) Mass media (c) Friends (d) All of these Answer: (d) All of these	1M
3.	(m)	Increased level of air pollution results in _____. (a) Soil erosion (b) Global warming (c) Respiratory problem (d) All of these Answer: (c) Respiratory problem OR (d) All of these **Any one of these two answers can be considered	1M



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3.	(n)	Which is the most common method used to dump solid wasters? (a) River (b) Ocean (c) Landfill (d) None of these Answer: (c) Landfill	1M
3.	(o)	Write full form of 'GM' food. Answer: Full form of 'GM' food is Genetically Modified Food.	1M
3.	(p)	Rabies is a _____. (a) Viral disease (b) Bacterial disease (c) Fungal disease (d) None of these Answer: (a) Viral disease	1M
3.	(q)	Polio virus mainly replicates in _____. (a) Lungs (b) Liver (c) GIT (d) None of these Answer: (c) GIT	1M
3.	(r)	PHC stands for _____. (a) Primary Hospital Centres (b) Primary Healthcare Centres (c) Public Healthy Centres (d) Prime Human Centres Answer: (b) Primary Healthcare Centres	1M
3.	(s)	National mental health programme was launched in the year _____. (a) 1985 (b) 1979 (c) 1982 (d) 1990 Answer: (c) 1982	1M
3.	(t)	Which organization provides blood to patients? (a) Medical store (b) Dispensary (c) Hospital (d) Blood bank. Answer: (d) Blood bank.	1M