

PAEDIATRIC HEMATO-ONCOLOGY**THEORY PAPER****Write short notes on:**

1. a) Tabulate International Classification for intraocular retinoblastoma. 3+7
b) Plan and explain the treatment of a 2-year old child with bilateral retinoblastoma. The right and the left eyes have Group E and Group B disease, respectively.
2. a) Compare the pros and cons of International Society of Pediatric Oncology (SIOP) vs. National Wilms' Tumour Study Group (NWTS) approach to the management of Wilms' tumour. 3+4+3
b) Role of molecular markers in the prognosis and treatment of Wilms' tumour.
c) List the indications for radiotherapy in the management of Wilms' tumour.
3. a) Explain how you will monitor and tailor the doses of maintenance chemotherapy in a child with standard-risk acute lymphoblastic leukemia (ALL). 5+5
b) List the likely causes and management of seizures in a child with standard-risk ALL, who is in mid-induction.
4. a) Compare the pros and cons of ABVD vs. OEPA/COPDAC chemotherapy for pediatric Hodgkin's Lymphoma. 4+2+4
b) List the Deauville scoring system for reading a PET scan.
c) How will you treat nodular lymphocyte-predominant Hodgkin's Lymphoma restricted to the right cervical nodes in a 10-year-old boy?
5. a) What is low dose prophylaxis in the management of Hemophilia A? 5+5
b) Emcizumab
6. a) Monitoring and management of adverse effects of deferasirox. 4+6
b) Management of short stature in a child with thalassemia major.
7. What are the indications for suspecting an inherited disorder of thrombosis? How will you investigate a child with suspected inherited disorder of thrombosis? 10
8. Enumerate steps for reducing health care associated infections and emergence of multi-drug resistant bacteria in a Pediatric Oncology Unit. 10
9. List the salient features of conditioning regimen for a fully matched sibling hematopoietic stem cell transplant in the following conditions: 3+3+4
a) SCID.
b) Acquired aplastic anemia.
c) Thalassemia major.
10. In pediatric acute myeloid leukemia (non-M3), describe: 3+3+4
a) Role of minimal residual disease.
b) Indications for cranial radiotherapy.
c) Indications for hematopoietic stem cell transplant.
