

**Part
one**

1. (d) Meckel's diverticulum is much more common than is supposed. Answers (a) and (c) can be fatal mistakes to make, as failing to identify Meckel's can lead to obstruction and an acute emergency. Peptic ulcer is uncommon in teenagers, but not unknown, so should be ruled out. The fact that the pain is periumbilical tends to suggest that the lesion is lower down the alimentary tract than the stomach. Parasitic infestation is possible, but unlikely in the light of the normal white cell count.

**Part
two**

2. (b), (c), (d), and (e). Hand-foot syndrome at between 6 and 9 months of age is a cardinal sign of sickle cell anaemia. It is essential to recognise this early, as when it is linked to a haemoglobin of 7 g/dl or less and persistent leukocytosis in the absence of infection, the disease will be severe. Omar will need long-term expert management to prevent end organ injury and early death.

**Part
three**

3. (a), (b), (c), (d), and (e). The development of spider naevi in a middle-aged man, along with early morning hangovers are two signs of alcoholic liver disease. It must be the preliminary preferred diagnosis.

**Part
four**

4. (a), (c), (d), and (e). A haemoglobin level of 10 to 11 g/dl is typical of alcoholic liver disease, along with a macrocytosis and the very high gamma-GT. Pernicious anaemia and folate deficiency anaemia do not have such a dramatic effect on the liver, but the provision of extra vitamins, including B12 and folic acid, will help his recovery, provided that he stops drinking. If Arthur stops drinking his liver function and his anaemia should improve dramatically. If he doesn't – they won't. He is the master of his own fate.

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