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QUESTION 1

Select the class of Anti-diabetic medication that works in the specified organ to prevent hyperglycemia. Select all that applies. Brain (E)

- A. Sulfonylureas
- B. Alpha- Glucosidase Inhibitors
- C. DPP4 Inhibitors
- D. Glucagon-like peptide-1 receptor agonists
- E. Thiazolidinediones
- F. Biguanide
- G. SGLT2 inhibitors

Correct Answer: D

Glucagon-like peptide-1 receptor agonists Sulfonylureas work in beta cells in the pancreas that are still functioning to enhance insulin secretion. Alpha-Glucosidase Inhibitors stop -glucosidase enzymes in the small intestine and delay digestion and absorption of starch and disaccharides which lowers the levels of glucose after meals. DPP4 blocks the degradation of GLP-1, GIP, and a variety of other peptides, including brain natriuretic peptide. Glucagon-like peptide-1 receptor agonists work in various organs of the body. Glucagon-like peptide-1 receptor agonists enhance glucose homeostasis through: (i) stimulation of insulin secretion; (ii) inhibition of glucagon secretion; (iii) direct and indirect suppression of endogenous glucose production; (iv) suppression of appetite; (v) enhanced insulin sensitivity secondary to weight loss; (vi) delayed gastric emptying, resulting in decreased postprandial hyperglycaemia. Thiazolidinediones are the only true insulin-sensitising agents, exerting their effects in skeletal and cardiac muscle, liver, and adipose tissue. It ameliorates insulin resistance, decreases visceral fat. Biguanides work in liver, muscle, adipose tissue via activation of AMP-activated protein kinase (AMPK) reduce hepatic glucose production. SGLT2 inhibitors work in the kidneys to inhibit sodium-glucose transport proteins to reabsorb glucose into the blood from muscle cells; overall this helps to improve insulin release from the beta cells of the pancreas.

Reference: <https://doi.org/10.1093/eurheartj/ehv239>

QUESTION 2

Which of the following is considered first-line therapy for reducing the risk of atherosclerotic cardiovascular disease (ASCVD)?

- A. HMG Co-A reductase inhibitors
- B. Bile acid resins
- C. Nicotinic Acid
- D. Fibrates
- E. Fish oil

Correct Answer: A

ATP4 found that the use of statins for prevention of ASCVD is extensive and consistent. Statin therapy is recommended for patients at a higher risk of ASCVD who are most likely to experience a net benefit in terms of the potential for risk reduction vs the potential for adverse effects. Non-statin therapies do not provide sufficient benefits in the reduction of ASCVD risk in regards to their potential for adverse effects.

QUESTION 3

What is the active ingredient found in the medicine Adalat?

- A. Nifedipine
- B. Adalimumab
- C. Digoxin
- D. Simvastatin

Correct Answer: A

QUESTION 4

A patient with acute pharyngitis caused by group A Streptococcus (strep throat) is allergic to penicillins (non-immediate type), which of the following is NOT recommended as treatment?

- A. Clindamycin
- B. Amoxicillin
- C. Cefalexin
- D. Clarithromycin

Correct Answer: B

Amoxicillin is a penicillin and so should be avoided in patients even with a non-immediate allergy. Acute treatment should be administered with one of the other listed options.

QUESTION 5

Which of the following antidiabetic medication works by decreasing glucose reabsorption?

- A. Miglitol
- B. Linagliptin
- C. Pioglitazone
- D. Exenatide

E. Empagliflozin

Correct Answer: E

Empagliflozin is a SGLT2 inhibitor to decrease glucose reabsorption in the kidney. Linagliptin is a DPP-4 inhibitor that works on incretins/increase insulin secretion/decrease glucagon secretion. Pioglitazone is a TZD that increases insulin sensitivity. Exenatide is a GLP-1 agonist which increase insulin secretion/ decrease glucagon secretion/increase satiety.

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