# **Continuing Medical Education**

#### Exams are available online only at cme.psychiatryonline.org

#### INFORMATION TO PARTICIPANTS

OBJECTIVES. After evaluating a specific journal article published in the American Journal of Psychiatry, participants should be able to demonstrate an increase in their knowledge of clinical medicine. Participants should be able to understand the contents of a selected research or review article and to apply the new findings to their clinical practice.

PARTICIPANTS. This program is designed for all psychiatrists in clinical practice, residents in Graduate Medical Education programs, medical students interested in psychiatry, and other physicians who wish to advance their current knowledge of clinical medicine.

EXPLANATION OF HOW PHYSICIANS CAN PARTICIPATE AND EARN CREDIT. In order to earn CME credit, subscribers should read through

the material presented in the article. After reading the article, complete the CME quiz online at cme.psychiatryonline.org and submit your evaluation and study hours (up to 1 AMA PRA Category 1 Credit<sup>TM</sup>).

CREDITS. The APA designates this educational activity for a maximum of 1 AMA PRA Category 1 Credit<sup>TM</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The American Psychiatric Association (APA) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) for physicians.

Estimated Time to Complete: 1 Hour Begin date June 1, 2007 – End date May 31, 2009

#### **EXAMINATION QUESTIONS**

Select the single best answer for each question below.

#### **Neuroleptic Malignant Syndrome**

Jeffrey R. Strawn et al. Am J Psychiatry 2007; 164:870-876

QUESTION 1. Which of the following findings is likely to be present in a patient with an episode of acute NMS?

- A. Magnetic resonance imaging (MRI) evidence of ventriculomegaly
- B. Electroencephalographic evidence of diffuse, generalized slowing
- C. Serum creatine kinase (CK) concentrations in the normal range
- D. Arterial blood gas findings consistent with a metabolic alkalosis

QUESTION 2. Which of the following is a significant risk factor for the development of NMS?

- A. Physical exhaustion and dehydration
- B. Comorbid mood disorder
- C. Young age (less than 30 years)
- D. Male sex

QUESTION 3. Retrospective analyses of patients with acute NMS have suggested that which of the following occurs earliest?

- A. Hyperthermia
- B. Generalized muscle rigidity
- C. Myoglobinuric renal failure
- D. Alteration in mental status or other neurologic signs

#### **EVALUATION QUESTIONS**

This evaluation form is adapted from the MedBiquitous Journal-Based Continuing Education Guidelines 28 November 2005. This evaluation will appear online at the end of each CME course. Participants must complete this evaluation in order to receive credit. Select the response which best indicates your reaction to the following statements about this activity.

**STATEMENT 1.** The activity achieved its stated objectives

- 1. Strongly agree
- 2. Agree
- 3. Neutral
- 4. Disagree
- 5. Strongly disagree

**STATEMENT 2**. The activity was relevant to my practice.

- 1. Strongly agree
- 2. Agree
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**STATEMENT 3.** I plan to change my current practice based on what I learned in the activity.

- 1. Strongly agree
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- 3. Neutral
- 4. Disagree
- 5. Strongly disagree

**STATEMENT 4.** The activity validated my current practice.

- 1. Strongly agree
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- 3. Neutral
- 4. Disagree
- 5. Strongly disagree

**STATEMENT 5.** The activity provided sufficient scientific evidence to support the content presented.

- 1. Strongly agree
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- 5. Strongly disagree

**STATEMENT 6.** The activity was free of commercial bias toward a particular product or company.

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**Estimated Time to Complete: 1 Hour** Begin date June 1, 2007 – End date May 31, 2009

#### **EXAMINATION QUESTIONS**

Select the single best answer for each question below.

# Treatment of Psychiatric Symptoms Associated With a Frontal Lobe Tumor Through Surgical Resection

Zachary S. Hoffer et al. Am | Psychiatry 2007; 164:877-882

QUESTION 1. What is the more likely result of damage confined to the dorso-lateral prefrontal lobes?

- A. Violent or antisocial behavior
- B. Impairment of goal-directed behaviors and working memory
- C. Compulsive behaviors such as excessive gambling
- D. Impaired social cognition and emotional perception

QUESTION 2. What is the more likely result of left frontal lobe lesions with respect to psychiatric disturbances?

- A. Greater association with impulsivity and mania than right-sided lesions
- B. Greater debilitation than seen with bilateral frontal lobe lesions
- C. Greater association with depression when the dorsolateral prefrontal cortex is involved
- D. Involvement of the nondominant hemisphere.

QUESTION 3. A 58-year-old construction worker falls 10 feet from a scaffold and lands on his back, causing a severe concussion, but no bone injuries. Over the next several weeks, his wife notices that he has become very irritable, with exceptionally profane language and frequent violent outbursts. The MRI finding most consistent with this patient's behavioral changes is:

- A. Subdural hematoma compressing the left dorsolateral prefrontal cortex
- B. Traumatic transection of the cingulum bilaterally
- C. Bilateral contrecoup injury to the rostral pole of the temporal lobes
- D. Bilateral contrecoup injury to the orbitofrontal cortex

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#### **EXAMINATION QUESTIONS**

Select the single best answer for each question below.

# **Evaluating Three Treatments for Borderline Personality Disorder: A Multiwave Study**

John F. Clarkin et al.

Am J Psychiatry 2007; 164:922-928

QUESTION 1. A systematic review of existing psychotherapies for borderline personality disorder has reached which of the following conclusions?

- A. Existing therapies remain experimental and more "real world" studies are needed
- B. Dialectical behavior therapy is the sole treatment of choice
- C. A combination of medication and supportive therapy is best for most patients
- Existing therapies have sufficiently achieved optimal outcomes for this disorder

QUESTION 2. In this study, the use of transference-focused psychotherapy, dialectical behavior therapy, and supportive treatment demonstrated which of the following findings over a 1- year period?

- A. Only suicidality improved across the treatment period with all treatments
- B. Significant improvements in multiple domains were observed will all treatments
- Supportive therapy was the only intervention successful in reducing anger
- D. Symptom domains improved with all treatments but global functioning did not change

QUESTION 3. What outcome was associated with improvement among patients receiving transference-focused psychotherapy and dialectical behavior therapy but not supportive treatment?

- A. Anger
- **B.** Impulsivity
- C. Suicidality
- D. Social adjustment

#### **EVALUATION QUESTIONS**

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For free listing of your organization's official annual or regional meeting, please send us the following information: sponsor, location, inclusive dates, type and number of continuing education credits (if available), and the name, address, and telephone number of the person or group to contact for more information. In order for an event to appear in our listing, all notices and changes must be received at least 6 months in advance of the meeting and should be addressed to:

Calendar, American Journal of Psychiatry, 1000 Wilson Boulevard, Suite 1825, Arlington, VA 22209-3901, jblair@psych.org (e-mail).

Because of space limitations, only listings of meetings of the greatest interest to lournal readers will be included.

#### JUNE

June 6–8, WPA Thematic Conference, Dresden, Germany. Contact: Anett Reimann, Intercom Dresden GmbH, Zellescher Weg 3, 01069 Dresden, Germany; 49 (351) 4633 3014 (tel), 49 (351) 4633 7049 (fax), areimann@intercom.de (email), www.wpa2007dresden.org (web site).

#### **AUGUST**

August 25–29, 13th International Congress of the European Society of Child and Adolescent Psychiatry, Florence, Italy. Contact: Escap Secretariat, Via Emilia Est, 421, Modena, Italy 41100; 39 059 4223052 (tel), 39 059 4222275 (fax), info@escap-net.org (e-mail), http://www.escap-net.org (web site).

#### **SEPTEMBER**

September 9–12, Annual meeting of the Society for the Study of Psychiatry and Culture (SSPC), (in cooperation with the World Psychiatric Association Transcultural Psychiatry Section and the World Association for Cultural Psychiatry), Stockholm, Sweden. Contact: Jim Boehnlein or Shannon Squire sspcadmin@gmail.com (e-mail), www.psychiatryandculture.org (web site).

#### **OCTOBER**

October 6–7, 6th NYU Reproductive Psychiatry Conference, New York. Contact: Dr. Shari I. Lusskin, Director of Reproductive Psychiatry, New York University School of Medicine, 155 East 29th Street, Suite 26J, New York, NY 10016; (212) 263-5295 (tel), www.med.nyu.edu/cme (web site).

October 7–11, 15th World Congress on Psychiatric Genetics, New York. Contact: Lynn E DeLisi, International Society of Psychiatric Genetics, NYU School of Medicine, 650 First Avenue, 5th Floor Room 543, New York, NY 10016; (212) 263-3420 (tel), (212) 263-3407 (fax), DeLisi76@AOL.com (e-mail), www.WCPG2007.com (web site).

**October 11-14,** 59th Institute on Psychiatric Services, American Psychiatric Association, New Orleans, LA. Contact: Jill Gruber, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7815.

October 23–28, 54th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Boston. Contact: AACAP, 3615 Wisconsin Avenue, N.W., Washington, DC 20016-3007; (202) 966-7300 (tel), (202) 966-2891 (fax), meetings@aacap.org (e-mail), www.aacap.org (web site).

# **DECEMBER**

**December 8,** 4th annual Child Mental Health Symposium, Tucson, AZ. Contact: Professional Development Office, University of Arizona College of Medicine, Department of Psychiatry, PO Box 245002, 1501 N. Campbell Ave. #7423, Tucson, AZ 85724-5002; (520) 626-1392 (tel), (520) 626-5732 (fax), uapsycon@email. arizona.edu (e-mail), www.psychiatry. arizona.edu (web site).

# FEBRUARY 2008

February 15–18, 21st Annual Meeting of the American Association for Geriatric Psychiatry, Washington, DC. Contact: AAGP, 7910 Woodmont Ave., Ste. 1050, Bethesda, MD 20814-3004; (301) 654-7850 (tel), (301) 654-4137 (fax), www.aagpmeeting.org (web site).

February 27-March 2, Annual meeting of the American College of Psychiatrists, Kauai, Hawaii. Contact: American College of Psychiatrists, 122 S. Michigan Ave., Ste. 1360, Chicago, IL 60603; (312) 662-1020 (tel), (312) 662-

1025 (fax), maureen@acpsych.org (email).

#### **MARCH**

March 14–17, 21st Annual Meeting of the American Association for Geriatric Psychiatry, Orlando. Contact: AAGP, 7910 Woodmont Ave., Ste. 1050, Bethesda, MD 20814-3004; (301) 654-7850 (tel), (301) 654-4137 (fax), www.aagpmeeting.org (web site).

March 15, 7th Annual Women's Mental Health Symposium, Tucson, AZ. Contact: Professional Development Office, University of Arizona College of Medicine, Department of Psychiatry, PO Box 245002, 1501 N. Campbell Ave. #7423, Tucson, AZ 85724-5002; (520) 626-1392 (tel), (520) 626-5732 (fax), uapsycon@email. arizona.edu (e-mail), www.psychiatry. arizona.edu (web site).

March 26–29, Annual Meeting and Scientific Sessions of the Society of Behavioral Medicine, San Diego. Contact: Society of Behavioral Medicine, 17000 Commerce Parkway, Ste. C, Mount Laurel, NJ 08054; (856) 439-1297 (tel), (856) 439-0525 (fax), info@sbm.org (email).

#### MAY

May 1–4, The 52nd Annual Meeting of the American Academy of Psychoanalysis and Dynamic Psychiatry, Washington, DC. Contact: Executive Office, American Academy of Psychoanalysis and Dynamic Psychiatry, P. O. Box 30, Bloomfield, CT 06002; (888) 691-8281 (tel), (888) 286-0787 (fax), aap@ssmgt.com (e-mail).

May 3–4, American Academy of Psychiatry and the Law Semiannual Meeting, Washington, D.C. Contact: One Regency Drive, PO Box 30, Bloomfield, CT 06002-0030; (800) 331-1389, (tel) (860)

Continued on page A44



Continued from page A43

286-0787 (fax), execoff@aapl.org (email).

May 3–8, 161st Annual Meeting of the American Psychiatric Association, Washington, DC. Contact: Cathy Nash, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7822.

# JUNE

**June 19–21,** Thematic Conference on Depression and Relevant Psychiatric Con-

dition in Primary Care, Granada, Spain. Contact: Francisco Torres-González, Andalusian Research Group on Mental Health, University of Granada, Avenida deMadrid 11, Granada 18071, Spain; (34) 958-272651 (tel), (34) 958-275214 (fax), ftorres@ugr.es (e-mail).

#### **OCTOBER**

October 2–5, 60th Institute on Psychiatric Services, American Psychiatric Association, Chicago, IL. Contact: Jill Gruber, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7815.

October 28–November 2, 55th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Chicago. Contact: AACAP, 3615 Wisconsin Avenue, N.W., Washington, DC 20016-3007; (202) 966-7300 (tel), (202) 966-2891 (fax), meetings@aacap.org (e-mail), www.aacap.org (web site).

November 23–28, Canadian Psychiatric Association 58th Annual Meeting, Vancouver, British Columbia, Canada. Contact: 260-441 MacLaren Street, Ottawa, ON K2P 2H3, Canada; (800) 267-1555 (tel), (613) 234-9857 (fax), cpa@medical.org (e-mail).

#### **FEBRUARY 2009**

February 25–March 1, American College of Psychiatrists Annual Meeting, Tucson, AZ. Contact: 122 South Michigan Avenue, Suite 1360, Chicago, IL 60603; (312) 662-1020 (tel), (312) 662-1025 (fax), angel@ACPsych.org (e-mail).

#### MAY

May 16–21, 162nd Annual Meeting of the American Psychiatric Association, San Francisco. Contact: Cathy Nash, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7822.

# Coming in the July 2007 issue THE AMERICAN JOURNAL OF PSYCHIATRY

Suicide Attempts Among Patients Starting Depression Treatment With Medications or Psychotherapy

G.E. Simon and J. Savarino

Columbia Classification Algorithm of Suicide Assessment (C-CASA): Classification of Suicidal Events in the FDA's Pediatric Suicidal Risk Analysis of Antidepressants

K. Posner, M.A. Oquendo, B. Stanley, M. Davies, and M. Gould

Relationship Between Antidepressants and Suicide Attempts: An Analysis of the Veterans Health Administration Data Sets

R.D. Gibbons, C.H. Brown, K. Hur, S.M. Marcus, D.K. Bhaumik, and J.J. Mann

A Comparison of the Effects of Olanzapine, Quetiapine, and Risperidone on Neurocognitive Function in First-Episode Psychosis: A Randomized, Double-Blind Clinical Trial

R.S.E. Keefe, J.A. Sweeney, H. Gu, R.M. Hamer, D.O. Perkins, J.P. McEvoy, and J.A. Lieberman