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

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Estimated Time to Complete: 1 Hour

Begin date November 1, 2006 – End date October 31, 2008

EXAMINATION QUESTIONS

Select the single best answer for each question below.

A Clinical Approach to Mild Cognitive Impairment

Paul B. Rosenberg et al. Am J Psychiatry 2006; 163:1884-1890

QUESTION 1. A 72-year-old man complains that for 1 year he has had trouble remembering names, no longer can do the Sunday New York Times crossword puzzle, but has no other difficulties in his daily life. His score on the Mini-Mental State Exam is 28 out of 30, missing two items on short-term recall. Neuropsychologic testing revealed deficits in episodic memory and category fluency (expressive language). Which of the following is the most likely diagnosis?

- A. Amnestic mild cognitive impairment, multiple domain
- B. Normal cognitive changes for his age
- C. Nonamnestic mild cognitive impairment, multiple domain
- D. Dementia of the Alzheimer type

QUESTION 2. In distinguishing a diagnosis of mild cognitive impairment from dementia, which of the following is most useful?

- A. Obtaining a history of daily functioning from patient and informant.
- B. Magnetic resonance imaging of the
- brain. C. Neuropsychological testing.
- D. Mini-Mental State Exam and Clock Drawing Test.

QUESTION 3. Well-established treatments for preventing progression of mild cognitive impairment to dementia include which of the following?

- A. Alpha-Tocopherol (vitamin E)
- **B.** Memantine
- C. Nonsteroidal anti-inflammatory drugs
- D. None of the above

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

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

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

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

- or company.
- 1. Strongly agree
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- 5. Strongly disagree
- STATEMENT 4. The activity validated my

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EXAMINATION QUESTIONS

Select the single best answer for each question below.

The Relationship Between Antidepressant Prescription Rates and Rate of Early Adolescent Suicide

Robert D. Gibbons et al.

OUESTION 1. U.S. counties with higher rates of SSRI prescriptions were associated with which of the following suicide rates?

- A. Increased child and young adolescent suicide rates
- B. Decreased child and young adolescent suicide rates
- C.. No change in child or adolescent suicide rates
- D. Not applicable

Am J Psychiatry 2006; 163:1898-1904

OUESTION 2. Which of the following population features are associated with the highest child and adolescent suicide rates?

- A. Densely populated areas
- B. Sparsely populated areas
- C. Areas with a high density of psychiatrists
- D. Areas with more wealthy residents

OUESTION 3. In the current study, the effect of SSRIs on suicide remained significant after controlling for other factors relating to mental health care access. One factor, the median income for each county, had which of the following associations with suicide?

- A. Income was inversely related to suicide rate
- B. Income had no significant association with suicide
- C. Higher income was associated with increased suicide
- D. Both extremes of income were related to increased suicide

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Estimated Time to Complete: 1 Hour

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EXAMINATION QUESTIONS

Select the single best answer for each question below.

A Randomized Controlled Trial of a Smoking Cessation Intervention Among People With a Psy-

QUESTION 1. Among patients with a psychotic disorder, which of the following factors most contributes to an increased likelihood of stopping smoking and achieving abstinence?

- A. Completing all counseling sessions
- B. Achieving an improvement in de-
- pressive symptoms C. Concurrent treatment with an atypical antipsychotic
- D. Attending approximately five counseling sessions

chotic Disorder Amanda Baker et al. Am J Psychiatry 2006; 163:1934-1942

OUESTION 2. In this study of an eightsession, individually administered smoking cessation intervention, what proportion of patients with psychotic disorders completed all visits?

- A. Nearly all participants completed all
- eight sessions B. Less than 10% completed the sessions.
- C. Approximately one-half completed the sessions.
- D. There were no completers.

OUESTION 3. In this study, nicotine replacement therapy commencement was associated with which of the following?

- A. A greater incidence of abstinence
- B. A net reduction of five to eight cigarettes per day
- C. A greater likelihood of completing all counseling sessions
- D. No change in number of cigarettes smoked per day

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- 4. Disagree