# **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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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 January 1, 2007 - End date December 31, 2008

#### **EXAMINATION QUESTIONS**

Select the single best answer for each question below.

## Sadness and Loss: Toward a Neurobiopsychosocial Model

Peter J. Freed, J. John Mann Am J Psychiatry 2007; 164:28-34

QUESTION 1. The incentive salience model of sadness offer a framework for studying the neurobiology of sadness following loss. In the context of loss, the term incentive salience refers to:

- A. Yearning for and attention to reminders of the loved one
- B. Consciously renouncing the attachment
- C. The belief that reunion with the attachment is possible
- D. A process of detachment from the loved one or object

QUESTION 2. Mental health professionals who encourage patients to feel sad and cry during bereavement implicitly treat sadness as:

- A. An endogenous mechanism for increasing incentive salience
- B. An internally generated punishment
- C. An endogenous mechanism for reducing incentive salience
- D. An effort to induce caregiving

QUESTION 3. Which of the following is true regarding the neurotransmitter systems that may be involved in attachment and bereavement?

- A. Oxytocin release worsens separation distress
- B. Cue-induced sadness increases opioid and oxytocin release
- C. Opioid transmission is reduced during exposure to attachment figures.
- D. Dopamine is released in response to reward-predicting cues.

#### **EVALUATION QUESTIONS**

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**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.

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

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

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# A Randomized, Controlled Trial With 6-Month Follow-Up of Repetitive Transcranial Magnetic Stimulation and Electroconvulsive Therapy for Severe Depression

Savitha Eranti et al. Am | Psychiatry 2007; 164:73-81

QUESTION 1. The results of this singleblind controlled randomized trial of rTMS and ECT demonstrated that in the short-term treatment of severely depressed patients

- A. rTMS was more effective than ECT.
- B. ECT was more effective than rTMS.
- C. There was no difference between rTMS and ECT
- D. rTMS worsened depression.

QUESTION 2. Of 260 patients assessed for eligibility to enter this randomized trial of rTMS and ECT for severely depressed patients, only 107 met the inclusion criteria. The main reason for being excluded from the trial was

- A. Not wanting to be involved in a research study
- B. Being left-handed
- C. Being the wrong sex
- D. Not consenting to have ECT

QUESTION 3. In this randomized trial of rTMS and ECT in severely depressed patients, the remission rate to ECT at the end of treatment course was

- A. Nearly 17%
- B. Less than 50%
- C. Nearly 60%
- D. Greater than 80%

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#### **EXAMINATION QUESTIONS**

Select the single best answer for each question below.

# A Randomized Trial of Integrated Group Therapy Versus Group Drug Counseling for Patients With Bipolar Disorder and Substance Dependence

Roger D. Weiss et al. Am J Psychiatry 2007; 164:100-107

QUESTION 1. Integrated group therapy for persons with bipolar disorder and substance use focuses on which of the following aspects of the patient's illness?

- A. Similarities in thought and behavior patterns involved in recovery from both disorders are emphasized.
- B. Mood stabilization is the focus of the group, followed by substance abuse issues.
- Interpersonal skills are emphasized independently of other comorbid conditions.
- D. Group interactions focus on the substance use while pharmacotherapy stabilizes mood.

QUESTION 2. Compared to patients with bipolar disorder alone, patients with both bipolar disorder and substance use disorder are more likely

- A. To be hospitalized more often
- B. Not to take their medications as prescribed
- C. To take longer to recover from mood episodes
- D. All of the above

QUESTION 3. Patients receiving integrated group therapy showed greater improvement in

- A. Fewer days using substances
- B. Reduced need for mood stabilizers
- C. Fewer episodes of bipolar disorder
- D. None of the above

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