



Continued from page A24

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MAY 2010

May 22–27, 163rd Annual Meeting of the American Psychiatric Association, New Orleans, LA. Contact: Cathy Nash, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7822.

OCTOBER

Oct 14–17, 57th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Boston, MA. 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).

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THE AMERICAN JOURNAL OF PSYCHIATRY

Olanzapine in the Treatment of Low Body Weight and Obsessive Thinking in Women With Anorexia Nervosa: A Randomized, Double-Blind, Placebo-Controlled Trial

H. Bissada, G.A. Tasca, A.M. Barber, and J. Bradwejn

Compulsive Hoarding: OCD Symptom, Distinct Clinical Syndrome, or Both?

A. Pertusa, M.A. Fullana, S. Singh, P. Alonso, J.M. Menchón, and D. Mataix-Cols

Gray Matter Structural Alterations in Psychotropic Drug-Naive Pediatric Obsessive-Compulsive Disorder:

An Optimized Voxel-Based Morphometry Study

P.R. Szeszko, C. Christian, F. MacMaster, T. Lencz, Y. Mirza, S.P. Taormina, P. Easter, M. Rose, G.A. Michalopoulou, and D.R. Rosenberg

White Matter Abnormalities in Patients With Obsessive-Compulsive Disorder and Their First-Degree Relatives

L. Menzies, G.B. Williams, S.R. Chamberlain, C. Ooi, N. Fineberg, J. Suckling, B.J. Sahakian, T.W. Robbins, and E.T. Bullmore

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Information for Participants

Objectives: After evaluating a specific journal article, 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.

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Information on Courses

Title: Body Dysmorphic Disorder: Treating an Underrecognized Disorder

Faculty: Katharine A. Phillips, M.D., Elizabeth R. Didie, Ph.D., Jamie Feusner, M.D., Sabine Wilhelm, Ph.D.

Affiliations: Butler Hospital and the Warren Alpert Medical School of Brown University, Providence, R.I. (K.A.P., E.R.D.); the Semel Institute for Neuroscience and Human Behavior and the David Geffen School of Medicine at UCLA (J.F.); and Massachusetts General Hospital and Harvard Medical School (S.W.).

Disclosures: Dr. Phillips receives research support from NIMH, the FDA, the American Foundation for Suicide Prevention, Forest Laboratories (medication only), and UCB Pharma (investigator-initiated research grant) and has received publication or speaking honoraria from Merck and academic institutions and royalties from Wrightson Biomedical Publishing; she may receive future royalties from Oxford University Press, Guilford Publications, and The Free Press. Dr. Didie receives research support from NIMH. Dr. Feusner receives support from NIMH, the Obsessive-Compulsive Foundation, and the UCLA Academic Senate and received a consultation honorarium from Jazz Pharmaceuticals. Dr. Wilhelm has received research support from NIMH, the FDA, the Obsessive-Compulsive Foundation, the Tourette Syndrome Association, and Forest Laboratories (medication only). Dr. Wilhelm is a presenter for the Massachusetts General Hospital Psychiatry Academy in educational programs supported through independent medical education grants from pharmaceutical companies; she has received royalties from Guilford Publications and New Harbinger Publications and may receive future royalties from Oxford University Press.

Discussion of unapproved or investigational use of products*: Yes

Title: Mentalization: Ontogeny, Assessment, and Application in the Treatment of Borderline Personality Disorder

Faculty: Lois W. Choi-Kain, M.D., M.Ed., John G. Gunderson, M.D.

Affiliation: Department of Psychiatry, Harvard Medical School.

Disclosures: The authors report no competing interests.

Discussion of unapproved or investigational use of products*: None

Title: An Adoption Study of Parental Depression as an Environmental Liability for Adolescent Depression and Childhood Disruptive Disorders

Faculty: Erin C. Tully, Ph.D., William G. Iacono, Ph.D., Matt McGue, Ph.D.

Affiliations: Department of Psychology, University of Minnesota.

Disclosures: The authors report no competing interests.

Discussion of unapproved or investigational use of products*: None

* American Psychiatric Association policy requires disclosure by CME authors of unapproved or investigational use of products discussed in CME programs. Off-label use of medications by individual physicians is permitted and common. Decisions about off-label use can be guided by scientific literature and clinical experience.

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Estimated Time to Complete: 1 Hour

Begin date September 1, 2008 – End date August 31, 2010

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Body Dysmorphic Disorder: Treating an Underrecognized Disorder

Katharine A. Phillips et al.

Am J Psychiatry 2008; 165:1111-1118

QUESTION 1. Available data indicate that which of the following classes of medications is often efficacious for body dysmorphic disorder, including its delusional variant?

- A. Second generation antipsychotics.
- B. First generation antipsychotics.
- C. Serotonin-reuptake inhibitors.
- D. Anticonvulsants.

QUESTION 2. Available data indicate that which of the following types of therapy is often efficacious for body dysmorphic disorder?

- A. Supportive therapy.
- B. Cognitive restructuring, exposure, and response prevention.
- C. Psychodynamic psychotherapy.
- D. Relaxation techniques.

QUESTION 3. For a patient with body dysmorphic disorder who shows no improvement with a 5-week, well-tolerated trial of citalopram 20 mg/day, clinical experience suggests that the best next step is which of the following?

- A. Increase the citalopram dose and continue the trial.
- B. Discontinue citalopram and switch to an antipsychotic.
- C. Discontinue citalopram and switch to another serotonin reuptake inhibitor.
- D. Continue citalopram at 20 mg/day.

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.

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STATEMENT 4. The activity validated my current practice.

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- 5. Strongly disagree

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

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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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EXAMINATION QUESTIONS

Select the single best answer for each question below.

Mentalization: Ontogeny, Assessment, and Application in the Treatment of Borderline Personality Disorder

Lois W. Choi-Kain and John G. Gunderson
Am J Psychiatry 2008; 165:1127-1135

QUESTION 1. Fonagy's concept of mentalization, defined as an ability to imagine the mental states of oneself and others, includes the following dimensions:

- A. Self and other-oriented dimensions.
- B. Implicit and explicit dimensions.
- C. Cognitive and affective dimensions.
- D. All of the above.

QUESTION 2. Concepts overlapping with mentalization include all of the following EXCEPT:

- A. Psychological mindedness
- B. Transference
- C. Empathy
- D. Mindfulness

QUESTION 3. Which of the following terms describes a prementalistic or nonmentalizing mode of functioning observable in individuals with borderline personality disorder?

- A. Potential space
- B. Alpha-function
- C. Psychic equivalence
- D. Reflective functioning

EVALUATION QUESTIONS

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Select the single best answer for each question below.

An Adoption Study of Parental Depression as an Environmental Liability for Adolescent Depression and Childhood Disruptive Disorders

Erin C. Tully et al.

Am J Psychiatry 2008; 165:1148-1154

QUESTION 1. This unique parent-child adoption study allowed the investigators to isolate mechanisms of risk for adolescent psychopathology. Which of the following reflects their observations regarding the association between maternal depression and risk for adolescent psychopathology?

- A. There was no liability for adolescent depression related to the presence of maternal depression.
- B. This association was present in families even when the mother and child had a nonbiological relationship
- C. There was an association only between paternal depression and adolescent psychopathology.
- D. The study demonstrated that the liability incurred by maternal depression is solely genetic.

QUESTION 2. Which of the following reflects the rates of parental major depression observed in this study?

- A. Rates of depression in adoptive parents were lower due to the screening process in selecting them.
- B. Rates of depression were twice as high in non-adoptive compared to adoptive parents
- C. Either parent was depressed in 34% of non-adoptive and 38% of adoptive families
- D. Depression in either parent was 20% higher in adoptive parents than non-adoptive parents

QUESTION 3. Which of the following statements describe the implications of this research for treatment of psychopathology in families with depressed mothers?

- A. Biological and non-biological adolescents of depressed mothers should be targeted for preventative interventions.
- B. Treatment that reduces depression in mothers may reduce risk for psychopathology in their children.
- C. Although non-biological children of depressed mothers do not have elevated genetic risk from the adoptive mother, clinical attention is warranted due to their elevated environmental risk.
- D. All of the above.

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