

Psychiatry Drug Alerts 2018 Self-Assessment Module 12: Peer Comparison

You recently participated in an ABPN-approved Self-Assessment activity relevant to your specialty and/or subspecialty. This peer comparison report provides you with feedback on your performance, relative to your peers, on the test module. In order to recognize your current knowledge base and to identify specific topics where further study may be needed, please review your answers to the following questions and compare them with those of your peers.

1) Although olanzapine has been shown to be among the most effective antipsychotics, many clinicians avoid its use because of the risk(s) for:

Weight gain	0.00 %
Diabetes	0.00 %
Cardiovascular events	0.00 %
All of the above	100.00 %

2) In a preliminary, placebo-controlled trial, the histaminergic agonist betahistine (not available in the U.S.) prevented weight gain in patients taking _____, but not other antipsychotic agents.

Olanzapine only	0.00 %
Clozapine only	0.00 %
Clozapine or olanzapine	100.00 %
None of the above	0.00 %

3) Antidepressant tachyphylaxis is best defined as the loss of efficacy of an antidepressant that had a prior established response. According to a comprehensive review, independent risk factors for antidepressant tachyphylaxis include all of the following except:

Onset of depression later in life	0.00 %
Presence of comorbid anxiety	100.00 %
History of at least 3 previous depressive episodes	0.00 %
Presence of residual symptoms	0.00 %

4) Patients with antidepressant tachyphylaxis typically present with alterations in energy level, motivation/interest, cognitive function, sleep disturbance, and sexual function, as opposed to depressed mood.

True	100.00 %
False	0.00 %

5) Treatment strategies for antidepressant tachyphylaxis are generally similar to those for resistant depression and include _____ or augmentation with lithium or an antipsychotic.

Dose changes	0.00 %
Medication switching	0.00 %
Switching to cognitive behavioral therapy	0.00 %
All of the above	100.00 %

6) Psychostimulants and antiretrovirals are likely to be coprescribed, in part because certain genotypes associated with development of ADHD may also increase risk of future HIV acquisition.

True	100.00 %
False	0.00 %

7) Based on cytochrome P450 metabolism, _____ may be the most appropriate stimulant options for patients also receiving antiretroviral therapy.

Mixed amphetamine salts and guanfacine	0.00 %
Guanfacine and methylphenidate	0.00 %
Methylphenidate and lisdexamfetamine	0.00 %
Lisdexamfetamine and dextmethylphenidate	100.00 %

8) Of particular concern in patients treated for comorbid ADHD and HIV is the potential for both stimulants and antiretrovirals to increase:

Appetite and weight	0.00 %
Sedation	0.00 %
Cardiovascular risks	100.00 %
All of the above	0.00 %

9) According to an international consensus statement, although the use is off-label, baclofen (Lioresal) may be a promising _____ treatment for patients with alcohol use disorder.

First-line	0.00 %
Second-line	100.00 %

10) Following an MI, patients with schizophrenia are about _____% less likely than those without to receive secondary prevention with cardioprotective drugs.

5-10	0.00 %
10-15	100.00 %
20-25	0.00 %
50-60	0.00 %

11) According to a large retrospective study, mortality is reduced in patients with schizophrenia who receive cardioprotective therapy and the positive effects increase in proportion to the number of preventive drugs prescribed.

True	100.00 %
False	0.00 %

12) Results of a preliminary controlled trial in patients with bipolar disorder indicate that adding _____ to a mood-stabilizing regimen produces the highest rate of depression response at 16 weeks.

Aspirin alone	0.00 %
N-acetylcysteine alone	0.00 %
Aspirin plus N-acetylcysteine	100.00 %
None of the above	0.00 %

13) The European Network Adult ADHD organization consensus statement on the treatment of adult ADHD indicates that the disorder requires multimodal treatment. Stimulants are the recommended first-line pharmacotherapy for adult ADHD. However, _____ may trigger cardiac arrhythmias in patients with congenital heart disease and its use requires caution.

Atomoxetine	0.00 %
Guanfacine	0.00 %
Methylphenidate	100.00 %
Bupropion	0.00 %

14) Although it may require up to 2 weeks for onset of action and up to 6 months to reach full effect, _____ may be a preferable alternative for patients with comorbid anxiety that could be exacerbated by stimulants.

Vortioxetine	0.00 %
Atomoxetine	100.00 %
Guanfacine	0.00 %
Desvenlafaxine	0.00 %

15) The high rate of comorbidity in adults with ADHD leads to frequent combined pharmacotherapy and the risk for drug interactions; _____ are generally contraindicated in patients receiving ADHD medications.

MAOIs	100.00 %
SSRIs	0.00 %
SNRIs	0.00 %
All of the above	0.00 %