## Child & Adolescent Psychiatry Alerts 2018 Self-Assessment Module 7: 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) Sensory integration (SI) therapy is a therapeutic physical activity that uses controlled sensory inputs to focus a patient's attention. SI therapies include:

Coordination, sensory, and balance trainings	12.50 %
Activity and occupational therapies	0.00 %
Sensory-motor training	0.00 %
All of the above	87.50 %

2) While some parents of children with ADHD may prefer SI therapy to the more cumbersome recommended multimodal therapy, according to the results of a population-based study, they should be advised that without behavioral management and/or pharmacotherapy, SI therapy alone may worsen their child's long-term outcome.

True	100.00 %
False	0.00 %

3) In the study, rates of all of the following except \_\_\_\_\_ were significantly higher over up to 9 years of follow-up in children who received SI therapy than in a propensity-score matched group of children who did not.

Conduct disorder	0.00 %	
Emotional disturbances	0.00 %	
Schizophrenia	100.00 %	
Adjustment disorder	0.00 %	

## 4) Benefits of extended-release oral amphetamine suspension (Dyanavel XR) include:

Easy ingestion	0.00 %
Individualized dosing	0.00 %
Rapid onset, followed by 12 or more hours of clinical	0.00 %
effects	

All of the above

5) In a laboratory-classroom-based study, extended-release oral amphetamine suspension produced positive effects that were similar to those reported with other long-acting stimulants; however, one-fourth of patients who received the agent reported:

100.00 %

Headache	0.00 %	
Decreased appetite	100.00 %	
Dry mouth	0.00 %	
Insomnia	0.00 %	

6) In a group of high-risk adolescents comprised mainly dialectical behavior therapy (DBT) was more effective to			
therapy (IGST) at reducing during 6 months of			
Suicide attempts	12.50 %		
Nonsuicidal self-injury and self-harm	0.00 %		
Suicidal ideation	0.00 %		
All of the above	87.50 %		
7) In the study, participants in the DBT group had higher rates of treatment completion, attended more sessions, and spent more weeks in treatment than those in the IGST group; between-group differences in outcomes accounted for by these differences in treatment exposure.			
Were	37.50 %		
Were not	62.50 %		
8) According to results of a meta-analysis, a wide range of universal interventions improve self-regulation. While most intervention types had similar effects, the effect size was largest for interventions that were based on:			
Yoga or mindfulness	0.00 %		
Exercise	0.00 %		
Social/personal skills	100.00 %		
Family activities	0.00 %		
9) Improvements in self-regulation did not translate to a True False	improved academic, health, or behavioral outcomes. 12.50 % 87.50 %		
10) While the analysis provides evidence for a range of feasible to provide than others.	interventions,based programs might be more		
School-curriculum	100.00 %		
Family	0.00 %		
Community	0.00 %		
Yoga	0.00 %		
11) In a group of antipsychotic-naive children and adole aggression, improvements in irritability, aggression, an risperidone, and aripiprazole.			
True	100.00 %		
False	0.00 %		
12) Metabolic changes, including increases in total body patients who received any of the 3 study medications. H	lowever, these changes were greatest with:		
Aripiprazole	0.00 %		
Risperidone	0.00 %		
Olanzapine	100.00 %		
None of the above	0.00 %		

13) During the 12 weeks of study treatment, diabetes did not develop in any of the 144 study patients, but	
did show impaired fastina alucose levels.	

140	0.00 %
62	0.00 %
27	0.00 %
9	100.00 %