

Child & Adolescent Psychiatry Alerts 2019 Self-Assessment Module 6: 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) Data from the Centers for Disease Control and Prevention Wide-ranging Online Data for Epidemiologic Research (WONDER) database indicate that while 80% of the >85,000 adolescent suicides recorded between 1975 and 2016 occurred in males, the gender gap is narrowing.

True	100.00 %
False	0.00 %

2) Data from more recent years (2007–2016) indicate a steady increase in annual rates of adolescent suicide that is larger in girls than boys (8.9% vs 3.8%) and is particularly large in _____, who experienced a >12% annual increase in suicides.

Boys aged 10–14 years	0.00 %
Boys aged 15–19 years	0.00 %
Girls aged 10–14 years	100.00 %
Girls aged 15–19 years	0.00 %

3) According to a review, in adolescents with co-occurring depression and substance use disorder treatment of the 2 disorders should be integrated, and _____ may be the most effective option.

Fluoxetine monotherapy	0.00 %
Motivational enhancement therapy/CBT	100.00 %
Dialectical behavior therapy	0.00 %
Sertraline plus contingency management	0.00 %

4) In recent years, many new stimulant formulations have become available for treatment of ADHD. Most of the emphasis in drug development has been on long-acting formulations and novel delivery systems, and new options such as _____ for patients who have difficulty swallowing have been introduced.

Orally disintegrating tablets	0.00 %
Chewable tablets	0.00 %
Suspensions/solutions	0.00 %
All of the above	100.00 %

5) New long-acting formulations of _____ that make use of microbead technology capable of both immediate and delayed/extended release are now available.

Amphetamine only	0.00 %
Methylphenidate only	0.00 %
Both amphetamine and methylphenidate	100.00 %
None of the above	0.00 %

6) In addition, a transdermal methylphenidate patch (Daytrana) delivers drug for the duration of wear time with absorption continuing for several hours after patch removal. While efficacy and safety of transdermal methylphenidate are similar to other formulations, some unique risks including _____ are associated with this formulation.

Local contact dermatitis	0.00 %
Discomfort with patch removal	0.00 %
Accidental poisoning	0.00 %
All of the above	100.00 %

7) A delayed release/extended release methylphenidate formulation (Jornay PM), which uses a proprietary delivery system containing microbeads with 2 layers of coating—1 that delays drug release and a second that regulates release in an extended pattern—is meant to be taken in the evening, delays release for _____, and then provides clinical action for up to 22–24 hours post-dose.

2–3 hours	0.00 %
6–8 hours	0.00 %
8–10 hours	100.00 %
>12 hours	0.00 %

8) In a randomized controlled trial, the investigational extended-release nonstimulant medication viloxazine was effective but poorly tolerated in children with ADHD.

True	0.00 %
False	100.00 %

9) Viloxazine at 200, 300, and 400 mg/day was significantly superior to placebo at reducing ADHD Rating Scale IV total scores, but between-group differences on the _____ subscale were not significant.

Inattention	100.00 %
Hyperactivity/impulsivity	0.00 %

10) Although the study results are preliminary, they suggest that efficacy and tolerability of viloxazine appear to be _____ other nonstimulants used to treat ADHD.

Better than	25.00 %
Similar to	75.00 %
Worse than	0.00 %

11) According to the results of a case-control study, in young women with anorexia nervosa use of oral contraceptives (OCs) appears to _____ bone loss.

Reverse	50.00 %
Limit	50.00 %
Have no effect on	0.00 %

12) Although the favorable effects of OCs do not appear to completely offset the negative effects of anorexia nervosa on bone tissue, the effects appear to be strong enough that OCs can be used as the sole method to protect bone in women with the disorder.

True	50%
False	50%