## Psychiatry Drug 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.

treatment. In a study of patients newly t	acy in predicting worsening suicidal ideation during antidepressant reated with duloxetine, a model that combined and 2 RNA marke	rs
	tissue was found to be accurately predictive.	
Patient age	0.00 %	
CYP genotype	0.00 %	
Baseline depression severity	80.00 %	
All of the above	20.00 %	
2) In a placebo controlled trial of patients	with moderate-to-severe treatment-resistant depression, twice weekly	
esketamine nasal spray plus a new oral a	ntidepressant produced response in% of patients, compared with	ı
52% of those who received an oral antide	pressant plus placebo nasal spray.	
12	0.00 %	
38	0.00 %	
69	100.00 %	
84	0.00 %	
However, concerns about the use of esker Potential suicide risk Length of treatment Rapid relapse after discontinuation All of the above  4) In a placebo-controlled withdrawal trice	nd there was no clear evidence of withdrawal after discontinuation.  tamine nasal spray, including, remain.  10.00 %  0.00 %  90.00 %  al, patients who had achieved stable response or remission with adjunctive ssigned to placebo or continued using	
	other week did not have a significantly lower risk of relapse than those	,
True	0.00 %	
False	100.00 %	
	ontinuation can sometimes be attributed to antidepressant withdrawal. because the of esketamine precludes steady-state levels with	
Short half-life	100.00 %	
Low bioavailability	0.00 %	
Primary metabolism pathway	0.00 %	
All of the above	0.00 %	

aripiprazole or a combination of the agent	ving monotherapy with lithium, valproate, olanzapine, quetiapine, or s following a manic episode found those who received combination therapy	
had lower rates of all of the following exce		
Treatment failure	10.00 %	
Rehospitalization	80.00 %	
Medication switches	0.00 %	
Treatment discontinuation	10.00 %	
7) In the study, the combination ofassociated with lower rates of rehospitalize	was associated with the lowest failure rate and was the only combination ation.	
Olanzapine plus quetiapine	0.00 %	
Lithium plus aripiprazole	0.00 %	
Lithium plus valproate and olanzapine	10.00 %	
Lithium plus valproate and quetiapine	90.00 %	
8) Benzodiazepines readily cross the placenta and have been identified at high concentrations in fetal tissues.  According to the results of a case-control study, their use in early pregnancy associated with increased risk of spontaneous abortion.  Is 100.00 %		
Is not	0.00 %	
9) The study found risk was increased: With benzodiazepines as a class In a dose-dependent manner With both long- and short-acting agents All of the above	0.00 % 0.00 % 0.00 % 100.00 %	
10) Among the individual agents	was found to have the highest odds ratio for spontaneous abortion.	
Clonazepam	0.00 %	
Lorazepam	10.00 %	
Alprazolam	90.00 %	
Triazolam	0.00 %	
11) Results of a retrospective study suggest	t that a combination of genomic markers and baseline symptom severity rapy in patients with depression. The predictive genomic markers were 2	
Plasma kynurenine	90.00 %	
Oxidative stress	0.00 %	
Immune and neuronal signaling	0.00 %	
None of the above	10.00 %	

12) An additional SNP, associated with plasma serotonin, was also found to be a significant predictor of SSRI response,

100.00 %

0.00 %

but only in: Men

Women