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1. Read each question carefully and circle the answer on the Registration Form.
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- 1. According to Thase, the economic burden of depression was estimated to be (in 1990 dollars):**
 - a. \$10 million
 - b. \$10 billion
 - c. \$40 billion
 - d. \$400 million
- 2. Thase noted that, in the Global Burden of Disease survey, the World Health Organization estimated that depression accounted for what percentage of disability days?**
 - a. 3%
 - b. 11%
 - c. 19%
 - d. 29%
- 3. According to Thase, which of the following is not usually overrepresented among "difficult-to-treat" cases?**
 - a. Bipolar depression
 - b. Psychotic depression
 - c. Depression with comorbid substance abuse
 - d. Acute depression
- 4. According to Nelson, switching from one antidepressant agent to another is a common approach to treatment-resistant depression. Which one of the following is *not* an advantage to switching compared with other treatment approaches?**
 - a. Switching is simpler to execute, which may increase treatment compliance.
 - b. Switching may be less expensive than combining or augmenting medications.
 - c. Switching decreases the chances of adverse drug-drug interactions.
 - d. Switching allows multiple agents to affect pathologic systems.
- 5. According to Nelson, which one of the following most substantially limits the application of data from studies that may be used to develop evidence-based treatments of depression?**
 - a. Problems with determining a patient's history
 - b. Problems with the methodology of studies
 - c. Problems with the number of studies of depression
 - d. Problems with the definitions of pathologic states

6. According to Nelson, although many treatment strategies have been reported for treatment-resistant depression, which of the following has *not* been recommended?
- Switching from one selective serotonin reuptake inhibitor (SSRI) to another
 - Switching from an SSRI to a tricyclic antidepressant (TCA)
 - Switching from an SSRI to an antipsychotic
 - Augmenting an SSRI with a TCA
7. According to Keck and McElroy, risks associated with antidepressant use for bipolar depression include:
- Switching into mania
 - Switching into hypomania
 - Switching into a mixed episode
 - All of the above
8. Keck and McElroy noted that, in two 18-month randomized controlled trials in the maintenance treatment of bipolar disorder:
- Lamotrigine was superior to placebo in prolonging time to intervention for depression.
 - Lithium was superior to placebo in prolonging time to intervention for mania.
 - Patients were initially stabilized on lamotrigine alone before randomization.
 - All of the above
9. Keck and McElroy observed that, in an 8-week acute treatment randomized controlled trial in patients with bipolar depression:
- Olanzapine was superior to placebo.
 - The olanzapine-fluoxetine combination was superior to placebo.
 - There were no significant differences in switch rates among treatment groups.
 - All of the above
10. According to Schatzberg, psychotic depression is frequently overlooked for all of the following reasons, *except*:
- Patients are often careful about revealing cognitive deficits and delusions.
 - Patients with psychotic depression, schizophrenia, and schizoaffective disorder have similar symptoms.
 - Patients will sometimes deny thoughts of suicide.
 - Psychotic depression is extremely rare, and clinicians are unfamiliar with its presentation.
11. According to Schatzberg, patients with psychotic depression, compared with patients with nonpsychotic depression, are more likely to have:
- A positive family history of mental disorder
 - Less suicidal ideation and intent
 - Diurnal variation of depressive symptoms
 - Less cognitive disturbance
12. According to Schatzberg, the drug treatments that have typically been most effective for psychotic depression include combinations of mood stabilizers and antipsychotics.
- True
 - False
13. According to Manning, common causes of treatment resistance in depressed primary care patients include:
- Comorbid substance abuse
 - Lack of adherence to a medication regimen
 - Inadequate dose of antidepressant
 - All of the above
14. According to Manning, which of the following antidepressant augmentation strategies has been best studied in controlled investigations?
- Thyroid preparations
 - Estrogens
 - Pindolol
 - Lithium

CME REGISTRATION FORM

New Approaches to Managing Difficult-to-Treat Depressions

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Circle the one correct answer for each question.

- | | |
|------------|-------------|
| 1. a b c d | 8. a b c d |
| 2. a b c d | 9. a b c d |
| 3. a b c d | 10. a b c d |
| 4. a b c d | 11. a b c d |
| 5. a b c d | 12. a b |
| 6. a b c d | 13. a b c d |
| 7. a b c d | 14. a b c d |

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1. Was the educational content relevant to the stated educational objectives? Yes No
2. Did this activity provide information that is useful in your clinical practice? Yes No
3. Was the format of this activity appropriate for the content being presented? Yes No
4. Did the method of presentation hold your interest and make the material easy to understand? Yes No
5. Achievement of educational objectives:
 - A. Enabled me to describe the clinical features of bipolar depression and psychotic depression. Yes No
 - B. Enabled me to review literature on the treatment of resistant depression. Yes No
 - C. Enabled me to outline a strategy for managing patients with treatment-resistant depression. Yes No
 - D. Enabled me to discuss the diagnosis of patients whose symptoms of depression fail to remit. Yes No
6. Did this CME activity provide a balanced, scientifically rigorous presentation of therapeutic options related to the topic, without commercial bias? Yes No
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