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Or

1. Read each question carefully and circle the answer on the Registration Form.
2. Type or print the registration information in the spaces provided and complete the evaluation.
3. Send the Registration Form to the address or fax number listed on the Registration Form.

All replies and results are confidential. Answer sheets, once graded, will not be returned. Unanswered questions will be considered incorrect and so scored. The Physicians Postgraduate Press, Inc. Office of Continuing Medical Education will keep only a record of participation, which indicates the completion of the activity and the designated number of Category 1 credits that have been awarded. Correct answers to the Posttest will be made available to the participants of this activity upon request after the submission deadline.

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- 1. According to "Treatment of Aggression in Children," pharmacotherapy is most appropriate when:**
 - a. The patient's primary diagnosis is attention-deficit/hyperactivity disorder
 - b. The patient's primary diagnosis is conduct disorder
 - c. The patient shows persistent, pernicious, pervasive aggression over a longitudinal course
 - d. A current cross-sectional symptom assessment shows the presence of comorbid conditions
- 2. In "Treatment of Aggression in Children," Findling describes placebo-controlled, double-blind trials showing the efficacy of the mood stabilizer _____ in treating aggression associated with conduct disorder among hospitalized pediatric populations.**
 - a. Carbamazepine
 - b. Lithium
 - c. Divalproex
 - d. None of the above
- 3. According to "Treatment of Aggression in Children," the side effect of weight gain is proportionately greater among children than among adults taking antipsychotics might be.**
 - a. True
 - b. False
- 4. According to "Dosing of Atypical Antipsychotics in Children and Adolescents," atypical antipsychotics are all indicated only for _____, but the most common reason that atypical antipsychotics are prescribed to young patients is _____.**
 - a. Childhood psychosis; pervasive developmental disorder
 - b. Delirium; schizophrenia
 - c. Adult psychosis; aggression
 - d. Agitation; attention-deficit/hyperactivity disorder
- 5. According to "Dosing of Atypical Antipsychotics in Children and Adolescents," a slow rate of drug titration appears to be associated with reduced rates of side effects in young patients taking atypical antipsychotics.**
 - a. True
 - b. False
- 6. According to "Dosing of Atypical Antipsychotics in Children and Adolescents," _____ may be a rational choice for treating some patients with the common pediatric comorbidity of aggressive disruptive behavior disorder and attention-deficit/hyperactivity disorder.**
 - a. Higher than customary doses of a psychostimulant
 - b. Higher than customary doses of an atypical antipsychotic
 - c. An atypical antipsychotic and a psychostimulant combined at the lowest effective doses of each
 - d. None of the above

- 7. In Mintzer's article, behavioral and psychotic symptoms in dementia (BPSD) are defined as:**
- A heterogeneous range of psychological reactions and behavioral symptoms resulting from various psychiatric disorders
 - A homogeneous range of psychiatric symptoms resulting from the presence of depression
 - A heterogeneous range of psychological reactions and psychiatric symptoms and behaviors resulting from the presence of dementia
 - None of the above
- 8. Mintzer reported that fenfluramine challenge tests have led researchers to conclude not only that patients with Alzheimer's type dementia appear to have functionally hyperresponsive serotonin systems but that:**
- Patients with dementia, like other patients suffering from symptoms of aggression, have a surplus of serotonin in the cerebrospinal fluid
 - There is a negative correlation between serotonin responsiveness and aggressive behavior
 - There is an association between serotonin responsiveness and fatigue in patients with Alzheimer's type dementia
 - There is an association between serotonin responsiveness and agitation in patients with Alzheimer's type dementia
- 9. According to Mintzer, _____ may be effective for both psychosis and aggression in patients with Alzheimer's type dementia:**
- A number of psychoactive compounds
 - Benzodiazepines
 - Selective serotonin reuptake inhibitors
 - Tricyclic antidepressants
- 10. Not all drug-drug interactions via the CYP enzyme system are clinically significant. Dose reductions of antipsychotics become especially necessary when 2 or more factors affecting plasma clearance co-occur.**
- True
 - False
- 11. _____ increases metabolism of the atypical antipsychotics clozapine and olanzapine, lowering plasma levels of drug and possibly contributing to the need for an increase in drug dose.**
- A patient's advanced age
 - Cigarette smoking
 - Gene polymorphism
 - Food
- 12. Sharif states that inhibitors of the enzyme CYP2D6, which plays a role in the metabolism of _____, include _____.**
- Olanzapine; large quantities of grapefruit juice
 - Quetiapine; the SSRI fluvoxamine
 - Risperidone; the SSRI fluoxetine
 - Ziprasidone; protease inhibitors
- 13. Atypical antipsychotics have been proved to be a safe and effective treatment for behavioral problems in children and nursing home patients.**
- True
 - False

CME REGISTRATION FORM

Using Atypical Antipsychotics in Primary Care, 2:
Special Populations

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 | 10. a b |
| 4. a b c d | 11. a b c d |
| 5. a b | 12. a b c d |
| 6. a b c d | 13. a b |
| 7. a b c d | |

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Deadline for submission

For a credit certificate to be issued, please complete this Registration Form no later than September 30, 2005. Online submissions will receive credit certificates immediately. Faxed or mailed submissions will receive credit certificates within 6 to 8 weeks.

Payment

No payment is necessary as this activity is free.

Please evaluate the effectiveness of this CME activity by answering the following questions.

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 appropriate uses of atypical antipsychotics as monotherapy and in combination with other agents. Yes No
 - B. Enabled me to discuss strategies for combining atypical antipsychotics with other psychotropics for treatment-resistant patients. Yes No
 - C. Enabled me to discuss pharmacokinetic issues related to the use of atypical antipsychotics in special populations, including patients with bipolar disorder and dementia. Yes No
 - D. Enabled me to review the evidence on dosing children with atypical antipsychotics alone and in combination in indications such as conduct disorder and comorbid ADHD. 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
7. Does the information you received from this CME activity confirm the way you presently manage your patients? Yes No
8. Does the information you received from this CME activity change the way you will manage your patients in the future? Yes No
9. Please offer comments and/or suggested topics for future CME activities.

10. How much time did you spend completing this CME activity?

11. Do you have convenient access to the Internet? Yes No

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