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**Answers to Pretest: 1. a 2. d**

### Commentary

pp. 287–294

**1. Research on exercise in patients with depression has found that the intensity of exercise has no effect on the outcome, but that distributing the exercise over fewer days diminishes efficacy.**

- a. True
- b. False

**2. When prescribing exercise to a patient, the clinician should do all of the following *except*:**

- a. Identify individuals at high risk for stroke or heart attack
- b. Recommend that patients start at a high intensity in order to reap more benefits early on
- c. Suggest using a step counter and incorporating more steps into daily life
- d. Emphasize short-term benefits such as improved sleep quality and concentration

**3. In clinical trials of exercise, patients with both depression and anxiety have often reported improvement in:**

- a. Depression and anxiety
- b. Depression only
- c. Anxiety only
- d. Neither depression nor anxiety

**4. Before clinicians readily prescribe exercise for the treatment of depression, they should wait until the mechanism of action has been explained.**

- a. True
- b. False

**5. Clinicians could use all of the following strategies when prescribing exercise as treatment for depression *except*:**

- a. Encourage goal-setting
- b. Provide supportive follow-up
- c. Offer sample exercise dose calculations by weight
- d. Conduct regular neuroimaging

### ACADEMIC HIGHLIGHTS

pp. 295–302

**6. According to research cited by McCarberg, about \_\_\_\_\_% of patients with depression reported only somatic symptoms.**

- a. 5
- b. 30
- c. 70
- d. 90

**7. Fishbain stated that physical symptoms associated with depression are likely to be linked with all of the following *except*:**

- a. Less severe depression
- b. Other psychiatric comorbidities
- c. Relapse of depression
- d. Nonremitting depression

**8. Glick suggested that patients with chronic pain and comorbid depression may benefit from all of the following self-management activities *except*:**

- a. Exercising late at night
- b. Reducing food portion size
- c. Practicing mind-body techniques such as yoga
- d. Having caffeine only before the middle of the day

**9. Glick recommended all of the following considerations when choosing medication for patients with pain and depression *except*:**

- a. Certain agents may need higher or lower doses for analgesic effect
- b. Patients may need treatment targeted at either lethargy or insomnia
- c. Serotonin syndrome may occur when serotonergic agents are combined
- d. Atypical antipsychotics are a safe alternative in this population

**10. Kuritzky cited research that found that selective serotonin reuptake inhibitors:**

- a. Have the same effect size against painful physical symptoms as against nonsomatic depressive symptoms
- b. Are more effective for nonsomatic depressive symptoms than for painful physical symptoms
- c. Are more effective than tricyclic antidepressants in patients with pain and depression
- d. Can treat depression and pain via serotonin modulation alone



# REGISTRATION FORM

Circle the one correct answer for each question.

- 1. a b c d
- 2. a b c d
- 3. a b c d
- 4. a b c d
- 5. a b c d
- 6. a b c d
- 7. a b c d
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  - B. Understand the relationships between painful physical symptoms and depression and select appropriate treatments for patients who report both types of symptoms.  Yes  No
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