

ASSESSMENT OF 30 MCQS

FPSC No: 81

MCQs ON Mental Health Update

Submission DEADLINE: 19 MAY 2020, 12 NOON

INSTRUCTIONS

- To submit answers to the following multiple choice questions, you are required to log on to the College Online Portal (www.cfps2online.org)
- Attempt **ALL** the following multiple choice questions.
- There is only **ONE** correct answer for each question.
- The answers should be submitted to the College of Family Physicians Singapore via the College Online Portal before the submission deadline stated above.
- There will be **NO** further extension of the submission deadline

- In the treatment of anxiety disorders, benzodiazepines should be used at the lowest possible doses and restricted to short-term use of up to:**
 - One week
 - Two weeks
 - Three weeks
 - Four weeks
 - Six weeks
- In generalized anxiety disorder (GAD) which of the following is a first-line treatment?**
 - Propranolol
 - Imipramine
 - Hydroxyzine
 - Selective Serotonin Reuptake Inhibitors (SSRIs)
 - Mirtazapine
- In DSM-5, which of the following disorders is not categorised as an anxiety disorder?**
 - Generalised Anxiety Disorder
 - Agoraphobia
 - Substance/Medication-induced Anxiety disorder
 - Panic Disorder
 - Obsessive compulsive disorder
- Based on the results of the Singapore Mental Health Survey (SMHS) conducted in 2016, which of the following statements is untrue?**
 - One in seven people in Singapore has experienced a mood, anxiety or alcohol use disorder in their lifetime.
 - Socio-demographic characteristics were factors associated with the prevalence of mental disorders.
 - Major Depressive Disorder (MDD), alcohol abuse and Obsessive-Compulsive Disorder (OCD) were the most common mental disorders.
 - The proportion of people with mental disorders who were not seeking help remains high.
 - Generalized anxiety disorder (GAD) was the most common disorder.
- In specific phobias, which of the following is true?**
 - There is no particular situation or object which promotes fear or anxiety.
 - Symptoms last less than two weeks.
 - Cognitive behaviour therapy with exposure is the treatment of choice.
 - Benzodiazepines are the first-line treatment.
 - The phobic stimulus can be avoided or endured without any fear or anxiety.
- Which of these is NOT an expected side effect of SSRIs?**
 - Nausea
 - Fever and agitation
 - Headache
 - Drowsiness
 - Reduced libido
- Your 21-year-old patient is being initiated on Fluoxetine for the treatment of her depression. What would be INAPPROPRIATE advice to give to her?**
 - Black box warning on increased suicidal thoughts.
 - To seek emergency services if she develops fever, tremors and sweating.
 - Expected side effects of a transient nature.
 - Watch for mania or elevated mood.
 - Can combine with alcohol and other drugs.
- Which of these is a risk factor for depression?**
 - Younger age
 - Male
 - Family history of mood disorder
 - Good social support
 - Healthy, engaged lifestyle
- Which of these is a risk factor for suicide?**
 - 30 years of age
 - Female
 - No history of suicide attempts
 - Good social support
 - Comorbid physical illness and/or chronic pain
- What is NOT appropriate in managing a patient who has been stable on antidepressants and is requesting to stop medications?**
 - Evaluate mental state and risk thoroughly.
 - Explore psychosocial factors.
 - Ensure patient has been on treatment for at least six months.
 - The patient can stop medications anytime he wants.
 - Advise patient that the risk of relapse is highest in the initial six months after medication is stopped.

11. Which of the following is the correct sequence of the 5 A's in smoking cessation:

- A. advise, assist, assess, arrange, ask
- B. assist, advise, ask, assess, arrange
- C. arrange, ask, advise, assess, arrange
- D. assess, ask, advise, assist, arrange
- E. ask, assess, advise, assist, arrange

12. Which of the following medication has been proven to achieve the highest quit rate in clinical studies on smoking cessation?

- A. Nicotine gum
- B. Bupropion
- C. Nicotine patch
- D. Varenicline
- E. All the above medication has similar quit rates

13. Which of the following is proven to be most effective in smoking cessation?

- A. Abstinence by will-power alone
- B. Counselling only
- C. Behavioural therapy in conjunction with nicotine replacement.
- D. Behavioural therapy in conjunction with anti-depressants.
- E. Behavioural therapy in conjunction with Varenicline.

14. Which of the following statements about Varenicline is true?

- A. Varenicline reduces dopamine release in the brain.
- B. Varenicline has other proven uses in addition to smoking cessation.
- C. Varenicline contains a tiny amount of nicotine.
- D. Varenicline is both a receptor agonist and antagonist.
- E. Varenicline should be taken once daily only at all times.

15. Which of the following statements is true about smoking cessation?

- A. Brief advice on smoking cessation provided by healthcare workers do not achieve any reduction in long-term quit rates among smokers.
- B. Bupropion is an anti-depressant that is safe to use for smoking cessation as the associated occurrence of seizures in patients receiving the medication is only 1:10,000 persons.
- C. Nicotine replacement therapy is strictly contraindicated in patients with cardiovascular disease.
- D. A gradual reduction in the number of cigarettes smoked will not lead to smoking cessation.
- E. None of the above.

16. What is the cardiovascular mortality in people with Schizophrenia compared to the general population?

- A. 12 percent vs 2.2 percent
- B. 12 percent vs 5 percent
- C. 14 percent vs 2.2 percent
- D. 15 percent vs 3 percent
- E. 15.5 percent vs 2.2 percent

17. Which of the following statement is false?

- A. People with schizophrenia suffer from a myriad of physical health conditions.
- B. A large portion of premature deaths for people with schizophrenia is caused by suicide, violence and injuries.
- C. A greater portion of deaths for people with schizophrenia is attributed to cardiovascular diseases and cancer.
- D. On average, people with schizophrenia are likely to have a higher life expectancy of at least 10 years as compared to the general population.
- E. 70% of people with schizophrenia suffer from at least one physical health condition, while 33% of them have at least 3 or more physical health condition.

18. What are the challenges faced by healthcare professionals in managing people with schizophrenia?

- A. Presence of multiple psychological and physical impairments.
- B. People with schizophrenia are less likely to engage in self-care and not adherent to treatment due to cognitive impairments.
- C. Lacks insight which may delay treatment and aggravate their condition.
- D. Lack of integrated care model between psychiatric and medical care model which hinders accessibility of care, holistic care and management of the psychiatric and co-morbid physical health conditions.
- E. All of the above.

19. The likelihood of recovering from schizophrenia is the highest when

- A. Patients are managed with more than one antipsychotics.
- B. Undergoes ECT.
- C. There is good social support.
- D. Treatment is administered at the onset of the illness.
- E. The patient has more than one relapse.

20. In the Singapore National Mental Health survey conducted in 1996, the percentage of the mentally unwell patients who chose GP as their first point of consultation is:

- A. 40 percent
- B. 43 percent
- C. 49 percent
- D. 52 percent
- E. 60 percent

21. Compared to the general population, females with anorexia nervosa have an increased risk of premature death, from:

- A. Cardiovascular complications and sudden death
- B. Refeeding syndrome
- C. Depression
- D. Suicide
- E. All the above

22. In Bulimia Nervosa (BN) which of the following is NOT a characteristic clinical feature?

- A. Intense fear of gaining weight.
- B. Intense desire to binge eat.
- C. Intense desire to vomit or use laxatives/diuretics.
- D. Two third of Bulimics are near normal BMI
- E. High risk of developing refeeding syndrome.

23. In Avoidant/restrictive feed intake disorder (ARFID), which of the following is NOT a characteristic clinical feature?

- A. Troubled by weight or body image concern
- B. Do not like foods with strong smells.
- C. Do not like bland foods.
- D. Do not like solid foods.
- E. Do not have significant weight loss.

24. The indications for hospitalization for acute medical stabilization in eating disorder is listed, EXCEPT:

- A. Resting heart rate of less than 50 per minute.
- B. Presence of cardiac arrhythmias.
- C. Presence of electrolyte abnormalities
- D. Depression
- E. Failed intensive outpatient treatment with ongoing weight loss.

25. In patient with eating disorder presenting with refeeding syndrome, what is the most important biochemical change?

- A. Hypomagnesemia.
- B. Hyponatremia.
- C. Hypokalemia.
- D. Hypophosphatemia.
- E. Hypoglycemia

26. From the caregivers' viewpoint, stressors that arise indirectly from caregiving include:

- A. Financial independence
- B. Functional disability
- C. Family cohesiveness
- D. Restriction of social and leisure time.
- E. Feeling closer since becoming a caregiver

27. The following are possible positive gains in caregivers of Persons with Disabilities (PWD):

- A. Financial gain
- B. Upskilling of professional career
- C. Gains in relationships
- D. More resources from healthcare workers
- E. Qualifying for social support

28. The caregiver needs to be engaged when the PWD is in early stage disease, especially in:

- A. Assisting in adaption and advice in advance medical directives
- B. Helping with foreign domestic worker
- C. Hospital referral
- D. Arranging for hospice care
- E. Planning for bereavement

29. GPs can provide a positive experience for caregivers by:

- A. Withholding diagnosis until referral to a specialist.
- B. Having knowledge of available resources in the community.
- C. Providing fee waiver for repeat services.
- D. Giving a list of differential diagnosis to the patient.
- E. Adminstrating medication to the PWD personally.

30. GPs can better meet the needs of caregivers by:

- A. Letting the specialist take care of the medical aspects of the illness.
- B. Providing person centred care through understanding the personality of the caregiver.
- C. Assessing the caregiver through the Zagat Burden Interview.
- D. Providing Foreign Domestic Workers six monthly check-ups.
- E. Providing a listening ear and give information over several visits.