

ASSESSMENT OF 30 MCQs

FPSC NO : 43
MCQs on DEMENTIA
Submission DEADLINE : 28 OCTOBER 2011

INSTRUCTIONS

- To submit answers to the following multiple choice questions, you are required to log on to the College On-line 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 On-line Portal before the submission deadline stated above.

1. After Alzheimer Disease, which of the following is the most common etiology of dementia?
 - A. Creutzfeldt-Jakob disease.
 - B. Vascular dementia.
 - C. Neurosyphilis.
 - D. Dementia associated with Parkinsonism.
 - E. Frontotemporal dementia.
2. About the clinical features of delirium, which of the following is NOT a feature?
 - A. Acute change in mental status.
 - B. Fluctuating level of attention.
 - C. Disorganised thinking.
 - D. Apathy.
 - E. None of the above are features.
3. In the diagnosis of dementia, which of the following associations is CORRECT?
 - A. Apraxia and "Any difficulty in communication?"
 - B. Agnosia and "Is one's work getting more disorganised?"
 - C. Executive dysfunctioning and "Any problems with handling loose change?"
 - D. Agnosia and "Any difficulties in using utensils during meal times?"
 - E. Apraxia and "Any problems recognising familiar faces?"
4. In using ECAQ, a 10-item cognitive test, to assess memory and information orientation, a cut-off score of X has 85.3% sensitivity and 91.5% specificity for identifying cognitive impairment. What is X?
 - A. 5/6.
 - B. 6/7.
 - C. 7/8.
 - D. 8/9.
 - E. 9/10.
5. In using CMMSE, a 28-item cognitive test for assessing mild cognitive impairment, a cut-off score of X has 83% sensitivity and 94% specificity for identifying cognitive impairment. What is X?
 - A. 24/25.
 - B. 23/24.
 - C. 22/23.
 - D. 21/22.
 - E. 20/21.
6. About common behavioural and psychological symptoms of dementia, which of the following associations is CORRECT?
 - A. Hallucinations and "Expressing the wish to die".
 - B. Depressed mood and "Hearing deceased people call their names".
 - C. Apathy and "Resistance to care".
 - D. Anxiety and "Worries about their finances".
 - E. None of the above.
7. About common causes of behavioural and psychological symptoms in dementia, which of the following is LEAST LIKELY to be a cause?
 - A. Medications.
 - B. Faecal impaction.
 - C. Arthritis.
 - D. Music.
 - E. Faulty hearing aid.
8. About the use of non-pharmacological intervention in a person with behavioural and psychological symptoms of dementia (BPSD), which of the following statements is CORRECT?
 - A. Aggression and agitation is best dealt with by a firm, strong voice.
 - B. Non-pharmacological intervention is usually the first line management for mild and moderate BPSD.
 - C. Use of digital locks at exit doors are ethically incorrect.
 - D. Electronic alarm systems are the most effective measures.
 - E. Day time naps have been found to reduce episodes of BPSD at night.

9. About the use of pharmacological management in a person with behavioural and psychological symptoms of dementia (BPSD), which of the following statements is **CORRECT**?
- "Start high and reduce" is the strategy of pharmacological treatment of BPSD.
 - Treat only moderate or severe BPSD with medication.
 - Medications should be given on a long term to prevent recurrence of BPSD.
 - Once the symptoms of BPSD are stabilised, half the dosage of medications.
 - Routinely start with two different types of medications to achieve faster resolution of symptoms.
10. Madam Tan, 88 years old has BPSD. An antipsychotic is being considered for her hallucinations. Which of the following would you prescribe?
- Mirtazapine.
 - Quetiapine.
 - Risperidone.
 - Olanzapine.
 - Haloperidol.
11. About reversible causes of dementia, only a small percentage is truly reversible, most notably X besides pseudo-dementia. What is X?
- Hypothyroidism.
 - B12 deficiency.
 - Neurosyphilis.
 - HIV-associated dementia.
 - Neoplastic causes.
12. Trials to find medications for improving dementia have been ongoing. Which of the following has convincing evidence of preventing dementia?
- High dose vitamin E.
 - Low dose prednisolone.
 - Atorvastatin.
 - Estrogen replacement therapy.
 - All of the above have yielded null findings.
13. A patient with dementia is on donepezil. Which of the following is a side effect of the medication?
- Constipation.
 - Increased appetite.
 - Tachycardia.
 - Somnolence.
 - Vivid dreams.
14. Memantine is being considered for a patient with dementia. Which of the following is a side effect of this medication?
- Hepatic impairment.
 - Reduction of effect of L-dopa.
 - Hyperexcitation.
 - Worsening of behaviour with frontotemporal dementia.
 - All of the above are correct.
15. Madam T, aged 80 is on donepezil. She is not responding to the therapy. Non-compliance has been excluded. Which of the following is the action to take?
- Increase the dose.
 - Switch to another ChEI.
 - Switch to memantine.
 - Add memantine.
 - All the above are correct.
16. About advice on symptoms of memory loss and diagnosis, who is the healthcare provider that the patient and caregiver first turn to?
- The lay counsellor.
 - The specialist physician.
 - The primary care physician.
 - The geriatrician.
 - Friends and relatives.
17. About caregivers in Singapore for people with dementia, which of the following statements about this group of people is **CORRECT**?
- The caregivers are mostly elderly.
 - The caregivers are usually a married son or daughter.
 - About half of the caregivers hold a full time or part time job.
 - The majority of caregivers are men.
 - About 70% of families of people with dementia engage foreign domestic help to provide the caregiving.
18. On the burden of caregiving in people with mild and moderate dementia, X% of caregivers reported the caregiving process was a difficulty one. What is X?
- 48.
 - 53.
 - 58.
 - 63.
 - 78.
19. On the impact of burden of caregiving on caregivers, a local study showed that a prevalence of X% of caregivers who had caregiving problems experienced depression. What is X?
- 37.
 - 47.
 - 57.
 - 67.
 - 77.

20. The interventions of the family physician in caring of caregivers of people with dementia is stage specific. Which of the following associations of stage of dementia and intervention of the family physician is **CORRECT**?
- Diagnosis and disclosure stage and advice to the patient and caregiver on financial, legal planning and advance directives.
 - Early disease stage and specific information on diagnosis and prognosis.
 - Bereavement on the part of the family caregiver and counsel and support from the family physician.
 - Late disease stage and management of caregivers for distress, depression, and burnout.
 - Middle disease stage and dealing with issues of do-not-resuscitation disorders.
21. In the use of Medisave for chronic disease management of dementia, which of the following care components is **NOT** allowable?
- Home meal delivery.
 - Speech therapy.
 - Occupational therapy.
 - Physiotherapy.
 - Home visit evaluation.
22. About the guidelines for referral of patients with dementia from specialists to primary care physicians for follow up in the community, which of the following statements is **CORRECT**?
- Suitable patients must be assessed by the specialist to be financially stable.
 - The referred patients must have a provisional diagnosis of dementia.
 - If the patients have behavioural issues, they cannot be referred to the primary care physician.
 - The caregivers should have been counseled on the natural history of dementia.
 - If the patient is prescribed antidepressants and/or psychotic agents, he or she must be on stable doses of these medications for at least one month.
23. For patients with dementia, with regards to the clinical indicators for submission via electronic channels to MOH, which of the following frequency of submission is **CORRECT**?
- Documentation of assessment of memory – at least twice yearly.
 - Documentation of mood and behaviour – at least quarterly.
 - Consultation for dementia – twice yearly.
 - For patients on cognitive enhancers, documentation of objective assessment of memory – at least quarterly.
 - Documentation of assessment of rehabilitation needs – at least twice yearly.
24. With regards to the dosing of medications for people with dementia, which of the maximum adult recommended dose per day is **CORRECT**?
- Memantine – 20 mg.
 - Fluoxetine – 45 mg.
 - Mirtazapine – 80 mg.
 - Rivastigmine – 10 mg.
 - Donepezil – 12 mg.
25. About the recommended investigations for people with dementia receiving selected pharmacotherapy, which of the following associations of investigations and pharmacological agent is **CORRECT**?
- Full blood count – patients on anticholinesterase inhibitors.
 - Liver function test – patients on atypical antipsychotics.
 - Renal panel (Urea/electrolytes/creatinine) – patients on anticholinesterase inhibitors.
 - Electrocardiogram – patients on antidepressants.
 - None of the above associations are correct.
26. About the use of Medisave for chronic disease management programme (CDMP), which of the following mental health diseases is **NOT** included?
- Schizophrenia.
 - Major depression.
 - Borderline personality disorder.
 - Dementia.
 - Bipolar disorder.
27. As one of the requirements of use of the MediClaim system, the doctors and clinic staff of the participating clinic needs to attend a X-day training session on the Medisave Claim process, guidelines on Medisave Use and use of the MediClaim system? What is X?
- Two.
 - One and a half.
 - One.
 - Half.
 - Quarter.
28. Mr A, aged 75 years old has dementia. He is a Permanent resident. The son wishes to claim part of the medical care of the father for dementia through the Medisave chronic disease management programme. Which of the following Medisave accounts **CANNOT** be used?
- Patient's son.
 - Patient's daughter-in-law.
 - Patient's daughter.
 - Patient's spouse.
 - Patient's grandson.

29. A patient's medical bill to be claimed through Medisave chronic disease programme can be shared by a maximum of X Medisave accounts. What is X?
- A. 10.
 - B. 8.
 - C. 5.
 - D. 3.
 - E. 2.
30. In the use of a Medisave account for payment for chronic disease management, there is a deductible of \$X and a 15% co-payment of the bill balance for each claim that the patient has to pay in cash, regardless if the claim is for an individual visit or packaged treatment? What is X?
- A. \$10.
 - B. \$15.
 - C. \$20.
 - D. \$25.
 - E. \$30.
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