ASSESSMENT OF 30 MCQs

FPSC NO: 34 MCQs on Psychiatry Updates Submission DEADLINE: 29 APRIL 2010

INSTRUCTIONS

- With effect from 1st April 2008, the College Assessment of 30 MCQs has gone paperless.
- 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.

Unit I - AN APPROACH TO INSOMNIA

- I. What percent of adults experience persistent insomnia?
 - (A) 10.
 - (B) 20.
 - (C) 30.
 - (D) 40.
 - (E) 50.
- 2. Which of the following is **NOT** a risk factor for insomnia?
 - (A) Engaging in shift work.
 - (B) Male gender.
 - (C) Advancing age.
 - (D) Psychiatric illness.
 - (E) Chronic medical illness.
- 3. Which of the following drugs DOES NOT HAVE insomnia as a side effect?
 - (A) Calcium channel blockers.
 - (B) Beta-blockers.
 - (C) Phenytoin.
 - (D) Hydroxyzine.
 - (E) Oral contraceptives.

- 4. Which of the following is **NOT** a characteristic feature of psychophysiological insomnia?
 - (A) Poor sleep hygiene.
 - (B) Sleep performance anxiety.
 - (C) Occurs in older people (more than 40 years).
 - (D) More common in women.
 - (E) Abnormal polysomnography (PSG).
- 5. Which of the following causes daytime fatigue and insomnia at night?
 - (A) Depression and anxiety.
 - (B) Obstructive sleep apnoea.
 - (C) Restless leg syndrome.
 - (D) Jet lag.
 - (E) All of the above.

Unit2-NON-PHARMACOLOGICAL & PHARMACOLOGICAL OPTIONS IN MANAGING INSOMNIA

- 6. Which of the following statements about stimulus control therapy of insomnia is CORRECT?
 - (A) Leave the bed if unable to sleep within 20 minutes of being in bed.
 - (B) Napping not more than 10 minutes is allowed during the daytime.
 - (C) Watching TV in bed is allowed because it relaxes the mind in preparation for sleep.
 - (D) Maintain a regular sleep schedule.
 - (E) Exercise regularly, but not within 3-4 hours of bedtime.

7. Which of the following is a non-pharmacological method for treating insomnia?

- (A) Sleep hygiene.
- (B) Paradoxical intention.
- (C) Progressive muscle relaxation.
- (D) Paced respirations.
- (E) All of the above.

8. With regards to diazepam, which of the following statements is CORRECT?

- (A) It has a half-life of 8-24 hours.
- (B) Cognitive impairment is minimal.
- (C) Risk of tolerance is minimal.
- (D) Rage or violence is a known side effect.
- (E) All the above are correct.

9. About the non-benzodiazepine hypnotics, Zopidem and Zoplicone, which of the following is a characteristic feature of this group of drugs?

- (A) They are less addictive compared to benzodiazepines.
- (B) They may cause a bitter taste in the mouth and throat.
- (C) They have long half lives.
- (D) Paradoxical disinhibition often occurs.
- (E) Memory tests done seven to eight hours after the drug is consumed are still impaired.

10. About the use of antihistamines for insomnia, which of the following statements of this group of drugs is CORRECT?

- (A) This group of drugs causes dependence.
- (B) This group of drugs is suitable for use for chronic insomnia.
- (C) Dry month is the commonest side-effect.
- (D) Dothiepin is an example of this group of drugs.
- (E) Cognitive impairment rarely occurs with its use.

Unit 3 - ADMINISTRATIVE GUIDELINES IN INSOMNIA

II. Which of the following statements taken from the Administrative Guidelines on the prescribing of benzodiazepines and other hypnotics is CORRECT?

- (A) Each medical record of a patient treated for insomnia needs to be typewritten to ensure legible documentation.
- (B) Each patient's medical record must be entirely reproducible upon request by the Ministry of Health or Singapore Medical Council within 14 days.
- (C) In the record of every patient, a comprehensive summary is expected.

- (D) Each time a patient is prescribed a benzodiazepine or other hypnotic, the indication and justification for such a prescription must be documented.
- (E) Physical signs of substance abuse or evidence of tolerance needs to be documented in each visit only if present.

12. About appropriate use of benzodiazepines, which of the following should be avoided?

- (A) Nimetazepam.
- (B) Midazepam.
- (C) Lorazepam.
- (D) Zopliclone.
- (E) Zopidem.

13. Which of the following statements on appropriate use of benzodiazepines is CORRECT?

- (A) The dosage of benzodiazepine / other hypnotic used should be the usual and customary dose to achieve symptomatic relief.
- (B) The concurrent prescribing of two or more benzodiazepines is occasionally allowed.
- (C) The patient should be warned about rebound insomnia with the use of benzodiazepines and this warning be documented.
- (D) Repeat prescriptions for benzodiazepines / other hypnotics can occasionally be provided without a clinical review.
- (E) A history of alcohol abuse is a firm contraindication for prescribing benzodiazepines.

14. A patient who requires or has been prescribed benzodiazepines / other hypnotics beyond a cumulative period of X weeks must be referred to the appropriate specialist for further management. What is X?

- (A) 4.
- (B) 6.
- (C) 8.
- (D) 10.
- (E) 12.

15. What routine warning should be given when benzodiazepines is given?

- (A) Drowsiness is a side effect.
- (B) Mental alertness may be impaired.
- (C) Physical incordination may occur.
- (D) Concomitant use of alcohol is to be avoided.
- (E) All of the above..

Unit 4 - DEPRESSIVE DISORDER: MANAGEMENT IN PRIMARY CARE

16. Which of the following is the commonest psychiatric problem to be encountered in primary care practice?

- (A) Schizophrenia.
- (B) Depressive disorder.
- (C) Borderline personality disorder.
- (D) Obsessive compulsive disorder.
- (E) Dementia.

17. In the history taking of a patient with a depressive disorder, which of the following factors should be explored?

- (A) Predisposing factors.
- (B) Perpetuating factors.
- (C) Precipitating factors.
- (D) Protective factors.
- (E) All of the above.

18. About the side effects of serotonin reuptake inhibitors (SSRIs), which of the following is uncommon?

- (A) Blurred vision.
- (B) Nausea.
- (C) Headache.
- (D) Dizziness.
- (E) Somnolence.

19. Which of the following antidepressants has significant antihistamine HI-receptor blocking activity?

- (A) Bupropion.
- (B) Imipramine.
- (C) Mirtazapine.
- (D) Fluoxetine.
- (E) None of the above.

20. Which of the following is **NOT** a side effect of the tricyclic antidepressants?

- (A) Urinary retention.
- (B) Postural hypotension.
- (C) Sinus bradycardia.
- (D) Blurred vision.
- (E) Increased appetite.

Unit 5 - ANXIETY DISORDERS: AN APPROACH WITH FOCUS ON PANIC DISORDER

21. Which of the following non-pharmacological strategies is useful in managing anxiety?

- (A) Cognitive-behavioural therapy.
- (B) Therapeutic alliance.
- (C) Education on the underlying disorder.
- (D) Teaching relaxation skills.
- (E) All the above are useful.

22. Psychological symptoms of anxiety include ALL of the following EXCEPT:

- (A) Poor concentration.
- (B) Insomnia or nightmares.
- (C) Trembling and shaking.
- (D) Sexual dysfunction.
- (E) Irritability,

23. In which of the following situations is anxiety considered pathological?

- (A) It is disproportionate to the risks and severity of the danger /stressor faced.
- (B) It continues even when the danger/ stressor is no longer present.
- (C) It interferes with social, vocational or physical aspects of daily life.
- (D) It leads to avoidance of certain situations.
- (E) All of the above.

24. The following conditions can present with associated anxiety symptoms EXCEPT:

- (A) Adult respiratory distress syndrome.
- (B) Panic disorder.
- (C) Hypothyroidism.
- (D) Hypoglycaemia.
- (E) Cognitive disorder.

25. Which of the following statements about agoraphobia is INCORRECT? It:

- (A) Is a type of anxiety disorder.
- (B) Often happens in people who travel in groups.
- (C) Is derived from the Greek words meaning "fear of marketplace".
- (D) Is defined as the fear of experiencing a difficult or embarrassing situation from which the patient cannot escape.
- (E) Is often the end result of the avoidance phenomenon.

Unit 6 - SUICIDE IN SINGAPORE

26. Which of the following statements about suicide is CORRECT?

- (A) The suicide rates are very high in Eastern Europe and East Asia.
- (B) The rate in Singapore is lower than that in Hong Kong, Taiwan, Japan and China.
- (C) The highest rates in Singapore are in elderly Chinese males (40.3 per 100,000).
- (D) The lowest suicide rates in Singapore are in Malay females (1.8 per 100,000).
- (E) All of the above are correct.

27. For the period 2002 to 2004, what was the suicide rate in Singapore?

- (A) 2.2%.
- (B) 3.2%.
- (C) 4.2%
- (D) 4.2%
- (E) 5.2%.

28. Which of the following is a NOT a risk factor for suicide?

- (A) Having one or more addictions.
- (B) Having a mental illness.
- (C) Being a foreign worker working in Singapore.
- (D) Having a gregarious personality.
- (E) Being a foreign student studying in Singapore.

29. In Singapore, which is the commonest method of suicide?

- (A) Jumping in front of a moving vehicle.
- (B) Hanging.
- (C) Jumping from a height.
- (D) Gassing at home or in a car.
- (E) Overdosing with medications.

30. There are some push and pull factors in suicide. Which of the following is considered a push factor?

- (A) Good self-esteem.
- (B) History of family suicide.
- (C) Financially secure and employed.
- (D) Good family and social support.
- (E) Good physical and mental health.