

Exams are available online only at cme.psychiatryonline.org

INFORMATION TO PARTICIPANTS

OBJECTIVES. After evaluating a specific journal article published in the American Journal of Psychiatry, participants should be able to demonstrate an increase in their knowledge of clinical medicine. Participants should be able to understand the contents of a selected research or review article and to apply the new findings to their clinical practice.

PARTICIPANTS. This program is designed for all psychiatrists in clinical practice, residents in Graduate Medical Education programs, medical students interested in psychiatry, and other physicians who wish to advance their current knowledge of clinical medicine.

EXPLANATION OF HOW PHYSICIANS CAN PARTICIPATE AND EARN CREDIT. In order to earn CME credit, subscribers should read through

the material presented in the article. After reading the article, complete the CME quiz online at cme.psychiatryonline.org and submit your evaluation and study hours (up to 1 *AMA PRA Category 1 Credit*TM).

CREDITS. The APA designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit*TM. Physicians should only claim credit commensurate with the extent of their participation in the activity. The American Psychiatric Association (APA) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) for physicians.

Estimated Time to Complete: 1 Hour

Begin date December 1, 2008 – End date December 31, 2010

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Sleep Disturbance and Depression Recurrence in Community-Dwelling Older Adults: A Prospective Study

Hyong Jin Cho et al.

Am J Psychiatry 2008; 165:1543–1550

QUESTION 1. Among community-dwelling older adults currently free of depression, which of the following characteristics describes those least likely to develop a depressive episode?

- A. Current sleep disturbance and prior major depression.
- B. Current sleep disturbance and prior nonmajor depression.
- C. Current sleep disturbance but no prior depression.
- D. No current sleep disturbance but prior nonmajor depression

QUESTION 2. Which of the following best characterizes the link between sleep disturbance and depression in community-dwelling older adults?

- A. A residual symptom of prior depression
- B. A prodromal symptom of incipient depression
- C. An independent risk factor for recurrent depression
- D. An independent risk factor for incident depression

QUESTION 3. Which of the following clinical strategies for managing older adults is best supported by the study data?

- A. Interventions targeting inflammatory pathways may reduce both sleep disturbance and depression.
- B. A two-step strategy can identify patients at risk, by assessing for prior depression and current sleep disturbance.
- C. Interventions targeting sleep disturbance can prevent late life depression.
- D. Hypnotic medications are an effective and safe option to improve sleep quality and prevent depression recurrence in older adults.

EVALUATION QUESTIONS

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STATEMENT 1. The activity achieved its stated objectives.

- 1. Strongly agree
- 2. Agree
- 3. Neutral
- 4. Disagree
- 5. Strongly disagree

STATEMENT 2. The activity was relevant to my practice.

- 1. Strongly agree
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STATEMENT 3. I plan to change my current practice based on what I learned in the activity.

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STATEMENT 5. The activity provided sufficient scientific evidence to support the content presented.

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STATEMENT 6. The activity was free of commercial bias toward a particular product or company.

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The Role of Interpersonal and Social Rhythm Therapy in Improving Occupational Functioning in Patients With Bipolar I Disorder

Ellen Frank et al.

Am J Psychiatry 2008; 165:1559–1565

QUESTION 1. In a registry of patients with bipolar disorder, which of the following represents the proportion of patients who reported being unemployed?

- A. 24%
- B. 44%
- C. 64%
- D. 84%

QUESTION 2. Interpersonal and social rhythm therapy focuses on which of the following?

- A. stabilizing patients' daily routines and sleep/wake cycles
- B. gaining insight into the relationship between mood and interpersonal events
- C. ameliorating interpersonal problems
- D. all of the above

QUESTION 3. In this study, the patients who were assigned to interpersonal and social rhythm therapy for their acute treatment showed which of the following outcomes compared to patients who were assigned to the clinical management control condition?

- A. significantly greater improvement in occupational functioning during the maintenance phase of treatment.
- B. significantly greater improvement in occupational functioning during the acute phase of treatment.
- C. significantly greater improvement in occupational functioning at the end of the acute and maintenance phases
- D. all of the above

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Trauma, Resilience, and Recovery in a High-Risk African-American Population

Tanya N. Alim et al.

Am J Psychiatry 2008; 165:1566–1575

QUESTION 1. Which of the following statements most accurately reflects the influence of previous trauma exposure on resilience and recovery from psychiatric disorders?

- A. Assaultive trauma exposure did not differ between the resilient, recovered and currently ill groups
- B. Lower exposure to assaultive trauma was present in the recovered group compared to the currently ill group
- C. Lower exposure to assaultive trauma was present in the recovered group compared to the currently ill group
- D. The three groups differed in total trauma exposure but not in exposure to assaultive trauma

QUESTION 2. Which of the following statements about psychosocial factors and mental health in trauma-exposed individuals is **false**?

- A. Higher purpose in life is associated with resilience and recovery
- B. Higher sense of mastery is associated with recovery from psychiatric illness
- C. Posttraumatic growth is highest in resilient individuals
- D. Higher avoidant coping is associated with current psychiatric illness

QUESTION 3. Which psychosocial factor was most closely associated with both resilience and recovery from psychiatric illness in trauma-exposed individuals?

- A. Dispositional optimism
- B. Positive religious coping
- C. Active coping
- D. Purpose in life

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