

Continuing Medical Education

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Information for Participants

Objectives: After evaluating a specific journal article, 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™).

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

Information on Courses

Title: Toward Validation of the Diagnosis of Posttraumatic Stress Disorder

Faculty: Carol S. North, M.D., M.P.E., Alina M. Suris, Ph.D., Miriam Davis, Ph.D., Rebecca P. Smith, M.D.

Affiliations: Department of Psychiatry, University of Texas Southwestern Medical Center (C.S.N.); VA North Texas Health Care System (A.M.S.); Massachusetts General Hospital (M.D.); Department of Psychiatry, Mt. Sinai School of Medicine (R.P.S.)

Disclosures: Dr. North reports paid consulting relationships with Applied Research Associates and Cubic Corporation. The remaining authors report no competing interests.

Discussion of unapproved or investigational use of products*: None

Title: Psychostimulant Treatment and the Developing Cortex in Attention Deficit Hyperactivity Disorder

Faculty: Philip Shaw, M.D., Ph.D., Wendy S. Sharp, M.S.W., Meaghan Morrison, B.S., Kristen Eckstrand, B.S., Deanna K. Greenstein, Ph.D., Liv S. Clasen, Ph.D., Alan C. Evans, Ph.D., Judith L. Rapoport, M.D.

Affiliation: Child Psychiatry Branch, NIMH (P.S., W.S.S., M.M., K.E., D.K.G., L.S.C., J.L.R.); Montreal Neurological Institute, McGill University (A.C.E.)

Disclosures: All authors report no competing interests.

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Title: Psychiatric Disorders and Repeat Incarcerations: The Revolving Prison Door

Faculty: Jacques Baillargeon, Ph.D., Ingrid A. Binswanger, M.D., M.P.H., Joseph V. Penn, M.D., Brie A. Williams, M.D., M.S., Owen J. Murray, D.O., Ben G. Raimer, M.D.

Affiliations: Department of Preventive Medicine and Community Health and the Correctional Managed Care Program, University of Texas Medical Branch (J.B., J.V.P., O.J.M.); Department of Medicine, University of Colorado (I.A.B.); and the Department of Medicine, University of California at San Francisco (B.A.W.)

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* American Psychiatric Association policy requires disclosure by CME authors of unapproved or investigational use of products discussed in CME programs. Off-label use of medications by individual physicians is permitted and common. Decisions about off-label use can be guided by scientific literature and clinical experience.

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Estimated Time to Complete: 1 Hour

Begin date January 1, 2009 – End date January 31, 2011

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Toward Validation of the Diagnosis of Posttraumatic Stress Disorder

Carol S. North et al.

Am J Psychiatry 2009; 166:34–41

QUESTION 1. Which of the following validation phases for the diagnosis of PTSD was reported to have the most accumulated evidence according to the Institute of Medicine?

- A. clinical description of core characteristics
- B. family studies
- C. separation from other disorders
- D. biological marker studies

QUESTION 2. Which of the following is true regarding the Group C (avoidance and numbing) symptom category?

- A. Group C criteria are met more frequently than Group B (intrusive memories) criteria
- B. Persons meeting Group C criteria often do not require treatment
- C. Group D criteria are more often a rate-limiting factor for the diagnosis compared to Group C
- D. Group C symptoms are a strong determinant of PTSD

QUESTION 3. What is the value of defining the contextual relationship between a specific traumatic event and the associated clinical symptoms of PTSD?

- A. It provides proof of causality
- B. It has no additional diagnostic utility over assessing symptoms in general
- C. It helps to differentiate trauma-specific symptoms from habitual reporting of high levels of distress
- D. It is not necessary for diagnostic validation of PTSD

EVALUATION QUESTIONS

This evaluation form is adapted from the *MedBiquitous Journal-Based Continuing Education Guidelines 28 November 2005*. This evaluation will appear online at the end of each CME course. Participants **must** complete this evaluation in order to receive credit. Select the response which best indicates your reaction to the following statements about this activity.

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.

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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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EXAMINATION QUESTIONS

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Psychostimulant Treatment and the Developing Cortex in Attention Deficit Hyperactivity Disorder

Philip Shaw et al.

Am J Psychiatry 2009; 166:58–63

QUESTION 1. The Multimodal Treatment of ADHD study and Preschool ADHD Treatment studies reported which of the following findings regarding psychostimulant effects?

- A. There were no significant effects on height or weight gain in children.
- B. Greater slowing of weight gain occurred in pre-school age children compared to school age children.
- C. Slowed height gain of around 1.3 cm per year was observed in both pre-school and school age children.
- D. There was clear evidence that psychostimulants slowed brain growth.

QUESTION 2. In typically developing children, an initial increase in cortical thickness is seen until around age 8 followed by an adolescent phase of cortical thinning. How does this differ in children in ADHD?

- A. The initial phase of increasing cortical thickness may last longer in ADHD children.
- B. The initial phase of cortical thickening and later phase of thinning do not differ at all in ADHD.
- C. The initial phase of increasing cortical thickening is shorter in children with ADHD.
- D. The pattern of cortical development in ADHD children deviates completely from typical patterns.

QUESTION 3. Which of the following conclusions regarding the effects of psychostimulant treatment in children has been suggested by the results of this study?

- A. Psychostimulant use is associated with an overall pervasive delay in cortical development and growth.
- B. It is associated with some highly regional differences, but there is no evidence that it is associated with slowing of overall growth of the cortical mantle.
- C. Psychostimulant treatment is associated with cortical changes which have a clear clinical benefit.
- D. It is associated with cortical change only when amphetamine-based medication is used, not methylphenidate.

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EXAMINATION QUESTIONS

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Psychiatric Disorders and Repeat Incarcerations: The Revolving Prison Door

Jacques Baillargeon et al.

Am J Psychiatry 2009; 166:103–109

QUESTION 1. According to the current study, prison inmates with which of the following major psychiatric disorders have the highest risk of experiencing multiple episodes of incarceration?

- A. schizophrenia
- B. major depressive disorder
- C. bipolar disorder
- D. schizoaffective disorder

QUESTION 2. Which of the following best describes the relationship between mental illness and the length of incarceration?

- A. Prison inmates with mental illness have a greater likelihood of receiving early parole than those convicted of similar crimes who are not mentally ill.
- B. Inmates with mental illness generally serve longer prison sentences than those convicted of similar crimes who are not mentally ill.
- C. Prison inmates with mental illness generally serve the same amount of time as those convicted of similar crimes who are not mentally ill.
- D. The average prison time served by inmates with mental illness is 88 months (7.3 years).

QUESTION 3. Which of the following is NOT an example of a *postbooking* diversion strategy to minimize law enforcement detention of the nonviolent mentally ill?

- A. Mental health courts
- B. Forensic assertive community treatment programs
- C. Crisis intervention team (CIT) programs
- D. All are examples of postbooking strategies

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