

## Continuing Medical Education

You now have an opportunity to earn CME credits by reading articles in *The American Journal of Psychiatry*. Three articles in this issue each comprise a short course for up to 1 *AMA PRA Category 1 Credit*<sup>™</sup> each. The course consists of reading the article and answering three multiple-choice questions with a single correct answer. CME credit is issued only online. Readers who want credit must subscribe to the AJP Continuing Medical Education Course Program ([cme.psychiatryonline.org](http://cme.psychiatryonline.org)), select *The American Journal of Psychiatry* at that site, take the course(s) of their choosing, complete the evaluation form, and submit their answers for CME credit. There is no minimum threshold score necessary for the credit. A link from the question to the correct answer in context will be highlighted in the associated article. A certificate for each course will be generated upon successful completion. This activity is sponsored by the American Psychiatric Association.

### Information to 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](http://cme.psychiatryonline.org) and submit your evaluation and study hours (up to 1 *AMA PRA Category 1 Credit*<sup>™</sup>).

**Credits:** The American Psychiatric Association designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit*<sup>™</sup>. 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 to provide continuing medical education for physicians.

### Information on Courses

**Title:** National Trends in Outpatient Psychotherapy

**Faculty:** Mark Olfson, M.D., M.P.H., Steven C. Marcus, Ph.D.

**Affiliations:** Department of Psychiatry, College of Physicians and Surgeons, Columbia University (M.O.); New York State Psychiatric Institute (M.O.); School of Social Practice and Policy, University of Pennsylvania, Philadelphia (S.C.M.); Center for Health Equity Research and Promotion, Philadelphia VA Medical Center (S.C.M.).

**Disclosures:** Dr. Olfson has received research grants to Columbia University from Eli Lilly and Bristol-Myers Squibb. Dr. Marcus has received research support from Bristol-Myers Squibb, Eli Lilly, and McNeil Pharmaceuticals.

**Discussion of unapproved or investigational use of products\*:** No

**Title:** Hurtful Words: Association of Exposure to Peer Verbal Abuse With Elevated Psychiatric Symptom Scores and Corpus Callosum Abnormalities

**Faculty:** Martin H. Teicher, M.D., Ph.D., Jacqueline A. Samson, Ph.D., Yi-Shin Sheu, M.A., Ann Polcari, R.N., Ph.D., Cynthia E. McGreenery

**Affiliations:** Developmental Biopsychiatry Research Program, McLean Hospital (M.H.T., J.A.S., A.P., C.E.M.); the Department of Psychiatry, Harvard Medical School, Boston (M.H.T., J.A.S., A.P.); Department of Psychology and Brain Science, The Johns Hopkins University, Baltimore (Y.-S.S.)

**Disclosures:** Dr. Teicher has received research support or consulting fees from BioBehavioral Diagnostic Company, Medical Device Consultants, Inc., LiteBook, and CNS Response and holds 13 U.S. patents, most of which are related to the diagnosis and treatment of psychiatric disorders. All other authors report no financial relationships with commercial interests.

**Discussion of unapproved or investigational use of products\*:** No

**Title:** Altering the Trajectory of Anxiety in At-Risk Young Children

**Faculty:** Ronald M. Rapee, Ph.D., Susan J. Kennedy, Ph.D., Michelle Ingram, M.Clin. Psych., Susan L. Edwards, Ph.D., Lynne Sweeney, Ph.D.

**Affiliations:** Centre for Emotional Health, Department of Psychology, Macquarie University, Sydney, Australia

**Disclosures:** All authors report no financial relationships with commercial interests.

**Discussion of unapproved or investigational use of products\*:** Yes

\*APA 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 December 1, 2010 – End date November 30, 2012

## EXAMINATION QUESTIONS

Select the single best answer for each question below.

### National Trends in Outpatient Psychotherapy

Mark Olfson and Steven C. Marcus

Am J Psychiatry 2010; 167:1456–1463

**Learning Objective.** The participant will recognize service delivery changes regarding the use of psychotherapy in psychiatric practice.

**Subject Node.** Psychotherapy

**QUESTION 1.** Which of the following best characterizes changes from 1998 to 2007 in the delivery of outpatient psychotherapy in the United States regarding use of psychotropic medications for psychotherapy patients?

- A. Significant increase in reported use of antipsychotic medications and stimulants
- B. Significant increase in reported use of antidepressants and stimulants
- C. Significant increase in reported use of antipsychotic medications and antidepressants
- D. Significant increase in reported use of antipsychotic medications and mood stabilizers

**QUESTION 2.** Which statement best characterizes changes from 1998 to 2007 in outpatient expenditures?

- A. Expenditures for outpatient mental health care have increased, with psychotherapy expenditures little changed.
- B. Expenditures for outpatient mental health care, including psychotherapy, have significantly increased.
- C. Expenditures for outpatient mental health care have little changed, while expenditures for psychotherapy have declined.
- D. Expenditures for outpatient mental health care including psychotherapy expenditures have little changed.

**QUESTION 3.** All of the following statements are TRUE regarding trends in outpatient mental health care in the United States from 1998 to 2007, EXCEPT

- A. The percentage of mental health outpatients treated with psychotherapy alone significantly declined.
- B. The percentage of mental health outpatients treated with a combination of psychotherapy and psychotropic medications significantly increased.
- C. The percentage of persons who used psychotherapy in the general population did not significantly change.
- D. The percentage of mental health outpatients treated with psychotropic medications, but not psychotherapy, significantly increased.

## 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.

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

**STATEMENT 3.** I plan to change my current practice based on what I learned in the activity.

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

**STATEMENT 4.** The activity validated my current practice.

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

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

- 1. Strongly agree
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- 3. Neutral
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- 5. Strongly disagree

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

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### Hurtful Words: Association of Exposure to Peer Verbal Abuse With Elevated Psychiatric Symptom Scores and Corpus Callosum Abnormalities

Martin H. Teicher et al.

Am J Psychiatry 2010; 167:1464–1471

**Learning Objective.** The participant will recognize the effects of childhood adversity on brain imaging measures of white matter regions using diffusion tensor imaging.

**Subject Node.** Violence/Aggression

**QUESTION 1.** Which of the following symptoms were NOT elevated in young adults who were exposed to peer verbal aggression in childhood?

- A. depression
- B. binge eating
- C. limbic irritability
- D. dissociation

**QUESTION 2.** Elevated scores for dissociation, depression, anxiety, drug use, and irritability were most characteristic of subjects who experienced peer verbal aggression in:

- A. elementary school
- B. middle school
- C. high school
- D. all of the above

**QUESTION 3.** Alterations in which part of the brain are most consistently found in maltreated children?

- A. prefrontal cortex
- B. corpus callosum
- C. amygdala
- D. parietal lobe

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### Altering the Trajectory of Anxiety in At-Risk Young Children

Ronald M. Rapee et al.

Am J Psychiatry 2010; 167:1518–1525

**Learning Objective.** The participant will identify features of childhood anxiety that respond to parent-focused interventions.

**Subject Node.** Anxiety Disorders; Medical Education and Training; Children and Adolescents

**QUESTION 1.** Theories of the development of anxiety disorders usually suggest which of the following?

- A. Parent overprotection leads to anxiety
- B. Parent overprotection is unrelated to anxiety
- C. Parent overprotection and anxiety have reciprocal influences on each other
- D. None of the above

**QUESTION 2.** Two of the main techniques included in the parent intervention program include

- A. Relaxation and in-vivo exposure
- B. In-vivo exposure and parent management
- C. Cognitive restructuring and relaxation
- D. Social skills training and in-vivo exposure

**QUESTION 3.** The effects of the intervention appeared strongest for

- A. All anxiety problems
- B. Generalized anxiety
- C. Obsessive compulsive fears
- D. Social anxiety

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