

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*[™] 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), 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 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 to provide continuing medical education for physicians.

Information on Courses

Title: Suicide in HIV-Infected Individuals and the General Population in Switzerland, 1988–2008

Faculty: Olivia Keiser, Ph.D., Adrian Spoerri, Ph.D., Martin W.G. Brinkhof, Ph.D., Barbara Hasse, M.D., Angèle Gayet-Ageron, M.D., Frédéric Tissot, M.D., Anna Christen, Manuel Battegay, M.D., Patrick Schmid, M.D., Enos Bernasconi, M.D., Matthias Egger, M.D., for the Swiss HIV Cohort Study and the Swiss National Cohort

Affiliations: Institute of Social and Preventive Medicine and University Hospital, University of Bern, Switzerland (O.K., A.S., M.W.G.B., M.E.); Division of Infectious Diseases, University Hospital Zürich (B.H.); Division of Infectious Diseases, University Hospital Geneva (A.G.-A.); Division of Infectious Diseases, University Hospital Lausanne (F.T.); University Clinic for Infectious Diseases, Bern (A.C.); Division of Infectious Diseases and Hospital Epidemiology, University Hospital Basel (M.B.); Division of Infectious Diseases, Cantonal Hospital St. Gallen (P.S.); Division of Infectious Diseases, Ospedale Regionale di Lugano (E.B.).

Disclosures: Dr. Bernasconi has received travel grants and speakers honoraria from Abbot, Behringer Ingelheim, Gilead, GlaxoSmithKline, Pfizer, and Tibotec. All other authors report no financial relationships with commercial interests.

Discussion of unapproved or investigational use of products*: No

Title: Static and Dynamic Cognitive Deficits in Childhood Preceding Adult Schizophrenia: A 30-Year Study

Faculty: Abraham Reichenberg, Ph.D., Avshalom Caspi, Ph.D., HonaLee Harrington, B.S., Renate Houts, Ph.D., Richard S.E. Keefe, Ph.D., Robin M. Murray, M.D., Richie Poulton, Ph.D., Terrie E. Moffitt, Ph.D.

Affiliation: Department of Psychology and Neuroscience, Department of Psychiatry and Behavioral Sciences, and the Institute for Genome Sciences and Policy, Duke University, Durham, N.C. (A.C., H.H., R.H., R.S.E.K., T.M.); the Social, Genetic, and Developmental Psychiatry Research Centre and Department of Psychological Medicine, Institute of Psychiatry, King's College London, London (A.R., R.M.); the Dunedin School of Medicine, University of Otago, Dunedin, New Zealand (R.P.).

Disclosures: Dr. Reichenberg has received speakers' honoraria from AstraZeneca. Dr. Keefe has served as a consultant to Cortex, Shering-Plough Abbott, Acadia, AstraZeneca, BiolineRx, Bristol-Myers Squibb, Cephalon, Dainippon Sumitomo Pharma, Eli Lilly, Johnson and Johnson, Lundbeck, Memory Pharmaceuticals, Merck, NeuroSearch, Orexigen, Orion, Otsuka, Pfizer, Roche, Sanofi/Avenis, Targacept, Wyeth, and Xenoport; he has received royalties from the Brief Assessment of Cognition (BACS) and MATRICS Battery (BACS Symbol Coding); he has also received funding from Pfizer and Organon Pharmaceuticals. Dr. Murray has received speakers' honoraria from AstraZeneca, Bristol-Myers Squibb, Eli Lilly, Janssen, and Novartis. Drs. Caspi, Houts, Poulton, and Moffitt and Ms. Harrington report no financial relationships with commercial interests.

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Title: A Neural Signature of Anorexia Nervosa in the Ventral Striatal Reward System

Faculty: Anne-Katharina Fladung, Ph.D., Georg Grön, Ph.D., Karl Grammer, Ph.D., Bärbel Herrnberger, Ph.D., Edgar Schilly, M.A., Sabine Grasteit, Dipl.-Psych., Robert Christian Wolf, M.D., Henrik Walter, M.D., Ph.D., Jörn von Wietersheim, Ph.D.

Affiliations: Department of Psychiatry and Psychotherapy and the Department of Psychosomatic Medicine and Psychotherapy, University of Ulm, Ulm, Germany (A.-K.F., G.G., B.H., E.S., S.G., R.C.W., J.v.W.); University of Vienna, Department of Anthropology, Ludwig Boltzmann-Institute for Urban Ethology, Vienna, Austria (K.G.); and the Division of Medical Psychology and the Department of Psychiatry and Psychotherapy, University of Bonn, Bonn, Germany (H.W.).

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

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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 February 1, 2010 – End date January 31, 2012

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Suicide in HIV-Infected Individuals and the General Population in Switzerland, 1988–2008

Olivia Keiser et al.

Am J Psychiatry 2010; 167:xxx-xxx

QUESTION 1. Which of the following statements regarding highly active anti-retroviral therapy (HAART) is correct?

- A. HAART was introduced in the early 1980s.
- B. HIV can be cured with HAART.
- C. Mood disorder is a known adverse effect of HAART.
- D. HIV-associated morbidity decreased only slightly after the introduction of HAART.

QUESTION 2. Compared to the pre-HAART era, which of the following statements reflects the change in suicide rates *after* the introduction of HAART?

- A. Suicide rates stayed the same.
- B. Suicide rates became lower.
- C. Suicides rates became the same as the general population.
- D. Suicides rates declined in men but not in women.

QUESTION 3. Which of the following is a risk factor for suicide in both the general Swiss population *and* in HIV infected patients?

- A. Male sex
- B. Younger age
- C. Foreign nationality
- D. Female sex

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
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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 4. The activity validated my current practice.

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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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Static and Dynamic Cognitive Deficits in Childhood Preceding Adult Schizophrenia: A 30-Year Study

Abraham Reichenberg et al.

Am J Psychiatry 2010; 167:xxx-xxx

QUESTION 1. Which of the following hypotheses is/are tested in this longitudinal study of the developmental course of cognitive functions in schizophrenia?

- A. developmental lag
- B. developmental deterioration
- C. developmental deficit
- D. all of the above

QUESTION 2. What is the most appropriate score to monitor a child's intra-individual development over time through childhood and adolescence?

- A. full-scale IQ score
- B. raw subtest scores on IQ subtests
- C. mental age scores
- D. age-corrected scale scores on IQ subtests

QUESTION 3. On which following cognitive tasks do future schizophrenia patients exhibit a pronounced developmental lag during childhood development?

- A. block design
- B. digit symbol
- C. arithmetic
- D. all of the above

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A Neural Signature of Anorexia Nervosa in the Ventral Striatal Reward System

Anne-Katharina Fladung et al.
Am J Psychiatry 2010; 167:xxx-xxx

QUESTION 1. The interaction between eating behavior and which of the following factors has been the focus of theories based on research on self-starvation in animals?

- A. forced exercise
- B. stress
- C. memory
- D. aggression

QUESTION 2. The mesolimbic dopaminergic reward system mediates reward processing. Altered functioning of this system is evident in patients with anorexia nervosa as evidenced by which of the following?

- A. In the ventral striatum, dopamine 2 and 3 (D2/D3) receptor binding is increased in recovered patients.
- B. There is a higher concentration of dopamine metabolites in the CSF of anorexia nervosa patients.
- C. Increased appetitive processing of positive stimuli is seen in patients via the startle reflex paradigm.
- D. Reduced endogenous opioid activity in the CSF is present in anorexia nervosa patients.

QUESTION 3. This study observed altered activity patterns in the ventral striatal reward system in women with anorexia nervosa. Which of the following stimuli elicited the highest ventral striatal activity in patients compared to healthy comparison women?

- A. underweight stimuli
- B. normal weight stimuli
- C. overweight stimuli
- D. stimulus response did not differ between groups

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