

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.

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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: Roles of the Akt/GSK-3 and Wnt Signaling Pathways in Schizophrenia and Antipsychotic Drug Action

Faculty: Zachary Freyberg, M.D., Ph.D., Stephen J. Ferrando, M.D., Jonathan A. Javitch, M.D., Ph.D.

Affiliations: Department of Psychiatry, Columbia University (Z.F., J.A.J.); Department of Pharmacology and the Center for Molecular Recognition, College of Physicians and Surgeons, Columbia University (J.A.J.); the Department of Psychiatry and Department of Public Health, The New York-Presbyterian Hospital, Weill Medical College of Cornell University (S.J.F.); and the Division of Molecular Therapeutics, New York State Psychiatric Institute (J.A.J.).

Disclosures: Dr. Freyberg reports no financial relationships with commercial interests. Dr. Ferrando reports receiving speaker's honoraria from Pfizer and AstraZeneca Pharmaceuticals. Dr. Javitch reports consulting fees from Heptares Therapeutics.

Discussion of unapproved or investigational use of products*: No

Title: Adult Psychiatric Outcomes of Girls With Attention Deficit Hyperactivity Disorder: 11-Year Follow-Up in a Longitudinal Case-Control Study

Faculty: Joseph Biederman, M.D., Carter R. Petty, M.A., Michael C. Monuteaux, Sc.D., Ronna Fried, Ed.D., Deirdre Byrne, B.S., Tara Mirto, B.A., Thomas Spencer, M.D., Timothy E. Wilens, M.D., Stephen V. Faraone, Ph.D.

Affiliation: Clinical and Research Programs in Pediatric Psychopharmacology, Department of Psychiatry, Massachusetts General Hospital (J.B., C.R.P., M.C.M., R.F., D.B., T.M., T.S., T.E.W.); and the Department of Psychiatry and Behavioral Sciences, SUNY Upstate Medical University, Syracuse (S.V.F.).

Disclosures: Dr. Biederman has received research support, consultation fees, or speaker's fees from Abbott, Alza, AstraZeneca, Bristol-Myers Squibb, Celltech, Cephalon, Eli Lilly, Esai, Forest, GlaxoSmithKline, Gliatech, Janssen Pharmaceuticals, McNeil, Merck, NARSAD, National Institute on Drug Abuse, National Institute of Child Health and Human Development, NIMH, New River, Novartis, Noven, Neurosearch, Organon, Otsuka, Pfizer, Pharmacia, Prechter Foundation, Shire, Stanley Foundation, UCB Pharma, and Wyeth. Dr. Fried has received honoraria from Shire. Dr. Spencer has received research support from or has served as speaker or on advisory boards for Cephalon, Eli Lilly, GlaxoSmithKline, Janssen, McNeil, NIMH, New River, Novartis, Pfizer, and Shire. Dr. Wilens has received research support from or has served as speaker or on advisory boards for Abbott, AstraZeneca, Eli Lilly, GlaxoSmithKline, Merck, National Institute on Drug Abuse, NIH, Neurosearch, Novartis, Ortho-McNeil, Pfizer, and Shire and received royalties from Guilford Press. Dr. Faraone has received research support or consulting or speaking fees from or has served on advisory boards for Eli Lilly, McNeil, Pfizer, NIH, and Shire. The others authors report no financial relationships with commercial interests.

Discussion of unapproved or investigational use of products*: No

Title: Project Among African-Americans to Explore Risks for Schizophrenia (PAARTNERS): Evidence for Impairment and Heritability of Neurocognitive Functioning in Families of Schizophrenia Patients

Faculty: Monica E. Calkins, Ph.D., Ping Tepper, Ph.D., Ruben C. Gur, Ph.D., J. Daniel Ragland, Ph.D., Lambertus Klei, Ph.D., Howard W. Wiener, Ph.D., Jan Richard, M.S., Robert M. Savage, Ph.D., Trina B. Allen, M.D., Judith O'Jile, Ph.D., Bernie Devlin, Ph.D., Joseph Kwentus, M.D., Muktar H. Aliyu, M.D., Dr.P.H., L. DiAnne Bradford, Ph.D., Neil Edwards, M.D., Paul D. Lyons, M.D., Ph.D., Vishwajit L. Nimgaonkar, M.D., Ph.D., Alberto B. Santos, M.D. Rodney C.P. Go, Ph.D., Raquel E. Gur, M.D., Ph.D.

Affiliations: Department of Psychiatry, University of Pennsylvania (M.E.C., R.C.G., J.R., R.E.G.); the Department of Epidemiology (P.T.), the Department of Psychiatry (L.K.), and the Department of Human Genetics, University of Pittsburgh (B.D., V.L.N.); the Department of Psychiatry and Behavioral Sciences, University of California at Davis, Sacramento (J.D.R.); the Department of Epidemiology and International Health (H.W.W., R.C.P.G.) and the Department of Psychiatry and Behavioral Neurobiology (R.M.S., R.C.P.G.), University of Alabama at Birmingham; the Department of Psychiatry and Behavioral Sciences, Duke University Medical Center, and the Department of Research, Durham VA Medical Center (T.B.A.); the Department of Psychiatry and Human Behavior, University of Mississippi Medical Center, Jackson (J.O.); the Department of Preventive Medicine, Institute for Global Health, Vanderbilt University (M.H.A.); the Department of Psychiatry, Morehouse School of Medicine (L.D.B.); the Department of Psychiatry, University of Tennessee College of Medicine, Memphis (N.E.); the Department of Neurology, University of Virginia, Charlottesville (P.D.L.); the Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston (A.B.S.); and the Philadelphia VA Medical Center (R.E.G.).

Disclosures: Dr. Ruben Gur receives grant support through collaborations of the University of Pennsylvania with AstraZeneca, Pfizer, and Merck and may receive royalties from future commercial use of the Penn Computerized Neurocognitive Battery. Dr. Ragland may receive royalties from future commercial use of the Penn Computerized Neurocognitive Battery. Ms. Richard may receive royalties from future commercial use of Penn Computerized Neurocognitive Battery. Dr. Nimgaonkar received a research grant from Lundbeck on an unrelated topic when this article was in preparation. Dr. Raquel Gur receives grant support through collaborations of the University of Pennsylvania with AstraZeneca and Pfizer and may receive royalties from future commercial use of the Penn Computerized Neurocognitive Battery. The remaining authors report no financial relationships with commercial interests.

Discussion of unapproved or investigational use of products*: No

* 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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INFORMATION TO PARTICIPANTS

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title, complete the CME quiz online at cme.psychiatryonline.org and submit your evaluation and study hours (up to 1 AMA PRA Category 1 Credit™).

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Estimated Time to Complete: 1 Hour

Begin date April 1, 2010 – End date March 31, 2012

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Roles of the Akt/GSK-3 and Wnt Signaling Pathways in Schizophrenia and Antipsychotic Drug Action

Zachary Freyberg et al.

Am J Psychiatry 2010; 167:388-396

QUESTION 1. The signaling pathway of Akt (also known as protein kinase B) involves recruitment of Akt to the neuronal cell surface by binding to lipids generated by which of the following?

- A. Glycogen synthase kinase 3 (GSK-3)
- B. Phosphatidylinositol 3-kinase (PI3K)
- C. Wnt
- D. Clozapine

QUESTION 2. Binding of dopamine to the dopamine D2 receptor modulates Akt activity, which leads to which of the following through multiple steps?

- A. Decreased GSK-3 activity
- B. Increased GSK-3 activity
- C. No change in GSK-3 activity
- D. Initial increase followed by decreased GSK-3 activity

QUESTION 3. It is thought that acute and chronic treatment with haloperidol in the brain may result in which of the following?

- A. Raised levels of phosphorylated Akt1
- B. Raised levels of phosphorylated glycogen synthase kinase 3β (GSK-3β)
- C. Lower levels of phosphorylated Akt1
- D. Both a and b are correct

EVALUATION QUESTIONS

This evaluation form is adapted from the MedBiquitous Journal-Based Continuing Education Guidelines 28 November 2005.

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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.

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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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Adult Psychiatric Outcomes of Girls With Attention Deficit Hyperactivity Disorder: 11-Year Follow-Up in a Longitudinal Case-Control Study

Joseph Biederman et al.

Am J Psychiatry 2010; 167:409-417

QUESTION 1. By young adult years, girls with ADHD are at elevated risks for

- A. Mood disorders
- B. Anxiety disorders
- C. Addictive disorders
- D. All of the above

QUESTION 2. How did the use of ADHD medications affect the 1 year prevalence of composite psychiatric disorders among girls with ADHD at 11 year follow-up?

- A. Lifetime use of ADHD medications increased the risk of all six composite disorders.
- B. A lower risk of all composite disorders was associated with 1-year medication use for ADHD.
- C. Lifetime or 1-year medication use for ADHD had no association with 1-year composite disorders.
- D. Lifetime use of ADHD medications was associated with increased risk of antisocial personality disorder only.

QUESTION 3. How did controlling for baseline psychopathology affect the lifetime risks for the composite psychiatric disorders?

- A. The risks for antisocial, mood, and anxiety disorders remained statistically significant.
- B. Only the lifetime risk for addictive disorders remained statistically significant.
- C. The lifetime risk for all disorders no longer reached statistical significance.
- D. Only the lifetime risk for antisocial personality disorder remained significant.

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Monica E. Calkins et al.

Am J Psychiatry 2010; 167:459-472

QUESTION 1. The current study demonstrated heritability of neurocognition in African American families; the heritability estimate was highest for accuracy in which of the following domains?

- A. language
- B. working memory
- C. attention
- D. spatial processing

QUESTION 2. Which of the following statements accurately reflects the relationship between substance-related disorders and neurocognitive performance in the current study?

- A. Reduced accuracy and speed of neurocognitive performance can be attributed to substance-related disorders.
- B. Reduced speed, but not accuracy, is associated with substance-related disorders.
- C. Cognitive performance is associated with substance-related disorders, but schizophrenia and schizoaffective disorders have stronger associations.
- D. Cognitive performance is not associated with substance-related disorders.

QUESTION 3. This study concludes that which of the following heritable neurocognitive abilities are able to differentiate individuals with schizophrenia or schizoaffective disorder and their unaffected family members and community subjects?

- A. Abstraction/flexibility
- B. Verbal memory
- C. Emotion processing
- D. All of the above

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For free listing of your organization's official annual or regional meeting, please send us the following information: sponsor, location, inclusive dates, type and number of continuing education credits (if available), and the name, address, and telephone number of the person or group to contact for more information. In order for an event to appear in our listing, all notices and changes must be received at least 6 months in advance of the meeting and should be addressed to:

Calendar, American Journal of Psychiatry, 1000 Wilson Boulevard, Suite 1825, Arlington, VA 22209-3901, jblair@psych.org (e-mail).

Because of space limitations, only listings of meetings of the greatest interest to Journal readers will be included.

APRIL

April 9–11, The Annual Fay Lecture Series in Analytical Psychology, "Connecting with South Africa: Inter-Cultural Communication and Understanding," Texas A&M University, College Station, Texas. Contact: (979) 845-2530 tel, drosen@psych.tamu.edu (e-mail).

April 29–May 1, Annual Meeting of the Society for the Study of Psychiatry and Culture, with the Advanced Study Institute, Division of Social and Transcultural Psychiatry, McGill University, Montreal, Canada. Contact: J. Boehnlein, M.D., sspc2010@gmail.com (e-mail), www.psychiatryandculture.org (web site).

MAY

May 20–22, 54th Annual Meeting of the American Academy of Psychoanalysis and Dynamic Psychiatry, New Orleans, LA. Contact: Executive Office, American Adademy of Psychoanalysis and Dynamic Psychiatry, PO Box 30, Bloomfield, CT 06002; (888) 691-8281, (860) 286-0787, info@aapdp.org (e-mail), www.aapdp.org (web site).

May 22–26, 163rd Annual Meeting of the American Psychiatric Association, New Orleans, LA. Contact: Cathy Nash, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7822.

JULY

July 1–3, 1st International Congress on Borderline Personality Disorder, Berlin Germany. Contact: Thorsten Kienast, MD, thorsten.kienast@charite.de (e-mail) 011-49-(0)30-2311 2928 (tel), www.borderline-congress-org (web site).

SEPTEMBER

September 14–19, 1st joint annual meeting of the EEG and Clinical Neuroscience Society (ECNS), International Society for Neuroimaging in Psychiatry (ISNIP) and the International Society for Brain Electromagnetic Topography (IS-BET), Istanbul, Turkey. Contact: Kemal Arikian mkarikan@istanbul.edu.tr (e-mail) www.ecns2010.com (web site).

OCTOBER

October 14–17, 62nd Institute on Psychiatric Services, American Psychiatric Association, Boston, MA. Contact: Jill Gruber, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7815.

October 26–31, 57th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, New York, NY. Contact: AACAP, 3615 Wisconsin Avenue, N.W., Washington, DC 20016-3007; (202) 966-7300 (tel), (202) 966-2891 (fax), meetings@aacap.org (e-mail), www.aacap.org (web site).

MAY 2011

May 14–19, 164th Annual Meeting of the American Psychiatric Association, Honolulu, HI. Contact: Cathy Nash, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7822.

OCTOBER

October 5–8, II International Congress, Dual Disorders, Addictive Behaviors and other Mental Disorders, Barcelona, Spain. Contact: SEPD, www.cipd2011.com (web site).

October 18–23, 58th Annual Meeting of the American Academy of Child and Adolescent Psychiatry, Toronto, Ontario. Contact: AACAP, 3615 Wisconsin Avenue, N.W., Washington, DC 20016-3007; (202) 966-7300 (tel), (202) 966-2891 (fax), meetings@aacap.org (e-mail), www.aacap.org (web site).

October 27–30, 63rd Institute on Psychiatric Services, American Psychiatric Association, San Francisco, CA. Contact: Jill Gruber, APA Annual Meetings Dept., 1000 Wilson Blvd., Ste. 1825, Arlington, VA 22209; (703) 907-7815.



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This month's courses appear on pages 483–486.

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Coming in the May 2010 issue*

THE AMERICAN JOURNAL OF PSYCHIATRY

State Effects of Major Depression on the Assessment of Personality and Personality Disorder

L.C. Morey, M.T. Shea, J.C. Markowitz, R.L. Stout, C.J. Hopwood, J.G. Gunderson, C.M. Grilo, T.H. McGlashan, S. Yen, C.A. Sanislow, and A.E. Skodol

Automatic and Strategic Representation of the Self in Major Depression: Trait and State Abnormalities

A.Y. Shestyuk and P.J. Deldin

Failure of Anterior Cingulate Activation and Connectivity With the Amygdala During Implicit Regulation of Emotional Processing in Generalized Anxiety Disorder

A. Etkin, K.E. Prater, F. Hoeft, V. Menon, and A.F. Schatzberg

Genome-Wide Pharmacogenetics of Antidepressant Response in the GENDEP Project

R. Uher, N. Perroud, M.Y.M. Ng, J. Hauser, N. Henigsberg, W. Maier, O. Mors, A. Placentino, M. Rietschel, D. Souery, T. Zagar, P.M. Czerski, B. Jerman, E.R. Larsen, T.G. Schulze, A. Zobe, S. Cohen-Woods, K. Pirlo, A.W. Butler, P. Muglia, M.R. Barnes, M. Lathrop, A. Farmer, M.D., G. Breen, K.J. Aitchison, I. Craig, C.M. Lewis, and P. McGuffin

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