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. 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 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: Misdiagnosed Postpartum Psychosis Revealing a Late-Onset Urea Cycle Disorder
Faculty: Thomas Fassier, M.D., Nathalie Guffon, M.D., Cécile Acquaviva, Pharm.D., Thierry D'Amato, M.D., Ph.D., Denis Vital Durand, M.D., Philippe Domenech
Affiliations: Hospices Civils de Lyon and the University of Lyon
Disclosures: All authors report no financial relationships with commercial interests.
Discussion of unapproved or investigational use of products*: No

Title: Interpersonal Psychotherapy for Depression: A Meta-Analysis
Faculty: Pim Cuijpers, Ph.D., Anna S. Geraedts, M.A., Patricia van Oppen, Ph.D., Gerhard Andersson, Ph.D., John C. Markowitz, M.D., Annemieke van Straten, Ph.D.
Affiliations: Department of Clinical Psychology and the Department of Psychiatry, Vrije Universiteit (VU University) Amsterdam (P.C., A.v.S.); EMGO Institute for Health and Care Research, VU University Amsterdam and VU University Medical Center Amsterdam (A.S.G., P.v.O.); Department of Behavioral Sciences and Learning, Linköping University, Linköping, Sweden (G.A.); New York State Psychiatric Institute; and Department of Psychiatry, Columbia University College of Physicians and Surgeons, New York (J.C.M.).
Disclosures: Dr. Markowitz receives funding for an interpersonal psychotherapy-related study from the National Institute of Mental Health and minor royalties from books on psychotherapy, including interpersonal psychotherapy, and receives a stipend from Elsevier Press as associate editor of a journal. The other authors report no financial relationships with commercial interests.
Discussion of unapproved or investigational use of products*: No

Title: Brain Structure Abnormalities in Early-Onset and Adolescent-Onset Conduct Disorder
Faculty: Graeme Fairchild, Ph.D., Luca Passamonti, M.D., Georgina Hurford, B.Sc., Cindy C. Hagan, Ph.D., Elisabeth A.H. von dem Hagen, Ph.D., Stephanie H.M. van Goozen, Ph.D., Ian M. Goodyer, M.D., Andrew J. Calder, Ph.D.
Affiliations: Developmental Psychiatry Section, University of Cambridge, Cambridge, United Kingdom (G.F., G.H., C.C.H., I.M.G.); the Consiglio Nazionale delle Ricerche, Unità di Ricerca Neuroimmagini, Catanzaro, Italy (L.P.); the Medical Research Council Cognition and Brain Sciences Unit, Cambridge, United Kingdom (E.A.H.v.d.H., A.J.C.); and the School of Psychology, Cardiff University, Cardiff, United Kingdom (S.H.M.v.G.).
Disclosures: All authors report no financial relationships with commercial interests.
Discussion of unapproved or investigational use of products*: No

* 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.

Continuing Medical Education

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™*).

CREDITS. The APA 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 (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 June 1, 2011 – End date May 31, 2013

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Misdiagnosed Postpartum Psychosis Revealing a Late-Onset Urea Cycle Disorder

Thomas Fassier et al.
Am J Psychiatry 2011; 168:576–580

Learning Objective. The participant will be able to appraise late-onset urea cycle disorders as a challenging and potentially life-threatening differential diagnosis of postpartum psychosis.

Subject Node. Schizophrenia and Other Psychotic Disorders

1. Among the following psychiatric symptoms, which one does not fit with the typical postpartum psychosis and raises the hypothesis of a differential diagnosis?

A. baby-related delusion of persecution
B. severe state of delirium
C. suicidal thoughts
D. severe mood lability

2. While treating a postpartum psychosis patient, which of these tests would you order to assess the hypothesis of a late-onset urea cycle disorder?

A. electrolyte panel
B. liver function tests
C. plasma ammonia level
D. brain imaging

3. Which of the following sentences concerning late-onset urea cycle disorders revealed by psychiatric symptoms is *false*?

A. Late-onset urea cycle disorders can be diagnosed among adults.
B. Psychiatric symptoms are variable and may delay the accurate diagnosis.
C. Episodes of hyperammonemia-induced symptoms can resolve spontaneously.
D. Valproate can be used to control hyperammonemia-induced mood symptoms.

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
2. Agree
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
2. Agree
3. Neutral
4. Disagree
5. Strongly disagree

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

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

Continuing Medical Education

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™*).

CREDITS. The APA 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 (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 June 1, 2011 – End date May 31, 2013

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Interpersonal Psychotherapy for Depression: A Meta-Analysis

Pim Cuijpers et al.
Am J Psychiatry 2011; 168:581–592

Learning Objective. The learner will appreciate the role of interpersonal psychotherapy in the treatment of depression, both as an independent treatment and in combination with pharmacotherapy.

Subject Node. Mood Disorders; Psychotherapy

1. Practice guidelines for depression recommend both pharmacological and psychological treatments; which of the following represent the psychological treatments of choice?

- **A.** Interpersonal therapy and psychodynamic therapies
- **B.** Cognitive behavioral therapy and behavioral activation
- **C.** Interpersonal therapy and cognitive behavioral therapy
- **D.** Only interpersonal therapy

2. Which of the following represents the effectiveness of interpersonal psychotherapy (IPT) compared to other psychological treatments for depression?

- **A.** IPT is more effective than other psychotherapies.
- **B.** Research does not show that IPT is more effective than other psychotherapies.
- **C.** Current research studies have not had enough statistical power to tell if IPT is more effective than other psychotherapies.
- **D.** Cognitive behavior therapy is more effective than IPT.

3. What is the effect of maintenance interpersonal psychotherapy (IPT) on reducing relapse after recovery from depression?

- **A.** Maintenance IPT with pharmacotherapy is effective in reducing relapse compared with pharmacotherapy alone.
- **B.** The number of studies of maintenance IPT is too small to find a significant effect.
- **C.** Maintenance IPT reduces relapse, but only if combined with pharmacotherapy.
- **D.** There is no indication that IPT is effective in reducing relapse.

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
2. Agree
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
2. Agree
3. Neutral
4. Disagree
5. Strongly disagree

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

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

Continuing Medical Education

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™*).

CREDITS. The APA 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 (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 June 1, 2011 – End date May 31, 2013

EXAMINATION QUESTIONS

Select the single best answer for each question below.

Brain Structure Abnormalities in Early-Onset and Adolescent-Onset Conduct Disorder

Graeme Fairchild et al.
Am J Psychiatry 2011; 168:624–633

Learning Objective. The participant will recognize brain regions involved in the development of conduct disorder.

Subject Node. Brain Imaging

1. Which of the following observations from the study opposes the developmental taxonomic theory of conduct disorder?

A. Reduced brain volumes occur in both early-onset and adolescent-onset variants of conduct disorder.
B. Adolescent-onset conduct disorder is a result of social mimicry of antisocial peers.
C. Associations between conduct disorder and reduced brain volume are independent of ADHD symptoms.
D. Associations between conduct disorder and reductions in brain volume are not explained by self-reported callous-unemotional traits.

2. Which brain area shows the most consistent volume reduction in conduct disorder and is unlikely to reflect other factors, such as comorbid ADHD symptoms?

A. ventromedial prefrontal cortex
B. right amygdala
C. hippocampus
D. anterior cingulate cortex

3. The volume of which brain area was positively correlated with self-reported callous-unemotional traits?

A. amygdala
B. orbitofrontal cortex
C. ventral striatum
D. insula

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
2. Agree
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
2. Agree
3. Neutral
4. Disagree
5. Strongly disagree

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

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