Refractory Mood And Psychosis

1. Mood disorders are common psychiatric disorders that affect
   a. men and women of all ages.
   b. mostly women.
   c. mostly adolescents.
   d. only those genetically predisposed to the disorders.

2. Treatment-resistant schizophrenia is defined as a state of continued psychotic symptoms
   a. after diagnosis of visual or auditory hallucinations.
   b. after trial of two different types of antipsychotic medications.
   c. if symptoms persist for two weeks after diagnosis.
   d. that interfere with the patient’s life functions.

3. The most common form of treatment for major depression is
   a. electroconvulsive therapy (ECT).
   b. counseling.
   c. family support.
   d. prescribing antidepressants.

4. ____________ may cause a patient to have a poor prognosis and a higher level of refractoriness for schizophrenia.
   a. Early cannabis use
   b. Depression
   c. Mood disorders
   d. Family struggles

5. A person who believes he or she has become a wolf suffers from
   a. delusions of grandeur.
   b. Cotard delusions.
   c. lycanthropy.
   d. gustatory hallucinations.
6. ______________ may affect one or more of the senses and they are more likely to be associated with acute psychosis, such as with schizophrenia.

   a. Hallucinations
   b. Delusions of grandeur
   c. Delusional disorder
   d. Major depressive disorder

7. The most common mental illness causing psychosis is

   a. hallucinations.
   b. schizophrenia.
   c. auditory hallucinations.
   d. schizoaffective disorder.

8. A less common type of hallucination includes

   a. auditory hallucinations.
   b. visual hallucinations.
   c. tactile hallucinations.
   d. disorganized hallucinations.

9. A mood disorder describes a condition in which a person

   a. experiences severe alterations in thoughts.
   b. has difficulty distinguishing his thoughts from reality.
   c. unstable mood state because of mental illness.
   d. experiences severe alterations in emotions.

10. Psychosis develops as part of a number of mental illnesses, including cases of

    a. schizophrenia.
    b. severe postpartum depression.
    c. Alzheimer’s disease.
    d. All of the above.
11. According to Trevino, et al., among individuals diagnosed with major depressive disorder, who were treated with a normal dose and duration of antidepressants, 30 to 50 percent

   a. responded to initial treatment.
   b. exhibited symptoms of a bipolar type 1 disorder.
   c. did not respond to initial treatment.
   d. developed a set of beliefs about themselves that were false.

12. Auditory hallucinations may include voices, which

   a. may or may not be familiar to the patient.
   b. are familiar to the patient.
   c. occur within the patient’s thought patterns.
   d. are controlled.

13. The most common types of hallucinations associated with psychoses are __________ hallucinations.

   a. visual
   b. auditory
   c. olfactory
   d. schizoaffective

14. The affected person experiencing bizarre delusions that may be individualized to one or two people or may be generalized to a larger group has

   a. visual hallucinations.
   b. brief psychotic disorder.
   c. delusional disorder.
   d. schizoaffective disorder.

15. A person with shorter periods of time (one month or less) that experiences delusions, hallucinations, or disorganized speech is said to have

   a. schizophreniform disorder.
   b. brief psychotic disorder.
   c. catatonia.
   d. schizoaffective disorder.
16. Which of the following is true regarding catatonia?

a. It is diagnosed on its own (not with other disorders).
b. brief psychotic disorder.
c. The patient is unconscious.
d. The patient is unresponsiveness but conscious.

17. __________________ may be associated with psychosis and are classified according to the DSM-5 as being a “bridge” between the psychotic and depressive disorders

a. Brief psychotic disorder
b. Hallucinations
c. Bipolar disorders
d. Delusional disorder

18. _______________ is a type of bipolar disorder that is considered to be a milder form of the illness.

a. Schizophrenia
b. Bipolar I disorder
c. Cyclothymic disorder
d. None of the above

19. Manic-depressive illness is a classic presentation of

a. bipolar I disorder.
b. cyclothymic disorder
c. delusions of grandeur
d. delusional disorder

20. Bipolar II disorder typically does not involve

a. periods of major depression.
b. episodes of hypomania.
c. psychotic symptoms.
d. depression.
21. What mental illness includes a combination of symptoms of schizophrenia (delusions or hallucinations), as well as symptoms of a mood disorder?

a. Bipolar I disorder  
b. Catatonia  
c. Major depressive disorder  
d. Schizoaffective disorder

22. Treatment resistance of bipolar disorder is considered when the patient has undergone treatment for at least

a. six weeks during manic periods.  
b. 12 weeks in bipolar depression.  
c. at least 12 months of maintenance treatment.  
d. All of the above.

23. Epigenetics is the idea that _________________ can alter gene expression, which can further affect later generations of descendants.

a. reliving stressful events  
b. hormonal changes  
c. environmental conditions  
d. a single stressful event

24. Opioid drugs, often taken for pain control, may lead to __________ as part of a state called opioid psychosis.

a. delirium  
b. cyclothymic disorder  
c. hypomania  
d. depression

25. Antihistamines, used for allergy relief, may cause

a. major depression.  
b. hypomania.  
c. psychotic symptoms.  
d. visual or auditory hallucinations.
26. Benzodiazepines, which may be prescribed for anxiety or for sleep disorders, can cause ____________, particularly when discontinuing the drug.

a. hallucinations  
b. depression  
c. cyclothymic disorder  
d. schizoaffective disorder

27. Among children, ____________ is actually more prevalent than other abuses.

a. sexual abuse  
b. physical neglect  
c. physical abuse  
d. material neglect

28. The Rape, Abuse, and Incest National Network (RAINN) states that 44 percent of sexual assault victims are under age 18, and ____ of victims know their perpetrator.

a. 50%  
b. 93%  
c. 75%  
d. 40%

29. Victims of childhood sexual abuse may be at greater risk of developing mental illnesses in adulthood, particularly

a. brief psychotic disorder.  
b. catatonia.  
c. schizophrenic disorders.  
d. dissociative disorders.
30. Individuals who experienced childhood neglect or abuse exhibited changes in the _____________ that impacted the individual’s ability to process emotions and handle stress.
   a. hippocampus
   b. amygdala
   c. thalamus
   d. cerebellum

31. If the individual is suffering from delusions or hallucinations, it is important to determine if the delusions or hallucinations are
   a. caused by PTSD.
   b. related to a stressful event.
   c. triggers for episodes of psychosis.
   d. related to a person or thing.

32. ____________________have been implicated in some cases of depression that have led to an increased risk of suicide.
   a. Calcium channel blockers
   b. Corticosteroids
   c. Antihistamines
   d. Benzodiazepines

33. ____________________such as atropine and scopolamine, have been known to cause symptoms of restlessness, disorientation, mania, and hallucinations.
   a. Calcium channel blockers
   b. Antihistamines
   c. Anticholinergic drugs
   d. Antihistamines
34. ________________, often administered for the management of inflammation, have been shown to cause insomnia, euphoria, and visual hallucinations in some patients.

a. Corticosteroids  
b. Fluoroquinolone drugs  
c. Antihistamines  
d. Benzodiazepines

35. A patient with chronic schizophrenia is said to be refractory if

a. the condition is not cured.  
b. psychotic symptoms remain.  
c. psychotic symptoms are not controlled.  
d. first antipsychotic medication does not cure symptoms.

36. The “baseline” for a patient with bipolar disorder is recorded in the patient’s life chart as a time period when the patient is

a. experiencing symptoms of mania or depression.  
b. not taking antipsychotic drugs.  
c. taking antipsychotic drugs.  
d. not experiencing symptoms of mania or depression.

37. Mild hypomania is described as an elevation in mood and behavior that initially has ___ effect on functional ability but that could lead to impairment if it continues.

a. moderate  
b. mild  
c. no  
d. a noticeable
38. The most commonly prescribed types of antidepressants are
   a. selective serotonin reuptake inhibitors (SSRIs).
   b. calcium channel blockers.
   c. anticholinergic drugs.
   d. lithium.

39. Because of the dangers of hypertension associated with ___________________________ and foods that contain tyramine, these drugs are not routinely prescribed as a first choice for treatment of depression.
   a. Selective serotonin reuptake inhibitors (SSRIs).
   b. Calcium channel blockers.
   c. Monoamine oxidase inhibitors (MAOIs)
   d. Lithium.

40. ______________ is one of the most common forms of somatic therapy used for the treatment of depression associated with major depressive disorder and bipolar disorder.
   a. Electroconvulsive therapy
   b. Deep brain stimulation (DBS)
   c. Group therapy
   d. The therapeutic alliance approach

41. There is a wide variety of ________________ prescribed in medicine today, primarily because of their effect on muscarinic receptors.
   a. selective serotonin reuptake inhibitors (SSRIs).
   b. calcium channel blockers.
   c. anticholinergic drugs
   d. monoamine oxidase inhibitors (MAOIs)

42. Patients who benefit from electroconvulsive therapy (ECT)
   a. are considered “cured.”
   b. must seek an alternative if illness returns.
   c. may not undergo a subsequent ECT.
   d. may later develop the same mental illness.