

Table content

PART 1

1. A doctor who smokes, accepts that smoking is beneficial because it inhibits the development of obesity is which of the following “defense” mechanisms?

- A. Dissociation
- B. Intellectualization
- C. Rationalization
- D. Reaction formation
- E. Projection

2. The most accepted hypothesis explaining the biological basis for schizophrenia is:

- A. The transmethylation hypothesis
- B. The double bind hypothesis
- C. The serotonin hypothesis
- D. The dopamine hypothesis
- E. The endogenous opiate hypothesis

3. A disorientation to time is characteristic of:

- A. Korsakoff’s syndrome
- B. An acute schizophrenia episode
- C. Hypomania
- D. Depressive psychosis
- E. Agoraphobia

4. It is advisable during a child's upbringing to:

- A. Clearly indicate the rules for the child
- B. Overlook any destructive behavior
- C. Praise the child for any improvements of behaviour; well-behaved children should be praised with privileges
- D. All of the above
- E. None of the above

5. In attempting to teach a child to accomplish a new task one must:

- A. Reinforce the child immediately following completion of the task
- B. Reinforce the child, with a slight delay, following completion of the task
- C. Reinforce the child, after a marked delay, following completion of the task

6. When a 5-year-old child "throws a fit". He/she is usually punished but at times the child gets what he/she wants. These fits are most likely to:

- A. Become less frequent
- B. Gradually cease
- C. Become continuous

7. If praise, attention, and warm affection fail to act as means of reinforcement in a young schoolchild:

- A. Physical punishment should be introduced
- B. The child should be warned
- C. Alternative means of reinforcement should be introduced, such as praising the child with chocolate and toys.

8. To properly develop a good behavior in a child, it is advisable to:

- A. Punish the child

B. Reward the child

C. Both of the above

D. None of the above

9. Criticizing any undesirable behavior of a child, it is advisable to:

A. The best way to eliminate the undesirable behavior

B. The best way to reinforce the undesirable behavior

C. Neither of the above

10. In attempting to reinforce the behavior of a child, it is advisable to:

A. Punish the child

B. Reward the child

C. Both of the above

D. None of the above

11. Punishment is effective if:

A. It does not generate aversion towards the punishing person

B. It does not result in an escape reaction

C. It decrease the necessary of further punishment

D. It does not reinforce an aggressive behavior

E. All of the above

12. Punishment is effective if it is applied:

A. Immediately

B. With a slight delay

C. With marked delay

D. None of the above

13. In the following example, the best way to reinforce a child's behavior is to tell him/her:

1. "Go to bed, I'll tell you a tale!"
2. "I'll bet you if you don't go straight to bed!"
3. "I'm happy that you've put your pyjamas on!"
4. "If don't go to bed, you can't have breakfast in the morning!"

A. Answers 1, 2, and 3 are correct

B. Answers 1 and 3 are correct

C. Answers 2 and 4 are correct

D. All of the above

14. Which of the following statements concerning the prog-nosis of homosexuality in males is correct?

- A. Dreams of heterosexual activity are indicative of a better prognosis
- B. The prognosis is independent of the patient's age at the beginning of therapy
- C. The prognosis is independent of any childhood experiences with the other sex
- D. All of the above

E. None of the above

15. The frequency of suicide is highest in:

- A. Manic-depressive illnesses
- B. Schizophrenia
- C. Senile depressive reactions

D. Psychotic depressive reactions

E. None of the above

16. Important mechanisms in the development of the “ego” include:

A. Condensation

B. Rationalization

C. Defense

D. Identification

17. Thumb sucking:

A. Usually ceases by the first year of age

B. May normally be observed during sleep until the age of 3

C. Is physiologically present during the first few months of life

D. Is observed in 20 percent of children above the age of 6

E. All of the above

18. The proportion of suicides which have already been pre-ceded by earlier suicide attempts is:

A. 10 percent

B. 20 percent

C. 50 percent

D. 60 percent

E. 100 percent s

19. The most common form of a learning disorder is:

A. Difficulty in spelling words

B. Difficulty in arithmetic tasks

C. A writing disorder

D. A reading disorder

E. None of the above

20. Contraindications to lithium administration include:

A. An administration in combination with chlorpromazine (Thorazine)

B. The presence of the symptoms of schizophrenia

C. Any occurrence of the symptoms of schizophrenia

D. The presence of depression

E. An administration in combination with imipramine (tofranil)

1.C 2.D 3.A 4.D 5.A 6.C 7.C 8.B 9.B 10.B 11.E 12.A 13.B 14.A 15.C 16.D 17.E 18.D 19.D
20.B 21.D 22.A 23.C 24.D 25.D 26.C 27.C 28.A 29.C 30.D 31.D 32.E 33.B 34.B 35.D 36.E
37.D 38.C 39.B 40.A 41.A 42.D 43.C 44.A 45.B 46.D 47.NO 48.A 49.E 50.C 51.B 52.A
53.D 54.C 55.C 56.B 57.D 58.D 59.E 60.B 61.B 62.C 63.B 64.B 65.E 66.B 67.C 68.C 69.C
70.C 71.C 72.D 73.D 74.D 75.E 76.C 77.B 78.C 79.E 80.E 81.E 82.D 83.E 84.C 85.A 86.A
87.C 88.E 89.A 90.E 91.A 92.E 93.B 94.A 95.C 96.A 97.D 98.D 99.D 100.A

21. "Suggestion" as a form of a psychotherapy is used in:

A. Conversion disorder

B. Child psychiatry

C. Patients with a low IQ

D. All of the above

E. None of the above

22. Perception without corresponding environmental stimuli is:

- A. A hallucination
- B. An illusion
- C. A delusion
- D. Derealization
- E. Depersonalization

23. The occurrence of which of the following symptoms would allow differentiation between delirium and dementia?

- A. An impaired judgement
- B. A memory consciousness
- C. An impaired process of thinking
- D. Disorientation

24. A loss of remote memory is a typical symptom of de-lirium tremens:

- A. Delirium
- B. Senile dementia
- C. Schizophrenia
- D. Korsakoff's syndromes
- E. Hysteria

25. Disorders characterized by delusions include all of the following, except

- A. Affective disorders
- B. Organic mental disorders
- C. Paranoid disorders

D. Personality disorders

E. Schizophrenia disorders

26. Early in the psychiatric interview, it is important for the physician to:

A. Inform the patient of the fee

B. Obtain details of any past psychiatric illness

C. Let patients talk about what is bothering them

D. Obtain information about the patient's mood

E. Record the family history

27. A typical exhibitionist:

A. Projects repressed homosexual impulses

B. Is impotent

C. Experiences loneliness and shame

D. Is older than 50

E. Is schizophrenia

28. Factors determining an adult's gender identity include:

A. Parental attitudes about the patient's sex during childhood

B. The availability of sexual partners

C. Endocrine factors

D. The external genitals

E. The sex chromosomes

29. Which of the following symptoms is least characteristic for schizophrenia?

A. Autistic thinking

- B. Bizarre delusions
- C. Hypnagogic hallucinations
- D. Neologisms
- E. Thought blocking

30. Physical processes involved in the development of the “superego” include all the following, except:

- A. Identification
- B. Internalization
- C. Introjections
- D. Isolation
- E. Idealization

31. A “projection” mechanism is most characteristic for which of the following personality disorders?

- A. An anancastic personality
- B. A schizoid personality
- C. A hypomanic personality
- D. A paranoid personality
- E. An antisocial personality

32. Procrastination, scorning the efforts of others, forgetting appointments, duties and obligations are all examples of:

- A. Splitting
- B. Projection
- C. Regression

D. Acting out

E. Passive aggression

33. Anxiety is a common symptom of all the following conditions, except:

A. Hypoglycemia

B. Hypothyroidism

C. Pheochromocytoma

D. Porphyria

E. Hypocalcemia

34. The mortality rate of anorexia nervosa is:

A. Less than 1 percent

B. 5 to 15 percent

C. 20 to 30 percent

D. 35 percent

E. 50 percent

35. A "borderline personality disorder" is characterized by all of the following symptoms, except:

A. Impulsivity and an unpredictable behaviour

B. Identity disturbances

C. Mood instability

D. Withdrawal from social activity

E. Recurrent suicidal gestures and short psychotic episodes

36. A ratio of those who visited a physician within 6 months preceding their death by

suicide compared to the total number of suicides is:

- A. 40 percent of all suicides
- B. 50 percent of all suicides
- C. 60 percent of all suicides
- D. 70 percent of all suicides
- E. 80 percent of all suicides

37. A 56-year-old male presents with symptoms of irritability and disinterest in his daily activities. At times, he is con-fused and forgetful. His gait is unsteady. The deep ten-don reflexes are diminished. He frequently experiences tingling in his legs. The most likely diagnosis is:

- A. Hypothyroidism
- B. A cerebellar tumor
- C. Multiple sclerosis
- D. A vitamin B12 deficiency
- E. Presenile dementia

38. Bleuler's symptoms of schizophrenia (the four A's) include all of the following except:

- A. Ambivalence
- B. Affective flattening
- C. Apathy
- D. Autism
- E. Loose associations

39. A 25-year-old patient complains of hearing voices speak-ing about him and

threatening him. The patient regards them as real and suffers from them. The most likely diagnosis is:

- A. Schizophrenia
- B. Alcoholic hallucinations
- C. Dementia
- D. Hysteria
- E. Debility

40. The most frequent cause of retarded development is:

- A. Psychological factors
- B. Hypothyroidism
- C. The fetal alcohol syndrome
- D. Constitutional factors
- E. Addison's diseases

1.C 2.D 3.A 4.D 5.A 6.C 7.C 8.B 9.B 10.B 11.E 12.A 13.B 14.A 15.C 16.D 17.E 18.D 19.D
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87.C 88.E 89.A 90.E 91.A 92.E 93.B 94.A 95.C 96.A 97.D 98.D 99.D 100.A

41. Personality disorders are almost always:

- A. Manifested during adolescence
- B. Worse in old age
- C. Free of genetic-biologic influences

D. Associated with good occupational functioning

E. Seen intermittently during adult life

42. A 23-year-old woman complains of becoming occasionally anxious these occurrences are associated with tachycardia and excessive sweating. The condition usually develops in the morning. Which of the following tests has to be performed urgently?

A. Thyroid function tests

B. Toxicological screening

C. Determination of the serum sodium level

D. Determination of the blood glucose level

E. Determination of the serum ammonia level

43. Typically, the iatrogenic psychic problems of heart disease patients are caused by:

A. Negligence of the patient's compliance

B. Excessive physical activity, as in overcompensation

C. Sustained rehabilitation and disability

D. Reaction formation

E. Suicidal ideation

44. Patients suffering from which of the following disorders are most likely to be concerned with their diseases?

A. Hypochondriasis

B. The different phobias

C. Conversion neurosis

D. Somatization syndrome (Briquet's syndrome)

E. Aggravation

45. Symptoms of mania include all of the following, except:

A. Rapid speech

B. Creativity

C. Expansiveness

D. Homicidal ideation

E. Paranoid delusions

46. A middle-aged waited was admitted to the psychiatric ward in a drunken state. While in the ward his behavior became bizarre and he gradually became disoriented to place and time. He sometimes acted as if he was taking orders or serving dishes. On examination he usu-ally misinterpreted the antecedents and circumstances of his admission. He was unable to recall his answers to simple questions after few minutes. He denies any hal-lucinations or delusions. The patients have had no prior psychiatric disorders. His relatives haven't found any-thing extraordinary about his behaviour. The most likely diagnosis is:

A. Alcohol withdrawal syndrome (delirium tremens)

B. Acute paranoid schizophrenia

C. Alcoholic hallucination

D. Alcohol amnesic syndrome (Korsakoff's syndrome)

E. Manic phase (of bipolar disorder)

47. The most severe symptom of a diffuse organic mental syndrome is:

A. A lose of remote memory

B. Emotional incontinence

C. Dementia

D. Confusion

E. Intent

48. The clinical course of affective disorders is characterized by:

A. Clinic relapsing episodes

B. A slow progression

C. A slow progression occasionally manifested by periods of acute relapses

D. Acute relapses

E. Dementia

49. The psychotherapy of schizophrenic patients includes all of the following, except:

A. A warm, open relationship aiming to promote the patient's self esteem and education the patient about his/her disease

B. A supportive psychotherapy that focuses on resolving the problems of the patient's in his/her everyday life

C. Setting limits on the patient's behaviour, including the consequences of his/her violent actions.

D. Encouraging socialisation in order to build more extensive social relationships

E. Encouraging the patients to express his/her anger hostility as much as possible in the therapeutic relationship in order to reduce the intensity of these emotions outside the consulting office

50. Neurotransmitters believed to have a role in the patho-physiology of schizophrenia include all of the following, except:

A. Dopamine

B. Prostaglandin EL

C. Ascorbic acid

D. Norepinephrine

E. Serotonin

51. According to the DSM-III-R, the principle diagnostic difference between schizophrenia and a schizophreniform disorder is:

A. The time of onset of the psychotic symptoms

B. The duration of the disorder

C. The nature and variability of the psychotic symptoms

D. The presence or absence of the precipitating stressor

E. The premorbid personality

52. Which of the following symptoms of schizophrenia is most likely to be acutely responsive to treatment with medication and other inpatient treatment methods?

A. Auditory hallucination

B. Apathy

C. Poverty of thought content

D. Anhedonia

E. Withdrawal from social relationships

53. A 25-year-old female was brought to the hospital ward by ambulance upon examination she was febrile, confused, and a bizarre posture was observed. The results of blood and cerebrospinal fluid tests were normal; the patient was diagnosed as schizophrenic and is currently on chlorpromazine (Hibernal). Which is the most likely cause of her current symptoms?

A. An acute dystonic reaction

B. Akathisia

C. Tardive dyskinesia

- D. A malignant neuroleptic syndrome
- E. An allergic reaction to chlorpromazine

54. Statements which are characteristic for the various psychotherapeutic methods include all of the following, except:

- A. These methods aim to relieve anxiety and to improve social integration
- B. The theories concerning the application of the methods are specific for each of the psychiatric disorders
- C. These focus on childhood events and experiences
- D. Impulsiveness and resistance develop between the physician and the patient.
- E. These methods all have a therapeutic aim and elicit a learning process in the patient.

55. Which of the following tests is important for the differential diagnosis of organic and psychogenic impotence?

- A. Monitoring of the serum gonadotropin levels over 24 hours
- B. Night-time erections
- C. Projective tests
- D. Monitoring of any alternations in the testosterone levels

56. Negative symptoms of schizophrenia include all of the following, except

- A. Flat affect
- B. Auditory hallucinations
- C. Lack of motivation and initiative
- D. Anhedonia
- E. Poverty of thought content

57. A person who laughs one minute and cries the next without any clear stimulus is

said to have:

- A. A flat affect
- B. Euphoria
- C. A labile mood
- D. A labile affect
- E. Parathymia

58. Hallucinations are symptoms of:

- A. Mood disorders
- B. Mental disorders
- C. Thought disorders abnormal perception
- D. Disorders of concentration
- E. Single choice questions

59. Delusion is characterized by all of the following state-ments, except:

- A. Delusion is a belief that does not correspond to the experiences of the individual
- B. Delusions are common symptoms of schizophrenia
- C. Delusions are possible symptoms of affective disorders
- D. Delusions may be symptoms of an organic mental disorder
- E. Delusions may be eliminated by logical explanations

60. Which of the following is the most common cause of the cessation of sexual activity in married couples?

- A. Aging
- B. Marital discord

C. Physical illness

D. Cultural prohibition

E. Depression

1.C 2.D 3.A 4.D 5.A 6.C 7.C 8.B 9.B 10.B 11.E 12.A 13.B 14.A 15.C 16.D 17.E 18.D 19.D
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87.C 88.E 89.A 90.E 91.A 92.E 93.B 94.A 95.C 96.A 97.D 98.D 99.D 100.A

61. Someone who exhibits pathological jealousy, is suspicious about being tricked, and is concerned about hidden meanings is demonstrating signs of:

A. A schizoid personality

B. A paranoid personality

C. An antisocial personality

D. A narcissistic personality

E. None of the above

62. A shop assistant who steals goods and explains it as a compensation for his low salary is using which of the following defense mechanisms?

A. Intellectualization

B. Overcompensation

C. Rationalization

D. Substitution

E. Destruction

63. A young man develops an irrepressible urge to wash his hair several times a day which he explains as a means of protection against infection from others. He assures everyone that he feels well but he becomes extremely anxious if he cannot wash his hair. The most probable diagnosis is:

- A. Automatism
- B. Compulsive personality disorder
- C. Hypochondriacs
- D. Compulsive thoughts
- E. Phobia

64. Unconscious emotions generated by a physician during psychotherapy are best described by the term:

- A. Projection
- B. Impulse transmission
- C. Acting out
- D. Identification
- E. Introjections

65. A 25-year-old women who has extramarital affairs fears that her physician disapproves strongly of her behavior. The represents which of the following defense mecha-nisms?

- A. Denial
- B. Repression
- C. Reaction formation
- D. Isolation
- E. Projection

66. Which of the conditions listed below is most commonly associated with a violent behavior?

- A. A XYY chromosome anomaly
- B. A low level of intelligence
- C. An XO chromosome anomaly
- D. Epilepsy
- E. None of the above

67. A 15-year-old girl presents to the emergency room with severe weight loss. On examination she is cachectic, bradycardic, and hypotensive. The first course of action should be to:

- A. Determine the family dynamics
- B. Administer a high-protein and carbohydrate diet
- C. Draw blood for a serum electrolyte determination and then start intravenous feeding
- D. Arrange to have the patient admitted to the psychiatric ward
- E. Prepare for electroconvulsive therapy

68. Based on the results of psychiatric epidemiological studies, the most common psychiatric disorder among the general population is:

- A. Depression
- B. Schizophrenia
- C. Alcoholism
- D. Phobias
- E. Dementia

69. The ratio of psychiatric disturbances among patients who seek evaluation for

somatic diseases is:

- A. 10 percent
- B. 20 percent
- C. 33 percent
- D. 50 percent
- E. 90 percent

70. A 21-year-old woman who presents with depressive symptoms in December reports a similar episode during late autumn. The most likely mechanism of her depression involves:

- A. Noradrenergic hyperactivity
- B. Diminished serotonergic activity
- C. Alterations in the diurnal rhythm
- D. The deterioration of family relationships
- E. None of the above

71. A 40-year-old woman developed delusions during the past year that her husband was having an affair with her sister. She denies any hallucinations. Her emotions and her behavior correspond to the contents of the delusion. The most likely diagnosis is:

- A. Acute paranoid disorder
- B. Folie à deux (induced mental disorder)
- C. Paranoid schizophrenia
- D. Schizophrenia form disorder with a paranoid character

72. Statements characteristic for the epidemiology of mood disorders include all of the following, except.

- A. The lifelong risk for bipolar disorders is 1 percent

B. Depression may be manifested at any age

C. Dysthymia (neurotic depression) is commonly associated with organic and psychiatric disorders

D. Depression is more frequently diagnosed in men than in women the risk for a major mood disorder is higher among family members of a diseased individual than among the general population

73. A 20-year-old man is admitted to the hospital. He developed hallucinations and delusions of persecution three weeks ago. He is currently agitated. Possible diagnosis, based on the DSM-III-R, includes all of the following, except:

A. Brief reactive psychosis

B. Organic mental disorder

C. Borderline personality disorder

D. Schizophrenia

E. Schizophreniform disorder

74. The most important reason for monitoring the serum lithium level is:

A. To check on the patient's compliance

B. Because the toxic dose is very close to the therapeutic level

C. Because lithium is rapidly excreted from the body

D. Because lithium is a salt, rather than a drug

E. None of the above

75. Which of the following types of delusions is least likely to be present in an affective disorder?

A. Delusions of grandeur

B. Nihilistic delusions

- C. Delusions of poverty
- D. Hypochondriac delusions
- E. Thought withdrawal

76. The psychosocial rehabilitation of schizophrenic patients includes all of the following, except

- A. The improvement of communicative skills
- B. The improvement of everyday activities such as cleaning the house, preparing a meal, and management of financial duties
- C. Education in a new job in order to re-enter the workforce
- D. Encouragement to somehow contribute to controlling the affliction \
- E. A new and refreshing activity in order to promote well-being and health in the patients

77. Dementia is characterized by all of the following symptoms, except:

- A. A gradual decline in cognitive functions (memory, orientation, abstraction)
- B. Aphasia, alexia, or agraphia
- C. Alterations in behavior (egocentrism, apathy)
- D. A sudden decline in intellectual functions after a cerebrovascular accident
- E. A decline in mental functions associated with focal neurological symptoms.

78. Catatonic motor disorder is best defined as:

- A. A marked hyperactivity which is commonly violent and aimless
- B. A generalised muscle rigidity
- C. Stupor or mutism, without an organic cause
- D. A severe psychomotor disturbance which cannot be attributed to an organic cause

79. Drugs contraindicated in acute alcohol intoxication include all of the following, except:

- A. Diazepam (Seduxen)
- B. Phenobarbital (Sevonal)
- C. Disulfiram (Anticol, Antaethyl)
- D. Glunethimide (Noxyron)
- E. Haloperidol

80. Common complications of alcoholism include:

- A. Cerebral damage
- B. Gastritis
- C. Suicide
- D. Polyneuropathy
- E. All of the above

1.C 2.D 3.A 4.D 5.A 6.C 7.C 8.B 9.B 10.B 11.E 12.A 13.B 14.A 15.C 16.D 17.E 18.D 19.D
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87.C 88.E 89.A 90.E 91.A 92.E 93.B 94.A 95.C 96.A 97.D 98.D 99.D 100.A

81. Alzheimer's disease can be diagnosed by which of the following methods?

- A. Computerized tomography
- B. EEG
- C. Laboratory tests

- D. Lumbar puncture
- E. Clinical judgement

82. Organic mental syndromes include all of the following, except.

- A. Delirium
- B. Dementia amnestic syndromes
- C. Paranoid disorders
- D. Organic hallucinations

83. Diseases that lead to mental retardation and require genetitt counseling include all of the following, except:

- A. Tay-Sachs disease
- B. Galactosemia
- C. Phenylketonuria
- D. Down's syndrome
- E. Cerebral Paralysis (Little's desease)

84. The aim of methadone maintenance during the treat-ment of addiction is:

- A. To detoxify the patient and then gradually withdraw the opiates
- B. To treat the underlying psychological causes
- C. To satisfy the "drug-hunger" of the addict in order to make it possible for him to deal with other aspects of his life
- D. To use methadone as an opiate antagonists every questions incomplete statement has only one answer in the following combinations:
- E. If the answers 1, 2 and 3 are true
- F. If the answers 1 and 3 are true

G. If the answers 2 and 4 are true

H. If all the four answers are true

85. Symptoms of a perception disorder include:

A. Hallucination

B. Depersonalization

C. Illusion

D. Preservation

86. Psychological defense mechanisms are functions of the ego and:

A. Protect the self from anxiety

B. Are mobilized unconsciously

C. May be maladaptive

D. Usually require psychotherapy

87. Sleep patterns characteristic for major (endogenous) depression include:

A. Frequent nightmares followed by awakening

B. Waking up too early

C. A marked prolongation of the 3rd and 4th phases (delta phase) of sleep

D. A markedly decreased ratio of the REM phases

88. Mourning is characterized by:

A. Ideas of death

B. Weight loss

C. Insomnia

D. A duration of 2 to 6 months

89. Functions of the ego include:

- A. The regulation of intrapsychic conflicts
- B. The regulation of instincts
- C. Reality testing
- D. Developing relationships with objects

90. A complete psychic evolution should include inquiries about any:

- A. Suicidal gestures
- B. Homicidal ideas
- C. Delusional thinking
- D. Hallucinations
- E. All of the above

91. Which of the following has an etiologic role in anorexia nervosa?

- A. Cultural influences
- B. Hypothalamic-pituitary abnormalities
- C. Parental over-regulation
- D. Schizophrenia

92. A 35-year-old man complains of hearing voices at night, telling him that he is a bad and guilty person. Having no other available information, which of the following conditions would you consider?

- A. Schizophreniform
- B. Personality disorder
- C. Hypnagogic hallucinations
- D. Organic hallucination

E. Depression psychosis

93. An agitated 24-year-old man is brought to the emergency room hand-cuffed by the police. He was found wander-ing along the main street in a confuse state. The patient does not speak and appears to be anxious. The first steps in managing this patient include:

- A. Taking a history from the police
- B. Having the policeman remove the handcuffs
- C. Trying to talk to the patient about his impulse control
- D. Administering 5 mg of haloperidol intramuscularly

94. Characteristics of a conversion (histrionic) disorder include:

- A. Mimicking an organic disease
- B. Expression of a psychological conflict
- C. Seeking other people's attention in order to gain their support
- D. The patient's ability to control his/her symptoms voluntarily

95. A 24-year-old man, wearing a white robe, claims to be a prophet. He wanders in the streets preaching about the end of the world. His speech is circumstantial, and he is very anxious. Select the most likely diagnosis:

- A. Antisocial personality disorder
- B. Schizophrenia
- C. Paranoid personality disorder
- D. Schizophreniform disorder

96. Patients one of the key combination

- A. No sense of humor
- B. An awareness of power and rank

- C. They are proud about being objective
- D. Excessive vanity and concern about their appearance

97. Factors indicative of a better prognosis in schizophrenia and Schizophreniform disorder include:

- A. A low level of distress at the time of the symptoms
- B. The lack of the precipitating stressor before the onset
- C. A schizoid premorbid personality
- D. The first psychotic episode occurs after the age of 35

98. Correct statements about an antisocial personality disorder include:

- A. It is identical to criminal behaviour
- B. It is the male counterpart of a histrionic disorder
- C. It can be controlled with antiandrogens
- D. The EEG reveals cortical immaturity in this condition

99. Which of the following statements concerning suicide are correct?

- A. The ratio of suicides with a fatal outcome decreases with age
- B. Women die from suicide more often than men
- C. A suicide can reliably be predicted by certain clinical features
- D. A conversation with the patient about his / her ideals of suicide may protect the patient from being a potential victim

100. Psychotropic drugs that can cause addiction include:

- A. Benzodiazepines
- B. Amphetamines
- C. Meprobamate

Answers

1.C 2.D 3.A 4.D 5.A 6.C 7.C 8.B 9.B 10.B 11.E 12.A 13.B 14.A 15.C 16.D 17.E 18.D 19.D
20.B 21.D 22.A 23.C 24.D 25.D 26.C 27.C 28.A 29.C 30.D 31.D 32.E 33.B 34.B 35.D 36.E
37.D 38.C 39.B 40.A 41.A 42.D 43.C 44.A 45.B 46.D 47.NO 48.A 49.E 50.C 51.B 52.A
53.D 54.C 55.C 56.B 57.D 58.D 59.E 60.B 61.B 62.C 63.B 64.B 65.E 66.B 67.C 68.C 69.C
70.C 71.C 72.D 73.D 74.D 75.E 76.C 77.B 78.C 79.E 80.E 81.E 82.D 83.E 84.C 85.A 86.A
87.C 88.E 89.A 90.E 91.A 92.E 93.B 94.A 95.C 96.A 97.D 98.D 99.D 100.A

101. A 62-year-old man seeks evaluation for weakness, a loss of initiative, a loss of weight, and abdominal discomfort. He appears to be depressed. Possible diagnoses can include:

- A. Dementia
- B. Pain killer abuse
- C. Pancreatic carcinoma
- D. Hyperthyroidism

102. A 36-year-old man is brought to the emergency room by the police. He has been caught speeding on the high-way at night without his headlights on. On examination he is agitated and belligerent. He warned the physician and the policemen that he has "Friends" in high places whom he is currently in contact with and that the police-man who has incarcerated him will be punished. Diag-nostic possibilities can include:

- A. Hyperthyroidism
- B. Arsenic intoxication
- C. Arsenic intoxication
- D. Amphetamine overdose

E. Addison's disease

103. Cocaine addiction may be manifested as:

- A. A sexual dysfunction in male «,
- B. An increased need for sleep
- C. Severe anxiety and paranoid delusions
- D. Hallucinations

104. A 67-year-old man is brought to the emergency room by the police for exposing himself in the nude to school-children. There is no history of similar events in the past. Possible cause of this behavior includes:

- A. A petit mal seizure
- B. Alzheimer's disease
- C. Digitalis intoxication
- D. An intracranial tumor

105. The usual causes of an inhibited female orgasm include:

- A. A lack of information
- B. Major psychopathology
- C. Trauma from the first relationship
- D. The sedative side-effects of medications

106. Which of the following agents have an important role in the therapy of alcohol withdrawal delirium?

- A. Meprobamate and benzodiazepines
- B. Vitamin B complex
- C. Chlormethiazole (Heminevrin)

D. Potassium and magnesium ions

E. Benzodiazepine

107. Patients suffering from a personality disorder:

A. May occasionally lost touch with reality

B. Are frequently irritating tolerate stress poorly

C. Elicit strong negative reaction to physicians

108. Characteristic features of a borderline personality disorder include:

A. Warm interpersonal relationship

B. The patient exhibits signs of a strong desire for attention without any tendencies for reciprocation

C. The patients exhibits signs of well developed defense mechanisms

D. The patient shows no empathy in his/her relationship; idealizes or deprecates his/her partner.

109. Visual hallucinations are characteristic for which of the following conditions?

A. Acute alcohol abuse

B. Korsakoff's syndrome

C. Alcohol hallucinations

D. Delirium tremens

110. Examples of delusional thinking include:

A. A strong belief that one's internal organs are "rotting" due to disease

B. Seeing people who are dead or inanimate

C. A strong belief that co-workers are conspiring a plot against the patient

D. A strong impulse to tell obscenities in church

111. Which of the following adult type traits originate from the “anal period” of the psychosexual development?

- A. Stubbornness
- B. A strong urge for tidiness
- C. Stinginess
- D. A low tolerance to stress

112. If someone is said to be disoriented, they are most likely not to know:

- A. The date
- B. Where they are
- C. The time
- D. Some famous people

113. Which of the following types of hallucinations are re-garded as symptoms of a severe psychiatric disorder?

- A. Auditory
- B. Hypnagogic
- C. Visual
- D. Pseudo hallucination

114. Dyspareunia is:

- A. The lack of vaginal lubrication
- B. The constriction of vaginal muscles
- C. Equally frequent among men and women
- D. Pain during intercourse

115. Which of the following statements concerning the risk of fatal suicide are correct?

- A. Women are at a higher risk than men
- B. The risk for the patients above the age of 65 is higher than for those between 25 and 35-years-old
- C. The incidence of suicide is higher during times of war
- D. Alcohol addicts are at a higher risk for suicide

116. Possible cause of organic anxiety disorders include:

- A. The withdrawal of sedatives or sleeping pills
- B. Pheochromocytoma
- C. An excessive use of caffeine
- D. Hyperparathyroidism

117. Most patients with an antisocial personality disorder:

- A. Lack a guilty conscience
- B. Change jobs frequently
- C. Have sexual partnerships devoid of emotions
- D. Have been brought up in unfavorable family conditions

118. Patients with a type – A personality usually exhibit which of the following characteristics?

- A. Impatience
- B. Hostility
- C. Driven quality
- D. A high incidence of coronary heart disease
- E. All of the above

119. Correct statements about an histrionic conversion disorder include which of the following?

- A. This disorder has primary and secondary advantages
- B. A sudden and dramatic onset of symptoms
- C. The patients is unable to control the symptoms voluntarily
- D. Paralysis and paresthesias do not respect the anatomical borders of innervations
- E. All of the above

120. Some undesirable complications of a somatization dis-order (chronic neurosis) include:

- A. The excessive use of drug
- B. Secondary atrogenic complication of invasive diagnostic intervention
- C. An excessive dependence on health care
- D. A frequent change of physicians
- E. All of the above

101.A 102.B 103.E 104.C 105.A 106.E 107.C 108.C 109.D 110.A 111.A 112.A 113.B
114.B 115.C 116.A 117.A 118.D 119.E 120.E 121.A 122.A 123.A 124.B 125.A 126.C
127.B 128.A 129.A 130.A 131.E 132.A 133.C 134.D 135.A 136.A 137.D 138.D 139.B
140.A 141.D 142.A 143.C 144.A 145.D 146.A 147.D 148.C 149.D 150.C 151.A 152.C
153.D 154.D 155.E 156.D 157.D,B 158.A 159.C 160.D 161.B 162.B 163.D 164.B 165.B
166.D 167.A 168.A 169.B 170.C 171.B 172.B 173.D 174.D 175.B 176.B 177.D 178.A
179.C 180.C 181.D 182.D 183.D 184.A 185.D 186.E 187.A 188.C 189.D 190.E 191.C
192.C 193.D 194.B 195.E 196.D 197.D 198.E 199.D 200.C

121. How does malingering differ from somatization disorders?

- A. It occurs more rarely
- B. This disease is more susceptible to therapy

- C. Malingering is not a psychiatric disorder
- D. It may involve the abnormality of several organs

122. Symptoms of a presuicidal syndrome include:

- A. Flatness of affect
- B. Aggression toward one's self
- C. Suicidal ideation fright of other people

123. A 25-year-old student presents to the emergency room accompanied by his schoolmates. He has occasionally been noted to become excited and euphoric and he is said to have neglected his studies for the last weeks. He can hardly concentrate when holding a conversation. Upon examination he is alert, oriented, his speech is in-tact, and his thoughts are coherent. During the inter-view he insists that he is being observed and followed by his neighbors stating that they are plotting against him and are jealous of his good academic results. Which of the following conditions have to be considered?

- A. An acute manic episode
- B. Multiple sclerosis
- C. Acute paranoid schizophrenia
- D. Withdrawal syndrome

124. Researchers believe that anorexia nervosa is symptom-atic expression of:

- A. Psychosexual conflicts
- B. Psychological conflicts with the mother
- C. Impaired self-regulation
- D. Psychological conflicts with the father

125. An effective therapy of a summarization disorder in-cludes:

- A. The continuous decrease of unnecessary medications

- B. Regular therapeutic settings
- C. Staying with the same physician
- D. The administration of anxiolytic

126. Paraphilias (sexual perversities) are believed to be associated with:

- A. An excessive sexual desire
- B. Learned processes
- C. An antisocial personality among the family members
- D. Early developmental abnormalities in the family

127. Which of the following statements concerning anorexia nervosa are correct?

- A. It is usually manifested by the age of 13
- B. The onset is delayed in boys when compared to girls
- C. It's usually preceded by a diet
- D. A suicide attempt is common as an initial manifestation

128. Which of the following statements about the empirical risk for schizophrenia are correct?

- A. If one of the parents is a schizophrenic, the risk for the disease among the children is 10 to 15 percent
- B. The risk for schizophrenia, the risk among the siblings of a schizophrenic is 10 to 15 percent
- C. If both parents are schizophrenic, the risk among the children is above 40 percent
- D. Concordance of monozygotic twins is above 90 percent

129. Symptoms commonly present in all forms of schizophrenia and Schizophreniform disorders include:

- A. Ambivalence and autism

- B. Disturbed affect
- C. Disturbed thought process
- D. Amnesia and confabulation

130. Based on the results of recent research, neurotransmitters possibly involved in the pathomechanism of schizophrenia include:

- A. Dopamine
- B. Neuro peptides
- C. Gamma-amino butyric acid (GABA)
- D. Optical isomers of dopamine

131. The anticholinergic side-effects of tricyclic antidepressants that are frequently observed, especially during the therapy of elderly patients include:

- A. Tachycardia
- B. Constipation
- C. The retention of urine
- D. Blurred vision

132. 53-year-old woman underwent an operation for a fracture of the neck of the femur. On the second postoperative day she became agitated and uncooperative. On the third day she was noted to have hallucinations and addressed the nurses by the names of her own children. Possible causes of her symptoms include:

- A. Alcohol withdrawal
- B. Intravenously administered penicillin
- C. Sepsis
- D. General anesthesia

133. A patient with a major depression is likely to exhibit which of the following symptoms?

- A. Negligence
- B. Agitation and anxiety
- C. Defensiveness
- D. Sadness

134. Tricyclic antidepressants and MAO inhibitors are effective for the treatment of:

- A. Bulimia
- B. Compulsive personality disorder
- C. Anancastic disorder
- D. Atypical depression

135. The most characteristic symptoms of delirium tremens include:

- A. Tremor
- B. Sweating
- C. Blackouts
- D. Hallucinations

136. Dysthymia is characterized by:

- A. Chronic fatigue
- B. Social withdrawal
- C. Insomnia
- D. Hypersomnia

137. The DST (Dexamethasone suppression test) has limited usefulness in the diagnosis of depression because:

- A. The patient is noncompliant
- B. The plasma control levels are subject to diurnal variation
- C. The test is too expensive for routine clinical use
- D. Many medical conditions give false positive results

138. A 22-year artist, a few days after the death of his father from suicide, become euphoric and highly concerned about how he looks. He is hyperactive, restless, and has no insight into his considered:

- A. Personality disorder
- B. Macromedia
- C. A primitive reaction
- D. Manic or hypomanic syndrome

139. Common complications of alcoholism include:

- A. Cerebral damage
- B. Gastritis
- C. Hypertension
- D. Suicide

140. Drugs that can cause dependence include:

- A. Benzodiazepines
- B. Antihistamines
- C. Barbiturates
- D. Tricyclic and tetracyclic antidepressants

101.A 102.B 103.E 104.C 105.A 106.E 107.C 108.C 109.D 110.A 111.A 112.A 113.B
114.B 115.C 116.A 117.A 118.D 119.E 120.E 121.A 122.A 123.A 124.B 125.A 126.C

127.B 128.A 129.A 130.A 131.E 132.A 133.C 134.D 135.A 136.A 137.D 138.D 139.B
140.A 141.D 142.A 143.C 144.A 145.D 146.A 147.D 148.C 149.D 150.C 151.A 152.C
153.D 154.D 155.E 156.D 157.D,B,B 158.A 159.C 160.D 161.B 162.B 163.D 164.B 165.B
166.D 167.A 168.A 169.B 170.C 171.B 172.B 173.D 174.D 175.B 176.B 177.D 178.A
179.C 180.C 181.D 182.D 183.D 184.A 185.D 186.E 187.A 188.C 189.D 190.E 191.C
192.C 193.D 194.B 195.E 196.D 197.D 198.E 199.D 200.C

141. Which of the sexual disorders listed below are characterized by the statement that psychologically immature young males are usually aggressive to their "victims" in order to obtain sexual gratification?

A. Transsexualism

B. Homosexuality

C. Erection disorder

D. Exhibitionism

142. The most typical example of a simple phobia is a fear of:

A. Heights

B. Public transportation

C. Zin crowds

D. Social situation

143. 22-year-old patient, during an interview, recalled that she had seen two doves sitting on the window sill, which she recognized as a future sign of an important event that would take place in her life in two weeks time. This symptom should be regarded as wan:

A. Illusion

B. Hallucination

C. Delusion

D. Neologism

E. Incoherence

144. The most important process in the development of the ego is:

A. Identification

B. Projection

C. Reaction formation

D. Regression

E. Repression

145. Emotional reactions towards the physician, which reflect recent experiences and relationships outside of the therapeutic setting, may be defined as:

A. Acting out

B. Fixation

C. Free associations

D. Impulse transmission

E. Anxiety

146. A middle-aged woman is brought to the intensive care unit complaining of thoracic pain. Despite the appropriate diagnosis and therapy the woman died soon after. The husband begins to threaten the physician that he will sue him. This behavior is an example of which of the following defense mechanisms?

A. Shifting

B. Dissociation

C. Overcompensation

D. Reaction formation

E. Regression

147. Which of the following abnormalities is most characteristic for psychosis?

A. An abnormality of the thought process

B. Schizophrenia

C. Manic-depressive psychosis

D. Reality testing is impaired

E. Impulsiveness and illogical behavior

148. A characteristic defense mechanism involved in para-noid symptom formation is:

A. Reality denial

B. Conversion

C. Projection

D. Isolation

E. Acting out

149. An elderly, mildly confused man is brought to the emergency room by his son. When asked about his problems the patient mentions "abnormalities of function". His answer to the next question is the same. This is an example of:

A. Coprolalia

B. Coprophobia

C. Fixation

D. Perseveration

E. Echolalia

150. A 29-year-old woman is brought to the emergency room by her husband. The woman complains of a sharp, in-tensive pain on the left side of her chest, accompanied by shortness of breath and palpitations. She fears that she had a heart attack. The results of her physical ex-amination and blood tests are normal. The pain ceased after

a few hours of observation and she was released. Similar situations have occurred previously, although an organic cause has never been demonstrated. What is the most likely diagnosis?

- A. Histrionic conversion reaction
- B. Malingering
- C. Anancastic neurosis (panic disorder)
- D. Hypochondriasis
- E. Compulsive personality disorder

During these episodes of discomfort the patient talks about herself as if being an independent observer.

This is an example of:

- 1. Derealization
- 2. Depersonalization
- 3. Illusions
- 4. Hallucinations.
- 5. Alienation

151. A 39-year-old salesman presents at the emergency room complaining of a severe headache localized to one side of his head, the physician should inquire about all of the following, except:

- A. Hallucinations and delusions
- B. Any trouble with the authorities
- C. Any history of a loss of consciousness
- D. The need for the prescription of a pain killer

E. Alcohol abuse

152. Symptoms which are necessary in order to diagnose a panic disorder include all of the following, except:

- A. The occurrence of at least three episodes in a 3 week period
- B. The continuous presence of the symptoms for at least one month
- C. The identification of an environmental stressor
- D. An onset in young adulthood
- E. The occurrence of spontaneous anxiety attacks

153. Characteristics of conversion disorder include all of the following, except

- A. Their incidence in children is equal in both sexes
- B. The symptoms are involuntary
- C. Their incidence is decreasing
- D. The symptoms correspond to the pathophysiology of the disorders
- E. They are more frequently diagnosed in women by mid adolescence

154. The differential diagnosis of anorexia nervosa includes all of the following, except

- A. Cancer
- B. Depression
- C. Addison's disease
- D. Cushing's disease
- E. Ulcerative colitis

155. Which of the following food constituents has to be avoided when prescribing a diet for patients treated with monoamino-oxidase inhibitors?

- A. Cholesterol

- B. Choline
- C. Lactose
- D. Tryptophan
- E. Tyramine

156. Which of the following is a basic technique of psycho-analysis?

- A. Concentration
- B. The resolving of inhibitions
- C. Empathy
- D. Free associations
- E. Hypnosis

157. A 39-year-old woman was treated for many years for pelvic pain. She underwent numerous examinations, even a laparotomy, all of which failed to demonstrate an organic cause. The patient denies feelings of depression and other psychiatric problems but expresses anger at her physicians who are unable to cure her. What is the most likely diagnosis?

- A. Depressive disorder
- B. Somatization disorder
- C. Malingering
- D. Psychogenic pain syndrome
- E. Conversion disorder

The differential diagnosis of her condition includes all of the following, except:

- A. Malingering
- B. Schizophrenia

- C. Mood disorder (bipolar)
- D. Organic mental syndrome
- E. Conversion disorder

Although the exact mechanism of the disorder is not known, there are some theories concerning the etiology.

These include all of the following, except:

- A. The pain offer a possibility for the patient to avoid an undesirable situation
- B. The patient did not learn to verbalize her emotions during childhood
- C. The patient experienced a disease associated with severe pain
- D. The patient attempts to mislead the physician in order to achieve a better quality of care
- E. The pain may be regarded as a stress reaction of the central nervous system

158. Statistically recognized risk factors of schizophrenia in-clude all of the following, except

- A. A defective self-development (defective self-object differentiation and an increased susceptibility to narcissistic injuries)
- B. Cultural, economical, and psychosocial stressors present in the environment
- C. Birth in early spring
- D. A schizophrenic amongst the patient's relatives
- E. A history of a herpes simplex infection or viral encephalitis

159. Which of the following is an unlikely precipitating cause of a psychotic episode later diagnosed as schizophre-nia?

- A. Alcohol abuse

- B. A severe psychosocial stressor
- C. A severe depressive episode
- D. A traumatic event in the patient's life
- E. The use of a psychostimulation drug

160. The most frequent type of schizophrenia among hospital admissions is:

- A. The autistic type
- B. The catatonic type
- C. The hebephrenic type
- D. The paranoid type
- E. The undifferentiated type

101.A 102.B 103.E 104.C 105.A 106.E 107.C 108.C 109.D 110.A 111.A 112.A 113.B
 114.B 115.C 116.A 117.A 118.D 119.E 120.E 121.A 122.A 123.A 124.B 125.A 126.C
 127.B 128.A 129.A 130.A 131.E 132.A 133.C 134.D 135.A 136.A 137.D 138.D 139.B
 140.A 141.D 142.A 143.C 144.A 145.D 146.A 147.D 148.C 149.D 150.C 151.A 152.C
 153.D 154.D 155.E 156.D 157.D,B,B 158.A 159.C 160.D 161.B 162.B 163.D 164.B 165.B
 166.D 167.A 168.A 169.B 170.C 171.B 172.B 173.D 174.D 175.B 176.B 177.D 178.A
 179.C 180.C 181.D 182.D 183.D 184.A 185.D 186.E 187.A 188.C 189.D 190.E 191.C
 192.C 193.D 194.B 195.E 196.D 197.D 198.E 199.D 200.C

161. Statements characteristic for bipolar mood disorder include all of the following, except.

- A. Certain patient exhibit a congenital membrane defect affecting the lithium-transport in red blood cells
- B. Each manic episode is followed by a depressive phase
- C. The sex ratio of bipolar disorders is roughly equal
- D. Bipolar disorders usually have an onset before the age of 30

E. The levels of nor-epinephrine and its metabolites are frequently found to be elevated in manic patients

162. The leading symptom of affective disorders is a disturbance of:

A. Concentration and cognitive functions

B. Mood

C. Association and the thought process

D. Initiatives and psychomotility

E. Perception

163. The period between falling asleep and the occurrence to the first REM phase (REM latency) is typically shorter in:

A. Dementia

B. Delirium tremens

C. Schizophrenia

D. Depression

E. Alcoholism

164. Which of the following focal organic mental disorders is characterized by a loss initiative?

A. Temporal lobe syndrome

B. Injury of the frontal convexity

C. Injury of the frontal base

D. Korsakoff's syndrome

E. Diencephalic syndrome

165. A slow wave activity in the EEG is usually detected in :

- A. Dementia
- B. Delirium
- C. Schizophrenia
- D. Alcohol withdrawal
- E. HIV infection

166. The risk for developing schizophrenia in a sister of a schizophrenic male child is:

- A. 70 percent
- B. 40 percent
- C. 25 percent
- D. 12 percent
- E. 1 percent

167. A 26-year-old man presents with a history of three discrete episodes of elevated mood and hyperactivity. He has got lost several times during these episodes. Once he had experienced a loss of vision in the right visual field, which was associated with diplopia for a short period. The most likely diagnosis is:

- A. Multiple sclerosis
- B. Vitamin B12 deficiency
- C. Herpes encephalitis
- D. Systemic lupus erythematosus
- E. Progressive paralysis

168. A 15-year-old boy with history of recurrent tonsillitis is brought to the physician complaining of irritability, difficulties in school, and frequent emotional outbursts. The boy frequently grimaces. The appropriate therapy includes the administration of:

- A. Salicylates

B. Lithium carbonate

C. Penicillin

D. Levodopa

E. Haloperidol

169. Which of the following symptoms is indicative of barbiturate intoxication, rather than drug withdrawal?

A. Confusion

B. Nystagmus

C. Postural hypotension

D. Disorientation

E. Agitation

170. 444 rugs causing depression as a side-effect, during regular use, include all of the following, except:

A. Alpha-methyldopa

B. Contraceptives

C. Lithium carbonate

D. Propranolol

E. Reserpine

171. A 60-year-old man is brought to the hospital by his relatives. He had come recently to visit them from out of town. He is unable to take care of basic needs. His past medical history is uneventful although his relatives have noticed that after his wife had died he became withdrawn and less social than he had previously been. Which of the following is the least likely diagnosis?

A. Delirium

- B. Schizophrenia
- C. Dementia
- D. Depressive psychosis
- E. Mixed type organic mental syndrome

172. A 43-year-old woman has been found unconscious in her garage. The car was running and the door to the garage was closed. Upon examination she is confused. The most likely cause of her confusion is:

- A. Lead poisoning
- B. Hypoxia
- C. Hypoglycemia
- D. Gasoline inhalation
- E. None of the above

173. A deficiency of which of the following vitamins is an important factor in the etiology of Korsakoff's syndrome?

- A. Vitamin B6
- B. Folic acid
- C. Nicotinamide
- D. Vitamin B1
- E. Vitamin B12

174. An 8-year-old girl, in a febrile state, assumes that the curtain in her bedroom window is moving and an animal is trying to come into the room through the window. This symptom is a typical example of:

- A. Delusion
- B. Fantasy

C. Hallucination

D. Illusion

E. Phobia

175. A physician asks an elderly male patient what he had for supper the previous day. The patient asserts that he had his Christmas dinner together with his wife and children. This is late June now and patient's wife died three years ago. Nobody visited the patient the previous day. The patient's reply is characteristic of:

A. Circumstantiality

B. Confabulation

C. Deja vu

D. A Flight of ideas

E. An illusion

176. A 30-year-old man complains of impotence. He thinks that strangers on the street are laughing at him. He is sure that they know about his problem and that they are probably responsible for the development of his condition. This complaint should not be regarded as a sign of:

A. Concreteness of thought

B. Delusions of reference

C. Imaginativeness

D. Decline of affect

E. Somatic delusions

177. Which of the following is a best example for a double bind?

A. Mary's parents want her to wait to get married until she finished high school

B. John's parents encourage him to go to high school but want him to decide about his

own life.

C. Joe's parents encourage him to go to high school but they dissuade his sister from the same thing

D. Frank's parents encourage him to apply to a high school but frequently remind him of the financial sacrifices his education requires from the family

E. Sophie's parents encourage her to apply to a high school but recommend to her to work for a few years first in order to earn the costs of her education

178. The psychic structure which regulates the conflicts between unconscious drives and the reality is the:

A. Ego

B. Ego-ideal

C. Id

D. Preconscious

E. Superego

179. Homosexuality is characterized by all of the following statements, except

A. Approximately 4 percent of men in the United States are exclusively homosexual

B. Over one third of males have had an orgasm with a partner of the same sex at least once

C. There is a higher incidence of some mental illnesses, such as mood disorders, in homosexuals

D. There is a higher incidence of some somatic diseases, such as hepatitis, in homosexuals

E. Attempts to change homosexuals to heterosexual preference are usually unsuccessful

180. The examination of the victim of a violent suicide may reveal:

- A. A low level of epinephrine in the cerebrospinal fluid
- B. A low level of 5-hydroxy-indoleacetic acid in the cerebrospinal fluid
- C. A high level of norepinephrine in the cerebrospinal fluid
- D. A Low level of dopamine in the brain tissue
- E. An elevated level of most of the biogenic amines in the brain tissue

101.A 102.B 103.E 104.C 105.A 106.E 107.C 108.C 109.D 110.A 111.A 112.A 113.B
114.B 115.C 116.A 117.A 118.D 119.E 120.E 121.A 122.A 123.A 124.B 125.A 126.C
127.B 128.A 129.A 130.A 131.E 132.A 133.C 134.D 135.A 136.A 137.D 138.D 139.B
140.A 141.D 142.A 143.C 144.A 145.D 146.A 147.D 148.C 149.D 150.C 151.A 152.C
153.D 154.D 155.E 156.D 157.D,B,B 158.A 159.C 160.D 161.B 162.B 163.D 164.B 165.B
166.D 167.A 168.A 169.B 170.C 171.B 172.B 173.D 174.D 175.B 176.B 177.D 178.A
179.C 180.C 181.D 182.D 183.D 184.A 185.D 186.E 187.A 188.C 189.D 190.E 191.C
192.C 193.D 194.B 195.E 196.D 197.D 198.E 199.D 200.C

181. The description: "attributing one's own unacceptable motives and emotions to someone else" best characterizes:

- A. Fantasy
- B. Splitting
- C. Regression
- D. Projection
- E. Identification

182. Which of the following is a mature defense mechanism usually used by an adult and which helps social accommodation?

- A. Shifting
- B. Projection
- C. Avoidance

D. Sublimation

E. Violence

183. Borderline personality disorder is characterized by all of the following, except.

A. Severe impulsiveness and unpredictable behavior

B. Disturbances of identity

C. Emotional lability

D. Withdrawal from social relations

E. Recurrent suicidal gestures and short psychotic episodes

184. Violent behavior is most characteristic for which of the following conditions?

A. Bipolar disease; manic type

B. Anancastic neurosis

C. Melancholia

D. Somatoform disorder

E. Compulsive personality disorder

185. A 27-year-old woman is brought to the emergency room complaining of shortness of breath, dizziness, and a tingling in her extremities. Careful examination fails to discover any organic abnormalities. Which of the following is the most likely cause of her symptoms?

A. Situational reaction

B. Endogenous anxiety

C. Caffeine abuse

D. Hyperventilation syndrome

E. Post-traumatic stress disorder

186. Correct statement about agoraphobia include all of the following, except:

- A. The affected person experiences an intensive, irrational fear of leaving his/her home
- B. The affected person realizes that the subject of his/ her fear is
- C. It Is effectively relieved by antidepressants
- D. Behavioral therapy focuses on the phobia and neglects the psychodynamics of the affliction
- E. Once a phobia is effectively eliminated, it will not reoccur

187. A major side-effect of monoamine oxidase inhibitor antidepressant therapy is referred to as a "cheese reaction." Foodstuffs that may cause such a hypertensive crisis include all of the following, except

- A. Coffee and tea
- B. Poultry liver
- C. Smoked fish
- D. Legumes
- E. Beer and red wine

188. A middle-aged man becomes ill with Parkinson's disease. The prescribed medication fails to improve his motor abnormalities. His mood is depressed. He says he has lost his relish for life and the only thing he does is sleep. The first steps if managing this patient include:

- A. To admit him to a psychiatric ward with respect to a possibility of suicide
- B. Reassuring the patient that the prescribed medications are effective in Parkinson's disease.
- C. A discussion with the patient about his troubles and possibility of suicide
- D. Referring the patient to a neurologist or a psychiatrist saying, "Let them hear his story"

E. Scheduling frequent therapeutic settings and calling the attention of the family members to the possibility of suicide

189. A 41-year-old man complains that life does not give him what he wants. He feels disappointed and unhappy. He was depressed for a while after his girlfriend left him 8 years ago. What is the most likely diagnosis?

A. Psychogenic depression

B. Schizophrenia

C. Bipolar disorder; depressive phase

D. Dysthymia (neurotic depression)

E. Cyclothymia

190. Which of the following personality traits have commonly been found as characteristics of a premorbid personality preceding schizophrenia?

A. Extreme dependence (strong relationship with the parents, fear of being far from home)

B. Social withdrawal; an inability for close interpersonal relationships

C. Insufficient socialization; cruelty to animals; pyromania; enuresis

D. Extreme obedience; conformity; excellent academic results

E. None of the above

191. Which of the following personality disorders is most likely to be associated with a mood disorder?

A. Schizoid personality disorder

B. Paranoid personality disorder

C. Borderline personality disorder

D. Avoidant personality disorder

E. Antisocial personality disorder

192. A 39-year-old man complains of severe anxiety. He feels like a stranger thoughts and he has to fight to subdue them. The first step of the management of this patient is:

A. To have him admitted to a psychiatric ward

B. To ensure him that he has no mental disease

C. To explore the current situations of his life in order to determine the subsequent steps

D. To inquire about his childhood events

E. To prescribe anxiolytic and to excuse the patient from work

193. If one of two monozygotic twins becomes ill with schizo-phrenia, the likelihood for the other twin to be affected is:

A. 95 percent

B. not any higher than the average likelihood in the general population

C. the same as for a non-twin sibling

D. between 35 and 70 percent

E. 100 percent

194. An intoxication caused by tricyclic antidepressants is most similar to the one caused by:

A. Amphetamines

B. Atropine

C. Barbiturates

D. The withdrawal barbiturates

E. Lithium

195. Ever since antipsychotic drugs have been introduced, the usual institutional therapy of schizophrenic patients has changed considerably. These changes include all of the following, except:

- A. The possibilities of individual adjustment to drug therapy have increased
- B. Non-medication therapy is more extensively available
- C. The average duration of medical care has decreased
- D. The period necessary for appropriate therapy in a hospital ward has decreased
- E. The number of rehospitalizations has decreased

196. Schizophrenia is characterized by all of the following symptoms, except:

- A. Incoherence is characterized by all of the following symptoms, except
- B. Bizarre delusions
- C. Auditory hallucinations
- D. Korsakoff's syndrome
- E. Parathymia

197. Which of the following neurotransmitters is believed to be deficient in Alzheimer's disease?

- A. Norepinephrine
- B. Gamma-aminobutyric acid (GABA)
- C. Serotonin
- D. Acetylcholine
- E. Dopamine

198. The use of which of the following substances is most commonly associated with violent behavior?

- A. Heroin

- B. Cocaine
- C. Amphetamines
- D. Steroids
- E. Alcohol

199. Correct statements about the interpersonal relationships of an alcoholic include all of the following, except:

- A. Many good friends
- B. Good contact with people
- C. A Deep attachment to friends
- D. Short-lived relationships
- E. A warm-hearted, helpful, and responsible individual

200. Common features of delirium and dementia include all of the following, except

- A. Impaired remote memory
- B. Distorted thought process
- C. Cognitive impairment
- D. EEG abnormalities
- E. Organic pathology

Answers

101.A 102.B 103.E 104.C 105.A 106.E 107.C 108.C 109.D 110.A 111.A 112.A 113.B
114.B 115.C 116.A 117.A 118.D 119.E 120.E 121.A 122.A 123.A 124.B 125.A 126.C
127.B 128.A 129.A 130.A 131.E 132.A 133.C 134.D 135.A 136.A 137.D 138.D 139.B
140.A 141.D 142.A 143.C 144.A 145.D 146.A 147.D 148.C 149.D 150.C 151.A 152.C
153.D 154.D 155.E 156.D 157.D,B,B 158.A 159.C 160.D 161.B 162.B 163.D 164.B 165.B

166.D 167.A 168.A 169.B 170.C 171.B 172.B 173.D 174.D 175.B 176.B 177.D 178.A
179.C 180.C 181.D 182.D 183.D 184.A 185.D 186.E 187.A 188.C 189.D 190.E 191.C
192.C 193.D 194.B 195.E 196.D 197.D 198.E 199.D 200.C

PART2

201. Characteristics of delirium tremens include all of the following, except

- A. An introductory grand mal seizure
- B. Auditory hallucinations associated with clear thoughts and proper orientation
- C. Tremors and sweating
- D. Blackouts
- E. Disorientation

202. A heroin overdose is characterized by all of the following symptoms, except.

- A. Mydriasis
- B. Hypotension
- C. Diminished reflexes
- D. Coma
- E. Respiratory depression

203. Dementia is characterized all of the following statements, except:

- A. Demented patients are often depressed
- B. The ability to generalize from past experiences and to experiences and to recognize the relationship between similar situations is impaired
- C. An early feature is an inability to recall events from the distant past

D. Demented patients may experience hallucinations

E. Creutzfeldt-Jacob disease is a dementia caused by a slow virus infection

Every question or incomplete statement has only one answer in the following combination:

A. If the answers 1, 2, and 3 are true

B. If the answers 1 and 3 are true

C. If the answers 2 and 4 are true

D. If only the answer 4 is true

E. If all the four answers are true

204. Intelligence tests have which of the following characteristics?

A. They compare the performance of an individual as compared to a large group

B. They are influenced by culture

C. They do not measure an individual's entire intellectual capacity

D. They define an IQ of 100 as average

E. All of the above

205. When attempting to treat a patient with a paranoid personality disorder the physician should:

A. Avoid setting limits

B. Apologize quickly for any mistakes he /she may make

C. Have a sense of humor

D. Explain everything in detail

206. Obtain an appropriate sexual history, it is necessary for the physician to inquire

about:

- A. Attitudes of the family about sex
- B. Any history of sexual abuse
- C. The first sexual experience
- D. Current sexual functioning

207. An attractive 43-year-old woman makes seductive comments to her physician a few days after a mastectomy. She had remarried 1 year previously after having divorced her husband for having an affair with a younger woman. She has no previous psychiatric history. Factors attributable to her behavior include:

- A. Anxiety that her new husband may no longer find her attractive
- B. Acute schizophrenic psychosis
- C. Acute organic mental syndrome
- D. Stranger anxiety

208. Risk factors for a patient's violent behavior in a physician's office include:

- A. A history of manic disease
- B. A history of suicide attempts
- C. Alcohol abuse
- D. Head trauma

209. If a middle-aged man complains of feeling deprived of his thoughts, this is:

- A. A manifestation of thought blocking
- B. A symptom of depressive psychosis
- C. A Delusion of passive control
- D. A symptom of histrionic amnesia

210. Symptoms usually present in somatization disorder include:

- A. Dysmenorrhea
- B. Palpitations
- C. Anxiety
- D. Nausea

211. Patients suffering from a personality disorder, as opposed to those from neurosis, are to:

- A. Accuse others for their own problems
- B. Maintain a therapeutic relationship
- C. Exhibit certain abnormalities in adolescence
- D. Require psychotherapy

212. Polysomnography has been useful in studying which of the following conditions?

- A. Ictal diseases
- B. Impotence
- C. Depression
- D. Schizophrenia

213. Which of the following statements concerning social deprivation are correct?

- A. It may be associated with severe mental retardation
- B. It may be associated with a severe personality disorder
- C. It may be experimentally modeled in animals
- D. It frequently occurs in poorly organized hospital wards

214. A patient with a paranoid personality usually:

- A. Becomes psychotic at times

- B. Restricts his emotions
- C. Avoids interpersonal conflicts
- D. Shows excessive sensitivity to the behavior of others

215. A characteristics of neurotic depression include:

- A. Recurrent short hypomanic episodes
- B. A sustained, low-level intensity of mood
- C. Unresponsiveness to therapy
- D. A lack of psychotic symptoms

216. Which of the following statements concerning paranoid schizophrenia are correct?

- A. The diseased patients rapidly lose their social abilities
- B. The onset is earlier as compared to that in other diagnostic subgroups
- C. The decline in cognitive functions is more rapid as compared to that in other diagnostic subgroups
- D. Hallucinations and delusions of grandeur are common manifestations

217. According to the DSM-III-R the diagnosis of schizophren-ia requires:

- A. That the symptoms be observed over a period of 6 months or more
- B. A decline in the previous level of functioning
- C. An onset before the age of 45
- D. That the patient complains of auditory hallucination

218. Positive symptoms of schizophrenia include:

- A. Flatness of thought
- B. Delusion of thought withdrawal

C. Marked flatness of affect

D. Auditory hallucination

219. A 67-year-old woman with chronic obstructive pulmonary disease is brought to the hospital by her husband. Four times in the last month, she was found wandering about the yard in her bedclothes. Which of the following etiologic factors should be considered?

A. Hypoxia

B. Aminophylline intoxication

C. Senile dementia

D. Cerebrovascular disease

E. Steroid-induced psychosis

220. A manic state is characterized by which of the following symptoms?

A. Diffuseness and self-assurance

B. Holothymic hallucination and delusions of grandeur

C. Increased activity and a decreased need for sleep

D. Specific precipitating causes preceding the onset of symptoms

201.B 202.A 203.C 204.E 205.C 206.A 207.A 208.E 209.B 210.D 211.B 212.A 213.A
214.D 215.C 216.D 217.A 218.C 219. A,E 220.A 221.A 222.A 223.E 224.C 225.D 226.B
227.C 228.D 229.E 230.C 231.B 232.A 233.C 234.C 235.B 236.A 237.A 238.C 239.C
240.A 241.C 242.A 243.E 244.D 245.B 246.A 247.C 248.E 249.C 250.A 251.B 252.A
253.A 254.B 255.A 256.E 257.B,C,D 258.A,C,D 259.C,E 260.B,E 261.A,C,E 262.C,E 263.
A,B,C,E 264.B,D,E 265. A,C,E

221. Lithium carbonate therapy is useful:

A. In the treatment of an acute manic episode

B. To prevent the recurrence of depression

- C. To prevent the recurrence of mania
- D. In the treatment of acute depression

222. Delirium tremens, in the initial phase, may be effectively prevented by:

- A. Meprobamate
- B. Benzodiazepines
- C. Chlormethiazole (Heminervrin)
- D. Barbiturates

223. Characteristics of alcohol dependence include:

- A. The need for drinking every day in order to maintain one's performance
- B. The need to increase the amount consumed to elicit the same effect
- C. Tremor, sweating, and disorientation developing after two days of Abstinence
- D. Two or more blackouts during an acute alcohol abuse period
- E. All of the above

224. Conditions which increase the risk of subdural hemorrhage include:

- A. Hypertension
- B. Advanced age
- C. Atherosclerosis
- D. Alcoholism

225. Which of the following statements about transsexualism are correct?

- A. It is an expression of homosexuality
- B. Cross dressing is necessary for sexual arousal
- C. Biologic factors have a significant role in its etiology

D. It is associated with early childhood developmental * disturbances

226. The side-effect of tricyclic antidepressants includes:

A. Hypertension

B. Dry mouth

C. Diarrhea

D. Blurred vision

227. Cognitive psychotherapy of depression stresses which of the following:

A. Drug and alcohol addiction

B. Stressed interpersonal relations

C. Disturbances of the norms of social activities

D. Abnormalities of perception and the thought process

228. Which of the following statement concerning juvenile suicide are false?

A. The prevalence of juvenile suicide attempts has increased

B. Impulsive patients are at a higher risk

C. The leading cause of death among adolescents is suicide

D. Child abuse is usually not associated with suicide

229. Correct statements about illusions include:

A. They are elicited by an existing environmental stimulus and negatively affect sensory discrimination

B. They are misperception of an existing environmental stimulus

C. They are more frequently observed in organic mental disorders than in functional psychiatric illnesses

D. They are not always associated with psychoses

E. All of the above

230. Psychotherapy of depression stresses the importance of:

- A. Drug and alcohol addiction
- B. Maladaptive interpersonal relationships
- C. Disturbances of social standards
- D. Incorrect perception and thinking

231. Correct statements about psychiatric epidemiologic studies include:

- A. At least 25 percent of the population suffers from some type of psychiatric disorder once during their lifetime
- B. Morbidity rates among females are higher than those among males
- C. More men suffer from addiction than women
- D. The prevalence of depression is grossly identical in both sexes

232. Psychoanalytic theories state that defense mechanisms:

- A. Inhibit conflicts from becoming conscious
- B. Are frequently used as physiological tools in accommodation
- C. Are essential mechanisms of neurotic symptom formation?
- D. Are mechanisms of resistance during psychotherapy?

233. Characteristics of personality disorder include:

- A. A gradual flattening of the thought process
- B. A normal sense of reality
- C. Delusions, observed over a long period
- D. The possible occurrence of psychotic episodes

234. Childhood experiences of criminals and people with antisocial behavior usually include:

- A. A discrepancy between the words and behavior of their parents
- B. The inconsistent application of praise and punishment
- C. The reinforcement of an antisocial behavior
- D. Lack of one of the parents

235. The initial therapy of conversion disorder includes:

- A. The analysis and the discussion of the improvement of any stress symptoms
- B. Assuring these patient that their symptoms will improve
- C. Confirming to these patient that their prognosis is good
- D. A confrontation with psychological issues

236. Antidepressant-type therapy may be of use in which of the following conditions?

- A. Bulimia
- B. Affective disorders
- C. Compulsive personality disorder
- D. Anancastic disorder

237. Primary (psychological and sociopsychological) disease advantages include which of the following?

- A. The disease elicits attention and care in the environment
- B. Affective conflicts are repressed from consciousness
- C. The disease satisfies an unconscious need for dependency
- D. The patient is given all the excuses a society can offer

238. Which of the following defense mechanisms are com~mon for antisocial,

borderline, and histrionic personality disorders?

A. Dissociation

B. Denial

C. Splitting

D. Acting out

239. A 29-year-old boy complains of attacks associated with severe anxiety and fears of having them again. Which of the following medications may be effective in his condition?

A. Haloperidol

B. Imipramine (Melipramin)

C. Meprobamate (Andaxin)

D. Diazepam (Seduxen)

240. Delusions are best defined as false considerations which:

A. Persist for a long time despite being obviously unrealistic

B. Originate from the misinterpretation of existing external stimuli

C. Appear to be real to the individual

D. Are pathognostic for schizophrenia?

201.B 202.A 203.C 204.E 205.C 206.A 207.A 208.E 209.B 210.D 211.B 212.A 213.A
214.D 215.C 216.D 217.A 218.C 219. A,E 220.A 221.A 222.A 223.E 224.C 225.D 226.B
227.C 228.D 229.E 230.C 231.B 232.A 233.C 234.C 235.B 236.A 237.A 238.C 239.C
240.A 241.C 242.A 243.E 244.D 245.B 246.A 247.C 248.E 249.C 250.A 251.B 252.A
253.A 254.B 255.A 256.E 257.B,C,D 258.A,C,D 259.C,E 260.B,E 261.A,C,E 262.C,E 263.
A,B,C,E 264.B,D,E 265. A,C,E

241. A 17-year-old boy is brought to the emergency room by his father. The father reported that his son had taken three tablets of diazepam (seduxen) in a suicide attempt. The boy minimized the episode, saying that he was just up-set about school. The father became angry at his son for making such a fuss over nothing. The nurses started making jokes about the three diazepam "suicide". The father was impatient to take his son back home. Both were resistant to a psychiatric evaluation since the over-dose was not life threatening, the most appropriate treatment at this time would include:

- A. Calling other family members to the hospital
- B. Reporting the event to the boy's school and obtaining information about his academic problems
- C. Encouraging the father and son to stay and to be interviewed individually
- D. Encouraging the father to keep an eye on his son

Additional therapeutic approaches at this time would include:

1. Initiating antidepressant therapy
2. Warning the father to hide any medications kept at home
3. Giving the son an excuse from school for a few days
4. Suggesting a family consultation to relieve any present tensions at home

The son remained silent and the father insisted on going home the following day the boy was found dead from a self-inflicted gunshot. This case represents common errors in evaluating a suicide attempt, including:

1. Not adequately evaluating the son's emotions
2. Not appreciating what the first suicide attempt meant to the son and his Father
3. Not assessing adequately the father's capacity to support his son
4. Not hospitalizing the patient, even if it was against his will

242. Which of the following symptoms are indicative of major depression?

- A. A loss of appetite; dipsomania; disturbances of sexual function
- B. Abandoning one's previous social-positions and roles in occupation and in the family
- C. Any suicidal ideation or attempt
- D. Any abnormalities of the perception of reality, delusions, hallucinations, and confusion

243. Conditions that may be associated with the catatonic syndrome (rigidity, mutism, catalepsies, and waxy flexibility) include:

- A. An affective disorder
- B. Viral encephalitis
- C. Hypnosis
- D. Schizophrenia
- E. All of the above

244. Uncommon side-effects of tricyclic antidepressant therapy include which of the following?

- A. A dry mouth
- B. Tremor
- C. Constipation
- D. Extra-pyramidal movement disorders

245. Which of the following somatic diseases may be associated with a depression syndrome?

- A. Pancreatic carcinoma
- B. Hypertension
- C. Hypothyroidism

D. Peptic ulcer disease

246. Which of the following medications are capable of eliciting mania?

A. Amphetamines

B. Tricyclic antidepressants

C. Corticosteroids

D. Proserpine

247. Characteristics of a developing schizophrenia include:

A. Sufficient social functioning before the onset of the disease

B. A family history of psychosis

C. A sudden onset of the associated symptoms

D. A low socioeconomic position

248. Psychological tests that cannot be used alone to diagnose schizophrenia include:

A. Rorschach test

B. Minnesota multiphase personality inventory (MMPI)

C. Thematic apperception test (TAT)

D. MAWI

E. All of the above

249. Symptoms of Korsakoff's syndrome include:

A. Disturbances of remote memory

B. Disorientation to space and to time

C. Confabulation

D. Anosognosia

250. Atherosclerotic (multi-infarct) dementias are characterized by:

- A. Associated internal and neurological symptoms
- B. Numerous malacic foci in the brain
- C. A focal loss of memory
- D. A dominant inheritance pattern

251. The results of the metabolic and neuroradiological tests of severe chronic (residual) schizophrenic patients usually demonstrate a cortical atrophy in which lobes?

- A. The frontal lobe
- B. The parietal lobe
- C. The temporal lobe
- D. The occipital lobe

252. A 45-year-old man is admitted to the surgical ward. When interviewed by the nurse he states that he is married, is a father of three boys, and that he lives with his family. He had previously told his physician that he had been living with his father since his girlfriend and her two children had left him. When asked about these contradictions he became confused. Conditions that are likely to account for the patient's confabulation include:

- A. Korsakoff's syndrome
- B. Diabetes mellitus
- C. Presenile dementia
- D. Addison's disease

253. Types of brain damages that are associated with a violent behavior include:

- A. Encephalitis
- B. Birth trauma

- C. Mild traumas to the skull
- D. Epileptic grand mal seizures

254. Wernicke's encephalopathy is characterized by:

- A. A sudden onset
- B. Nystagmus and ophthalmoplegia
- C. A somnolent state
- D. Pathologic changes in the mamillary body

255. Characteristic symptoms of atypical (pathologic) binges include:

- A. Actions those are not characteristic for the individual in other situations
- B. Visual hallucinations
- C. Amnesia
- D. Associated epileptiform seizures

256. Which of the following statements concerning interrelationships between anxiety and depression are correct?

- A. Many depressed patients are anxious
- B. Many patients with a panic disorder will develop depression
- C. The same therapy may be useful in both depression and anxiety
- D. Hereditary transmission is recognized in both depression and panic disorder
- E. All of the above

257. Which of the following conditions are associated with mutism?

- A. Alcohol withdrawal
- B. Conversion neurosis

C. Catatonic schizophrenia

D. Depression

E. Ganser's syndrome

258. Echolalia is characteristic for:

A. Catatonic schizophrenia

B. Anorexia nervosa

C. Alzheimer's disease

D. Infantile autism

E. Petit mal epilepsy

259. Characteristic symptoms of schizophrenia include:

A. Compulsive thoughts

B. Progressive dementia

C. Depersonalization

D. Waking up early in the morning

E. Thought withdrawal

260. Which of the following symptoms or findings suggest a poor prognosis in acute schizophrenia psychosis?

A. An IQ above the average

B. Flatness of affect

C. An abrupt onset

D. A normal premorbid personality

E. Marked thought disorder

261. Characteristic symptoms of morphine withdrawal include:

- A. Excessive yawning
- B. Hypotension
- C. Muscle spasms
- D. Dry conjunctiva
- E. Diarrhea

262. Which of the following statements is characteristic for tardive dyskinesia?

- A. Recent phenothiazine therapy is usually found in the history
- B. The intramuscular injection of benztropine rapidly relieves the symptoms
- C. Grimacing is typical
- D. Intentional tremor is diagnostic for the condition
- E. The administration of phenothiazine may precipitate the attack

263. Grandiose delusions may occur in which of the following conditions?

- A. Schizophrenia
- B. Frontal lobe tumor
- C. Manic syndrome
- D. Compulsive neurosis
- E. Amphetamine intoxication

264. Characteristic symptoms of acute manic psychosis include:

- A. Lack of insight
- B. Flight of ideas

- C. Confabulation
- D. Distractibility
- E. Depression in the family history

265. Characteristic symptoms of depression include:

- A. Diminished concentration
 - B. Hallucinations
 - C. Hypochondriasis
 - D. Delusions of persecution
 - E. Weight loss
-

Answer

201.B 202.A 203.C 204.E 205.C 206.A 207.A 208.E 209.B 210.D 211.B 212.A 213.A
 214.D 215.C 216.D 217.A 218.C 219. A,E 220.A 221.A 222.A 223.E 224.C 225.D 226.B
 227.C 228.D 229.E 230.C 231.B 232.A 233.C 234.C 235.B 236.A 237.A 238.C 239.C
 240.A 241.C 242.A 243.E 244.D 245.B 246.A 247.C 248.E 249.C 250.A 251.B 252.A
 253.A 254.B 255.A 256.E 257.B,C,D 258.A,C,D 259.C,E 260.B,E 261.A,C,E 262.C,E 263.
 A,B,C,E 264.B,D,E 265. A,C,E

PART3

1. Which of the following is not seen in mania?

- A. Delusion of grandeur
- B. Elation
- C. Pressure of speech
- D. Disorientation

Criteria for manic episode: Persistently elevated, expansive or irritable mood lasting at

least 1 week. During this period 3 or more/ 4 or more (if mood is irritable) of the following is to be present significantly:

1. Grandiosity
2. Decreased need for sleep
3. Pressure need for sleep
4. Pressure to keep talking
5. Flight of ideas
6. Distractibility
7. Increase in goal directed activity
8. Excessive involvement in pleasurable activities measured important in socio-occupational functioning no organic basis should explain the illness.

2. The commonest psychiatric disorder is:

- A. Dementia
- B Schizophrenia
- C. Paranoia
- D. Depression

3. Endogenous depression is characterized by all of the following, except:

- A. Paranoid feeling
- B. Third person hallucination
- C. Guilt psychosis
- D. Loss of self-esteem

4. The neurotransmitters involved in depression are:

- A. GABA and dopamine
- B. Serotonin and norepinephrine
- C. Dopamine and serotonin
- D. GABA and norepinephrine

Of the biogenic amines, norepinephrine and serotonin are the 2 neurotransmitters most implicated in the pathophysiology of mood disorders.

5. The drug of choice for depression in an old person is:

- A. Fluoxetine
- B. Buspirone
- C. Amitryptilline
- D. Imipramine

6. Delusions of nihilism and early morning insomnia are seen in:

- A. Major depression
- B. Schizophrenia
- C. Mania
- D. Personality disorder

7. The most common age group for depression is:

- A. Middle-aged men
- B. Middle-aged females
- C. Young girls
- D. Children

Life time prevalence is 15 percent, as high as 25 percent for women

8. A period of normalcy is seen between two psychotic episodes in:

- A. Schizophrenia
- B. Manic depressive psychosis
- C. Alcoholism
- D. Depression

9. A 20-year-old man has presented with increase alcohol consumption and sexual indulgence, irritability, lack of sleep, and not feeling fatigued even in prolonged periods of activity. All these changes are present for past 3 weeks. The most likely diagnosis is:

- A. Alcohol dependence
- B. Schizophrenia
- C. Mania
- D. impulse control disorder

Increased libido, irritable mood, decreased need for sleep, excessive psychomotor activity characterize manic episode in this case.

10. Ms. B, a 27-year-old nurse had extracurricular interest in trekking and painting. She broke up relationship with her boy friend. Two months later she lost interest in her hobbies and was convinced that she would not be able to work pain. She thought life was not worth living and has consumed 60 tablets of phenobarbitone to end her life. She is most likely suffering from:

- A. Adjustment disorder
- B. Conversion disorder
- C. Depressive disorder
- D. Post-traumatic stress disorder

Loss of interest

Feeling of worthlessness

Death wishes

Poor functioning one is suggestive of a depressive episode.

11. Major depression is most commonly associated with:

- A. Poverty
- B. Major accident
- C. Prolonged physical illness
- D. Death of loved person

12. A person initially presenting with an episode of mania is classified as:

- A. Unipolar
- B. Bipolar
- C. Affective disorder
- D. Personality disorder

Bipolar I disorder: Single manic episode and a specific type of recurrent episode.

Bipolar II disorder: It is characterized by depressive episodes and hypomanic episodes during the course of the disorder.

Unipolar disorder: Depressive episode only.

13. Mania is a:

- A. Obsessive disorder
- B. Mood disorder
- C. Neurotic disorder
- D. Psychological disorder

Mood is a sustained and province emotional response which colors the whole psychic life. According to ICD ten mood disorders are classified as: 1. manic episode, 2. Depressive episode, 3. bipolar mood (affective) disorder, 4. Recurrent depressive disorders, 5. Persistent mood disorder (including cyclothymia and dysthymia), 6. Other mood disorders (including mixed affective episode and recurrent brief depressive disorder).

14. Mania is associated with the following, except:

- A. Euphoria
- B. Good humour
- C. Physical overactivity
- D. Thought disorders

15. Which of the following is not seen in mania?

- A. Delusions of grandeur
- B. Elation
- C. Pressure of speech
- D. Disorientation Disorientation occurs in delirium.

16. Atypical depression is characterized by all of the follow-ing, except:

- A. Increased libido
- B. Weight gain
- C. Ravenous appetite
- D. Hypersonic Weight gain, appetite

Hypersonic – reverse vegetative, features.

17. Dysthymia is:

- A. Chronic mild depression

B. Personality disorder

C. Bipolar depression

D. Chronic severe depression

Duration criteria for dysthymia – 2 years

This category does not require the presence of stress as a precipitation factor.

Average age of onset is late third decade more common in females.

18. Depression is a. an:

A. Affective disorder

B. Organic disorder

C. Mood disorder

D. Dissociate disorder

Affective disorder form is a misnomer

In ICD – ten mood disorder classification: 1) Manic episode 2) depressive episode 3) Bipolar mood 4) recurrent depressive disorder 5) persistent mood disorders 6) other mood disorders.

19. Profound mood disturbance is seen with:

A. Schizophrenia

B. Psychosomatic illness

C. Depression and mania

D. Affective disorders

Depression and mania are mood disorders where a pervasive and profound mood disturbance is mandatory to make a diagnosis.

20. Somatic symptoms of depression include all, except:

A. Feelings of guilt

B. Reduced interest

C. Insomnia

D. Weight change

Somatic symptoms (syndrome – melancholic symptoms, vegetative symptoms):

Early morning awakening

Diurnal variation

Significant decrease in appetite or weight

Pervasive loss of interest and loss of reactivity.

Answer

1.D 2.D 3.B 4.B 5.A 6.A 7.B 8.B 9.C 10.C 11.B 12.B 13.B 14.B 15.D 16.A 17.A 18.C 19.C
20.A 21.A 22.A 23.A 24.C 25.D 26.C 27.B 28.D 29.C 30.C 31.B 32.D 33.A 34.C 35.B 36.D
37.B

21. Which one of the following disturbances is the basic de-fect seen in mania?

A. Elation

B. Ideas of reference

C. Coining of new jokes

D. Delusions of grandiosity

22. Depression is not caused by:

A. Metronome

B. Methyldopa

C. Reserpine

D. Oral contraceptives

Drugs which can cause depression are: reserpine, clonidine, methyldopa, OC pills, Propranolol, anti cancer drugs.

23. The following are feelings of cyclothymic personality except:

A. Mood swings

B. Excessive planning

C. Spending sprees

D. Mood incongruent delusions

Persistent instability of mood between mild depression and mild elation is seen in cyclothymics.

24. Mania depressive psychosis is associated with:

A. Jules Falter

B. Sigmund Freud

C. Emil Kraepelin

D. KL Kahlbaum

He also described dementia praecox. According to Kraepelin MDP has an episodic course and good prognosis.

25. Which drug is not useful in acute mania?

A. Diazepam

B. Clonazepam

C. ECT

D. Chlordane

Drugs used in acute manic episode – mood stabilizers: antipsychotic and Clonazepam.

26. Acute mania with mood disturbance is:

- A. Feature of the following
- B. Borderline disorder
- C. Cyclothymia disorder
- D. Paranoid disorder

Duration criteria for cyclothymia – 2 years It is classified as a persistent mood disorder.

27. Mood disorder is seen in:

- A. Hysterical state
- B. Borderline personality state
- C. Paranoid state
- D. Schizoid state

Affective instability is commonly seen in borderline personality disorders.

28. Drug that is known to produce manic like syndrome include all except:

- A. Amphetamine
- B. Corticosteroids
- C. Tricyclic antidepressant
- D. Reserpine

Reserpine induces depression

Whereas amphetamine causes schizophrenics – like pictures

Corticosteroids and TCA's can induce mania. 25 D 26 C 27 B 28 D

29. Features of depression include all, except:

- A. Depressed mood
- B. Loss of appetite
- C. Hyperactivity
- D. Suicidal ideas

Depressed mood is the first among them, loss of appetite and suicidal ideas are associated symptoms, hyperactivity is unusual (it may occur in elderly).

30. Which of the following is least likely to cause serious depression as a side effect of long-term use?

- A. Reserpine
- B. Propranolol
- C. INH
- D. None of the above

31. Which of the following drugs is used for maintenance of MDP?

- A. Chlorpromazine
- B. Carbamazepine
- C. Haloperidol
- D. Amphetamine

Carbamazepine is a mood stabilizer used for maintenance therapy of MDP.

32. All the following drugs are used in prophylaxis of MDP, except:

- A. Sodium Valproate
- B. Carbamazepine
- C. Lithium

D. Haloperidol

Drugs used in bipolar MDP prophylaxis are lithium, carbamazepine, sodium valproate, oxcarbamazepine and lamotrigine.

33. The family members of a 56-year-old man reports that he has become increasingly irritable, sleepless, has started spending large amounts of money, and shows increased sexual behavior. The most probable cause could be:

A. Mania

B. Psychosexual developmental disorder

C. Impulse control disorder

D. Obsessive-compulsive neurosis

Irritable mood, reduced sleep, overspending, and distributed are features of mania

34. A 36-year-old female presents with no interest in any-thing, a nihilistic attitude, and a sad appearance with suicidal ideas and plans. The most appropriate man-agement is:

A. Antidepressants

B. Behavior therapy

C. ECT

D. Aminophylline

The patient is having severe depression and suicidal risk. In this case the first choice of management is ECT.

35. A 55-year-old lady presented with decreased sleep and appetite and thoughts of spiritualism. She donates money and property and talks about God. Her husband died few days back and she has increased psychomotor activity. She is most likely suffering from:

A. PTSD

B. Mania episodes

C. Brief reaction

D. Depression

36. The most common cause of mood congruent delusion is:

A. Obsessive-compulsive neurosis

B. Schizophrenia

C. Dementia

D. Mania

Mood congruence refers to occurrence of psychiatry symptoms in keeping with mood state.

37. Pseudodementia is commonly seen in:

A. Hysteria

B. Depression

C. Mania

D. Anxiety neurosis

Frequent Complaints about memory loss

Patient gives "Don't know" answers for most of questions.

Answer

1.D 2.D 3.B 4.B 5.A 6.A 7.B 8.B 9.C 10.C 11.B 12.B 13.B 14.B 15.D 16.A 17.A 18.C 19.C
20.A 21.A 22.A 23.A 24.C 25.D 26.C 27.B 28.D 29.C 30.C 31.B 32.D 33.A 34.C 35.B 36.D
37.B

“Psychopharmacology”

1. Tricyclic antidepressants are contraindicated in:

- A. Glaucoma
- B. Brain tumour
- C. Bronchial asthma
- D. Essential hypertension

2. Which of the antipsychotic drugs has a prolonged action?

- A. Trifluoperazine
- B. Thioridazine
- C. Penfluridol
- D. Fluphenazine

3. The congenital anomaly produced by lithium therapy is:

- A. Limb shortening
- B. Anencephaly
- C. Heart block
- D. Renal agenesis

About 10 percent of newborns exposed in 1st tri-mester of pregnancy had major congenital malformations. The most common is Epstein's anomaly of the tricuspid valves. Lithium is not indicated in a lactating woman. Signs of its toxicity in infants include lethargy, cyanosis, abnormal reflexes, rarely hepatomegaly.

4. All the following are side-effects of Fluoxetine, except:

- A. Weight gain

- B. Sweating
- C. Urinary retention
- D. Diarrhea

5. Akathisia is treated by all the following, except:

- A. Trihexyphenidyl
- B. Diazepam
- C. Haloperidol
- D. Promethazine

6. Prophylactic maintenance of serum level of lithium is:

- A. 0.2-0.8 mEq/L
- B. 0.7-1.2 mEq/L
- C. 1.2-2.0 mEq/L
- D. 2.0-2.5 mEq/L

7. The treatment of choice in depression with suicidal tendencies is:

- A. Tricyclic antidepressants
- B. MAO inhibitors
- C. Fluoxetine
- D. Electroconvulsive therapy

The first and most important indication for ECT is depression with suicidal tendencies.

8. The drug not used for prophylaxis of MDP is:

- A. Carbamazepine
- B. Sodium valproate

C. Chlorpromazine

D. Lithium

Antipsychotics are used as adjuvant in the treatment of mood disorders.

9. All the following are true about clozapine, except:

A. Used in schizophrenia

B. Precipitates seizures

C. Agranulocytosis

D. Extra pyramidal side-effects

The only FDA approved indication for clozapine is as a therapy for treatment resistant schizophrenia. Clozapine suppresses the abnormal movements of TD (Tardive dyskinesia) as does treatment with conventional antipsychotics.

Other indication: Clozapine may treat the movement disorder. Clozapine is more potent on D1, D3, D4, and 5HT2 receptors in comparison to other typical antipsychotic which are more potent over D2 receptors. Animal models show that clozapine is more active over meso-limbic pathway than nigro- striatal pathway because of which we notice less EPS.

10. Which of the following is not an antidepressant?

A. Trazodone

B. Amitriptyline

C. Fluoxetine

D. Pimozide

11. Carbamazepine is used in all the following except:

A. Mania

B. Alcohol withdrawal

C. Schizophrenia

D. Trigeminal neuralgia

But recent data indicates that CB2 can be used in schizophrenia and Schizo-affective disorders. Other indications are:

Recurrent depressive disorder

Impulse control disorder v

PTSD (post-traumatic stress disorder)

Alcohol /benzodiazepine withdrawal

Severe blood dyscrasias occur in about 1 in 125,000 pts treated with Carbamazepine.

12. A patient of schizophrenia treated for 5 years, developed abnormal movement. The patient has:

A. Tardive dyskinesia

B. Muscular dystonia

C. Akathisia

D. Malignant neuroleptic syndrome

TD delayed effects of antipsychotic caused by dopamine receptor super sensitivity in basal ganglia. Serotonin – dopamine antagonists may be used in pts with TD.

13. The mechanism of action of Fluoxetine is:

A. Serotonin reuptake inhibitor

B. MAO-B inhibitor

C. Nor adrenaline reuptake inhibitor

D. Benzodiazepine antagonist Other SSRI are:

Fluvoxamine Sertraline

Paroxetine

Citalopram

Escitalopram

Serotonin norepinephrine reuptake

Inhibitors:

1. Venlafaxine

2. Sibutramine

Atypical antipsychotics: (serotonin dopamine antagonists)

Risperidone

Olanzapine

Quetiapin

Sertindole

Ziprasidone

Clozapine (dibenzodiazepine)

Central presynaptic 2 – adrenergic receptor antagonist – clonidine

Mirtazapine (tetracyclic antidepressant)

14. An irritable urge to move about with inner restlessness is called:

A. Akathisia

B. Akinesia

C. Hyperkinesia

D. Dyskinesia

15. The drug of choice for rapid cycle MDP is:

A. Lithium

B. Carbamazepine

C. Sodium Valproate

D. Haloperidol

16. A 35-year-old female on chlorpromazine for 10 years schizophrenia complains of hearing voices. The loud-ness of the voices of taking chlorpromazine but not stop completely. The best treatment is:

A. Clozapine

B. Haloperidol

C. Tianeptine

D. Sulpiride

Clozapine, the only FDA approved drug for treatment resistant schizophrenia.

17. Tianeptine is a:

A. Selective serotonin reuptake enhancer »

B. Selective serotonin reuptake inhibitor.

C. Selective norepinephrine reuptake inhibitor

D. Norepinephrine agonist

Tianeptine – Norepinephrine serotonin selective reuptake enhancers

Venlafaxine – Norepinephrine serotonin reuptake inhibitor

MAOI-Hydroxide – a. Phenelezine b. isocarboxazide Norhydroxide – a. tranylcypromine
Reversible selective

MAOIs

MAOI – B – Selegiline

MAOI – A – Moclobamide

Broforamine Irreversible selective MAOI: clorgyline

Sympathomimetic stimulants:

1. Dextroamphetamine

2. Methylphenidate

Mood Stabilizers:

1. Lithium

2. Carbamazepine

3. Sodium valproate

4. Topiramate

5. Lamotrigine

6. Clonazepam

18. A 50-year-old man has presented with pain in back, lack of interest in recreational activities, low mood, lethargy, decreased sleep, and appetite for 2 months. There is no history suggestive of delusions or hallucinations. He did not suffer from any chronic medical illness. There was no family history of psychiatric illness. Routine investigations including x-ray, renal function tests, electrocardiogram, did not reveal any abnormality. This patient should be treated with:

A. Haloperidol

B. Sertraline

C. Alprazolam

D. Olanzapine

(The only antidepressant in this group)

Clinical history suggests that the patient is depressed.

19. Carbamazepine was first used in:

A. Depression

B. MDP

C. Anxiety

D. All of the above

Carbamazepine is an anticonvulsant and mood stabilizing agent. It is a tricyclic compound synthesized in 1953 by Schindler.

20. The treatment of choice for acute or abrupt onset depression includes:

A. Lithium

B. Tricyclic antidepressants

C. MAO inhibitors

D. Electroconvulsive therapy

Answer

1.A 2.D 3.C 4.A 5.C 6.B 7.D 8.C 9.D 10.D 11.C 12.A 13.A 14.A 15.A 16.A 17.A 18.B 19.B
20.A 21.B 22.D 23.C 24.A 25.D 26.C 27.B 28.A 29.A 30.D 31.B 32.D 33.B 34.C 35.C 36.A
37.C 38.B 39.D 40.B 41.B 42.A 43.C 44.A 45.A 46.A 47.C 48.D 49.C 50.A 51.A 52.E 53.A
54.D 55.C 56.C 57.B 58.D 59.A 60.A 61.C 62.A 63.B 64.A 65.B

21. In acute mania, the therapeutic serum level of lithium includes:

A. 0.2 – 0.5 mEq/L

B. 0.8-1.5 mEq/L

C. 1-2 mEq/L

D. 2-5 mEq/L

22. Antipsychotic drug to be avoided especially in first tri-mester of pregnancy:

A. Chlorpromazine

B. Haloperidol

C. Carbamazepine

D. Lithium

i. Neurological – Tremor, muscle weakness, cogwheel rigidity, seizures, neurotoxicity.

ii. Renal – Polyuria, polydipsia, tubular changes nephrogenic diabetes insipid nephritic syndrome.

iii. CVS – Hypokalemia, T wave depression.

iv. Endocrine – Goiter, hypothyroidism, abnormal thyroid function, weight gain.

v. GIT – Nausea, vomiting, diarrhea, abdominal pain, metallic taste.

vi. Dermatological-Acne form eruptions, popular eruptions, exacerbation of psoriasis.

vii. During pregnancy of lactation-teratogenic, increased incidence of Ebstein's anomaly also created in milk with 30 to 100 percent of maternal blood hi level. Cause toxicity in infant. Contraindications of lithium we are cardio renal, thyroid, neurological dys-function blood dyscrasias, during first traumata of pregnancy and lactation, concomitant administration of theorize diuretics, tetracycline, or anesthetics.

23. Lithium is used in psychiatry to treat:

A. Hysteria

B. Phobia

C. Mood disorders

D. Acute organic brain syndrome Indications of lithium in psychiatry:

Acute mania

Prophylaxis of bipolar mood disorders

Schizoaffective disorder

Impulsive aggression.

24. Clozapine is a:

A. Atypical antipsychotic

B. Anti-anxiety drug

C. Used in dementia

D. Also known as disulfiram

Other atypical antipsychotics – Risperidone, olanzapine, ziprasidone.

Also remember – Clozapine is the drug of choice in treatment-resistant schizophrenia.

25. Paroxetine is a:

A. Antipsychotic drug

B. Used in opiate poisoning

C. Tricyclic antidepressant

D. Selective serotonin reuptake inhibitor

Others SSRI's

Paroxetine, fluvoxamine, fluoxetine, sertraline, citalopram

Also remember –

SSRI with longest half-life-fluoxetine

SSRI with shortest half-life-fluvoxamine

26. Imipramine is mainly used as a:

- A. Sedative
- B. Tranquilizer
- C. Antidepressant
- D. All of the above

Remember – imipramine is the first antidepressant to be introduced.

27. Nausea is a troublesome side effect of the following antidepressant:

- A. Doxepine
- B. Fluoxetine
- C. Trazodone
- D. Mianserin

Other side effects: Insomnia, akathisia, loss of appetite, sexual dysfunction.

28. Which antidepressant found to be associated with tardive dyskinesia and neuroleptic malignant syndrome?

- A. Amoxapine
- B. Trazodone
- C. Fluoxetine
- D. Amitriptyline

This is because of blockade of dopamine receptors in the striatum.

29. Blood levels of neuroleptics are useful to check the following:

- A. Toxicability
- B. Therapeutic levels
- C. Resistance
- D. All of the above

Clozapine and haloperidol levels are important to monitor toxicities.

30. The drug of first choice in weight reduction programme is:

- A. Amphetamine
- B. Phenylethylamine
- C. Fenfluramine
- D. Diethyl propion

31. Therapeutic range of lithium is:

- A. 0.5 to 1 mmol/l
- B. 0.8 to 1.4 mmol/l
- C. 1.4 to 2.5 mmol/l
- D. 1.0-2.6 mmol/l

Remember toxicity – if level > 2.0 mEq/l

Life threatening intoxication – > 3.5 mEq/l

32. Akathisia:

- A. Neurotic disease
- B. Seen in schizophrenia
- C. Side effect of lithium

D. Side effect of antipsychotic drugs.

Akathisia manifests as motor restlessness. It is due to blockade of dopamine type-2 receptors in striatum.

33. Neuroleptic malignant syndrome is characterized:

A. Bradycardia

B. Labile hypertension

C. Hypotonia

D. Hypothermia

Feature of NMS – fever, elevated, EPS, catatonic symptoms, autonomic dysfunction

34. Akathisia is treated by:

A. Haloperidol

B. Fluoxetine

C. Propranolol

D. Lithium

Drug of choice – Propranolol. Benzodiazepines are useful.

35. Feature of akathisia is:

A. Cogwheel rigidity

B. Oculogyric crisis

C. Restlessness

D. Periodic movements

Motor restlessness is the key feature of akathisia Cogwheel rigidity occurs in parkinsonism Oculogyric crises is an acute dystonia Perioral movements could be rabbit syndrome or Tardier dyskinesia.

36. Malignant neuroleptic syndrome is treated by:

- A. Dantrolene
- B. Diazepam
- C. Haloperidol
- D. Chlorpromazine Bromocriptine can also be used.

37. Side effect of clozapine is:

- A. Within one week – neutropenia
- B. D1- ve, D2 +ve
- C. Agranulocytosis
- D. Excitement

Clozapine must be stopped immediately.

38. The drug of choice for obsessive-compulsive disorder is:

- A. Haloperidol
- B. Clomipramine
- C. Amitryptilline
- D. Diazepam

Dose of Clomipramine – 75 to 300 mg 1 day.

39. Lithium is used in all except:

- A. Endogenous depression
- B. Recurrent attacks of mania
- C. Schizoaffective psychosis
- D. Paranoid psychosis

40. Side effect of chlorpromazine for which anti cholinergic is used:

- A. Blurred vision
- B. Oculogyric crises
- C. Hypotension
- D. Dry mouth

Answer

1.A 2.D 3.C 4.A 5.C 6.B 7.D 8.C 9.D 10.D 11.C 12.A 13.A 14.A 15.A 16.A 17.A 18.B 19.B
20.A 21.B 22.D 23.C 24.A 25.D 26.C 27.B 28.A 29.A 30.D 31.B 32.D 33.B 34.C 35.C 36.A
37.C 38.B 39.D 40.B 41.B 42.A 43.C 44.A 45.A 46.A 47.C 48.D 49.C 50.A 51.A 52.E 53.A
54.D 55.C 56.C 57.B 58.D 59.A 60.A 61.C 62.A 63.B 64.A 65.B

41. Newer nonsedative, nonhypnotic anxiolytic is:

- A. Alprazolam
- B. Buspirone
- C. Lorazepam
- D. Diazepam

Buspirone acts as a partial agonist at 5HT_{1A} receptor. It doesn't have anticonvulsant and muscle relaxant properties.

42. The drug of choice for panic disorders is:

- A. Imipramine
- B. Nitrazepam
- C. Clonidine
- D. Diazepam

Small doses of antidepressants are used (imipramine and fluoxetine).

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43. In drug induced parkinsonism, benhexol has got no role in:

- A. Sialorrhea
- B. Tremor
- C. Akathisia
- D. Rigidity

Akathisia is treated with β blockers and benzodiazepines (propranolol).

44. In fluoxetine and imipramine, the main difference is in: –

- A. Less side effects
- B. Onset of action
- C. Effect of OCD
- D. Duration of action

45. Which of the following drug has the minimum extra pyramidal side effect?

- A. Clozapine
- B. Metoclopramide
- C. Reserpine
- D. Trifluoperazine

46. Which of the following drugs produce rapid induction of sleep with least influence of sleep architecture?

- A. Zaleplon
- B. Diazepam
- C. Chlorpromazine

D. Haloperidol

Dosage of zaleplon 5 to 10 mg

As it has a half-life of one hour it is useful in initial insomnia

47. All of the following are antidepressants, except:

A. Imipramine

B. Amitryptilline

C. Risperidone

D. Citalopram

Imipramine and amitryptilline are tricyclic anti-depressants; citalopram is a SSRI
risperidone is an atypical antipsychotic.

48. Which of the following side effects of chlorpromazine are ameliorated by anticholinergic antiparkinson medication?

A. Confusion

B. Hypotension

C. Blurred vision

D. Oculogyric crisis

49. Lithium is used to treat:

A. Hysteria

B. Phobia

C. Mood disorders

D. Acute organic brain syndrome

50. Lithium is used in:

A. Acute mania

- B. Depression
- C. Hyperkinetic disorder
- D. All of the above.

51. The least affected organ in lithium toxicity is:

- A. Liver
- B. Heart
- C. Kidney
- D. Brain

There is no hepatic metabolism for lithium in body.

52. Treatment of Panic attack includes the use of:

- A. Diazepam
- B. Imipramine
- C. Fluoxetine
- D. Clonazepam
- E. Both b + c

Both imipramine and fluoxetine in small doses are useful in treating panic disorder

53. All the following are anxiolytic except:

- A. Fluoxetine
- B. Buspirone
- C. Diazepam
- D. Nitrazepam

Fluoxetine is an antidepressant. It acts by selecting serotonin reuptake inhibition

54. Lithium is treatment of choice for:

A. Unipolar MDP prophylaxis

B. Bipolar MDP

C. Schizophrenia

D. Acute mania

Lithium is indicated in prophylaxis of bipolar MAP and acute mania.

55. The most useful drug in enuresis is:

A. Haloperidol

B. Diazepam

C. Imipramine

D. Chlorpromazine

Imipramine is the drug of choice in nonorganic enuresis usual dose range is 25 to 75 mg 1 day.

56. The least extra pyramidal effect is seen with:

A. Haloperidol

B. Thioridazine

C. Clozapine

D. Chlorpromazine

Drugs with minimal EPS are clozapine, quetiapine, sulpiride and ziprasidone.

Drugs useful in Heroin withdrawal are clonidine, methadone, buprenorphin, LAAM, and dextropropoxyphene.

57. Long-term therapy of lithium causes:

- A. Neutropenia
- B. Hypothyroidism
- C. Hepatotoxicity
- D. Bone marrow depression

Long-term lithium use causes renal side-effects also.

58. All of the following are selective serotonin (5HT) reuptake inhibitors, except:

- A. Fluvoxamine
- B. Fluoxetine
- C. Paroxetine
- D. Olanzapine

SSRI's are fluoxetine, fluvoxamine, paroxetine, sertraline, citalopram.

59. A psychiatric patient on tricyclic antidepressants presents with bradycardia, hypotension, decreased sweating, and retention of urine. The most likely drug used is:

- A. Amitriptyline
- B. Fluoxetine
- C. Selegiline
- D. Lithium

Decreased sweating, retention of urine, bradycardia are anticholinergic side effects of amitriptyline, hypotension is due to α_1 -adrenergic blockade.

60. A 63-year-old man who is taking amitriptyline suddenly develops confusion, urinary retention and blurring of vision. The cause is:

- A. Anticholinergic side-effects

- B. Reactive depression
- C. Emergence of negative symptoms
- D. CVA

61. A patient was found stuporous and he did not eat or sleep the whole day. On examination, he was found to be con-scious. The treatment should be: (AIIMS-2000)

- A. ECT
- B. Antipsychotics
- C. Antidepressants
- D. Neuroleptic

62. 30-year-old Bano Begum was brought to the casualty in a state of altered sensorium. She was on lithium treatment for the affective disorder and suffered an attack of epileptic fits. On examination she has tremors, increased deep tendon reflexes, and incontinence of urine. She also had undergone an episode of severe gastroenteritis 2 days ago. Lithium level in the serum is 1.95 mEq/l. The most likely cause is:

- A. lithium toxicity
- B. severe dehydration
- C. Manic stupor
- D. Epileptic fits

63. The most common cardiac abnormality associated with use of lithium in 1st trimester of pregnancy:

- A. Deacon's syndrome
- B. Epstein's anomaly of tricuspid valve

C. PDA

D. Coarctation of aorta

In Epstein's anomaly there is a distortion and down ward displacement of tricuspid valve. Use of lithium is contraindicated in the 1st trimester of pregnancy.

64. Vasanti, 45-year-old, was brought to casualty with ab-normal movements which included persistent deviation of the neck to the right side. One day earlier, she had been prescribed haloperidol 5mg three times daily by the psychiatrist. She also had an altercation with her husband and recently. Which of the following is the most likely cause for her symptoms?

A. Acute drug dystonia

B. Conversion reaction

C. Acute psychosis

D. Cerebrovascular accident.

Acute dystonia is an acute extra pyramidal symptom caused by antipsychotic medication. In this case, the neck muscles are affected by dystonia.

65. Contraindications to lithium administration include:

A. An administration in combination with chlorpromazine

B. The presence of renal disease

C. Any occurrence of the symptoms of schizophrenia

D. The presence of depression

E. An administration in combination with imipramine.

Answer

1.A 2.D 3.C 4.A 5.C 6.B 7.D 8.C 9.D 10.D 11.C 12.A 13.A 14.A 15.A 16.A 17.A 18.B 19.B
20.A 21.B 22.D 23.C 24.A 25.D 26.C 27.B 28.A 29.A 30.D 31.B 32.D 33.B 34.C 35.C 36.A
37.C 38.B 39.D 40.B 41.B 42.A 43.C 44.A 45.A 46.A 47.C 48.D 49.C 50.A 51.A 52.E 53.A
54.D 55.C 56.C 57.B 58.D 59.A 60.A 61.C 62.A 63.B 64.A 65.B

Schizophrenia

1. Bleuler's criteria for schizophrenia include all the following, except:

- A. Loosening of association
- B. Automatism
- C. Inappropriate affect
- D. Ambivalence

Fundamental symptoms of schizophrenia were explained by Bleuler. They include (4 A's)

- 1. Loosening of association
- 2. Ambivalence
- 3. Autism
- 4. Affective disturbances

2. A drug of therapeutic benefit in schizophrenia is:

A. Fluphenazine

B. Imipramine

C. Lithium

D. Doxepin

Others include

Penfluridol

Flupenthixol deconate

Haloperidol deconate

Adjuvant antiparkinsonian medications to prevent extrapyramidal symptoms include:

1. Trihexy phenidyl (pavitane)

2. Orphenadrin

3. Procyclidine

3. Schizophrenia is characterized by all the following except:

A. Delusion of control

B. Delusion of reference

C. Waxy flexibility

D. Altered sensorium

4. Which type of schizophrenia has a late onset and has good prognosis:

A. Simple schizophrenia

B. Hebephrenic schizophrenia

C. Catatonic schizophrenia

D. Paranoid schizophrenia

Onset of catatonic subtype is usually acute, in the late 2nd and early 3rd decade. The course is usually episodic and recovery is complete.

5. In schizophrenia, early onset with poor prognosis is seen in:

A. Simple

B. Hebephrenic

C. Catatonic

D. Paranoid

Onset usually in the early 2nd decade, recovery from the episode classically never occurs. Hebephrenic (or disorganized) schizophrenia has one of the worst prognoses among subtypes of schizophrenia.

6. All the following are first-order rank symptoms of schizo-phrenia except:

A. Depersonalization

B. Running commentary

C. Primary delusion

D. Somatic passivity

7. A person quarrels and hits his neighbor. The next day he starts feeling that he is being followed by the police who may arrest him. He also feels that his neighbors are controlling him through radio waves. The diagnosis is:

A. Delusions of persecution

B. Passivity

C. Thought insertion

D. Schizophrenia

To see the criteria for paranoid schizophrenia.

8. A 45-year-old male presents with waxy flexibility, negativism and decreased motor behaviour. The most probable diagnosis is:

- A. Hebephrenic SZP
- B. Catatonic SZP
- C. Paranoid SZP
- D. Simple SZP

Clinical features of catatonic schizophrenic are:

1. Mutism
2. Rigidity
3. Negativism
4. Posturing
5. Stupor
6. Echolalia, Echopraxia
7. Waxy flexibility
8. Ambitendency
9. Mannerisms, stereotypes, automatic, obedience, variegation, preservation, etc.

Clinical features of paranoid SZP:

1. Delusion of persecution, reference, grandeur, control, infidelity.
2. Hallucinations usually have a persecutory/grandiose content
3. Disturbance of affect, volition, speech and motor behavior.

Onset – insidious, occurs later in life, late 3rd and early 4th decade.

Clinical features of hebephrenic or disorganized SZP:

1. Marked thought disorder incoherence of hallucinations are fragmentary and changeable.

2. Emotional disturbances

Onset—insidious, usually in early 2nd decade. The recovery from the episode classically never occurs (This is one of the worst prognosis).

Clinical features of simple SZP:

1. Presence of characteristic negative symptoms of residual schizophrenia (like marked social withdrawal, shallow emotional response, loss of initiation and drive).

Delusions and hallucination are usually absent.

Prognosis is usually very poor. Clinical features of residual and latent SZP:

1. Prominent negative schizophrenic symptoms.

2. Evidence in the past of at least one clear cut psychotic episode.

3. A period of at least 1 yr during which the intensity and frequency of florid symptoms such as delusions and hallucination have been minimal or substantially reduced and the negative schizophrenic syndrome has been present.

4. Absence of dementia/other organic brain disease/ disorder and of chronic depression or institutionalism sufficient to explain the negative impairments.

9. A 16-year-old boy does not attend school because of the fear of being harmed by school mates. He thinks that his class mates laugh at and take about him. He is even scared of going out to the market. He is most likely suffering from:

A. Anxiety neurosis

B. Manic-depressive psychosis

C. Adjustment Reaction

D. Schizophrenia

This person has:

Delusion of persecution

Delusion of reference

Poor socio occupational functioning.

10. The most frequent period for onset of schizophrenia:

A. Childhood

B. Adolescence

C. Middle adulthood

D. Old age

11. The major neurotransmitter hypothesis states that there is a hyperactivity of dopaminergic systems in:

A. Hysteria

B. Anxiety enuresis

C. Schizophrenia

D. Obsession

There is final increase of dopamine at the postsynaptic receptors in schizophrenia.

12. Auditory (third person) hallucinations, features of affect, disturbance, delusional perception, perplexity are seen in:

A. Anxiety neurosis

B. Hysteria

C. Depression

D. Schizophrenia

Schizophrenia was earlier known as dementia praecox. This term was coined by Eugen Bleuler. Schizophrenia means mental splitting. He described the characteristic symptoms known as the fundamental symptoms of schizophrenia which is called as the 4A's of Bleuler. 1. Ambivalence 2. Autism 3. Affect disturbances 4. Loosening of Association. He also described the active symptoms which included symptoms like delusions, hallucinations and negativism. Kurt Schneider described certain symptoms which are popularly called as Schneider's first rank symptoms. They are as follows:

Hallucinations:

- A. Audible thoughts
- B. Voice heard arguing
- C. Voice commenting on one's action

Thought alienation phenomena:

- A. Thought withdrawal
- B. Thought insertion
- C. Thought diffusion or broad coasting

Passivity phenomena:

- A. Made feelings or affect
- B. Made impulses
- C. Made coalition or acts
- D. Somatic passivity

Delusional perception – normal perception has a private and illogical meaning:

He also described second rank symptoms like other form of hallucinations, perplexity and affect disturbances. Incidence is 1/1000.

13. Schneider's diagnostic criteria for schizophrenia include the following first rank symptom:

- A. Autism

- B. Echolalia
- C. Thought insertion
- D. Suicidal tendency

14. Incidence of schizophrenia in India is:

- A. 1-5 per 1000
- B. 0.015-0.5 per 1000
- C. 5-10 per 1000
- D. 10-15 per 1000

15. The prognosis of schizophrenia is unproved by:

- A. Atypical symptoms
- B. Emotional flattening
- C. Strong family history of schizophrenia
- D. None of these

Also remember Type I and Type II schizophrenia – coined by T J Crow.

16. All of the following are Schneider's first rank symptoms except:

- A. Auditory hallucination
- B. Delusional percept
- C. Passivity phenomenon
- D. Delusions of self-reference

Also remember-FRS is not specific to schizophrenia Total FRS – 11

An easy method to remember:

I. Three types of Hallucinations 1. Audible thoughts, 2. Voice discussing, 3. Voice commenting

II. Three types of thought disturbance 1. thought withdrawal, 2. thought inertia, 3. thought broadcast

III. Three types of made phenomena 1. Made affect, 2. Made impulse, 3. Made volition

Other-2: Somatic passivity and delusional percept.

17. Simple schizophrenia is best characterized by the following feature:

- A. Social withdrawal
- B. Persistent hallucination
- C. Persistent delusions
- D. Formal thought

Simple schizophrenia – Has an early onset, insidious and progressive course. There is preponderance of negative symptoms. Delusions and hallucinations are ill systematized. Prognosis is poor.

18. Paranoid schizophrenia presents with:

- A. Abnormal behaviors
- B. Persecutory or grandiose delusions
- C. Psychomotor disturbance
- D. Incoherence and incongruous affect

Paranoid subtype of schizophrenia is characterized by delusions of persecution/reference/grandeur/infidelity and hallucinations. Personality deterioration is much less.

19. The following one is a first rank symptom in schizophrenia:

- A. Hallucination

B. Thought insertion

C. Delusions

D. Negativism

Schneider introduced concept of first rank symptom First rank symptoms are not specific to schizophrenia.

20. Psychomotor features are seen in the following type of schizophrenia:

A. Paranoid

B. Residual

C. Catatonic

D. Hebephrenic

Catatonia can present as excitement and stupor.

Answer

1.B 2.A 3.D 4.C 5.B 6.A 7.D 8.B 9.D 10.B 11.C 12.D 13.C 14.A 15.D 16.D 17.A 18.B 19.B
20.C 21.A 22.D 23.B 24.D 25.C 26.D 27.B 28.B 29.A 30.C 31.B 32.C 33.D 34.C 35.D 36.C
37.B 38.B 39.A 40.B 41.A 42.A 43.C 44.D 45.B 46.A 47.B 48.D 49.A

21. Percentage of schizophrenia affected patients in a population is (life time risk of schizophrenia):

A. 1 percent

B. 2 percent

C. 0.5 percent

D. 5 percent

22. Percentage of monozygotic twins with schizophrenia:

- A. 0.1 percent
- B. 1 percent
- C. 10 percent
- D. Over 50 percent

Actual concordance rate for monozygotic twins 46 percent

23. Bad prognosis in schizophrenia is associated with the following factors:

- A. Catatonia
- B. Gradual onset
- C. Presence of Depression
- D. Absence of family history

24. Which of the following is not a feature of schizophrenia?

- A. Literally means "Splitting of mind"
- B. Peak incidence occurs in 15 to 30 years age group
- C. People with low intelligence are more predisposed
- D. Predominantly a disease of females

25. All are features of schizophrenia except:

- A. Altered affect
- B. Incongruity of emotion
- C. Altered intellectual functions
- D. Neologisms

26. Schizophrenia like picture is a side effect of:

- A. Fortwin

B. Phenobarbitone

C. Morphine

D. Amphetamine

Acute amphetamine intoxication can present like schizophrenia (paranoid subtype).

27. Schizophrenia with worst prognosis:

A. Paranoid

B. Undifferentiated

C. Catatonia

D. Differentiated

Subjects of schizophrenia with poor prognosis are – disorganized, simple, undifferentiated.

28. The most common type of hallucinations seen in schizo-phrenia is:

A. Tactile

B. Auditory

C. Visual

D. Olfactory

Types are thought echo, elementary, third person, running commentary.

29. The good prognostic factor in schizophrenia is:

A. Affective disorder

B. Gradual onset

C. Family history

D. Hebephrenic type

30. Drug of choice for the treatment of negative symptoms of schizophrenia is:

- A. Chlorpromazine
- B. Haloperidol
- C. Clozapine
- D. Doxepine

Atypical antipsychotics (risperidone, clozapine, olanzapine, ziprasidone) are effective in the treatment of negative symptoms.

31. Negative symptoms of schizophrenia include all of the following, except:

- A. Affective blunting and flattening
- B. Hallucination
- C. Anhedonia
- D. Poverty of thought content

Negative symptoms – Apathy, a motivation, poverty of speech, affective blunting, a socializations.

32. One of these symptoms does not occur in schizophrenia:

- A. Thought alienation
- B. Paranoid delusion
- C. Disorientation
- D. Hallucination

33. Which type of schizophrenia has an early onset and bad Prognosis?

- A. Hebephrenic
- B. Catatonia
- C. Schizo-affective

D. Simple schizophrenia.

34. Best prognosis is seen with which symptom of schizo-phrenia:

A. Apathy

B. Anhedonia

C. Auditory hallucination

D. Poverty of thought

Apathy, anhedonia, and poverty of thought are negative symptoms and indicate poor prognosis.

35. All of the following are characteristic features of cata-tonic schizophrenia, except:

A. Mannerism

B. Negativism

C. Echolalia

D. Flight of ideas

Features of catatonia mutism, rigidity, negativism, posturing, stupor, echolalia, echopraxia, waxy flexibility, ambitendency, mannerism, verbigeration.

36. The Primary defect in schizophrenia is:

A. Delusions

B. Hallucinations

C. Thought disorder

D. Confabulation

37. The commonest type of schizophrenia is:

A. Hebephrenic

B. Catatonic

C. Simple

D. Paranoid

38. A bad prognostic factors in schizophrenia is:

A. Late onset

B. Family history of schizophrenia

C. Affective symptoms

D. Presence of depression

39. Schizophrenia-like syndrome is seen in drug abuses of:

A. Amphetamine

B. Cocaine

C. Opium

D. Pentazocine

40. All the following are features of schizophrenia, except:

A. Hallucination

B. Elated mood

C. Autochthonous derision

D. Anhedonia

Answer

1.B 2.A 3.D 4.C 5.B 6.A 7.D 8.B 9.D 10.B 11.C 12.D 13.C 14.A 15.D 16.D 17.A 18.B 19.B
20.C 21.A 22.D 23.B 24.D 25.C 26.D 27.B 28.B 29.A 30.C 31.B 32.C 33.D 34.C 35.D 36.C
37.B 38.B 39.A 40.B 41.A 42.A 43.C 44.D 45.B 46.A 47.B 48.D 49.A

41. A 65-year-old man feels there are some people living upstairs who are going to take

all his wealth and are always criticizing him, while his attendant states that there is no one living upstairs. The attendant also complains of the man's weird behavior like keeping his shoes in the fridge, had wearing his vest over his shirt. The most likely diagnosis is:

- A. Delusion
- B. Schizophrenia
- C. Depression
- D. Hallucination

In this case pt has delusions of persecutions of reference and this is likely to be a case of paranoid schizophrenia.

42. A 22-year-old female hears voices asking her to do emphasizing thing like sleep with the person sitting next to her and she does so. She is a schizophrenic on treatment with chlorpromazine for the past 10 years. The intensity of the voice decreases but persists. She is to be treated with:

- A. Clozapine
- B. Haloperidol
- C. Tianeptine
- D. Sulpiride

Clozapine is effective in management of treatment-resistant schizophrenia.

43. Kalloo, a 24-year-old occasional alcoholic shows a change in behaviors. He suspects that people are conspiring in behaviors; he suspects that people are conspiring against him though his father states that there is no reason for his fears. He also gets hallucinations of voice commenting on his actions. What is the most probable diagnosis?

- A. Delirium tremens
- B. Alcohol-induced psychosis

C. Schizophrenia

D. Delusional disorder

In this case as patients have voices commenting on his actions, he is likely to have schizophrenia.

44. A schizophrenic patient is on antipsychotic, after a few days, he is not sleeping, not eating properly, not taking any interest in his surroundings. This indicates the possibility of all of the following except:

A. Emergence of negative symptoms

B. Major depression

C. Parkinsonian features

D. Reacting to demands of external environment

45. Laloo, a 40-year-old, has recently started writing book. The matter in his book cannot be understood by anybody since it contains words which are not there in any dictionary and the theme is very disjointed, Nowadays he has become very shy and self-absorbed when he addresses people he speaks about metaphysical ideas what is the weekly diagnosis:

A. Mania

B. Schizophrenia

C. A genius writer

D. Delusional disorder

In this case patient seems to have formal thought disorder which is suggestive of schizophrenia.

46. Kalloo, a 25-year-old male living alone, starts suspecting that his neighbors are conspiring, against him. He lodges a complaint against them in the police station, which he is unable to prove. He also has auditory hallucinations. The symptoms have been present for the past 2 years. The diagnosis is:

- A. Schizophrenia
- B. Depression
- C. Mania
- D. Acute psychosis

In this case delusion of persecution and auditory hallucinations have been present for 2 years, the diagnosis is likely to be schizophrenia.

47. 76-year-old TM Naidu presents with persecutory delusions third person hallucinations and disorganized behaviour since one month. His tendon reflexes are brisk and pupils normal, while his mini mental score is 20/30 and his memory is impaired. The diagnosis is:

- A. Dementia
- B. Schizophrenia
- C. Transient global amnesia
- D. MDP

In view of fulfilling 1 month criteria also presence of persecutory delusions disorganized behaviour and third person hallucinations the diagnosis is. schizophrenia.

48. The most accepted hypothesis explaining the biological basis for schizophrenia is:

- A. The transmethylation hypothesis
- B. The double bind hypothesis
- C. The serologic hypothesis
- D. The dopamine hypothesis
- E. The endogenous opiate hypothesis

49. A person for the past 10 months has not been taking care of himself, laughs by

himself, and talks about spiritualis-tic ideas alone in the room. The most likely diagnosis is:

- A. Schizophrenia
 - B. Highly spiritualistic person
 - C. Mania
 - D. Psychosis
-

Answer

1.B 2.A 3.D 4.C 5.B 6.A 4.D .B 9.D 10.B 11.C 12.D 13.C 14.A 15.D 16.D 17.A 18.B 19.B
20.C 21.A 22.D 23.B 24.D 25.C 26.D 27.B 28.B 29.A 30.C 31.B 32.C 33.D 34.C 35.D 36.C
37.B 38.B 39.A 40.B 41.A 42.A 43.C 44.D 45.B 46.A 47.B 48.D 49.A

Others

1. In direct ECT, the intraocular tension is:

- A. Increased
- B. Decreased
- C. Unchanged
- D. Increased only in patients with retinal detachment

2. ECT is absolutely contraindicated in:

- A. Pregnancy
- B. Very ill patients
- C. Raised intracranial pressure
- D. Heart disease

Absolute contra indication:

1. Raised IC tension. Relative contra indications are:

- 1. Recent MI
- 2. Severe HT
- 3. CVA
- 4. Severe pulmonary disease
- 5. Retrial detachment
- 6. Phaeochromocytoma

3. The commonest side-effect of modified ECT is:

- A. Arrhythmia
- B. Amnesia
- C. Body ache
- D. Convulsions

Both anterograde and retrograde memory distributions are common.

Others include – headache, confusion, emergent mania, CVS dysfunction, prolonged apnea/seizure.

Unilateral ECT – causes less memory disturbance.

4. ECT is not useful in the treatment of:

- A. Chronic schizophrenia
- B. Catatonic schizophrenia
- C. Endogenous depression
- D. Acute psychosis

Schizophrenia as such is not a primary Indication for ECT.

Indications for ECT would include:

Catatonic stupor

Catatonic excitement

Agitation/aggression not controlled with drugs.

5. Systemic desensitization is done in:

- A. Hypochondriasis
- B. Phobia
- C. Depression
- D. Mania

Other indications are obsessions-compulsions, and certain sexual disorders. Systematic desensitization (behaviors therapy) developed by Joseph Wolpe. This consists of 3 steps:

1. Relaxation training
2. Hierarchy construction
3. Desensitization of stimulus

Flooding, aversion therapy, and positive reinforcement are other forms of behaviors

therapy

6. Behaviour therapy to change maladaptive behaviors using response as reinforce uses the principles of:

- A. Classical conditioning
- B. Modeling
- C. Social learning
- D. Operant conditioning

Classical conditioning or respondent conditioning (Ivan Pavlov)

Operant conditioning (BF Skinner)

7. Cognitive therapy is useful for:

- A. Paranoia
- B. Depression
- C. Mania
- D. Schizophrenia

Developed by Beck and Meichenbaum

Aims to correct maladaptive thinking.

8. The only definite contraindication to ECT is:

- A. Aortic aneurysm
- B. Brain tumor
- C. Myocardial disease
- D. Glaucoma

This is because of raised intracranial tension. Relative contraindications of ECT are:

Recent myocardial infarction

Severe hypertension Cerebrovascular accident

Severe pulmonary disease

Retinal detachment

Phaeochromocytoma

9. ECT is the treatment of choice in:

A. Hysteria

B. Hypomania

C. Severe depression

D. Chronic schizophrenia

10. Psychotherapy is most useful in:

A. Endogenous depression

B. Phobia

C. MDP

D. Hysteria

11. Absolute contraindication of ECT is:

A. First trimester pregnancy

B. Second trimester pregnancy

C. Third Trimester pregnancy

D. Raised intracranial tension

Raised ICT is the only absolute contradiction.

12. Which of the following is true of ECT?

- A. Treatment of depression
- B. Contraindicated in pregnancy
- C. Require more than 180 volts
- D. All are true

Voltage used – 90 to 159 volts

Usual current strength – 200 to 1600 mA

ECT can be safely administered to a pregnant woman.

13. ECT is given as first line treatment in:

- A. Emotionally unstable character disorder
- B. Hysterical psychosis
- C. Paranoid schizophrenia
- D. Endogenous depression with severe suicidal risk Use of ECT in mania and schizophrenia is not a treatment of choice.

14. Dexamethasone suppression test can be used to diag-nose:

- A. Schizophrenia
- B. Depression
- C. Phobia
- D. Personality disorder

In depression there is cortical hyper secretion and this can be defected by dexamethasone suppression test.

15. An absolute contraindication to ECT is:

- A. Brain tumour

B. Glaucoma

C. Aortic aneurysm

D. Myocardial disease

16. Memory disturbance of ECT recovers in:

A. Few days to few weeks

B. Few weeks to few months

C. Few months to few years

D. Permanent

17. ECT causes:

A. Anterograde amnesia

B. Retrograde amnesia

C. Both of the above

D. None of the above

18. Desensitization form of behaviors therapy for:

A. Anxiety neurosis

B. Hypochondriacally neurosis

C. Phobic disorder

D. Depression

19. In which of the following is behaviour therapy helpful:

A. Schizophrenia

B. Agoraphobia

C. Personality disorders

D. Neurotic depression

20. Cardinal elements in behaviour therapy:

A. Systematic desensitization and flooding

B. Self-awareness of maladaptive patterns of learned behaviour

C. Modification of negative patterns of thinking

D. Exploration of repressed unpleasant experiences Systematic desensitization and flooding are techniques of behaviors therapy. Psychoanalytic therapy explores repressed experiences.

21. ECT is useful in one of these conditions:

A. Obsessive-compulsive neurosis

B. Dementia

C. Depression with suicidal risk

D. Personality disorder

Answer

1.B 2.C 3.B 4.A 5.B 6.A 7.B 8.B 9.C 10.D 11.D 12.A 13.D 14.B 15.A 16.B 17.C 18.C 19.B
20.B 21.C

1. All the following are defense mechanisms of the ego, except:

A. Projection

B. Conversion

C. Reaction formation

D. Transference

Classified under Narassistic, immature, neurotic, mature.

2. Operant condition with paradigm pain stimulus given to a child for behaviour therapy is:

- A. Positive reinforcement
- B. Negative reinforcement
- C. Punishment
- D. Negotiation

3. Psychoanalysis was discovered by:

- A. Alder
- B. Bleuler
- C. Morton
- D. Sigmund Freud

Sigmund Freud (1856 – 1939) has done major contribution to psychiatry. He coined the terms free association, psychoanalysis, psychodynamics, oedipus complex electra complex, penis envy, primal scene, ego defense mechanisms, repression, psychological determinism, pleasure principle and reality principle. He is the founder of psychoanalysis.

Some of his significant contributions are interpreta-tion of dreams, theory of infantile sexuality, structural and topographical model of mind, theory of instincts, psychopathology of everyday like and stages of psycho sexual development. Alfred Adler – coined the terms like inferiority complex, will power, and criticality. He is the founder of school of individual psychology. Eugen Bleuler – Coined the term schizophrenia, described cardinal symptoms of schizophrenia.

4. Appropriate management of phobias includes:

- A. Systematic desensitization
- B. Chlorpromazine

C. Bio feed base

D. ECT

Behavioral therapy is the treatment of choice

Techniques used are:

Flooding

Systematic desensitization

Exposure and response prevention

Relaxation techniques

5. Mature defense mechanism is:

A. Denial

B. Anticipation

C. Projection

D. Reaction

Other mature defenses are:

Sublimation, suppression, humor, altruism, ascetism.

6. Mature defense mechanism is seen in:

A. Regression

B. Altruism

C. Repression

D. None

Other mature defenses:

Ascetism

Anticipation

Sublimation

Suppression

Humor

7. That part of the mind which is working on reality principle is:

A. Id

B. Ego

C. Super ego

D. Ego-ideal

Id, ego and super ego are three structures of mind. Ego is predominantly conscious. It is guided by reality principle.

8. One of the important defense mechanism is:

A. Anticipation

B. Confabulation

C. Repression

D. Suppression

Repression is a primary defense mechanism Suppression is a mature defense mechanism Alienation and confabulation are not defense mechanisms.

9. Which of the following excludes painful stimuli from awareness?

A. Repression

B. Projection

C. Rationalism

D. Reaction formation

Repression and denial are the defense mechanisms which exclude painful stimuli from awareness.

Answer

1.D 2.C 3.D 4.A 5.B 6.B 7.B 8.C 9.A

1. The one who has said that the seat of mind is in the brain:

A. Galen

B. Hippocrates

C. Plato

D. Aristotle

2. The one who developed theory of humors to explain moods and emotions:

A. Galen

B. Meduna

C. Harlow

D. Cullen

3. Who coined the term neurosis?

- A. Esquirol
- B. William Cullen
- C. Benjamin Rush
- D. William Sargant

4. Who coined the term psychiatry?

- A. Johann Wyer
- B. Johann Reil
- C. John Conolly
- D. Philippe Pinel

5. Who is the founder of modern psychiatry?

- A. JED Esquirol
- B. Prichard
- C. Morel
- D. Griesenger

6. Who coined the terms "catatonia, cyclothymia, Verbig-eration, and symptom complex"?

- A. KL Kahlbaum
- B. Kraeplin
- C. Hecker
- D. Esquirol

7. Who coined the term dementia praecox?

- A. Emil Kraeplin

B. Morel

C. Wernicke

D. Karlkiest

8. Who coined the term hypnotism?

A. James Braid

B. John Elliotson

C. J M Charcot

D. Franz Anton Mesmer

9. Who is the father of psychoanalysis?

A. Sigmund Freud

B. Bernheim

C. Adler

D. Jung

10. The one who coined the word schizophrenia is:

A. Eugen Bleuler

B. Emil Kraepelin

C. Morel

D. Esquirol

11. Who pioneered insulin coma therapy for schizophrenia?

A. UGO Cerletti

B. Manfred Sakel

C. Meduna

D. Wagner

12. Who is the founder of electrical apparatus for producing convulsion?

A. Von Meduna

B. UGO Cerletti and Bini

C. Scribonius Largus

D. Egas Monis

13. The one who was awarded the Nobel Prize for psycho-surgery and who was shot and wounded by ex-patient?

A. Egas Monis

B. Manfred Sakel

C. UGO Cerletti

D. Von Meduna

14. The proponent of chlorpromazine:

A. Jean Delay and Pierre Denicker

B. Cohen

C. Hoffman

D. Kahn

15. The proponent of imipramine:

A. Roland Kuhn

B. Cohen

C. Bein

D. Kline

16. The one who described psychosis of LSD is:

A. Hoffman

B. Kuhn

C. Bein

D. Jean Delay

17. Who is the proponent of lithium?

A. John Cade

B. Jean Delay

C. Joseph Gall

D. Roland Kuhn

18. The proponent of MAOI is:

A. Nathaniel Kline

B. Roland Kuhn

C. John Kane

D. Jean Delay

19. Who described frontal lobe syndrome in his patient Phineas Gage?

A. Harlow

B. Esquirol

C. Joseph Gall

D. Cullen

20. Who described mental effects of mescaline?

A. Lewin

B. Hoffman

C. Denicker

D. Bein

Answer

1.B 2.A 3.B 4.B 5.A 6.A 7.A 8.A 9.A 10.A 11.B 12.B 13.A 14.A 15.A 16.A 17.A 18.A 19.A
20.A 21.A 22.A 23.A 24.A 25.A 26.A 27.A 28.A 29.A 30.B 31.A 32.A 33.A 34.C 35.A 36.A
37.A 38.A 39.A 40.A 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48.A 49.A 50.A 51.C 52.A 53.A
54.A 55.A 56.A 57.A 58.A 59.A 60.A 61.A 62.A 63.A 64.A 65.A 66.A 67.A 68.A 69.A 70.A
71.A 72.A 73.A 74.B 75.A 76.B 77.A 78.A 79.A 80.B 81.A 82.A 83.B 84.B 85.C

21. Who is the father of American psychiatry and the only American physician to sign the declaration of independence?

A. Benjamin Rush

B. Issac Ray

C. Thomas Kirkbride

D. Clifford Beers

22. The first description of alcoholic delirium was given by:

A. Thomas Sutton

B. Thomas Laycock

C. Thomas Willis

D. Thomas Sydenham

23. The beginning of phrenology is:

A. Franz Joseph Gall and Spurzheim

B. Esquirol

C. Harlow

D. Sheldon

24. The term "psychosomatic" was first used by:

A. Johann Christian Heinroth

B. Johann Reil

C. Johann Weyer

D. Ernst Kretschmer

25. The one who gave first account of post partum psycho-sis:

A. Robert Gooch

B. George Robinson

C. Forbes B Winslow

D. Joseph Adams

26. Who first introduced the term psychotherapeia (today psychotherapy):

A. Walter Cooper Dendy

B. George Robinson

C. Robert Gooch

D. Joseph Adams

27. The term neurasthenia- a disease of mental and physical exhaustion was first used by:

A. George Miller Beard

B. Issac Ray

C. Charles Bradley

D. Morton Prince

28. The one who coined the term sadism, masochism, and sexual bondage:

A. Richard Von Kraft-Ebing

B. Herman

C. Heinroth

D. Emil Kraeplin

29. The one who first gave a psychological account of hyste-ria:

A. Jean Martin Charcot

B. Jean Pierre Falret

C. Jean Etienne Dominique

D. Jean Delay

30. The first psychoanalytic defector from Freud and founded the school of individual psychology is:

A. Carl Jung

B. Alfred Adler

C. Otto Rank

D. Karen Horney

31. The one who developed the technique of will therapy:

A. Otto Rank

B. Carl Jung

C. Alfred Adler

D. Adolf Meyer

32. The proponent of Thematic Apperception Test is:

- A. Henry A Murray
- B. Herman Rorschach
- C. Hathaway
- D. Weschler

33. The one who established the first full time medical genetics department in a psychiatric institution in America:

- A. Franz Joseph Kallmann
- B. Kety
- C. Rosenthal
- D. Wender

34. The father of psychobiology:

- A. Carl Jung
- B. Alfred Adler
- C. Adolf Meyer
- D. Karen Horney

35. The proponent of MMPI is:

- A. S R Hathaway and J C McKinley,
- B. Murray and Rorschach
- C. Alfred Binet
- D. Watson and Skinner

36. The proponent of conditioned reflex is:

- A. Ivan Petrovich Pavlov

B. J B Watson

C. B F Skinner

D. Thorndike

37. The proponent of interpersonal theory is:

A. Harrys tack Sullivan

B. Ivan Petrovich Pavlov

C. Erick Erickson

D. Donald Winnicott

38. The proponent of operant conditioning is:

A. B F Skinner

B. Joseph Wolpe

C. Ivan Pavlov

D. J B Watson

39. The one who founded the school of analytical psychology and developed the concept of collective unconscious and personality types- introvert and extrovert:

A. Carl Gustov Jung

B. Erick Erickson

C. Alfred Adler

D. Melanie Klein

40. The concept of anaclytic depression was given by:

A. Rene spitz

B. Leo Kanner

C. Michael Rutter

D. John Bowlby

Answer

1.B 2.A 3.B 4.B 5.A 6.A 7.A 8.A 9.A 10.A 11.B 12.B 13.A 14.A 15.A 16.A 17.A 18.A 19.A
20.A 21.A 22.A 23.A 24.A 25.A 26.A 27.A 28.A 29.A 30.B 31.A 32.A 33.A 34.C 35.A 36.A
37.A 38.A 39.A 40.A 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48.A 49.A 50.A 51.C 52.A 53.A
54.A 55.A 56.A 57.A 58.A 59.A 60.A 61.A 62.A 63.A 64.A 65.A 66.A 67.A 68.A 69.A 70.A
71.A 72.A 73.A 74.B 75.A 76.B 77.A 78.A 79.A 80.B 81.A 82.A 83.B 84.B 85.C

41. The concept of sexual counseling is given by:

A. William H Masters and Virginia E Johnson

B. Kraft Ebing

C. Simon Andre

D. Ay lion and Azrin

42. The concept of intellectual development is given by:

A. Jean Piaget

B. Jean Martin Charcott

C. Jacques Lacan

D. Jean Delay

43. The proponent of cognitive therapy:

A. Aaron Beck

B. Nathan Ackerman

C. Joseph Wolpe

D. J B Watson

44. The one who developed fluoxetine in 1970:

A. Lilly

B. Rosen

C. Khun

D. Bein

45. The who developed sertraline in 1992:

A. Roerig

B. Dupont

C. Barton

D. Hoffman

46. The term Onanism is coined by:

A. Simon Andre

B. Vonkrafft Ebing

C. Masters and Johnson

D. Victor Frankl

47. The founder of behaviourism:

A. J Watson

B. Joseph Wolpe

C. Skinner

D. Ivan Pavlov

48. The concept of therapeutic community was given by:

A. Maxwell Jones

B. Victor Frankl

C. Jacob Moreno

D. Joseph Wolpe

49. The proponent of transaction analysis is:

A. Eric Berne

B. Carl Rogers

C. A Maslow

D. Joseph Pratt

50. The proponent of client centered psychotherapy is:

A. Carl Rogers

B. Victor Frankl

C. Eric Berne

D. Frederich Peris

51. The proponet of group therapy is:

A. Jacob Moreno

B. Joseph Wolpe

C. Joseph Pratt

D. James Braid

52. The proponent of psychodrama is:

A. Jacob Moreno

B. Joseph Wolpe

C. Joseph Pratt

D. James braid

53. The proponent of rational emotive therapy is:

A. Albert Ellis

B. Victor Frankl

C. Eric Berne

D. Otto Rank

54. The proponent of gestalt therapy is:

A. Frederich Peris

B. Skinner

C. Carl Rogers

D. Eric Berne

55. The concept of token economy is given by:

A. Ayllon and Azrin

B. Brown and Berly

C. Maxwell jones

D. Adolf Meyer

56. Who discovered olanzapine in Great Britain in 1982?

A. Elli lilly and company

B. Jean Delay

C. Jannsen

D. Khun

57. Clozapine was discovered in 1958 in:

A. Bern, Switzerland

B. USA

C. France

D. Japan

58. The proponent of family therapy is:

A. Nathan Ackerman

B. Moreno

C. Joseph Pratt

D. James Braid

59. The chief contribution in the area of brief analysis and psychosomatic medicine is by:

A. Franz Alexander

B. Sifenos

C. Friedman

D. Hans Selye

60. The father of suicidology is:

A. Edward schneidman

B. Kreitman

C. Stengel

D. Menninger

Answer

1.B 2.A 3.B 4.B 5.A 6.A 7.A 8.A 9.A 10.A 11.B 12.B 13.A 14.A 15.A 16.A 17.A 18.A 19.A

20.A 21.A 22.A 23.A 24.A 25.A 26.A 27.A 28.A 29.A 30.B 31.A 32.A 33.A 34.C 35.A 36.A
37.A 38.A 39.A 40.A 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48.A 49.A 50.A 51.C 52.A 53.A
54.A 55.A 56.A 57.A 58.A 59.A 60.A 61.A 62.A 63.A 64.A 65.A 66.A 67.A 68.A 69.A 70.A
71.A 72.A 73.A 74.B 75.A 76.B 77.A 78.A 79.A 80.B 81.A 82.A 83.B 84.B 85.C

61. The term agoraphobia was introduced by:

A. Westphal

B. Marks

C. Freud

D. Rogers

62. The term akathisia was first used by:

A. Haskovec

B. Delay

C. Villeneuve

D. Rogers

63. Alcoholic anonymus was developed by:

A. Dr Bob and Bill Wilson

B. Jean Delay and Denicker

C. Ayllon and Azrin

D. Brown and Berly

64. The drug haloperidol was discovered by:

A. Pauljanssen

B. Hoffman

C. Delay

D. Bein

65. The concept of aversion therapy was given by:

A. N V Kantorovich

B. Wolpe

C. Pavlov

D. Watson

66. Who is called the "French Freud?"

A. Jacques Lacan

B. Wilhelm Reich

C. Ackerman

D. Adler

67. The proponent of self actualization:

A. Carl R Rogers

B. Adolf Meyer

C. Adler

D. Carl Jung

68. The concept of psychosocial development is given by:

A. Erikson

B. Piaget

C. Paul Federn

D. Carl Jung

69. The founder of object relation theory:

A. Melanie Klein

B. Pierre Janet

C. Sullivan

D. Eric Berne

70. The pupil of Freud and his principal biographer is:

A. Ernest Jones

B. Alfred Adler

C. Otto Rank

D. Carl Jung

71. Interpersonal psychotherapy was developed by:

A. Klerman

B. Joseph Pratt

C. Sullivan

D. Ackerman

72. The term "Gate Way Drug" is coined by:

A. Robert Dupont

B. Jannsen

C. Hoffman

D. Lewin

73. The institutional neurosis was described by:

A. Barton

B. Bleuler

C. Maxwel Jones

D. Adolf Meyer

74. Who is the father of epidemiology?

A. Sir Thomas Brown

B. Thomas Sydenham

C. Sir Francis Galton

75. Who is the father of eugenics?

A. Sir Francis Galton

B. Sir Thomas Brown

C. Thomas Sydenham

76. The term "pica" was first applied by:

A. Sir William Gull

B. Ambroise Pare

C. Gerald Russel

77. Who first described bulimia nervosa?

A. Gerald Russel

B. Ambroise Pare

C. Sir William Gull

78. The father of psychosomatic medicine:

A. Franz Alexander

B. Johann reil

C. Johann Wyer

79. The one who coined the term biopsychosocial in 1977:

A. George Engel

B. Franz Alexander

C. Helen Deutsch

80. The term stress was coined by:

A. Walter Cannon

B. Hans Selye

C. William Harvey

81. The condition neurocirculatory asthenia was described by:

A. Friedlander and Freyhof

B. Da Costa

C. Wood

82. The term kleptomaniac was coined by:

A. Jean Etienne and Charles-Henri Marc

B. Da Costa

C. Hans Selye

83. Trichotillomania was first characterized by:

A. Esqurol

B. Francois Hallopeau

C. Cannon

84. The term tranquilizer was introduced in:

A. Kuhn

B. Yonkman

C. Bern

85. Primary prevention in psychiatric illness is:

A. Isolation of cases

B. Early diagnosis and treatment

C. Health education and decrease of social stress

D. None of the above

Answer

1.B 2.A 3.B 4.B 5.A 6.A 7.A 8.A 9.A 10.A 11.B 12.B 13.A 14.A 15.A 16.A 17.A 18.A 19.A
20.A 21.A 22.A 23.A 24.A 25.A 26.A 27.A 28.A 29.A 30.B 31.A 32.A 33.A 34.C 35.A 36.A
37.A 38.A 39.A 40.A 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48.A 49.A 50.A 51.C 52.A 53.A
54.A 55.A 56.A 57.A 58.A 59.A 60.A 61.A 62.A 63.A 64.A 65.A 66.A 67.A 68.A 69.A 70.A
71.A 72.A 73.A 74.B 75.A 76.B 77.A 78.A 79.A 80.B 81.A 82.A 83.B 84.B 85.C

1. The ability to focus a mater in hand is called:

A. Memory

B. Attention

C. Concentration

D. Perception

2. Awareness of self and environment is called:

A. Consciousness

B. Perception

C. ThinD. Attention

3. The ability to maintain the focus a matter in hand is called:

A. Concentration

B. Attention

C. Perception

D. Thinking

4. The process of attaching a meaning to a sensation is called:

A. Perception

B. Attention

C. Concentration

D. Thinking

5. The changing and recognizing the information stored in memory in order to create a new information is:

A. Thinking

B. Concentration

C. Perception

D. Memory

6. The process of recalling back of learned material into introspective consciousness is:

A. Memory

B. Thinking

C. Perception

D. Attention

7. The capacity to learn to utilize appropriately what one has learned is called (Global capacity of a person to think rationally and to act effectively at appropriate situations):

A. Intelligence

B. Memory

C. Thinking

D. Learning

8. The set of characteristics that defines the behaviour, thoughts and emotions of an individual is called (endur-ing and pervasive):

A. Personality

B. Trait

C. Conduct

9. A relatively permanent change in behaviour that results from experience is called:

A. Learning

B. Memory

C. Personality

10. The misinterpretation of sensory stimulus is:

A. Illusion

B. Hallucination

C. Delusion

11. The type of body build-asthenic or leptosomatic, pyknic, and athletic type was described by:

A. Kretschmer

B. Sheldon

C. Eysenk

D. Catell

12. The classification of endomorphy, mesomorphy, and ectomorphy was described by:

A. Sheldon

B. Kretschmer

C. Carl Jung

D. Catell

13. Type-A, B personality was described by:

A. Meyer Friedman and Ray Rosenman

B. Eysenck

C. Carl Jung

D. Catell

14. The dimension of personality-introvert and extrovert was described by:

A. Carl Jung

B. Eysenck

C. Carl Rogers

D. Sheldon

15. 16 personality factor is developed by:

A. Raymond Catell

B. Carl Jung

C. Eysenck

D. Allport

16. Two dimensions of personality-stability/neuroticism and extroversion/introversion

was developed by:

- A. Hans Eysenk
- B. Raymond B Catell
- C. Allport
- D. Carl Jung

17. The one who is the most famous for his pioneering work on traits:

- A. Gordon W Allport
- B. Hans Eysenk
- C. Catell
- D. Carl Jung

18. The following concepts were introduced by Piaget:

- A. Schemas
- B. Assimilation
- C. Accommodation
- D. Regression

19. The following are Piaget's stage of cognitive development:

- A. Sensorimotor – Birth to 2 years
- B. Preoperational – 2 to 6 years
- C. Concrete operational – 6 to 12 years
- D. Formal operational – 12 years to adulthood
- E. Language development – 2 to 3 years

20. John Bowlby described a characteristic sequence of events of separation

experience of children from their mother:

- A. Stage of protest, despair, and detachment
- B. Stage of despair, protest, detachment
- C. Stage of detachment, protest, despair

21. The relatively simple mental structure is called as:

- A. Schema
- B. Assimilation
- C. Accommodation

22. Trying to fit our world into our scheme is:

- A. Accommodation
- B. Assimilation
- C. Conservation

23. Changing of our scheme is to fit the characteristics of the world:

- A. Accommodation
- B. Assimilation
- C. Conservation

24. The following intelligence tests are verbal tests:

- A. Wechsler adult intelligence scale (WAIS)
- B. Wechsler intelligence scale for children (WISC)
- C. Wechsler preschool and primary scale of intelligence (WPPSI)
- D. Benton visual retention test

25. Stanford-Binet test is used to assess intelligence in the age group of:

- A. 0 to 2 years

B. 2 to 60 years

C. 2 years to Adult

Answer

1.B 2.A 3.A 4.A 5.A 6.A 7.A 8.A 9.A 10.A 11.A 12.A 13.A 14.A 15.A 16.A 17.A 18.A,B,C 19.
A,B,C,D 20.A 21.A 22.B 23.A 24. A,B,C 25.C 26.A 27.A 28.A 29.A 30.C 31.A 32.A 33.A
34.A 35.A 36.B 37.A 38.A 39.A 40.D 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48. A,B 49.A
50.C 51.D 52.D

26. The part of the personality which works on pleasure principle is:

A. Id

B. Ego

C. Superego

27. The one which is in contact with reality is:

A. Ego

B. Id

C. Superego

28. The part of personality concerned with consciousness is:

A. Superego

B. Ego

C. Id

29. The internalized set of standard is known as:

A. Ego ideal

B. Ego

C. Id

30. Separation of function of some mental processes is called:

A. Denial

B. Displacement

C. Dissociation

D. Projection

31. An unacceptable instinctual drive is rerouted to a socially acceptable action:

A. Sublimation

B. Repression

C. Regression

D. Splitting

32. An irrational feeling or behaviour is made to appear reasonable:

A. Rationalization

B. Reaction formation

C. Regression

D. Repression

33. People or events are seen as being totally bad or totally good:

A. Splitting

B. Sublimation

C. Suppression

D. Isolation

34. Unconscious feelings are denied and opposite attitude and behaviour are adopted:

A. Reaction formation

B. Rationalization

C. Projection

D. Repression

35. Unacceptable feelings are prevented from reaching awareness:

A. Repression

B. Regression

C. Rationalization

D. Denial

36. Unacceptable feelings are expressed in actions:

A. Denial

B. Acting out

C. Displacement

D. Dissociation

37. Failure to acknowledge unacceptable or undesirable reality is:

A. Denial

B. Conversion

C. Dissociation

D. Acting out

38. Anxiety provoking impulse is converted into somatic symptoms:

A. Conversion

B. Denial

C. Displacement

D. Compensation

39. Over achievement in one area to combat deficiency in another is:

A. Compensation

B. Conversion

C. Repression

D. Regression

40. Emotion is separated from an incident by giving an intellectual explanation:

A. Isolation

B. Identification

C. Introjections

D. Intellectualization

41. A person's behaviour is patterned after that of another:

A. Identification

B. Isolation

C. Introjection

D. Projection

42. One's own unacceptable thoughts and feelings are attributed to others:

A. Projection

B. Displacement

C. Isolation

D. Repression

43. Emotions are transferred from an unacceptable to an acceptable idea, person, or object:

- A. Displacement
- B. Denial
- C. Dissociation
- D. Projection

44. An act that is performed in an attempt to prevent or counteract the real or imagined, unpleasant consequences:

- A. Undoing
- B. Denial
- C. Isolation
- D. Dissociation

45. An individual's conscious or unconscious attempt to resolve an emotional conflict through day dreaming is:

- A. Fantasy
- B. Denial
- C. Isolation
- D. Displacement

46. An individual unselfishly assists others:

- A. Altruism
- B. Humor
- C. Denial
- D. Undoing

47. The ego defense mechanism used to relieve anxiety by the use of amusing thoughts:

- A. Humor
- B. Denial
- C. Fantasy
- D. Displacement

48. The following are psychotic defense mechanisms:

- A. Projection
- B. Regression
- C. Sublimation

49. Loss of integration leads to a sense of isolation and mor-bid individualism which predispose to:

- A. Egoistic suicide
- B. Anomic suicide
- C. Altruistic suicide

50. A doctor, who smokes, asserts that smoking is beneficial because it inhibits the development of obesity is using which of the following "defense" mechanisms?

- A. Dissociation
- B. Intellectualization
- C. Rationalization
- D. Reaction formation
- E. Projection

51. Important mechanism in the development of the "ego" includes:

- A. Condensation

B. Rationalization

C. Defense

D. Identification

52. "Suggestion" as a form of a psychotherapy is used in:

A. Conversion disorder

B. Child psychiatry

C. Patients with a low IQ

D. All of the above

E. None of the above

Answer

1.B 2.A 3.A 4.A 5.A 6.A 7.A 8.A 9.A 10.A 11.A 12.A 13.A 14.A 15.A 16.A 17.A 18.A,B,C 19.
A,B,C,D 20.A 21.A 22.B 23.A 24. A,B,C 25.C 26.A 27.A 28.A 29.A 30.C 31.A 32.A 33.A
34.A 35.A 36.B 37.A 38.A 39.A 40.D 41.A 42.A 43.A 44.A 45.A 46.A 47.A 48. A,B 49.A
50.C 51.D 52.D

1. Delusions are characteristically seen in:

A. Schizophrenia

B. Delirium

C. Dementia

D. Depression

2. The presence of delusions, hallucinations, and disturbed cognitive function indicates:

A. Organic brain syndrome

B. Paranoid psychosis

C. Dissociative hysteria

D. Obsessive-compulsive disorder Malingering-external motivation + Factitious disorder intentionally produced physical/psychological symptoms just to assume the sick role.

Hysteria/the conversion disorder psychological factors associated with initiation or exacerbation of neurological or medical disorder which are unexplained by any organic etiology. Neurotransmitters are most implicated in the patho-physiology of mood disorders.

Marked disturbance in personality, with impairment in social, interpersonal, and occupational functioning. Marked impairment in judgment and absence of understanding of illness (loss of insight) Presence of the characteristic symptoms like delusions and hallucinations.

3. The difference between neurosis and psychosis is:

A. Severity

B. Insight

C. Clinical features

D. Duration of onset

Features of psychosis include

Gross impairment in reality testing

4. Cognition is:

A. Perception

B. Thought

C. Behaviour

D. Feeling

Cognition – thinking

Conation – action

Affect – feeling

5. Delusion is a disorder of:

A. Perception

B. Thinking

C. Intelligence

D. Judgment

Hallucination, illusion – are disorders of perception

6. Hallucination is a disorder of:

A. Perception

B. Thinking

C. Intelligence

D. Memory

7. Primary delusions are characterised by disorders of:

A. Thought

B. Obsession

C. Hallucination

D. Loosening of association

8. All the following are true about hallucinations, except:

A. It represents a state of inner subjective space

B. It is dependent of the observer

C. It is as vivid as sensory perception

D. It occurs in the absence of perceptual stimulus

9. The main excitatory neurotransmitter in the CNS is:

(AI-2003, Pg-W9-SOP)

A. Cysteate

B. Acetylcholine

C. Aspartate

D. Glutamate

Inhibitory neurotransmitter is GABA

10. 25-years house wife come to the psychiatry outpatients department complaining that her nose was longer than usual. She felt that her husband did not like her because of the deformity and had developed relationship with the neighboring girl. Further she complained that people made fun of her. It was not possible to convince her that there was no deformity. Her symptoms include:

A. Delusion

B. Depersonalization

C. Depression

D. Hallucination

Delusion is a disorder of thinking, which is a firm, fixed, unshakable, and held with strong conviction, irrespective of sociocultural and educational background. The content of it being bizarre but not always.

11. Neologism is:

A. Minting of words

B. Totally

C. Has some meaning

D. Modification of word

8B 9D 10A 11B

Neologisms:

Newly formed words or phrases whose derivation cannot be understood parathions – word approximations where normal words are used in an unconventional or distorted way, but the derivation can be understood.

12. Delusion is a false belief which is:

A. Reasonable

B. Comprehensible

C. Both of the above

D. None of the above

Delusion is a false unshakable belief which is not amenable to reasoning and is not in keeping with the patient's sociocultural and educational background.

13. Auditory hallucinations are seen in all of the following except:

A. Hysteria

B. Mania

C. Amphetamine toxicity

D. Schizophrenia

14. Tactile hallucinations are associated with:

A. Schizophrenia

B. Cocaine psychosis

C. Temporal lobe epilepsy

D. All of the above

15. Pseudo-hallucinations are not said symptoms of:

A. Hysteria

B. Schizophrenia

C. Pseudo-neurotic schizophrenia

D. Malingering

16. Delusion is seen in all, except:

A. Mania

B. Depression

C. Anxiety neurosis

D. Schizophrenia

17. Delusion is a disorder of:

A. Perception

B. Thought

C. Personality

D. Affect

18. Delusion is:

- A. A feeling of loss of sensation
- B. Not able to get proper answer
- C. A false belief
- D. An uncomfortable sensation

Delusions are false unshakable beliefs which are not in keeping with patient's sociocultural and educational background.

19. Thought disorder is seen in:

- A. Obsessive-compulsive disorder
- B. Anxiety neurosis
- C. Schizophrenia
- D. Psychopathic personality

Autistic thinking, loosening of association are forms of thought disorder seen in schizophrenia.

20. A false belief unexplained by reality, which is shared by a number of people is:

- A. Delusion
- B. Obsession
- C. Superstition
- D. Illusion

21. One of the following is a disorder of thought:

- A. Illusion
- B. Hallucination
- C. Delirium

D. Delusion

Illusion and hallucination are disorders of perception Delusion is a disorder of content of thought Delirium is an organic condition where there is an acute confusional state.

22. Deja vu Phenomenon is:

A. Feeling palpable music

B. Feeling nauseating smell

C. Fear of impending doom

D. Feelings of unfamiliar surroundings

Illusion of familiarity in unfamiliar situations is Deja vu.

Deja Pense – related to thoughts

Deja entendu – related to auditory perception.

23. Depersonalisation is a disorder of:

A. Mood

B. Thought

C. Perceptions

D. Cosmetic

Other disorders of perceptions are Hallucinations and Illusions.

24. The most common cause of mood congruent delusion is:

A. Obsessive-compulsive neurosis

B. Schizophrenia

C. Dementia

D. Mania

Mood-congruence refers to occurrence of psychiatry symptoms in keeping with mood state.

25. Visual hallucinations are seen in:

- A. Alcoholism
- B. Mania
- C. Depression
- D. Phobia

Seen in Delirium tremens.

Answer

1.A 2.A 3.B 4.B 5.B 6.A 7.A 8.B 9.D 10.A 11.B 12.B 13.A 14.D 15.A 16.C 17.B 18.C 19.C
20.C 21.D 22.D 23.C 24.D 25.A 26.B 27.D 28.A 29.A 30.B 31.B 32.A 33.B 34.C 35.A 36.A
37.B 38.A 39.A 40.B 41.A 42.A 43.B 44.A 45.B 46.D 47.B 48.C 49.C 50.A 51.A 52.A 53.C

26. Tactile hallucination is a feature of:

- A. Anxiety neurosis
- B. Cocaine poisoning
- C. Morphine withdrawal
- D. Schizophrenia

Delirium and anxiety neurosis can also occur with cocaine.

27. "Phantom limb" is an example of:

- A. Delusion
- B. Illusion
- C. Phi phenomenon

D. Hallucination

E. Fantasy

28. 'Mirage' is an example of:

A. Illusion

B. Delusion

C. Hallucination

D. Extrasensory perception

E. Fantasy

29. Delusion is not seen in:

A. Anxiety

B. Mania

C. Depression

D. Schizophrenia

30. Cognition means:

A. Behaviour

B. Thought

C. Perception

D. Feeling

There are three psychiatric domains.

Cognition (thought)

Affect (Feeling)

Conation (action)

Equilibrium normally exists between the domains.

31. Delusions of influence are characteristic of:

A. Obsessive state

B. Schizophrenia

C. Depression

D. Dramatization

Delusion of control/influence is seen commonly in schizophrenia.

32. Delusions and hallucinations are known as:

A. Psychotic symptoms

B. Neurotic symptoms

C. Behavioral symptoms

D. Psychosomatic symptoms
Term psychosis is defined as Gross impairment of reality testing
Loss of weight

Pressure of characteristic symptoms like delusions and hallucination.

33. The commonest disorder of perception is:

A. Delusion

B. Hallucination

C. Passivity

D. Compulsion

Hallucination and passivity are disorders of perception

Compulsion delusions are disorders of thought.

34. Therapeutic community concept was propagated by:

- A. Freud
- B. Adler
- C. Maxwell Jones
- D. Watson. J

35. Psychoanalysis was found by:

- A. Freud
- B. Jung
- C. Adler
- D. Eysenck

36. A false sensory perception in the absence of external stimulus is:

- A. Hallucination
- B. Illusion
- C. Delusion
- D. Depersonalization

37. Loss of insight occurs in:

- A. Anxiety neurosis
- B. Schizophrenia
- C. Psychosomatic disorder
- D. MDP

Loss of weight is a feature of psychosis. It is seen both in schizophrenia and manic phase of MDP but prominent in schizophrenia.

38. Grimacing is a feature of:

- A. Catatonic schizophrenia
- B. Hebephrenic schizophrenia
- C. Paranoid schizophrenia
- D. Juvenile schizophrenia

39. Flashbacks are seen with:

- A. LSD
- B. Amphetamine
- C. Cocaine
- D. Opiates

Flashback is a spontaneous recurrence of Drug use experience in drug free state.

40. Loss of insight occurs in:

- A. Hysteria
- B. Schizophrenia
- C. Obsessive-compulsive neurosis
- D. Somatoform disorders

Loss of insight occurs in psychosis except schizophrenia all the other three disorders belongs to neuroses.

41. Confabulation is a defect of:

- A. Memory
- B. Intelligence
- C. Affection

D. Concentration

42. 'La belle indifference' is seen in:

A. Dissociative disorder

B. Phobia

C. Obsessive-compulsive disorder

D. Depersonalization disorder

Lack of concern towards symptoms in patients with dissociative disorder.

43. Ganzer's syndrome is associated with:

A. Repeated lying

B. Approximate answers

C. Confabulation

D. Malingering

Ganser's syndrome is a dissociative disorder. It is also called hysterical pseudo dementia.

44. Nihilistic delusion is seen in:

A. Depression

B. Schizophrenia

C. Mania

D. OCN

Nihilistic delusion is mood – congruent type of delusion seen in depression.

45. Neologism is characteristic of:

A. Mania

B. Schizophrenia

C. Depression

D. OCN

46. An 18-year-old hears voices discussing him in the third person. He has

A. TLE

B. Depression

C. Mania

D. Schizophrenia

47. To become unfamiliar of familiar situation is called:

A. Deja vu

B. Jamais vu

C. Deja pence

D. Deja entendu Explanation:—

Deja vu—illusion of visual recognition in which a new situation is incorrectly regarded as a repetition of a previous memory.

Jamais vu—False feeling of unfamiliarity with a real situation that a person has experienced.

Deja pence—Illusion that a new thought is recognised as a thought previously felt or expressed.

Deja entendu—Illusion of auditory recognition.

48. The term “free association” was coined by:

A. Adler

B. Erickson

C. Freud

D. Jung

Other terms coined by Freud-psychoanalysis, oedipus complex, electra complex, penis envy, primal scene, pleasure principle.

49. Who experimented the instrumental learning?

A. Gustav

B. Sigmund Freud

C. Skinners

D. Karl Jug

Also called as operant conditioning.

50. Psychosis is characterized by all, except:

A. Contact with reality is maintained

B. Positive symptoms are usually present

C. Impaired judgment

D. Insight is lost.

The first symptom for psychosis is a gross impairment in reality testing.

51. Which of the following is most specific of psychosis?

A. Neologism

B. Incoherence

C. Perseverance

D. Pressure of speech

52. A 23-year-old man has a fight with a boy in his neighbor-hood. The next day he feels

two policemen are following him to arrest him. He is agitated and paces up and down his room. He feels that his neighbors are controlling his mind by sending waves from an electric device. He is suffering from:

A. Delusions of persecution

B. Thought insertion

C. Passivity

D. Depression

53. Early in psychiatric interview, it is important for the physician to:

A. Let patients talk about what is bothering them

B. Obtain information about the patient's mood

C. Record the family history

D. Inform the patient of the fee

E. Obtain details of any past psychiatric illness

Answer

1.A 2.A 3.B 4.B 5.B 6.A 7.A 8.B 9.D 10.A 11.B 12.B 13.A 14.D 15.A 16.C 17.B 18.C 19.C 20.C 21.D 22.D 23.C 24.D 25.A 26.B 27.D 28.A 29.A 30.B 31.B 32.A 33.B 34.C 35.A 36.A 37.B 38.A 39.A 40.B 41.A 42.A 43.B 44.A 45.B 46.D 47.B 48.C 49.C 50.A 51.A 52.A 53.C

1. A one-month-old history of abnormal hallucination and delusion in a patient indicates a diagnosis of:

A. Psychosis

B. Schizophrenia

C. Paranoia

D. Depression

2. A 30-year-old unmarried woman from a low socioeco-nomic status family believes that a rich boy staging in her neighborhood is in deep love with her. The boy clearly derives his love towards this lady. Still the lady insists that his denial is a secret affirmation of his love towards her. She makes desperate attempts to meet the boy despite resistance from her family. She also devel-ops sadness at times when her effect to meet the boy does not materialize. She is able to maintain her daily routine. She however remains preoccupied with the thoughts of this boy. She is likely to be suffering from:

A. Delusional disorder

B. Depression

C. Mania

D. Schizophrenia

3. A 41-year-old women working as an executive director is convinced that the management has denied her pro-motion by preparing false reports about her competence and has forged her signatures on sensitive documents so as to convict her. She files a complaint in the police station and requests for security. Despite all this she at-tends to her work and manages the house hold, she is suffering from:

A. Paranoid schizophrenia

B. Late onset psychosis

C. Persistent delusional disorder

D. Obsessive compulsive disorder

In spite of delusional component, the socio- occupational functioning is maintained.

Miscellaneous:

Father of psychosomatic medicine – Franz Alexander Psychosomatic disorder-term coined by Jellinis. Cloninger's classification of alcohol include type I and type II: The

classification is based on genetic and environmental causes. Heinroth, 1918.

4. Drug of choice in delusional parasitosis is:

- A. Imipramine
- B. Pimozide
- C. Clomipramine
- D. Lithium

Delusional parasitosis is a type of delusional disorder where the content of delusion is predominantly the presence of hypochondriacal delusions. It is also called as monosymptomatic hypochondriacal psychosis or hypochondriacal paranoia. Here the patient has delusions of worm infections. Treatment consists of primordial, supportive psychotherapy.

5. The following are psychotic disorders:

- A. Schizophrenia
- B. Delusional disorder
- C. Mania
- D. Obsessive-compulsive disorders
Obsessive-compulsive disorder is classified under 'Neurotic', stress-related and somatoform disorder in ICD-10

6. "Pseudocommunity" is observed in:

- A. Depression
- B. Paranoid disorders
- C. Hysteria
- D. Schizoid personality

7. Schizotypal disorder:

- A. Episodes of manic disorder

B. In coordinate speech

C. Dissociation

D. None of the above

Odd eccentric behavior with stereotypic thinking and constricted affect.

8. A characteristic feature of induced psychosis is:

A. Suicidal Tendency

B. Acceptance of another person's delusions

C. Autistic tendency

D. Mood disturbance

9. The most common postpartum psychosis is:

A. Mania

B. Depression

C. Dementia

D. Schizophrenia

i. Postpartum psychosis prevalence – 1.5 to 4.6/1000

ii. Postpartum psychosis has to appear following 6 weeks after delivery.

10. Allodynia is:

A. Painful response without stimulus

B. Painful response to a normal non-painful stimulus

C. Both of the above

D. None of the above

11. The wife of a man in a hilly area has died 7 days back. He has since seen his dead wife twice and she asked him to die, the diagnosis is:

- A. Normal grief
- B. Grief reactive psychosis
- C. Schizophreniform
- D. Acute panic disorder

12. A 22-year-old person who shows aggressive behaviour for the past 2 weeks also has auditory hallucinations not heard by anyone else and shows suspicious behaviour. The diagnosis is:

- A. Schizophrenia
- B. Depression
- C. Mania
- D. Acute psychosis

It this case, patient has psychotic symptoms for 2 weeks and the symptoms are not suggestive of schizophrenia.

13. A patient came with complaints of having a deformed nose and that nobody took him seriously because of this deformity. He has visited several cosmetic surgeons there was nothing wrong with his nose. He is most likely suffering from:

- A. Delusional disorder
 - B. Hypochondriasis
 - C. Somatization
 - D. Munchausen's syndrome
-

Answer

1.A 2.A 3.C 4.B 5D.6.B 7.D 8.B 9.B 10. B 11.B 12.D 13.A

1. 'Suicide' is more prone in the following:

- A. Unemployed youth
- B. Adolescent girl
- C. Married woman
- D. Old man

2. Akathisia means:

- A. Sensory loss
- B. Gait disturbance
- C. Motor restlessness
- D. Orofacial movements

3. Suicidal tendency is most commonly seen with:

- A. Schizophrenia
- B. Obsessive disorders
- C. Mania
- D. Depression

Common causes of suicide:

1. Major depression
2. Alcoholism
3. Schizophrenia

4. Among persons who successfully commit suicide, the two most frequent diagnoses are major depression and:

- A. Alcoholism
- B. Borderline personality disorder
- C. Dementia
- D. Schizophrenic or schizophreniform disorder

5. The proportion of suicides which have already been pre-ceded by earlier suicide attempts is:

- A. 10 percent
 - B. 20 percent
 - C. 50 percent
 - D. 60 percent
 - E. 100 percent
-

Answer

1.B 2.C 3.D 4.A 5.D

1. Hypochondriasis is:

- A. Normal preoccupation with abnormal body function
 - B. Abnormal preoccupation with abnormal body functions
 - C. Normal preoccupation with normal body functions
 - D. Abnormal preoccupation with normal body functions
- Somatoform disorder are divided into:

1. Somatization disorder.
2. Hypochondriacal disorder.
3. Somatoform autonomic disorder.
4. Persistent somatoform pain disorder.
5. Other somatoform disorders

i. Neurasthenia

ii. Depersonalization

6. Somatoform disorder unspecified

2. Psychosomatic illness can be differentiated from hysteria by: -

A. Autonomic disturbance

B. Altered sensorium

C. Involuntary movement

D. Skeletal muscle atrophy

3. The significant difference between malingering and hysteria is:

A. Conscious motive in malingering

B. Hysteria is more common in females

C. Malingering has a poor prognosis

D. Hypnosis

4. Abnormal thought possession is a feature of:

A. Organic brain syndrome

B. Obsessive-compulsive disorder

C. Hysteria

D. Neurasthenia

5. All the following are true about obsessive-compulsive disorder, except:

A. Ego-alien

B. Patient tries to resist it

C. Ego-syntonic

D. Insight is present

Obsession is defined as:

1. An idea, impulse/image which introduces into conscious awareness repeatedly.

2. Recognized as one's own idea, impulse or image but is ego-alien (foreign to one's personality)

3. Recognized as absurd and irrational

4. Patient tries to resist but unable to do so.

5. Failure to resist, leads to marked distress.

(Note: Delusion is recognized as one's own idea but is not recognized as ego-alien)

Compulsions are defined as:

1. Behavior that follows obsession.

2. Behavior aimed at preventing/neutralizing the distress/fear arising out of obsession.

3. Unrealistic, excessive, or irrational behaviors.

4. Insight being present, subject realizes the irrationality of compulsion.

5. Behavior is performed with a sense of compulsion (urge or impulse to act).

6. The drug of choice in obsessive-compulsive neurosis is:

- A. Clomipramine
- B. Clonazepam
- C. Carbamazepine
- D. Chlorpromazine

Clomipramine (75-300mg/d) is particularly effective in treatment of OCD.

7. Dissociated disorder is seen in all the following, except:

- A. Personality
- B. Hearing
- C. Fugue
- D. Amnesia

Dissociative amnesia

Fugue

Stupor

Trance/possession disorder

Motor disorder

Convulsions

Anesthesia and sensory loss

Mixed

Other dissociative disorders

Unspecified

8. Treatment of choice for phobic disorder is:

- A. Behaviour therapy
- B. Benzodiazepine
- C. Psychotherapy
- D. 5-HT re-uptake inhibitors

- 1. Psychodynamically oriented psychotherapy with supportive psychotherapy
- 2. Behaviour therapy

SSRI are found to be very effective in social phobia Defense mechanism that operates' in phobia include:

- 1. Repression.
- 2. When regression fails to function adequately to allay anxiety, displacement occurs:
- 3. Avoidance.

9. A young female presents with halos, abdominal pain, and amnesia. She has:

- A. Conversion reaction
- B. Dissociation disorder
- C. Depersonalization disorder
- D. Psychogenic pain disorder

10. Post-traumatic stress syndrome is due to:

- A. Head injury
- B. Minor stress
- C. Major life-threatening events
- D. Vascular accidents

11. Phobia is:

- A. Psychosis
- B. Fear of animals
- C. Anxiety
- D. Abnormal irritation

12. Kleptomania means:

- A. Irresistible desire to steal things
- B. Irresistible desire to drink
- C. To dress as the opposite sex
- D. To set fire

Habit and impulse disorder:

- 1. Pathological gambling
- 2. Pyromania (pathological fire settling)
- 3. Kleptomania (pathological stealing)
- 4. Trichotillomania (compulsive-hair pulling)
- 5. Intermittent explosive disorder

13. A women suffers minor injuries in a car accident which leaves the driver of the car dead. Six months after the accident, she still feels afraid of cars and avoids travel-ing in them. The diagnosis is:

- A. Post-traumatic stress syndrome
- B. Traveling phobia
- C. Delusion disorders
- D. Schizophrenia

Diagnostic criteria (DSM IV) for PTSD include:

1. Person exposed to traumatic event (stressor)
2. Traumatic event-persistently re-experienced
3. Avoidance of stimuli
4. Symptoms of increased arousal

Duration of disturbance (2, 3, and 4) is more than 1 month. Acute-if duration of symptoms < 3 months. Chronic – if duration of symptoms > 3 months. Delayed onset – if onset of symptoms at least 6 months after the stressor. Eponyms in various US wars:

1. Civil war – irritable heart
2. World war I – effort syndrome
3. World war II – combat stress reaction
4. Vietnam War – PTSD
5. Gulf war – Gulf war syndrome

Acute stress disorder – the disturbance lasts for a minimum of 2 days and a maximum of 4 weeks and occurs within 4 weeks of traumatic event.

14. Preoccupation with body disease is seen in:

- A. Obsession
- B. Somatization
- C. Hypochondriasis
- D. Conversion disorders (Somatoform disorder)

Treatment,

1. Supportive psychotherapy
2. Treatment of associated or underlying depression or anxiety, if present.

15. Women complain that she feels like abusing God and slapping a man. The thought persists in spite of her not wanting to do so. The diagnosis is:

- A. Obsessive-compulsive neurosis
- B. Somatization
- C. Hypochondriasis
- D. Conversion disorder

To see the criteria for diagnosis of OCD

16. A 40-year-old female has an accident while traveling in a bus. She sustains pelvis and has to remain in hospital for a long time. Now she refuses to sit in a bus. She is suffering from:

- A. Post-traumatic stress syndrome
- B. Anxiety neurosis
- C. Conversion disorder
- D. Phobia

17. A person missing from home is found wandering purposefully, in a well groomed state with some degree of amnesia. This condition is known as:

- A. Dissociative fugue
- B. Dissociative amnesia
- C. Schizophrenia
- D. Acute anxiety

Dissociative amnesia – commonest clinical type of dissociative disorder occurring mostly in adolescents and young adults (females more than males) – This is characterized by a sudden inability to recall personal information, particularly concerning stressful or traumatic life events. Dissociative fugue – episodes of wandering away (from home) adopts a new identity with complete amnesia for the

earlier life.

Differential diagnosis is complex partial seizure or temporal lobe epilepsy.

18. A female has the fixed idea which is not shared by any-one else that her nose is ugly. The next step is:

- A. Investigate and then operate
- B. Refer to psychiatrist
- C. Reassure and send home
- D. Do plastic surgery immediately

Body dysmorphic disorder/dysmorphophobia (somatoform disorder).

19. A patient suffers sudden palpitations, apprehension, and sweating lasting 10 minutes. The diagnosis is:

- A. Hysteria
- B. Cystic fibrosis
- C. Panic attack
- D. Acute anxiety attack

Discrete episodes of acute anxiety with crescendo decrescendo patterns

Most important differential diagnosis.

Mitral valve prolapse syndrome

20. 27-year-old Rekha presents with a history of eating voraciously, taking laxatives, and then eating more and more repeatedly. The most likely diagnosis is:

- A. Bulimia nervosa
- B. Anorexia nervosa
- C. Single eating disorder

D. Schizophrenia

Treatment for bulimia nervosa and anorexia is

1. Behaviour therapy

21. Prakash Chandra, a 42-year-old man, complains of non--progressive headache for 5 years. He has visited sev-eral neurosurgeons and undergone clinical and labora-tory investigations for a brain tumor, which are nega-tive. The patient is not convinced and believes that he has a tumor for which he wants to undergo surgery. He is then referred to a psychiatrist. The most likely diagno-sis is:

A. Hypochondriasis

B. Somatization disorder

C. Somatoform pain disorder

D. Conversion disorder

22. All of the following are impulse control disorders except:

A. Pyromania

B. Trichotillomania

C. Kleptomania

D. Cap grass syndrome

Pathological gambling is an impulse control disorder.

23. A 41-year-old married female presented with headache for the last 6 month. She has several consultations. All her investigations were found to be within normal limits. She still insists that there is something wrong in her head and seeks another consultation. The most likely diagno-sis is:

A. Phobia

B. Psychogenic headache

C. Hypochondriasis

D. Depression

It is grouped under persistent somatoform pain disorder where in doctor – shopping is common.

24. A 15-year-old boy feels that the dirt has hung onto him whenever he passes through the dirty street, this repetitive thought causes much distress and anxiety. He knows that there is actually no such thing after he has cleaned once but he is not satisfied and is compelled to think so. This has led to social withdrawal. He spends much of his time in thinking about the dirt and contamination. This has affected his studies also. The most likely diagnosis is:

A. Obsessive-compulsive disorder

B. Conduct disorder

C. Agoraphobia

D. Adjustment disorder

25. Dissociation is seen in:

A. Schizophrenia

B. Mania

C. Hysteria

D. Organic brain syndrome

Answer

1.D 2.A 3.A 4.B 5.C 6.A 7.B 8.A 9.B 10.C 11.C 12.A 13.A 14.C 15.A 16.A 17.A 18.B 19.C
20.A 21.A 22.D 23.B 24.A 25.C 26.C 27.B 28.A 29.C 30.D 31.A 32.D 33.A 34.C 35.C 36.D
37.A 38.C 39.A 40.B 41.A 42.C 43.A 44.A 45.D 46.D 47.D 48.D 49.D 50.B 51.C 52.C 53.D
54.C 55.C 56.A 57.E 58.B 59.B 60.C 61.B 62.A 63.A 64.B 65.D

26. Treatment of choice in phobic neurosis is:

A. Group therapy

B. Free association

C. Behaviour therapy

D. ECT

Behaviors therapy is usually planned. Important techniques are:

i. Flooding

ii. Systematic desensitization

iii. Exposure and response prevention

iv. Relaxation techniques.

27. Obsessive-compulsive neurosis occurs because of fixa-tion at:

A. Oral stage

B. Anal stage

C. Genital (urethral) stage

D. None of the above

28. Phobia is a type of:

A. Personality disorder

B. Conversion reaction

C. Psychosis

D. Neurosis

29. Impulsive action includes all, except:

A. Pyromania

B. Kleptomania

C. Dipsomania

D. Trichotillomania

Habit and impulse disorders include pathological gambling, pyromania, kleptomania, trichotillomania, and intermittent explosive disorder. The disorders in this heterogeneous group are characterized by impulsive behavior which the patient cannot resist or control. There may be a feeling or release of tension by doing the act and a feeling of guilt after the act is over.

Dipsomania is compulsive drinking.

30. Which of the following is associated with sudden attacks of anxiety with fear? (TN-94, Pg-92, NA-5th edn)

A. Phobia

B. Mania

C. Neurosis

D. Panic disorder

Panic disorder is characterized by discrete episodes of acute anxiety. Attacks occur recurrently every few days. There may or may not be an underlying generalized anxiety disorder. Onset is usually in the early third decade with often a chronic course. Episode is usually sudden in onset, lasts for a few minutes and is characterized by very severe anxiety. Usually there is an apparent precipitating factor.

31. 'Fugue state' occurs in the following:

A. Hysteria

B. Mania

C. Depression

D. Head injury

Dissociative fugue occurs in hysteria and is characterized by episodes of wandering

away (usually from home). During the episode, person usually adopts a new identity with complete amnesia for earlier life. Onset is usually sudden, often in the presence of severe stress. Termination is abrupt and is followed by amnesia for the episode, but with recovery of memories of earlier life. Characteristic feature is the assumption of a purposeful new identity with absence of awareness of amnesia. Important differential diagnoses are complex partial seizures or temporal lobe epilepsy.

32. One of the following is a "Factitious disorder":

A. Hysteria

B. Depression

C. Hypochondriac

D. Munchausen's syndrome

Munchausen's syndrome is a factitious disorder used for those patients who repeatedly simulate or fake diseases for the sole purpose of obtaining medical attention. There is no other recognizable motive. Other names are hospital addiction, hospital hobo, professional patients, etc.

Whereas hypochondriac is a form of disorder, defined as a persistent preoccupation with a fear or belief of having one of more serious diseases. This is based on person's own interpretation of normal body function or a minor physical abnormality.

33. Agoraphobia is fear of:

A. Open spaces

B. Closed spaces

C. Heights

D. Darkness

Agoraphobia is a type of phobic disorder. Phobia is an irrational fear of a specific object, intuition, or activity often leading to persistent avoidance of the feared object, situation, or activity.

Common types of phobia are:

1. Agoraphobia,
2. Social phobia,
3. Specific (simple) phobia.

Agoraphobia is an irrational fear of situation, open spaces, and being in places away from the familiar setting of home. It is the common type of phobia and women exceed men in incidence. Social phobia is an irrational fear of activities or social interaction, characterized by an irrational fear of performing activities in the presence of other people or interacting with others.

In specific phobia, the stimulus is usually circumscribed, e.g. acrophobia – fear of high places, zoophobia – fear of animals, xenophobia – fear of strangers, algophobia – fear of pain, claustrophobia – fear of closed places.

Treatment (i) Supportive psychotherapy (ii) behaviour therapy like flooding, systematic desensitization, exposure and response prevention and relaxation techniques (iii) Drug treatment – BZDS (alprazolam), antidepressants (imipramine, phenelzine, SSRI for social phobias).

34. The drug of choice for obsessive compulsion is:

- A. Amphetamine
- B. Diazepam
- C. Clomipramine
- D. Chlorpromazine

Drug treatment for OCD includes:

- (i) Benzodiazepines (alprazolam)
- (ii) Antidepressants like SSRI's, clomipramine (1st drug of choice), fluoxetine (2nd drug of choice)

(iii) Antipsychotic like haloperidol

(iv) Buspirone, Clonazepam

Other modalities of treatment include:

II Psychotherapy – psychoanalytic psychotherapy and supportive psychotherapy

III Behavior therapy – thought stopping, response prevention, systematic desensitization, modeling

IV ECT

V Psycho surgery – Steriotactic limbic lobotomy, Steriotactic sub caudate taxonomy.

35. Dissociative conversion disorder was previously de-scribed as:

A. Dementia praecox

B. Hypochondriasis

C. Hysteria

D. Melancholia

The term hysteria previously used is now replaced by conversion, dissociation, and somatization disorder.

36. 'Flashback' is the characteristic feature of:

A. Grief reaction

B. Postnatal depression

C. Hypomania

D. Post traumatic stress disorder.

PTSD arises as a delayed and protracted response to an exceptionally stressful or catastrophe life event or situation which is likely to cause pervasive distress in almost any person. Symptoms develop often a period of laden of, within 6 months after the

stress or may be delayed beyond this period. PTSD is characterized by recurrent and intrusive recollections of the stressful event either in flashbacks (images, thought, perceptions) and/or in dreams.

There is an associated sense of re-experiencing the stressful event or situations that arouse recollections of the stressful event, along with marked symptoms of anxiety and increased arousal, they also have partial amnesia for some aspects of the stressful event, feeling of numbness, anhedonia. Treatment-prevention, disaster management, supportive psychotherapy, antidepressants, and benzodiazepines.

37. Munchausen's syndrome by proxy is:

- A. Factitious disorder
- B. Malingering
- C. Hysteria
- D. Conversion disorder

It is different from malingering in that there is no recognizable motive.

38. Acrophobia means:

- A. Fear of God
- B. Fear of vehicles
- C. Fear of height
- D. Fear of open spaces

Other phobias:

Xenophobia – Fear of Strangers

Zoophobia – Fear of animals

Algophobia – Fear of pain

Claustrophobia – Fear of closed places

Ailurophobia – Fear of cats

39. Epileptic fit and hysterical fit can be certainly differentiated by:

- A. Incontinence of urine
- B. Injury during fit
- C. Frothing from mouth
- D. Duration of fit

Remember – Video EEG is the Gold standard investigation that helps to differentiate epileptic fits and hysterical fits.

40. An uncommon hysterical symptom includes:

- A. Blindness
- B. Palpitation
- C. Hiccough
- D. Vomiting

Autonomic nervous system is not involved unless voluntary musculature is involved.

41. Impulsive acts include all the following except:

- A. Dipsomania
- B. Trichotillomania
- C. Pyromania
- D. Kleptomania

Impulse control disorder:

Pathological

Pyromania

Kleptomania

Trichotillomania

In these disorders:

Patients cannot resist

Release of tension by doing the act

Feeling of remorse after the act

42. Systematic desensitization is used in the treatment of:

A. Obsessive-compulsive disorder

B. Depression

C. Phobia

D. Anxiety neurosis

i. Systematic desensitization works on the principle of reciprocal inhibition.

ii. It is the treatment of choice for phobia.

43. Defense mechanism adopted in obsessive-compulsive neurosis includes:

A. Isolation

B. Dissociation

C. Identification

D. Displacement

Other defenses used – undoing, reaction formation.

44. Obsessive-compulsive neurosis is:

A. Repeated occurrence of unwelcome thoughts followed by irresistible desire to do the act

B. Occurrence of pleasant thoughts followed by irresistible acts

C. False unshakeable thoughts against sociocultural background

D. Excessive irrational fear of ideas, objects, or situations

45. Agoraphobia is:

A. Fear of animals

B. Fear of closed space

C. Fear of height

D. Fear of open place

It is the commonest phobia.

46. Claustrophobia is fear of:

A. Height

B. Open spaces

C. Lizards

D. Closed spaces

47. Fixation of hysteria is

A. Anal

B. Gametal

C. Oral

D. Phallic

48. Obsessive-compulsive neurosis features include all except:

A. Sense of guilt

B. Anxiety relieved by an act

C. Patient is aware of helplessness-

D. Magical thought

49. Hysterical neurosis is characterized by:

A. Conscious motive

B. Premorbid dysthymic personality

C. Rapid change in symptoms

D. Primary and secondary gain

50. A man with type-A personality with competitiveness, time bound and tense is susceptible to:

A. Bowel irritability

B. Coronary heart disease

C. Hypertension

D. Acid peptic disease

Term type-A behaviour was coined by Friedman and Rosenman.

51. Bulimia nervosa is associated with all except:

A. Intermittent dieting

B. Repeated vomiting

C. Severe weight loss

D. Use of cathartic and diuretics

52. Hysterical abdominal pain is associated with all, except:

A. Long duration

B. Food intake

C. Night pains

D. Nausea and vomiting

53. All are features of bulimia nervosa, except:

A. Metabolic alkalosis

B. Caries tooth

C. Parotitis

D. Oligomenorrhea

54. The classic psychosomatic illness include all of the following, except:

A. Essential hypertension

B. Rheumatoid arthritis

C. Hyperventilation

D. Bronchial asthma

Classic psychosomatic illness is: Bronchial asthma, ulcerative colitis, peptic ulcer, neurodermatitis, thyrotoxicosis, rheumatoid arthritis, and essential hypertension.

55. Kleptomania is a:

A. Delusion

B. Hallucination

C. Impulse

D. Illusion

Kleptomania, pathological gambling, pyromania and trichotillomania are habit and impulse disorders.

56. The most common complication of obsessive-compulsive neurosis is:

A. Depression

B. Persecutory delusion

C. Dissociation of symptoms

D. Mania

At least 50 percent of patients of OCD have depressive episodes.

57. Which of the following is a dissociative phenomenon?

A. Fugue

B. Deafness

C. Amnesia

D. Loss of insight

E. Both a and c

Types of Dissociative disorders – sensory loss, motor, Amnesia, Fugue, identity disorder, trance and Possession.

58. The transmitter involved in obsessive-compulsive disorder is:

A. Norepinephrine

B. Serotonin

C. Dopamine

D. GABA Serotonin is involved in OCD.

59. All the following are true for conversion reaction, except:

A. Secondary gain

B. Onset is late

C. Patient does not consciously produce signs and symptoms

D. Symbolic relationship with stress

Usually symptoms have a sudden onset.

60. A man visits a temple and feels like abusing God. He tries to resist but fails and feels very disturbed. He is suffering from:

- A. Anxiety
- B. Schizophrenia
- C. OCD
- D. Paranoid personality disorder

In this case pt has recurrent impulses to abuse God and though he recognizes it as irrational, cannot resist it.

61. A young man gets nervous and complains of palpitation and sweating when he meets his seniors or makes presentations during meetings. He is most likely suffering from:

- A. Panic disorder
- B. Social phobia
- C. Adjustment disorders
- D. Personality disorder

In social phobia, there is an irrational fear of performing activities in front of others.

62. Lilawati, a 25-year-old female, complains of sudden palpitation, sweating, sensation of impending doom, and constriction in her chest. This lasts for about 10-15 minutes after which she becomes all right. The most likely diagnosis is:

- A. Panic attack
- B. Generalized anxiety disorder
- C. Phobic disorder
- D. Impulse control disorder

63. A person wakes up in the night repeatedly remembering the scene of an earthquake

which happened a few days back in which he survived, but most of his near and dear friends expired. He is suffering from:

- A. Post-traumatic stress disorder
- B. Schizophrenia
- C. Depression
- D. Delusions

64. Which of the following is a characteristic of hysteria?

- A. Molar deficit
- B. Indifference to symptoms
- C. Suicidal attempts
- D. Alertness

65. Psychogenic amnesia is characterized by:

- A. Retrograde amnesia
 - B. Anterograde amnesia
 - C. Confabulation
 - D. Patchy impairment of personal memories.
-

Answer

1.D 2.A 3.A 4.B 5.C 6.A 7.B 8.A 9.B 10.C 11.C 12.A 13.A 14.C 15.A 16.A 17.A 18.B 19.C
20.A 21.A 22.D 23.B 24.A 25.C 26.C 27.B 28.A 29.C 30.D 31.A 32.D 33.A 34.C 35.C 36.D
37.A 38.C 39.A 40.B 41.A 42.C 43.A 44.A 45.D 46.D 47.D 48.D 49.D 50.B 51.C 52.C 53.D
54.C 55.C 56.A 57.E 58.B 59.B 60.C 61.B 62.A 63.A 64.B 65.D

1. Nightmares occur in:

A. REM sleep

B. NREM-I sleep

C. NREM-II sleep

D. NREM-III sleep

Night terrors occur early in the night – (stage-4 NREM disorder).

Other stage-4 – NREM sleep disorders are:

Sleep walking (somnambulism)

Nocturnal enuresis (bed wetting) Bruxism (tooth grinding)

Sleep talking (somniloquy)

These are more common in first one-third of the night. Complete amnesia for the events does occur.

Narcolepsy-Excessive day time sleepiness with disturbed night-time sleep (decreased REM latency) prevalence is 4 per 10,000

The classical tetrad is: Sleep attacks (most common) Cataplexy

Hypnagogic hallucinations

Sleep paralysis (least common)

Dipsomania-Disturbance in quality, amount or timing of sleep.

1. Nocturnal myoclonus

2. Restless leg syndrome (Ekbom's syndrome)

These often occur together.

2. The non-REM sleep is commonly associated with:

- A. Frequent dreaming
- B. Frequent penile erections
- C. Increased blood pressure
- D. Night terrors

3. Sleep deprivation results in:

- A. Anxiety neurosis
- B. Emotional disturbances
- C. Psychotic behaviour
- D. Mental alertness

4 to 5 days after sleep deprivation, psychological symptoms become prominent. There is inattention span, easy distractibility, drowsiness initiative to perform and micro sleeps beating but a few seconds.

4. In the following phase of sleep, maximum enhancement in pain threshold takes place:

- A. REM sleep
- B. Phase I
- C. Phase III
- D. Phase IV

5. Cataplexy is seen in:

- A. Narcolepsy
- B. Neuroleptic-malignant syndrome
- C. Catatonic schizophrenia
- D. Chronic depression

Tetrad of guinea seen in narcolepsy:

- i. Sleep attacks
- ii. Cataplexy
- iii. Hypnagogic hallucinations
- iv. Sleep paralysis

6. Hallucinations occurring during onset of sleep are called:

- A. Jactatio capitis nocturna
- B. Non-specific hallucinations
- C. Hypnagogic hallucinations
- D. Hypnopompic hallucinations

Hypnagogic and Hypnopompic hallucination can occur in normal people.

Hypnopompic hallucination occurs while awakening from sleep.

7. Associated with narcolepsy includes:

- A. Obesity
- B. Lymphocytosis
- C. Sexual impotence
- D. All of the above

8. EEG changes in paradoxical sleep predominantly:

- A. Alpha waves
- B. Beta Waves
- C. Delta Waves
- D. Mixed Frequency

Also remember – NREM

Stage-I – Theta waves

Stage -II – Sleep spindles K complexes

Stage-III and IV – Delta waves

9. Symptoms of narcolepsy include all of the following, except:

- A. Cataplexy
 - B. Sleep attacks
 - C. Sleep paralysis
 - D. Sleepwalking
-

Answer

1.A 2.D 3.D 4.A 5.A 6.C 7.D 8.A 9.D

1. Squeeze technique is used for:

- A. Premature ejaculation
- B. Ejaculation failure
- C. Impotence
- D. Nymphomania

Squeeze technique (Seeman's technique) is used in premature ejaculation. Sensate focus technique is used in the treatment of impotence. Pharmacotherapy, for impotence – Sildenafil citrate (Viagra) Tadalafil, sildenafil, vardenafil is

phosphodiesterase type 5 inhibitors licensed in UK for the treatment of erectile dysfunction.

Sexual dysfunction is caused by the following medications:

Antihypertensive:

- A. Methyldopa
- B. Clonidine
- C. Propranolol
- D. Thiazide diuretic
- E. Spironolactone

Hormonal preparations:

- A. Corticosteroids
- B. Estrogens

Psychotropic medications:

- A. Tricyclic antidepressants and MAO inhibitors
- B. SSRIs
- C. Thioridazine
- D. Chlorpromazine
- E. Haloperidol
- F. Barbiturates & Benzodiazepines
- G. Lithium
- H. Disulfiram

Psychotic substance use

A. Alcohol

B. Opiates and cocaine

Others

A. Anti-inflammatory drugs

B. Anticholinergic drugs

C. L-dopa

2. In this process, the sexual partners are aroused and gratified by whipping or being whipped:

A. Fellatio

B. Flagellation

C. Sadism

D. Masochism

3. The essential ingredient of Master's and Johnson's treatment of impotence is:

A. Adequate history taking

B. Avoidance of the demand for performance

C. Therapeutic alliance

D. Reassurance

Technique used is called "sensate focus" Remember – squeeze (Seaman's technique) is used for premature ejaculation.

4. Delusion of infidelity on part of the sexual partner is called as:

A. Ekblom's syndrome

B. Othello syndrome

C. Couvades syndrome

D. De' clerambault's syndrome

Othello syndrome is also called as conjugal paranoia. Couvade's syndrome-If husband develops non-specific physical complaints when wife is pregnant. Ekbom's syndrome-delusional parasitosis. De'clerambault's syndrome – delusion of love.

5. Impotence is expressed as:

A. Inability to perform the sexual act

B. Failure of ejaculation

C. Inability to fertilize

D. Primitive ejaculation

Also called as failure of genital response.

6. The most effective treatment for premature ejaculation:

A. Benzodiazepine medication

B. Brief dynamic psychotherapy

C. Prestige suggestion

D. The squeeze technique

Squeeze technique – is also called Seeman's technique.

7. A useful diagnostic procedure for distinguish psychogenic and organic impotence is:

A. 24 hour monitoring of serum gonadotropin levels

B. Nasopharyngeal EEG recording during sexual stimulation

C. Monitoring penile tumescence during sleep

D. Projective testing

Nocturnal penile tumescence is abnormal in organic impotence.

Some other investigations:

Penile biothesiometry – DICC

Papaverine injection test Penile Doppler Duplex ultrasonography

8. All of the following are true about nocturnal penile tumescence except:

- A. Differentiate organic and non-organic sexual dysfunction
- B. Done in NREM sleep
- C. Total about 100 min/night
- D. It is a normal phenomenon

9. Which of the following statements concerning the prognosis of homosexuality in male is correct?

- A. Dreams of heterosexual activity are indicative of a better prognosis
 - B. The prognosis is independent of the patient's age at the beginning of therapy
 - C. The prognosis is independent of any childhood experience
 - D. All of the above
 - E. None of the above
-

Answer

1.A 2.B 3.B 4.B 5.A 6.D 7.C 8.B 9.A

1. Confabulation means:

- A. Conversation with an imaginary person

- B. Misinterpretation of stimuli
- C. Perception in the absence of stimuli
- D. Making up stories to fill up gaps in memory

Confabulation—uses imaginary events in the early phase of the illness.

Chronic alcoholism causes

Wernicke's – Korsakoff's syndrome

Wernicke's encephalopathy is the acute phase of delirium preceding the amnesic syndrome, while Korsakoff's syndrome is the chronic phase of amnesic syndrome.

Treatment for chronic alcoholism causing Wernicke's encephalopathy – thiamine (high doses) Prognosis is often poor in Korsakoff's syndrome.

2. The active substance in hashish is:

- A. Morphine
- B. LSD
- C. Mescaline
- D. Tetrahydrocannabinol

3. Physical withdrawal symptoms are absent in patients

- A. Alcohol
- B. Cannabis
- C. Opium
- D. Pethidine

Complications of cannabis include:

1. Transient/short lasting psychiatric disorders.

2. Amotivational syndrome (lethargy, apathy, loss of interest, amnesia, reduced drive and ambition)

3. Hemiparesis – “Run amok”

4. Memory impairment, worsening / relapse of psychosis or mood disorder

5. Reversible inhibition of spermatogenesis.

4. Tactile hallucinations are seen with:

A. Alcohol

B. Heroin

C. Cocaine

D. Fenfluramine-amphetamine combination

Cocaine-street name “crack” combination with opiates called – “speedball” acute intoxicatory state. Mydriasis, tachycardia, HT, ↑ sweating, nausea and vomiting, hypomanic picture with impaired judgment and socio-occupational functioning.

Withdrawal Syndrome:

Mild physical but very strong psychological dependence +.

5. All the following are features of opioid withdrawal, except:

A. Diarrhea

B. Lacrimation

C. Rhinorrhea

D. Miosis

Opioid withdrawal causes mydriatic effect.

6. Morbid jealousy is seen with the use of:

A. Alcohol

- B. Opium
- C. Cannabis
- D. Amphetamine

Is a form of delusional conjugal paranoiamen are more commonly involved. Onset is often sudden.

7. The drug of choice in delirium tremens is:

- A. Diazepam
- B. Phenytoin
- C. Chlordiazepoxide
- D. Morphine

The drugs of choice are benzodiazepines: Chlordiazepoxide (80-200 mg/day) or diazepam (40- 80 mg/day).

8. Treatment is NOT required for withdrawal symptoms of:

- A. Cannabis
- B. Alcohol
- C. Amphetamine
- D. LSD

No withdrawal syndrome has been described with LSD use

Flash back phenomena – occurs sometimes within weeks to months after the first experience.

9. All the following are the features of alcohol withdrawal except:

- A. Hyper somnolence
- B. Epileptic seizure

C. Restlessness

D. Hallucination

10. Symptomatic treatment is not required in withdrawal of:

A. Cannabis

B. Morphine

C. Alcohol

D. Cocaine

11. All the following drugs have abuse liability, except:

A. Buprenorphine

B. Alprazolam

C. Fluoxetine

D. Dextropropoxyphene

12. Disulfiram acts by:

A. Inhibiting alcohol dehydrogenase

B. Inhibiting aldehyde dehydrogenase

C. Both of the above

D. None of the above

14. An alcoholic is brought to the emergency OPD with the complaint of irrelevant talking. He had stopped using alcohol three days back. On examination he is found to be disoriented to time, place, and person. He also has visual hallucinations and illusions. There is no history of head injury. The most likely diagnosis is:

A. Dementia praecox

B. Delirium tremens

C. Schizophrenia

D. Korsakoff's psychosis

15. A 40-year-old man presents to casualty with history of regular and heavy use of alcohol for 10 years and morning drinking for 1 year. The last alcohol intake was 3 days back. There is no history of head injury or seizures. On examination, there is no icterus, sign of hepatic encephalopathy, or focal neurological sign. The patient has coarse tremors, visual hallucinations, and has disorientation to time. Which of the following is the best medicine to be prescribed for such a patient?

A. Diazepam

B. Haloperidol

C. Imipramine

D. Naltrexone

This patient is in delirium tremens.

16. A 39-year-old carpenter has taken two bottles of liquor from the local shop. After about an hour he develops confusion, vomiting, and blurring of vision. He has been brought to the emergency outpatient department. He should be given:

A. Naloxone

B. Diazepam

C. Flumazenit

D. Ethyl alcohol

It is a case of methyl alcohol poisoning, where in the metabolism could be replaced by using ethyl alcohol immediately.

17. A 34-year-old rickshaw puller has been using heroic for the past 10 yrs. One evening his family members found him unconscious. He was brought to the casualty. On examination he has tachycardia, shallow breathing, constricted pupils, his blood pressure was 100/70 mm of Hg. He had brisk bilateral deep tendon reflexes. The

plan-tar reflexes were flexor on both sides. Which of the following is the best treatment for him?

- A. Buprenorphine
- B. Flumazenil
- C. Methadone
- D. Naloxone

20 to 50 mg/ day of methadone is given to the patient to shift him from "hard" drugs, thus decreasing the IV use.

18. The basic determinant of treatment in drug addicts is:

- A. Vitamin B-complex therapy
- B. High intelligence
- C. Motivation
- D. Behaviour therapy

19. The characteristic feature of Alcoholic blackout includes:

- A. Amnesia (for events during alcohol drinking)
- B. Event of no significance
- C. Malingering
- D. All the of the above

20. Visual hallucinations are seen in:

- A. Phobia
- B. Alcoholism
- C. Mania
- D. Depression

21. Korsakoff's syndrome is seen in:

- A. Uremia
- B. Alcoholism
- C. Lead poisoning
- D. All of the above

22. Which of the following is true regarding methadone?

- A. Has better compliance
- B. Has no addiction liability
- C. Useful for maintenance therapy
- D. Useful for long term therapy

Methadone maintenance is a very popular method. 20 to 50 mg/d of methadone is given to the pt to shift him from hard drugs.

23. Which of the following drug is used in reducing the severity of morphine withdrawal syndrome?

- A. Apomorphine
- B. Methadone
- C. Naloxone
- D. None

24. Drug dependence occurs due to:

- A. One having curiosity about use of drugs
- B. Sudden withdrawal symptoms
- C. Development of tolerance
- D. All of the above

25. Drug of choice in alcohol withdrawal syndrome is:

- A. Diazepam
- B. Naloxone
- C. Clonidine
- D. Carbamazepine

Drug of choice for alcohol withdrawal are benzo-diazepines. Chlordiazepoxide 80 to 200 mg/day or diazepam 40 to 80 mg/d are most frequently used.

Answer

1.D 2.D 3.B 4.C 5.D 6.A 7.A 8.D 9.A 10.A 11.C 12.B 13.A 14.B 15.A 16.D 17.C 18.C 19.A 20.B 21.D 22.C 23.B 24.B 25.A 26.A 27.D 28.A 29.A 30.A 31.C 32.C 33.A 34.C 35.C 36.D 37.A 38.A 39.A 40.A 41.D 42.A 43.B 44.A 45.B 46.A 47.A 48.D 49.C 50.C 51.C 52.D 53.A 54.B 55.D 56.B 57.A

26. One of the following is associated with "Punch drunken-ness":

- A. Boxing
- B. Fortwin addiction
- C. Intravenous alcohol
- D. Methyl alcohol toxicity

27. "Bad trips" are characteristically associated with the addition of:

- A. Cannabis
- B. Cocaine
- C. Morphine
- D. LSD

Acute LSD intoxication sometimes presents with an acute panic reaction, known as a bad trip in which the individual experience a loss of control over his self. Recovery usually occurs within 8 to 12 hr of the last dose. Rarely, the intoxication is severe enough to produce an acute psychotic episode resembling schizophreniform psychosis.

Flashback occurs in LSD and cannabis where there is a spontaneous recurrence of the LSD use experience in a drug free state.

28. Which of the following is not a useful action of morphine and Pethidine?

- A. Antiemetic
- B. Antitussive
- C. Analgesic
- D. Addictive

29. Amphetamine (Dexedrine) is used in:

- A. Narcolepsy
- B. Psychosis
- C. Anxiety disorders
- D. Obsessive-compulsive neurosis

30. Sexual infidelity is commonly associated with:

- A. Morbid jealousy
- B. Fear
- C. Manic depressive psychosis
- D. Anxiety neurosis

31. Amotivational syndrome is seen in:

- A. LSD

B. Amphetamine

C. Cannabis

D. Cocaine

32. Which of the following is not seen in Korsakoff's syndrome?

A. Clear consciousness

B. Inability to learn new things

C. Hallucinations

D. Confabulation

It is due to thiamine deficiency

Lesions are seen in mammillary bodies and bilateral dorso-medial nucleus of thalamus.

33. Amphetamine psychosis is not characterized by:

A. Mania

B. Tactile hallucinations

C. Clear sensorium

D. Loosening of associations and paranoia. Amphetamine produces a psychosis which closely resembles paranoid schizophrenia.

34. Cannabis has not been used for the following medicinal purpose:

A. Nausea

B. Epilepsy

C. Tics

D. Glaucoma

Therapeutic use of cannabis – nausea caused by cancer chemotherapy, bronchial

asthma, epilepsy, glaucoma, dystonia.

35. Naloxone is an antidote for all except:

- A. Pethidine
- B. Pentazocine
- C. Buprenorphine
- D. Diphenoxylate

As buprenorphine is a mixed agonist-antagonist.

36. Delirium tremens (DT) is precipitated by:

- A. Shock after severe injury
- B. Sudden excess of alcohol uptake
- C. Acute withdrawal of alcohol
- D. All of the above

Remember- 5 per cent of alcoholics get DT. Recovery is seen by 1 week.

37. Amnesic reaction and delirium are seen with:

- A. Alcohol
- B. Opiates
- C. Cannabis
- D. Amphetamines

Amnesic syndrome—Korsakoff's described it and it is named after him

It is due to damage to mamillary body and dorsal and medial thalamic nucleus.

38. The characteristic features of Korsakoff's psychosis are:

- A. Loss of recent memory and impaired learning

B. Hallucinations

C. Delusions

D. Convulsion

Korsakoff's syndrome has impaired recent memory and new learning ability remote memory is intact. It is due to thiamine deficiency caused by chronic alcohol use.

39. Morbid jealousy is seen with:

A. Alcoholism

B. LSD addiction

C. Schizophrenia

D. Dementia

Morbid jealousy is occurrence of delusion of infidelity seen in alcoholism also termed Othello syndrome.

40. Wernicke's encephalopathy occurs due to deficiency of:

A. Thiamine

B. Cyanocobalamin

C. Riboflavin

D. Pyridoxine

41. Alcohol withdrawal is treated with:

A. Oxazepam

B. Disulfiram

C. Amitryptiline

D. Chlordiazepoxide

Chlordiazepoxide and diazepam are most frequently used.

42. Which of the following is the direct evidence of alcohol addiction?

A. Withdrawal symptoms

B. Memory disturbance

C. Confabulation

D. Cirrhosis

Definite evidence of addition of a substance – withdrawal symptoms.

Other Features:

Desire

Loss of control

Tolerance

Salience

Harmful use

43. In delirium tremens, not seen is:

A. Agitation

B. Depression

C. Perceptual disturbances

D. Disorientation in time

Features of DT—Altered sensorium – Autonomic – Perceptual disturbance.

44. Mandrax is a combination of a hypnotic and:

A. Antihistaminic

B. Analgesic

C. Antipyretic

D. None of the above

45. Magnan phenomenon occurs in addition with:

A. Cannabis

B. Cocaine

C. Morphine

D. Alcohol

46. The drug of choice for delirium tremens:

A. Diazepam

B. Phenobarbitone

C. Disulfiram

D. Chloral hydrate

Patients with delirium tremens need hospitalization.

47. Non-addicting drug useful for suppressing symptoms of opioid withdrawal is:

A. Clonidine

B. Cyclazocine

C. LAAM

D. Methadone

Clonidine, LAAM and Methadone are used in opioid withdrawal. LAAM and Methadone have addictions potential.

48. All of following are features of alcohol withdrawal syndrome, except:

A. Hallucination

B. Delusion

C. Drowsiness

D. Obsession.

Simple withdrawal – Tremors, nausea, vomiting, hangover, irritability, insomnia, anxiety
severe withdrawal – delirium tremens, alcoholic hallucinosis.

49. All of the following are features of morphine withdrawal,

A. Piloerection

B. Insomnia

C. Constipation

D. Increased nasal secretion

Symptoms of morphine withdrawal will include lacrimation, rhinorrhea, sweating, diarrhea, tachycardia, mild hypertension, insomnia, muscle cramps, raised body temperature.

50. Opiate withdrawal is linked with:

A. Chlorpromazine

B. Nalorphine

C. Methadone

D. Pethidine

51. Drug abuse of which substance shows symptoms similar to Schizophrenia:

A. LSD

B. Heroin

C. Amphetamine

D. Cannabis

52. The drug of choice in alcohol withdrawal is:

- A. Haloperidol
- B. Lithium
- C. Benzodiazepine
- D. Chlordiazepoxide

Diazepam can also be used

53. All the following are drugs used in heroin withdrawal except:

- A. Haloperidol
- B. Buprenorphine
- C. Clonidine
- D. Dextropropoxyphene

54. By which of the following is alcohol dependence best indicated:

- A. Black outs
- B. Withdrawal symptoms
- C. Early morning drinking
- D. Physical complaints

55. A 60-year-old female alcoholic who is a heavy drinker hears voice of people discussing their intention to kill her. She also has decreased sleep and feels sad. The diagnosis is:

- A. Psychotic features with depression
- B. Wernicke-korsakoff
- C. Delirium tremens
- D. Alcoholic hallucinosis

Alcohol hallucinosis occurs in 2 per cent of alcoholics. Hallucinations occur in clear consciousness. The conditions have to be differentiated from delirium tremens.

56. A 42-year-old chronic alcoholic meets with an accident and suddenly stops drinking. He presents with tremor, immaturity, poor attention span, and an inability to identify his family members 24 hours later. The diagnosis is:

A. Wernicke's encephalopathy

B. Delirium tremens

C. Alcohol intoxication

D. Acute psychosis

Features of Delirium tremens:

It occurs within 2 to 4 days of abstinence

Clouding of consciousness

Poor attention span

Visual and auditory hallucinations

Mixed autonomic disturbance

Psychomotor agitation and ataxia

Insomnia

Dehydration with electrolyte imbalance.

57. A person drinking alcohol says that he is doing so to overcome family problems.

The defense mechanism involved is:

A. Rationalization

B. Denial

C. Projection

D. Minimalization

Answer

1.D 2.D 3.B 4.C 5.D 6.A 7.A 8.D 9.A 10.A 11.C 12.B 13.A 14.B 15.A 16.D 17.C 18.C 19.A
20.B 21.D 22.C 23.B 24.B 25.A 26.A 27.D 28.A 29.A 30.A 31.C 32.C 33.A 34.C 35.C 36.D
37.A 38.A 39.A 40.A 41.D 42.A 43.B 44.A 45.B 46.A 47.A 48.D 49.C 50.C 51.C 52.D 53.A
54.B 55.D 56.B 57.A