



The Royal  
Australian &  
New Zealand  
College of  
Psychiatrists

If you are doing this Mock MCQ exam in 2020 printed out in paper format to mimic the real exam, please just use this as the question booklet, and use the "scantron" answer sheet provided to note your answers. That will give you practice filling in a scantron-type booklet, as in the Nov 2020 paper-based exam. There are answer tick-boxes in this document, but they're there so it can be done electronically in future – don't use them in the lead-up to Nov 2020.

# Mock MCQ Paper 2020 (Produced by the New Zealand Training Programmes)

Candidate's name:

Date:

The real MCQ paper is these days done via a computer interface at special testing venues. This Mock Paper cannot replicate those conditions, but is still a useful exercise in managing the size of the task, the timing, and individual question types.

We suggest that candidates replicate actual exam conditions as far as possible, according to the rules in the [Exams section of the 2012 Regulations](#) (see: Written Examination policy esp. pages 7-12), and that they use the [MCQ Information](#), [tutorial MCQ exam](#), and [tutorial model answers](#) provided by the College to familiarise themselves with the MCQ electronic interface.

**This version of the MCQ can be completed electronically, on a computer using Word to fill in the correct answers in each answer box. Remember to hit control-S to save your completed paper intermittently, and at the very end of the exam save the file. If you'll be doing this at a centralised venue, bring a flash-drive to save the completed mock exam and take it home to mark.**

The model answers will be here, after 5<sup>th</sup> July 2019: <http://www.psychtraining.org/Mock-exams.html> (no cheating beforehand!). This exam is only written *once* a year, so if you're not sitting until February, save it to do in the lead-up then, and don't look at the answers earlier.

**You are allowed 3 hours and 10 minutes total time to complete the paper. All of that is exam-time – there is no 'reading time'.**

**– REMEMBER TO HIT SAVE OR CONTROL-S REGULARLY TO SAVE YOUR ANSWERS ! –**

## MCQ Mock Exam

### Extended Matching Questions (EMQs)

You are about to commence the EMQ component of the Mock Exam.

- The Question Instructions are on the left panel of each page.
- The Questions and Answer Options are on the right hand panel.
- Please read Question Instructions, Questions and options CAREFULLY before answering.
- There may be a series of Questions that could share the same list of answer options.

**To answer a Question, left-click on the checkbox beside your preferred option, to select it. e.g.**

- A. GABA receptors
- B. Alpha-adrenergic receptors
- C. Dopaminergic receptors

**To change your answer, click the checkbox again to de-select it, and click another one.**

**To 'flag' a question and review it later add an ! to the 'Flag box' at top right.** Then search for all the !s when you want to review any questions you were unsure about, by hitting **control-F** to bring up the navigation field, then type ! in that field.

Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page.

Example of a 'flagged' question

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later) EMQ 1 !

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 1

For the following patient, please select the **MOST LIKELY** scenario.

**Q.1** A young woman is found deeply unconscious and cyanosed. She recently got out of prison. Her partner says she has relapsed back into drug use again.

Select **ONLY ONE** answer per page.

- A. Asthma attack
- B. Head injury from falling
- C. Illicit methylphenidate use
- D. Loss of tolerance to opioids
- E. Severe alcohol intoxication after heavy drinking
- F. Synthetic cannabis use
- G. Synthetic cathinone use

For the following question, please select the **MOST ACCURATE** answer.

**Q.2** Which of the following factors has **NOT** been demonstrated to increase the risk of relapse of an acute depression?

Select **ONLY ONE** answer per page.

- A. Comorbid medical illness
- B. Duration of episode
- C. Education level
- D. Female Gender
- E. Life events
- F. Persistent insomnia
- G. Poor compliance
- H. Poor supports
- I. Presence of psychosis
- J. Severity of depression
- K. Substance use
- L. Unemployment

For the following example, please select the **MOST ACCURATE** answer.

**Q.3** Sleep hygiene advice which should be avoided for a patient who complains of initial insomnia and frequent night-time waking.

Select **ONLY ONE** answer per page.

- A. A cool but comfortable room temperature can aid sleep
- B. Avoid excessive alcohol
- C. Avoid large meals or intense exercise three hours prior to bedtime
- D. Avoid sitting for long periods and exercise regularly
- E. Cut out caffeine after 2 pm
- F. Don't use screens such as phones, computers, tablets or TVs for at least one hour before bedtime
- G. Don't nap after 3 pm
- H. Go to bed when feeling sleepy
- I. Minimise exposure to blue light in the evening by changing device screens to night mode in the evenings
- J. Take time to unwind before going to bed

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.4** Joan, a 23 year old woman, presents regularly to hospital with abdominal pain and nausea. No clear cause is identified but she spends large amounts of time worrying about her abdominal symptoms including their duration, severity and trigger factors.

Select **ONLY ONE** answer per page.

- A. Body Dysmorphic Disorder
- B. Factitious Disorder
- C. Functional Neurological Symptom Disorder
- D. Illness Anxiety Disorder
- E. Obsessive Compulsive Disorder
- F. Somatic Symptom Disorder

For the following question, please select the **MOST ACCURATE** answer.

Q.5 Which of the following is not a first rank symptom?

Select **ONLY ONE** answer per page.

- A. Audible thoughts
- B. Delusional perception
- C. Made affect
- D. Somatic passivity
- E. Thought broadcast
- F. Thought insertion
- G. Thought withdrawal
- H. Voices arguing
- I. Voices commanding
- J. Voices commenting

For the following example, please select the **MOST ACCURATE** answer.

**Q.6 Findings which suggest heavy drinking.**

Select **ONLY ONE** answer per page.

- A. Electrolyte abnormalities
- B. Eosinophilia
- C. Increased albumin
- D. Increased testosterone
- E. Irregular pulse
- F. Low oxygen saturation
- G. Raised CRP

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 7

For the following patient, please select the **MOST APPROPRIATE** next course of action.

**Q.7** A 52 year old woman who has been treated with fluoxetine for major depressive disorder for over two years comes to your clinic complaining of weakness, constipation and weight gain over the past six months. On physical examination she has dry, coarse skin, bradycardia, hypothermia and swelling of the hands and feet.

Select **ONLY ONE** answer per page.

- A. Cease fluoxetine
- B. Change to a different antidepressant
- C. Echocardiogram
- D. Electrocardiogram
- E. Full blood count
- F. Liver function tests
- G. Metabolic monitoring
- H. Refer to a dermatologist
- I. Serum electrolytes
- J. Serum fluoxetine level
- K. Serum glucose
- L. Thyroid-stimulating hormone level

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For the following question, please select the **MOST ACCURATE** answer.

**Q.8** Which personality trait is the strongest predictor of poor mental health outcomes and is associated with the highest mortality?

Select **ONLY ONE** answer per page.

- A. High agreeableness
- B. High conscientiousness
- C. High extroversion
- D. High neuroticism
- E. High openness
- F. Low agreeableness
- G. Low conscientiousness
- H. Low extroversion
- I. Low neuroticism
- J. Low openness

For the following example, please select the **MOST ACCURATE** statement listed below.

**Q.9** Regarding the use of atomoxetine and methylphenidate for ADHD in children:

Select **ONLY ONE** answer per page.

- A. Atomoxetine is the only reasonable option if diversion of the medication is possible
- B. Atomoxetine may provide longer cover over a 24-hour period than stimulants
- C. Both atomoxetine and stimulants have an effect within one hour
- D. The effect size of atomoxetine is superior in most studies to methylphenidate
- E. There are no concerns about lack of weight gain on atomoxetine

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.10** Amy, a 19 year old university student, is brought to your clinic by her flatmate. The flatmate has been concerned for the last six months about Amy who is failing her courses and spends all her time in her room. Amy says that people's thoughts have been coming into her mind and she thinks the university is working together with the government to have her excluded.

Select **ONLY ONE** answer per page.

- A. Acute stress disorder
- B. Delusional disorder
- C. Depressive episode with psychosis
- D. Hyperthyroidism
- E. Hypothyroidism
- F. Schizoaffective disorder
- G. Schizophrenia
- H. Schizophreniform disorder
- I. Substance induced psychosis
- J. Temporal lobe epilepsy

For the following example, please select the **MOST ACCURATE** answer.

Q.11 The area of the brain most associated with addiction.

Select **ONLY ONE** answer per page.

- A. Basal ganglia
- B. Cerebellum
- C. Corpus striatum
- D. Hippocampus
- E. Hypothalamus
- F. Nucleus accumbens
- G. Thalamus

For the following patient, please choose the MOST LIKELY cause from the list below.

**Q.12** Andrei, A 35 year old man with bipolar disorder, attends your clinic for routine follow up. His condition has proven treatment refractory and he has been treated with multiple medications over the last two years. His most recent relapse was a mixed episode. His mood is currently stable but he reports a 3 month history of tremor primarily affecting his hands.

Select ONLY ONE answer per page.

- A. Alcohol withdrawal
- B. Early onset Parkinson's Disease
- C. Essential tremor
- D. Gabapentin
- E. Hyperthyroidism
- F. Lamotrigine
- G. Lithium carbonate
- H. Olanzapine
- I. Sertraline
- J. Sodium Valproate

For the following patient, please select the **LEAST APPROPRIATE** intervention listed below.

**Q.13** Maria, a 34-year nurse, reports that her life changed forever 10 months ago when her husband died in a car crash. She avoids socialising with friends or family and attends work but says her professional functioning since the accident has been barely adequate. Alone at home she alternates between yearning for her husband, crying, and feeling numb. She denies suicidal intent, but says that she feels her life isn't worth living without him.

Select **ONLY ONE** answer per page.

- A. Antidepressant medication
- B. Communication analysis
- C. Emotional catharsis
- D. Enhancing social support
- E. Interpretation of transference and countertransference
- F. Modifying maladaptive behaviours
- G. Modifying maladaptive cognitions
- H. Psychoeducation
- I. Reconstructing meaning
- J. Therapeutic focus on the loss

For the following patient, please select the **MOST LIKELY** type of dementia listed below.

**Q.14** Rhona is a 58 year old woman referred by her GP for assessment of a possible dementia. She presents with cognitive slowing, apathy, difficulty walking and occasional urinary incontinence.

Select **ONLY ONE** answer per page.

- A. Alzheimer's Disease
- B. Binswanger's Disease
- C. Creutzfeldt–Jakob disease
- D. Dementia with Lewy Bodies
- E. Frontotemporal Dementia
- F. Huntington's Disease
- G. Multi-infarct Dementia
- H. Normal Pressure Hydrocephalus
- I. Parkinson's Disease

For the following question, please select the MOST ACCURATE answer.

Q.15 For a patient on 10-20 mg/day of oral olanzapine, what plasma range of olanzapine would you expect?

Select ONLY ONE answer per page.

- A. 1000-2000 nmol/L
- B. 10-50 ng/L
- C. 10-50 ug/L
- D. 5-65 nmol/L
- E. 90-400 mU/L
- F. Above 30 mmol/L
- G. Above 30 nmol/L
- H. Unspecified

For the following question, please select the **MOST ACCURATE** answer.

**Q.16** What is often seen in the immediate withdrawal syndrome (the first 24 hours) from methamphetamine?

Select **ONLY ONE** answer per page.

- A. Euphoria
- B. Fatigue and exhaustion
- C. Overexcitement and inability to stop moving
- D. Psychosis
- E. Stomach cramps and diarrhoea
- F. Sweating
- G. Thirst

For the following question, please select the **MOST ACCURATE** answer.

**Q.17** Catatonic excitation is most commonly associated with which state?

Select **ONLY ONE** answer per page.

- A. Automatism
- B. Catalepsy
- C. Cataplexy
- D. Delirium
- E. Hypomania
- F. Mania
- G. Neuroleptic Malignant Syndrome
- H. Parkinsonism
- I. Substance induced psychosis

For the following patient, please choose the **MOST ACCURATE** answer.

**Q.18** Sarah, a 16-year-old high school student and competitive athlete, has been restricting her eating and after 8 months has lost 14 kg. She is less socially active, her mood is low and her concentration poor. Her parents are concerned, and recently her coach barred her from training, however she continues to run for 10 km per day and to follow a routine of strength exercises at home. Which treatment has the most evidence for efficacy in Sarah's case?

Select **ONLY ONE** answer per page.

- A. Cognitive behavioural therapy
- B. Cognitive behavioural therapy and antidepressant medication
- C. Maudsley Family Based Treatment
- D. Individual adolescent-focused therapy
- E. Individual adolescent-focused therapy and antidepressant medication
- F. Mentalization-based treatment
- G. Residential or inpatient refeeding
- H. Residential or inpatient refeeding and low dose antipsychotic medication
- I. Systemic Family Therapy
- J. Transcranial Magnetic Stimulation

For the following clinical scenario, please select the MOST APPROPRIATE treatment intervention.

**Q.19** A young mother who had a severely abusive childhood presents with her 2-year-old son who she describes as unlikeable due to his poor behaviour. She says she is struggling to feel close to him.

Select ONLY ONE answer per page.

- A. Cognitive behavioural therapy with child and parent
- B. Dialectical behaviour therapy
- C. Individual psychodynamic psychotherapy for child
- D. Individual psychodynamic psychotherapy for mother
- E. Interpersonal therapy
- F. Maudsley Family Based Treatment
- G. Systemic family therapy
- H. 'Triple P' Parenting course for the parents
- I. 'Watch, wait and wonder' - dyadic therapy

For the following example, please choose the **MOST ACCURATE** answer.

**Q.20** Antipsychotics cause postural hypotension through antagonism at which receptor?

Select **ONLY ONE** answer per page.

- A. Histaminergic H1 receptor
- B. Meso-limbic dopamine D2 receptor
- C. Muscarinic M1 receptor
- D. Post-synaptic alpha 1 receptor
- E. Pre-synaptic alpha 2 receptor
- F. Serotonergic 2A receptor
- G. Serotonergic 2C receptor
- H. Serotonergic 3 receptor

For the following example, please choose the **MOST ACCURATE** answer.

Q.21 Disulfiram cannot be used in:

Select **ONLY ONE** answer per page.

- A. People on concurrent benzodiazepines
- B. People on concurrent Naltrexone
- C. People on opioid substitution treatment
- D. People who drink over 20 standard drinks weekly
- E. People with co-morbid depression
- F. People with COPD
- G. People with liver cirrhosis

For the following symptom, please select the **MOST APPROPRIATE** associated condition.

Q.22 Leaden paralysis.

Select **ONLY ONE** answer per page.

- A. Catalepsy
- B. Cyclothymic disorder
- C. Histrionic personality disorder
- D. Idiopathic Parkinson's disease
- E. Major depressive disorder with atypical features
- F. Manic stupor
- G. Motor neuron disease
- H. Schizophrenia, catatonic type
- I. Tertiary syphilis

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.23** Luigi is a 31-year-old single man who quit his job at a law firm after being passed over for advancement. Since then he has had a series of low level jobs and currently works part time in a supermarket stocking shelves. He has no close friends or romantic attachments, and no hobbies or passions. He regularly tells his family that he's bored, depressed and that life isn't worth living. He feels inadequate and a failure and resents the achievements of others. He blames his failure to succeed on people not recognising his potential and talents. He fantasises that his employer will finally recognise his special abilities and promote him to a managerial position. At other times he fantasises about humiliating his boss with a display of superior knowledge.

Select **ONLY ONE** answer per page.

- A. Adjustment disorder with depressed mood
- B. Anankastic personality disorder
- C. Borderline personality disorder
- D. Cyclothymic disorder
- E. Delusional disorder, grandiose type
- F. Dissocial personality disorder
- G. Dysthymic disorder
- H. Histrionic personality disorder
- I. Narcissistic personality disorder
- J. Schizotypal personality disorder

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 24

For the following patient, please choose the MOST APPROPRIATE diagnosis.

**Q.24** Mila is a 41 year old female presenting as acutely paranoid with auditory hallucinations. Her mental state fluctuates. On examination you note a facial rash. She has run out of her regular medications due to the COVID-19 pandemic.

Select ONLY ONE answer per page.

- A. Creutzfeldt-Jakob disease
- B. Limbic Encephalitis
- C. Lupus Cerebritis
- D. Multiple Sclerosis
- E. Severe Hyperparathyroidism
- F. Severe Hyperthyroidism
- G. Severe Hypoparathyroidism
- H. Severe Hypothyroidism
- I. Wernicke's Encephalopathy

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For the following patient, please choose the MOST LIKELY type of phenomenology described.

**Q.25** While you are interviewing him, Sam, a 35-year-old man with chronic schizophrenia, repeatedly smooths his hair with his right hand and then places his right palm against his right cheek. When asked, he is unable to explain why he does this. His mother says that he's done this for a number of years.

Select ONLY ONE answer per page.

- A. Akathisia
- B. Echopraxia
- C. Increased goal directed activity
- D. Motor tic
- E. Perseveration
- F. Psychomotor agitation
- G. Stereotypy
- H. Tardive dyskinesia
- I. Verbigeration

For the following example, please select the MOST ACCURATE answer listed below.

Q.26 When assessing someone regarding "fitness to plead", it is not necessary to determine whether the patient:

Select ONLY ONE answer per page.

- A. Knows the consequences of any pleas
- B. Knows the penalty for lying under oath
- C. Knows the purpose of a trial
- D. Knows what an oath is
- E. Knows what pleas are open to them
- F. Knows what the consequences of a conviction are
- G. Knows what they are charged with
- H. Knows whether they committed the offence
- I. Knows the roles of the judge and jury
- J. Knows who their lawyer is and how to instruct them

For the following example, please select the **MOST ACCURATE** answer.

**Q.27** A dynamic risk factor for increased risk of suicide.

Select **ONLY ONE** answer per page.

- A. Childhood sexual abuse
- B. Diagnosis of borderline personality disorder
- C. Family history of mood disorder
- D. History of imprisonment
- E. Intoxication with alcohol
- F. Male gender
- G. Older age
- H. Past history of deliberate self-harm
- I. Past history of violence
- J. Previous suicide attempts

For the following example, please select the MOST APPROPRIATE answer.

**Q.28** The psychodynamic developmental stage of people with borderline personality disorder.

Select ONLY ONE answer per page.

- A. Erikson's ego-integrity versus despair stage
- B. Erikson's industry versus inferiority stage
- C. Freud's anal phase
- D. Freud's oedipal phase
- E. Freud's oral phase
- F. Klein's depressive position
- G. Klein's paranoid-schizoid position
- H. Mahler's mother-infant symbiosis
- I. Winnicott's false self

For the following patient, please select the **MOST APPROPRIATE** intervention.

**Q.29** Robbie is an 11-year-old boy with autistic spectrum disorder and limited language. His school have good management plans and his parents have behaviour plans at home. However, he is becoming increasingly aggressive to both his mother and himself when frustrated. He has bruises across his forehead from repeatedly striking himself.

Select **ONLY ONE** answer per page.

- A. Atomoxetine
- B. Citalopram
- C. Clozapine
- D. Concerta (Methylphenidate XR)
- E. Dexamphetamine
- F. Fluoxetine
- G. Melatonin
- H. Modafinil
- I. No medication
- J. Nortriptyline
- K. Risperidone

For the following patient, please select the **MOST LIKELY** symptom or comorbid diagnosis from the list below.

**Q.30** Josef, a 52-year-old man with schizophrenia, is convinced he is suffering from bowel cancer. He has been assessed by the Gastroenterology service and the possibility of bowel cancer has been excluded. Unfortunately, Josef is not reassured. Upon interview, Josef says the voices have told him he has bowel cancer and that it's going to kill him.

Select **ONLY ONE** answer per page.

- A. Factitious disorder
- B. Ganser syndrome
- C. Generalised anxiety disorder
- D. Hypochondriacal delusion
- E. Illness anxiety disorder
- F. Nihilistic delusion
- G. Somatic hallucination
- H. Somatic symptom disorder

For the following example, please select the MOST ACCURATE answer.

Q.31 "Pokies" are considered the most harmful form of gambling because they:

Select ONLY ONE answer per page.

- A. Appeal to a wider cross-section of society
- B. Are a more socially acceptable form of gaming
- C. Are frequently found in hotels and clubs so they encourage drinking as well as gambling
- D. Are more sociable
- E. Are non-continuous
- F. Involve high event frequency
- G. Stimulate multiple sensory modalities

For the following example, please select the MOST ACCURATE answer.

Q.32 A self-report scale for depressive symptoms.

Select ONLY ONE answer per page.

- A. Beck Depression Inventory
- B. Conners' Parent Rating Scale
- C. Hamilton Depression Rating Scale
- D. Maudsley Obsessive Compulsive Inventory
- E. Mini Mental State Examination
- F. Minnesota Multiphasic Personality Inventory
- G. Montgomery-Asberg Depression Rating Scale
- H. Montreal Cognitive Assessment
- I. SCID-5 (Structured Clinical Interview for DSM-5)
- J. Toronto Alexithymia Scale

For the following example, please select the **MOST ACCURATE** answer.

**Q.33** A medication with the best evidence of efficacy in the management of aggressive and assaultive behaviour in patients with personality disorders.

Select **ONLY ONE** answer per page.

- A. Carbamazepine
- B. Diazepam
- C. Haloperidol
- D. Lamotrigine
- E. Lithium
- F. Mirtazapine
- G. Olanzapine
- H. Risperidone

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.34** Ari is a 9-year-old with a large vocabulary who presents with distress that his classmates don't want to engage in prolonged discussions about the gender characteristics of various species of mammals.

Select **ONLY ONE** answer per page.

- A. Adjustment disorder with disturbance of behaviour
- B. Attention Deficit Hyperactivity Disorder
- C. Autistic Spectrum Disorder
- D. Conduct Disorder
- E. Intellectual Disability
- F. Major Depressive Disorder
- G. Oppositional Defiant Disorder
- H. Reactive Attachment Disorder
- I. Rett's Disorder

For the following question, please select the MOST ACCURATE answer.

Q.35 Which of the following antipsychotics have not proven more efficacious when compared to first generation antipsychotics?

Select ONLY ONE answer per page.

- A. Amisulpride
- B. Aripiprazole
- C. Clozapine
- D. Olanzapine
- E. Paliperidone
- F. Pimozide
- G. Risperidone
- H. Thiothixene

For the following example, please select the MOST APPROPRIATE test from the list below.

**Q.36** An alcohol use screening test with only four questions, allowing very brief screening in a variety of settings.

Select ONLY ONE answer per page.

- A. Addiction Severity Index (ASI)
- B. Alcohol Use Disorders Identification Test (AUDIT)
- C. CAGE test
- D. Drug Abuse Screening Test (DAST)
- E. Michigan Alcohol Screening test (MAST)
- F. Self-Administered Alcoholism Screening Test (SAAST)
- G. Severity of Alcohol Dependence Questionnaire (SADQ)

For the following question, please select the **MOST ACCURATE** answer.

**Q.37** Schizoaffective disorder is best distinguished from Bipolar disorder by which of the following:

Select **ONLY ONE** answer per page.

- A. Age of onset
- B. Degree of psychosocial impairment
- C. Duration of illness
- D. History of substance abuse
- E. Presence of command hallucinations
- F. Presence of mood congruent delusions
- G. Presence of passivity experiences
- H. Presence of psychosis in the absence of mood symptoms
- I. Response to a mood stabiliser

For the following question, please select the **MOST ACCURATE** answer.

**Q.38** The aim of behavioural genetics is to learn about:

Select **ONLY ONE** answer per page.

- A. Genetic and environmental influences on human behaviour
- B. Genetic traits influencing the efficacy of behavioural therapies
- C. Genetically engineered psychotropic medications
- D. Heritable brain changes following behavioural conditioning
- E. Language development in humans
- F. The extent to which geneticists can modify human behaviour
- G. The genetic basis of psychiatric illness
- H. Treatment of behavioural problems in children with inherited genetic syndromes

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

**Q.39** Naomi, a 27-year-old woman, presents with a three year history of right thigh pain. There is no history of trauma to the leg or any other history of injury. Medical investigations are unremarkable for any pathology.

Select **ONLY ONE** answer per page.

- A. Body Dysmorphic Disorder
- B. Delusional Disorder (somatic type)
- C. Dependent Personality Disorder
- D. Dissociative Disorder
- E. Factitious Disorder
- F. Histrionic Personality Disorder
- G. Illness Anxiety Disorder
- H. Malingering
- I. Somatic Symptom Disorder

For the following example, please select the **MOST ACCURATE** statement from the list below.

**Q.40** Regarding Tourette's Syndrome:

Select **ONLY ONE** answer per page.

- A. Coprolalia is common
- B. Occurrence of multiple motor tics and multiple phonic tics across one year are required to meet diagnostic criteria
- C. Onset before puberty is required to meet diagnostic criteria
- D. Tics are most commonly verbal (words and phrases)
- E. Tics cannot be suppressed even for a few seconds
- F. Tics must be noticeable to casual observers to meet diagnostic criteria
- G. Tourette's syndrome is a rare condition (less than 0.1% of the population)
- H. Tourette's syndrome is often associated with comorbid ADHD or OCD

For the following question, please select the **MOST ACCURATE** answer.

**Q.41** Buprenorphine/naloxone is a newer opioid substitution treatment. If a patient is transferred directly from other opioids to buprenorphine/naloxone it can:

Select **ONLY ONE** answer per page.

- A. Adversely affect behaviour
- B. Be a useful acute treatment
- C. Carry a greater risk of IV use
- D. Cause vomiting
- E. Displace the other opioids
- F. Heighten the risk of allergic reaction
- G. Improve compliance with the substitution programme
- H. Increase euphoria

For the following question, please select the **MOST ACCURATE** answer.

**Q.42** Which of the following foods or drinks ought to be avoided by a patient prescribed Tranylcypromine?

Select **ONLY ONE** answer per page.

- A. Boiled eggs
- B. Cashew nuts
- C. Cucumber
- D. Marmite
- E. Raspberry jam
- F. Spring onions
- G. Stewed apples
- H. Swordfish
- I. Tomato ketchup
- J. White wine

For the following example, please select the MOST APPROPRIATE historical figure.

Q.43 He used "preference satisfaction" to define the concept of "good" – as in: "the greatest good for the greatest number".

Select ONLY ONE answer per page.

- A. Carl Jung
- B. Friedrich Nietzsche
- C. George Moore
- D. Immanuel Kant
- E. Jeremy Bentham
- F. Jim Childress
- G. John Stuart Mill
- H. Kenneth Arrow
- I. Michel Foucault
- J. Noam Chomsky
- K. Sigmund Freud
- L. Thomas Beauchamp

For the following patient, please select the **MOST APPROPRIATE** next intervention.

**Q.44** Jeannie is a 7-year-old girl with ADHD. Both of her parents are on a local methadone program and the GP has expressed concerns about potential diversion of medication. Jeannie has had a trial of atomoxetine which showed no significant benefit according to her school and her parents. What is the most appropriate medication for Jeannie at this point?

Select **ONLY ONE** answer per page.

- A. Atomoxetine
- B. Citalopram
- C. Dexamphetamine
- D. Fluoxetine
- E. Melatonin
- F. Methylphenidate (extended-release)
- G. Methamphetamine
- H. Modafinil
- I. Nortriptyline
- J. Quetiapine
- K. Risperidone

For the following example, please select the MOST ACCURATE answer.

Q.45 A brain change that has not been reported in patients with schizophrenia.

Select ONLY ONE answer per page.

- A. Decreased brain volume
- B. Decreased frontal white matter
- C. Decreased grey matter
- D. Decreased hemisphere size
- E. Decreased left superior temporal gyrus
- F. Decreased temporal lobe volume
- G. Increased cerebellum size
- H. Increased cerebrospinal fluid
- I. Increased ventricular size

For the following clinical scenario, please select the MOST ACCURATE answer.

**Q.46** Gina is a 33-year-old woman who presents wanting help with an 18 month history of using intravenous morphine 3 times daily. She tried to stop using twice before with the help of a drug counsellor, but each time she relapsed within a week. Which situation below, if present, is the most likely to cause short-term mortality risk if Gina's treating doctor prescribes methadone 30 mg daily.

Select ONLY ONE answer per page.

- A. Concomitant use of other sedative medications
- B. CYP3A4 poor metaboliser status
- C. Diversion of methadone for sale
- D. Long QT syndrome
- E. Past history of self-harm behaviour
- F. Pharmacy dispensing error
- G. Pre-existing liver disease
- H. Pre-existing renal disease

For the following patient, please select the MOST APPROPRIATE diagnosis.

**Q.47** Tony, a 23 year old man suffering from severe depressive disorder, has presented to the Emergency Department following an overdose of antidepressant medication. The Emergency Department consultant has declared him to be "medically fit" to be assessed. On assessment, Tony appears restless and sweaty, and has a tremor. Physical examination reveals sinus tachycardia, hyperreflexia and a temperature of 38.4C.

Select ONLY ONE answer per page.

- A. Akathisia
- B. Alcohol withdrawal
- C. Benzodiazepine withdrawal
- D. Lithium toxicity
- E. Malignant catatonia
- F. Meningococcal septicaemia
- G. Neuroleptic malignant syndrome
- H. Opioid toxicity
- I. Paracetamol toxicity
- J. Serotonin syndrome
- K. Urinary tract infection

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.48** A 25 year old woman presents with irritability, violent outbursts and paranoia after stopping her penicillamine.

Select **ONLY ONE** answer per page.

- A. Acute intermittent Porphyria
- B. Alzheimer's Disease
- C. Neurosyphilis
- D. Normal Pressure Hydrocephalus
- E. Systemic Lupus Erythematosus
- F. Temporal lobe epilepsy
- G. Turners syndrome
- H. Wilsons Disease

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.49** Mrs Richards is a 65-year-old woman with a 6 month history of anxiety, personality change and cognitive impairment. On examination she has myoclonic jerks.

Select **ONLY ONE** answer per page.

- A. Creutzfeldt-Jakob disease
- B. Limbic Encephalitis
- C. Lupus Cerebritis
- D. Multiple Sclerosis
- E. Severe Hyperparathyroidism
- F. Severe Hyperthyroidism
- G. Severe Hypoparathyroidism
- H. Severe Hypothyroidism
- I. Wernicke's Encephalopathy

For the following description of phenomenology, please select the MOST ACCURATE answer.

**Q.50** Ali is a 26-year-old man with a first episode of psychosis. He watches a seagull flying over a park and when the seagull lands on a nearby lamppost, Ali becomes suddenly convinced that his neighbour is planning to kill him.

Select ONLY ONE answer per page.

- A. Concrete thinking
- B. Delusion of reference
- C. Delusional mood
- D. Delusional perception
- E. Écho de la pensée
- F. Pareidolia
- G. Persecutory delusion
- H. Thought-action fusion
- I. Thought insertion

For the following example please select the **MOST ACCURATE** statement listed below.

**Q.51** Disulfiram is an aversive therapy for alcoholism which:

Select **ONLY ONE** answer per page.

- A. Can be commenced within 24 hours of the last drink
- B. Can be used at doses above 1000mg daily
- C. Can be used in patients with alcohol-related peripheral neuropathy
- D. Commonly causes halitosis
- E. Commonly causes insomnia
- F. Inhibits the enzyme alcohol dehydrogenase
- G. Is as effective as naltrexone or acamprosate in the treatment of moderate to severe alcoholism
- H. Is associated with a risk of hypomania

For the following example, please select the MOST RELEVANT ethical concept from the list below.

**Q.52** An acutely suicidal patient with borderline personality disorder demands to read their records. The request is refused until such time as the patient is more stable.

Select ONLY ONE answer per page.

- A. Act utilitarianism
- B. Autonomy
- C. Beneficence
- D. Ethical relativism
- E. Justice
- F. Non-maleficence
- G. Practical wisdom
- H. Rule utilitarianism

For the following paraphilia please select the LEAST ACCURATE statement listed below.

Q.53 Voyeurism:

Select ONLY ONE answer per page.

- A. A degree of sexual voyeurism is part of the normal sexual experience and voyeuristic urges are common and not necessarily indicative of pathology
- B. A typical profile of individuals meeting diagnostic criteria for voyeurism can be identified by sex, intelligence, educational level, occupation, and marital status
- C. Individuals meeting diagnostic criteria for voyeurism tend to be less well socially adjusted and have lower self-esteem
- D. Sexual voyeurism involves objectification and is predatory in nature
- E. There are significant comorbidities between voyeurism, exhibitionism, frotteurism, rape, and paedophilia
- F. There is an association between voyeurism and childhood separation from parents
- G. There is an association between voyeurism and childhood sexual, emotional and physical abuse
- H. Voyeurism has an increased association with mood disorder, substance use disorders, and gambling

For the following clinical scenario, please select the MOST APPROPRIATE intervention from the list below.

**Q.54** Harry is a 9-year-old with a history of significant ADHD. His school reports a huge improvement on stimulant medication but his father still says that Harry is ruining their family and destroying the marriage.

Select ONLY ONE answer per page.

- A. CBT with Harry and his father
- B. Dialectical behaviour therapy
- C. Individual psychodynamic psychotherapy for Harry
- D. Individual psychodynamic psychotherapy for father
- E. Interpersonal therapy
- F. Maudsley Family Based Treatment
- G. Systemic family therapy
- H. 'Triple P' Parenting course for Harry's parents
- I. 'Watch, wait, and wonder' – dyadic therapy

For the following example, please select the MOST ACCURATE statement listed below.

Q.55 The impact of cannabis use on schizophrenia:

S

Select ONLY ONE answer per page.

- A. Cannabis use has been proven to cause schizophrenia
- B. Cannabis use is associated with earlier onset of schizophrenia
- C. Cannabis use is not related to a family history of schizophrenia
- D. Schizophrenia risk is unrelated to the amount of cannabis exposure
- E. Schizophrenia risk is worsened by high CBD:THC formulations of cannabis
- F. The association between cannabis use and risk of schizophrenia is undefined
- G. The impact of cannabis use on risk of schizophrenia is similar to the impact of alcohol use
- H. There is no association between cannabis use and risk of schizophrenia

For the following example please select the **MOST ACCURATE** answer from the list below.

**Q.56** A medically serious withdrawal complication in a patient with severe alcoholism, occurring less than 24 hours after the last drink.

Select **ONLY ONE** answer per page.

- A. Confusion
- B. Diaphoresis
- C. Formication
- D. Hyperthermia
- E. Jaundice
- F. Marked tremor
- G. Paranoid delusions
- H. Seizures
- I. Tachycardia
- J. Visual hallucinations

For the following question, please select the **MOST ACCURATE** answer.

**Q.57** About what proportion of the population can be diagnosed with an anxiety disorder in any given year?

Select **ONLY ONE** answer per page.

- A. 2%
- B. 5%
- C. 15%
- D. 33%
- E. 40%
- F. 55%
- G. 67%

For the following example please select the **MOST APPROPRIATE** answer from the list below.

**Q.58** Children of mothers with borderline personality disorder, compared to the children of mothers with no diagnosis:

Select **ONLY ONE** answer per page.

- A. Have lower narrative coherence when describing relationships
- B. Have more difficulty with reality testing
- C. Present with more emotional regulation difficulties
- D. Report more fear of abandonment
- E. Report more negative parent-child relationship expectations
- F. All of the above
- G. None of the above

For the following patient, please select the **MOST APPROPRIATE** treatment listed below.

**Q.59** Josie is a 15-year-old girl with medically stable anorexia nervosa, who lives with her parents and one younger sibling.

Select **ONLY ONE** answer per page.

- A. Admission to an inpatient unit until weight is normalised
- B. Dietitian support for Josie and her family
- C. Individual CBT-E (Enhanced Cognitive Behavioural Therapy for Eating Disorder)
- D. Maudsley Family Based Treatment
- E. Olanzapine medication
- F. Individual psychodynamic psychotherapy
- G. Systemic family therapy

For the following concept, please select the **MOST APPROPRIATE** historical figure responsible.

Q.60 Described schizophrenia as 'the group of Schizophrenias'.

Select **ONLY ONE** answer per page.

- A. Anna Freud
- B. Anthony Bateman
- C. Carl Jung
- D. Emile Kraepelin
- E. Eugen Bleuler
- F. Gregory Bateson
- G. Kurt Schneider
- H. Nancy Andreasen
- I. Timothy Crow
- J. Ugo Cerletti

For the following example, please select the MOST ACCURATE answer.

Q.61 The benzodiazepine most likely to cause severe seizures if flumazenil is given.

Select ONLY ONE answer per page.

- A. Alprazolam
- B. Clobazam
- C. Clonazepam
- D. Diazepam
- E. Lorazepam
- F. Nitrazepam
- G. Oxazepam

For the following example, please select the MOST ACCURATE answer.

Q.62 Which of the following is not a recognized pattern of sleep disturbance associated with major depressive disorder?

Select ONLY ONE answer per page.

- A. Difficulty in falling asleep
- B. Early morning wakening
- C. Hypersomnia
- D. Increase in density of Rapid Eye Movement (REM) sleep
- E. Increase in nocturnal awakening
- F. Obstructive sleep apnoea
- G. Reduction in the latency of Rapid Eye Movement (REM) sleep
- H. Reduction of the first Rapid Eye Movement (REM) sleep period
- I. Reduction of total sleep time

For the following brain changes, please select the **MOST LIKELY** cause.

**Q.63** Patchy cell loss in the globus pallidus, hippocampus and cerebral cortex on MRI scan.

Select **ONLY ONE** answer per page.

- A. Chronic temporal lobe epilepsy
- B. Migraine disorder
- C. Multiple sclerosis
- D. Multi-systems atrophy
- E. Normal pressure hydrocephalus
- F. Poisoning with carbon monoxide
- G. Vasculitis

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 64

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

**Q.64** A 51 year old emaciated homeless woman stumbles into the Emergency Department. She is confused and has a fixed forward stare.

Select **ONLY ONE** answer per page.

- A. Creutzfeldt–Jakob disease
- B. Limbic Encephalitis
- C. Lupus Cerebritis
- D. Multiple Sclerosis
- E. Severe Hyperparathyroidism
- F. Severe Hyperthyroidism
- G. Severe Hypoparathyroidism
- H. Severe Hypothyroidism
- I. Wernicke’s Encephalopathy

Scroll down for Next ⇨

For the following question please select the **MOST ACCURATE** answer.

Q.65 Which of the following is not considered a negative symptom of schizophrenia?

Select **ONLY ONE** answer per page.

- A. Alogia
- B. Anhedonia
- C. Avolition
- D. Blunted affect
- E. Difficulty with abstract thinking
- F. Lack of spontaneity and flow of conversation
- G. Passivity of impulse
- H. Social withdrawal
- I. Stereotyped thinking

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 66

For the following patient, please select the **MOST LIKELY** analgesic medication responsible.

**Q.66** A patient on an SSRI antidepressant comes to the Emergency Department with sweating, tachycardia, muscle twitching, and tremor. They have been taking an analgesic medication.

Select **ONLY ONE** answer per page.

- A. Gabapentin
- B. Morphine
- C. Nefopam
- D. Oxycodone
- E. Pregabalin
- F. Tramadol

Scroll down for Next ⇨

For the following example, please give the MOST APPROPRIATE associated historical figure.

Q.67 The “father of CBT”.

Select ONLY ONE answer per page.

- A. Aaron T. Beck
- B. Albert Ellis
- C. Alfred Adler
- D. B. F. Skinner
- E. Hans Eysenck
- F. John B. Watson
- G. Martin Seligman
- H. Robert Cloninger

For the following example, please select the **LEAST ACCURATE** answer.

Q.68 Current evidence regarding the trait theory of personality shows:

Select **ONLY ONE** answer per page.

- A. Heritability is highest for 'openness to experience' and lowest for 'agreeableness'
- B. High scores of 'neuroticism' significantly increase the risk of depressive disorders, anxiety disorders and substance use disorders
- C. On average, first-borns tend to be more 'conscientious' and less 'open to experience' than those with a lower birth order
- D. Personality disorders could be considered as maladaptive variants of traits at the extreme of normality, which merge imperceptibly into normality
- E. The variance for most traits is approximately equally determined by genetics and environment
- F. Trait expression remains relatively fixed over the lifespan

For the following patient, please select the **MOST APPROPRIATE** next intervention from the list below.

**Q.69** Jason is a 14-year-old with severe Autistic Spectrum Disorder whose irritability and aggression have improved on risperidone. However, risperidone has caused increased appetite with severe weight gain and his parents now have to lock the kitchen cupboards.

Select **ONLY ONE** answer per page.

- A. Add escitalopram
- B. Cease risperidone and refer to a dietitian
- C. Change to aripiprazole
- D. Change to clozapine
- E. Dialectical Behaviour Therapy
- F. Maudsley Family Based Treatment
- G. Cognitive Behavioural Therapy
- H. Exposure and response prevention therapy
- I. Structural family therapy
- J. Supportive psychotherapy

For the following example, please select the MOST ACCURATE answer.

Q.70 A rare side effect of Clozapine.

Select ONLY ONE answer per page.

- A. Bed-wetting
- B. Constipation
- C. Postural hypotension
- D. Sialorrhoea
- E. Somnolence
- F. Tachycardia
- G. Tardive dyskinesia
- H. Weight gain

For the following question, please select the **MOST ACCURATE** answer.

**Q.71** Unstable opioid use in pregnancy is associated with:

Select **ONLY ONE** answer per page.

- A. Fluid retention
- B. Hypertension
- C. Increased pelvic pain
- D. Renal problems
- E. Risk of miscarriage
- F. Weight gain

For the following patient scenario, please select the **MOST ACCURATE** answer listed below.

**Q.72** Faith is a 22-year-old woman from a fundamentalist community who condemn contraception and preach abstinence. Faith has a diagnosis of bipolar disorder but despite good adherence to Lithium monotherapy for the last three years she has had two manic relapses during which she placed herself at risk. Faith and her family want to explore adjustments to her medication to stop the relapses. Which of the following treatments is contraindicated for her?

Select **ONLY ONE** answer per page.

- A. Amisulpride
- B. Citalopram
- C. Electroconvulsive therapy
- D. Fluoxetine
- E. Lamotrigine
- F. Olanzapine
- G. Quetiapine
- H. Risperidone
- I. Sodium Valproate
- J. Trifluoperazine

For the following behaviour, please select the **MOST LIKELY** explanation from the list below.

**Q.73** When John was aged 17 he was a competitive rower and developed an eating disorder with dietary restriction and weight loss. He made a good recovery and at age 20 left home for university. Around the time of his first semester examinations he begins to restrict his eating again and to run long distances daily.

Select **ONLY ONE** answer per page.

- A. Fear conditioning
- B. Goal directed behaviour
- C. Habit formation
- D. Interoceptive conditioning
- E. Negative reinforcement
- F. Normal reaction to stress
- G. Positive reinforcement
- H. Reactivation of extinguished fears
- I. The Premack principle

For the following example, please select the **MOST ACCURATE** answer.

**Q.74 Cultural competence means:**

Select **ONLY ONE** answer per page.

- A. Ability to diagnose culture-specific syndromes like Latah
- B. Acquiring skills to better understand members of other cultures in order to achieve best health outcomes
- C. Always referring Maori, Aboriginal or Torres Island people to a cultural worker
- D. Awareness of one's own culture and origins
- E. Being able to work competently and appropriately with interpreters
- F. Completion of all mandatory RANZCP modules about Indigenous mental health
- G. Expert knowledge about Maori, Aboriginal and Torres Island cultures
- H. Fluency in Te Reo or relevant local indigenous languages
- I. Knowledge of cultural models of health like the Whare Tapa Wha model, or the Fonofale model
- J. Knowledge of population statistics and the changing cultural demography of Australia and New Zealand
- K. Politically correct attitudes about culture

For the following example, please select the MOST ACCURATE answer.

Q.75 The recommended dose range for aripiprazole in schizophrenia:

Select ONLY ONE answer per page.

- A. 3-6 mg/day
- B. 5-20 mg/day
- C. 10-30 mg/day
- D. 15-30 mg/day
- E. 20-40 mg/day
- F. 20-60 mg/day
- G. 25-50 mg/day
- H. 25-100 mg/day
- I. 300-900 mg/day

For the following clinical scenario, please select the **MOST CONCERNING** adverse effect that could occur.

**Q.76** A patient on the methadone maintenance programme abuses methamphetamine.

Select **ONLY ONE** answer per page.

- A. Acute intoxication
- B. Agitation
- C. Constipation
- D. Decreased libido
- E. Precipitation of psychosis
- F. QT prolongation
- G. Respiratory depression
- H. Sedation

For the following genetic abnormality, please choose the MOST ACCURATE resulting condition.

Q.77 Microdeletion on chromosome 22.

Select ONLY ONE answer per page.

- A. Down's syndrome
- B. Haemophilia
- C. Klinefelter's syndrome
- D. Patau's syndrome
- E. Phenylketonuria
- F. Prader Willi syndrome
- G. Sickle cell anaemia
- H. Thalassaemia
- I. Turner's syndrome
- J. Velocardiofacial syndrome

For the following diagnosis, please select the **MOST APPROPRIATE** historical or literary figure associated with it.

**Q.78** Delusional disorder, paranoid type.

Select **ONLY ONE** answer per page.

- A. Adolf Hitler
- B. De Clerambault
- C. Josef Stalin
- D. King Lear
- E. Othello
- F. Richard Nixon
- G. Vincent van Gogh
- H. Winston Churchill

For the following patient, please select the **MOST APPROPRIATE** next psychotherapeutic option.

**Q.79** Becky is a 17-year-old girl living with her parents and two siblings, seen for the third time after a significant overdose in the toilets at school. Her school are threatening to put her on extended suspension due to the other pupils' distress. She has had two trials of different high-dose SSRIs but continues to report feeling empty and "messed up", with ongoing suicidal thoughts. Her case manager reports no success with Cognitive Behavioural Therapy (CBT) across the past six months.

Select **ONLY ONE** answer per page.

- A. CBT with Becky and her parents
- B. Dialectical Behaviour Therapy
- C. Further individual CBT
- D. Individual psychodynamic psychotherapy for Becky
- E. Interpersonal Therapy
- F. Maudsley Family Based Treatment
- G. Psychodynamically-oriented group therapy
- H. Systemic family therapy

For the following example, please select the MOST ACCURATE answer.

Q.80 A symptom not associated with hyperprolactinaemia.

Select ONLY ONE answer per page.

- A. Acne
- B. Breast pain
- C. Decreased facial hair in males
- D. Dry mouth
- E. Galactorrhoea
- F. Increased facial hair in females
- G. Infertility
- H. Irregular menstruation
- I. Loss of libido
- J. Low bone density
- K. Vaginal dryness
- L. Weight gain

For the following example, please select the MOST ACCURATE investigation.

**Q.81** Blood test giving the most accurate information about total alcohol consumption in the past three days.

Select ONLY ONE answer per page.

- A. CDT (carbohydrate-deficient transferrin)
- B. Ethyl glucuronide
- C. GGT (gamma glutamyl transpeptidase)
- D. MCV (mean corpuscular volume)
- E. Plasma sodium level
- F. Urinary ethanol

For the following example, please select the MOST ACCURATE answer.

**Q.82** The most effective electrode placement and dose in electroconvulsive therapy (ECT).

Select ONLY ONE answer per page.

- A. Bifrontal, at 50-100% above seizure threshold
- B. Bifrontal, at seizure threshold
- C. Bitemporal, at 50-100% above seizure threshold
- D. Bitemporal, at seizure threshold
- E. Bitemporal, ultra-brief pulse width
- F. Left Unilateral, at 6 times seizure threshold
- G. Left Unilateral, at seizure threshold
- H. Left Unilateral, ultra-brief pulse width
- I. Right Unilateral, at 6 times seizure threshold
- J. Right Unilateral, at seizure threshold

For the following example, please select the **MOST ACCURATE** answer from the list below.

**Q.83** A disorder associated with epilepsy.

Select **ONLY ONE** answer per page.

- A. Klinefelter's syndrome
- B. Leigh's syndrome
- C. Obsessive-compulsive disorder
- D. Panic disorder
- E. Pheochromocytoma
- F. Posttraumatic stress disorder
- G. Schizophrenia
- H. Systemic lupus erythematosus

For the following patient, please select the **MOST APPROPRIATE** psychometric tool to use.

**Q.84** A 65-year-old man presents to the Emergency Department with dysphonia of sudden onset. Neuroimaging and other investigations are negative for stroke. You find he has no discharge destination as he started living on the streets a week ago.

Select **ONLY ONE** answer per page.

- A. Alcohol withdrawal
- B. Body dysmorphic disorder
- C. Delusional disorder, somatic type
- D. Factitious disorder
- E. Functional neurological symptom disorder
- F. Illness anxiety disorder
- G. Obsessive compulsive disorder
- H. Somatic symptom disorder

For the following question, please select the **MOST APPROPRIATE** answer.

**Q.85** Schizoaffective disorder is best distinguished from bipolar disorder by which of the following?

Select **ONLY ONE** answer per page.

- A. Age of onset
- B. Degree of psychosocial impairment
- C. Duration of illness
- D. History of substance abuse
- E. Presence of command hallucinations
- F. Presence of first-rank symptoms
- G. Presence of mood congruent delusions
- H. Presence of passivity experiences
- I. Presence of psychosis in the absence of mood symptoms
- J. Response to a mood stabiliser

For the following example, please select the MOST RELEVANT ethical or medico-legal concept from the list below.

**Q.86** When suffering from depression, Henry tells his psychiatrist that he accidentally ran over and killed a pedestrian in a hit and run accident twenty years ago due to driving while intoxicated, and never previously confessed. Once euthymic he confirms this account and asks his doctor not to tell anyone. He has no later history of dangerous driving, and has not abused substances since the accident.

Select ONLY ONE answer per page.

- A. **Autonomy**
- B. **Beneficence**
- C. **Justice**
- D. **Mandatory reporting requirements**
- E. **Non-maleficence**
- F. **The duty to warn**
- G. **The right to be treated with respect**
- H. **The right to be treated without prejudice or bias**
- I. **The right to privacy**

For the following example, please select the MOST ACCURATE medication type listed below.

**Q.87** The antidepressant class causing the most prominent gastrointestinal distress.

Select ONLY ONE answer per page.

- A. Melatnergic agonist
- B. Monoamine oxidase inhibitor
- C. Noradrenaline and specific serotonergic antidepressant
- D. Noradrenaline dopamine reuptake inhibitor
- E. Noradrenaline reuptake inhibitor
- F. Selective serotonin reuptake inhibitor
- G. Serotonin modulator
- H. Serotonin and noradrenaline reuptake inhibitor
- I. Serotonin antagonist and reuptake inhibitor
- J. Tricyclic Antidepressant

For the following example, please select the **LEAST ACCURATE** statement listed below.

**Q.88** Regarding Fetishistic disorder:

Select **ONLY ONE** answer per page.

- A. Fetishism is neither rare nor unusual
- B. Fetishism is not necessarily associated with distress or impairment
- C. Fetishistic arousal patterns tend to be overrepresented in men with significant developmental disability such as autism, intellectual disability and severe cerebral palsy
- D. Fetishistic disorder needs to be distinguished from transvestic disorder, partialism, and 'fetishism not associated with distress or impairment'
- E. Objects worn on the thighs and buttocks, such as stockings, skirts, underpants or nappies, are the most commonly fetishised
- F. People with Fetishistic disorder typically present for treatment after their behaviour has run foul of social standards or due to the impact on intimate relationships
- G. Psychotherapy is the first line treatment for Fetishistic disorder

For the following patient, please select the **MOST APPROPRIATE** intervention.

**Q.89** Jared is a 7-year-old referred by his school due to frequent late attendances or non-arrivals at school. His solo father, Tim, reports being unable to get him to go to bed at night so that Jared often isn't awake until the middle of the next day. His mother Angela has Jared at the weekends and reports the same problem, but she doesn't worry about it as there's no school.

Select **ONLY ONE** answer per page.

- A. CBT with Jared and Tim
- B. Dialectical behaviour therapy
- C. Individual psychodynamic psychotherapy for Jared
- D. Individual psychodynamic psychotherapy for Tim
- E. Interpersonal therapy
- F. Maudsley Family Based Treatment
- G. Systemic family therapy
- H. Triple P Parenting course for Jared's parents
- I. Watch, wait, and wonder – dyadic therapy

For the following patient, please select the **MOST LIKELY** explanation for his beliefs.

**Q.90** A 44 year old man with schizophrenia says that his parents appear human but are in fact "artificial intelligences – bioforms". He accepts that no-one else can tell the difference except for him, but insists that they have indeed been replaced by replicants.

Select **ONLY ONE** answer per page.

- A. Bladerunner syndrome
- B. Capgras syndrome
- C. Charles Bonnet syndrome
- D. Cotard delusion
- E. de Clerambault's syndrome
- F. Ekbom syndrome
- G. Frégoli delusion
- H. Ganser syndrome
- I. Geschwind syndrome
- J. Klüver-Bucy syndrome

For the following example, please select the **MOST ACCURATE** answer from the list below.

Q.91 A common physiological effect of amphetamine.

Select **ONLY ONE** answer per page.

- A. Bradycardia
- B. Increased appetite
- C. Increased blood pressure
- D. Increased sleep
- E. Itching
- F. Pedal oedema
- G. Shortness of breath
- H. Yawning

For the following patient, please select the **MOST APPROPRIATE** answer from the list below.

**Q.92** Rohan, a 23-year-old single man, needs treatment for Generalised Anxiety Disorder and you have recommended Cognitive Behavioural Therapy (CBT). Which of the following would be useful components in a CBT course for him?

Select **ONLY ONE** answer per page.

- A. Abreaction
- B. Cognitive restructuring
- C. Eye movement desensitisation
- D. Exposure and response prevention
- E. Extinction
- F. Flooding
- G. Implosion
- H. Readiness rulers
- I. Social skills training

For the following example, please select the **MOST ACCURATE** answer from the list below.

**Q.93** A condition causing asymmetrical atrophy in the cerebral hemispheres with the left affected more than the right.

Select **ONLY ONE** answer per page.

- A. Carbon Monoxide Poisoning
- B. Creutzfeldt-Jacob Disease
- C. Huntington's Disease
- D. Normal pressure Hydrocephalus
- E. Parkinson's Disease
- F. Porphyria
- G. Wilson's Disease
- H. Semantic Dementia

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.94** Jack, a 54-year-old man in custodial care, presents to hospital for the third time with dysuria and flank pain. All investigations are negative.

Select **ONLY ONE** answer per page.

- A. Body Dysmorphic Disorder
- B. Dependent Personality Disorder
- C. Dissociative Disorder
- D. Factitious Disorder
- E. Histrionic Personality Disorder
- F. Illness Anxiety Disorder
- G. Malingering
- H. Somatic Symptom Disorder

For the following example, please select the MOST APPROPRIATE drug from the list below.

Q.95 A prolactin sparing antipsychotic.

Select ONLY ONE answer per page.

- A. Amisulpride
- B. Cariprazine
- C. Chlorpromazine
- D. Droperidol
- E. Haloperidol
- F. Olanzapine
- G. Risperidone
- H. Thioridazine
- I. Zuclopenthixol

For the following concept, please select the **MOST APPROPRIATE** historical author from the list below.

**Q.96** Mirror transference.

Select **ONLY ONE** answer per page.

- A. Alfred Adler
- B. Anna Freud
- C. Erich Fromm
- D. Ernest Jones
- E. Harry Guntrip
- F. Heinz Kohut
- G. Karen Horney
- H. Mary Ainsworth
- I. Nancy Chodorow
- J. Otto Rank
- K. Sigmund Freud

For the following example, please select the **MOST ACCURATE** answer from the list below.

**Q.97** Which symptom, if present, would most help to distinguish Major Depressive Disorder from Dysthymia?

Select **ONLY ONE** answer per page.

- A. Anhedonia
- B. Depressed mood
- C. Fatigue
- D. Hypersomnia
- E. Insomnia
- F. Low energy
- G. Negative cognitions
- H. Poor concentration

For the following example, please select the MOST APPROPRIATE answer.

**Q.98** Roger, a 14-year-old secondary school pupil, experiences sexually arousing fantasies of exposing his genitals to strangers. Lately he has had urges to act out these fantasies at the local bus stop, but he worries that this could get him into big trouble.

Select ONLY ONE answer per page.

- A. Asperger's syndrome
- B. Bipolar disorder
- C. Conduct disorder
- D. Exhibitionism
- E. Generalised anxiety disorder
- F. No psychiatric diagnosis
- G. Obsessive compulsive disorder
- H. Social anxiety disorder
- I. Voyeurism

For the following clinical scenario, please select the MOST APPROPRIATE answer from the list below.

**Q.99** Mr Barker is a 69-year-old man whose wife died a year ago, who is now hospitalised after a stroke which has impaired his left-sided motor function. He wants to discharge himself but his geriatrician is clear that it's too soon. When you assess him, which of the following indicate that Mr Barker lacks capacity to make this decision?

Select ONLY ONE answer per page.

- A. He can concentrate on the discussion across the hour of your assessment, but becomes irritable towards the end
- B. He is able to discuss with you the risks and benefits of going home but adamantly maintains his wish to leave
- C. He is under longstanding community treatment via the mental health act for a delusional disorder (paranoid type) which is well-managed on risperidone
- D. He previously set up an Enduring Power of Attorney naming his daughter, who lives locally
- E. He reluctantly agrees to stay overnight after weighing the pros and cons with you, but is unable to remember having met you or discussed anything with you when you review him the next morning, when he insists on discharge
- F. He says that he has a fear of hospitals since his wife's death from cancer
- G. He tells you he is an ex-barrister and that if he is detained any longer he will bring habeas corpus charges against the hospital
- H. He understands that his doctor does not want him to discharge himself, but disagrees and feels he will be fine

For the following patient, please select the **MOST LIKELY** explanation listed below.

**Q.100** Ron, a 44-year-old man with schizophrenia, complains of involuntary, repetitive movements of his mouth and tongue. These include pursing of his lips and darting tongue movements. He has been treated for the last eight years with fluphenazine decanoate intramuscular injection 25mg four weekly.

Select **ONLY ONE** answer per page.

- A. Acute dystonia
- B. Drug induced Parkinsonism
- C. Factitious disorder
- D. Huntington's disease
- E. Illness anxiety disorder
- F. Pseudobulbar palsy
- G. Somatic symptom disorder
- H. Sterotypy
- I. Tardive dyskinesia
- J. Tardive dystonia
- K. Tic disorder

For the following clinical scenario, please select the MOST RELEVANT therapeutic concept demonstrated.

Q.101 Aaron, a 24-year-old man, seeks psychodynamic psychotherapy due to problems maintaining close relationships. After initially getting close to girlfriends he becomes more detached and distances himself. In therapy, he comes to understand that this distancing is a defence against the anxiety he feels when his feelings deepen. He also talks about experiencing overwhelming grief at age 16 when his mother died.

Select ONLY ONE answer per page.

- A. Acting out
- B. Idealising transference
- C. Intellectualisation
- D. Malan's Triangle of Conflict
- E. Parallel process
- F. Projective identification
- G. Rationalisation
- H. Reaction formation
- I. Splitting

For the following example, please select the **LEAST ACCURATE** answer.

Q.102 A common side effect of Clomipramine.

Select **ONLY ONE** answer per page.

- A. Constipation
- B. Dizziness
- C. Dry mouth
- D. Ejaculation failure
- E. Hypertension
- F. Increased sweating
- G. Insomnia
- H. Nausea
- I. Somnolence
- J. Tremor

For the following example, please select the **MOST RELEVANT** aspect of memory tested.

Q.103 The digit span test.

Select **ONLY ONE** answer per page.

- A. Declarative Memory
- B. Episodic Memory
- C. Haptic Memory
- D. Procedural Memory
- E. Semantic Memory
- F. Sensory memory
- G. Verbal Memory
- H. Working Memory

For the following clinical scenario, please select the **MOST APPROPRIATE** answer from the list below.

**Q.104** Samira, a 19-year-old university student, consults you about difficulties in social situations. She wants to know if her problems are “just shyness”, or something more significant. Which of the following would most indicate that she has a social anxiety disorder?

Select **ONLY ONE** answer per page.

- A. She has never used illicit drugs, and drinks alcohol only rarely
- B. She has no other mental disorder to explain her difficulties
- C. She prefers not to give speeches or presentations due to fear of negative feedback
- D. She says she's "always been a worrier" and that her mother is the same
- E. She sometimes broods about an embarrassing incident at school when a teacher criticised her
- F. She sometimes gets nervous before going to parties, and occasionally decides not to go
- G. She's concerned about the opinion and the scrutiny of others
- H. She's unable to eat in restaurants, saying it makes her very anxious

For the following patient, please select the **MOST APPROPRIATE** next intervention.

**Q.105** Emmy is a 13-year-old girl referred by her GP with clear symptoms of a major depression for 6 months. The GP has treated her with venlafaxine 150mg daily but with no benefit to date. Emmy has insomnia and increasing suicidal thoughts. You decide to stop the venlafaxine and change her treatment.

Select **ONLY ONE** answer per page.

- A. Alprazolam
- B. Atomoxetine
- C. Citalopram
- D. Dexamphetamine
- E. Fluoxetine
- F. Melatonin
- G. Modafinil
- H. Nortriptyline
- I. Right unilateral electroconvulsive therapy
- J. Risperidone

For the following example, please select the **MOST ACCURATE** answer.

**Q.106** Which of the following social factors has been shown to be most associated with relapse of schizophrenia after discharge from hospital?

Select **ONLY ONE** answer per page.

- A. Bankruptcy
- B. Homelessness
- C. Increased expressed emotion
- D. Lack of meaningful activity
- E. Loss of employment
- F. Marital breakdown
- G. Social isolation
- H. Stigma

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.107** A 20 year old woman presents with recent onset of seizures, headache and features of depression.

Select **ONLY ONE** answer per page.

- A. Giant cell arteritis
- B. Hashimoto's thyroiditis
- C. Multiple sclerosis
- D. Normal pressure hydrocephalus
- E. Pheochromocytoma
- F. Polyarteritis nodosa
- G. Systemic Lupus Erythematosus
- H. Takayasu's arteritis

For the following example please select the **LEAST ACCURATE** answer from the list below.

**Q.108 Adverse effects of Transcranial Magnetic Stimulation:**

Select **ONLY ONE** answer per page.

- A. Dizziness is commonly reported after TMS
- B. Eye pain after TMS is reported in less than 5% of patients
- C. Facial twitching during or after TMS treatment is reported in a third of patients
- D. Headache is an uncommon side effect of TMS
- E. Noise-induced hearing loss is possible after TMS
- F. Standard rTMS may cause less adverse effects than deep TMS
- G. The seizure risk of TMS is less than 0.1%
- H. TMS has been reported to cause scalp burns

For the following abnormality, please select the **MOST LIKELY** brain region or pathway involved.

Q.109 Galactorrhoea.

Select **ONLY ONE** answer per page.

- A. Cerebellum
- B. Frontal cortex
- C. Hypothalamus
- D. Nigrostriatal system
- E. Right temporal area
- F. Spinothalamic pathway
- G. Temporal cortex
- H. Tuberoinfundibular pathway

For the following example please select the **MOST ACCURATE** answer from the list below.

**Q.110 Mortality rate of delirium tremens:**

Select **ONLY ONE** answer per page.

- A. Delirium tremens has a 20% mortality rate even with modern ICU treatment
- B. Delirium tremens has a 30% mortality rate even with modern ICU treatment
- C. Delirium tremens has a 35% mortality rate without treatment
- D. Delirium tremens has a 60% mortality rate without treatment
- E. Delirium tremens has a 75% mortality rate without treatment
- F. Delirium tremens has a zero mortality rate with modern ICU treatment

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

Q.111 A 45-year-old man has a history of a head injury 15 years ago caused by driving while intoxicated. He becomes suspicious of his wife, accusing her of infidelity. He is adamant that he can "smell other men" on her.

Select **ONLY ONE** answer per page.

- A. Alcoholic hallucinosis
- B. Delusional disorder (erotomantic type)
- C. Delusional disorder (jealous type)
- D. Delusional Disorder (persecutory type)
- E. Paranoid Personality disorder
- F. Psychotic Disorder due to another medical condition
- G. Schizoaffective Disorder
- H. Schizophrenia
- I. Substance-Induced Psychotic Disorder

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

**Q.112** A 35-year-old man having psychotherapy says that he often fantasises and reads erotic literature about consensual relationships with other men in which he (or the protagonist) is dressed in women's lingerie, tied in bondage, and whipped or spanked.

Select **ONLY ONE** answer per page.

- A. Exhibitionism
- B. Fetishism
- C. Gender dysphoria
- D. No diagnosis
- E. Sexual dysfunction
- F. Sexual masochism
- G. Sexual sadism
- H. Transvestism

For the following example, please select the **MOST ACCURATE** answer from the list below.

**Q.113** Statements regarding treatment of panic disorder which are backed by evidence from systematic reviews of randomised trials.

Select **ONLY ONE** answer per page.

- A. Benzodiazepines are as effective as SSRI antidepressants
- B. Breathing re-training is effective
- C. Cognitive restructuring is not effective
- D. Guided eCBT is effective
- E. Interoceptive exposure in CBT is not effective
- F. Progressive muscle relaxation is effective
- G. Virtual reality exposure in CBT is effective

For the following finding, please select the **MOST APPROPRIATE** diagnosis listed below.

Q.114 Cingulate island sign on PET scan.

Select **ONLY ONE** answer per page.

- A. CADASIL (Cerebral Autosomal Dominant Arteriopathy with Sub-cortical Infarcts and Leukoencephalopathy)
- B. Creutzfeld-Jakob disease
- C. Frontotemporal dementia
- D. HIV dementia
- E. Huntingdon's disease
- F. Lewy body dementia
- G. Neurosyphilis
- H. Parkinson's disease
- I. Wernicke's encephalopathy

For the following patient, please select the **MOST APPROPRIATE** intervention.

**Q.115** Adam is a 9-year-old boy with Autistic Spectrum Disorder, whose parents have made good attempts at bedtime routines but are often unable to get him to sleep before 2 am. He is sleepy in the daytime, sometimes falling asleep in class.

Select **ONLY ONE** answer per page.

- A. Atomoxetine
- B. Citalopram
- C. Concerta (Methylphenidate XR)
- D. Daytime caffeine
- E. Dexamphetamine
- F. Fluoxetine
- G. Melatonin
- H. Modafinil
- I. No medication
- J. Nortriptyline
- K. Risperidone

For the following example, please select the MOST ACCURATE answer listed below.

Q.116 The college's position statement on neurosurgery for mental disorders:

Select ONLY ONE answer per page.

- A. Asserts that neurosurgery is an effective treatment for resistant schizophrenia
- B. Covers deep brain stimulation and ablative neurosurgery
- C. Explains that limbic leucotomy, developed in the USA, involves lesions in the cingulum and the orbito-medial area of the frontal lobe
- D. Says that cingulotomy, developed in the UK, involves creating lesions in the cingulate bundle and gyrus
- E. Says that clinical follow-up studies suggest that 60-70% of patients with chronic anxiety have a satisfactory response
- F. Says that clinical follow-up studies suggest that under 30% of patients with depression have a satisfactory response
- G. States that capsulotomy, developed in Germany, involves lesions in the anterior limb of the internal capsule.
- H. States that clinical follow-up studies suggest 40-50% of patients with obsessive compulsive disorder have a satisfactory response
- I. States that in subcaudate tractotomy, developed in Sweden, radiofrequency thermocoagulation creates lesions under the head of the caudate nucleus

For the following example, please select the MOST ACCURATE phenomenological term.

Q.117 The "Anglepoise lamp sign" in catatonia, where very slight pressure leads to movement in any direction.

Select ONLY ONE answer per page.

- A. Ambitendency
- B. Automatic obedience
- C. Echopraxia
- D. Gegenhalten
- E. Mitgehen
- F. Mitmachen
- G. Negativism
- H. Posturing
- I. Verbigeration
- J. Waxy flexibility

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

**Q.118** Sophia, a 45-year-old woman, presents with a first episode of psychosis. She had complained a year ago of getting lost a few times and having episodes of confusion where she had a metallic taste in her mouth.

Select **ONLY ONE** answer per page.

- A. Fronto-temporal dementia
- B. Gaucher's disease
- C. HIV dementia
- D. Lewy body disease
- E. Neurosyphilis
- F. Temporal Lobe Epilepsy
- G. Thyrotoxicosis
- H. Wernicke's encephalopathy

For the following patient, please select the **MOST APPROPRIATE** management from the list below.

**Q.119** Danny is a 12-year-old only child who lives with his parents. He was born genetically female but has long believed he was born in the wrong body and is actually male. He presents with distress as he is beginning to develop secondary sexual characteristics.

Select **ONLY ONE** answer per page.

- A. Dialectic Behavioural Therapy
- B. Individual psychodynamic psychotherapy
- C. Maudsley Family Based Treatment
- D. No follow up – refer back to GP
- E. Refer to endocrinologist for GnRH agonist
- F. Refer to endocrinologist for secondary sex hormones
- G. Structural Family Therapy
- H. Supportive psychotherapy

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.120** Giovanni, a 35 year old man with a diagnosis of bipolar disorder, has had a difficult year. He had a hypomanic episode, then after that resolved he suffered two serious bouts of major depression involving suicidality which responded to ECT each time, then another short-lived hypomanic episode three months later after fully recovering. He has just been readmitted in a highly labile state after attempting suicide, and the admitting registrar has queried his diagnosis.

Select **ONLY ONE** answer per page.

- A. Borderline personality disorder
- B. Chronic complex post traumatic stress disorder
- C. Cyclothymic disorder
- D. Emotionally unstable personality disorder
- E. Histrionic personality disorder
- F. Intermittent explosive disorder
- G. Mixed affective disorder
- H. Rapid cycling bipolar disorder
- I. Schizoaffective disorder

For the following individual, please select the **MOST APPROPRIATE** diagnosis.

**Q.121** Don is a man in his seventies with a pompous and arrogant demeanour who focuses on attention, money and power. He has been driven to succeed all his life and believes others are incompetent or weak. He sees himself as unique and superior and craves constant admiration and attention. He has a strong sense of entitlement to special treatment and exploits others for his personal gain. He has a split view of others and the world, and sees anyone who criticises him as an enemy.

Select **ONLY ONE** answer per page.

- A. Antisocial personality disorder
- B. Borderline personality disorder
- C. Delusional disorder, grandiose type
- D. Delusional disorder, paranoid type
- E. Histrionic personality disorder
- F. Mixed personality disorder with narcissistic and borderline traits
- G. Mixed personality disorder with narcissistic and dependent traits
- H. Mixed personality disorder with narcissistic and paranoid traits
- I. Narcissistic personality disorder
- J. Paranoid personality disorder

For the following example, please select the MOST RELEVANT ethical concept from the list below.

Q.122 A psychiatrist tries to balance compassion for their patients with self-care, while being brave enough to manage risks and make difficult decisions.

Select ONLY ONE answer per page.

- A. Act utilitarianism
- B. Autonomy
- C. Beneficence
- D. Courage
- E. Ethical relativism
- F. Practical wisdom
- G. Rule utilitarianism
- H. Self-love

For the following patient, please select the **MOST APPROPRIATE** diagnosis.

**Q.123** A 30-year-old legal secretary has knuckle callouses and a pixie-shaped face.

Select **ONLY ONE** answer per page.

- A. Anorexia Nervosa
- B. Avoidant/Restrictive Food Intake Disorder
- C. Binge-Eating Disorder
- D. Bulimia Nervosa
- E. Delusional disorder, somatic type
- F. Klüver-Bucy syndrome
- G. Prader-Willi syndrome
- H. Somatic symptom disorder

For the following neurological change, please select the MOST APPROPRIATE diagnosis.

Q.124 Atrophy of the caudate nucleus.

Select ONLY ONE answer per page.

- A. Carbon monoxide poisoning
- B. Creutzfeldt-Jacob disease
- C. Huntington's disease
- D. Normal pressure hydrocephalus
- E. Parkinson's disease
- F. Porphyria
- G. Wernicke's encephalopathy
- H. Wilson's disease

For the following patient, please select the **MOST LIKELY** diagnosis.

**Q.125** Darren is a 31-year-old man with a slim build and normal BMI who presents asking for Phentermine (Duromine) as he is convinced it will help him lose the "big misshapen bulges on my hips".

Select **ONLY ONE** answer per page.

- A. Anorexia Nervosa
- B. Body Dysmorphic Disorder
- C. Bulimia Nervosa
- D. Dissociative Disorder
- E. Factitious Disorder
- F. Histrionic Personality Disorder
- G. Illness Anxiety Disorder
- H. Malingering
- I. Somatic Symptom Disorder
- J. Specific phobia

For the following example, please select the **MOST RELEVANT** diagnosis from the list below.

Q.126 Most associated with panic disorder.

Select **ONLY ONE** answer per page.

- A. Carbimazole overdose
- B. Epilepsy
- C. Leptospirosis
- D. Lithium toxicity
- E. Mitral Valve Prolapse
- F. Neurocysticercosis
- G. Neurosyphilis
- H. Weil's disease

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

EMQ 127

For the following test result, please select the **MOST ACCURATE** interpretation from the list below.

Q.127 A non-smoking patient is prescribed 150 mgs of clozapine per day. Their clozapine serum level is 565 nmol/L, with a clozapine to nor-clozapine ratio of 1.8.

Select **ONLY ONE** answer per page.

- A. Enzyme saturation
- B. Expected result
- C. Fast metaboliser
- D. Inaccurate timing of the trough
- E. Male patient
- F. Non-adherence to clozapine
- G. Pre-blood test loading of clozapine
- H. Slow metaboliser

Scroll down for Next ⇨

For the following example, please select the MOST ACCURATE answer from the list below.

Q.128 Regarding Interpersonal Psychotherapy (IPT):

Select ONLY ONE answer per page.

- A. In a large-scale RCT, CBT and IPT had equal efficacy in depression at 12 weeks but Imipramine exceeded them both
- B. IPT aims to intervene specifically in social functioning
- C. IPT has been successfully used in developed nations, but not in developing countries
- D. IPT presumes that psychopathology arises exclusively from problems within the interpersonal realm
- E. IPT was first developed for the treatment of personality disorders
- F. IPT was introduced by Gerald Klerman and Myrna Weissman in the 1990s
- G. Role-playing is not a technique used in IPT
- H. The three key areas of focus for IPT are Interpersonal Disputes, Role Transitions, and Interpersonal Deficits

For the following patient, please select the **MOST EVIDENCE-BASED** intervention listed below.

**Q.129** Eve, a 21-year-old university student, presents intoxicated after a potentially lethal dose of paracetamol following an argument and physical fight with her partner at a party. This is her fourth overdose in the last two years. She admits to binge drinking and has multiple fine scars on her thighs and abdomen, from long-term superficial cutting.

Select **ONLY ONE** answer per page.

- A. Diazepam
- B. Disulfiram
- C. Fluoxetine
- D. Low dose quetiapine
- E. No medications are indicated
- F. Sodium valproate
- G. Sodium valproate and fluoxetine
- H. Sodium valproate and low dose quetiapine

For the following example, please select the MOST APPROPRIATE aspect of qualitative research from the list below.

**Q.130** A researcher explores what being a "patient" means with the service users, families, and medical staff served by a consultation-liaison psychiatric service.

Select ONLY ONE answer per page.

- A. Constant Comparative Analysis
- B. Data collection using documentation
- C. Data collection using focus groups
- D. Data collection using semi-structured interviews
- E. Ethnographic qualitative research
- F. Extended case study
- G. Grounded Theory
- H. Phenomenological qualitative research

For the following patient, please select the **MOST APPROPRIATE** diagnosis listed below.

**Q.131** An elderly war veteran and retired farmer presents with progressive cognitive impairment, psychosis and hyper-reflexia.

Select **ONLY ONE** answer per page.

- A. Alzheimer's disease
- B. Cerebral hydatid disease
- C. Metachromatic leukodystrophy
- D. Multi-systems atrophy
- E. Neurosyphilis
- F. Pernicious anaemia
- G. Rabies
- H. Tetanus
- I. Tick-borne disease

For the following example, please select the **MOST LIKELY** causative medication listed below.

Q.132 Increased risk of post-electroconvulsive therapy (ECT) delirium.

Select **ONLY ONE** answer per page.

- A. Alprazolam
- B. Fluoxetine
- C. Lamotrigine
- D. Lithium carbonate
- E. Nortriptyline
- F. Quetiapine
- G. Risperidone
- H. Sodium valproate
- I. Tranylcypromine

For the following example, please select the **MOST APPROPRIATE** answer from the list below.

**Q.133** A patient suitable to start 40 sessions of psychodynamic psychotherapy with a trainee who is a novice therapist.

Select **ONLY ONE** answer per page.

- A. Alongside the therapy, they want to take a "harm management" approach to their drinking.
- B. They have a marked narcissistic personality disorder.
- C. They have a violent partner who becomes intensely jealous of anyone they see often. They feel unable to leave the abusive relationship.
- D. They have terminal cancer and want help "dying well".
- E. They live in the same city but have no transport and care for two children under five at home, so they want the psychotherapy via Skype.
- F. They see themselves as a "practical" person and want to be taught skills.
- G. They want a "quick fix".
- H. They were recently evicted from their flat when a close relationship broke up, and want support.
- I. They're recovering from a depression during which they made a serious suicide attempt.

For the following patient, please select the **MOST APPROPRIATE** next investigation.

**Q.134** A 54 year old woman with bipolar disorder is brought to the Emergency Department by her husband. She is drowsy, confused, and tremulous, with a sinus tachycardia and decreased muscle tone.

Select **ONLY ONE** answer per page.

- A. Blood cultures
- B. Chest x-ray
- C. Complete blood count
- D. C-reactive protein
- E. Creatinine kinase
- F. CT head
- G. Lithium level
- H. Paracetamol level
- I. Thyroid function tests
- J. Urinary drug screen

For the following example, please select the MOST RELEVANT historical figure listed below.

Q.135 Theorised that schizophrenia and epilepsy were antagonistic.

Select ONLY ONE answer per page.

- A. Erich Hoffmann
- B. Fritz Schaudinn
- C. Girolamo Fracastoreo
- D. Hideyo Noguchi
- E. Jarisch Herxheimer
- F. Julius Wagner-Jauregg
- G. Ladislav J. Meduna
- H. Lucio Bini
- I. Paul Ehrlich
- J. Ugo Cerletti

For the following question, please select the **MOST ACCURATE** answer.

**Q.136** Which of the following is the most accurate indicator of the availability of methamphetamine in the population?

Select **ONLY ONE** answer per page.

- A. Community surveys of addicts
- B. Dollar value of methamphetamine customs seizures in the past 12 months
- C. Methamphetamine street price
- D. Number of methamphetamine-related presentations to Emergency Departments
- E. Number of psychiatric hospital admissions for methamphetamine-induced psychosis
- F. Police seizures of methamphetamine
- G. Prevalence of methamphetamine use in arrestees across the preceding month
- H. Results from wastewater testing

For the following example, please select the MOST ACCURATE answer.

Q.137 Not implicated to date in the pathological mechanism of schizophrenia.

Select ONLY ONE answer per page.

- A. 22q11 microdeletion
- B. 5HTTLPR (serotonin-transporter-linked polymorphic region)
- C. D-amino acid oxidase activator (DAOA)
- D. Neuregulin gene (NRG1)
- E. Neurogenic locus notch 4 (NOTCH4)
- F. Reelin gene (REELIN)

For the following question, please select the MOST ACCURATE answer.

Q.138 Advanced paternal age is a well-established risk factor for which of the following psychiatric conditions?

Select ONLY ONE answer per page.

- A. Alzheimer's Dementia
- B. Bipolar Disorder
- C. Borderline Personality Disorder
- D. Delusional Disorder
- E. Major Depressive Disorder
- F. Obsessive Compulsive Disorder
- G. Post Traumatic Stress Disorder
- H. Schizophrenia

For the following example, please select the MOST ACCURATE answer from the list below.

Q.139 Not linked with "Alice in Wonderland syndrome".

Select ONLY ONE answer per page.

- A. Anosognosia
- B. Autoscopy
- C. Dysmetropsia
- D. Illusion
- E. Lilliputian hallucination
- F. Micropsia
- G. Todd's syndrome
- H. Visual distortion
- I. Zoopsia

For the following example, please select the **MOST ACCURATE** answer.

**Q.140** A psychotherapy with positive evidence for efficacy in the maintenance treatment of depression.

Select **ONLY ONE** answer per page.

- A. Behavioural activation therapy
- B. Bioenergetic analysis
- C. Mindfulness-based cognitive therapy
- D. Non-directive supportive therapy
- E. Problem-solving therapy
- F. Reichian psychotherapy
- G. Self-control therapy
- H. Short-term psychodynamic therapy

## MCQ Mock Exam

### Critical Analysis Problems (CAP)

You are about to commence the CAP component of the Mock Exam.

**Abstracts, quotes from the papers, tables and figures are in the left hand panel. They are repeated as needed for question pages relating to that segment of information and this replaces the past use of a Stimulus handout. (In the real exam all this information is made available via data, excerpts and pop-ups in the left-hand panel).**

- The Questions and Answer Options and instructions are on the right hand panel.
- Please read Question Instructions, Questions and options CAREFULLY before answering.
- There may be a series of Questions that could share the same list of answer options.

**Once again, if you are doing this Mock MCQ exam in 2020 printed out in paper format to mimic the real exam, please just use this CAP section as the question booklet, and use the "scantron" answer sheet provided to note your answers. That will give you practice filling in a scantron-type booklet, as in the Nov 2020 paper-based exam. There are answer tick-boxes in this section, but they're there so it can be done electronically in future – don't use them in the lead-up to Nov 2020.**

To 'flag' a question and review it later add an ! to the 'Flag box' at top right. Then search for all the !s when you want to review any questions you were unsure about, by hitting **control-F** to bring up the navigation field, then type ! in that field.

Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page.

Example of a 'flagged' question

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later) CAP 1.1 !

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.1

## CAP Question 1 (18 marks)

**When unbearable suffering incites psychiatric patients to request euthanasia: qualitative study.**

Monica Verhofstadt, Lieve Thienpont and Gjalte-Jorn Ygram Peters (2017) *British Journal of Psychiatry* 211: 238-245.

(Abstract excerpt)

**Background**

The concept of 'unbearable suffering' is central to legislation governing whether euthanasia requests may be granted, but remains insufficiently understood, especially in relation to psychiatric patients.

**Method**

Testimonials from 26 psychiatric patients who requested euthanasia were analysed using QualiCoder software.

**Results**

Five domains of suffering were identified: medical, intrapersonal, interpersonal, societal and existential. Hopelessness was confirmed to be an important contributor. The lengthy process of applying for euthanasia was a cause of suffering and added to experienced hopelessness, whereas encountering physicians who took requests seriously could offer new perspectives on treatment.

**Conclusions**

The development of measurement instruments to assess the nature and extent of suffering as experienced by psychiatric patients could help both patients and physicians to better navigate the complicated and sensitive process of evaluating requests in a humane and competent way. Some correlates of suffering (such as low income) indicate the need for a broad medical, societal and political debate on how to reduce the burden of financial and socioeconomic difficulties and inequalities in order to reduce patients' desire for euthanasia. Euthanasia should never be seen (or used) as a means of resolving societal failures.

Select ONLY ONE answer per page.

**Question 1.1 (2 marks)**

Based on the adjoining abstract and your other knowledge, which option best describes the study objectives?

- A. To increase access to euthanasia for psychiatric patients
- B. To increase understanding of an under-researched area
- C. To justify resource allocation in psychiatric treatment
- D. To provide insights into the suffering experiences of psychiatric patients who have made a request for euthanasia
- E. To quantify suffering experienced by psychiatric patients who request euthanasia
- F. To test the null hypothesis that psychiatric patients do not request euthanasia

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## CAP Question 1 contd.

*(Methods excerpt)*

All patients were seen by L.T. at an outpatient psychiatric clinical setting in the Dutch-speaking region of Belgium, with intake beginning at the end of 2007 and ending in December 2011 (when L.T. joined a newly founded central institute in Belgium to manage end-of-life cases, therefore ceasing case management at her private practice).

... Between October 2007 and December 2011, 100 psychiatric patients presented themselves with a request for euthanasia at an out-patient psychiatric clinical setting in East Flanders. During or after their consultation, 26 of these patients spontaneously handed in a self-written or self-recorded testimonial to L.T. in which they expressed the reasons for their request and their experience of unbearable suffering.

Select ONLY ONE answer per page.

**Question 1.2 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the sampling method used?**

- A. Convenience sampling
- B. Criterion sampling
- C. Deviant case sampling
- D. Expert sampling
- E. Maximum variation sampling
- F. Purposive random sampling
- G. Snowball sampling
- H. Unrestricted random sampling

**CAP Question 1 contd.**

*(Methods excerpt) (repeated from p.145)*

All patients were seen by L.T. at an outpatient psychiatric clinical setting in the Dutch-speaking region of Belgium, with intake beginning at the end of 2007 and ending in December 2011 (when L.T. joined a newly founded central institute in Belgium to manage end-of-life cases, therefore ceasing case management at her private practice).

... Between October 2007 and December 2011, 100 psychiatric patients presented themselves with a request for euthanasia at an out-patient psychiatric clinical setting in East Flanders. During or after their consultation, 26 of these patients spontaneously handed in a self-written or self-recorded testimonial to L.T. in which they expressed the reasons for their request and their experience of unbearable suffering.

Select **ONLY ONE** answer per page.

**Question 1.3 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the sampling method that would be used if cases with markedly different characteristics had been chosen?**

- A. Convenience sampling
- B. Criterion sampling
- C. Deviant case sampling
- D. Expert sampling
- E. Maximum variation sampling
- F. Purposive random sampling
- G. Snowball sampling
- H. Unrestricted random sampling

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.4

## CAP Question 1 contd.

*(Methods excerpt) (repeated from p.145)*

All patients were seen by L.T. at an outpatient psychiatric clinical setting in the Dutch-speaking region of Belgium, with intake beginning at the end of 2007 and ending in December 2011 (when L.T. joined a newly founded central institute in Belgium to manage end-of-life cases, therefore ceasing case management at her private practice).

... Between October 2007 and December 2011, 100 psychiatric patients presented themselves with a request for euthanasia at an out-patient psychiatric clinical setting in East Flanders. During or after their consultation, 26 of these patients spontaneously handed in a self-written or self-recorded testimonial to L.T. in which they expressed the reasons for their request and their experience of unbearable suffering.

Select ONLY ONE answer per page.

**Question 1.4 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the sampling method that would be used if participants had been asked to invite others to participate in the study?**

- A. Convenience sampling
- B. Criterion sampling
- C. Deviant case sampling
- D. Expert sampling
- E. Maximum variation sampling
- F. Purposive random sampling
- G. Snowball sampling
- H. Unrestricted random sampling

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.5

## CAP Question 1 contd.

*(Methods excerpt) (repeated from p.145)*

All patients were seen by L.T. at an outpatient psychiatric clinical setting in the Dutch-speaking region of Belgium, with intake beginning at the end of 2007 and ending in December 2011 (when L.T. joined a newly founded central institute in Belgium to manage end -of-life cases, therefore ceasing case management at her private practice).

... Between October 2007 and December 2011, 100 psychiatric patients presented themselves with a request for euthanasia at an out-patient psychiatric clinical setting in East Flanders. During or after their consultation, 26 of these patients spontaneously handed in a self-written or self-recorded testimonial to L.T. in which they expressed the reasons for their request and their experience of unbearable suffering.

Select ONLY ONE answer per page.

**Question 1.5 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the sampling method that would be used if participants had been sought who were requesting euthanasia for unusual reasons?**

- A. Convenience sampling
- B. Criterion sampling
- C. Deviant case sampling
- D. Expert sampling
- E. Maximum variation sampling
- F. Purposive random sampling
- G. Snowball sampling
- H. Unrestricted random sampling

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.6

## CAP Question 1 contd.

*(Methods excerpt)*

L.T. and M.V. simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by L.T. and M.V.

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments.

Select ONLY ONE answer per page.

**Question 1.6 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the approach to coding taken by the investigators?**

- A. Deduction
- B. Discourse analysis
- C. Heuristic conversational approach
- D. Induction
- E. Iterative approach
- F. Reflexivity
- G. Triangulation

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**CAP Question 1 contd.**

*(Methods excerpt) (repeated from p.149)*

L.T. and M.V. simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by L.T. and M.V.

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments.

Select **ONLY ONE** answer per page.

**Question 1.7 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the methodology where investigators consider their own beliefs and assumptions in relation to the research?**

- A. Deduction
- B. Discourse analysis
- C. Heuristic conversational approach
- D. Induction
- E. Iterative approach
- F. Reflexivity
- G. Triangulation

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.8

## CAP Question 1 contd.

*(Methods excerpt) (repeated from p.149)*

L.T. and M.V. simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by L.T. and M.V.

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments.

Select ONLY ONE answer per page.

**Question 1.8 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the methodology where the use of language is studied in transcripts of conversations?**

- A. Deduction
- B. Discourse analysis
- C. Heuristic conversational approach
- D. Induction
- E. Iterative approach
- F. Reflexivity
- G. Triangulation

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.9

## CAP Question 1 contd.

*(Findings excerpt)*

Five broad categories of codes emerged, each representing a dimension of unbearable suffering:

- Medically related suffering
- Intrapersonal suffering
- Suffering related to interpersonal interaction
- Suffering related to one's place and interaction in society
- Existential suffering

Quote from a subject:

*"The pain has become so overpowering. This is very confusing and depressing, not at least for XX [husband], who no longer knows how to react to it. While this endures, I'm dragging him into a depression. He gets totally exhausted."*

Select ONLY ONE answer per page.

**Question 1.9 (1 mark)**

**Based on the abstract, this excerpt, the listed themes and your other knowledge, which option best describes this quote from a subject?**

- A. Existential suffering
- B. Intrapersonal suffering
- C. Medically related suffering
- D. Suffering related to interpersonal interaction
- E. Suffering related to one's place and interaction in society

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.10

## CAP Question 1 contd.

*(Findings excerpt)*

Five broad categories of codes emerged, each representing a dimension of unbearable suffering:

- Medically related suffering
- Intrapersonal suffering
- Suffering related to interpersonal interaction
- Suffering related to one's place and interaction in society
- Existential suffering

Quote from a subject:

*"I'm scared to wake up, scared to get myself through the day, and scared to go to sleep."*

Select ONLY ONE answer per page.

**Question 1.10 (1 mark)**

**Based on the abstract, this excerpt, the listed themes and your other knowledge, which option best describes this quote from a subject?**

- A. Existential suffering
- B. Intrapersonal suffering
- C. Medically related suffering
- D. Suffering related to interpersonal interaction
- E. Suffering related to one's place and interaction in society

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.11

## CAP Question 1 contd.

*(Procedures excerpt)*

The current paper describes the qualitative analysis of a rich data-set of self-written or self-recorded 'testimonials' ... from 26 psychiatric patients who have made a request for euthanasia.

LT and MV simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by LT and MV

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments ...

... codes were sorted into more abstract subcategories and then generally classified into overarching main categories.

Select ONLY ONE answer per page.

**Question 1.11 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the study methodology used by the authors to achieve their objectives?**

- A. **Autoethnographic approach**
- B. **Dialogical Research approach**
- C. **Ethnographic approach**
- D. **Mixed methods approach**
- E. **Narrative approach**
- F. **Quantitative analysis**
- G. **Thematic content analysis**

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.11

## CAP Question 1 contd.

*(Procedures excerpt) (repeated from p.154)*

The current paper describes the qualitative analysis of a rich data-set of self-written or self-recorded 'testimonials' ... from 26 psychiatric patients who have made a request for euthanasia.

LT and MV simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by LT and MV

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments ...

... codes were sorted into more abstract subcategories and then generally classified into overarching main categories.

Select ONLY ONE answer per page.

**Question 1.12 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the methodology appropriate for a purely observational study of suffering in patients requesting euthanasia?**

- A. Autoethnographic approach
- B. Dialogical Research approach
- C. Ethnographic approach
- D. Mixed methods approach
- E. Narrative approach
- F. Quantitative analysis
- G. Thematic content analysis

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.11

## CAP Question 1 contd.

*(Procedures excerpt) (repeated from p.154)*

The current paper describes the qualitative analysis of a rich data-set of self-written or self-recorded 'testimonials' ... from 26 psychiatric patients who have made a request for euthanasia.

LT and MV simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by LT and MV

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments ...

... codes were sorted into more abstract subcategories and then generally classified into overarching main categories.

Select ONLY ONE answer per page.

**Question 1.13 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes the methodology that would apply if patients had documented and reflected on their own experiences?**

- A. Autoethnographic approach
- B. Ethnographic approach
- C. Grounded theory analysis
- D. Mixed methods approach
- E. Narrative approach
- F. Quantitative analysis
- G. Thematic content analysis

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.11

## CAP Question 1 contd.

*(Procedures excerpt) (repeated from p.154)*

The current paper describes the qualitative analysis of a rich data-set of self-written or self-recorded 'testimonials' ... from 26 psychiatric patients who have made a request for euthanasia.

LT and MV simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by LT and MV

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments ...

... codes were sorted into more abstract subcategories and then generally classified into overarching main categories.

Select ONLY ONE answer per page.

## Question 1.14 (1 mark)

Based on the abstract, this excerpt and your other knowledge, which option best describes the methodology that would apply if patients had been interviewed about the meanings underlying the euthanasia experience?

- A. Autoethnographic approach
- B. Ethnographic approach
- C. Grounded theory analysis
- D. Mixed methods approach
- E. Narrative approach
- F. Quantitative analysis
- G. Interpretative phenomenological analysis

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 1.11

## CAP Question 1 contd.

*(Procedures excerpt) (repeated from p.154)*

The current paper describes the qualitative analysis of a rich data-set of self-written or self-recorded 'testimonials' ... from 26 psychiatric patients who have made a request for euthanasia.

LT and MV simultaneously coded one brief proof testimonial from a different medical record, received at a later date, in order to compare coding principles and to discuss and resolve any discrepancies. The 26 testimonials were then independently coded by LT and MV

... when the coding was completed, G-JYP (who has no research history in the area of euthanasia) was given access to the data in QualiCoder and inspected both the coding structure and coded fragments ...

... codes were sorted into more abstract subcategories and then generally classified into overarching main categories.

Select ONLY ONE answer per page.

**Question 1.15 (2 marks)**

**Based on the abstract, this excerpt and your other knowledge, which option best describes why the researchers included their coding structure?**

- A. To enable other research groups to replicate the findings
- B. To increase credibility of data analysis
- C. To increase transferability of the study
- D. To show there was interdisciplinary consensus
- E. To show they considered reflexivity

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later) CAP 1.11

## CAP Question 1 contd.

*(Conclusions excerpt)*

... as the testimonials were written spontaneously they are profoundly and solely dependent on the written communication skills of each patient.

Select ONLY ONE answer per page.

**Question 1.16 (1 mark)**

**Based on the abstract, this excerpt and your other knowledge, what limitations did this approach have?**

- A. Patients in the study had too much freedom to express and share their thoughts and experiences
- B. Patients may have censored the reasons for their request
- C. Patients may have concealed some other information
- D. Subtleties and complexities of the topic might not have been identified
- E. The patients may have felt a need to convince the physicians about the underlying reasons for their request

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.1

## CAP Question 2 (22 marks)

*(Abstract excerpt)***Effects of psychological treatment of mental health problems in pregnant women to protect their offspring: randomised controlled trial***Huibert Burger\*, Tjitte Verbeek\*, Judith L. Aris-Meijer, Chantal Beijers, Ben W. Mol, Steven D. Hollon, Johan Ormel, Mariëlle G. van Pampus and Claudi L.H. Bockting***Background:** Perinatal depression and anxiety are associated with unfavourable child outcomes.**Aims:** To assess among women with antenatal depression or anxiety the effectiveness of prenatally initiated cognitive-behavioural therapy (CBT) on mother and child compared with care as usual (CAU).**Method:** Pregnant women (n = 282) who screened positive for symptoms of depression and/or anxiety were randomised to either CBT (n = 140) or CAU (n = 142). The primary outcome was child behavioural and emotional problems at age 18 months, assessed using the Child Behavior Checklist (CBCL). Secondary outcomes were maternal symptoms during and up to 18 months after pregnancy, neonatal outcomes, mother–infant bonding and child cognitive and motor development at age 18 months.**Results:** In total, 94 (67%) women in the CBT group and 98 (69%) in the CAU group completed the study. The mean CBCL Total Problems score was non-significantly higher in the CBT group than in the CAU group (mean difference: 1.38 (95% CI -1.82 to 4.57);  $t = 0.85$ ,  $P = 0.399$ ). No effects on secondary outcomes were observed except for depression and anxiety, which were higher in the CBT group than in the CAU group at mid-pregnancy. A post hoc analysis of the 98 women with anxiety disorders showed lower infant gestational age at delivery in the CBT than in the CAU group.**Conclusions:** Prenatally initiated CBT did not improve maternal symptoms or child outcomes among non-help-seeking women with antenatal depression or anxiety. Our findings are not in line with present recommendations for universal screening and treatment for antenatal depression or anxiety, and future work may include the relevance of baseline help-seeking.

Select ONLY ONE answer per page.

## Question 2.1 (1 mark)

This study was designed to measure the impact of CBT on:

- A. Anxiety and depressive disorders
- B. Anxiety disorders
- C. Child emotional and behavioural problems
- D. Depressive disorders
- E. Postnatal depression

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.2

**CAP Question 2 contd. (abstract repeated: same as in Q.2.1 above)***(Abstract excerpt)***Effects of psychological treatment of mental health problems in pregnant women to protect their offspring: randomised controlled trial***Huibert Burger\*, Tjitte Verbeek\*, Judith L. Aris-Meijer, Chantal Beijers, Ben W. Mol, Steven D. Hollon, Johan Ormel, Mariëlle G. van Pampus and Claudi L.H. Bockting***Background:** Perinatal depression and anxiety are associated with unfavourable child outcomes.**Aims:** To assess among women with antenatal depression or anxiety the effectiveness of prenatally initiated cognitive-behavioural therapy (CBT) on mother and child compared with care as usual (CAU).**Method:** Pregnant women (n = 282) who screened positive for symptoms of depression and/or anxiety were randomised to either CBT (n = 140) or CAU (n = 142). The primary outcome was child behavioural and emotional problems at age 18 months, assessed using the Child Behavior Checklist (CBCL). Secondary outcomes were maternal symptoms during and up to 18 months after pregnancy, neonatal outcomes, mother–infant bonding and child cognitive and motor development at age 18 months.**Results:** In total, 94 (67%) women in the CBT group and 98 (69%) in the CAU group completed the study. The mean CBCL Total Problems score was non-significantly higher in the CBT group than in the CAU group (mean difference: 1.38 (95% CI -1.82 to 4.57); t = 0.85, P = 0.399). No effects on secondary outcomes were observed except for depression and anxiety, which were higher in the CBT group than in the CAU group at mid-pregnancy. A post hoc analysis of the 98 women with anxiety disorders showed lower infant gestational age at delivery in the CBT than in the CAU group.**Conclusions:** Prenatally initiated CBT did not improve maternal symptoms or child outcomes among non-help-seeking women with antenatal depression or anxiety. Our findings are not in line with present recommendations for universal screening and treatment for antenatal depression or anxiety, and future work may include the relevance of baseline help-seeking

Select ONLY ONE answer per page.

**Question 2.2 (1 mark)****The purpose of randomising in a study such as this is to:**

- A. Control for confounders
- B. Ensure adherence to study protocol
- C. Improve child outcomes after perinatal depression
- D. Prevent researchers from manipulating the results
- E. Prevent the placebo effect

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## CAP Question 2 contd.

*(Methods excerpt)*

The PRegnancy Outcomes after a Maternity Intervention for Stressful EmotionS (PROMISES) trial is a CONSORT-compliant parallel-group assessor-masked multicentre RCT with a published protocol.

Select **ONLY ONE** answer per page.

**Question 2.3 (2 marks)**

In the adjoining excerpt, the term **CONSORT** means:

- A. An acronym – 'Confirmed Standards of Reporting Trials'
- B. An improved method of statistical analysis
- C. Compliance between research sites
- D. The study conforms to ethical guidelines
- E. The study will report the flow of patients

**CAP Question 2 contd.**

*(Methods excerpt)*

All women during their booking visit at the collaborating practices between 10 and 12 weeks of pregnancy, which is part of standard care, were screened for the purpose of the study. They were provided with study information, a consent form and two self-report questionnaires: the 6-item State-Trait Anxiety Inventory (STAI) and the 10-item Edinburgh Postnatal Depression Scale (EPDS) to assess symptoms of anxiety and depression respectively.

Women with at least moderate anxiety or depression, defined as a score of 42 or higher on the STAI or 12 or higher on the EPDS, were eligible. Women were excluded if they had substantial physical disease, had a multiple pregnancy, showed a high suicide risk on the MINI-International Neuropsychiatric Interview, had a history of bipolar disorder, psychoses or manic disorder, had misused substances, were receiving psychotherapy or did not speak Dutch.

Select **ONLY ONE** answer per page.

**Question 2.4 (2 marks)**

**Patients were able to be included if they:**

- A. Had a confirmed diagnosis of depression or anxiety
- B. Had bipolar depression
- C. Had undergone screening between 10 and 12 weeks gestation
- D. Lived in Germany but could speak Dutch
- E. Scored less than 42 on STAI and less than 12 on EPDS
- F. Were not taking medication

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.5

## CAP Question 2 contd.

*(Methods excerpt) (excerpt repeated: same as in Q.2.4 above)*

All women during their booking visit at the collaborating practices between 10 and 12 weeks of pregnancy, which is part of standard care, were screened for the purpose of the study. They were provided with study information, a consent form and two self-report questionnaires: the 6-item State-Trait Anxiety Inventory (STAI) and the 10-item Edinburgh Postnatal Depression Scale (EPDS) to assess symptoms of anxiety and depression respectively.

Women with at least moderate anxiety or depression, defined as a score of 42 or higher on the STAI or 12 or higher on the EPDS, were eligible. Women were excluded if they had substantial physical disease, had a multiple pregnancy, showed a high suicide risk on the MINI-International Neuropsychiatric Interview, had a history of bipolar disorder, psychoses or manic disorder, had misused substances, were receiving psychotherapy or did not speak Dutch.

Select **ONLY ONE** answer per page.

**Question 2.5 (2 marks)**

**Patients were excluded if they:**

- A. Had pregnancy-related nausea
- B. Had had psychotherapy in the past
- C. Spoke Dutch as their second language
- D. Scored less than 12 on the EPDS
- E. Were presently receiving psychotherapy

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.6

## CAP Question 2 contd.

*(Methods excerpt)*

Licensed psychologists (n = 31) with at least 2 years' postdoctoral training including CBT and CBT supervision provided the CBT. They received for the study an additional 2 days of training on antenatal CBT (for depression, anxiety disorders and PTSD) and supervision during. The treatment protocol consisted of 10–14 individual sessions, of which 6–10 were intended to be delivered during pregnancy. Sessions were scheduled from 20 weeks' gestation up to 3 months postpartum; the exact timing of the sessions was planned on the basis of shared decision-making with the participant. The treatment encompassed several optional modules, with evidence-based CBT interventions focusing on the treatment of anxiety disorders (exposure, response prevention and cognitive-challenging work), depressive disorders (additional behavioural activation), or trauma and PTSD (exposure, imagery and rescripting). In addition, the overall focus was on identifying and changing dysfunctional cognitions and beliefs. Each session also addressed pregnancy-related cognitions and attitudes, and selected evidence-based CBT interventions for specific anxiety and depressive disorders and PTSD were offered. All sessions were structured, explaining the rationale and giving and discussing homework assignments.

Select ONLY ONE answer per page.

## Question 2.6 (2 marks)

Having regard to the adjoining extract, the abstract and your other knowledge please answer the following question.

With regard to the intervention:

- A. All patients had 6 sessions postpartum
- B. Exposure was the main component of all CBT interventions
- C. Patients could have a minimum of two sessions postpartum
- D. Sessions focused on gradual exposure to the infant postpartum
- E. Sessions focused on negative thoughts about child development
- F. Sessions started immediately after randomisation

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## CAP Question 2 contd.

*(Methods excerpt)*

The sample size description in this study refers to an alpha of 5% and power of 80%.

Select ONLY ONE answer per page.

**Question 2.7 (2 marks)**

Having regard to the adjoining excerpt, the abstract and your other knowledge please answer the following question. Which of the following is correct about the alpha?

- A. 5% of participants can drop out with the study remaining viable
- B. If alpha increases it means a decrease in type I errors
- C. If alpha increases it will increase type II error
- D. If alpha increases then power increases
- E. The effect size is moderate
- F. The effect size is small

## CAP Question 2 contd.

## Reference table for Questions 2.8 to 2.10

(Table 1 is on the following page)

**Table 2** Anxiety and depression symptom levels according to follow-up time and treatment group<sup>a</sup>

	$n_{\text{CBT}}/n_{\text{CAU}}$	CBT ( $n = 140$ ), mean (s.d.)	CAU ( $n = 142$ ), mean (s.d.)	Mean difference <sup>a</sup> (95% CI)	$z$	$P$
STAI score <sup>b</sup>						
Baseline (at 12 weeks' gestation)	138/137	48.6(8.7)	48.5 (8.4)	0.0 (−2.0 to 2.0)		
24 weeks' gestation	115/120	47.7 (11.5)	43.2 (10.9)	4.5 (2.0 to 7.0)	3.54	<0.001
36 weeks' gestation	98/108	43.2 (10.6)	41.5 (12.6)	1.5 (−1.2 to 4.2)	1.09	0.275
6 weeks postnatal	94/83	40.9 (11.5)	41.4 (13.5)	−1.4 (−4.4 to 1.5)	−0.95	0.342
3 months postnatal	76/87	43.8 (13.7)	41.1 (12.4)	2.2 (−0.9 to 5.4)	1.38	0.167
6 months postnatal	91/97	42.1 (13.6)	40.8 (11.7)	0.9 (−2.2 to 4.1)	0.58	0.560
12 months postnatal	79/75	41.0 (12.8)	41.4 (12.4)	0.7 (−2.9 to 4.3)	0.39	0.697
18 months postnatal	72/66	40.9 (11.3)	40.1 (10.2)	1.5 (−2.4 to 5.4)	0.74	0.460
EPDS score <sup>b</sup>						
Baseline (at 12 weeks' gestation)	135/137	9.8 (4.1)	9.7 (4.1)	0.1 (−0.9 to 1.1)		
24 weeks' gestation	120/120	10.4 (5.0)	9.2 (4.7)	1.2 (0.2 to 2.1)	2.43	0.015
36 weeks' gestation	97/104	9.4 (4.6)	8.3 (4.6)	0.8 (−0.2 to 1.8)	1.49	0.136
6 weeks postnatal	90/88	8.4 (4.6)	8.4 (4.9)	−0.1 (−1.2 to 1.0)	−0.20	0.844
3 months postnatal	74/88	8.7 (5.4)	8.2 (4.7)	0.3 (−1.0 to 1.5)	0.44	0.660
6 months postnatal	87/95	8.0 (5.3)	8.3 (5.3)	−0.3 (−1.6 to 1.0)	−0.46	0.647
12 months postnatal	75/77	7.9 (5.0)	7.8 (5.2)	0.5 (−1.0 to 1.9)	0.67	0.504
18 months postnatal	74/63	7.8 (5.0)	7.4 (4.1)	0.9 (−0.7 to 2.6)	1.12	0.263

CBT, cognitive-behavioural therapy; CAU, care as usual;  $n_{\text{CBT}}/n_{\text{CAU}}$ , numbers in CBT and CAU groups respectively; STAI, State-Trait Anxiety Inventory; EPDS, Edinburgh Postnatal Depression Scale.

a. Means (s.d.) are based on complete data, mean differences between groups were quantified with linear mixed-effects models using all available data with follow-up time as a categorical independent variable.

b. Higher values indicate more severe symptoms.

## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.8

## CAP Question 2 contd.

Reference table for Questions 2.8 to 2.10  
(See p.167 for Table 2)

**Table 1** Baseline characteristics of participants according to treatment group<sup>a</sup>

	CBT ( <i>n</i> = 140)	CAU ( <i>n</i> = 142)
Age, years: mean (s.d.)	33.4 (4.6)	32.1 (4.5)
Multiparous, <i>n/N</i> (%)	70/140 (50.0)	73/142 (51.4)
Marital status: single, <i>n/N</i> (%)	12/136 (8.8)	10/136 (7.4)
Ethnicity: Black and minority ethnic, <i>n/N</i> (%)	8/134 (6.0)	3/136 (2.2)
Smoking, <i>n/N</i> (%)	11/89 (12.4)	11/100 (11.0)
Use of antidepressants, <i>n/N</i> (%)	2/140 (1.4)	2/142 (1.4)
Socioeconomic status, <i>n/N</i> (%)		
Low	48/140 (34.3)	51/142 (35.9)
Moderate	36/140 (25.7)	35/142 (24.6)
High	56/140 (40.0)	56/142 (39.4)
STAI score, mean (s.d.) <sup>b</sup>	48.6 (8.7)	48.5 (8.4)
EPDS score, mean (s.d.) <sup>b</sup>	9.8 (4.1)	9.7 (4.1)
STAI score $\geq 42$ , <i>n/N</i> (%) <sup>b</sup>	120/138 (87.0)	119/137 (86.9)
EPDS score $\geq 12$ , <i>n/N</i> (%) <sup>b</sup>	45/135 (33.3)	43/137 (31.4)
DSM-IV diagnosis, <i>n/N</i> (%)		
Anxiety	48/138 (34.8)	36/142 (25.4)
PTSD	9/138 (6.5)	5/142 (3.5)
Depression	14/138 (10.1)	9/142 (6.3)
Comorbid anxiety and depression	12/138 (8.7)	12/142 (8.5)
Comorbid PTSD and depression	2/138 (1.4%)	8/142 (5.6)

CBT, cognitive-behavioural therapy; CAU, care as usual; STAI, State-Trait Anxiety Inventory; EPDS, Edinburgh Postnatal Depression Scale; PTSD, post-traumatic stress disorder.

a. Based on complete data.

b. Higher values indicate more severe symptoms.

Select **ONLY ONE** answer per page.

Using Tables 1 and 2, the abstract and your other knowledge:

**Question 2.8 (2 marks)**

Which of the following is correct, regarding the study participants:

- A. 66 patients dropped out of the CBT group
- B. 71 patients dropped out of the CAU group
- C. 94 patients did not complete EPDS at six months postpartum
- D. 140 patients started out in treatment
- E. 282 patients started out in treatment

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later)

CAP 2.9

## CAP Question 2 contd.

## Reference table for Questions 2.8 to 2.10

(See p.167 for Table 2)

**Table 1** Baseline characteristics of participants according to treatment group<sup>a</sup>

	CBT ( <i>n</i> = 140)	CAU ( <i>n</i> = 142)
Age, years: mean (s.d.)	33.4 (4.6)	32.1 (4.5)
Multiparous, <i>n/N</i> (%)	70/140 (50.0)	73/142 (51.4)
Marital status: single, <i>n/N</i> (%)	12/136 (8.8)	10/136 (7.4)
Ethnicity: Black and minority ethnic, <i>n/N</i> (%)	8/134 (6.0)	3/136 (2.2)
Smoking, <i>n/N</i> (%)	11/89 (12.4)	11/100 (11.0)
Use of antidepressants, <i>n/N</i> (%)	2/140 (1.4)	2/142 (1.4)
Socioeconomic status, <i>n/N</i> (%)		
Low	48/140 (34.3)	51/142 (35.9)
Moderate	36/140 (25.7)	35/142 (24.6)
High	56/140 (40.0)	56/142 (39.4)
STAI score, mean (s.d.) <sup>b</sup>	48.6 (8.7)	48.5 (8.4)
EPDS score, mean (s.d.) <sup>b</sup>	9.8 (4.1)	9.7 (4.1)
STAI score $\geq 42$ , <i>n/N</i> (%) <sup>b</sup>	120/138 (87.0)	119/137 (86.9)
EPDS score $\geq 12$ , <i>n/N</i> (%) <sup>b</sup>	45/135 (33.3)	43/137 (31.4)
DSM-IV diagnosis, <i>n/N</i> (%)		
Anxiety	48/138 (34.8)	36/142 (25.4)
PTSD	9/138 (6.5)	5/142 (3.5)
Depression	14/138 (10.1)	9/142 (6.3)
Comorbid anxiety and depression	12/138 (8.7)	12/142 (8.5)
Comorbid PTSD and depression	2/138 (1.4%)	8/142 (5.6)

CBT, cognitive-behavioural therapy; CAU, care as usual; STAI, State-Trait Anxiety Inventory; EPDS, Edinburgh Postnatal Depression Scale; PTSD, post-traumatic stress disorder.

a. Based on complete data.

b. Higher values indicate more severe symptoms.

Select **ONLY ONE** answer per page.

Using Tables 1 and 2, the abstract and your other knowledge:

**Question 2.9** (2 marks)

Which of the following is correct, regarding the results:

- A. CBT was significantly more effective for anxiety than for depression
- B. Maternal symptom scores in the CBT group compared to the CAU group were lower throughout the study
- C. Symptoms of depression and anxiety in the second trimester were worse in the CBT group compared to the CAU group
- D. The STAI measured anxiety in subgroups without PTSD

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## MCQ Mock Exam

Flag box: (add exclamation mark if you want to review this question later) CAP 2.10

CAP Question 2 contd.

See p. 167 for Table 2

Select ONLY ONE answer per page.

Question 2.10 (2 marks)

With reference to Table 2, which of the following is correct regarding the z value:

- A. It describes a range between -4 to +4
- B. It describes the number of standard deviations above or below the population mean
- C. It describes the standard deviation of the standard mean
- D. It describes the standard error of the means

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## MCQ Mock Exam

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CAP 2.11

## CAP Question 2 contd.

*(Statistical analysis excerpt)*

The proportion of missing data ranged from 0 to 49% (last follow-up) for the maternal data and from 0 to 38% (BSID-III scores) for the child variables. Multiple imputation was used for incomplete data under the missing at random (MAR) or missing completely at random (MCAR) assumption. The missing data mechanism was studied for each of the variables by predicting its missingness, for example because of loss to follow-up, from the other variables. This was done using multivariable logistic regression analyses.

Select ONLY ONE answer per page.

Using the adjoining excerpt, the abstract on p.160 and your other knowledge:

**Question 2.11 (2 marks)**

Which of the following is correct, regarding the dropouts:

- A. A questionnaire after the end of the study is the best method to evaluate the reasons for dropouts
- B. Dropouts are not usually accounted for in such studies, and in this case, they were negligible and not of concern
- C. Multiple Imputation, a data analysis technique which attempts to "fill in" missing data via repeated statistical analyses, was used in this study
- D. The Missing At Random (MAR) analysis assumes that the 'missingness' of data cannot be fully accounted for by variables as there will never be complete information
- E. The Missing Completely At Random (MCAR) analysis assumes that the 'missingness' of data is related to the study variables

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## MCQ Mock Exam

**CAP Question 2 contd.** (Abstract excerpt repeated)**Effects of psychological treatment of mental health problems in pregnant women to protect their offspring: randomised controlled trial**

Huibert Burger\*, Tjitte Verbeek\*, Judith L. Aris-Meijer, Chantal Beijers, Ben W. Mol, Steven D. Hollon, Johan Ormel, Mariëlle G. van Pampus and Claudi L.H. Bockting

**Background:** Perinatal depression and anxiety are associated with unfavourable child outcomes.

**Aims:** To assess among women with antenatal depression or anxiety the effectiveness of prenatally initiated cognitive-behavioural therapy (CBT) on mother and child compared with care as usual (CAU).

**Method:** Pregnant women ( $n = 282$ ) who screened positive for symptoms of depression and/or anxiety were randomised to either CBT ( $n=140$ ) or CAU ( $n=142$ ). The primary outcome was child behavioural and emotional problems at age 18 months, assessed using the Child Behavior Checklist (CBCL). Secondary outcomes were maternal symptoms during & up to 18 months after pregnancy, neonatal outcomes, mother-infant bonding and child cognitive and motor development at age 18 months.

**Results:** In total, 94 (67%) women in the CBT group and 98 (69%) in the CAU group completed the study. The mean CBCL Total Problems score was non-significantly higher in the CBT group than in the CAU group (mean difference: 1.38 (95% CI  $-1.82$  to  $4.57$ );  $t = 0.85$ ,  $P = 0.399$ ). No effects on secondary outcomes were observed except for depression and anxiety, which were higher in the CBT group than in the CAU group at mid-pregnancy. A post hoc analysis of the 98 women with anxiety disorders showed lower infant gestational age at delivery in the CBT than in the CAU group.

**Conclusions:** Prenatally initiated CBT did not improve maternal symptoms or child outcomes among non-help-seeking women with antenatal depression or anxiety. Our findings are not in line with present recommendations for universal screening and treatment for antenatal depression or anxiety, and future work may include the relevance of baseline help-seeking.

**Table 3** Child outcomes and quality of mother–infant bonding according to treatment group<sup>a</sup>

	$n_{\text{CBT}}/n_{\text{CAU}}$	CBT ( $n = 140$ ), mean (s.d.)	CAU ( $n = 142$ ), mean (s.d.)	Mean difference <sup>a</sup> (95% CI)	$t$	$P$
Neonatal outcomes						
Birth weight, g	123/120	3413 (647)	3457 (561)	$-53.5$ ( $-196.3$ to $89.2$ )	$-0.74$	$0.462$
Gestational age at delivery, weeks	122/121	$38.5$ (2.3)	$38.8$ (1.8)	$-0.3$ ( $-0.8$ to $0.2$ )	$-1.23$	$0.217$
Apgar score at 1 min <sup>b</sup>	111/116	$8.6$ (1.4)	$8.5$ (1.3)	$0.1$ ( $-0.3$ to $0.4$ )	$0.37$	$0.710$
Apgar score at 5 min <sup>b</sup>	121/120	$9.5$ (1.0)	$9.5$ (1.0)	$-0.1$ ( $-0.3$ to $0.2$ )	$-0.41$	$0.680$
Child development (BSID-III) <sup>c</sup>						
Cognitive score	90/85	$11.6$ (2.2)	$11.9$ (2.0)	$-0.27$ ( $-0.88$ to $0.33$ )	$-0.89$	$0.376$
Fine motor score	90/85	$11.5$ (2.6)	$11.7$ (2.6)	$-0.27$ ( $-1.03$ to $0.50$ )	$-0.69$	$0.492$
Gross motor score	90/85	$9.6$ (2.4)	$9.7$ (2.4)	$-0.08$ ( $-0.78$ to $0.63$ )	$-0.21$	$0.835$
Child behaviour (CBCL/1.5–5) <sup>d</sup>						
Internalising problems	94/98	$4.6$ (3.4)	$3.9$ (3.1)	$0.76$ ( $-0.11$ to $1.63$ )	$1.73$	$0.085$
Externalising problems	94/98	$10.1$ (5.6)	$9.6$ (6.3)	$0.39$ ( $-1.12$ to $1.91$ )	$0.51$	$0.609$
Total problems	94/98	$21.8$ (11.6)	$19.8$ (12.5)	$1.38$ ( $-1.82$ to $4.57$ )	$0.85$	$0.399$
Mother–infant bonding (PBQ) <sup>e</sup>						
Total score	89/95	$105.1$ (5.1)	$105.6$ (5.4)	$-0.3$ ( $-1.8$ ; $1.2$ )	$-0.34$	$0.733$

CBT, cognitive–behavioural therapy; CAU, care as usual;  $n_{\text{CBT}}/n_{\text{CAU}}$ , numbers in CBT and CAU groups respectively; BSID-III, Bayley Scales of Infant and Toddler Development, Third Edition; CBCL/1.5–5, Child Behavior Checklist for Ages 1.5–5; PBQ, Postpartum Bonding Questionnaire.

a. Means (s.d.) are based on complete data, mean differences between groups were quantified with linear regression models using multiply imputed data and are adjusted for parity and socioeconomic status.

b. Higher values indicate better neonatal health.

c. Higher values indicate better performance.

d. Higher values indicate higher severity of problems.

e. Higher values indicate a more problematic mother–infant bond.

(Reference information for Q. 2.12)

Select **ONLY ONE** answer per page.

Having regard to the table and abstract above and your other knowledge:

**Question 2.12 (2 marks)**

**Which of the following can be a conclusion or limitation drawn from this study?**

- A. CBT does not treat depression in the perinatal period
- B. Participants were not actively help seeking thus may not be ready for psychological help
- C. Multiple testing reduced the risk of false positives
- D. The results could be generalised to women who seek help from their GP for depression
- E. This was a high risk population for depression
- F. Treatment integrity was not measured

## MCQ Mock Exam

That's the end of the Mock MCQ Exam.

If you have time, you can go back and review questions either by scrolling through the Word document in the usual way, or by using the flagging system as below.

**You may have 'flagged' a question for later review by adding an ! to the 'Flag box' at top right.**

You can now search for all the !s so as to review any questions you were unsure about, by hitting **control-F** to bring up the navigation field, then typing ! in that field. Skip past any !s in the explanatory pages, and review the rest. To refresh the search, put your cursor on the Navigation search box (which will highlight the contents) and left-click. When you've finished a question and no longer want to review it, delete the ! from the "Flag box" on the Question page.