



**THE ROYAL AUSTRALIAN AND NEW ZEALAND COLLEGE OF  
PSYCHIATRISTS**

# **MOCK WRITTENS EXAMINATION**

**AUCKLAND / NEW ZEALAND**

**DECEMBER 2004**

**PAPER II**

**I hereby verify that I have completed and returned Paper II, NZ Mock Writtens  
Examination December 2004:**

**CANDIDATE'S NAME:**

**CANDIDATE'S  
SIGNATURE:**

**DATE:**



**THE ROYAL AUSTRALIAN AND NEW ZEALAND COLLEGE OF  
PSYCHIATRISTS**

**CRITICAL  
ESSAY  
QUESTION**

**MOCK EXAMINATION**

**AUCKLAND / NEW ZEALAND**

**DECEMBER 2004**

**PAPER II**

**CANDIDATE'S NAME:**

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**Critical Essay Question: (40 marks)**

**DIRECTIONS:**

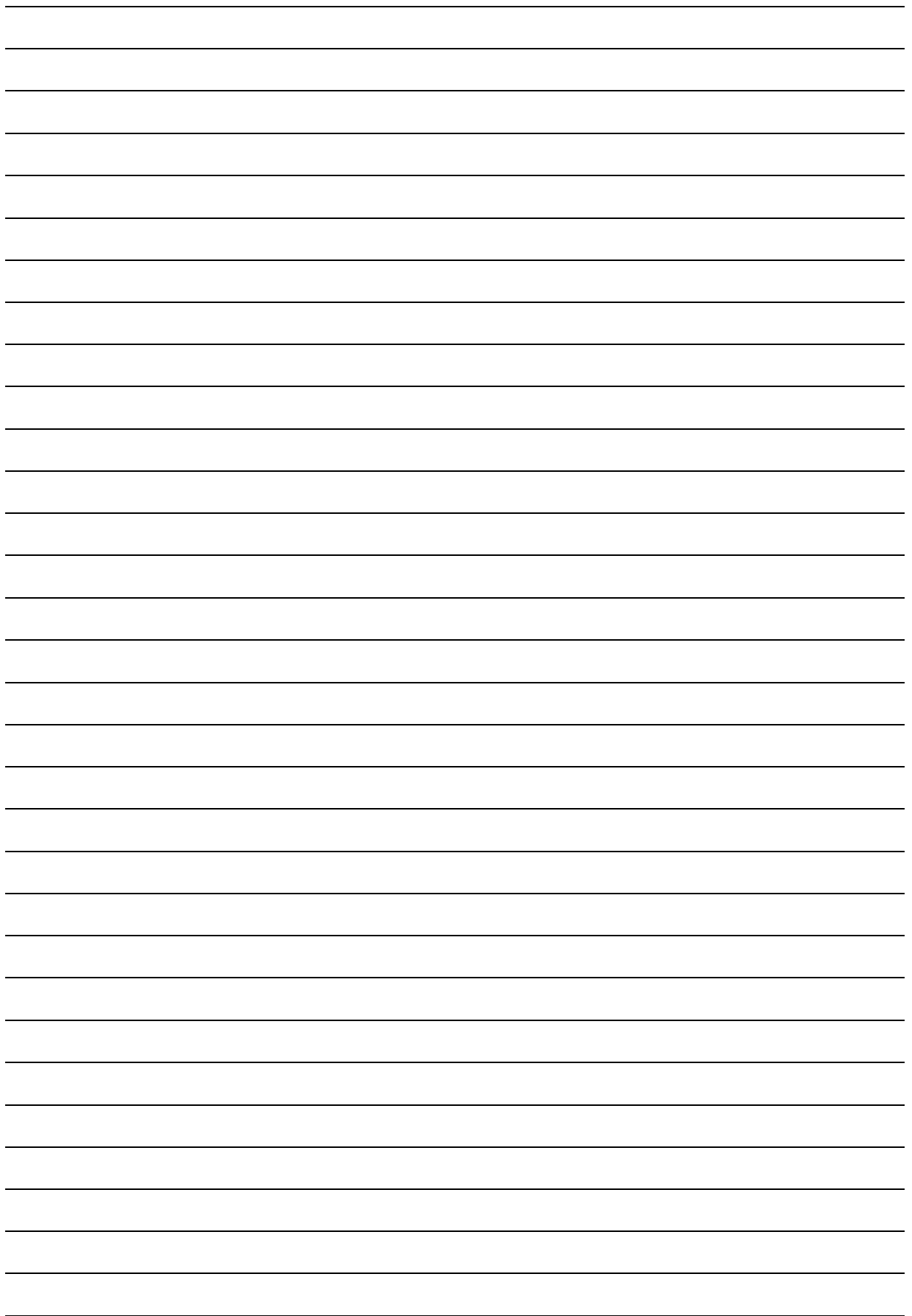
- Use as many pages as needed to answer this Critical Essay Question
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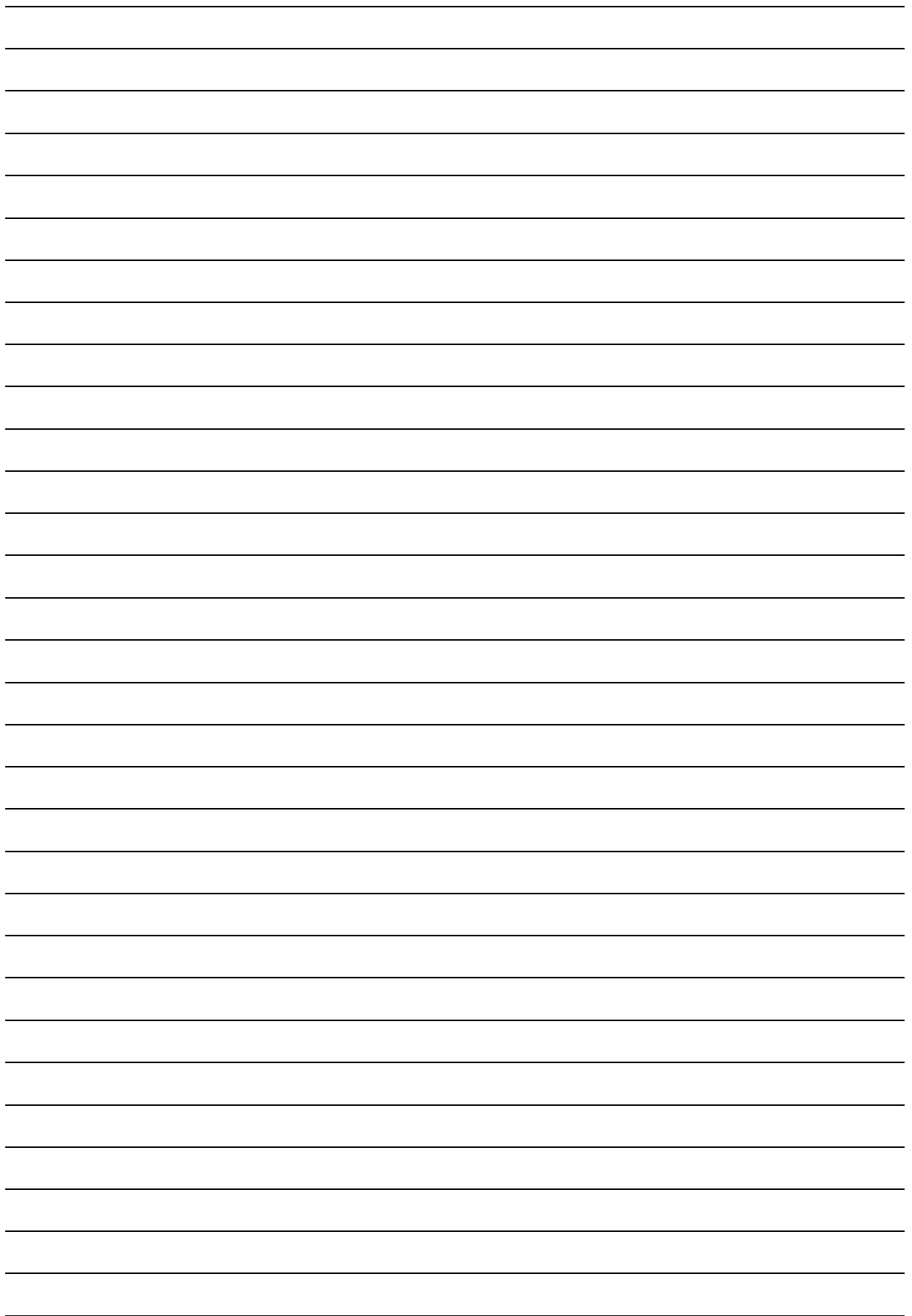
**In essay form, critically discuss the following statement from different points of view and provide your conclusion.**

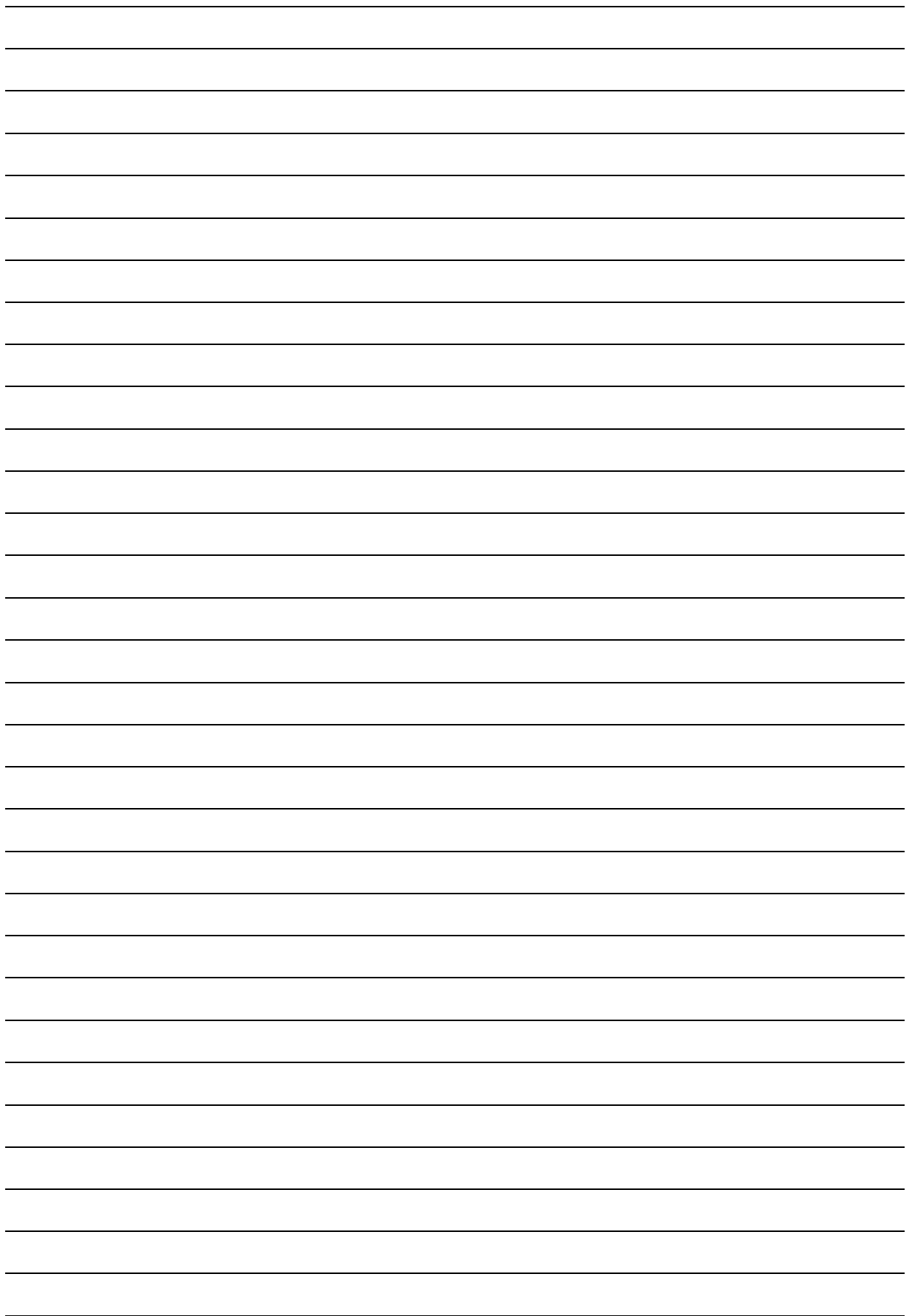
*“The only purpose for which power can be rightfully exercised over any member of a civilized community, against his will, is to prevent harm to others. His own good, either physical or moral, is not sufficient warrant.”*

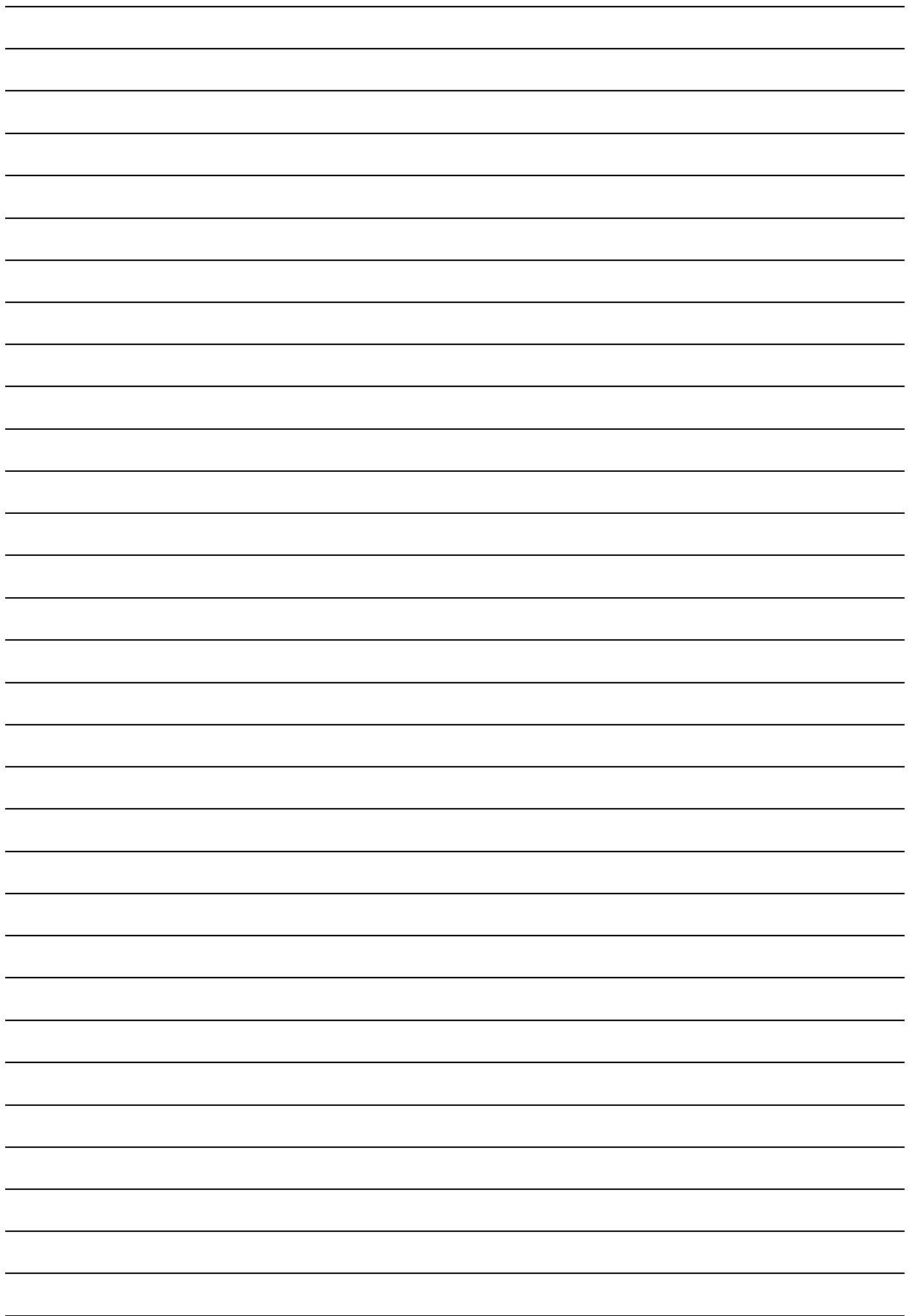
- John Stuart Mill

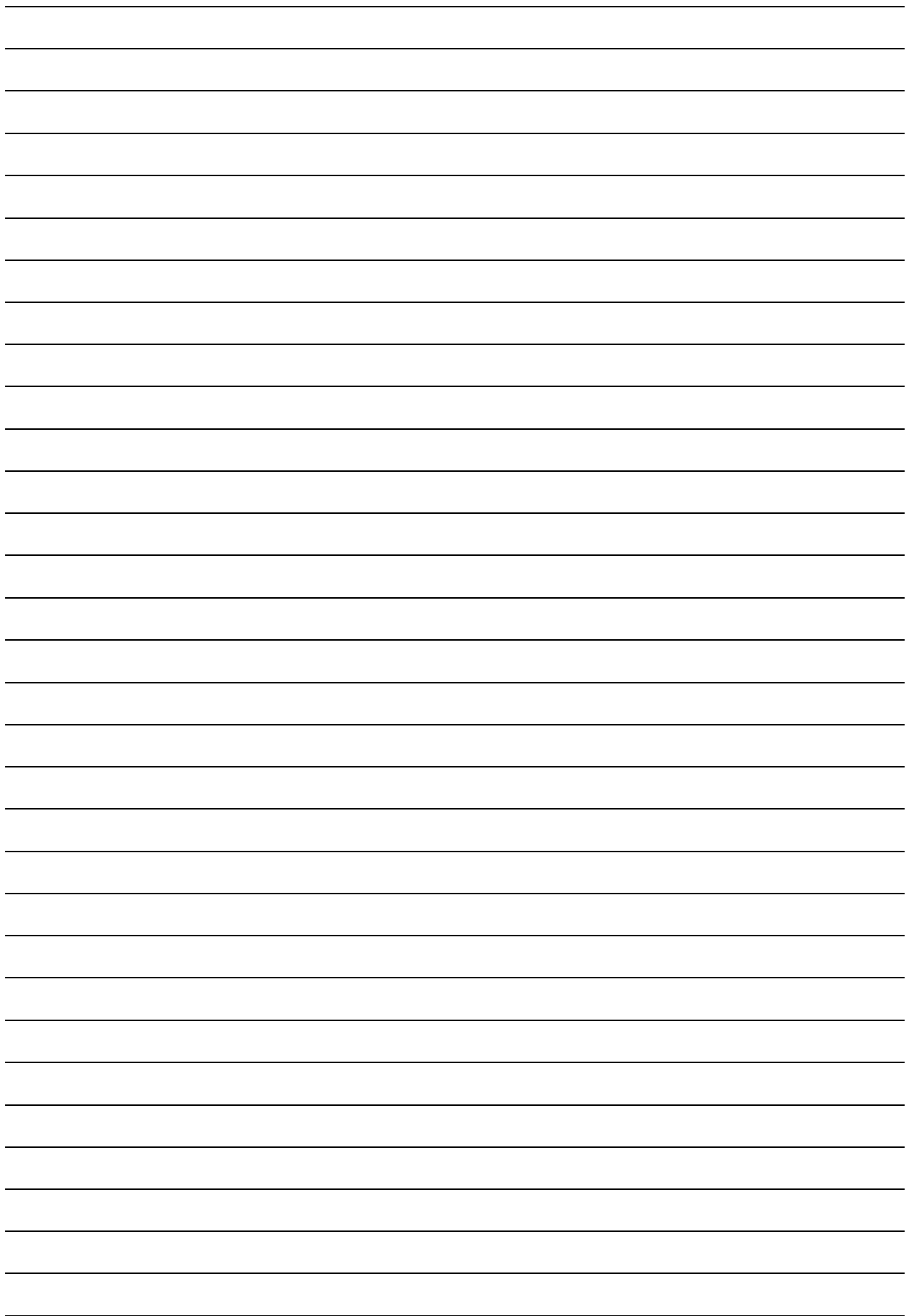
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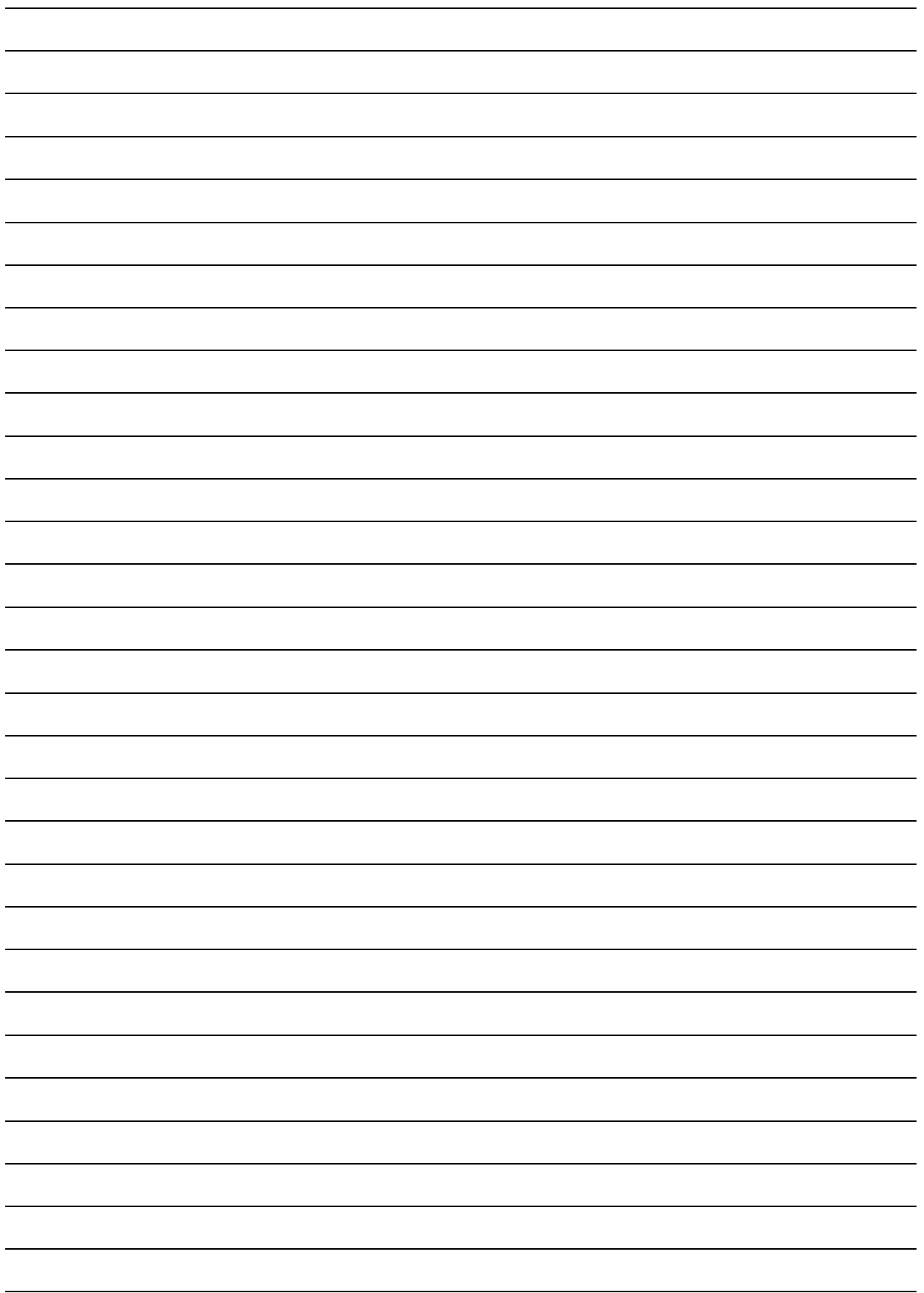














**THE ROYAL AUSTRALIAN AND NEW ZEALAND COLLEGE OF  
PSYCHIATRISTS**

**CRITICAL  
ANALYSIS  
PROBLEMS**

**MOCK EXAMINATION**

**AUCKLAND / NEW ZEALAND**

**DECEMBER 2004**

**PAPER II**

**DIRECTIONS:**

Please write your answer to the Critical Analysis problems in this booklet

**CANDIDATE'S NAME:**

**CANDIDATE'S  
SIGNATURE:**

**DATE:**

## Critical Analysis Question 1

### **Use of lithium and the risk of injurious motor vehicle crash in elderly adults: case-control study nested within a cohort**

*Mahyar Etminan, Brenda Hemmelgarn, J A C Delaney, and Samy Suissa*

*BMJ, Mar 2004; 328: 558 - 559.*

#### **Method**

We used a case-control approach on data from a cohort that has been described previously. Briefly, we used the Universal Quebec Automobile Insurance Agency to identify all 224,734 drivers aged between 67 and 84 years in the province of Quebec at 1 June 1990 and followed them up to 31 May 1993. To be included in the cohort subjects needed to have a valid driver's licence and to have lived in Quebec for at least two years before 1 June 1990. Cohort subjects were followed up until they reached the age of 85 or emigrated from Quebec or until 31 May 1993, whichever was the earliest. We defined the study outcome as subjects' involvement, as drivers, in a motor vehicle crash in which at least one person sustained a physical injury. Cases were subjects who had any such crash during the follow up period, and the date of their first crash was taken as the index date. Controls were a 6% random sample of the cohort, and their index dates were randomly selected during the follow up. Exclusion criteria were the same as in the previous study. We used data from the Quebec Health Insurance Agency to identify subjects' use of prescription drugs and other covariate information. The database on prescription drugs includes information on all outpatient prescriptions of drugs dispensed to people aged 65 years or older. The accuracy and validity of these data have been shown to be high.

#### **Results**

A total of 5579 people in the cohort had had an injurious motor vehicle crash during the follow up period. A random sample of 13,300 control subjects was drawn from the cohort. Current use of lithium was higher among subjects who had been involved in an injurious motor vehicle crash than among control subjects (rate ratio 2.08 (95% confidence interval 1.11 to 3.90)). Current use of carbamazepine was not associated with having had an injurious motor vehicle crash (rate ratio 0.83 (0.48 to 1.44)).

**Rate ratios for having been involved as a driver in an injurious motor vehicle crash (cases), according to drug use:**

Drug use	No of cases (n=5579)	No of controls (n=13 300)	Rate ratio	
			Crude	Adjusted* (95% CI)
Lithium				
Any use in the year before index date†:	20	27	1.77	1.80 (1.00 to 3.24)
1-4 prescriptions	2	8	0.60	0.71 (0.15 to 3.45)
≥5 prescriptions	18	19	2.26	2.18 (1.14 to 4.19)
Current use (within 60 days before index date†)	19	22	2.06	2.08 (1.11 to 3.90)
Carbamazepine				
Any use in the year before index date†:	36	79	1.09	1.04 (0.70 to 1.54)
1-4 prescriptions	18	41	1.05	1.02 (0.58 to 1.79)
≥5 prescriptions	18	38	1.13	1.05 (0.58 to 1.85)
Current use (within 60 days before index date†)	18	48	0.90	0.83 (0.48 to 1.44)

\* Adjusted for age, sex, residence in the country, previous involvement in an injurious motor vehicle crash, chronic disease score, and exposure in the 60 days before the index date to antidepressants, anti-epileptics, benzodiazepines, antipsychotics, antimigraine drugs, muscle relaxants, or narcotic analgesics.

† The date of each driver's first crash in the follow up period (for cases) or a random date (for controls).

### Critical Analysis Question 1 (20 marks)

**1. Read the method. What type of study is this? (2 marks)**

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**2. Who are the controls? What do you think about the authors' choice of controls? (3 marks)**

[illegible]

[illegible]

**3. What are the important sources of bias and confounding factors in this study? (4 marks)**

[illegible]

[illegible]

4. What does “We used logistic regression to compute the odds ratio as an estimate of the rate ratio of an injurious motor vehicle crash associated with use of lithium or carbamazepine” mean? (3 marks)

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5. Read the results. Draw a two by two table for the risk of having an injurious motor vehicle crash whilst having used lithium in the previous 60 days. What is meant by the rate ratio? What tests of statistical significance did the authors use? Comment on the authors' choice. (5 marks)

This image shows a single page of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



[illegible]

**6. Based on this study, what advice would you give to your elderly patients who are taking lithium and driving? (3 marks)**

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### Critical Analysis Question 2 (20 marks)

You are an advanced trainee who has commenced work at a Child and Adolescent Psychiatry service. You encounter several sets of parents who are worried that the prescription of SSRI medication for depression or anxiety disorders may be harmful for their adolescent children. After discussion with your supervisor, you decide to try to locate a good review article to clarify this issue, so that you can advise the parents and young people you are seeing.

1. How would you identify all the possibly useful Review Articles on this topic so as to screen these? Describe the techniques you would use to search using suitable keywords and what sort of limits might be useful in the search. (4 marks)

[illegible]

- [illegible]

- [illegible]

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- 4. In considering the validity of individual studies included in the Review, what are the three main methodological features that have been empirically shown to influence the results of studies about treatment interventions? (3 marks)**

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- 5. What is “publication bias”? (2 marks)**

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6. One Review you locate is a meta-analysis. What is a meta-analysis and what are the three main aims of the authors in the analysis of results, in a meta-analysis? (4 marks)

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**MODIFIED  
ESSAY  
QUESTIONS**

**MOCK EXAMINATION  
AUCKLAND / NEW ZEALAND  
DECEMBER 2004  
PAPER II**

## MODIFIED ESSAY QUESTION 1

CANDIDATE'S NAME:

CANDIDATE'S  
SIGNATURE:

DATE:

### DIRECTIONS:

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### Modified Essay Question 1: (25 marks)

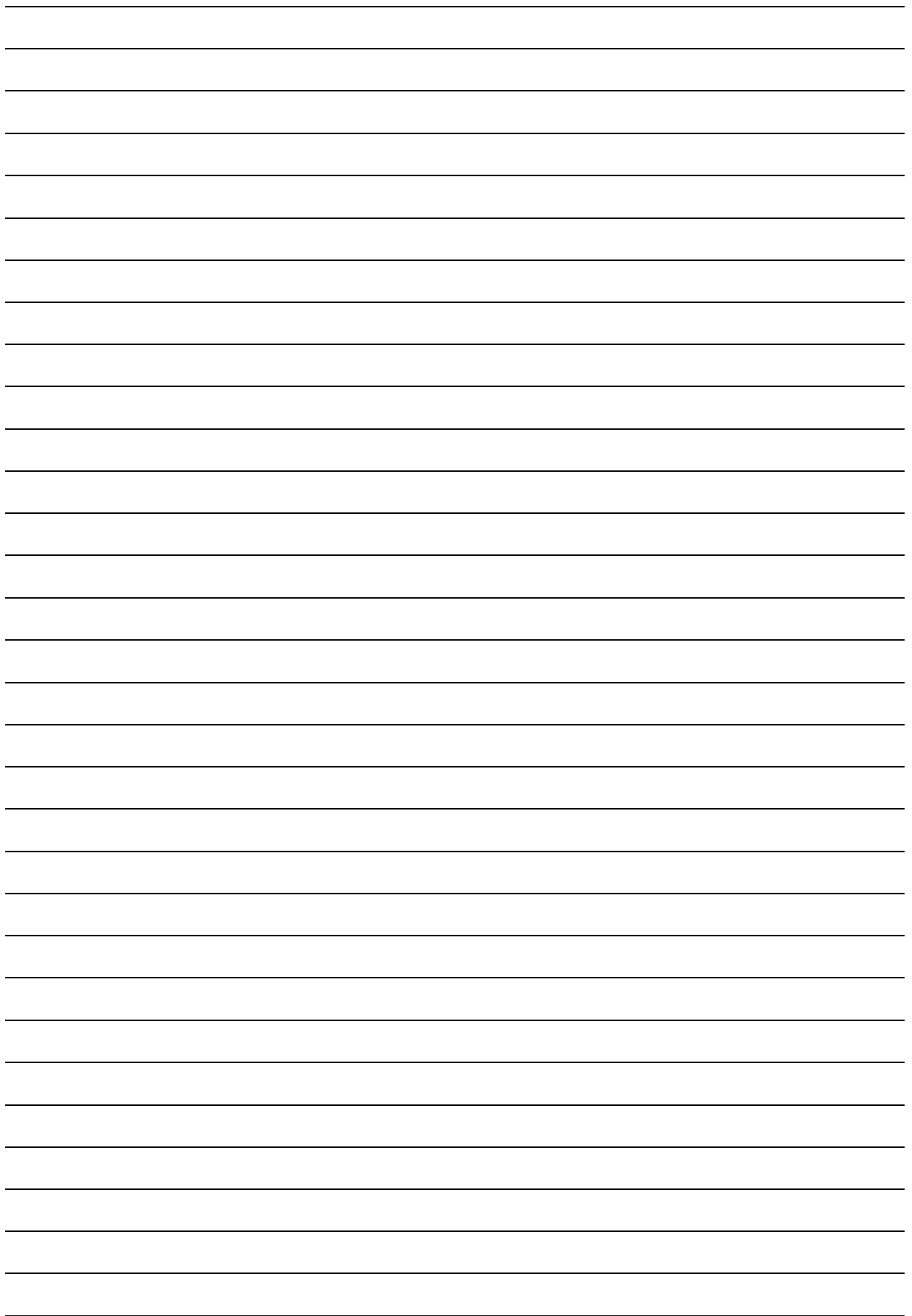
Sam is a 29 year old man with a diagnosis of schizoaffective disorder who has recently come on to your outpatient clinic caseload. Since initial diagnosis ten years ago Sam has had twelve admissions to psychiatric inpatient units with relapses of his mental illness and his attendance at outpatient clinic is intermittent. His adherence to his medication regime of lithium carbonate 1200mg daily and risperidone 6mg daily is variable. According to his file, Sam has denied use of substances but he now tells you that he has binged on alcohol whenever he can afford it “for years”. He had not disclosed this previously as he did not think it was relevant, but his family have been telling him he has an alcohol problem and he ‘needs help’. On further questioning you find he meets criteria for alcohol abuse but not alcohol dependence.

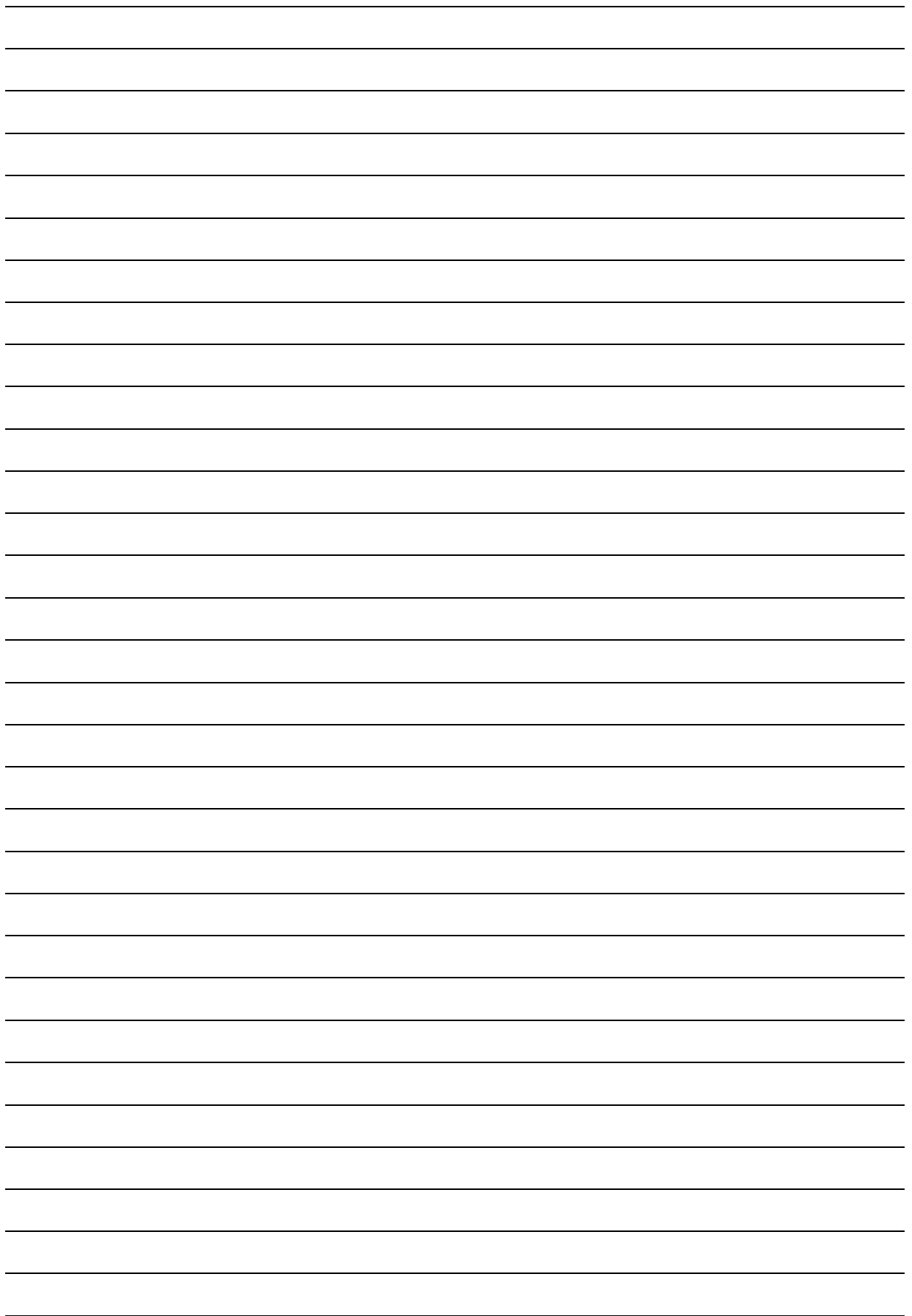
### Question 1

**Outline the possible negative consequences of Sam's alcohol abuse, interacting with his schizoaffective disorder. (8 marks)**

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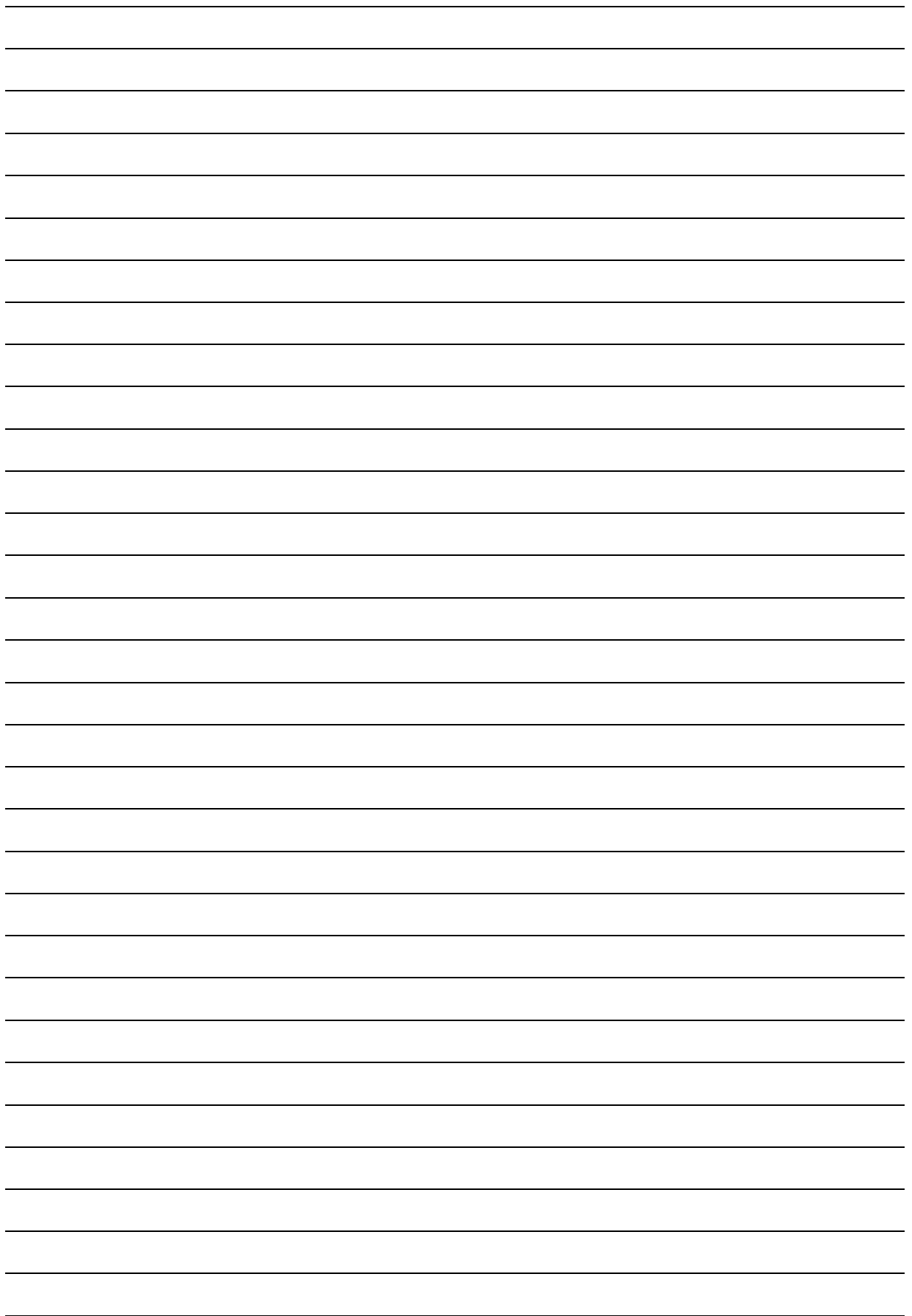


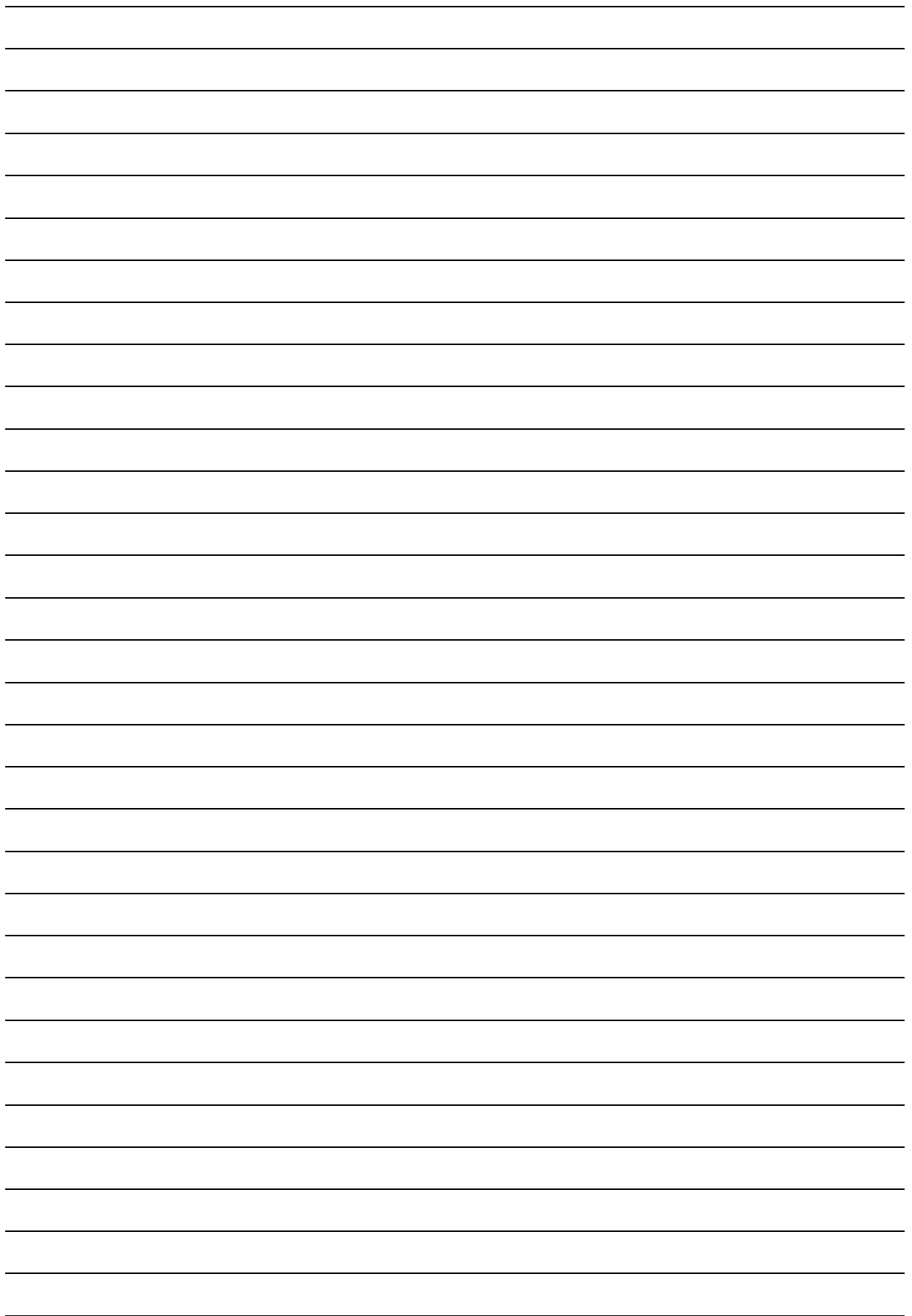


### Question 2

**What further information about Sam's alcohol use would assist in developing treatment strategies. (9 marks)**

[illegible]



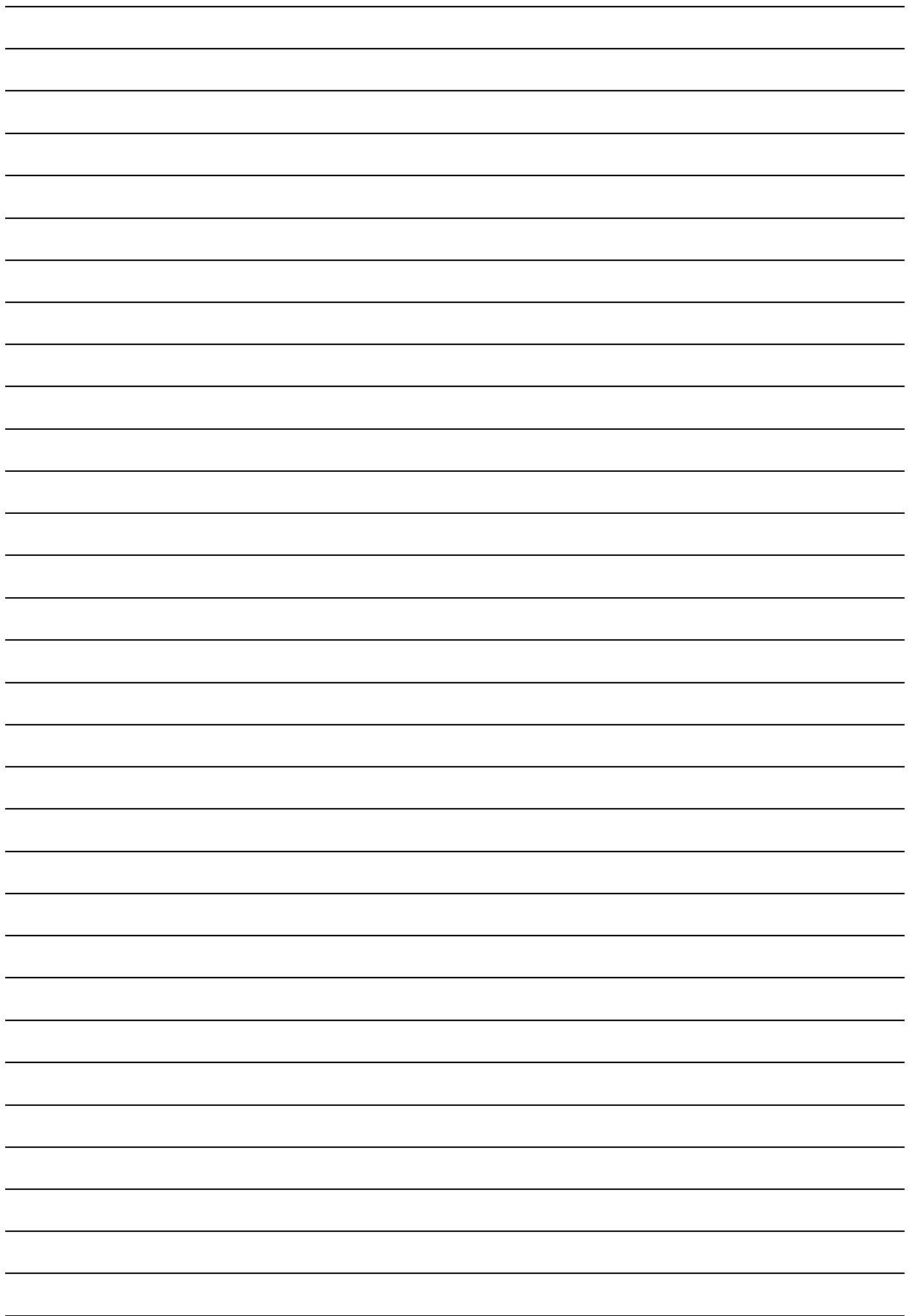


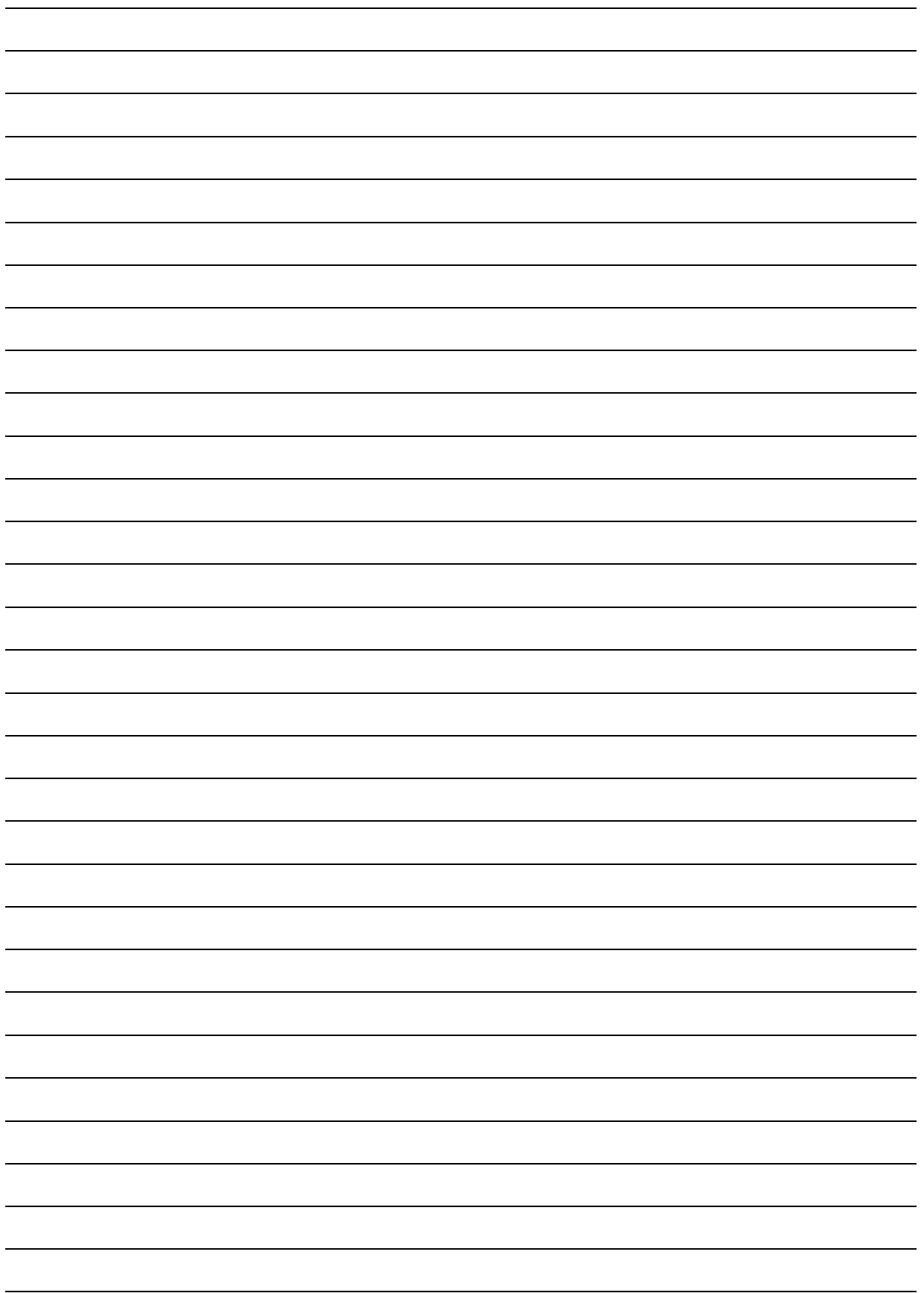
Integrated treatment is not available in your outpatient clinic. However, Sam is agreeable to attending the local Alcohol and Drugs counselling service and for you to share clinical information with his counsellor.

### Question 3

**What information and advice relating to Sam's schizoaffective disorder and your management plan would it be important for his A&D counsellor to understand in order to effectively treat his alcohol abuse? (8 marks)**

[illegible]







## MODIFIED ESSAY QUESTION 2

CANDIDATE'S NAME:

CANDIDATE'S  
SIGNATURE:

DATE:

### DIRECTIONS:

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### Modified Essay Question 2: (25 marks)

Khalid is a fearful young Kurdish man aged 17 who came to New Zealand at age 10 after spending three years in a refugee camp in Indonesia. He lives with his domineering stepfather and his mother, who appears rather anxious. She had witnessed a number of traumatic events during her time in Iran with a number of her extended family having been killed, including Khalid' s biological father.

Khalid left school 6 months ago after experiencing bullying from students. The family have also experienced graffiti written on their fence and minor vandalism.

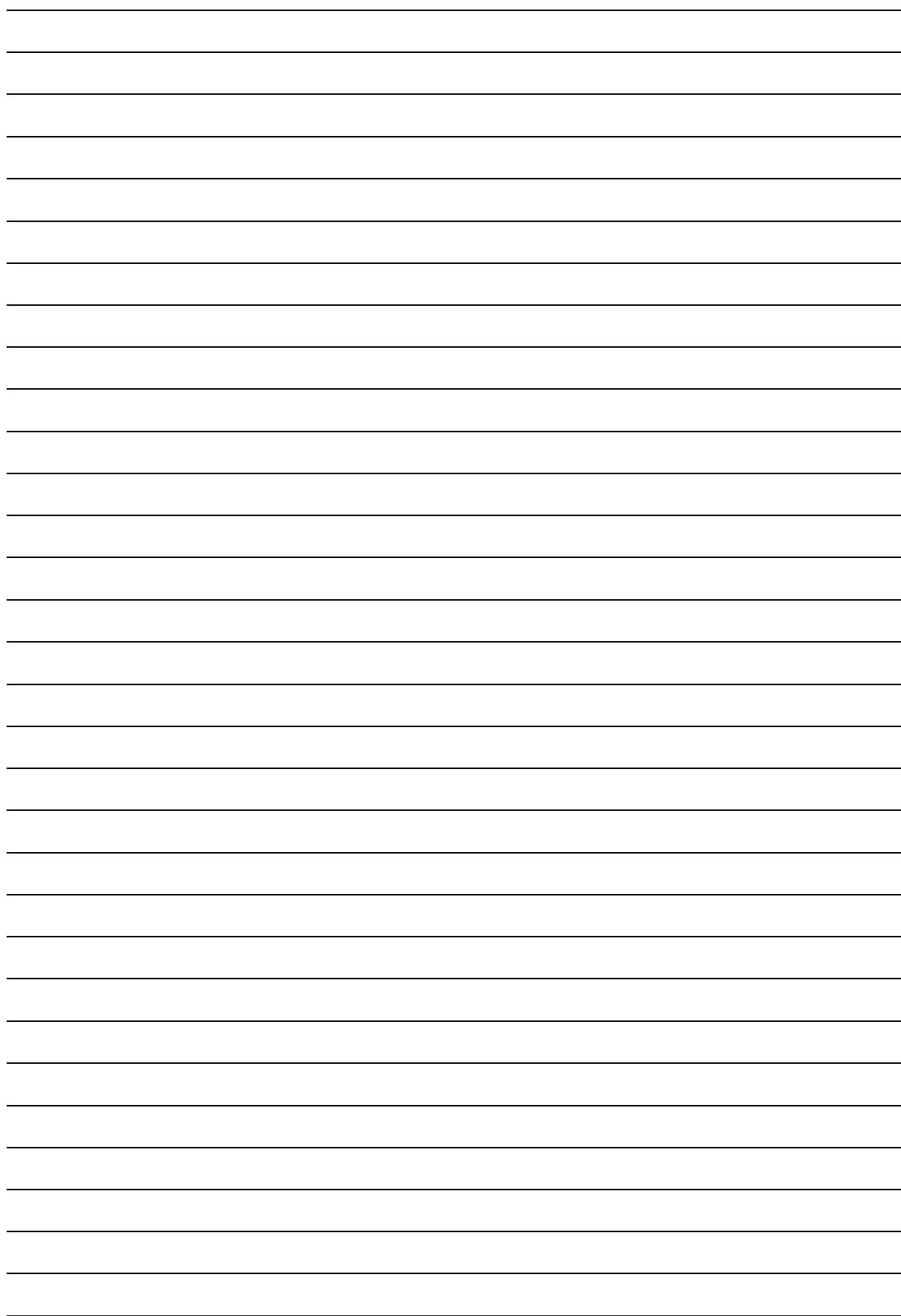
His mother is concerned that he appears listless and spends all his time just "lying around the house watching TV" when he should be out working. She is concerned that he may be smoking marijuana.

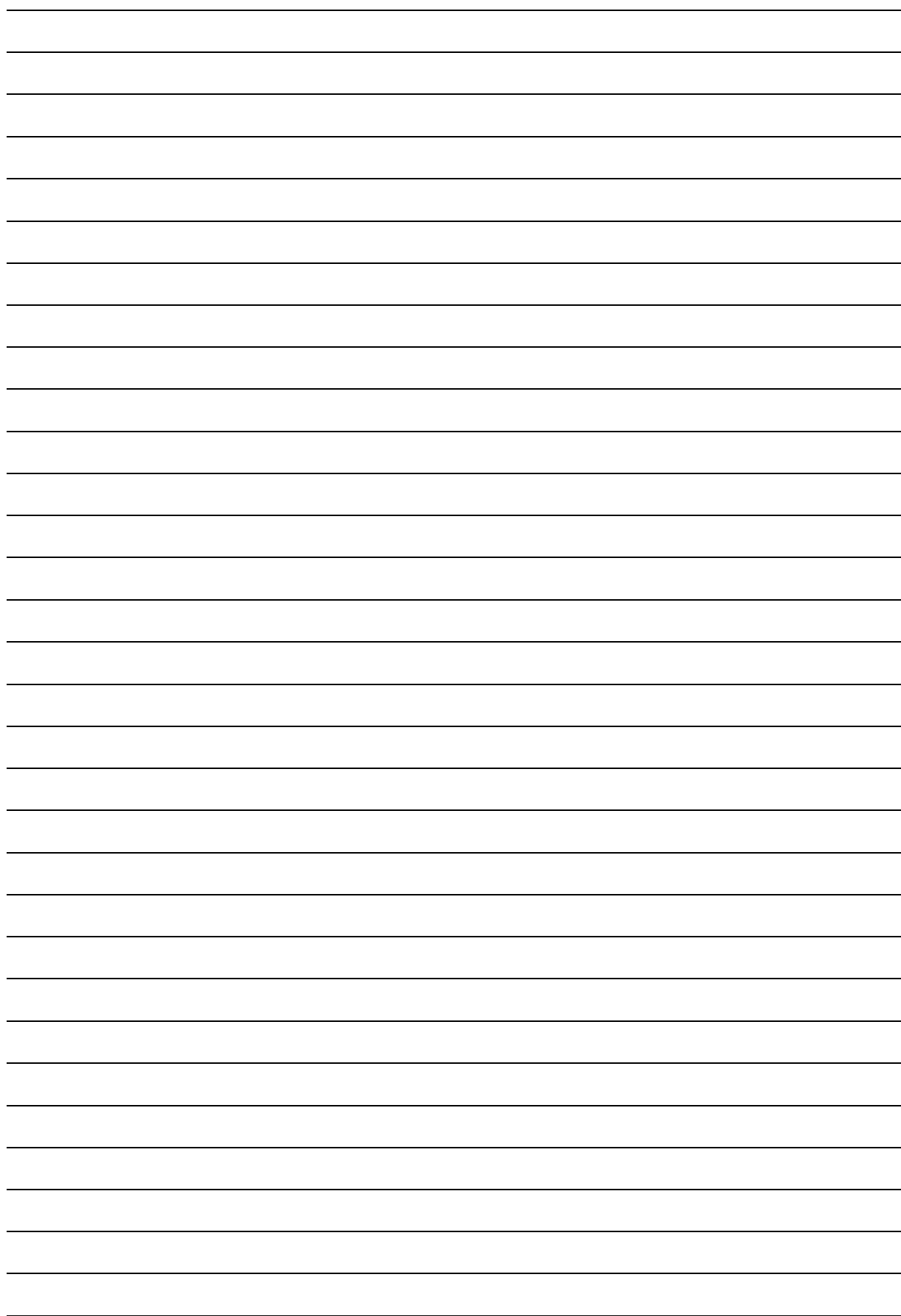
Khalid tells you that he can't really be bothered leaving the house and that when he does he feels scared because everybody is looking at him.

### Question 1

**Outline a formulation regarding Khalid' s presentation. Link risk factors to symptoms and signs of social isolation, anxiety and substance use. (10 marks)**

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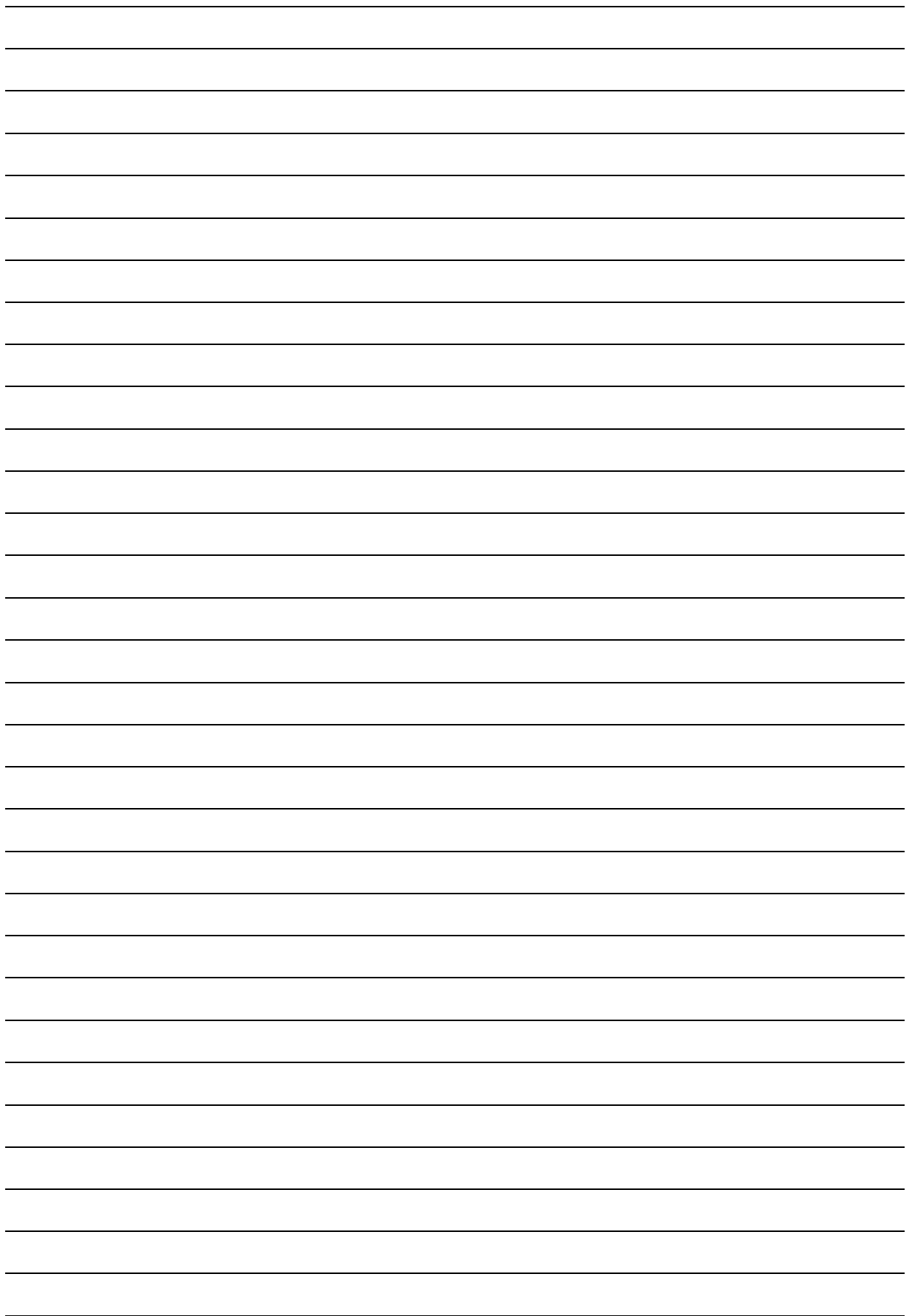


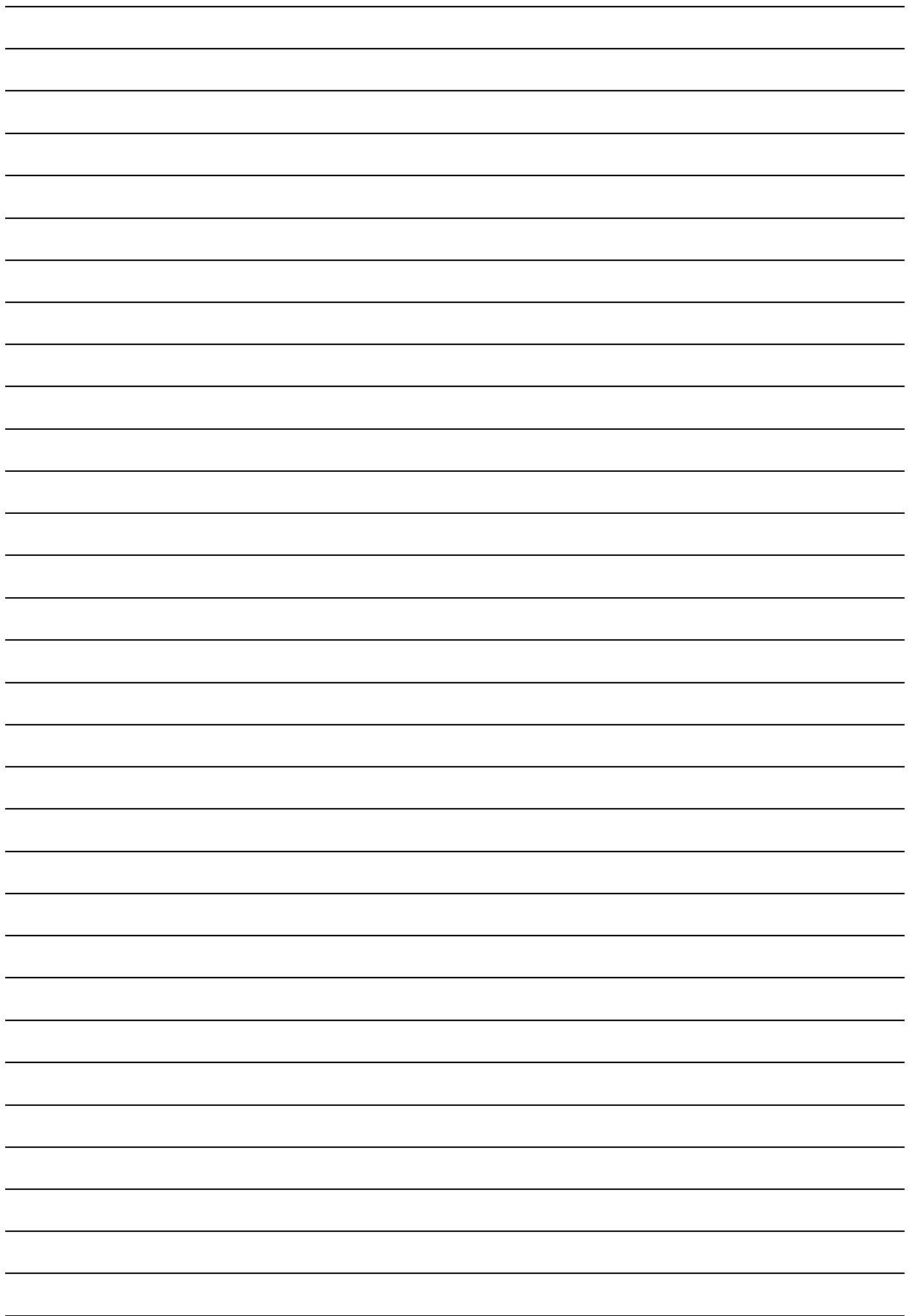
Following your assessment of Khalid you determine that there is no risk to self or others and he does not appear depressed. He is ambivalent about treatment and refuses medication. You see him once a week over a four week period and discover that he is smoking marijuana on a daily basis. The focus of your management is to try and build a therapeutic relationship, to monitor his mental state and provide education about his substance misuse, focusing on a harm minimisation model as Khalid is adamant that he does not wish to stop using marijuana. However he is happy to continue seeing you. During one of your reviews you are joined by Khalid' s stepfather. He is very angry that you have known that Khalid has been smoking marijuana daily and have not told the family. He says that you are not doing enough to help Khalid, that he needs more therapy and that he should have a change of doctor.

## Question 2

**How would you address Khalid' s stepfather' s concerns? (10 marks)**

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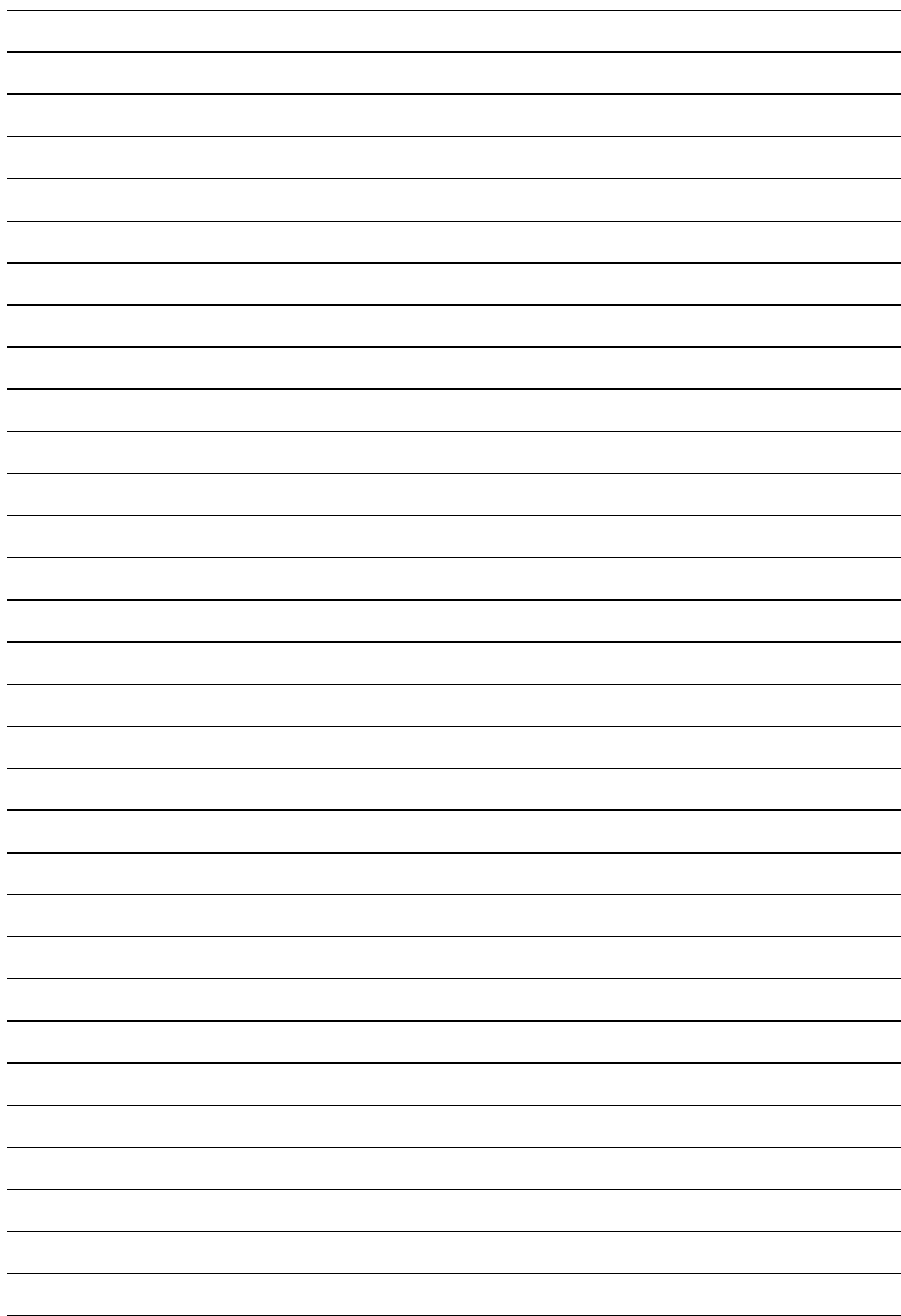


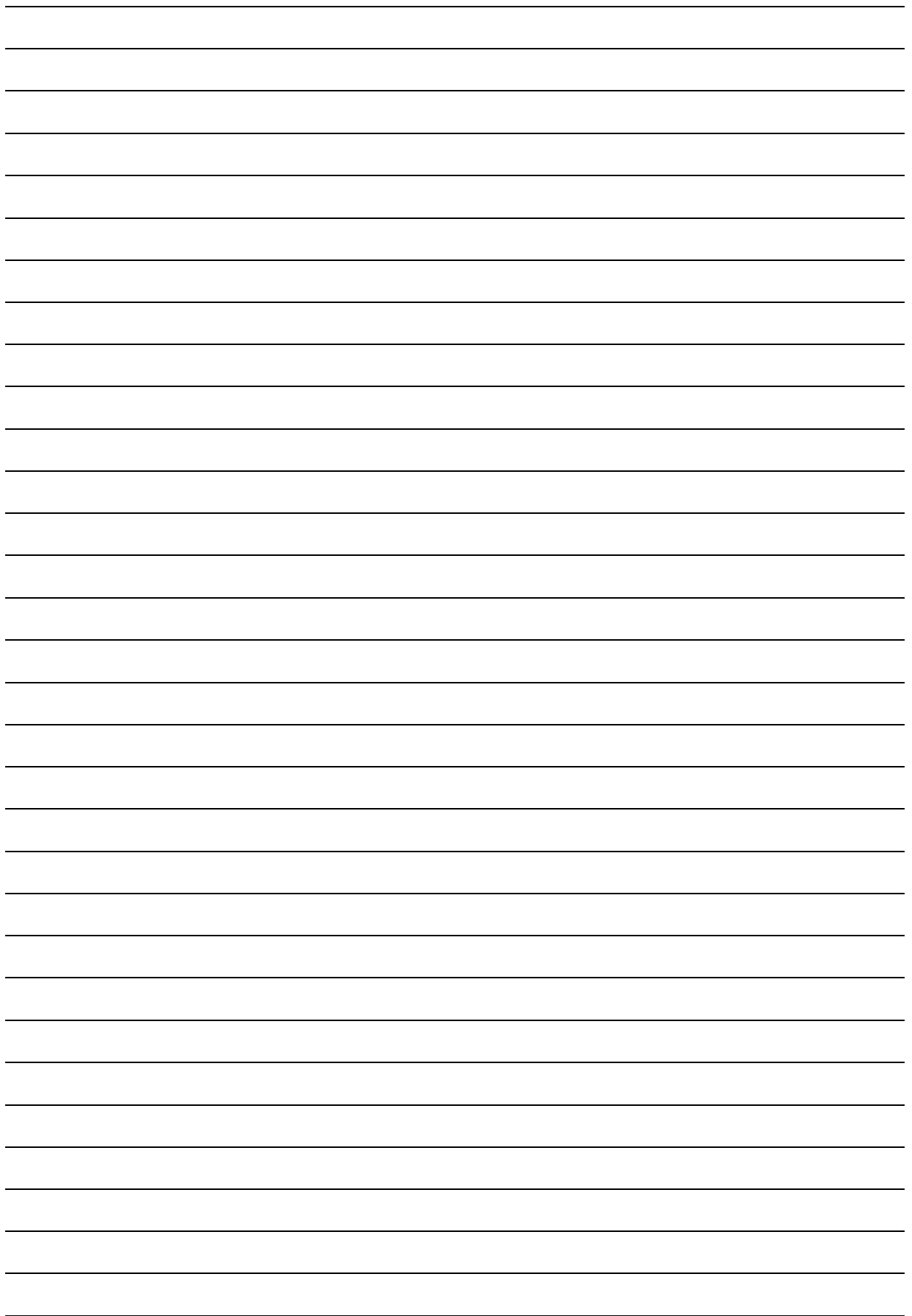
Khalid tells you that now he is working he does not have time to see you anymore.

**Outline your management plan at this point. (5 marks)**

[illegible]







## MODIFIED ESSAY QUESTION 3

CANDIDATE'S NAME:

CANDIDATE'S  
SIGNATURE:

DATE:

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### Modified Essay Question 3: (25 marks)

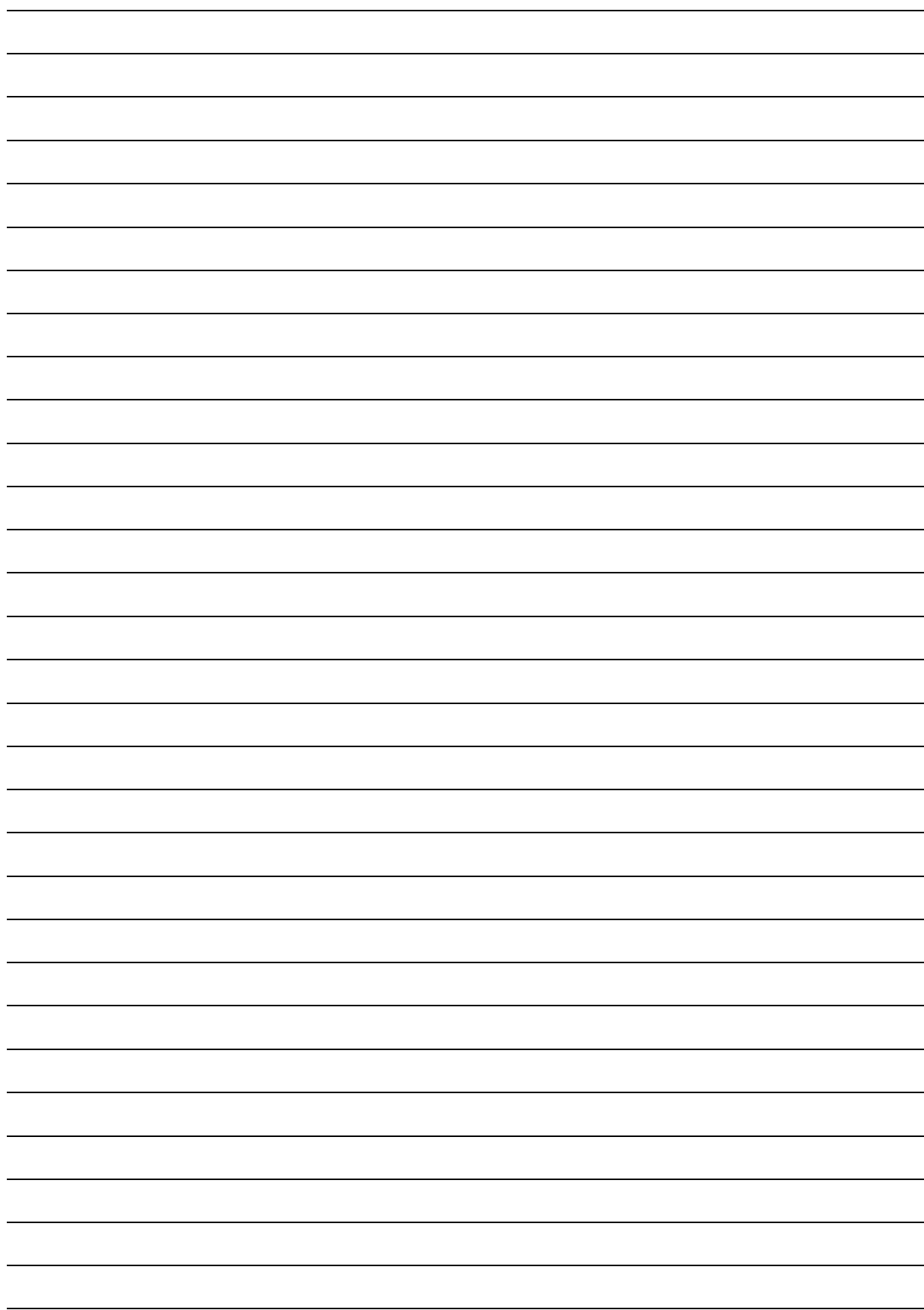
Mr. James, a 60 year old European man, is referred to your consultation-liaison service by a medical team following the consultant's ward round. The referral reads "Please review this man admitted 5 days ago to investigate weight loss (10kg in 3 months). He told one of the night staff that he wants to die. Please assess - ?depression." You see in Mr James' medical file that he and his wife have been seen by the ward social worker. He lives with his wife who is well. He retired early following a redundancy and the couple are financially secure. Their only son moved to live overseas six months ago.

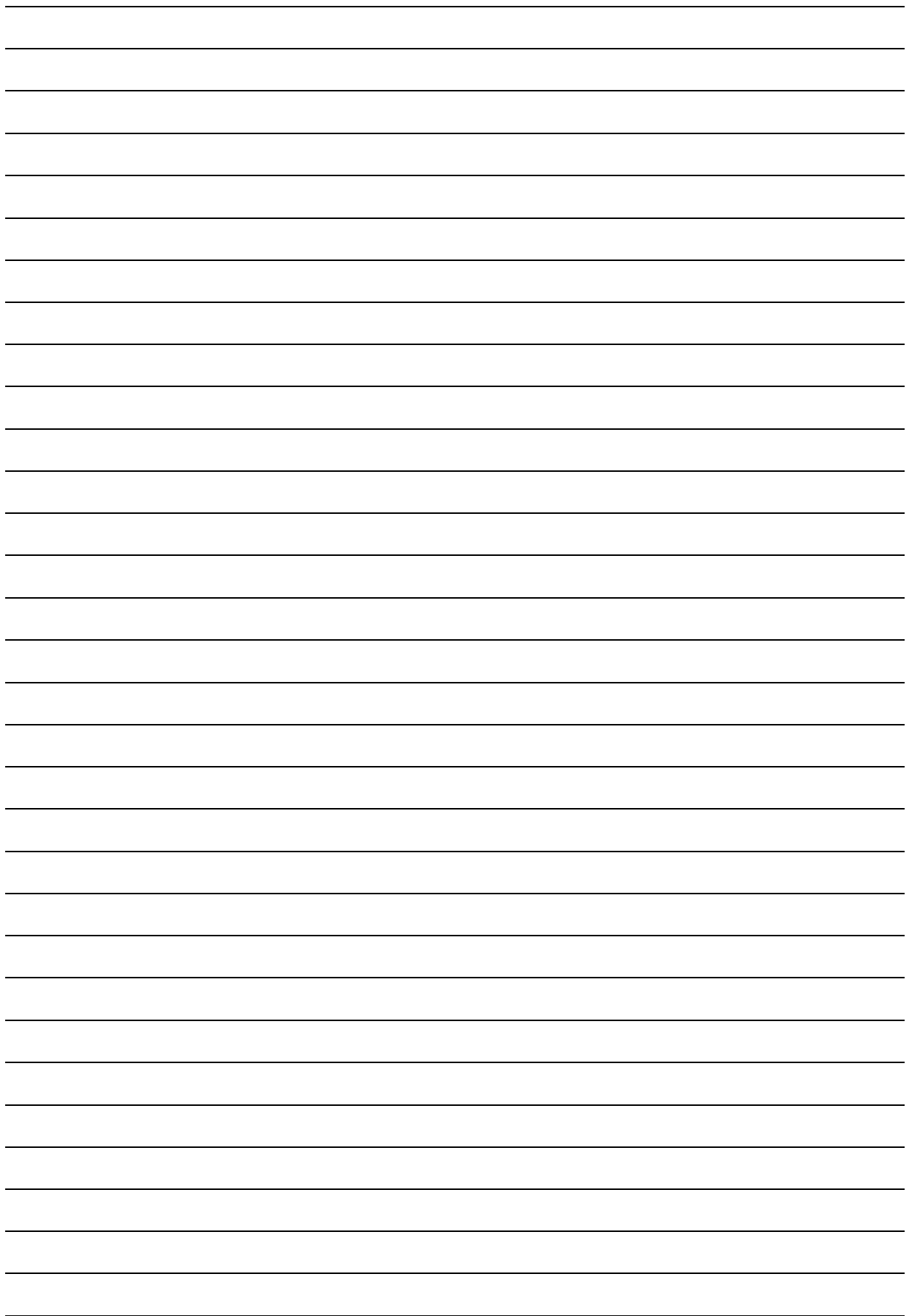
The medical team have recently examined Mr James and completed basic medical investigations. As a first step in your assessment you read his medical file. As a second step you see Mr James and take a full history.

### Question 1

**Outline the other steps involved in your assessment. (10 marks)**

[illegible]

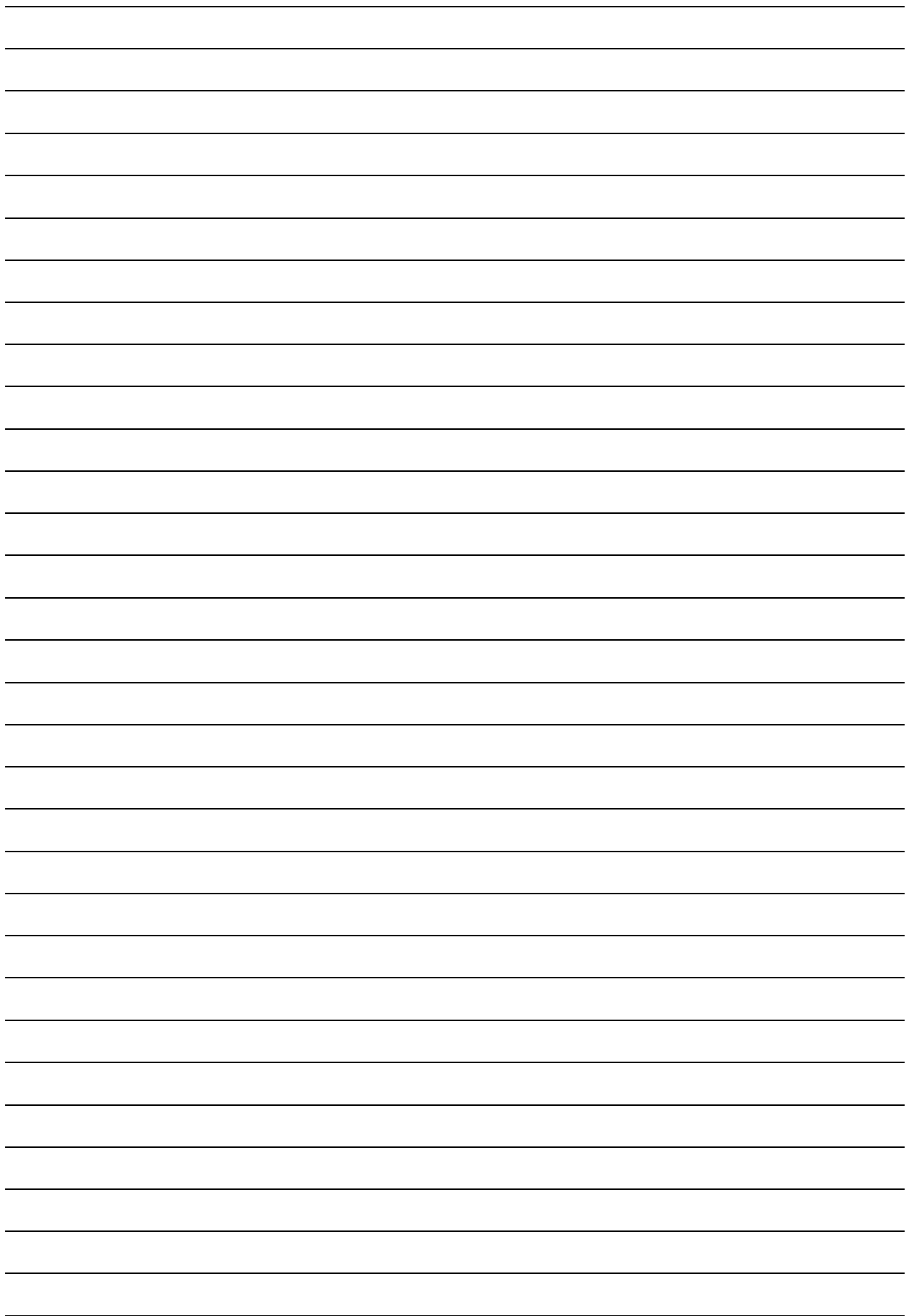




### Question 2

**Which basic medical investigations, besides a full blood count and chest X-Ray, would be the most important for you to check had been completed. (9 marks)**

[illegible]



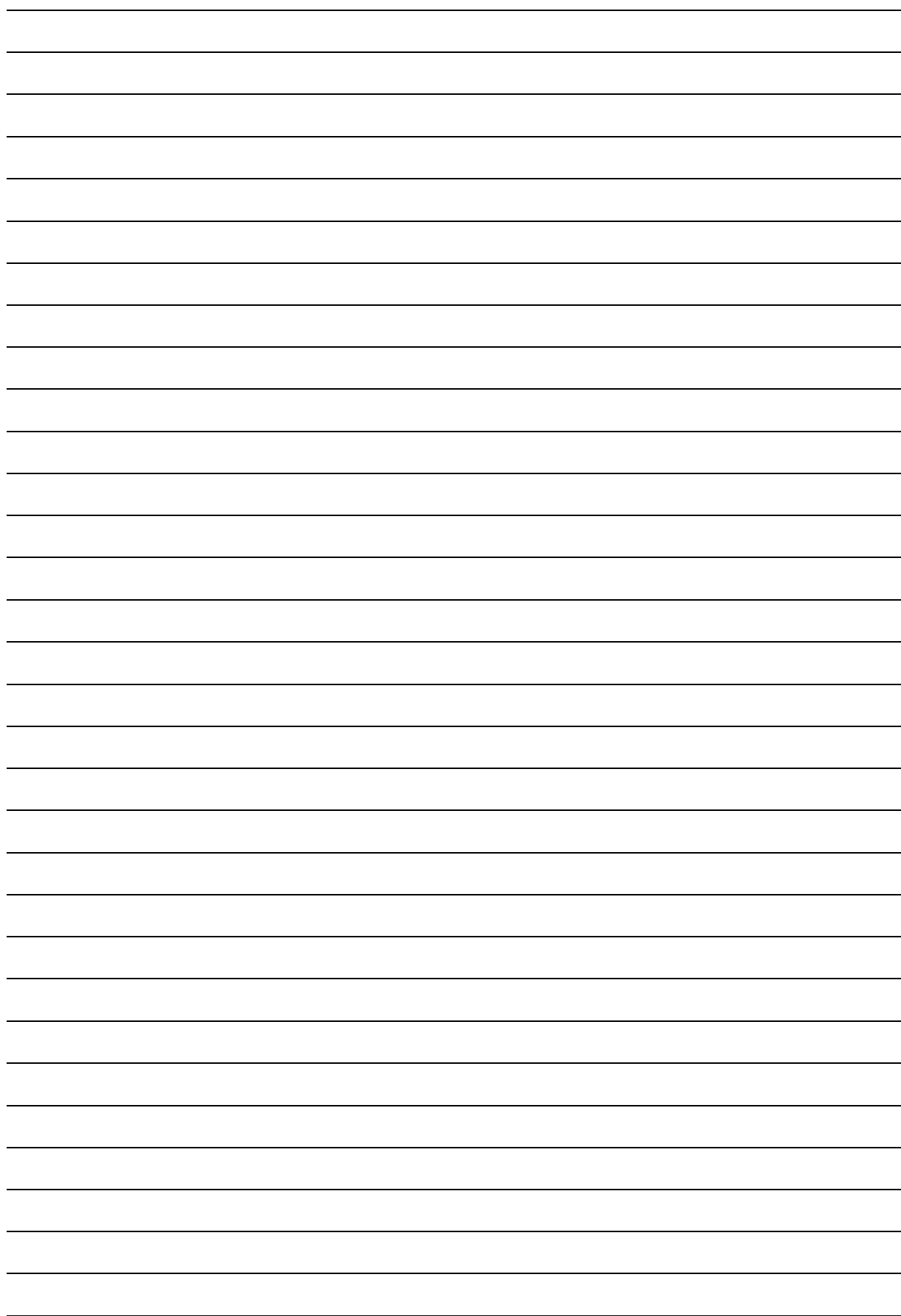


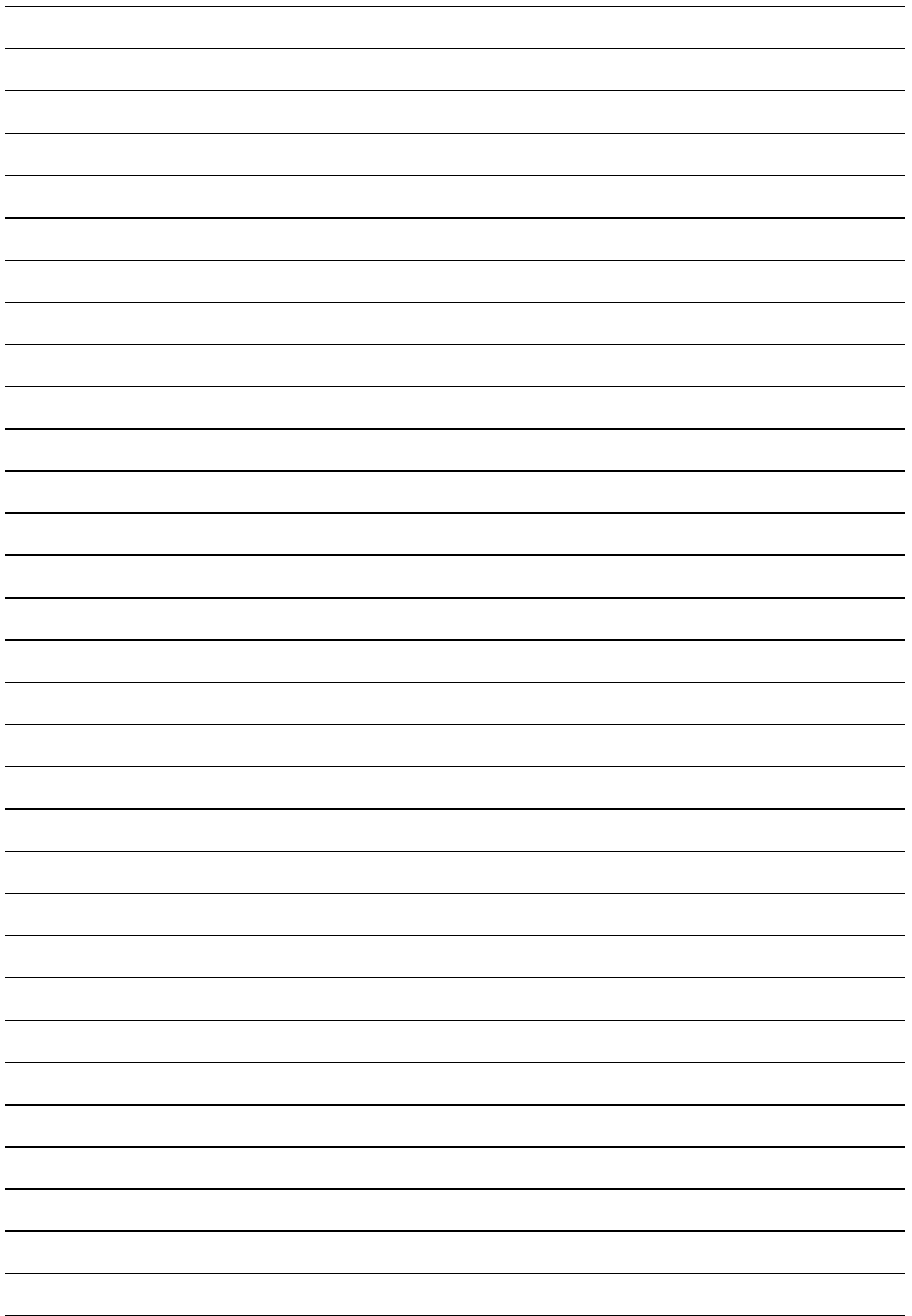
The investigations are normal. You diagnose Mr James as having a moderate Major Depressive Episode. He is at a low risk of self harm.

### Question 3

**Outline the key elements of your management plan. (6 marks)**

[illegible]





## MODIFIED ESSAY QUESTION 4

**CANDIDATE'S NAME:**

**CANDIDATE'S  
SIGNATURE:**

**DATE:**

### **DIRECTIONS:**

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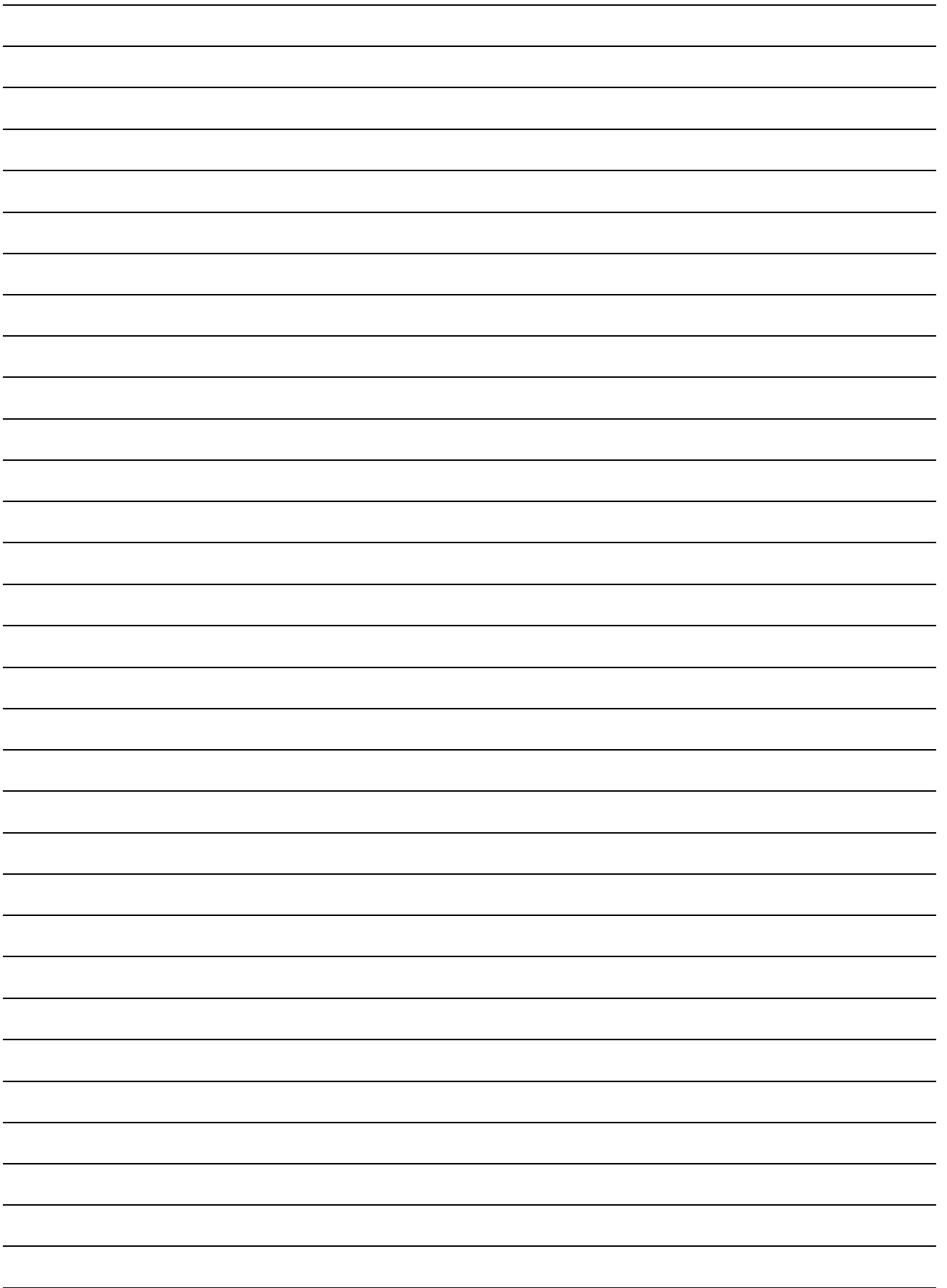
### Modified Essay Question 4: (25 marks)

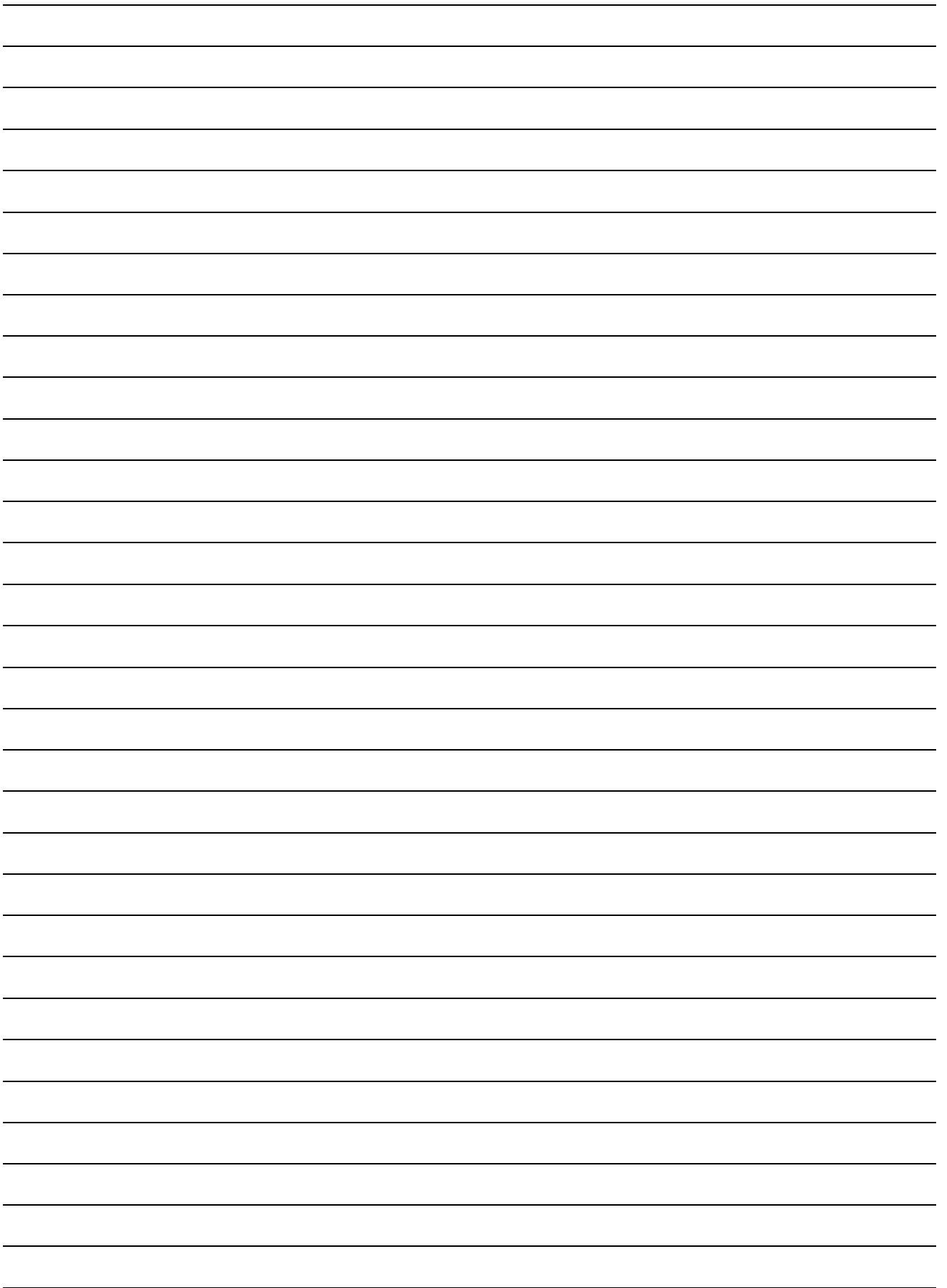
Andy is a 22 year old European man with social phobia who is referred to your out-patient clinic by his new General Practitioner. You discuss the referral with the GP: Andy has had longstanding difficulties in group situations and has been on a sickness benefit all his adult life but the GP is reluctant to continue this without a specialist assessment. As a child Andy was shy and had difficulty mixing with his peers. His attendance at school deteriorated in his teens and he left without obtaining any qualifications. He lives with his mother and younger sister. He refuses to attend any family social events which is a source of conflict between him and his mother. He avoids leaving the house during daylight hours and she is worried that he is becoming a recluse. His mother is also concerned about his drinking - he pressurizes her to bring beer home from the supermarket for him, and this had led to some arguments.

### Question 1

**Outline how you would assess Andy' s problems. (9 marks)**

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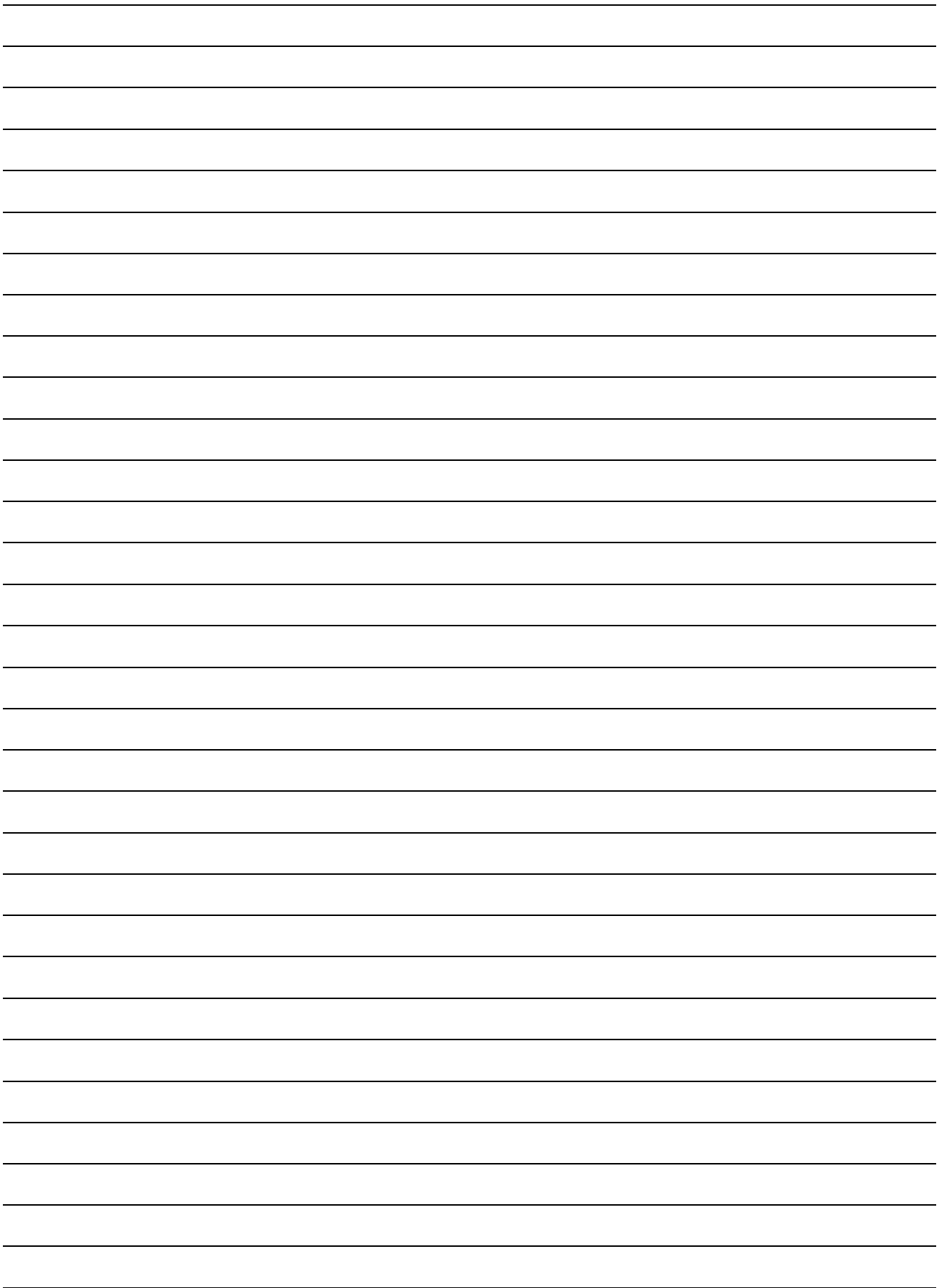
Following your assessment, you feel that the risks of self-harm or to others are low, and that Andy is not depressed or acutely agitated. Andy then tells you that he has used his mother's diazepam a few times and this made him feel much more relaxed. He says that he would like you to prescribe this for him.

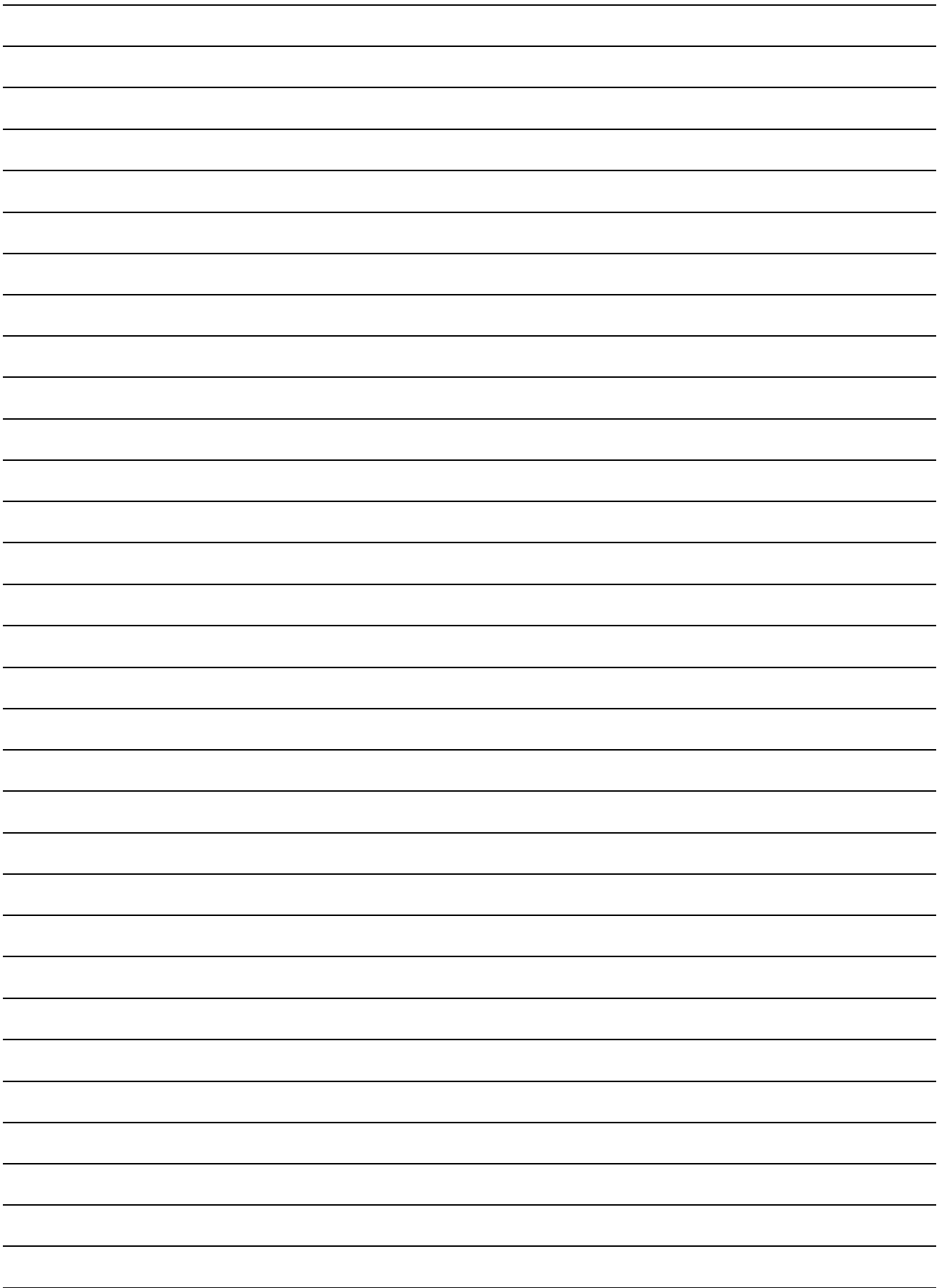
## Question 2

**Discuss the components of your overall treatment plan for Andy, and how you would try to implement this. Comment on how you would respond to his request that you prescribe diazepam. (10 marks)**

[illegible]







### Question 3

**Discuss the features that indicate a poorer prognosis for Andy.**

**(6 marks)**

[illegible]

