PRACTICAL DOSING STRATEGIES IN THE TREATMENT OF SCHIZOPHRENIA

CME QUESTIONS

1. Antipsychotic treatment with first-episode patients:

A. Produces large improvements in positive and negative symptoms

B. Produces large improvements in positive symptoms and in cognitive deficits

C. Produces large improvements in positive and negative symptoms and in cognitive deficits

D. Produces large improvements in positive symptoms but limited improvement in cognitive deficits

2. Which statement about maintenance treatment following an initial episode of psychosis is correct?

A. Haloperidol is as effective as second-generation antipsychotics for maintenance treatment

B. Haloperidol is less effective than second-generation antipsychotics for maintenance treatment

C. Olanzapine has been shown to be more effective than quetiapine for maintenance treatment

D. Quetiapine has been shown to be more effective than ziprasidone for maintenance treatment

3. Very few patients can experience long periods (2 years or more) of symptom remission following treatment for a first episode of psychosis.

A. True B. False

4. Which of the following statements about the variability across individuals regarding the dosing/levels of medication is false?

A. Plasma levels of ziprasidone can be as much as 50% lower if not taken with food

B. Plasma levels of olanzapine and clozapine can be up to twice as high if a patient starts smoking

C. Paliperidone and ziprasidone are least likely to lead to drug-drug interactions due to interfering with drug metabolism by liver enzymes

D. Aripiprazole takes the longest time to reach orally dosed steady state levels, and quetiapine and ziprasidone take the shortest time to reach orally dosed steady state levels

5. Which strategies can help avoid rebound and withdrawal phenomena when switching between antipsychotics with markedly different affinity to the histamine, muscarinic and/or dopamine receptor or agents with markedly different half-lives?

A. Use plateau cross-titration

B. Use transiently adjuvant medications, such as benzodiazepines, sleep aids, etc.

C. Educate patients about potential signs and symptoms of rebound phenomena

D. All of the above

6. Combining antipsychotics with valproate increases antipsychotic efficacy beyond the initial treatment phase.

A. True B. False

7. Data suggest that using the following response measure at two weeks can be a significant predictor of subsequent improvement:

A. 10% reduction in PANSS total score

B. 20% reduction in PANSS total score

C. 30% reduction in PANSS total score

D. 40% reduction in PANSS total score

8. Research has shown that providing medication on an intermittent or targeted basis, meaning only when patients show early signs of relapse, is associated with:

A. Higher rates of relapse

B. Fewer suicide attempts

C. Better patient adherence

D. No difference in relapse rates

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