

Therapeutics Quiz P.Ps

Osteoporosis

(21 Qs)

1) Which of the following drugs that can cause osteoporosis is NOT matched with an appropriate mode of action?

A. Heparin – stimulates osteoclasts and suppresses osteoblast function

B. Thiazolidinediones – inhibit osteoblast differentiation and activate osteoclast differentiation

C. Carbamazepine – decreased functional calcium absorption

D. Lithium – increase PTH secretion which can cause calcium release from the bone

E. Canagliflozin – changes serum or urine calcium, vitamin D, or parathyroid hormone

Answer: E

2) Ca decreases absorption of all of the following except?

A. Bisphosphonate

B. PPI

C. Quinolone

D. Iron

E. Tetracycline

Answer: B

3) Which of the following is NOT appropriate concerning bisphosphonates use in osteoporotic patients?

A. If a patient misses a monthly dose and the next month's dose is less than 6 days away, he can take the missed dose on the morning he remembers

B. Creatinine clearance should be monitored before each dose of zoledronic acid

C. Before intravenous bisphosphonates are use, the patient's serum calcium must be normalized

D. If the patient misses a weekly dose, he can take it the next day

E. The intravenous bisphosphonates products need to be administered by a healthcare provider

Answer: A

4) Which of the following is not an adverse effect of bisphosphonates:

- A. Esophageal ulceration and perforation
- B. Atypical subtrochanteric femoral fractures
- C. Osteonecrosis of the jaw
- D. Hypercalcemia
- E. Peptic ulcer perforation

Answer: D

5) Which of the following is NOT appropriate concerning bisphosphonates in osteoporotic patients?

- A. IV bisphosphonates must be administered by healthcare provider
- B. Must be taken with water in upright position
- C. Creatinine clearance must be monitored
- D. Should delay oral dosing if missed
- E. Before IV bisphosphonates, use calcium level to monitor renutrition

Answer: D?
(I think the Q is not complete)

6) Which of the following is NOT appropriate concerning bisphosphonates in osteoporotic patients?

A. Intravenous bisphosphonates should be administered by qualified healthcare professionals in a clinical setting.

B. Patients should remain upright for at least 30 minutes after taking oral bisphosphonates to prevent esophageal irritation.

C. If a patient misses a monthly dose and the next dose is within 5 days, he should take both doses together to catch up.

D. Serum calcium levels must be checked and corrected before initiating intravenous bisphosphonate therapy.

E. Renal function should be assessed before each dose of zoledronic acid is given.

Answer: C

7) Which of the following is not true about bisphosphonates:

- A. Take Ca supplements at the same time.
- B. 180ml plain water with tablets.
- C. Upright for at least 30 min.
- D. BMD remains for long time after discontinuation.

Answer: A

8) Which of the following is true about bisphosphonates:

A. Effect disappears after discontinuation of the drug

B. You should drink 180 ml of plain water when taking them, being upright for at least 30 minutes

C. If the patient misses a monthly dose more than 8 days, he should wait for the next month

Answer: B

9) Which of the following is not correct about denosumab:

- A. As the drug is discontinued, the effect of therapy dissipates
- B. Hypocalcemia should be normalized before giving the drug
- C. It is indicated for men who are at high risk of fractures treated with androgen deprivation therapy (GnRH agonists) for prostate cancer
- D. It is indicated for women at high risk of fractures who are treated with aromatase inhibitor therapy for breast cancer
- E. It is inferior in effect on BMD compared to weekly alendronate

Answer: E

10) Which of the following is not correct about calcium absorption:

- A. It is reduced with dietary fibers
- B. It may be reduced in smokers
- C. It is reduced in alcoholics
- D. It is reduced in dietary fat
- E. It is reduced by laxatives

Answer: D

11) Which of the following is not correct about vitamin D deficiency:

- A. It may be caused by hepatic and renal dysfunction
- B. It happens in regular sunscreen use
- C. It happens in darkly pigmented skin
- D. It may happen with coadministered bisphosphonates
- E. It may be caused by orlistat and some antiseizure drugs

Answer: D

12) Wrong about healthy style for osteoporosis:

Answer:

Medication is given for postmenopausal women

13) Most common side effect for stopping bisphosphonate:

Answer:

GI bleeding and esophageal erosion

14) Which osteoporosis drug is wrongly matched?

Answer:

Teriparatide causing hypocalcemia

15) Incorrect:

Answer:

Each oral tablet of bisphosphinate should be taken with 100 ml of orange juice

16) Which of the following drug pairs metabolize vitamin D and causes osteoporosis with prolonged use?

Answer:

Carbamazepine and phenytoin

17) Correct option for bisphosphonate?

Answer:

The patient should remain upright for at least 30 minutes after.

18) All of the following used in osteoporosis except:

Answer:

Estrogen and androgen

19) Wrong about both denosumab and bisphosphonates?

Answer:

Effect prolonged after discontinuation.

[Note: Only bisphosphonates have sustained effect (increased BMD) after discontinuation]

20) Mainstay in treatment of osteoporosis with Ca and vitamin D:

Answer:

Bisphosphanate

21) Incorrect:

Answer:

There is sustained effect after stopping denosumab

Schizophrenia

(28 Qs)

1) Which neurotransmitter is believed to be primarily dysregulated in my schizophrenia?

A. Serotonin

B. GABA

C. Dopamine

D. Acetylcholine

Answer: C

2) What is the most common age of onset for schizophrenia?

A. Childhood

B. Adolescence

C. Early adulthood

D. Late adulthood

Answer: C

3) Which of the following is NOT a positive symptom of schizophrenia?

A. Delusions

B. Hallucinations

C. Flat affect

D. Disorganized speech

Answer: C

4) Which class of antipsychotic medications is known for its greater risk of extrapyramidal side effects?

- A. First-generation (typical) antipsychotics
- B. Second-generation (atypical) antipsychotics
- C. Benzodiazepines
- D. Mood stabilizers

Answer: A

5) What is the first-line treatment for acute psychotic episodes in schizophrenia?

- A. Cognitive-behavioral therapy (CBT)
- B. Antidepressants
- C. Antipsychotic medications
- D. Electroconvulsive therapy (ECT)

Answer: C

6) Which medication is commonly used to manage the extrapyramidal side effects of antipsychotics?

A. Lithium

B. Haloperidol

C. Lorazepam

D. Benztropine

Answer: D

7) Which symptom domain of schizophrenia is associated with impaired cognitive function and negative symptoms?

- A. Positive symptoms
- B. Negative symptoms
- C. Cognitive symptoms
- D. Affective symptoms

Answer: C

8) Which of the following drugs can cause severe hypotension?

A. Chlorpromazine

B. Haloperidol

C. Aripiprazole

D. Olanzapine

Answer: A

9) Clozapine, an atypical antipsychotic, is primarily used in which situation?

- A. First-line treatment for acute psychotic episodes
- B. Treatment-resistant schizophrenia
- C. Bipolar disorder
- D. Generalized anxiety disorder

Answer: B

10) Which therapy approach focuses on helping individuals with schizophrenia manage their symptoms and improve functioning in daily life?

- A. Cognitive-behavioral therapy (CBT)
- B. Psychodynamic therapy
- C. Electroconvulsive therapy (ECT)
- D. Transcranial magnetic stimulation (TMS)

Answer: A

11) What are the key features of schizophrenia?

- A. Disorganized and bizarre thoughts
- B. Delusions and hallucinations
- C. Inappropriate affect and impaired psychosocial functioning
- D. All of the above

Answer: D

12) Which neurotransmitter dysfunctions are involved in schizophrenia?

- A. Dopamine
- B. Serotonin
- C. Glutamate
- D. All of the above

Answer: D

13) What is the recommended approach for selecting an antipsychotic drug for a patient with schizophrenia?

- A. Focus on the beneficial effects
- B. Consider the adverse effect profiles
- C. Use combination regimens for all patients
- D. Use monotherapies with high risk of adverse effects

Answer: B

14) What is the role of psychosocial rehabilitation programs in the treatment of schizophrenia?

- A. They are not effective and should be avoided
- B. They should be used as the sole treatment option
- C. They should be used in combination with antipsychotic treatment
- D. They are only necessary during the initial psychotic episode

Answer: C

15) What is the recommended duration of maintenance antipsychotic treatment for most patients with schizophrenia?

- A. 1-2 years
- B. 5-10 years
- C. Lifelong treatment
- D. No maintenance treatment is needed

Answer: C

16) Patients with schizophrenia who continue to abuse alcohol or drugs usually have:

- A. A better response to medications
- B. A poor response to medications and a poor prognosis
- C. Reduced risk of relapse
- D. No impact on their treatment outcomes

Answer: B

17) Which of the following medical conditions can cause psychosis?

- A. HIV (AIDS)
- B. Alzheimer's disease
- C. Parkinson's disease
- D. All of the above

Answer: D

18) What are the desired outcomes of therapy for schizophrenia?

- A. Avoiding adverse effects
- B. Increasing adaptive functioning
- C. Preventing relapse
- D. All of the above

Answer: D

19) Which antipsychotic medications belong to the first-generation antipsychotics (FGAs)?

A. Chlorpromazine

B. Haloperidol

C. Thiothixine

D. All of the above

Answer: D

20) How do second-generation antipsychotics (SGAs) differ from FGAs in terms of their mechanism of action?

- A. SGAs block dopaminergic neurotransmission
- B. SGAs block D2 dopamine receptors as well as 5-HT_{2A} serotonin receptors
- C. SGAs have a higher risk of neurologic adverse effects
- D. SGAs are not effective in treating schizophrenia

Answer: B

21) What is the major advantage of SGAs over FGAs?

- A. Lower risk of neurologic adverse effects, particularly motor effects
- B. Higher efficacy in treating positive symptoms
- C. Lower risk of metabolic adverse effects
- D. Faster onset of action

Answer: A

22) What are the goals during the initial treatment of an acute psychotic episode in patients with schizophrenia?

A. Reduction of symptoms and normalization of sleep and eating patterns

B. Complete elimination of symptoms

Answer: A

23) Case describing schizophrenia, after treatment begins patient develops severe akathisia. drug most likely to have caused this?

A. Clozapine

B. Haloperidol

C. Risperidone

Answer: B

24) Which of the following substances does not cause psychosis?

A. Cannabis

B. Cocaine

C. Amphetamine

D. LSD

E. Nicotine

Answer: E

25) All of the following are side effects of clozapine except:

A. Weight loss

B. Sedation

C. Seizures

D. Agranulocytosis

Answer: A

26) What is the term for the loss of interest, motivation, and emotional responsiveness often seen in schizophrenia?

- A. Apathy
- B. Agitation
- C. Mania
- D. Euphoria

Answer: A

27) Incorrect about clozapine

Answer:

It has a rapid onset of action

28) Incorrect about injectable antipsychotics:

Answer:

Less adverse effects and mild

Depression

(12 Qs)

1) All of the following drugs can cause depression except:

A. Methyldopa

B. Isotretinoin

C. Triptans

D. Carbamazepine

E. Steroids

Answer: D

2) Which of the following substances does not cause psychosis?

A. Venlafaxine

B. Trazodone

C. Bupropion

D. Mirtazapine

E. Phenzelzine

Answer: B

3) Which class of medications is considered first-line treatment for major depression?

- A. Selective serotonin reuptake inhibitors (SSRIs)
- B. Benzodiazepines
- C. Tricyclic antidepressants (TCAs)
- D. Monoamine oxidase inhibitors (MAOIs)

Answer: A

4) What is the recommended duration of antidepressant treatment for a first episode of major depression?

A. 2 weeks

B. 4 weeks

C. 6 months

D. 1 year

Answer: C

5) All true except:

A. Benzodiazepines => Active metabolite

B. Fluoxetine => long half life

C. Retentioic acid with G6PD

Answer: C

6) Wrong about SSRI:

- A. SSRIs are usually the antidepressants of first-choice in the elderly.
- B. Adverse effects appear after 3 weeks

Answer: B

7) Serotonin syndrome caused by interact SSRI with :

Answer:

Linezolid

8) A patient with depression who takes MAO inhibitor. Which food he should not take:

Answer:

Fermented cheese

9) Not aggravating depressive symptoms:

Answer:

Valproic acid

10) Used in depression with anxiety:

Answer:

Fluxetine

11) Mismatch antidepressant with side effect:

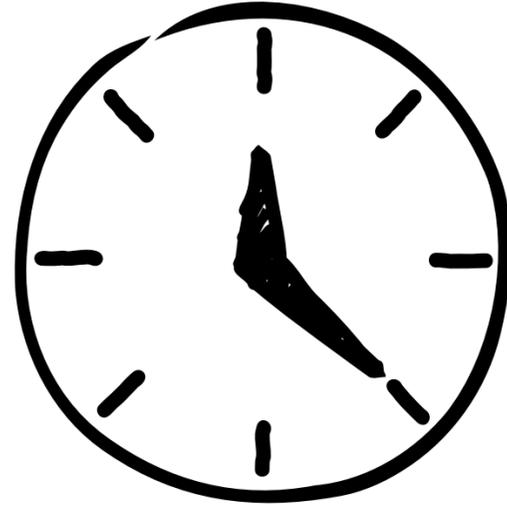
Answer:

Bupropion and salivation.

12) Incorrect about depression:

Answer:

Shows 90% relief of symptoms on antidepressants and only 10% with placebo



سَمِعْتُ النَّبِيَّ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ يَقُولُ: إِنَّ فِي اللَّيْلِ لَسَاعَةً لَا يُؤَافِقُهَا رَجُلٌ مُسْلِمٌ، يَسْأَلُ اللَّهَ خَيْرًا مِنْ أَمْرِ الدُّنْيَا وَالْآخِرَةِ، إِلَّا أَعْطَاهُ إِيَّاهُ، وَذَلِكَ كُلُّ لَيْلَةٍ.
الراوي : جابر بن عبدالله | المحدث : مسلم | المصدر : صحيح مسلم

**لا تنسوننا من صالح
دعائكم**