## Database of questions for the Medical Final Examination (LEK)

## Part 2

## **Psychiatry**

## Modified 15.12.2023

- No. 1. Which of the following statements concerning selected criteria of eating disorders is true:
  - **A.** pica is persistent consumption of non-food items for at least half a year, both in children and adults.
  - **B.** food regurgitation in chewing disorders is caused by the patient's general medical condition e.g. hypertrophic pyloric stenosis.
  - **C.** an avoidant/restrictive food intake disorder is a result of, among others, the organoleptic attributes of food and a fear of undesirable consequences of eating.
  - **D.** the risk of mortality in anorexia nervosa is low compared to other mental disorders.
  - E. binge eating disorders and bulimia nervosa are the same diagnoses in DSM5.
- No. 2. Which of the following statements is <u>false</u> about separation anxiety in childhood:
  - 1) separation anxiety is often concomitant with developmental and social anxiety disorders;
  - 2) sleep problems are an important diagnostic criterion for separation anxiety;
  - 3) separation anxiety is diagnosed at the age of >6;
  - 4) the time criterion for separation anxiety is at least 4 weeks;
  - 5) separation anxiety is not accompanied by somatic symptoms.

The correct answer is:

A. only 1. B. 2,4. C. only 5. D. 1,3,5. E. all the above

**No. 3.** Which parasomnia meets the following ICD-10 criteria: "most common in children, it is a disorder of consciousness combining sleep and wakefulness and characterised by walking, typically in the first of the three parts of night sleep in NREM Stage 4; upon awakening there is typically no recall of the event; the treatment involves e.g. administration of impramine:

- A. sleep behaviour disorder.
- B. somnambulism.
- C. nightmares.
- D. sleep paralysis.
- **E.** rhythmic movement disorder.

No. 4. Which of the following statements is false about the treatment of ADHD:

- A. in Poland there are two drugs registered for use in the treatment of ADHD.
- **B.** an effective drug in the treatment of ADHD has a psychostimulant activity.
- C. pharmacotherapy is the first-line treatment of ADHD.
- **D.** atomoxetine is of use in the treatment of ADHD with tics.
- E. it is recommended that methylphenidate is discontinued at least once a year.

**No. 5.** In differential diagnosis of bipolar disorder against ADHD in schoolchildren the main challenge is that they share manic-like symptoms. Which of the following symptoms occur in both the conditions:

- 1) engagement in pleasurable activities such as shopping;
- 2) inappropriate behaviour;
- 3) an urge to talk, talkativeness;
- 4) grandiosity;
- 5) inattention.

The correct answer is:

**A.** only 1. **B.** only 4. **C.** 1,4. **D.** 2,3,5. **E.** all the above.

**No. 6.** Which of the following statements is false about mild intellectual disability (IQ=69-50) when differentiated with more severe levels:

- **A.** the correlation of intellectual ability of parents and children in the population with IQ=69-50 is close to zero.
- B. in the population with IQ=69-50 the symptoms of CNS damage are rare.
- **C.** in the population with IQ=69-50 the aetiology is multi-factorial.
- **D.** 95% of cases in the population with IQ=69-50 are from lower socio-economic regions.
- **E.** People with mild intellectual disability are the most populous group from all people with intellectual disability.

**No. 7.** A 35-year-old male has been treated psychiatrically since he was 7. In the first grade he put a wooden gun to other children's bodies and said: "I'm killing you." He ignored reprimands. He spend his time making toy gun models. He recited long book passages from memory. He was clumsy, often jumped around, waved his hands and made duck-like sounds, also in public places. He ignored remarks and reprimands. At university he pointed out mistakes to lecturers. In group therapy he laughed at other participants' weaknesses and remained insensitive to their emotions. According to ICD-10 and DSM 5 the patient should be diagnosed with:

- A. Rett syndrome.
- **B.** autism spectrum disorders requiring support (Asperger syndrome).
- **C.** childhood autism.
- D. behaviour disorders.
- E. childhood disintegrative disorder.

No. 8. Which of the following statements is <u>false</u> about the epidemiology of suicidal behaviour:

- A. approximately <sup>3</sup>/<sub>4</sub> of all suicides take place in underdeveloped and developing countries.
- **B.** worldwide, the suicide mortality rate is on average two times higher in men than in women. In Poland, it is about six times higher.
- **C.** 90% of people who commit suicide suffer from mental disorders.
- **D.** autopsies did not reveal a correlation between suicidal behaviour and depression.
- E. failed suicide attempts are more common in women than in men, especially in the young population.

**No. 9.** A GP should know the impact of suicide preparatory behaviour on suicide risk assessment. Which of the following is not a suicide preparatory behaviour:

- A. accumulation of drugs.
- **B.** psychoactive substance abuse.
- C. reading about suicide methods or looking for such information online.
- **D.** writing a suicide note.
- E. giving away valuables, settling financial liabilities.

**No. 10.** "It is explicit, its contents might be consciously retrieved, it concerns objects, their properties or events." The above description is a description of:

- A. non-declarative memory
- B. short-term memory.
- C. declarative memory.
- **D.** procedural memory.
- **E.** working memory.

**No. 11.** A 50-year-old woman who has been treated for depression with sertraline for almost two years complains of weakness, cold intolerance, constipation and weight gain, all of which have been present for about 6 months. Physical examination revealed dry, rough skin, bradycardia, hypothermia and hand and foot oedema. Which of the following tests will the most useful in establishing the diagnosis:

A. liver function tests.

B. a serum electrolytes test.

C. measurement of oestrogen levels in the serum.

**D.** measurement of sertraline levels in the serum.

E. measurement of thyrotropic hormone levels in the serum.

**No. 12.** A 35-year-old male suffering from bipolar disorder with a previous mixed episode presents for a follow-up. In the past two years the patient required treatment with multiple drugs as his mental state was unstable. With the current treatment the patient reports a stable mood, but complains of tremor, mostly hand tremor. Which of the following drugs is the most probable cause of the patient's tremor?

- A. carbamazepine.
- **B.** gabapentin.
- C. lamotrigine.
- **D.** lithium carbonate.
- E. topiramate.

**No. 13.** A 19-year-old female student is brought to a clinic by her flatmate, who has been worried about her unusual behaviour for 6 months. In the last month the patient has kept describing how other people's thoughts entered her mind. In addition, her grades have become worse and she is not as talkative a she used to be. Her flatmate reports that in conversation she often digresses and it is difficult to understand what she means. On examination the patient says that a TV reporter told her that the government had a special task for her and that she should listen to the radio for further instructions. Which of the following conditions is the most likely cause of her symptoms?

A. acute stress disorder.

- B. delusional disorder.
- C. schizoaffective disorder.
- D. schizophrenia.
- E. schizotypal disorder.

**No. 14.** A 37-year-old male presents to the doctor after a nervous breakdown. The patient reports that after a recent bankruptcy, loss of house and business he fell into deep depression. He started hearing voices telling him he was useless and should kill himself. The patient claims that the symptoms resolved after a week. He has never had similar episodes before and there are no mental disorders in his medical history. On physical examination no abnormalities are detected and laboratory tests are within normal limits. The correct diagnosis is:

- A. borderline personality disorder.
- B. acute and transient psychotic disorder.
- C. major depressive episode with psychotic symptoms.
- D. schizophrenia.
- E. schizophrenic disorder.

**No. 15.** A 28-year-old male presents to the doctor with severe anxiety, fear and general muscle pain, all of which have been bothering him for three days. He also reports sleeplessness for two days. On physical examination pupil dilation, lacrimation, increased sweating and piloerection are noted. The discontinuation of which of the following substances might have caused the symptoms?

- A. cocaine.
- **B.** inhalants.
- C. methamphetamine.
- **D.** modafinil.
- E. opioids.

**No. 16.** A 48-year-old male presents to the doctor for a yearly check-up. The patient has been smoking a package a day for 20 years and claims he wants to quit. He has tried several times, but each time he experienced lowered mood, difficulty sleeping, fear, anxiety and increased appetite. The patient reports that the symptoms were so strong that they made normal functioning at work impossible. Which of the following therapeutic options is the most appropriate one to help the patient quit smoking?

- A. alprazolam.
- **B.** diazepam.
- C. nicotine patches.
- D. nicotine acid.
- E. varenicline.

**No. 17.** A 55-year-old female presents to the doctor as she has been feeling a compulsion to repeat various activities and has become tired of wasting time. The patient reports that during the day she repeatedly checks if she has locked the door to her house, washes her hands a few times an hour and every morning she checks three times if all the appliances have been turned off. The patient has a history of second-degree atrioventricular block. Which of the following drugs will be the best therapeutic option for the patient?

- A. sertraline.
- B. clomipramine.
- **C.** clonazepam.
- D. methylphenidate.
- E. quetiapine.

**No. 18.** A 20-year-old female presents to a health centre as she has been experiencing symptoms of depression for three months (since she was raped on a date during a party). The patient admits that she was under the influence of alcohol when it happened and does not remember much, but she was ashamed when she woke up at the scene and realized what had happened. At that time she did not seek medical assistance. She claims she has not told her friends about it, but has kept attending classes and working. She says she constantly feels sad and anxious, has become tearful and withdrawn and has sleep problems because of terrible nightmares. Which of the following is the most likely diagnosis in the case of the patient?

A. acute stress disorder.

- B. unspecified adjustment disorder.
- C. generalized anxiety disorder.
- **D.** major depressive disorder.
- E. PTSD.

**No. 19.** A 42-year-old male is referred to the doctor for mental state assessment. The patient reports that has been afraid of criticism and rejection for a long time. He experiences a sense of inadequacy and refuses to take up new activities for fear that he might feel embarrassed. Despite a few opportunities for promotion, the patient has held the same position for 14 years. He is single and has had only one romantic relationship, which only lasted a few weeks. The patient has few friends apart from the ones he met at a model-making club. Which personality disorder is the most likely in this case?

- A. avoidant personality disorder.
- **B.** dependent personality disorder.
- C. paranoid personality disorder.
- D. schizoid personality disorder.
- E. schizotypal personality disorder.

**No. 20.** A 23-year-old male presents to the doctor with a pain in the right arm. The nurse present during the examination reports that the patient was irritated and unwilling to answer most preliminary questions. He also refused to put on the hospital gown that he was given. On examination he is initially charming and talkative. When he is assured that the information he is giving will not be passed on to his probation officer, he admits to having taken part in a fistfight. He is proud to announce that the other participant of the fight is in a much worse condition. Which of the following conditions is the patient most likely to suffer from:

- A. antisocial personality disorder.
- **B.** bipolar disorder with a previous hypomanic episode.
- C. behavioural disorder.
- **D.** oppositional defiant disorder.
- E. paranoid personality disorder.

**No. 21.** A 46-year-old male is brought to A&E in an ambulance as he has been experiencing visual hallucinations for 4 hours. His wife reports that for the past two days he has had diarrhoea and has been agitated and disorientated. Two weeks ago he was sacked due to his frequent absences. He cannot find a new job and has been asking his friends for money. The patient has been drinking half a litre of whisky a day for 25 years. His body temperature is 38.5°C, his pulse is 126/min and his blood pressure is 162/102 mm Hg. What's the best course of action in the case of this patient?

- **A.** admission to hospital with the aim of monitoring his condition and putting under the supervision of a social-care institution.
- **B.** discharge and referral to an outpatient alcohol rehab.
- C. intramuscular administration of haloperidol and discharge.
- **D.** IV infusion of ethyl alcohol and discharge.
- E. oral administration of diazepam and admission to hospital.

**No. 22.** A 25-year-old woman is brought to A&E in an ambulance after she was raped and assaulted by two burglars. Her neighbour, who witnessed the whole incident, called the police. The patient is fully alert and oriented to person, place and time. However, she has no recall of the incident and its details. This is most probably caused by:

- A. depersonalization/derealization.
- B. dissociative amnesia.
- C. dissociative fugue.
- **D.** traumatic brain injury.
- E. loss of voluntary memory.

**No. 23.** A 26-year-old male with a history of tics (eye blinking and snorting) presents to the doctor as he is worried by their frequency over the last six months. The symptoms began at the age of 12 (blinking) and 16 (snorting). Initially, psychotherapy and exercise reduced their frequency. Currently, however, the episodes of tics occur many times a day, which causes the patient to feel embarrassed. As a result, his work productivity has been reduced and he has become unwilling to socialize. Which of the following is the most appropriate form of pharmacotherapy for this patient?

- A. carbamazepine.
- B. fluvoxamine.
- C. methylphenidate.
- **D.** risperidone.
- E. venlafaxine.

**No. 24.** A 19-year-old female student presents to the doctor to have lab tests performed as she has been purging a lot over the last semester. The patient looks well-developed and well-nourished. On physical examination a slight enlargement of the parotid salivary glands is noticed. Which of these tests should be performed in this case?

- A. fasting blood glucose.
- **B.** serum amylase levels.
- C. serum electrolyte levels.
- D. serum liver enzyme levels.
- E. serum TSH levels.

**No. 25.** A 5-year-old boy is brought to the doctor by his mother as she has been worried about his behaviour for a couple of months. The patient's mother reports that at night he occasionally seems very scared, sits on his bed, crying and shouting something unintelligibly. She says that during such incidents he is very difficult to calm down, shakes violently, sweats excessively and breathes fast. After 10-15 minutes he finally calms down and falls asleep. Which of these questions should be asked to confirm the diagnosis of night terrors in this patient?

- A. Are there any upper and lower limb tremors during sleep?
- B. Does the patient have nightmares?
- C. Does the patient go to bed late?
- D. Does the patient watch violent films?
- E. Does the patient wet his bed?

**No. 26.** A 26-year-old male presented to his GP with a recurrent cough. The doctor ordered blood tests and a chest X-ray. When the patient entered the examination room, his heart began to pound, he became sweaty and his muscles tensed. When he was sitting in a blood-draw chair and had a tourniquet put around his arm, his symptoms became more severe. His breaths became short, he began to hyperventilate and felt tingling in the hands, feet and around the mouth. When the nurse produced a needle, the patient fainted. He came round once an ammonia capsule was broken under his nose. He apologised for his behaviour and said he always behaved like that when he saw a needle. The situation is clinically closest to:

- A. agoraphobia.
- B. generalized anxiety disorder.
- C. panic attacks.
- D. a social phobia.
- E. a specific phobia.

No. 27. Which delusions are not present in depression?

- A. delusions of impact.
- **B.** delusions of sin.
- C. delusions of guilt.
- D. nihilistic delusions.
- E. delusions of low self-worth.

**No. 28.** A 26-year-old female medicine student presents to a psychiatric clinic. She complains of lowered mood and a strong sense of fear and anxiety. She ascribes her mental state to her current professional situation. She has recently found a job in customer service of a cinema, but has difficulty forming relationships with others and has a fear of going to work. She is afraid of criticism. She has never been in a romantic relationship. She would like to, but is afraid of rejection. The clinical picture indicates:

- A. dependent personality disorder.
- B. schizoid personality disorder.
- **C.** avoidant personality disorder.
- D. paranoid personality disorder.
- E. narcissistic personality disorder.

**No. 29.** A patient presents to a psychiatrist with a referral from his GP. He complains of a lowered mood, problems with appetite, sleeplessness and excessive worry. He connects his symptoms with losing his job and breaking up with his partner, both of which happened around a month before. Which presumptive diagnosis is the most accurate in this case?

A. a moderate depressive episode.

**B.** bipolar disorder.

C. mixed anxiety-depressive disorder.

**D.** adjustment disorder.

**E.** schizoaffective disorder.

**No. 30.** "My family is in danger. They are following me. In my flat there are cameras and my phone is bugged." The above statement might indicate the presence of:

A. paranoid delusions.

B. auditory hallucinations.

C. mental hallucinations.

**D.** oneiric delusions.

E. nihilistic delusions.

No. 31. An episode of mania is diagnosed when the symptoms last for at least:

A. 3 days.

**B.**5 days.

**C.**7 days.

**D.** 14 days.

E. 30 days.

**No. 32.** Which article of the Law on Protection of Mental Health regulates admissions to a mental hospital with the patient's consent:

A. Article 22.
B. Article 23.
C. Article 24.
D. Article 25.
E. Article 26.

**No. 33.** "A person whose behaviour indicates that they are a threat to their own life or to the life or health of other persons due to mental disorders, but there are doubts as to whether the person is mentally ill, might be admitted to a mental hospital without the consent required in Article 22 of the Law on Protection of Mental Health." Which article of the aforementioned law does the above passage come from?

A. Article 22 point 2.

- **B.** Article 23.
- C. Article 24.
- D. Article 28.
- E. Article 29.

**No. 34.** A person with mental disorders whose behaviour disturbs or prevents the functioning of a mental-care or social-care institution might be subject to direct coercive measures in the form of:

A. immobilization or seclusion.

**B.** immobilization or forced drug administration.

**C.** immobilization or forced treatment.

**D.** forced drug administration or holding.

E. belt or restraint use.

**No. 35.** Involuntary admission to a mental hospital in accordance with the Law on Protection of Mental Health should be reported to a guardianship court within:

- A. within 12 hours.
- **B.** within 24 hours.
- C. within 48 hours.
- D. within 72 hours.
- E. before the patient's discharge from hospital.

No. 36. Medical records must not contain information concerning the patient's:

- A. religion.
- B. criminal record.
- C. sexual orientation.
- **D.** political views.
- E. guilty plea.

**No. 37.** The effectiveness of the following preparations in the treatment of Alzheimer's has not been confirmed except for:

- A. nicergoline.
- **B.** vinpocetine.
- C. piracetam.
- **D.** memantine.
- E. selegiline.

No. 38. Which of the following *is not* a somatic complication of anorexia nervosa:

- A. hyperkalaemia.
- B. osteoporosis.
- **C.** bradycardia.
- D. anaemia.
- E. menstrual disorders.

**No. 39.** When using direct coercive measures, a nurse assesses the patient's condition every:

- A. 5 minutes.
- B.10 minutes.
- **C.** 15 minutes.
- **D.** 30 minutes.
- E. hour.

No. 40. A petition for incapacitation <u>cannot</u> be filed by the patient's:

- A. spouse.
- B. brother.
- C. son.
- D. cousin.
- E. statutory representative.

No. 41. Which of the following nerves contains <sup>3</sup>/<sub>4</sub> of parasympathetic fibres:

- A. the olfactory nerve (CN I).
- **B.** the trigeminal nerve (CN V).
- C. the facial nerve (CN VII).
- D. the vestibulocochlear nerve (CN VIII).
- E. the vagus nerve (CN X).

- No. 42. Klüver-Bucy syndrome is a collection of symptoms resulting from bilateral damage to:
  - A. the frontal lobes.
  - **B.** the temporal lobes.
  - **C.** the parietal lobes.
  - **D.** the occipital lobes.
  - E. the cerebellar lobes.

No. 43. Which of the following is the main excitatory neurotransmitter of the human brain:

- A. acetylcholine.
- **B.** glutamate.
- C. gamma-aminobutyric acid.
- **D.** kynurenic acid.
- E. serotonin.

**No. 44.** The most populous group of intellectually disabled people are people with:

- A. mild intellectual disability.
- **B.** moderate intellectual disability.
- C. severe intellectual disability.
- D. profound intellectual disability.
- E. extreme intellectual disability.

No. 45. The most common cause of dementia in elderly patients is:

- A. Alzheimer's disease.
- **B.** vascular dementia.
- C. dementia with Lewy bodies.
- D. frontotemporal dementia.
- E. alcohol-related dementia.

No. 46. Acetylcholinesterase inhibitors are drugs of choice in the treatment of:

- A. frontotemporal dementia.
- **B.** central pontine myelinolysis.
- C. dementia with Lewy bodies.
- D. Fahr syndrome.
- E. Creutzfeldt-Jakob disease.

**No. 47.** A 68-year-old female patient has significant memory and functioning disorders. He has fallen several times recently and has occasional visual hallucinations. A low dose of haloperidol has caused a sudden increase in rigidity. The symptoms indicate:

- A. dementia in Alzheimer's disease.
- B. frontotemporal dementia.
- **C.** vascular dementia.
- D. dementia with Lewy bodies.
- E. dementia in Huntington's disease.

**No. 48.** Which of the following drugs is a drug of choice in the treatment of alcohol-related amnesia:

- A. haloperidol.
- **B.** benzodiazepines.
- **C.** thiamine.
- **D.** propranolol.
- E. memantine.

**No. 49.** The recurrence percentage of severe symptoms of schizophrenia within 2 years in patients diagnosed with this disease who have discontinued treatment is:

- **A.** 40%.
- **B.** 50%.
- **C.** 60%.
- **D.** 80%.
- **E.** 100%.

**No. 50.** Restlessness of the lower limbs, the upper limbs and the trunk present both in sitting and standing positions with a frequent compulsion to walk (wiggle) occurring during treatment with anti-psychotic drugs is called:

A. active negativism.

**B.** severe dyskinesia.

C. tardive dyskinesia.

D. neuroleptic malignant syndrome.

E. akathisia.

**No. 51.** A patient was involved in a very dangerous road accident – the driver of the car he was a passenger of died. A few weeks later the patient began to feel significant mental discomfort. Which of the following typically occurs in this situation:

A. persistent reliving of the accident with deep fear.

- **B.** delusions of persecution and reference.
- C. a manic or mixed episode.

D. delirium.

E. provocation of dangerous situations similar to the accident.

**No. 52.** A 19-year-old patient reached BMI=12 following a restrictive diet. Despite significant exhaustion she keeps reducing food intake. Which is the correct course of action in this situation?

A. ambulatory psychotherapy.

**B.** pharmacotherapy and ambulatory psychotherapy.

C. psychiatric hospitalization if the patient consents.

- **D.** psychiatric hospitalization regardless of the patient's consent.
- E. hospitalization in a somatic department.

**No. 53.** Which of the following drugs are used in the pharmacotherapy of pre-mature ejaculation: **A.** mood stabilizers.

**B.** acetylcholinesterase inhibitors.

**C.** butyrylcholinesterase inhibitors.

D. selective serotonin reuptake inhibitors.

E. benzodiazepines.

**No. 54.** A 24-year-old patient diagnosed with bipolar disorder uses hormonal contraception.

Which of the following increases the risk of pregnancy?

- A. lithium.
- **B.** olanzapine.
- C. aripiprazole.
- D. carbamazepine.
- E. lamotrigine.

**No. 55.** A total disregard for other people's feelings, a persistent neglect of rules and norms, high levels of aggressiveness and low frustration tolerance are the typical features of:

- **A.** borderline personality.
- **B.** dissocial personality.
- **C.** histrionic personality.
- **D.** schizoid personality.
- E. dependent personality.

**No. 56.** Oversensitivity to criticism, a sense of self-importance and concentration on own needs are the characteristic features of:

- A. borderline personality disorder.
- B. schizoid personality.
- C. schizotypal personality disorder.
- D. dependent personality disorder.
- E. narcissistic personality disorder.

**No. 57.** In schizophrenia excessive dopaminergic activity of the mesolimbic system is responsible for:

- A. negative symptoms.
- **B.** positive symptoms.
- C. extrapyramidal symptoms.
- D. hyperprolactinaemia.
- E. severe dyskinesia.

**No. 58.** A 22-year-old has been concentrating on putting the objects around him in order for more than a year. He washes his hands several dozen times a day. The reasons for his presentation were exhaustion with the symptoms, a sense of growing hopelessness and family pressure. Which of the following is recommended in pharmacotherapy of patients with such symptoms:

- A. moclobemide in high doses.
- **B.** moclobemide in low doses.
- C. fluvoxamine in high doses.
- **D.** fluvoxamine in low doses.
- E. mirtazapine in low doses.

No. 59. The twelve-steps program is a standard in the therapy of:

- A. obsessive-compulsive disorders.
- B. personality disorders.
- **C.** alcohol addiction.
- **D.** anorexia nervosa.
- E. paraphilia.

No. 60. Stimulants include:

- A. mephedrone.
- B. ketamine.
- C. psilocybin.
- D. codeine.
- E. hashish/hash.