

STUDY GUIDE AND
SELF-EXAMINATION REVIEW
FOR
MODERN SYNOPSIS OF
COMPREHENSIVE TEXTBOOK OF
PSYCHIATRY/III

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Dedicated to our wives,
Nancy Barrett Kaplan
and
Virginia Alcott Sadock

Preface

The *Study Guide and Self-Examination Review of the Modern Synopsis of the Comprehensive Textbook of Psychiatry* has been designed to meet the needs of medical students, psychiatrists, neurologists and other physicians who require a review of the behavioral sciences and general psychiatry.

The book consists of 905 multiple-choice questions which are correlated with the *Modern Synopsis*. Each question is accompanied by an answer in paragraph form and a specific page reference to the *Synopsis* on which the topic is covered in detail.

It will be especially useful for students preparing for one of the certification examinations, such as the National Board of Medical Examiners (NBME), the American Board of Psychiatry and Neurology (ABPN), the Federation Licensing Examination (FLEX) or the Examination of the Commission on Foreign Medical Graduates (ECFMG). The format of the questions in this book are similar to those of the questions found on the various certification examinations.

The *Study Guide* will also be useful to physicians who wish to update their general knowledge or who wish to identify areas of weakness and areas of strength. The allocation of questions has been carefully weighted, with subjects of both clinical and theoretical importance taken into account.

To use this book most effectively, the student should attempt to answer each question in a particular chapter. By allowing about two minutes to answer each question the time constraints of an actual ex-

amination can be approximated. The answers should then be verified by referring to the corresponding answer section in each chapter. Careful reading of the answer will provide the student with more than enough data to understand how the answer was formulated. The student can refer to the appropriate page in the *Synopsis* for a more extensive and definitive discussion of the material.

This book is both a study guide and a method of teaching. It provides the student with the opportunity to increase his or her clinical and theoretical knowledge. After using this book and its companion textbook, the *Modern Synopsis*, the reader not only should have an increased fund of knowledge but also should be aided in preparation for a great variety of examination situations.

Several persons helped in the production of this book. The authors especially wish to thank Joan Welsh, Manfred Hauben, and Linda Didner for their editorial and secretarial assistance. Our publishers, Williams & Wilkins, and its Book Division President, Sara Finnegan, were most helpful. We also want to thank Robert Cancro, M.D., Professor of Psychiatry and Chairman of the Department of Psychiatry at New York University School of Medicine, for his continued support and encouragement.

New York University School of Medicine

April 2, 1983

H.I.K.

B.J.S.

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1

Historical and Theoretical Trends in Psychiatry

DIRECTIONS: Each of the statements or questions below is followed by five suggested responses or completions. Select the *one* that is *best* in each case.

1.1. The concept that each stage of the life cycle has characteristic tasks or challenges for a person and that those issues must be satisfactorily resolved in order for development to proceed smoothly is known as the

- A. development schedule
- B. individuation process
- C. maturational crisis
- D. epigenetic principle
- E. internal process

1.2. Infancy is said to end when a child is able to

- A. crawl
- B. stand without assistance
- C. control his anal sphincter
- D. speak
- E. climb stairs

1.3. Consistent and affectionate maternal behavior during infancy will provide the child with a continuing sense of

- A. trust
- B. autonomy
- C. initiative
- D. industry
- E. identity

1.4. Competition for the exclusive possession of the parent of the opposite sex and rivalry with the same-sex parent is characteristic of the age period between

- A. 1 and 3 years
- B. 3 and 6 years
- C. 6 and 10 years
- D. 10 and 13 years
- E. 13 and 18 years

1.5. Gender identity is established by age

- A. 1 year
- B. 3 years
- C. 5 years
- D. 7 years
- E. 9 years

1.6. A child begins identifying with the parent of the same sex during the

- A. period of infancy
- B. toddler period
- C. preschool period
- D. juvenile period
- E. preadolescent period

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1.7. The separation-individuation phase of development begins in the 4th or 5th month of life and is completed by age

- A. 1 year
- B. 2 years
- C. 3 years
- D. 4 years
- E. 5 years

DIRECTIONS: For each of the incomplete statements below, *one* or *more* of the completions given is correct. Choose answer:

- A. if only **1**, **2**, and **3** are correct
- B. if only **1** and **3** are correct
- C. if only **2** and **4** are correct
- D. if only **4** is correct
- E. if all are correct

1.8. The subphases for the separation-individuation process include

- 1. differentiation
- 2. practicing period
- 3. rapprochement
- 4. consolidation

1.11. Normal adolescence is marked by which of the following events:

- 1. Dissolution of ties to parents
- 2. Episodes of depression
- 3. Occasional delinquent acts
- 4. Vulnerability to crisis

1.9. Which of the following statements about young adulthood are true:

- 1. It is the most poorly defined of all developmental periods.
- 2. The major task is establishing personal identity.
- 3. The most important decisions affecting one's life are made during this time.
- 4. The major defense mechanism used is altruism.

1.10. Old age is frequently marked by

- 1. more problems for women than for men
- 2. the impact of the loss of reproductive capacity
- 3. the loss of positions of authority
- 4. more logical and abstract thinking

Directions: Each group of questions below consists of five lettered headings followed by a list of numbered words or statements. For each numbered word or statement, select the *one* lettered heading that is most closely associated with it. Each lettered heading may be selected only once.

- A. Emil Kraepelin
- B. Sigmund Freud
- C. Clifford Beers
- D. Philippe Pinel
- E. Jean Martin Charcot

1.12. *Interpretation of Dreams*

1.15. *A Mind That Found Itself*

1.13. Hysteria

1.16. Unchaining of the mentally ill

1.14. Manic-depressive psychosis

Answers

Historical and Theoretical Trends in Psychiatry

1.1. The answer is D (*Synopsis*, ed. 3, page 18).

The epigenetic principle maintains that each stage of the life cycle is characterized by events or crises that must be satisfactorily resolved in order for development to proceed smoothly. If resolution is not achieved within a given life period, the epigenetic model states that all subsequent stages will reflect that failure in the form of physical, cognitive, social, or emotional maladjustment. This concept was developed by Erik Erikson.

1.2. The answer is D (*Synopsis*, ed. 3, page 21).

Infancy refers to the period from birth until about the age of 18 months. A unifying aspect of the infancy period is the baby's inability to walk or talk, except haltingly, late in the period. Infancy is considered to end when the use of language develops.

1.3. The answer is A (*Synopsis*, ed. 3, pages 21 and 346).

Trust is a result of consistent and affectionate maternal behavior during infancy. The capacity for trust is the cornerstone of the child's future relationships. It is postulated that the failure to develop basic trust in childhood is a major causal element in the development of adult paranoid disorders. Clinical observations indicate that the paranoid person experiences difficulty in establishing a warm and trusting relationship with the parenting figures. The mother of the paranoid is frequently described as overcontrolling, seductive, and

rejecting and the father as distant, rigid, and sadistic or weak and ineffectual. If the parental figures cannot be relied on to help the child deal with disappointments, humiliations, and frustrations, the child soon develops an attitude that the environment is consistently hostile and becomes hypersensitive to imagined slights, so that all relationships become characterized by lack of trust.

1.4. The answer is B (*Synopsis*, ed. 3, page 21).

The oedipal complex evolves during the period between the ages of 3 and 6 years. Freud used the term "Oedipus complex" to refer to the intense love relationships that are formed during this period between the child and his parents, together with their associated rivalries and hostilities. In psychoanalytic terms the oedipal situation is resolved when the child develops the capacity for identification with the positive, ego-building aspects of his parents.

1.5. The answer is B (*Synopsis*, ed. 3, page 21).

Gender identity—the sense of maleness or femaleness—is firmly established by age 2½ or age 3. If sex has been wrongly assigned—as sometimes happens with ambiguous external genitalia—a gender identity disorder usually develops.

1.6. The answer is C (*Synopsis*, ed. 3, page 21).

The preschool period lasts from about the age of 3 until the age of 5 or 6. During that time the child begins identifying with

the parent of the same sex. At the same time, there may be anger directed at that parent because of the presence of the oedipal conflict.

1.7. The answer is C (*Synopsis*, ed. 3, page 20).

The separation-individuation phase of development is completed by age 3. During this phase, a person's subjective sense of separateness from the world around him is developed. Separation involves the child's disengagement and differentiation from the mother; individuation involves the gaining of a stable inner representation of the mother, a capacity for reality testing, and the realization that others have an existence discrete from the child's.

1.8. The answer is E (all) (*Synopsis*, ed. 3, page 20).

The four subphases of the separation-individuation process are: (1) Differentiation: the child is able to distinguish between self and other objects. (2) Practicing period: in the early phase, the child discovers the ability to physically separate himself from his mother by crawling and climbing, but he still requires the mother's presence for security. The later phase (7 to 10 months until 15 to 16 months) is characterized by free, upright locomotion. (3) Rapprochement: increased need and desire for the mother to share the child's new skills and experiences and a great need for the mother's love (16 until 25 months). (4) Consolidation: achievement of a definite individuality and attainment of a certain degree of object constancy (25 to 36 months).

1.9. The answer is B (1, 3) (*Synopsis*, ed. 3, page 22).

The period of young adulthood is a stage of life that extends from the early twenties until the early or middle thirties. This is perhaps the most poorly defined of all developmental periods. Characteristically, most of the important decisions that will affect the remainder of one's life are made during this stage. These include choice and

entry into a profession, courtship and marriage, the establishment of enduring friendships, and a sacrifice of activities that were considered play. The major issue of this period that must be resolved is that of intimacy. Vaillant, addressing himself to this fact, noted that a difficulty in conceptualizing intimacy was the dominant motif of complaints among patients in the young adult years. The emotional disorders that selectively affect this group, he further observed, "reflect anguish or protest against failures at intimacy." Indeed, Erikson has identified the crisis of this period as being intimacy versus isolation.

1.10. The answer is B (1, 3) (*Synopsis*, ed. 3, page 23).

Late adulthood, or old age, is marked by the emergence of new issues. Many of these are related to the physical manifestations that accompany the aging process—a decline in physical health and reduced sensory acuity. Negative stereotypes about being old—held by society and the elderly themselves—are important aspects of this period. Primary among these is the need to adapt to major losses, such as work, friends, or a spouse. Old age may present special difficulties for women, who are widowed longer than men, institutionalized more frequently, and usually poorer than men of the same age. For both sexes there is, as Neugarten described, "the yielding of a position of authority and the questioning of one's former competence; the reconciliations with significant others and with one's achievements and failures; the resolution of grief over the death of others and of the approaching death of self; the maintenance of a sense of integrity in terms of what one has been, rather than what one is; and concern over legacy and how to leave traces of oneself."

The loss of reproductive capacity occurs during the phase of middle adulthood—from ages 30 to 65—and is normally dealt with during that time. The capacity to reason more logically and to think in abstractions develops around adolescence.

1.11. The answer is E (all) (*Synopsis*, ed. 3, page 22).

Adolescence is generally divided into three phases: early adolescence (12 to 15 years), middle adolescence (14 to 18 years), and late adolescence (17 to 21 years). These subdivisions are based on the characteristic aspects of these phases. For example, early adolescence is marked by the dissolution of intense ties to parents, siblings, and parental surrogates; increased anxiety and depression; acting-out behavior; and occasional delinquent acts. There is a diminution in sustained interest and creativity. Middle adolescence is marked by efforts at mastering simple issues concerned with object relationships. The late adolescent phase—which is marked by resolution of the separation individuation tasks of adolescence—is characterized by vulnerability to crisis, particularly with respect to personal identity (Erikson's *identity crisis*).

1.12–1.16. The answers are: 1.12–B, 1.13–E, 1.14–A, 1.15–C, 1.16–D (*Synopsis*, ed. 3, pages 4, 6, and 7).

The publication of Sigmund Freud's (1856–1939) *The Interpretation of Dreams* in 1900 represented a major breakthrough in the understanding of the human mind on three different grounds: (1) It introduced a strict methodological technique in the study of dreams. (2) It relied on the introspective study of the self. (3) It posed the basis for a foundation of psychology in which normality and pathology were conceived of as an uninterrupted continuum.

Jean Martin Charcot (1825–1893), a neurologist and literary man, was attracted by the puzzling symptoms of hysteria and investigated it thoroughly from the psychological perspective. He described hysterical stigmata, hysterogenous zones, the attacks, and the labile affect of the patients, characterized by emotional indifference (*la belle*

indifférence). Eventually, Charcot came to recognize that a trauma, mainly of a sexual nature, quite often touched off ideas and feelings that became unconscious. Symptoms similar to hysteria, such as the idea of a paralysis, could be reproduced experimentally through hypnosis. Charcot believed that hysteria could be cured by hypnosis.

Although he was Freud's contemporary, Emil Kraepelin (1855–1926) can be considered the last representative of the predynamic school of psychiatry. Kraepelin attempted to identify definite clinical syndromes by following and statistically recording their signs, their course, and their outcome. This method was objective and limited to the patient—that is, it took no consideration of his family and environment. On the basis of the voluminous data gathered, Kraepelin clearly differentiated manic-depressive psychosis from dementia praecox, which was characterized by a weakening of emotional activities and loss of inner unity.

Clifford Beers, a distinguished businessman, published *A Mind That Found Itself* in 1918, after his recovery from a mental breakdown. In so doing, he launched the mental hygiene movement.

Philippe Pinel (1745–1826), a French physician, became superintendent of the Bicêtre (for male patients) and later of the Salpêtrière (for female patients), where criminals and mentally retarded patients, as well as the mentally ill, were housed. One of Pinel's first accomplishments at the Bicêtre was to free the mentally ill from their chains. Pinel is remembered for two other major contributions to psychiatry: his attempt to analyze and categorize symptoms and his application of moral treatment. He conceived of insanity as a disturbance of self-control and identity, for which he preferred the denomination of "alienation."

2

Science of Human Behavior: Contributions of the Biological Sciences

DIRECTIONS: Each of the statements or questions below is followed by five suggested responses or completions. Select the *one* that is *best* in each case.

2.1. 5-Hydroxyindoleacetic acid (HIAA) is the chief metabolite of

- A. melatonin
- B. serotonin
- C. histamine
- D. tryptophan
- E. tyramine

2.2. Uncinate fits are characterized by all the following *except*

- A. olfactory auras
- B. coprolalia
- C. depressive episodes
- D. rage reactions
- E. sensations of *déjà vu*

2.3. Regulation of hunger is mainly focused in the

- A. brain stem
- B. thalamus
- C. hypothalamus
- D. reticular activating system
- E. basal ganglia

2.4. Which of the following disorders has been found to have the highest genetic component:

- A. Anxiety
- B. Hysteria
- C. Phobia
- D. Hypochondriasis
- E. Obsessive-compulsive

2.5. The son or daughter of a parent with Huntington's chorea is at what percentage of risk for the disease?

- A. No risk
- B. 25 per cent
- C. 50 per cent
- D. 75 per cent
- E. 100 per cent

2.6. Studies used to determine genetic factors in psychiatric illness include all the following *except*

- A. twin studies
- B. adoption studies
- C. high-risk longitudinal studies
- D. biochemical marker studies
- E. cohort studies

2.7. Infants with failure-to-thrive syndrome frequently have impaired secretion of

- A. growth hormone
- B. thyroid-stimulating hormone
- C. insulin
- D. luteinizing hormone
- E. thyrotropin-releasing hormone