

Epilepsy

- all these anti-epileptic drugs cause depression except ? **Lamotrigine**
Mood stabilizer لأنه
- all these anti-epileptic drugs cause depression except?
 - a. phenobarbital
 - b. Valproic acid**
 - c. tiagabine
 - d. vigabatrin
 - e topiramate
- all are in favour its epileptic seizure ,except :
when you try to hold the patient to stop it but it increases -- !
- Pseudoseizure differs from epileptic seizure in all of the following EXCEPT:
 - A- There is neurological signs XXX**
 - B- Does not occur in dangerous places
 - C- Does not occur during sleep
 - D- There is both conscious and unconscious gain
 - E- The presence of purposive movements
- the most common presentation of affective disorders among patient with epilepsy?
interictal depression
- the percentage for depression occurrence in epilepsy patient with more than one seizures per month: **21%**
- all true about Geschwind syndrome except:
 - a- hypersexuality (note: hyposexuality more common but hyper also occurs)
 - b- hyper-religiosity
 - c- circumstantiality
 - d- Hypergraphia
 - e- bizarre delusion**
 - F- hyporeligiosity****مكرر بإجابات مختلفة**
- Prevalence of major depression among epilepsy patients? **11-80%**

• In an epileptic patient the following can provoke a fit except one :

- a. Hypoglycemia
- b. Drinking a large amount of beer
- c. Fever
- d. **Benzodiazepines**
- e. Premenstrual stage

(Note : benzodiazepines withdrawal causes discontinuation syndrome)

• which of the following types of epilepsy most frequently displays automatism

- a. Grand mal
- b. Jacksonian
- c. **Temporal lobe**
- d. Petit mal
- e. Generalized

• the most common presentation of affective disorders among patient with epilepsy:
interictal depression

• Not disorders of sleep ? **Epilepsy**

أسئلة إضافية

• In a young man with epilepsy, the treatment of choice for depression is:

- A. Buspirone
- B. **Fluoxetine**
- C. Bupropion
- D. Maprotiline
- E. Amitriptyline

• Personality disorder in chronic epileptics is known as :

- a. **Gastaut-Geschwind syndrome**
- c. Breckjaer's syndrome
- b. Landolt's syndrome
- d. None of the above

- married female patient aged 24 years presents to the emergency with history of short lasting episode of behavioral changes and unresponsiveness in which she is agitated, accompanied by smacking of the lips, and thrashing movements of the limbs. On recovery the patient is not able to recall the episode. Further history does not reveal any stressors.

The most likely diagnosis is :

- a. Chorea gravidarum
- b. Temporal lobe epilepsy**
- c. Panic attacks
- d. Dissociative disorder

- Temporal Lobe Epilepsy may mimic the symptoms of :

- a. Schizophrenia
- b. Hysteria
- c. Bipolar disorder
- d. All of the above**

Mood stabilizers

- Which of these is not a side effect of lithium?

A-Nephrogenic DI

B-thyroid enlargement

C-benign leukocytosis

D-weight loss

E- Constipation

F- muscle rigidity مكرر كل مرة جواب

- One of the following best description for lithium?

A) works immediately

B) narrow therapeutic index

C) does not need CBC and hepatic Monitoring

D) safe for breastfeeding

- Late side effect of lithium?

Memory impairment

- Absolute contraindication of lithium:

Severe kidney failure

- which one of these is the toxic dose for lithium

a-1.5

b-1.2

c-0.5

- not a mood stabilizer

a-lithium b-valproate **c-fluvoxamine** d-carbamazepine e-lamotrigine

- Lithium acts physiologically by all of the following except?

Dopamine inhibition

norepinephrine inhibition

alpha 2 agonist

increase serotonin production

- Which drug requires a strict monitoring of serum levels every 3 months & is likely to cause Sodium imbalances is:

a. Valproic Acid b. Carbamazepine c. Clozapine **d. Lithium** e. Clonazepam

- Which of the following is not a mild sign of lithium toxicity:

A. ataxia

B. oliguria

C. vomiting

D. coarse tremor

- Ebstein anomaly is teratogenic side effect of:

lithium.

- a lady using medications for her mental illness but she can't remember the name of meds or illness, complained of polyuria and polydipsia, what's her diagnosis?

Bipolar (you should know the drug first which is lithium based on the side effects)

- Which of the following symptoms indicates lithium toxicity:

a. Coarse tremor

b. Fine tremor

c. Hypothyroidism

- All of the following drugs increase level of lithium except?

A-NSAIDS

B-ACE inhibitors

C-k sparing diuretic

- Which of these is not a side effect of lithium?

A-Nephrogenic DM B-hypothyroidism **C-leukopenia**

- Moderate lithium toxicity ?

Hyperreflexia

- One of your regular out-patients with recurrent depression was recently Started on a medication but comes back with aggravated psoriatic skin Lesions. The most probable offending agent is

Select one:

a. Lithium

b. Valproate

c. Onlanzapine

d. Zopiclone

e. Chlorpromazine

- patient took some drug and he developed maculopapular rash (psoriasis flare up) what did he take?

lithium

- 70 y old female developed mania after vascular event what differ in her management than mania : **lithium high dose**

• Caution with Mood Stabilizers: Lithium and some antipsychotics might be contraindicated or used with caution due to their renal and cardiac side effects.

- patient presented to the ER with symptoms "nset,hum :P" el mohem Lithium blood level = 4.2 .. Managment?

Hemodialysis

- The main side effect of lithium is:

A- ADH deficiency

B- Diabetes insipidus

C- Hypothyroidism XXX

D- Hyperthyroidism

E- Hypoparathyroidism

- A 28-year-old woman is diagnosed with bipolar disorder ,manic type, when she was hospitalized after becoming psychotic , hypersexual, severely agitated , and unable to sleep. She is started on a medication in the acute phase of her illness. Which of the following medications recommended for acute use in manic patient , is recommended to be continued on into maintenance therapy?

A .Aripiprazole

B .Lamotrigine

C .Lithium .

D . Olanzapine

E .Ziprasidone

The medication that is recommended for both acute use in manic patients and continued into maintenance therapy is:

C. Lithium

Lithium is widely used for the acute management of manic episodes in bipolar disorder and is also recommended for long-term maintenance therapy to prevent both manic and depressive episodes.

- A patient takes medication for bipolar I disorder throughout pregnancy and delivery. The newborn is noted to be cyanotic and in respiratory distress. An echocardiogram reveals significant displacement of 2 leaflets of the tricuspid valve into the ventricle and a large atrial septal defect consistent with Ebstein's anomaly. Of the following medications, which was the woman most likely taking during her pregnancy ?

A .Carbamazepine

B .Gabapentin

C .Lithium .

D .Valproate

E .Topiramate

- a pregnant women suffering from depression with suicidal ideation what's the treatment of choice ?

A. ECT

B. lithium

C. valproic acid

- Which of the following is not Valproic Acid side effect?

A) Nystagmus

B) Diplopia

C) hirsutism (سؤال مكرر كل مرة جواب)

D) thrombocytosis

E) Pancreatitis

- Wrong about side effect of valproic acid?

Mycosomal enzyme inducer

- Which of the following is not carbamazepine side effect?

A) Nystagmus

B) Hepatotoxicity

C) Aplastic anemia

D) CYP450 inhibition

E) nephrogenic DI (سؤال مكرر كل مرة جواب)

F) hypernatremia

g) leukocytosis

- One of the following is idiosyncratic side effect of carbamazepine?

Agranulocytosis

- wrong about bipolar disorder?

carbamazepine used in treatment of a depressive episode

- used in treatment of trigeminal neuralgia : carbamazepine

- One of the following causes ataxia at therapeutic dose :

A- Pimozide

B- Carbamazepine

C- Chlorpromazine

D- fluoxetine

E- Imipramine

- A 66-year-old patient who is treated for bipolar disorder presents comatose with a serum sodium concentration of 112 mmol / L . Which of the following is most likely to be the cause of the sodium imbalance ?

- A .Valproate
- B .Carbamazepine**
- C .Lithium
- D .Olanzapine
- E .Risperidone

- A female with bipolar disorder taking medications got pregnant even though she is taking contraceptives, what is the drug she interacted with the OCP causing pregnancy

بس هاي الفكرة

- a-Lithium
- b-Valporate
- c-Carbamazepine**
- d-Lamotrigine

Effects of pharmacotherapy on oral contraceptives

The efficacy of oral contraception (OC) can be impaired by concomitant use of medications that induce liver enzymes (eg, carbamazepine, oxcarbazepine), which may be secondary to enhanced hepatic metabolism of the OC hormones. Therefore, if women are prescribed these medications for treatment of symptoms of bipolar disorder, clinicians should advise them to use barrier methods of birth control, monitor for spotting, and/or work with the gynecologist to increase oral contraceptive pill (OCP) dose. Conversely, OCPs induce lamotrigine metabolism, such that increased lamotrigine doses are often required for women on OCPs. While no drug-drug interactions with OC have been reported to date with valproate, lithium, or the atypical antipsychotics, further study is required in women with bipolar disorder.

In summary, there is no systematic controlled data to demonstrate that certain treatments are more effective for men and women. Instead, providers should carefully weigh potential side effects and interactions associated with treatments, and the importance of those risks for individual women.

- Which of the following is not a side effect of lamotrigine

- A-skin rash
- B-ataxia
- C-insomnia

- In the treatment of bipolar depression in young women, caution must be used with which of the following agents because it may increase the risk of polycystic ovarian syndrome?

Select one:

- a. Quetiapine b. Lamotrigine c. Divalproex **d. Olanzapine** e. None of the above

- Direct contraindication for ECT? **Space occupying intracranial lesion**

- A patient with refractory depression has received electro-convulsive therapy(ECT) . Which of the following is true of this treatment:

- A . Bilateral ECT has fewer side effects than unilateral.**
- B . Bilateral ECT is more effective than unilateral.
- C . ECT is only indicated for refractory depression.
- D . The most common side effect is seizures
- E . ECT is contraindicated in psychosis.

- One of the following is the most important indication of Electroconvulsive Therapy (ECT):
 - a. Severe depression**
 - b. Schizophrenia
 - c. Puerperal disorder
 - d. Delusional disorder
 - e. Manic episode

أسئلة إضافية

- Lithium is a very effective treatment for mania but is associated with a number of troubling side effects, including nephrogenic diabetes insipidus (NDI). Prevention and management strategies for NDI include all of the following except?
 - A. Increasing fluid intake.
 - B. Decreasing lithium dose.
 - C. Once-daily lithium dosing.
 - D. Amiloride.
 - E. Thiazide diuretics.
- All are mood stabilizers except:
 - a. Lithium
 - b. Sodium valproate
 - c. Carbamazepine
 - d. Aripiprile
- Therapeutic level of lithium required in acute mania is-
 - a. 0.6-0.8 meq/l
 - b. 1.2-2.0 meq/l
 - c. 0.8-1.2 meq/l
 - d. more than 2 meq/l
- Ebstein's anomaly may be a complication of _____ drug when used during first trimester of pregnancy
 - a. Sodium valproate
 - b. Lithium carbonate
 - c. Lamotrigine
 - d. Carbamazepine
- Haemodialysis for lithium overdose is indicated, if the serum lithium levels are
 - a. 2-3 mEq/L
 - b. 1-2mEq/L 92
 - c. 0.8-1mEq/l
 - d. More than 4mEq/L
- Therapeutic serum levels of Lithium
 - a. 0.2 - 0.8 meq/L
 - b. 0.8 - 1.2 meq/L
 - c. 1.2 - 1.8 meq/L
 - d. 1.0 - 2.0 meq/L

- Adverse effects of lithium include all of the following except:
 - a. Polyurea
 - b. Sedation
 - c. **Dyskinesia**
 - d. Tremors

- The following tests are mandatory before starting the patient on Lithium, except
 - a. Urea & Creatinine
 - b. Thyroid Profile
 - c. Pregnancy test
 - d. **Serum Bilirubin**

- A patient is brought to the casualty with a state of altered sensorium. History revealed that the patient was on lithium treatment for mania. Two days before, he had severe diarrhea and vomiting with abdominal pain. After this, the dose of lithium was continued, with which the vomiting episode increased. In addition, he started complaining of difficulty in speech and walking. On examination, he had coarse tremors, and brisk deep tendon reflexes. The cause of this condition is
 - a. **Lithium toxicity**
 - b. Cholera
 - c. Manic stupor
 - d. Neuroleptic malignant syndrome.

- Mr. X has presented to Skin OPD with Psoriasis. He is suffering from Bipolar disorder, & is on mood stabilizers. The mood stabilizer probably is
 - a) Divalproate sodium
 - b) Topiramate
 - c) **Lithium**
 - d) Lamotrigine

- Lithium induced tremors are commonly treated by
 - a) Increasing Lithium dose
 - b) **B - blockers**
 - c) Anticholinergic drugs
 - d) Tetrabenazine

- Serum Lithium levels are regularly tested as Lithium has
 - a. Cardio toxic Properties
 - b. Thyro toxic properties
 - c. **Narrow therapeutic window**
 - d. Nephro toxic properties

- Women taking oral contraceptives should be advised about the possible loss of contraceptive effect when these are taken in combination with:
 - A, Valproic acid
 - B. Carbamazepine**
 - C. Clonazepam
 - I). Gabapentin
 - E. Lithium

- Steven Johnsons Syndrome is associated with
 - a. Levocetizine b. Levosuliride c. Lamotrigine d. Levitiracetam

- The following is a contraindication for ECT
 - a. Schizophrenia
 - b. Catatonia
 - c. Raised ICT
 - d. Pregnancy with severe depression

- Seizures induced in modified ect is said to be adequate if the seizure duration is _____ seconds
 - a. 5 to 10 second
 - b. 10 to 15 seconds
 - c. 15 to 25 seconds
 - d. More than 120 seconds