

QUESTIONS ON THE PRESENTATION

“Pharmacodynamics of Antidepressants” (11-13-15). Select the single best choice.

1. You have a patient taking SSRIs who informs you he is going to have surgery. It is a good idea to discuss with him that SSRIs are associated with increased risk of hemorrhage during surgery.
 - A. True
 - B. False

2. Regarding off-label uses of antidepressants by other medical specialists:
 - A. Amitriptyline is sometimes used for migraine prophylaxis.
 - B. Tricyclic antidepressants are used for treating chronic pain.
 - C. Some doctors may prescribe SSRIs or SNRIs for menopausal hot flashes.
 - D. All of the above are correct.

3. Excessive sweating:
 - A. Has been associated with SSRIs.
 - B. Has been associated with SNRIs.
 - C. May be more frequent than previously thought in patients taking antidepressants.
 - D. All of the above are correct.

4. You are considering a new antidepressant in a patient with epilepsy who is depressed. It is important to remember that, among these patients, bupropion has the highest risk of worsening seizure control.
 - A. True
 - B. False

5. Correct pairs of SSRIs and adverse drug reactions are:
 - A. Fluoxetine/withdrawal, sertraline/weight gain, fluvoxamine/seizures.
 - B. Sertraline/weight gain, paroxetine/diarrhea, citalopram/mild anticholinergic.
 - C. Sertraline/diarrhea, paroxetine/weight gain, citalopram/QTc prolongation.
 - D. Fluoxetine/seizures, sertraline/weight gain, fluvoxamine/mild anticholinergic.

6. You are prescribing a newer antidepressant and ask a patient about her tolerance for nausea. This discussion is important in order to increase adherence during the first few weeks.
- A. True
 - B. False
7. Regarding venlafaxine cardiovascular risk:
- A. It is associated with a relatively higher risk for hypertension than other newer antidepressants.
 - B. In geriatric patients, consider that it has some risk for orthostatic hypotension.
 - C. The literature does not describe a risk for QTc prolongation.
 - D. All of the above.
8. Regarding diagnosing serotonin syndrome:
- A. If spontaneous clonus is not present, you should try to induce it.
 - B. It needs to be considered in cases of unexplained agitation with diaphoresis.
 - C. All psychiatric and non-psychiatric medication should be carefully reviewed.
 - B. All of the above.
9. Regarding withdrawal and discontinuation syndromes:
- A. They are particularly frequent after suddenly stopping paroxetine and venlafaxine.
 - B. They can manifest as sudden onset of headaches and dizziness in a patient stable for years; so in a patient with this situation you may want to ask him/her whether he/she started an unsupervised antidepressant discontinuation or not.
 - C. They are poorly understood phenomena and it is better to prevent them than to treat them.
 - D. All of the above.
10. Trazadone has been associated with priapism.
- A. True
 - B. False