

QUESTIONS ON THE PRESENTATION

“Valproate Case 2 Safety” (2-12-16) Please select the single best choice.

1. If you want to study the pharmacodynamic mechanism underlying valproate safety you need to study valproate serum levels.
 - A. True
 - B. False
2. Regarding valproate metabolism:
 - A. In low doses, β -oxidation may be the most important pathway.
 - B. In high doses, glucuronidation may be the most important pathway.
 - C. Several CYPs contribute in a relative minor way to valproate metabolism.
 - D. All of the above are correct.
3. Regarding the effects of valproate on blood cells:
 - A. Anemia is frequent.
 - B. Neutropenia is frequent (>20% of patients).
 - C. Thrombocytopenia is frequent and may be associated with higher valproate concentrations, female gender and geriatric age.
 - D. All of the above are correct.
4. Before starting valproate, it is a good idea to warn patients that it frequently causes alopecia.
 - A. True
 - B. False
5. Regarding valproate pancreatitis:
 - A. It is easily diagnosed in subjects with intellectual disabilities.
 - B. It is more important to test for serum lipase elevations than amylase elevations.
 - C. It is very rare and benign, so it should not be a concern for your patients.
 - D. All of the above are correct.

6. Regarding valproate toxicity:

- A. Tremor can be a sign of toxicity.
- B. A normal total serum valproate concentration does not rule out valproate toxicity.
- C. Gastrointestinal symptoms are frequent. According to the package insert, nausea can occur in almost half of the patients and vomiting in more than one fourth of the patients.
- D. All of the above are correct.

7. Regarding valproate encephalopathy:

- A. It can occur by multiple mechanisms.
- B. It can manifest in several ways, including severe sedation.
- C. If suspected, you should measure valproate, liver enzyme and ammonia levels.
- D. All of the above are correct.

8. Regarding the metabolic syndrome, valproate:

- A. Usually causes weight loss.
- B. Usually increases total serum cholesterol levels.
- C. Can contribute to hyperinsulinemia due to insulin resistance.
- D. Can cause hypoglycemia.

9. Valproate is frequently associated with teratogenicity:

- A. True
- B. False

10. Valproate can contribute to Stevens-Johnson syndrome by decreasing lamotrigine metabolism.

Therefore, you should prescribe lower initial doses of lamotrigine for patients taking valproate.

- A. True
- B. False