

Chapter 6. Teacher

1. Depression is:
 - a) Psychosis
 - b) A mood disorder (A)
 - c) Anxiety disorder
 - d) A somatic disorder

2. Which of the following two are types of depression?
 - a) Tripolar
 - b) Unipolar (A)
 - c) Bipolar (A)
 - d) Quadrapola

3. Mania is an emotion characterised by:
 - a) Boundless, frenzied energy
 - b) Feelings of euphoria
 - c) Ideas coming too fast and too many
 - d) All of the above (A)

4. Mania is frequently associated with:
 - a) Bipolar mood disorder (A)
 - b) Unipolar disorder
 - c) Tripolar
 - d) Quadrapola

5. Depressed individuals exhibit a number of:
 - a) Behavioural symptoms
 - b) Physical symptoms
 - c) Cognitive symptoms
 - d) All of the above (A)

6. Which of the following is a behavioural symptom exhibited by individuals suffering unipolar depression?
1. Stay in bed for long periods (A)
 2. Unpredictable and erratic behaviour
 3. Compulsive checking
 4. Ritualised behaviour
7. Which of the following is a physical symptom exhibited by individuals suffering unipolar depression?
- a) Indigestion
 - b) Constipation
 - c) Dizzy spells
 - d) All of the above (A)
8. Which of the following is a sleep disturbance experienced by individuals suffering unipolar depression?
- a) Terminal insomnia
 - b) Middle insomnia
 - c) Hypersomnia
 - d) All of the above (A)
9. Which of the following is a cognitive features experienced by individuals suffering unipolar depression?
- a) Extremely negative views of themselves, the world, and their future
 - b) A lack of initiative, with individuals reporting impaired ability to think, concentrate or make decisions
 - c) A sense of worthlessness
 - d) All of the above (A)
10. Which of the following is a motivational deficits experienced by individuals suffering unipolar depression?
- a) A lack of initiative and spontaneity

- b) Social withdrawal
- c) Lack of appetite and sexual desire
- d) All of the above (A)

11. Which of the following is a characteristic common in a manic phase in bipolar disorder?

- a) Constant, sometimes unconnected stream of thoughts and ideas
- b) Limited attention span
- c) Rapid topic shifts in conversation
- d) All of the above (A)

12. Which of the following is not a DSM-IV-TR criteria for a manic episode?

- a) Inflated self esteem or grandiosity
- b) Decreased need for sleep
- c) Increase in goal directed activity
- d) Hypersomnia (A)

13. Which of the following is not a DSM-IV-TR criterion for a major depressive episode?

- a) Depressed mood for most of the day nearly every day
- b) Fatigue or loss of energy nearly every day
- c) Distractibility (A)
- d) Insomnia or hypersomnia nearly every day

14. Which of the following is included in DSM-IV-TR criteria for major depressive episode?

- a) Symptoms cause clinically significant distress or impairment in social functioning
- b) Symptoms are not due to physiological effects of substance misuse
- c) Symptoms are not accounted for by bereavement
- d) All of the above (A)

15. Chronic mood disturbances that cause depressive symptoms, but do not disrupt normal functioning may be diagnosed as:

- a) Dysthymic Disorder (A)
- b) Cyclothymic Disorder
- c) Dissociative disorder
- d) Personality disorder

16. Two years of hypomania symptoms that do not meet the criteria for a manic episode could be diagnosed as:

- a) Dysthymic Disorder
- b) Dissociative disorder
- c) Personality disorder
- d) Cyclothymic Disorder (A)

17. DSM-IV-TR requires that for the diagnosis of Major Depression, an individual must have:

- a) 5 symptoms for a period of one month
- b) 5 symptoms for a period of 2 weeks (A)
- c) 3 symptoms for a period of 2 weeks
- d) 3 symptoms for a period of one month

18. Lifetime co-morbidity rate of Major Depression with another anxiety disorder is:

- a) 58% (A)
- b) 30%
- c) 2%
- d) 86%

19. Comorbidity of Major Depressive disorder with Generalised Anxiety Disorder (GAD) is:

- a) 50%
- b) 5%
- c) 17.2% (A)
- d) 81.4%

20. Comorbidity of Major Depressive disorder with Agrophobia is:

- a) 16.3% (A)
- b) 27.4%
- c) 71.2%
- d) 37.3%

21. Comorbidity of Major Depressive disorder with Specific phobia is:

- a) 17.2%
- b) 51.2%
- c) 87.1%
- d) 24.3% (A)

22. Comorbidity of Major Depressive disorder with Social phobia is:

- a) 38.6%
- b) 27.1 % (A)
- c) 58.9%
- d) 92.6%

23. Comorbidity of Major Depressive disorder with Panic Disorder is:

- a) 9.9% (A)
- b) 19.5%
- c) 23.7%
- d) 61.7%

24. Comorbidity of Major Depressive disorder with Post Traumatic Stress Disorder

- a) 8.6%
- b) 58.9%
- c) 19.5% (A)
- d) 87.1%

25. Comorbidity of Major Depressive disorder with Alcohol dependence is

- a) 23.5% (A)
- b) 67.8%
- c) 10%
- d) 45%

26. Comorbidity of Major Depressive disorder with drug dependence is:

- a) 87.6%
- b) 52.9%
- c) 2.4%
- d) 13.3% (A)

27. Seasonal Affective Disorder (SAD) affects what percentage of adults in temperate climates?

- a) 1-3% (A)
- b) 5-8%
- c) 10-12%
- d) 15-20%

28. The main symptoms of Seasonal Affective Disorder (SAD) are:

- a) Weight gain
- b) Craving for carbohydrates
- c) Hypersomnia
- d) All of the above (A)

29. Evidence suggests that individuals with Seasonal Affective Disorder (SAD) increase their secretion of:

- a) Serotonin
- b) Melatonin (A)
- c) Dopamine
- d) Norepinephrine

30. Individuals suffering from Seasonal Affective Disorder (SAD) benefit from:

- a) Photo therapy (A)

- b) Hypnotherapy
- c) Psychotherapy
- d) Behavioural activation therapy

31. Which of the following are physical symptoms of Chronic Fatigue Syndrome (CFS)?

- a) Extreme fatigue
- b) Muscle pain
- c) Chest pain
- d) All of the above (A)

32. Chronic Fatigue Syndrome (CFS) is characterised by:

- a) Depression and mood fluctuations (A)
- b) Psychotic episodes
- c) Manic episodes
- d) Substance dependency

33. In Chronic Fatigue Syndrome (CFS) about 75% of reported cases are adult white females, this is due to?

- a) Males not having menstrual cycles
- b) Social pressure
- c) A reporting bias (A)
- d) Hormonal differences

34. The causes of Chronic Fatigue Syndrome (CFS) are controversial. Theories have argued for:

- a) Involvement of viral or immunological factors
- b) Environmental stressors such as pollution or organophosphates
- c) A predisposition to develop depression
- d) All of the above (A)

35. According to DSM-IV-TR, necessary symptoms for the diagnosis of Bipolar I disorder include:

- a) Currently (or most recently) in a Manic Episode
- b) The previous occurrence of at least one Major Depressive Episode, Manic Episode or Mixed Episode
- c) Mood episodes are not better accounted for by psychotic disorders
- d) All of the above (A)

36. In Bipolar II Disorder, major depressive episodes alternate with periods of:

- a) Hypomania (A)
- b) Hyperventilation
- c) Hypothermia
- d) Hypoxia

37. Family studies have indicated that:

- a) 20-30%
- b) 30-40%
- c) 10-25% (A)
- d) 40-50%

of first-degree relatives of Bipolar Disorder sufferers have also reported significant symptoms of mood disorder

38. The increased risk of depressive symptoms for relatives of Major Depression sufferers is:

- a) 20-30%
- b) 30-40%
- c) 35-45%
- d) 5-10% (A)

39. Concordance rates in selected monozygotic twin studies of bipolar disorder are:

- a) 69.6% (A)
- b) 23.9%
- c) 84%
- d) 10%

40. Concordance rates in selected dizygotic twin studies of bipolar disorder are:

- a) 2.1%
- b) 29.3% (A)
- c) 87.6%
- d) 51.8%

41. Inherited factors can account for which of the following variances in depressive symptomology?

- a) 30% (A)
- b) 50%
- c) 10.4%
- d) 20%

42. Depression and mood disorders have been shown to be reliably associated with abnormalities in the levels of:

- a) Neurotransmitters (A)
- b) Hemoglobin
- c) Cholesterol
- d) Carotene

43. Which two of the following neurotransmitters are significant in Major Depression?

- a) Serotonin (A)
- b) Dopamine
- c) Norepinephrine (A)
- d) Acetylcholine

44. Mania found in Bipolar Disorder is found to be associated specifically with which of the following neurotransmitters?

- a) Serotonin

- b) Dopamine
- c) Norepinephrine (A)
- d) Acetylcholine

45. Which of the following drugs significantly alleviated the symptoms of depression?

- a) Tricyclic drugs
- b) Monoamine oxidase (MAO) inhibitors
- c) Selective serotonin reuptake inhibitors
- d) All of the above (A)

46. Recent research suggest that depression is associated more with:

- a) An imbalance in neurotransmitters (A)
- b) Deficits in specific neurotransmitters
- c) An imbalance in dopamine production
- d) Damage to neurons

47. Abnormalities in which of the following brain areas have been found to be associated with depression?

- a) Prefrontal Cortex
- b) Anterior Cingulate Cortex
- c) Hippocampus
- d) All of the above (A)

48. Lower levels of activation in the Prefrontal Cortex results in:

- a) Failure to anticipate incentives (A)
- b) Failure to regulate emotions
- c) Deficit in the will to change
- d) Inability to understand the context of affective reactions

49. Decreased activation in the Anterior Cingulate Cortex (ACC) results in which two of the following?

- a) Failure to regulate emotions (A)

- b) Deficit in the will to change (A)
- c) Failure to anticipate incentives
- d) Inability to understand the context of affective reactions

50. Deficits in Hippocampal function in depression may result in:

- a) The individual dissociating affective responses from their relevant contexts (A)
- b) Deficit in the will to change
- c) Failure to regulate emotions
- d) Failure to anticipate incentives

51. Major Depression has also been found to be associated with structural and functional abnormalities in the Amygdala. The role of the Amygdala is to:

- a) Stimulate secretion by sweat glands
- b) Stimulate secretion of epinephrine and norepinephrine
- c) Control spatial memory
- d) Prioritize affectively salient stimuli (A)

52. In Major Depression raised levels of activation in the amygdale results in:

- a) Prioritising threatening information as negative (A)
- b) Over stimulation of sweat glands
- c) Overproduction of norepinephrine
- d) Loss of short term memory

53. In Major Depression hippocampal abnormalities are regularly linked with:

- a) High levels of dopamine
- b) High levels of cortisol (A)
- c) High levels of acetylcholine
- d) High levels of GABA

54. Life stressor raise levels of cortisol that, in turn lowers levels of:

- a) Serotonin (A)
- b) Dopamine
- c) Acetylcholine

d) Norepinephrine

55. According to psychodynamic explanations, depression is a result of:

- a) Conflict
- b) Ego state
- c) Defense mechanisms
- d) Loss (A)

56. According to psychodynamic explanations, the first stage of response to loss is called introjection where the individual regresses to:

- a) Oral stage of development (A)
- b) Anal stage of development
- c) Phallic stage of development
- d) Sensorimotor stage of development

57. In psychoanalytic theories of depression, one of the major problems of introjection is:

- a) Not everyone experiences anger
- b) Not everyone who experiences depression has lost a loved one (A)
- c) Not everyone believes in Freud's stages of development
- d) Not everyone who loses a loved one develops depression

58. To counteract the theoretical problems of introjection, Freud proposed a new concept, which was:

- a) Symbolic loss (A)
- b) Diabolic loss
- c) Metabolic loss
- d) Catastrophic loss

59. According to Garber & Flynn (2001), affectionless control is a type of parenting style characterized by:

- a) High levels of overprotection combined with a lack of warmth and care (A)
- b) High levels of control and prohibition

- c) Authoritarian father
- d) Parenting without boundaries

60. Psychoanalytic approaches to depression do have some empirical problems.

Which of the following concepts are difficult to verify empirically?

- a) Introjection
- b) Fixation at the Oral stage of development
- c) Symbolic loss
- d) All of the above (A)

61. Behavioural accounts of depression argue that life losses would be:

- a) Reduction of reinforcing events
- b) Establishing a vicious cycle
- c) Lack of social reinforcement
- d) All of the above (A)

62. Interpersonal theories of depression argue that depression is maintained by:

- a) A cycle of reassurance seeking rejected by family and friends
- b) Negative self beliefs lead to doubting any reassurances
- c) Continual doubting may annoy reassurance providers
- d) All of the above (A)

63. One of the most influential of all the theories of depression is:

- a) Freud's Psychodynamic Theory
- b) Seligman's Learned Helplessness Theory
- c) Beck's Cognitive Theory (A)
- d) Berne's Humanistic Theory

64. One of the main tenets of Beck's Cognitive Theory is that individuals suffering from depression have developed:

- a) Negative schema (A)
- b) Lowered levels of Serotonin
- c) Introjected loss

d) Negative social behaviour

65. Beck's negative triad maintains that depressed people hold negative views about:

- a) Themselves
- b) The future
- c) The world
- d) All of the above (A)

66. Beck's negative triad of beliefs leads to a number of systematic biases in thinking, including:

- a) Arbitrary inference
- b) Selective abstraction
- c) Over generalisation
- d) All of the above (A)

67. Which of the following systematic biases in thinking form part of Beck's negative triad of beliefs?

- a) Magnification and minimisation
- b) Personalisation
- c) All-or-none thinking
- d) All of the above (A)

68. Which of the following provides evidence that depressed individuals do show the negative cognitive biases that Beck's theory predicts?

- a) Attentional biases to negative information results in prioritisation of negative information
- b) Memory biases where more negative words than positive words are recalled in explicit memory tests
- c) Depressed individuals exhibit interpretational biases that result in them interpreting ambiguous events negatively
- d) All of the above (A)

69. In Beck's cognitive theory of depression pessimistic thinking is caused by:

- a) Unhappy childhood
- b) The unconscious
- c) Negative self schemas (A)
- d) Lowered levels of Serotonin

70. According to Seligman's theory of depression, life experiences could give rise to a cognitive set that he termed:

- a) Introjection
- b) Negative triad
- c) Learned Helplessness (A)
- d) Attribution theory

71. Seligman first derived this hypothesis from:

- a) Animal experiments (A)
- b) Observing depressed individuals
- c) Analysis of blood chemistry
- d) Analysis of childhood experiences

72. Learned Helplessness Theory has been applied to depression in:

- a) Personality disorder
- b) Battered Woman Syndrome (A)
- c) Substance misuse
- d) Alcohol abuse

73. In Attribution Theory of depression, people who are likely to become depressed attribute negative life events to:

- a) Internal rather than external factors
- b) Stable rather than unstable factors
- c) Global rather than specific factors
- d) All of the above (A)

74. Which of the following is part of a cluster of symptoms is known as hopelessness?

- a) Apathy
- b) Lack of energy
- c) Psychomotor retardation
- d) All of the above (A)

75. Hopelessness is an expectation that:

- a) Positive outcomes will not occur
- b) Negative outcomes will occur
- c) The individual has no responses available that will change this state of affairs
- d) All of the above (A)

76. Studies that have examined Hopelessness Theory confirm that depression can be predicted by:

- a) Negative attributional style
- b) Negative life events
- c) Low self-esteem
- d) All of the above (A)

77. In addition to predicting many symptoms of depression, hopelessness is also a construct that has been shown to predict which two of the following?

- a) Suicidal tendencies (A)
- b) Schizophrenia
- c) Completed suicide (A)
- d) Obsessive Compulsive Disorder

78. Despite the enhanced ability of the evolved model to predict depressive episodes, there are still a number of limitations to Hopelessness Theory:

- a) Research been carried out on healthy or only mildly depressed participants
- b) Majority of studies testing the model are correlational
- c) The model does not explain all of the depressive symptoms required for a DSM-IV-TR diagnosis

d) All of the above (A)

79. Which of the following are main features of the stepped-care model for depression?

- a) GPs are advised to make proper assessment of individuals who present with symptoms of depression, rather than simply providing medication
- b) Medication is not recommended for the initial treatment of depression, rather reserved for the treatment of moderate to severe depression
- c) Mild depression should be treated primarily with brief behavioural and cognitive interventions
- d) All of the above (A)

80. Which of the following is not medication for depression?

- a) Tricyclic drugs
- b) Monoamine oxidase inhibitors
- c) Selective serotonin reuptake inhibitors
- d) Chlorpromazine (A)

81. What percent of individuals taking tricyclic drugs show improvement?

- a) 30-35%
- b) 60-65% (A)
- c) 80-85%
- d) 10-15%

82. Which of the following is one of the major drug therapies for Bipolar disorder?

- a) Lithium carbonate (A)
- b) Chlorpromazine
- c) Clozapine
- d) Benzodiazepine

83. Early research into medication for Bipolar depression suggested that lithium stabilises:

- a) Activity of sodium and potassium ions in the membranes of neurones (A)

- b) Activity of chloride and calcium
- c) Activity of potassium and chloride
- d) Activity of sodium and calcium

84. More recently, research into medication for Bipolar depression has suggested that lithium modulates neuronal transmission by:

- a) Affecting the expression of genes that govern these activities (A)
- b) Acting as a inhibitory pump
- c) Increasing dopamine re-uptake
- d) Allows increased synaptic response

85. Electroconvulsive Therapy (ECT) is a method of treatment for depression first discovered in the 1930s and involves passing an electric current of around

- a) 70-130 volts (A)
- b) 20-40 volts
- c) 400-450 volts
- d) 1000-1500 volts

through the head of the patient for around half a second.

86. Which of the following are considered controversial features of Electroconvulsive Therapy (ECT)?

- a) Memory loss
- b) It's frightening
- c) Considered by some to be a form of assault
- d) All of the above (A)

87. The aim of psychodynamic therapy for depression is to:

- a) Help the depressed individual achieve insight into this repressed conflict
- b) Release the inwardly directed anger
- c) Raise low self-esteem
- d) All of the above (A)

88. Which two of the following are methods used in Psychodynamic therapy for depression?

- a) Dream interpretation (A)
- b) Social skills training
- c) Self-actualisation
- d) Free association (A)

89. Social skills training assumes that depression in part results from the individual's inability to:

- a) Communicate and socialise appropriately (A)
- b) Behave appropriately in a social situation
- c) Host dinner parties
- d) Process information in social situations

90. Social skills training programme for depression may include which of the following?

- a) Conversational interaction skills
- b) Dating skills
- c) Job-interview skills
- d) All of the above (A)

91. Social skills training for depression may include which of the following?

- a) Modelling
- b) Rehearsal
- c) Role-playing
- d) All of the above (A)

92. Behavioural Activation Therapies for depression attempts to increase the client's access to pleasant events and rewards and decrease their experience of aversive events and consequences. Early Behavioural Activation programmes attempted to achieve these goals through which of the following?

- a) Daily monitoring of pleasant/unpleasant events
- b) Use of behavioural interventions that develop activity scheduling

- c) Social skills and time management training
- d) All of the above (A)

93. Beck's Cognitive Therapy for Depression involves which of the following?

- a) Helping the depressed individual identify their negative beliefs and negative thoughts
- b) Challenging negative thoughts as dysfunctional and irrational
- c) Replacing negative beliefs with more adaptive or rational beliefs
- d) All of the above (A)

94. Reattribution training for depression attempts to address the client's difficulties by changing their attributions to which of the following?

- a) Positive
- b) Unstable
- c) External
- d) All of the above (A)

95. Mindfulness-Based Cognitive Therapy (MBCT) for depression has been developed to try and combat which of the following?

- a) Relapse (A)
- b) Side – effects from drug therapies
- c) Manic episodes in Bipolar disorder
- d) Chronic Fatigue Syndrome

96. Which of the following cognitive constructs is the best predictor of suicide?

- a) Learned helplessness
- b) Hopelessness (A)
- c) Negative schema
- d) Introjection

97. The World Health organisation predicted that a million people would die worldwide each year as a result of suicide – a global mortality rate of:

- a) 16 per 100,000 (A)

- b) 100 per 100,000
- c) 60 per 100,000
- d) 500 per 100,000

98. The World Health Organisation (WHO) has estimated a worldwide increase in suicide over the past 45 years of:

- a) 60% (A)
- b) 10%
- c) 5%
- d) 80%

99. One particular form of parasuicidal phenomenon in adolescence is deliberate self-harm. This includes

- a) Cutting or burning
- b) Taking overdoses
- c) Hitting themselves
- d) All of the above (A)

100. Which factors may be relevant to the increase in adolescent suicide rates?

- a) Modern teenagers are probably exposed to many of the life stressors experienced by adults, yet may lack the coping resources to deal with them effectively
- b) Suicide is also a sociological as well as a psychological phenomenon, and media reports of suicide often trigger a significant increase in suicides
- c) There is a strong relationship between depression, substance abuse and suicide
- d) All of the above (A)

