## **Abnormal Psychology**

- 1. A behavioral or mental pattern that causes suffering or a poor ability to function in life may be diagnosed by a mental health professional as a
  - A. neurosis
  - B. mental disorder
  - C. personality disorder
  - **D.** psychosis
- 2. After suffering breathing problems and chestpains while on duty, a Navy midshipman was told he had suffered a panic attack. Since that time, going to sea became extremely difficult. He was worried about whether he'd have another attack far from land. He discovered a similar anxiety in the shopping center and on the subway. Which of the following disorders is likely to develop without treatment?
  - A. social anxiety disorder
  - **B.** agoraphobia
  - C. generalized anxiety disorder
  - **D.** obsessive-compulsive disorder
- 3 The most common type of anxiety disorder is
  - **A.** specific phobia
  - **B.** social anxiety disorder
  - C. generalized anxiety disorder
  - **D.** panic disorder

- 4. Carl Jung coined the term "synchronicity" to describe meaningful coincidences that could not be explained scientifically. In a famous case, Jung attributed the rare appearance of a golden scarab at his office window shortly after his patient recalled dreaming of the insect, as a sign that the dreamer was making progress in accessing her subconscious. Jung believed that such demonstrations of synchronicity meant that a person had tapped into the collective unconscious, a universal knowledge beyond our everyday awareness that is shared by everyone. How might modern psychiatric medicine classify Jung's experience?
  - A. hallucination
  - **B.** delusion of reference
  - C. somatic delusion
  - **D.** pareidolia
- 5. Bill is a 28 year-old unmarried male. He has a very demanding, stressful job as an associate in a large law firm. Bill is extremely conscientious and self-critical if he feels like he is falling short. He fears he will not make partner in the firm. For the past month Bill has felt unusually fatigued, often staying in bed until noon on the weekends. He has been having difficulty concentrating at work, and has been acting irritably. Bill called in sick on several occasions to stay in bed all day, watching TV or sleeping. Bill likely suffers from which disorder?
  - A. dysthymia
  - **B.** bipolar disorder
  - C. generalized anxiety disorder
  - **D.** major depressive disorder

- **6.** Which of the following statements are true regarding <u>all</u> personality disorders?
  - I. An enduring pattern of behavior that deviates markedly from the expectations of the individual's culture
  - II. Onset can be traced back at least to adolescence or early adulthood
  - III. The pattern is stable and of long duration
  - IV. The pattern is inflexible and pervasive across a broad range of personal and social situations
  - A. II only
  - **B.** I, II and III
  - C. I, III and IV
  - **D.** I, II, III and IV
- **7.** Which of the following thoughts and/or behaviors are typical of individuals with obsessive-compulsive personality disorder?
  - **A.** excessive hand washing
  - **B.** repeating activities a certain amount of times or counting
  - **C.** experiencing distress when unable to control a situation
  - **D.** repeatedly reviewing a past event
- 8. The doctor asked Martin "How are you feeling today?" and Martin said, "How are you feeling today? How are you feeling today?" This symptom is called
  - A. echopraxia
  - B. clanging
  - C. palilalia
  - D. echolalia

- 9. Marjorie worries constantly about her father who is in a nursing home. This worry has been troubling her for the past year. For at least six months she has felt constantly restless and is very tired. When she's at her desk at work, she constantly wants to get up and pace, and she is having trouble thinking straight. Marjorie likely suffers from which disorder?
  - **A.** bipolar depression
  - **B.** borderline personality disorder
  - C. generalized anxiety disorder
  - D. atypical depression
- 10. When Regina accepted the transfer to the home office, she considered it a wonderful opportunity to work for Evelyn, one of the rising stars of the company. However, Evelyn is very manipulative and self-serving. She seems to feel nothing and lacks a conscience. She's impulsive and deceptive. Although Regina is not qualified to make a diagnosis, it appears that Evelyn may suffer from a disorder known as \_\_\_\_\_\_ personality.
  - A. psychopathic
  - **B.** sociopathic
  - C. antisocial
  - **D.** borderline
- 11. A somatic symptom disorder involving the actual loss of bodily function such as blindness, paralysis, and numbness due to excessive anxiety would have been called hysteria in the nineteenth century. In the DSM-V, such a disorder is termed
  - **A.** conversion disorder
  - **B.** illness anxiety disorder
  - C. body dysmorphic disorder
  - **D.** Munchausen syndrome

- 12. Experimental research in cognitive science challenges claims concerning the validity of the construct underlying dissociative mental disorders based on a defense mechanism in which cognitions are excluded from consciousness. Even the claimed aetiological link between trauma/abuse and dissociation has been questioned. An alternative model proposes a perspective on dissociation based on a recently established link between a labile sleep-wake cycle where mentation occurs in a dream-like manner producing memory errors, cognitive failures, problems in attentional control, and difficulties in distinguishing fantasy from reality. In other words, the conclusions of these experiments challenge the model of the dissociation construct based on
  - A. actual self vs. ought self disparity
  - **B.** Freudian repression
  - C. identity crisis
  - **D.** personality disorder

- 13 A 62-year-old female consulted a clinic requesting treatment for general malaise and lack of volition that had persisted for 2 years. She was not regarded as having senile dementia. She was a housewife and barely able to perform housework. Based on the information presented, her status was likely diagnosed as
  - A. major depressive disorder
  - **B.** general anxiety disorder
  - **C.** dysthymia
  - D. agoraphobia

- 14. Anton is a cognitive psychologist in clinical practice. During a therapy session, Anton made a note when his client said, "I feel worthless and ugly" and another note after his client said, "People ignore me all the time." Which of the following statements did Anton record allowing him to provisionally confirm Beck's cognitive triad of depression?
  - **A.** "I've failed at everything I've ever tried."
  - **B.** "My life is never going to get better."
  - C. "I've never been lucky."
  - **D.** "I feel as though life is passing me by."
- **15.** Which of the following is a positive symptom of schizophrenia?
  - A. disordered thought
  - **B.** flat affect
  - C. mania
  - D. anhedonia
- **16.** The \_\_\_\_\_ published by the American Psychiatric Association (APA), offers a common language and standard criteria for the classification of mental disorders.
  - **A.** Global Assessment of Functioning (GAF) Scale
  - **B.** Diagnostic and Statistical Manual of Mental Disorders (DSM)
  - C. International Statistical Classification of Diseases and Related Health Problems (ICD)
  - **D.** Psychodynamic Diagnostic Manual (PDM)

- 17. \_\_\_\_\_ disorder occurs when an individual is unable to cope with a stressful event or a major life event. People with this disorder normally have symptoms that depressed people do, such as general loss of interest, feelings of hopelessness and crying.
  - A. anxiety
  - **B.** extreme stress
  - C. post-traumatic stress
  - **D.** adjustment

- 18. A core concept in modern psychiatry since DSM-III was released in 1980, is the categorical separation of mood disorders from schizophrenia, known as the Kraepelinian dichotomy. The Kraepelinian dichotomy continues to be used in DSM-5 despite having been challenged by data from modern psychiatric genetics. For example, there is now evidence of a significant overlap in the genetics of schizophrenia and bipolar disorder. In addition to bipolar disorder with a history of psychosis, for which of the following disorders do diagnostic criteria include significant, enduring symptoms bridging the Kraepelian dichotomy?
  - A. major depression
  - **B.** dissociative identity disorder
  - C. obsessive-compulsive disorder
  - **D.** schizoaffective disorder

- **19.** In which of the following respects does Asperger's syndrome differ from other conditions within the range of autism spectrum disorder?
  - I. absence of significant delay in language development
  - II. absence of significant delay in cognitive development
  - III. presence of stereotyped or repetitive behaviors
  - IV. difficulties in social interaction
  - **A.** I only
  - **B.** I and II
  - C. I, II, and IV
  - **D.** I, II, III, and IV

- **20.** A hospital patient is observed to hold rigid poses for hours while ignoring any external stimuli. At other times he shows stereotyped, repetitive movements. The only instances in which he has been observed to speak have been to repeat what a doctor or nurse says. Which of the following is a defensible diagnosis based on the above information?
  - A. catatonic schizophrenia
  - B. encephalitis
  - C. benzodiazepene withdrawal
  - D. catatonia

21. Up to 80% of clients seeking clinical treatment for borderline personality disorder are women It has been argued that the most probable explanation for gender differences in clinical samples is that women are more likely to develop the kind of symptoms that bring patients in for treatment. Twice as many women as men in the community suffer from depression. In contrast, there is a preponderance of men meeting criteria for substance abuse and psychopathy, and males with these disorders do not necessarily present in the mental health system. Men and women with similar psychological problems may express distress differently. Men tend to drink more and carry out more crimes. Women tend to turn their anger on themselves, leading to depression as well as the cutting and overdosing that characterize BPD. Thus, anti-social personality disorder and borderline personality disorders might derive from similar underlying pathology but present with symptoms strongly influenced by gender. There is specific evidence that men with BPD may not seek help. In a study of completed suicides among people aged 18 to 35 years, 30% of the suicides involved individuals with BPD (as confirmed by psychological autopsy, in which symptoms were assessed by interviews with family members). Most of the suicide completers were men, and very few were in treatment.

Which of the following statements is consistent with the evidence presented in the above passage?

- **A.** Men are less likely to be treated for symptoms of BPD such as substance abuse than treated for BPD itself.
- **B.** The symptoms of BPD and ASPD do not share an underlying aetiology.
- **C.** Men are less likely to seek or accept treatment for ASPD than women.
- **D.** While up to 80% of BPD patients are women, that may not be true in the community

- 22. A child who has a family history of depression and who has been exposed to a particular circumstance, such as exclusion or rejection by his or her peers, would be more likely to develop depression than a child with a family history of depression that has an otherwise positive social network of peers. This interaction of factors in which events or social influences may activate a latent predisposition exemplifies the \_\_\_\_\_\_ model of mental disorders.
  - A. biopsychosocial
  - B. biomedical
  - **C.** diathesis-stress
  - **D.** behavioral
- 23. An office worker, Marilyn, came to believe that one of her co-workers, Julia, was trying to poison her. She had seen Julia in a lengthy conversation with the supply vendor for the break-room. Another co-worker, Benedict, had asked Marilyn whether she preferred coffee or tea, which was very suspicious. Marilyn paid five hundred dollars to have a sample of coffee from the break-room tested by a private laboratory. Despite negative lab results, Marilyn began bringing her own coffee to work with her, which she kept hidden in her desk in a thermos. This case study is most consistent with which of the following diagnoses?
  - **A.** delusional disorder persecutory type
  - **B.** paranoid personality disorder
  - C. paranoid schizophrenia
  - D. sociophobia

- **24.** The Rosenhan experiment was a famous experiment published by the journal Science in 1973 under the title "On being sane in insane places". Rosenhan wondered if there was a way in which the reliability of psychiatric diagnoses could be tested experimentally. The study involved the use of healthy associates or "pseudopatients" who briefly feigned auditory hallucinations in an attempt to gain admission to 12 different psychiatric hospitals. All were admitted and diagnosed with psychiatric disorders. After admission, the pseudopatients acted normally and told staff that they felt fine and had no longer experienced any additional hallucinations. All were forced to admit to having a mental illness and agree to take antipsychotic drugs as a condition of their release. The average time that the patients spent in the hospital was 19 days. All but one were diagnosed with schizophrenia "in remission" before their release. With reference to the historical period (approximately fifty years ago) what may be concluded from the results of the study?
  - **A.** There were significant problems with reliability in schizophrenia diagnosis at the time of the experiment.
  - **B.** Schizophrenia was perceived as an irreversible condition rather than a curable illness.
  - **C.** Psychiatrists were over-admitting schizophrenia patients for hospitalization.
  - **D.** Psychiatric diagnosis should not take a patient's report of their experiences into account.

- 25. A resident in a mental health facility required one-on-one supervision due to her self-mutilative behaviors. In counseling she would frequently fabulate autobiographical details, and if asked about future plans would change her goals multiple times in a single discussion. When she feared being left alone or abandoned she would find a way to hurt herself or threaten suicide. She would place the staff and/or herself in an all-good category or an all-bad category. The diagnosis for this young lady is most likely which of the following?
  - A. generalized anxiety disorder
  - B. schizotypal personality disorder
  - C. borderline personality disorder
  - **D.** histrionic personality disorder
- 26. After staying awake for forty hours straight in order to complete an research paper for a history course, while walking through the quad Sherry experienced a profound sense of being a detached observer of herself. She felt as if the buildings around her had become vague, dreamlike, and less real. It was very disturbing. What is the psychological term to describe what she is experiencing?
  - A. depersonalization
  - B. hallucination
  - C. dissociation
  - **D.** thought insertion
- **27.** Obsessions are recurrent \_\_\_\_\_ that persist despite efforts to ignore or confront them.
  - A. habits
  - B. compulsions
  - C. thoughts
  - **D.** behaviors

- **28.** Which of the following is a negative symptom of schizophrenia?
  - A. alogia
  - **B.** thought blocking
  - C. amnesia
  - **D.** hallucinations

- **29.** A battery of tests for dyspraxia and agnosia was administered to 51 chronic schizophrenic patients to test the hypothesis that these cortical neurological signs are associated with psychomotor poverty syndrome (poverty of speech, flat affect, decreased spontaneous movement), disorganization syndrome (various disorders of the form of thought, inappropriate affect), abnormal involuntary movements, cognitive impairment, and duration of illness. The findings supported all elements of the hypothesis, and in particular, demonstrated a strong correlation of cortical signs with psychomotor poverty and with cognitive impairment. Which of the following best explains the underlying purpose of this experiment?
  - **A.** to determine the set of cardinal schizophrenia symptoms through factor analysis
  - **B.** to measure the correlation between psychomotor poverty and cognitive impairment
  - **C.** to demonstrate the cortical aetiology of a set of positive symptoms of schizophrenia
  - **D.** to operationalize variables in schizophrenia diagnosist

- **30.** The cognitive perspective on depressive illness is best exemplified by which of the following statements?
  - **A.** Inherited or acquired brain disorders involving imbalances in neurotransmitters or damage to brain structures lead to depressive illness.
  - **B.** Unconscious conflicts over impulses such as sex and aggression, originating in childhood lead to depressive illness.
  - C. A blending of negative thoughts and beliefs about the self, the world, and possible selves leads to depressive illness.
  - **D.** An underlying biological predisposition combined with environmental or social stressors lead to depressive illness.
- 31. William's psychology professor presented the theory that people with depression act in ways that maintain their depression. While his professor didn't deny that biological factors contribute to depression, she asserted that it is ultimately the combination of a stressful event in an individual's life and their reaction to the event that produces a depressive episode. According to his professor, individuals with depression may display socially aversive behaviors, fail to engage in enjoyable activities, ruminate on their problems, or engage in other maladaptive activities. These behaviors most often function as avoidance mechanisms while the individual tries to cope with a stressful life event, resulting in a decrease in positive reinforcers or perceived control. Rumination and distraction are the two main coping mechanisms. According to her professor, ruminators are much more likely to become depressed than distractors. Which model is Williams' applying to interpret derpession?
  - A. cognitive
  - **B.** behaviorist
  - C. biopsychological
  - D. psychoanalytic

32.	Which of the following are among the diagnostic criteria for substance use disorder?  I. impaired control II. social impairment III. risky use IV. tolerance and withdrawal  A. I only B. II and III C. I, II, and III D. I, II, III, and IV	35.	One version of the dopamine hypothesis suggests that schizophrenia symptoms emerge from a functional hyperactivity of dopamine neurons projecting to the nucleus accumbus, associated with functional hypoactivity of dopamine neurons projecting to the frontal cortex. A second version of the dopamine hypothesis suggests that psychosis and thought disorder may result, in part, from a state of abnormal glutamatergic cortical activity associated with exaggerated dopamine release or dysregulated dopamine signaling in the nucleus accumbus. This imbalance of cortical and dopamine signaling may contribute to improper gating of perceptual and thought processes. If the second version of the hypothesis is correct, schizophrenia would be associated with malfunction in the
33.	Up to 80% of Wernicke's encephalopathy patients who abuse alcohol develop  A. Korsakoff syndrome B. Alzheimer's disease C. Major depression D. Delirium tremens		<ul> <li>A. mesocortical pathway</li> <li>B. mesolimbic pathway</li> <li>C. mesocorticolimbic pathway</li> <li>D. nigrostriatal pathway</li> </ul>
34.	A person diagnosed with a paraphilia has been diagnosed with a(n)  A. sexual disorder B. attachment disorder C. somatoform disorder D. eating disorder	36.	Once it has been established that the individual exhibits multiple positive and negative symptoms of schizophrenia, the psychiatrist typically then evaluates the patient further to determine the subtype. If no specific subtype can be determined because the symptoms are randomized and fit multiple subtype categories, the diagnosis may be  A. dissociative identity disorder B. disorgannized schizophrenia C. undifferentiated schizophrenia D. catatonic schizophrenia

- **37.** Which of the following are somatic system disorders?
  - I. hypochondriasis
  - II. panic disorder
  - III. amnesia
  - IV. conversion disorder
  - **A.** IV only
  - **B.** I and IV
  - C. I, II, and III
  - **D.** I, II, III, and IV
- 38. The key pharmacologic property of conventional anti-psychotic medications such as thorazine and haldol is their ability to block dopamine D2 receptors. Blocking of these receptors in the mesolimbic pathway reduces positive symptoms of schizophrenia. However, when a substantial number of D2 receptors are blocked in the nigrostriatal dopaminergic pathway as a side effect, this will produce various disorders of movement that can appear very much like those in
  - **A.** Parkinson's disease
  - **B.** Stroke
  - C. Alzheimer's disease
  - **D.** Multiple sclerosis
- **39.** Which of the following is <u>not</u> an anxiety disorder?
  - **A.** obsessive-compulsive personality disorder
  - **B.** panic disorder
  - C. post-traumatic stress disorder
  - D. agoraphobia

**40.** A novel hypothesis concerning the pathophysiology of schizophrenia, one that closely relates to the glutamate hypothesis, revolves around dysfunction of interneurons in the brain.Interneurons in the brain are GABAergic and local, and function mainly through the inhibition of other cells. Parvalbumin is a calcium-binding albumin protein that plays a role in signaling in certain cortical interneurons. Glutamate decarboxylase (GAD) is an enzyme that catalyzes the decarboxylation of glutamate to GABA and CO<sub>2</sub>. Early studies have identified decreases in GAD67 mRNA and protein in post-mortem brains from schizophrenia patients compared to controls. GAD67 mRNA was completely undetectable in a subset of interneurons also expressing parvalbumin. Levels of parvalbumin protein and mRNA were also found to be lower in patient brains in various regions in the brain. Finally, excitatory synapse density is selectively lower on parvalbumin interneurons in schizophrenia and predicts the activity-dependent down-regulation of parvalbumin and GAD67.

Which of the following is suggested by the experimental observations regarding dysfunction of interneurons detailed in the passage above?

- **A.** The activity of excitatory parvalbumin interneurons is lower in schizophrenia.
- **B.** Parvalbumin is a transcription factor controlling expression of glutamate decarboxylase.
- **C.** Parvalbumin interneurons are specifically affected in schizophrenia.
- **D.** GAD67 synthesizes GABA for neuro-transmission.

- **41.** What's the main difference between bipoar I disorder and bipolar II disorder?
  - **A.** A person with bipolar I has manic episodes.
  - **B.** A person with bipolar II experiences psychotic symptoms such as delusions or hallucinations.
  - **C.** The person's mood in bipolar I is noticeably different from their normal mood when not depressed.
  - **D.** Bipolar II is comorbid with another condition such as substance abuse or obsessive-compulsive disorder.
- **42.** The alternation of two or more distinct personality states with impaired recall among personality states is known as
  - A. dissociative amnesia
  - **B.** depersonalization disorder
  - C. dissociative fugue
  - **D.** dissociative identity disorder
- **43.** Which of the following is a macroscopic brain structural change that has been associated with schizophrenia?
  - A. enlarged lateral ventricles
  - **B.** enlargement of the hippocampus
  - **C.** abnormalities in the metabolism of dopamine
  - **D.** hyperactive dopamine transmission in the mesolimbic pathway

- 44. \_\_\_\_\_ is characterized by a pattern of excessive attention-seeking behavior, including inappropriately seductive behavior and an excessive need for approval. People suffering from this disorder are often lively, dramatic, vivacious, enthusiastic, and flirtatious.
  - **A.** dependent personality disorder
  - **B.** borderline personality disorder
  - C. narcissistic personality disorder
  - **D.** histrionic personality disorder

- **45.** After the end of his second marriage, Martin's personality seemed to change. He avoided close relatives, strangers and crowds. The idea of being in a crowd induced severe fear and inhibition. He was afraid to talk to the gardener or the property manager in his apartment complex. He avoided women, looking away from them and walking away at the prospect of an approaching woman, feeling his heart palpitate and short of breath. He avoided almost all activities outside home afraid of having a panic attack. Which of the following would definitely <u>not</u> be a proper psychiatric diagnosis of Martin?
  - A. social phobia
  - **B.** social anxiety disorder
  - C. avoidant personality disorder
  - **D.** agoraphobia

- **46.** Psychosis as a sign of a psychiatric disorder is a diagnosis of exclusion. In other words,
  - **A.** The presence of psychotic symptoms is used to exclude diagnosis of many disorders.
  - **B.** Relevant symptoms are not diagnosed as psychotic until organic potential causes of the symptoms are excluded.
  - **C.** A new-onset episode of psychosis is not first considered as a symptom of a psychiatric disorder.
  - **D.** For the diagnosis of psychosis to apply there must be impairment in carrying out daily life activities.

- 47. Positive psychotic symptoms in schizophrenia have been traditionally linked to the neurotransmitter dopamine. In particular, the dopamine hypothesis of psychosis has been influential and states that psychosis results from an overactivity of dopamine function in the brain, particularly in the mesolimbic pathway. However, recent evidence has pointed to a possible dysfunction of the excitory neurotransmitter \_\_\_\_\_\_, in particular, regarding its activity upon the NMDA receptor.
  - A. GABA
  - B. glutamate
  - C. serotonin
  - D. acetylcholine

- A trait marker represents the properties of the be-48. havioral and biological processes that play an antecedent, possibly causal, role in the pathophysiology of the psychiatric disorder, whereas a state marker reflects the status of clinical manifestations in patients. Certain visual functions, while deficient in schizophrenia, may be independent of psychosis. Examining clinically unaffected relatives of schizophrenia patients and patients with bipolar disorder can provide information about the relationship between a schizophrenic disposition and visual response traits. In one study, researchers found that motion integration is dysfunctional in schizophrenia patients but not in their relatives or bipolar patients, whereas motion discrimination is dysfunctional in schizophrenia patients and their relatives, but not in bipolar patients. By synthesizing these findings, this review suggests that
  - **A.** Deficiency in motion integration may be a trait marker of schizophrenia.
  - **B.** Deficiency in motion discrimination may be an endophenotype specifically associated with genetic predisposition for schizophrenia.
  - **C.** Both psychosis and mood disturbances significantly affect the visual processes underlying motion discrimination.
  - **D.** Motion integration and discrimination are both state markers specific to schizophrenia.

- 49. An offshoot of the monoamine hypothesis suggests that monoamine oxidase A (MAO-A) may be overly active in depressed people. This hypothesis received support from a PET study, which found significantly elevated activity of MAO-A in the brains of some depressed people. Increased MAO activity in depressed patients may even be a trait marker in that the increased activity did not change in response to treatment. Which of the following directly results from increased MAO activity?
  - **A.** depression symptoms
  - **B.** increased synthesis of GABA
  - C. oxidative deamination of glutamate
  - **D.** increased degradation of serotonin

- **50.** Which of the following statements best exemplifies a psychodynamic approach to understanding anorexia nervosa?
  - **A.** Anorexia has been linked to childhood sexual abuse or dysfunctional families.
  - **B.** Psychological causes of anorexia include low self-esteem, feeling like there is lack of control, depression, anxiety, and loneliness.
  - **C.** Constant exposure to media that presents body ideals is a risk factor for anorexia nervosa.
  - **D.** Dysregulation of the serotonin pathways has been implicated in the etiology, pathogenesis and pathophysiology of anorexia nervosa.