

MINISTRY OF HEALTH OF UKRAINE
Kharkiv National Medical University

GUIDELINES

*on preparation for the licensed integrated exam "Krok 2"
educational discipline "Psychiatry and narcology"
for English medium students of the 4th – 6th course of VI and VII faculties
(The list of test items with the justification of the correct answer)*

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Guidelines for preparing for the licensed integrated exam "Krok 2" in the discipline "Psychiatry and Narcology" for English medium students of the 4th – 6th course of VI and VII faculties (list of test tasks with justification of the correct answer). The guidelines included tests on psychiatry and narcology, which were selected from the KROK-2 booklets for the 2015-2018 academic years <https://www.testcentr.org.ua>.

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L.D. Korovina, I.V. Leschina - Kharkiv: KhNMU, 2018. - 12 p.

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A note for the successful pass of the licensed exam

At the exam, each student receives an examination booklet and a response form. **Examination booklet** has a number; the student shall enter on the cover the last name, initials and his identification code, which is assigned by the Testing Center and is permanent for each student and will be used at all stages of the exam.

Each test task is numbered from 1 to 200. The task is supplemented by four to five answers indicated by letters A, B, C, D, E, from which you should select the best one answer.

Task answer sheet consists of two parts: The left-hand side contains information about the exam and the student's personal data (identification code, surname, first name, middle name, course, exam date and additional information). The right part is a blank of answers to test assignments.

Carefully read each test task. Make sure, that you understand exactly what you are asking about. Try to answer the test task by yourself, and then find it among the suggested options. Otherwise, carefully read each answer option and discard those, that are absolutely wrong from your point of view. Among the remaining answers, choose the best one. The correct answer should be marked in the form by completely filling the circle with the corresponding letter next to the number, which corresponding to the number of the test task.

Pay attention!

- ✓ Make sure, that the answer mark which you are marking in the blank is corresponds to the number of the test you are responding to.
- ✓ Make a thick dark mark so that you can not read the letters inside the circle that is filled.
- ✓ If you mark more than one letter, this answer is considered incorrect.
- ✓ If you change the letter, completely erase the previous mark with the eraser so that a letter appears. Remaining marks may result in some answers being considered incorrect.
- ✓ Do not spend too much time on specific test tasks. You have only one minute to answer every task.
- ✓ Keep track of time! Recalculate periodically how much you have done and how much you still have to solve tasks.
- ✓ After completing the task, be sure to check that you have filled out the form completely.

After the test time is completed, you will be notified about it by the exam administrators, you have to stop working, close the exam booklet and wait for the administrator to collect your test materials.

If you finish the exam earlier, you will need to inform the administrator of the exam, give him back your test materials and leave the test auditorium without interrupting other students.

We wish you success during licensing examination!

Optimization of the preparation and passing of the licensing exam (test task solution algorithm) Krok 2.

It is advisable:

- 1. Carefully read the test task;**
- 2. To analyze the clinical symptoms described in the test and integrate the leading syndrome**
- 3. Pay attention to the etiological factor;**
- 4. Evaluate the significance of the small nuances of the test task (gender, age, seasonality of clinical manifestations, etc.).**

2015

1. (14_2015) A 13-year-old girl complains of periodic prickly pain in the heart region. Percussion revealed no changes of cardiac borders. Auscultation revealed arrhythmic enhanced heart sounds, extrasystole at the 20-25 cardiac impulse. ECG showed the sinus rhythm, impaired repolarization, single supraventricular extrasystoles at rest. What is the most likely diagnosis?

- A. Somatoform autonomic dysfunction**
- B. Rheumatism**
- C. Nonrheumatic carditis**
- D. Myocardial degeneration**
- E. Intoxication syndrome**

Correct answer is Somatoform autonomic dysfunction.

In this task it is necessary to differentiate organic cardiac pathology and functional dysfunction of the nervous system. Objective methods of examination showing a child has subjective cardiac complaints and there are signs of sinus arrhythmia (periodic prickly pain in the heart region, arrhythmic enhanced heart sounds, extrasystole). The instrumental method of examination showed presence of single supraventricular extrasystoles. These symptoms are signs of a functional abnormalities of a nervous system. So, in this task correct answer is somatoform autonomic dysfunction.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – P. 298 – 299, 308 P.

2. (16_2015) A 60-year-old woman has been suffering from arterial hypertension for 15 years. After recurrent strokes he started complaining of unmotivated bad mood, problems with attention concentration; she forgets to close the entrance door, cannot recall events of the past day. Computer tomography shows areas of postinfarction changes in the cortical postfrontal areas. What is the most probable diagnosis?

- A. Vascular dementia**
- B. Alzheimer's disease**
- C. Huntington's disease**

D. Pick's disease

E. Dissociative amnesia

Correct answer is Vascular dementia

There are indications of classic signs of vascular dementia in the condition of the task: the patient has been suffering from hypertension for 15 years, suffered a stroke, and after a stroke he started complaining of unmotivated bad mood, problems with attention concentration and memory. An additional clue is the presence of specific post-infarction changes in the cerebral cortex. Therefore, the correct answer is vascular dementia.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – P. 169 – 173

3. (40_2015) A 30-year-old woman complains of pain in the heart area ("aching, piercing pain") that arises primarily in the morning hours in autumn and spring. Pain irradiates into the neck, back, abdomen and is attended by rapid heart rate and low vital tonus. This condition occurs independently from physical exertion. In the evening her condition improves. Somatic and neurologic state and ECG have no pathologies. What pathology is likely to result in such clinical presentation?

A. Somatized depression

B. Rest angina pectoris

C. Pseudoneurotic schizophrenia

D. Somatoform autonomic dysfunction

E. Hypochondriacal depression

Correct answer is Somatized depression.

The main task is to differentiate the etiological cause of cardiac complaints. There are no objective data in favor of the cardiac cause of the existing symptoms. At the same time there is a clear indication of the seasonality changes and daily fluctuation in the intensity of her complaints. All of the above, allows us to conclude that the problem presents a clinical picture of somatized depression. In favor of this diagnosis, the patient has somatic cardiac complaints, diurnal and seasonal dynamics characteristic of depression and the absence of objective data in favor of somatic or neurological pathology.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 286 – 290 P.

4. (77_2015) A patient is active, lively, fussy. He resists the examination. His speech is fast and loud, his statements are spontaneous and inconsequent. Specify the psychopathological state of this patient:

A. Psychomotor agitation

B. Catatonic agitation

C. Delirium

D. Behavioral disorder

E. Paranoid syndrome

Correct answer is Psychomotor agitation.

The psychotic state in this task is represented by a set of cognitive motor symptoms. The first are represented by the acceleration of mental activity. As a consequence, the acceleration of speech (it is fast and loud). Also, we see symptoms of

over activity, excessive spontaneity, resistance to examination. All this allowed us to conclude that the patient has psychomotor agitation.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. –79 – 80 P.

5. (106_2015) A 39-year-old woman suffering from schizophrenia constantly strains to hear something insisting that "there is a phone connection in her brain and she hears her brother's voice demanding that she come back home". The patient is anxious, suspicious, constantly looking around. Specify the psychopathologic syndrome.

A. Hallucinatory

B. Anxiety

C. Paranoid

D. Paraphrenic

E. Depressive

Correct answer is Hallucinatory.

In this task, you need to pay attention to the patient has imperative pseudo-hallucinations (the voice sounds inside the head of patient, that is, one of the signs of true hallucinations is missing - extroprojection, "her brother's voice demanding that she come back home" - imperative hallucination). Under the influence of these hallucinations, the patient becomes "anxious, suspicious, constantly looking around". Thus, the correct answer is hallucinatory syndrome. At the beginning of the task there is an additional clue that the patient suffers from schizophrenia. Hallucinatory syndrome occurs in patients with schizophrenia quite often.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 29 – 30, 32 P.

6. (174_2015) A 26-year-old patient with affective bipolar disorder has developed a condition manifested by mood improvement, behavioural and sexual hyperactivity, verbosity, active body language, reduced need for sleep. Which of the following drugs would be most effective in this case?

A. Neuroleptics with sedative effect.

B. Antidepressants with activating effect

C. Neuroleptics with activating effect

D. Tranquilizers

E. Antidepressants with sedative effect

Correct answer is Neuroleptics with sedative effect.

The main manifestations of maniacal syndrome are indicated in this task. There is maniacal excitation, which manifested by mood improvement, behavioural and sexual hyperactivity, verbosity, active body language, reduced need for sleep. Neuroleptics with sedative effect is used to treat maniacal excitation.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 398 – 399 P.

7. (182_2015) A 20-year-old woman complains of feeling of air shortage, lingering dull pain in the heart area, irritability. Objectively: general condition is satisfactory, heart rate lability, BP is 130/60 mm Hg. ECG reveals disruption of

repolarization processes. The patient is diagnosed with somatoform autonomic dysfunction of cardiac type. Specify the conditions of the patient treatment:

- A. Out-patient treatment**
- B. In-patient treatment in therapeutics department**
- C. In-patient treatment in cardiology department**
- D. In-patient treatment in cardiac surgery department**
- E. In-patient treatment in psychiatric department**

Correct answer is Somatoform autonomic dysfunction.

In this task, it is necessary to determine the choice of the patient's treatment conditions. In the existing conditions of the problem there are clinical symptoms that confirm the diagnosis of neurocirculatory dystonia of the cardiac type. Objective research methods showed that the general condition of the patient is satisfactory. Also, according to the results of the instrumental method of research, there is no data for the presence of myocardial ischemia and other cardiac pathology. Thus, all of the above leads to the conclusion that the patient needs to be treated on an outpatient basis.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 13, 396 P.

2016

1. (129_2016) A 23-year-old woman has been suffering from a mental disease since the age of 18, the course of disease has no remission periods. At a hospital the patient mostly presents with non-purposeful foolish excitation: she makes stereotypic grimaces, exposes herself, publicly masturbating, loudly laughs, repeating stereotypical abusive shouts. The patient should be prescribed:

- A. Neuroleptics**
- B. Antidepressants**
- C. Tranquilizers**
- D. Nootropics**
- E. Mood stabilizers**

Correct answer is Neuroleptics.

The main manifestations of hebephrenic syndrome are indicated in this task. There is non-purposeful foolish excitation: patient makes stereotypic grimaces, exposes herself, and publicly masturbates with a loud laughter, repeats stereotypical abusive shouts. The disease has begun in the adolescence and has the non-remission course. It indicates a hebephrenic form of schizophrenia. The main group of drugs that is used to suppress hebephrenic excitation and the treatment of schizophrenia is neuroleptics.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 398 – 402 P.

2. (133_2016) A patient is 28 years old. He has been suffering from mental disorder since he was 22. His current condition has changed acutely: for 3 days the patient has been refusing to leave his home. He claims that there is a "telepathy" occurring between him and other people, through which he receives "thoughts of strangers" and transmits his own thoughts for everyone to hear. He thinks his thoughts and actions are manipulated through this "telepathy". Make the preliminary diagnosis:

- A. Paranoid schizophrenia**
- B. Depressive episode**
- C. Catatonic episode**
- D. Organic delirium**
- E. Acute reaction to stress**

Correct answer is Paranoid schizophrenia.

The main symptoms that indicate the correct diagnosis are: delusional ideas (“there is a ”telepathy” occurring between him and other people, through which he receives ”thoughts of strangers” and transmits his own thoughts for everyone to hear”). The combination of delusions and inadequate behavior (the patient refused to leave the house for no apparent reason) is characteristic of paranoid syndrome. In the condition of the task there is information that a young patient suffers from a mental illness. Paranoid syndrome is the main manifestation of the paranoid form of schizophrenia. The only correct answer is paranoid schizophrenia. The remaining distractors do not meet the conditions of the problem.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 266 – 268 P.

3. (134_2016) A 40-year-old patient is registered in a narcological dispensary. Somatically: skin is dramatically hyperemic, sclera are injected, hyperhidrosis is present. BP-140/100mm Hg, heartrate-100/min. Mental state: autopsychic orientation is intact, allopsychic orientation is distorted. The patient presents with motor anxiety. There is an expression of fear on his face. Here fuses to talk about his problems and asks to release him immediately, because he ”maybe killed”. This state developed in a day after one of his regular drinking bouts. What is your provisional diagnosis?

- A. Delirium tremens**
- B. Organic delirium**
- C. Paranoia**
- D. Alcoholic hallucinosis**
- E. Alcoholic paranoid**

Correct answer is Delirium tremens.

The test task describes the picture of delirium tremens (alcoholic delirium). Delirium tremens is characterized by a change in consciousness with a disturbance of the allopsychic orientation and the preservation of autopsychic, the presence of vital fear, “motor anxiety”, vegetative and somatic disorders (“Skin is dramatically hyperemic, sclera are injected, hyperhidrosis is present. BP-140/100mm Hg, heartrate-100/min”). An additional clue is the information that “this state developed in a day after one of his regular drinking bouts”. Therefore, the correct answer is delirium tremens.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 218 – 219 P.

4. (139_2016) A woman has focal encephalitis in the anamnesis. Her spatial orientation is not disrupted. She has a sensation, as if ”everything seems surreal: buildings are small, round or distorted; trees are upside down; people are very tall with thin limbs”. Determine the psychopathologic syndrome:

- A. Derealization**

- B. Depersonalization
- C. Hallucinatory
- D. Oneiric
- E. Cenestopathic

Correct answer is Derealization.

In this task there are indications of a history of encephalitis. In mental status: orientation in his personality is preserved. At the same time, the patient has a feeling of variability surrounding. The patient sees the objects of the world in the wrong shape and size. Thus, it can be said that the patient has derealization syndrome; that is, a change in the sensation of the surrounding while maintaining the correct perception of one's personality.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 33 P.

2017

1. (2_2017) After a 5-day-long celebration of his daughter's wedding a 65-year-old patient "saw" in his yard many cats, chickens, and rats. He tried to chase them away, but was scared off when the animals started to scold him and tried to harm him. Make the diagnosis:

- A. Delirium tremens
- B. Senile psychosis
- C. Schizophrenia
- D. Organic brain syndrome
- E. Reactive hallucinosis

Correct answer is Delirium tremens.

This problem is a dramatically developed state of hallucinosis. The patient sees in the yard a lot of cats, rats, chickens. When you try to drive them away, the "animals" become aggressive, trying to harm the patient. These phenomena frighten the patient. Perceptual disorders in the visual analyzer are complete and true in their structure. There are indications that before the development of this condition, the patient had been celebrating the daughter's wedding for 5 days. This fact indicates a 5-day alcoholic drinking binge and subsequent withdrawal period. Thus, the acute psychotic state against the background of alcohol withdrawal is delirium tremens.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 218 – 219 P.

2. (104_2017) A 34-year-old man is being treated for schizophrenia exacerbation in a psychiatric unit. Objectively: the patient remains in bed, is sluggishly mobile, unresponsive, does not react to questions. His position is unvaried, hypomimic, snout reflex and Dupre's symptom are present, muscles exhibit waxy flexibility. He has been remaining in this state for approximately a week. Feeding is parenteral. Determine the neuromotor disturbance:

- A. Catatonic stupor
- B. Depressive stupor
- C. Psychogenic stupor
- D. Anergic stupor

E. Exogenic stupor

Correct answer is Catatonic stupor.

To substantiate the correct answer to this task, we use the data of history and clinical and psychopathological examination.

The clinical picture of disturbances of effector-volitional sphere in a form of stupor is presented. It proved by the presents of sluggishly mobile, unresponsive and absence of reaction to questions, with unvaried position, hypomimic face, snout reflex and Dupre's symptom, muscles exhibit waxy flexibility, parenteral feeding. These symptoms have been remaining for approximately a week. From the anamnesis it is known that the patient suffers from schizophrenia, is in the period of exacerbation. In this regard, hospitalized in a psychiatric hospital.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 80 – 81 P.

3. (109_2017) A 15-year-old girl complains of dizziness and sensation of lack of air that she develops in emotionally straining situations. Relief occurs after she takes corvalol. Objectively: hyperhidrosis and marble-like pattern of the skin of her palms and feet. Clinical and instrumental examination revealed no organic alterations of the central nervous, cardiovascular, and respiratory systems. What provisional diagnosis can be made?

A. Somatoform autonomic dysfunction

B. Obstructive bronchitis

C. Bronchial asthma

D. Stenosing laryngotracheitis

E. Acute epiglottitis

Correct answer is Somatoform autonomic dysfunction.

This task presents the symptoms of respiratory system disorders (dizziness and sensation of lack of air), symptoms of hyperhidrosis of the skin of the palms and feet. There is no signs of the organic nature of these disorders (clinical and instrumental examination revealed no organic alterations). But, at the same time, there is an indication of the psychogenic cause of the symptoms (symptoms develops in emotionally straining situations) and their relief by taking corvalol. Thus, it is possible to differentiate the organically pathology of respiratory from autonomic nervous system.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 324 – 325 P.

4. (194_2017) A 32-year-old woman complains of episodes of intense fear that occur without visible cause and last for 10-20 minutes; the episodes are characterized by rapid pulse, sweating, labored breathing, and vertigo. Specify the likely diagnosis:

A. Panic disorder

B. Paranoidsyndrome

C. Manic syndrome

D. Simple schizophrenia

E. Claustrophobia

Correct answer is Panic disorder.

In this task, panic disorder must be differentiated with three psychotic states and one non-psychotic. The absence of paranoid syndrome, manic syndrome and simple schizophrenia, indicates by the absence of delusion ideas, hallucinations, cloudiness of consciousness and non-critical attitude to her condition. The presence of emotional and somatic autonomic disorders in the patient indicates a non-psychotic register of mental disorder. The difference between this disorder and a specific phobia is based on the absence of a specific trigger situation.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 308 P.

6. (199_2017) A 54-year-old woman takes antihypertensive drugs for hypertension. Having discovered that her son was arrested and is under investigation, became agitated and extremely anxious. She lost her orientation in place, stopped recognizing her relatives, started hearing "voices" threatening her and her son with violence. She had opened her window (on the 8th floor) and tried to jump out, resisted the people, who were holding her back. What drugs should be administered to terminate such condition of the patient?

- A. Antipsychotics**
- B. Antidepressants**
- C. Tranquilizers**
- D. Nootropics**
- E. Antihypertensive drugs**

Correct answer is Antipsychotics.

In this task, you should pay attention to the presence of the patient's mental trauma ("her son was arrested and is under investigation") and indication of the presence of her hypertension. The combination of trauma and organic changes in the brain, under the influence of hypertension, provoked "agitated and extremely anxious". Later, the patient developed a psychotic version of the twilight disorder of consciousness ("She lost her orientation in place, stopped recognizing her relatives, started hearing "voices" threatening her and her son with violence"), under the influence of "threatening voices" in the disturbed consciousness tried to jump out of the window (psychomotor agitation). The task question is focused on stopping an emergency state (psychotic disturbance of consciousness). All listed requirements meet antipsychotic.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 398 – 402 P.

2018

1. (168_2018) A 48-year-old woman developed insomnia, depressive mood, anxiety, fears and suicidal thoughts after the death of her husband that occurred one month ago. During her stay in the hospital she speaks in a low voice, is depressed, anxious, avoids sleeping, refuses to eat. What medications should be prescribed in this case?

- A. Antidepressants**
- B. Antipsychotics**
- C. Group B vitamins**

D. Nootropics

E. Anticonvulsants

Correct answer is Antidepressants.

This task presents a picture of depression. The patient has depressed mood, anxiety, suicidal thoughts. In addition, she has a disturbed sleep and appetite, low voice. From the anamnesis, the cause of this mental disorder is known: the symptoms appeared after the death of the patient's husband. Of the presented drugs, it is preferable to choose antidepressants. This is a group of drugs specific for the treatment of non-circular depression.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 405 – 407 P.

2. (178_2018) The mother of an epileptic son complains of her son periodically presenting with irritable depression, when he becomes excited and prone to physical aggression and violence. These moods last for 5-10 minutes, after which the patient exhausts himself and falls asleep. Upon waking he is depressed, sad, cannot recall his actions or recalls them only partially. What psychopathologic condition is it?

A. Dysphoria

B. Dysthymia

C. Epileptic delirium

D. Pathologic affect

E. Ambulatory automatism

Correct answer is Dysphoria.

This task presents a clinical case of epilepsy, which is manifested, inter alia, with the equivalents of epileptic seizures. They occur periodically, with a duration of 5-10 minutes. After them, sleep occurs, with accompanied by partial amnesia and other symptoms (depression, sadness). This psychopathological phenomenon is represented by dysphoria, as an irritable depression, excitement, physical aggression and violence.

Psychiatry: [Textbook]/ V.L. Gavenko, V.M. Sinayko, G.A. Samardakova and others; reduction by V.L. Gavenko, - Kharkiv: Region-inform, 2006. – 66, 200 – 201 P.