Psychosis as the Diagnosis, Drugs as the Cause

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**10-question quiz:**

1. Which of the following is true about psychosis?
2. It occurs only in the context of schizophrenia or bipolar disorder
3. It includes symptoms such as anhedonia and constricted affect
4. It is a symptom, not an illness
5. People without mental illness will not experience a psychotic episode
6. Which of the following stimulants is most likely to induce psychosis?
7. Concerta
8. Ritalin
9. Provigil
10. Adderall
11. Which of the following is true about corticosteroid-induced neuropsychiatric disorder?
12. Risk increases with increasing corticosteroid dose
13. It is a risk with oral or injectable corticosteroids, but not inhaled formulations
14. It is more common in male patients
15. If a patient has tolerated a corticosteroid in the past, there is less of a chance the patient will develop neuropsychiatric symptoms
16. Which of the following comorbidities increases the risk that a patient develops anticholinergic-induced psychosis?
17. Dementia
18. Schizophrenia
19. Renal dysfunction
20. Diabetes mellitus
21. Which of the following medications should be discontinued first if a patient develops Parkinson’s disease psychosis?
22. Pramipexole
23. Selegiline
24. Entacapone
25. L-dopa

KR is a 53 year-old female with no previous psychiatric history. Her past medical history includes hypothyroidism and hypertension. She presents to the emergency department with her husband and states that the FBI has been watching her through her computer for the past week and that she can hear them giving her secret instructions that her husband cannot hear.

All labs are WNL and her urine toxicology screen is negative.

1. Which of the following patient factors may indicate that KR’s psychotic symptoms are NOT associated with a mental illness?
2. The severity of her psychosis
3. Her age at onset of psychosis
4. Her comorbid hypothyroidism
5. The duration of her psychosis

KR’s current medication include the following:

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| --- | --- | --- |
| **Medication** | **Indication** | **Duration of Treatment** |
| Acetaminophen 650 mg po q6h prn | Headache, body aches | 3 months |
| Amlodipine 10 mg po daily | Hypertension | 1 month |
| Levothyroxine 37.5 mcg po daily | Hypothyroidism | 2 years |
| Lisinopril 10 mg po daily | Hypertension | 1 year |
| Metoprolol XL 50 mg po daily | Hypertension | 1 month |

1. Which of KR’s medications is most likely to be contributing to her current presentation?
2. Acetaminophen
3. Amlodipine
4. Lisinopril
5. Metoprolol XL

A 14 year-old male patient is brought to the ED by his parents who are very concerned. He has been saying that he does not “feel real” and has been experiencing auditory, visual, and tactile hallucinations. He was recently started on Adderall XR for ADHD. His parents insist that he does not use illicit drugs or alcohol, however his Utox is positive for PCP.

1. Which of the following may be responsible for the patient’s symptoms?
2. New prescription for Adderall XR
3. Overuse of dextromethorphan
4. PCP use
5. All of the above are possible
6. Dextromethorphan has a similar mechanism of action as which of the following drugs:
7. Ketamine
8. Cocaine
9. Methamphetamine
10. LSD
11. The compounds commonly utilized in weight-loss products may have qualities similar to which of the following drugs:
12. Cocaine
13. PCP
14. Amphetamine
15. Heroin