Update on abuse and dependence: crack

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1. Which of the following is true regarding the symptoms of crack dependence and abstinence?

- a. They are usually less intense in the first seven days.
- b. They are more intense when the patient is in a protected environment.
- c. Depressive symptoms are common.
- d. Anxiety symptoms are rare.

2. Which of the following is true regarding the start of treatment of these patients?

- a. Topiramate is not beneficial.
- b. Disulfiram is not beneficial.
- c. Modafinil is not beneficial.
- d. The dose of modafinil is 200-400 mg/day.

3. Which of the following is not true about the effects of crack use during pregnancy and on the newborn?

- a. Increased risk of premature birth.
- b. Low birth weight.
- c. Behavioral alterations beyond school age.
- d. Children born to mothers who are crack users have autonomic instability.

4. Which of the following is true regarding the diagnosis of crack dependence?

- a. Hair analysis can help in the monitoring of abstinence.
- b. Neuroimaging is useful in the diagnosis of dependence.
- c. The measurement of cocaine metabolites in urine identifies use within the last ten days.
- d. The diagnosis of use within the last six months can be performed through body fluids.

5. Which of the following is not a risk factor for crack use?

- a. Alcohol.
- b. Cigarettes.
- c. Belonging to marginalized groups.
- d. Religiousness.

RESPONSES TO CLINICAL SCENARIO:

UPDATE ON GASTROESOPHAGEAL REFLUX DISEASE (GERD): NON-PHARMACOLOGICAL TREATMENT [PUBLISHED IN RAMB 2012; 58(2)]

- 1. Elevating the head of the bed at night reduces esophageal acid exposure (Alternative A).
- 2. Hiatal hernia > 2 cm and fixed (Alternative B).
- 3. Surgical treatment in patients refractory to acid suppression (Alternative D).
- 4. Nissen produces more dysphagia (Alternative C).
- 5. Fruit and fiber consumption is a protective factor (Alternative D).