UNIVERSITY OF SWAZILAND

FACULTY OF HEALTH SCIENCES

FINAL EXAMINATION PAPER DECEMBER 2018

TITLE

MENTAL HEALTH PROBLEMS AND SOCIETY I

COURSE :

:

NUR 552

DURATION:

TWO (2) HOURS

MARKS

75

INSTRUCTIONS:

1. ANSWER ALL QUESTIONS

2. **EACH QUESTION CARRIES 25 MARKS**

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Question 1: Multiple choice questions

Select the response that that best answers each of the following questions and indicate your choice by writing the letter preceding the response next to the corresponding number e.g. 55=p.

- 1. Repeated episodes of aggressive, violent behaviour in which one reacts in a manner that is grossly out of proportion to the situation is characteristic of
 - a) Conduct disorder
 - b) Psychotic disorder
 - c) Intermittent explosive disorder
 - d) Oppositional defiant disorder
- 2. Hostile behaviour, especially towards adults in authority roles is indicative of
 - a) Oppositional defiant disorder
 - b) Intermittent explosive disorder
 - c) Disruptive behaviour disorders
 - d) Antisocial personality disorder
- 3. Mabona, 15 years of age, always violates societal norms, and the personal or property rights of others. As a mental health nurse, you may diagnose him as likely having
 - a) An antisocial personality disorder
 - b) A conduct disorder
 - c) An attention deficit disorder
 - d) A pyromanic disorder
- 4. In the DSM -5, a physical illness that causes mental /psychiatric symptoms is listed as
 - a) A specifier
 - b) A secondary diagnosis
 - c) A medical diagnosis
 - d) A primary diagnosis
- 5. Individuals described as having disruptive, impulse-control and conduct disorders generally break rules or laws because they have an inability in controlling their
 - a) Emotions
 - b) Impulses
 - c) Thoughts
 - d) Behaviours
- 6. Antisocial personality disorder is characterised by
 - a) A long standing pattern of over concern of others
 - b) A long standing pattern of disregard for, and violation of the rights of others
 - c) A long standing pattern of disregard for individuals who are sociable
 - d) A long standing pattern of fear of people who are bullies
- 7. Musa has been diagnosed with schizoid personality disorder. The main feature of his personality is likely to be
 - a) Emotional coldness
 - b) Disorganised speech
 - c) Manic episodes
 - d) Agoraphobia
- 8. People with cluster B personality disorders usually present with
 - a) Problems with impulse control and emotional regulation
 - b) Odd and eccentric behaviours
 - c) Distrust and suspiciousness of other people
 - d) Anxiety and fearfulness

- 9. Other treatment options for bipolar disorder include:
 - a) Oxygen therapy
 - b) Antidepressants and electro-convulsive therapy
 - c) Yoga and meditation
 - d) Hydrotherapy
- 10. Mania can be described as
 - a) Anger followed by sleepiness
 - b) Low or deflated mood
 - c) Abnormally elevated mood
 - d) Alternating high and low moods
- 11. Sisimo is hyperactive, as displayed by an inability to stay in one place for long. Despite this perpetual activity, Sisimo achieves little, as he does not finish things that he starts. Invariably Sisimo is first up in the morning but last to breakfast. This behaviour describes a:
 - a) Manic client
 - b) Psychotic client
 - c) Anxious client
 - d) Depressed client
- 12. Based on the nurse's knowledge of DSM V it is understood that the presence of psychotic symptoms for a period less than a month but at least one day is a characteristic of
 - a) Schizoaffective disorder
 - b) Schizophrenic spectrum disorder
 - c) Brief psychotic disorder
 - d) Schizophreniform disorder
- 13. For the past year a client has received haloperidol. The nurse administering the client's next dose notes a twitch on the right side of the client's face and tongue movements. Which nursing intervention takes priority?
 - a) Administer haloperidol along with benztropine 1 mg PRN per order
 - b) Assess for other signs of hyper-glycemia resulting from use of haloperidol
 - c) Check the client's temperature and assess mental status
 - d) Withhold the haloperidol and call the physician
- 14. Symptoms that develop when a person is responding to a particular event or situation, such as a loss, a problem in a close relationship, an unwanted move, a disappointment, or a failure best describe a/an
 - a) Post-traumatic stress disorder
 - b) Adjustment disorder
 - c) Acute stress disorder
 - d) Disinhibited attachment disorder
- Clients diagnosed with obsessive-compulsive disorder commonly use this defense mechanism
 - a) Suppression
 - b) Repression
 - c) Denial
 - d) Undoing

- 16. A client with a long history of alcoholism recently has been diagnosed with Wernicke-Korsakoff syndrome. Which symptoms should the nurse expect to assess?
- a) A sudden onset of muscle pain with elevation of creatinine phosphokinase
- b) Signs and symptoms of congestive heart failure
- c) Loss of short-term and long-term memory and the use of confabulation
- d) Inflammation of the stomach and gastro-oesophageal reflux disorder
- 17. While performing an admission interview, the nurse learns that the client drinks to avoid early morning "shakes". The nurse recognizes this behaviour as
- a) Substance abuse
- b) Substance intoxication
- c) Substance dependence
- d) Delirium tremens
- 18. Which of the following is a behavioural symptom exhibited by individuals suffering from major depression?
 - a) Unpredictable and erratic behaviour
 - b) Compulsive checking
 - c) Staying in bed the whole day
 - d) Ritualised behaviour
- 19. Which of the following is a chronic mood disturbance that can cause depressive symptoms, but does not disrupt normal functioning?
- a) Cyclothymia
- b) Dysthymia
- c) Personality disorder
- d) Dissociative disorder
- 20. A speech disorder characterized by pathologic repetition of words said by another is
 - a) Echopraxia
- b) Echolalia
- c) Circumstantiality
- d) Looseness of association
- 21. A client diagnosed with a panic attack has a nursing diagnosis of social isolation related to fear. Using a cognitive approach, which nursing intervention is appropriate?
 - a) Discuss with the client the situation before the occurrence of a panic attack
 - b) Encourage the client to acknowledge two trusted individuals who can assist the client during a panic attack
 - c) Remind the client to use a journal to express feelings surrounding the panic attack
 - d) During a panic attack, remind the client to say "I know this attack will last only for a few minutes"
- 22. In Major Depression, which of the following is a significant neurotransmitter?
 - a) Serotonin
- b) Dopamine
- c) Acetylcholine
- d) Betacarotene

- 23. Which of the following is a verbal or written threat performed through the use of an electronic communication device and made with the intent to place the person that is the target of the threat in reasonable fear for his or her safety or the safety of his or her family?
 - a) Stalking
 - b) Cyberstalking
 - c) Harassment
 - d) Cyberassault
- 24. An anxiety disorder is
 - a) An emotional state identified by panic attacks
 - b) An emotional condition classified by excessive checking
 - c) Disordered thinking
 - d) An aroused state characterised by feelings of apprehension, uncertainty and fear
- 25. It is considered that successful cognitive behavioural therapy (CBT) treatments of social phobia include elements of the following
 - a) Exposure therapy
 - b) Social skills training
 - c) Changing the way one thinks about the situation
 - d) All of the above

Question 2

Conducting a mental status assessment is one of the essential skills that a psychiatric-mental health should master. In the table below, match each of the statements that describe a nurse's findings in a mental status assessment with the relevant area of assessment. In your answer sheet write the question number and the alphabet (in upper case) representing the answer you have selected (25 Marks).

| Finding | Area of Assessment |
|---|------------------------------|
| 1. Aware of time, place, person, knows length of stay in hospital, | A. Sensitivity |
| is not aware of where he is. | |
| 2. Hallucinations and illusions. | B. Speech |
| 3. False belief of one's importance, power and identity, false belief | C. Attention |
| that one is being cheated or harassed. | |
| 4. Unrealistic, irrational fears. | D. Mood |
| 5. Amnesia, fugue, confabulation. | E. Affect |
| 6. Subnormal, average, above average intellectual capacity. | F. Phobic thoughts |
| 7. Patient's ability to identify existence of a problem. | G. Insomnia |
| 8. Normal in rate, tone or volume or fast, pressured and loud. | H. Homicidal ideation |
| 9. The main reason a patient is seeking mental health examination. | I. Memory |
| 10. What a client would do in a social situation such as "what | J. Attitude |
| would you do if you found a stamped addressed envelope on the | |
| street. | |
| 11. Desire to do serious harm or take the life of another person. | K. Delusion |
| 12. Desire to end one's life. | L. Thought content |
| 13. Awkward posture or position for prolonged period. | M. Appearance |
| 14. Wears excessive makeup, bright colours, overweight. | N. Perception |
| 15. Happy, sad, expressionless, appropriate to the situation. | O. Echolalia |
| 16. Feeling of unworthiness, helplessness, guilt or obsessions. | P. Echopraxia |
| 17. Easily hurt or damaged, susceptible. | Q. Behaviour and psychomotor |
| | activity |

| Finding | Area of Assessment |
|--|----------------------|
| 18. Excessive imitation of another person's behaviours | R. Catatonia |
| 19. Repetition of one person's words by another. | S. Chief complaint |
| 20. Hyperactivity, agitation or poverty of movement | T. Suicidal ideation |
| 21. Diminished amount of sleep, early morning awakening | U. Intelligence |
| 22. Able to explain "no use crying over spilt milk" | V. Judgement |
| 23. Labile, blunted, ambivalence | W. Orientation |
| 24. Difficulty finishing tasks, easily distracted, having difficulty | X. Insight |
| concentrating | _ |
| 25. Hostile, evasive, defensive | Y. Abstract thought |

TOTAL = 25

Question 3

- a) Macembe, a 50-year old employed as an accountant in a private company, is admitted to hospital with broken ribs, a fractured leg and contusions following a car accident due to his drinking. This admission is the third one this year. He admits that he has a drinking problem. He has had the problem for 15 years but says he only drinks when he has problems. On physical examination he has a large hard liver, appears malnourished and reports difficulty with sleep.
 - i) What probable diagnosis would you assign to Macembe? Use the DSM V criteria to support your given diagnosis. (3 marks)
 - ii) Manage Macembe over 2 areas of nursing need.

(7 marks)

- b) Outline the DSM V diagnostic criteria for the following conditions:
 - Histrionic personality disorder

(5 marks)

ii) Conduct disorder

(5 marks)

iii) Depression

(5 marks)

Total 25 marks