



Continuing Education Quiz for Counselors

Substance abuse counselors can earn two nationally certified continuing education (CE) hours by reading the indicated articles and completing the multiple-choice quiz below. This is an open-book exam. Complete the quiz by circling one or more of the multiple-choice answers. Be sure to answer all questions; unanswered questions will be scored as incorrect. You must score at least 70 percent to earn CE hours. Please note that we must receive your quiz by September 15, 2008.

Challenges in Using Opioids to Treat Pain in Persons With Substance Use Disorders—page 4

1. Substance abuse clinicians have a role in chronic pain treatment because:

- a. cognitive and behavioral therapies support both recovery and pain control;
- b. they can provide insightful differential diagnosis of opioid misuse;
- c. they can contribute to pain treatment plans that are mindful of patients' drug problems;
- d. all of the above.

2. Physiologically, an individual's pain can be classified as:

- a. chronic, homeostatic, or a combination of the two;
- b. neuropathic, nociceptive, or a combination of the two;
- c. autonomic, sympathetic, or a combination of the two;
- d. pathological, neurological, or a combination of the two.

3. Addiction and chronic pain can reinforce one another, because:

- a. individuals may continue or intensify drug abuse to try to cope with pain;
- b. alternating periods of intoxication and withdrawal can increase pain;
- c. both addiction and chronic pain can result in nonrestorative sleep, anxiety, depression, or stress;
- d. all of the above.

4. Principles that apply to opioid therapy for pain include:

- a. every patient deserves effective pain treatment;
- b. a short course of opioids for acute pain seldom alters the course of addiction recovery;
- c. opioid tolerance and withdrawal always indicate addiction;
- d. all of the above.

The Search for Medications to Treat Stimulant Dependence—page 28

5. Two medications currently in development for helping patients overcome initial cocaine withdrawal symptoms are:

- a. propranolol and modafinil;
- b. tiagabine and topiramate;
- c. topiramate and disulfiram;
- d. disulfiram and propranolol.

6. Medication strategies currently being tested for treatment of stimulant abuse include:

- a. increasing GABA neurotransmission to reduce craving and prevent relapse to cocaine;
- b. using a vaccine to create antibodies to keep methamphetamine from crossing the blood-brain barrier;
- c. increasing dopamine neurotransmission to alleviate mood symptoms during withdrawal;
- d. all of the above.

Dialectical Behavior Therapy for Substance Abusers—page 39

7. In dialectical behavior therapy (DBT), the term *dialectic* can be defined as:

- a. compelling the patient to confront logical inconsistencies in his or her assumptions and behaviors;
- b. meeting patients outside the clinic to better understand what their home environments are like;
- c. the synthesis of two opposed therapeutic goals, such as acceptance of one's current circumstances and a commitment to change them for the better;
- d. the relationship between periods of substance use and periods of abstinence.

8. In DBT, relapse is:

- a. a problem to be solved and an opportunity to explore behaviors that preceded and followed

drug use;

- b. a sign that therapy must shift focus to promote behavioral change alone;
- c. an indication that the patient has not embraced the dialectical approach and that a refresher on the fundamental principles of DBT is necessary;
- d. inevitable.

9. As therapeutic retention can be a problem for persons with a substance use disorder, practitioners of DBT:

- a. recommend inpatient treatment for the majority of patients;
- b. have patients provide lists of places they may be found if they do not show up for sessions and provide sessions in patients' communities;
- c. work in conjunction with officials from law enforcement or the judicial/parole system, when possible, to ensure that attendance at therapy sessions is court-mandated;
- d. all of the above.

This issue of *Addiction Science @ Clinical Practice* has the following objectives for drug abuse treatment providers and researchers:

- to explain the mechanisms of pain, its interrelationship with substance use, the clinical and ethical challenges of treating pain in patients with a substance use disorder, and some practical guidelines for clinicians and therapists working with such patients;
- to discuss the medications, vaccines, and behavioral interventions currently in development for treating cocaine, amphetamine, and methamphetamine dependence; and
- to describe dialectical behavior therapy, its adaptation for and application to substance use disorders, and ways therapists can learn more about this program.

Please print legibly, copy page, and mail with your \$25 payment to: AS&CP CE Quiz, MasiMax Resources, Ste. 175, 1375 Piccard Drive, Rockville, MD 20850. Quiz and payment must be received by September 15, 2008.

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I certify that I have answered the test questions without any help.

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Make checks payable to MasiMax Resources, Inc. In about 6 weeks you will receive notification of the results and, if you score 70 percent or higher, a certificate of completion. The National Institute on Drug Abuse, publisher of *Addiction Science @ Clinical Practice*, is a NAADAC-approved provider of continuing education home study.