

Chapter 102, Self-Assessment Questions

1. Pharmacologic treatment is an option for a patient with a BMI of ____ kg/m^2 and hypertension when weight loss goals have not been met following comprehensive lifestyle intervention for 6 months.

- A. 22
- B. 26
- C. 32
- D. 24
- E. None of the above

2. A female patient with a BMI of $31 \text{ kg}/\text{m}^2$ comes into the clinic today. She has type 2 diabetes mellitus and smokes. What is the goal of treatment for this patient?

- A. Prevent weight gain.
- B. Promote weight loss at a rate of 1 to 2 lb (~0.5–0.9 kg) per week.
- C. Control related risk factors.
- D. Both A and B are correct answers
- E. Answers A, B, and C are correct

3. Orlistat may cause severe liver damage. Which of the following are symptoms of severe liver damage that should be immediately reported to the patient's health care provider?

- A. Itching
- B. Yellowing of the eyes or skin
- C. Dark urine
- D. All of the above
- E. None of the above

4. A 56-year-old male patient presents to clinic. He has a past medical history of GERD, sleep apnea, allergic rhinitis, and osteoarthritis. He currently smokes two packs per day and continues to drink two alcoholic beverages on the weekend. Which of the following are obesity-related comorbidities that increase this patient's risk of death?

- A. GERD, allergic rhinitis, and osteoarthritis
- B. Sleep apnea, current tobacco use, and osteoarthritis
- C. GERD, sleep apnea, and current alcohol intake
- D. Current tobacco use, allergic rhinitis, and GERD
- E. Sleep apnea, allergic rhinitis, and GERD

5. A patient recently diagnosed with obesity (160 lb [73 kg]; BMI, 31 kg/m²) 2 weeks ago returns today with her food diary. Upon review, her average daily caloric intake is 2200 kcal/day (9209 kJ/day). What suggestions, if any, do you provide for her today?

- A. Restrict daily calories to 600 kcal/day (2511 kJ/day).
- B. Restrict daily calories to 1100 kcal/day (4604 kJ/day).
- C. Restrict daily calories to 1700 kcal/day (7116 kJ/day).
- D. Restrict daily calories to 50% of current diet.
- E. Do not restrict caloric intake.

6. The four stages suggested for the treatment of obesity in children and adolescents include all of the following *except*:

- A. Intensive Weight Lifting Program
- B. Structured Weight Management
- C. Prevention Plus
- D. Tertiary Care Intervention

E. Comprehensive Multidisciplinary Intervention

7. Bariatric surgery is a viable option for weight loss in the following situation:

A. A patient with a BMI of 25 kg/m²

B. A patient with a BMI greater than 30 kg/m² and hypertension

C. A patient with a BMI greater than 35 kg/m² and GERD

D. A patient with a BMI of 38 kg/m²

E. A patient with a BMI greater than 35 kg/m² and diabetes mellitus type 2

8. The following are potential considerations for medication management following bariatric surgery *except*:

A. Avoid NSAID use

B. Recommend fat-soluble vitamins

C. Recommend vaginal suppositories

D. Recommend extended-release agents

E. Avoid oral bisphosphonates

9. Which of the following is *not* a recommended reduced-calorie diet?

A. AHA Step-1 diet

B. High-protein diet

C. Vegas ultra diet

D. Low-fat diet

E. Mediterranean diet

10. All of the following drugs can cause weight gain *except*:

A. Selective serotonin reuptake inhibitors

B. Phenytoin

- C. Insulin
- D. Corticosteroids
- E. Quetiapine

11. Your collaborative physician calls you for a recommendation for his obese, 59-year-old female patient with a history of hypertension and previous myocardial infarction. She has been adhering to a calorie-restricted diet and has increased her physical activity but still has been unable to attain her weight loss targets. The physician asks what pharmacologic choice you would recommend.

- A. Orlistat
- B. Phentermine
- C. Diethylpropion
- D. Amphetamine
- E. Phendimetrazine

12. A patient taking one tablet of phentermine 37.5 mg daily presents to your pharmacy today complaining that she has been unable to sleep at night. The insomnia started about the same time as the phentermine was initiated. She denies heart palpitations but reports being a little irritable and has a dry mouth. She also reports that she takes the medication with her largest meal in the evening. What would you recommend she do?

- A. Take one tablet every other day.
- B. Cut the tablet in half and take one-half tablet twice daily.
- C. Take one tablet every morning.
- D. Take one-half tablet every morning.
- E. Take one tablet twice daily.

13. Which of the following educational statements would you *not* provide to a patient starting orlistat?

- A. Increased gas and oily stools may occur while taking orlistat.
- B. Take orlistat three times a day with or without food.
- C. Take a multivitamin daily 2 hours before or after the dose of orlistat.
- D. If the patient is also taking levothyroxine daily, separate the doses by 4 hours.
- E. Orlistat may be taken up to 1 hour after a meal.

14. All of the following are common adverse drug reaction associated with naltrexone-bupropion use except:

- A. Nausea
- B. Diarrhea
- C. Headache
- D. Dizziness
- E. Insomnia

15. Which of the following pharmacologic agents for weight loss are approved for long-term use?

- A. Orlistat
- B. Lorcaserin
- C. Phentermine-topiramate
- D. All of the above
- E. None of the above

Answers

1. C

2. E

3. D

4. B

5. C

6. A

7. E

8. D

9. C

10. B

11. A

12. C

13. B

14. B

15. D

