Psychiatry Board Exam Questions

## Topic: Major Depressive Disorders and Associated Disorders

1. A 28-year-old woman presents to the psychiatric clinic reporting persistent sadness, loss of interest in activities she once enjoyed, and significant weight loss over the past two months. She also reports difficulty sleeping, fatigue, and recurrent thoughts of death, but denies any active suicidal plans or attempts. She has no past psychiatric history, no substance use, and normal medical workup results. Which of the following DSM-5 criteria must be met for a diagnosis of Major Depressive Disorder (MDD) in this patient?

a) A. Presence of at least two manic symptoms during the depressive episode

b) B. Presence of five or more depressive symptoms during the same 2-week period

c) C. Symptoms must cause significant distress or impairment in social, occupational, or other important areas of functioning

d) D. Symptoms must not be attributable to the physiological effects of a substance or another medical condition

Correct Answer: B. Presence of five or more depressive symptoms during the same 2-week period

Rationale:

The correct answer is B. According to the DSM-5 criteria for Major Depressive Disorder, a diagnosis requires the presence of five or more depressive symptoms during the same 2-week period, and at least one of the symptoms should be either depressed mood or loss of interest or pleasure. Option A is incorrect because manic symptoms are not required for MDD and would instead suggest a bipolar disorder. Option C is accurate and necessary for diagnosis, but it does not specifically address the critical quantitative measure of depressive symptoms required. Option D is also a correct consideration in diagnosis to rule out other causes, but it does not detail the specific symptom threshold needed for an MDD diagnosis.

## Topic: Bipolar Disorders and Related Disorders

2. A 29-year-old woman presents to the emergency department with her mother, who is concerned about her daughter's decreased need for sleep, increased energy, and impulsive decision-making over the past week. The patient has maxed out her credit cards purchasing expensive items she cannot afford and has become extremely irritable when questioned about her actions. Her speech is rapid and pressured, and she insists she has discovered a cure for a major illness, although she has no medical or scientific training. She denies any hallucinations or substance use, and her medical history reveals a past episode of depression six months ago, but she has not been treated for it. Based on this scenario, what is the most likely diagnosis?

a) A. Bipolar I Disorder

b) B. Bipolar II Disorder

c) C. Cyclothymic Disorder

d) D. Major Depressive Disorder

Correct Answer: A. Bipolar I Disorder

Rationale:

A. Bipolar I Disorder. This diagnosis is most appropriate as it accounts for the manic symptoms described: decreased need for sleep, increased energy, grandiosity (believing she discovered a cure), impulsivity, and irritability, all lasting for more than a week. The presence of a prior depressive episode supports the diagnosis of Bipolar I Disorder. Option B is incorrect because Bipolar II Disorder involves hypomanic episodes, which are less severe and not accompanied by significant social or occupational impairment or hospitalization. Option C is incorrect as Cyclothymic Disorder involves numerous periods of hypomanic and depressive symptoms that do not meet full criteria for mania or major depression, persisting for at least two years. Option D is incorrect because Major Depressive Disorder does not include manic or hypomanic episodes.

## Topic: Major Depressive Disorders and Associated Disorders

3. A 42-year-old man visits his psychiatrist and describes his mood as persistently "low and empty" for the past six months. He reports feeling hopeless and experiencing fatigue nearly every day. He has stopped attending social gatherings and lost interest in hobbies he once enjoyed. His friends have noticed a change in his demeanor, describing him as "detached and indifferent." He denies any manic or hypomanic symptoms, but acknowledges that he has difficulty concentrating and makes minor mistakes at work. Which of the following factors is most critical to exclude before confirming a diagnosis of Persistent Depressive Disorder (Dysthymia) according to DSM-5 criteria?

a) A. Recent bereavement

b) B. Presence of a hypomanic episode

c) C. History of depressive episodes lasting less than two months

d) D. Use of antidepressant medication

Correct Answer: B. Presence of a hypomanic episode

Rationale:

The correct answer is B. Presence of a hypomanic episode. Persistent Depressive Disorder (Dysthymia) in DSM-5 requires a persistently depressed mood for at least two years without a history of hypomanic, manic, or mixed episodes, distinguishing it from Bipolar Disorder. The presence of a hypomanic episode would indicate a Bipolar Disorder diagnosis rather than Dysthymia.   
  
Option A is incorrect; recent bereavement might contribute to depressive symptoms, but if these symptoms persist beyond a typical bereavement period and meet the duration criteria, Dysthymia could still be diagnosed.  
  
Option C is incorrect; while shorter depressive episodes between periods of normal mood might suggest another condition, the question specifies persistent symptoms lasting over six months, which supports the consideration of Dysthymia (even though the duration required is two years).  
  
Option D is incorrect; the use of antidepressants does not exclude a diagnosis of Dysthymia, though it may complicate the clinical picture.

## Topic: Bipolar Disorders and Related Disorders

4. A 35-year-old man is brought to the psychiatric clinic by his spouse, who reports that the patient has been experiencing periods of elevated mood alternating with periods of depression over the past two years. During his elevated mood episodes, he becomes overly talkative and has inflated self-esteem, but continues to function adequately at work without impairments. The depressive episodes, however, do result in significant distress, leading to absenteeism. The patient has no history of manic episodes lasting seven days or requiring hospitalization. He has no current medical issues and is not on any medication. What is the most likely diagnosis?

a) A. Persistent Depressive Disorder

b) B. Bipolar II Disorder

c) C. Cyclothymic Disorder

d) D. Bipolar I Disorder

Correct Answer: C. Cyclothymic Disorder

Rationale:

The most likely diagnosis for this patient is Cyclothymic Disorder (C). Cyclothymic Disorder is characterized by chronic fluctuations of mood involving numerous periods of hypomanic symptoms that do not meet the full criteria for a hypomanic episode, and depressive symptoms that do not meet the full criteria for a major depressive episode. This condition persists for at least two years in adults. In this scenario, the patient's mood fluctuations do not meet the criteria for full manic or major depressive episodes, and there is no history of manic episodes, which excludes Bipolar I Disorder (D). Bipolar II Disorder (B) requires the presence of at least one major depressive episode and at least one hypomanic episode. Although the patient has depressive episodes, the full criteria for hypomanic episodes are not described. Persistent Depressive Disorder (A) is not applicable because it does not involve the hypomanic symptoms the patient is experiencing.

## Topic: Major Depressive Disorders and Associated Disorders

5. A 30-year-old man has been experiencing persistent low mood, fatigue, and lack of interest in activities for the past four months. He reports difficulty concentrating and sleeping, and has had a significant unintentional weight gain. He denies any history of manic or hypomanic episodes. His medical history is unremarkable, and there is no evidence of substance use. Genetic predisposition is suspected due to a family history of depression. Which of the following treatments is most appropriate for this patient if his symptoms are causing significant impairment in daily functioning?

a) A. Electroconvulsive therapy (ECT)

b) B. Cognitive behavioral therapy (CBT)

c) C. Mood stabilizers

d) D. Psychoanalysis

Correct Answer: B. Cognitive behavioral therapy (CBT)

Rationale:

The correct answer is B. Cognitive behavioral therapy (CBT). This patient meets the criteria for Major Depressive Disorder (MDD), given his persistent low mood, anhedonia, and other depressive symptoms. CBT is an effective first-line treatment for MDD that can help the patient cope with negative thought patterns and improve mood and functioning. Although ECT (A) is effective for severe depression, it is typically reserved for treatment-resistant cases or when rapid response is necessary. Mood stabilizers (C) are primarily used for bipolar disorder, not MDD. Psychoanalysis (D) is a long-term therapy that is less commonly used as a first-line treatment for depression due to its time intensity and limited evidence for effectiveness in acute depression.

## Topic: Bipolar Disorders and Related Disorders

6. A 42-year-old man comes to the clinic reporting significant mood swings for the past eight months. He describes periods of " being on top of the world," feeling extremely optimistic, energetic, and needing very little sleep. These episodes can last for three to four days, during which he takes on ambitious projects but becomes easily distracted. However, these periods are followed by abrupt transitions to feeling hopeless, fatigued, and experiencing a loss of interest in activities he usually enjoys. During these depressive episodes, he reports sleeping excessively, feeling guilty about his inability to maintain friendships, and having thoughts of worthlessness, though he denies any suicidal ideation. His mood swings have started affecting his job performance, but he has not required hospitalization, and there's no history of psychotic symptoms. Based on the DSM-5 criteria, what is the most likely diagnosis?

a) A. Bipolar I Disorder

b) B. Major Depressive Disorder

c) C. Bipolar II Disorder

d) D. Cyclothymic Disorder

Correct Answer: C. Bipolar II Disorder

Rationale:

The correct answer is C. Bipolar II Disorder. According to DSM-5 criteria, Bipolar II Disorder is characterized by a pattern of depressive episodes and hypomanic episodes. In this case, the patient experiences symptoms consistent with hypomania (increased energy, reduced need for sleep, and grandiosity) without the full manic episodes that are required for a Bipolar I Disorder diagnosis. The episodes are not severe enough to cause marked impairment or necessitate hospitalization, ruling out Bipolar I Disorder. His depressive episodes are significant, and the presence of hypomanic episodes differentiates it from Major Depressive Disorder. Cyclothymic Disorder is characterized by more chronic fluctuations with less severe symptoms, which do not fully meet the criteria for hypomanic or depressive episodes, making it an incorrect choice.

## Topic: Major Depressive Disorders and Associated Disorders

7. During a follow-up appointment, a 45-year-old patient reports feeling significantly better after starting on a selective serotonin reuptake inhibitor (SSRI) for Major Depressive Disorder (MDD) four weeks ago. However, the patient now experiences unusual bruising and notes that their gums bleed easily when brushing. As a psychiatrist, what should be your next step in managing this patient?

a) A. Increase the SSRI dosage

b) B. Switch to a different antidepressant class

c) C. Order a complete blood count (CBC) and assess platelet function

d) D. Continue the current SSRI regimen and observe

Correct Answer: C. Order a complete blood count (CBC) and assess platelet function

Rationale:

The correct answer is C. Order a complete blood count (CBC) and assess platelet function. SSRIs can sometimes cause platelet dysfunction, leading to increased bleeding tendencies due to an association with serotonin and platelet aggregation. Given the patient's symptoms of easy bruising and gum bleeding, it is essential to evaluate their platelet count and function.   
  
Option A, increasing the SSRI dosage, could potentially exacerbate the bleeding tendencies if the SSRI is causing platelet dysfunction. Option B, switching to a different antidepressant class, is premature without confirming the cause of the bleeding. Option D, continuing the current SSRI regimen and observing, may lead to further complications if there's an underlying hematological issue related to SSRI use.

## Topic: Bipolar Disorders and Related Disorders

8. A 40-year-old woman visits a psychiatry clinic, reporting intense periods of irritability and racing thoughts that last a few days, followed by several weeks of feeling "normal." During these episodes, she notes an increased goal-directed activity and frequently starts new projects but often doesn't complete them. Her partner is concerned as these phases are unpredictable, impacting their relationship. She denies psychotic symptoms but mentions a few depressive episodes characterized by low energy and insomnia. Notably, she has never experienced a depressive episode lasting more than two weeks or a manic episode lasting more than a week. What is the most likely diagnosis based on the DSM-5 criteria?

a) A. Bipolar I Disorder

b) B. Major Depressive Disorder with Mixed Features

c) C. Bipolar II Disorder

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: D. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is D. Other Specified Bipolar and Related Disorder.  
  
Rationale:  
- A. Bipolar I Disorder requires at least one manic episode lasting at least one week. The patient's symptoms do not meet this duration.   
- B. Major Depressive Disorder with Mixed Features would require the predominant symptoms to be depressive with some manic features, which isn't the case here. The patient experiences episodes of irritability and racing thoughts without a prominent depressive episode.   
- C. Bipolar II Disorder necessitates at least one hypomanic episode and one major depressive episode. The patient has not experienced a major depressive episode lasting more than two weeks.   
- D. Other Specified Bipolar and Related Disorder fits this scenario better as the patient's symptoms resemble hypomania and depression but do not meet the duration criteria for any specific type of bipolar disorder.

## Topic: Major Depressive Disorders and Associated Disorders

9. A 25-year-old woman has been experiencing persistent irritability, mood swings, and depressive symptoms for the past two years. Her symptoms, including loss of interest in previously enjoyed activities and feelings of hopelessness, occur in a cyclical pattern, intensifying just before menstruation and easing a few days after it's over. These symptoms have caused significant distress and impairment in her social and occupational functioning. Her medical history is unremarkable, and she does not use alcohol or drugs. Which condition is most consistent with her symptoms according to DSM-5 criteria?

a) A. Major Depressive Disorder

b) B. Premenstrual Dysphoric Disorder

c) C. Bipolar II Disorder

d) D. Persistent Depressive Disorder (Dysthymia)

Correct Answer: B. Premenstrual Dysphoric Disorder

Rationale:

The correct answer is B: Premenstrual Dysphoric Disorder (PMDD). This diagnosis aligns with the DSM-5 criteria, which specify that PMDD is characterized by mood swings, irritability, and depressive symptoms that occur cyclically in relation to the menstrual cycle, typically worsening in the luteal phase and improving around the onset of menstruation. Although Major Depressive Disorder (A) and Persistent Depressive Disorder (D) both involve depressive symptoms, they lack the specific menstrual cycle-related pattern seen in PMDD. Bipolar II Disorder (C) involves hypomanic episodes, which are not present in this case.

## Topic: Bipolar Disorders and Related Disorders

10. During a follow-up appointment, a 28-year-old man reports feeling like he has “too much energy” over the past week. He has been working on a novel and reports writing for 20 hours straight without feeling tired. He talks very quickly about his ideas, which seem grandiose and unrealistic to the psychiatrist. He also reports feeling intensely euphoric but becomes surprisingly irritable when interrupted. He has a previous diagnosis of persistent depressive disorder. He has not experienced any psychotic symptoms, and there is no history of significant impairment or hospitalization due to his mood episodes. What is the most likely diagnosis?

a) A. Bipolar I Disorder with Hypomanic Episode

b) B. Other Specified Bipolar and Related Disorder

c) C. Bipolar II Disorder with Hypomanic Episode

d) D. Major Depressive Disorder with Mixed Features

Correct Answer: B. Other Specified Bipolar and Related Disorder

Rationale:

The most likely diagnosis is B. Other Specified Bipolar and Related Disorder. This diagnosis covers situations where the symptoms of bipolar-related disorders are present but do not meet the full criteria for any specific disorder. In this case, the patient's symptoms resemble a hypomanic episode but without the significant impairment or hospitalization required for Bipolar I Disorder, and since hypomania does not require the presence of depressive episodes, this does not fit Bipolar II Disorder precisely. Major Depressive Disorder with Mixed Features requires a predominately depressive episode, which is not evident here.

## Topic: Major Depressive Disorders and Associated Disorders

11. A 35-year-old woman presents with a six-month history of feeling down, insomnia, fatigue, and difficulty concentrating. Recently, she has also experienced an increased appetite and weight gain. She's worried about her ability to cope at work and has withdrawn socially. Her medical history is significant for an episode of Major Depressive Disorder three years ago, which was successfully treated with cognitive behavioral therapy. Which of the following is the most appropriate initial treatment for her current depressive episode?

a) A. Initiate selective serotonin reuptake inhibitor (SSRI) therapy

b) B. Start well-being-focused psychotherapy

c) C. Prescribe a mood stabilizer

d) D. Recommend electroconvulsive therapy (ECT)

Correct Answer: A. Initiate selective serotonin reuptake inhibitor (SSRI) therapy

Rationale:

The most appropriate initial treatment for this patient's current depressive episode is to initiate SSRI therapy. SSRIs are first-line treatments for major depressive episodes due to their efficacy, safety profile, and minimal side effects compared to other antidepressant classes. While she responded well to CBT previously, her current symptoms suggest a need for pharmacological intervention, particularly given the significant impairment in her functioning.   
  
Well-being-focused psychotherapy alone may not be adequate initially given the severity of symptoms. Mood stabilizers are typically used in the context of bipolar disorder, which is not indicated here. ECT is usually reserved for severe or treatment-resistant depression due to its invasive nature.

## Topic: Bipolar Disorders and Related Disorders

12. A 30-year-old female professional presents for evaluation following a period of increased energy and erratic behavior that has significantly impacted her work. Over the past few months, she has experienced three separate episodes of heightened mood and irritability, each lasting around four days. During these times, she reports feeling exceptionally confident, speaking rapidly, needing only three hours of sleep, and making impulsive decisions, such as abruptly booking expensive vacations and working on multiple new projects simultaneously. In between these episodes, she experiences normal mood states without depressive symptoms. She denies any history of psychotic symptoms. Her medical history is unremarkable. What is the most likely diagnosis according to DSM-5 criteria?

a) A. Other Specified Bipolar and Related Disorder

b) B. Cyclothymic Disorder

c) C. Bipolar I Disorder with Rapid Cycling

d) D. Hypomania due to Medical Condition

Correct Answer: A. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is A. Other Specified Bipolar and Related Disorder. This diagnosis is appropriate when the patient's mood episodes do not fully meet the criteria for any specific bipolar disorders listed in DSM-5. In this case, though the patient experiences multiple episodes of hypomanic symptoms, they do not meet the duration required to be categorized under a specific bipolar disorder like Bipolar I or II. Rapid cycling typically involves four or more mood episodes in a year, and Cyclothymic Disorder requires numerous periods of hypomanic and depressive symptoms over at least two years. There is no evidence of a medical condition contributing to the hypomanic episodes, ruling out option D.

## Topic: Major Depressive Disorders and Associated Disorders

13. A 50-year-old teacher has been experiencing persistent fatigue, low mood, and significant loss of interest in her usual activities for over a year. She reports feeling guilty about being unable to fulfill her teaching duties and often wakes up early, unable to return to sleep. She denies any history of manic episodes. She reluctantly admits to thoughts of death but denies any active plans of self-harm. Despite these feelings, she maintains adequate social relationships and manages daily activities. Which of the following is the most appropriate diagnosis according to DSM-5 criteria?

a) A. Major Depressive Disorder

b) B. Persistent Depressive Disorder (Dysthymia)

c) C. Bipolar I Disorder

d) D. Adjustment Disorder with Depressed Mood

Correct Answer: B. Persistent Depressive Disorder (Dysthymia)

Rationale:

The correct answer is B. Persistent Depressive Disorder (Dysthymia). This diagnosis is most appropriate as the patient has experienced a chronic depressive mood lasting more than one year, coupled with symptoms such as insomnia and fatigue. Dysthymia is characterized by a depressed mood for most of the day, more days than not, for at least two years, which fits this scenario.   
A. Major Depressive Disorder is incorrect because while the patient exhibits some symptoms of major depression, the chronic nature and less severe impairment in daily functioning suggest dysthymia.  
C. Bipolar I Disorder is incorrect as there is no evidence of manic episodes in the patient's history.  
D. Adjustment Disorder with Depressed Mood is incorrect since the patient does not describe any identifiable stressor that precipitated the depressive symptoms and the symptoms persist beyond the typical adjustment period.

## Topic: Bipolar Disorders and Related Disorders

14. An 18-year-old high school senior presents to the psychiatric clinic with complaints of mood instability and relationship turmoil. She describes periods where she feels overly cheerful, confident, and energetic without needing much sleep. These episodes last about four days and are followed by sudden shifts to feeling down, with hypersomnia, low self-esteem, and social withdrawal. Although these episodes cause some conflict with friends and family, they do not impair her school performance or lead to any legal or financial problems. There is no history of severe depressive episodes or full manic episodes requiring hospitalization. What is the most likely diagnosis based on the DSM-5 criteria?

a) A. Other Specified Bipolar and Related Disorder

b) B. Major Depressive Disorder with Hypomanic Features

c) C. Bipolar I Disorder

d) D. Disruptive Mood Dysregulation Disorder

Correct Answer: A. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is A. Other Specified Bipolar and Related Disorder. This diagnosis is appropriate when the individual experiences mood fluctuations that do not meet the full criteria for either Bipolar I or Bipolar II disorders. In this case, the patient's hypomanic episodes do not last long enough (less than seven days) and do not cause significant impairment in social or occupational functioning, ruling out Bipolar I Disorder. The absence of full depressive episodes rules out Bipolar II Disorder. Major Depressive Disorder with Hypomanic Features is not a recognized DSM-5 diagnosis. Disruptive Mood Dysregulation Disorder is not applicable here as this diagnosis primarily involves severe irritability and frequent temper outbursts, which are not described in this scenario.

## Topic: Major Depressive Disorders and Associated Disorders

15. A 29-year-old man presents with persistent feelings of sadness, insomnia, and anhedonia for the past six months. He recently experienced a job loss and a relationship breakup. His symptoms have worsened in the past two months, with significant weight loss and daily fatigue. He denies any history of mood elevation, substance use, or medical illnesses. He reports difficulty concentrating and has had passive suicidal ideation. In evaluating this patient, what is a critical factor in differentiating Major Depressive Disorder (MDD) from Adjustment Disorder with Depressed Mood according to DSM-5 criteria?

a) A. The severity of depressive symptoms

b) B. The presence of a stressor

c) C. The duration of symptoms

d) D. The absence of prior depressive episodes

Correct Answer: C. The duration of symptoms

Rationale:

The correct answer is C. The duration of symptoms. According to DSM-5 criteria, Major Depressive Disorder is characterized by depressive symptoms lasting at least two weeks, which can occur with or without a significant stressor. Adjustment Disorder with Depressed Mood involves depressive symptoms in response to an identifiable stressor and should resolve within six months after the stressor is removed. In this patient, symptoms have persisted for two months independent of stressors, indicating a possible MDD diagnosis. Option A, severity of symptoms, can vary in both conditions and is not a defining feature. Option B, presence of a stressor, is relevant for Adjustment Disorder but not MDD, where a stressor may not be evident. Option D, absence of prior depressive episodes, is not specific to either diagnosis.

## Topic: Bipolar Disorders and Related Disorders

16. A 25-year-old artist presents to your clinic stating that he is experiencing creative bursts that last for three to four days, during which he feels euphoric, requires only two hours of sleep, and produces a large volume of artwork. These episodes are followed by days of feeling fatigued and uninterested in painting, but they do not have the severity of a major depressive episode. He denies any periods of mania lasting more than a week and has never been hospitalized for his mood swings. He also has no history of psychotic symptoms. His mood episodes are causing stress in maintaining a consistent work schedule, although they do not lead to severe impairment. What is the most likely diagnosis based on DSM-5 criteria?

a) A. Bipolar I Disorder

b) B. Bipolar II Disorder

c) C. Cyclothymic Disorder

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: D. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is D. Other Specified Bipolar and Related Disorder. In this scenario, the patient experiences periods of elevated mood and creativity that do not last long enough to qualify as full manic episodes (which need to last at least a week or require hospitalization for Bipolar I Disorder) and do not include major depressive episodes (which are required for Bipolar II Disorder). Cyclothymic Disorder would also be incorrect as it requires a more chronic pattern of mood instability for at least two years without meeting full criteria for hypomanic or depressive episodes. The 'Other Specified Bipolar and Related Disorder' category in DSM-5 is for presentations where symptoms are characteristic of bipolar and related disorder but do not meet the full criteria of any specific bipolar disorder.

## Topic: Major Depressive Disorders and Associated Disorders

17. An adolescent presents with a six-month history of mood swings, irritability, and periods of sadness. She has occasional episodes of elevated mood where she feels extremely energetic, even though she only sleeps for 3 hours. These episodes last for four days and are followed by severe depressive symptoms. She denies any substance use. Which of the following is the most appropriate diagnosis according to DSM-5 criteria?

a) A. Major Depressive Disorder

b) B. Bipolar I Disorder

c) C. Cyclothymic Disorder

d) D. Bipolar II Disorder

Correct Answer: D. Bipolar II Disorder

Rationale:

The correct answer is D. Bipolar II Disorder. Bipolar II Disorder is characterized by recurring depressive episodes accompanied by at least one hypomanic episode lasting a minimum of four days. The scenario describes a hypomanic episode, where the patient experiences elevated mood, reduced need for sleep, and increased energy, followed by depressive symptoms.   
  
Option A is incorrect because Major Depressive Disorder involves only depressive episodes without hypomanic or manic episodes. Option B is incorrect because Bipolar I Disorder requires at least one manic episode, which wasn't described here. Option C is incorrect because Cyclothymic Disorder involves less severe mood swings than those seen in Bipolar Disorders and does not meet the full criteria for hypomanic or major depressive episodes.

## Topic: Bipolar Disorders and Related Disorders

18. Megan, a 32-year-old finance executive, reports to her psychiatrist experiencing fluctuating mood disturbances over the past two years. She details episodes of feeling exceptionally high-spirited and energetic, lasting several days, during which she only needs a few hours of sleep and makes impulsive purchases. These are succeeded by periods of feeling mildly low, though not to the extent of a major depressive episode. Her mood cycles have not caused significant impact on her professional life, but they have led to some interpersonal conflicts. She does not report any psychotic symptoms or episodes requiring hospitalization. What is the most appropriate diagnosis considering the DSM-5 criteria?

a) A. Bipolar I Disorder

b) B. Bipolar II Disorder

c) C. Cyclothymic Disorder

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: C. Cyclothymic Disorder

Rationale:

The correct diagnosis is Cyclothymic Disorder. Cyclothymic Disorder is characterized by at least two years (for adults) of numerous periods with hypomanic symptoms that do not meet criteria for a hypomanic episode and numerous periods with depressive symptoms that do not meet criteria for a major depressive episode. Megan's mood swings have not led to significant impairment or hospitalization, ruling out Bipolar I Disorder. While her symptoms suggest hypomanic episodes, there are no major depressive episodes, which differentiates her condition from Bipolar II Disorder. "Other Specified Bipolar and Related Disorder" would be used if the presentation does not fully meet the criteria for the aforementioned disorders, but Megan’s symptoms align well with Cyclothymic Disorder.

## Topic: Major Depressive Disorders and Associated Disorders

19. A 40-year-old woman presents to the psychiatric clinic with a history of unrelenting fatigue, pervasive hopelessness, and difficulty making decisions for the past year. These symptoms fluctuate in intensity but have never completely resolved. The patient reports that she has tried several antidepressants with no significant improvement. She routinely experiences insomnia and appetite changes, yet denies any periods of elevated mood or excessive energy. Her family history is positive for bipolar disorder. Which of the following is the most likely diagnosis for this patient?

a) A. Persistent Depressive Disorder (Dysthymia)

b) B. Major Depressive Disorder, Recurrent

c) C. Double Depression

d) D. Bipolar II Disorder

Correct Answer: C. Double Depression

Rationale:

The correct answer is C. Double Depression.   
  
Rationale:  
- Option C is correct because Double Depression refers to the co-existence of Persistent Depressive Disorder (Dysthymia) with intermittent episodes of Major Depressive Disorder. The patient's chronic low mood (persistent depressive symptoms) with periods of worsening mood aligns with this diagnosis.  
- Option A is incorrect because while Persistent Depressive Disorder includes symptoms lasting at least two years, it doesn't account for significant worsening episodes indicative of Major Depressive Disorder.  
- Option B is incorrect as Major Depressive Disorder, Recurrent, focuses on distinct depressive episodes separated by at least two months of normal mood, which is not described here.  
- Option D is incorrect; despite a family history of bipolar disorder, the patient's symptoms do not include hypomanic or manic episodes necessary for a Bipolar II Disorder diagnosis.

## Topic: Bipolar Disorders and Related Disorders

20. A 27-year-old woman, with no significant past psychiatric history, presents with a 3-month history of mood changes. She describes experiencing phases of elevated mood where she feels excessively energetic, talks more than usual, and is overly productive at work. These episodes last about 5 days and are followed by periods where she feels mildly depressed, does not want to socialize, and has low energy, although these do not affect her work performance. There is no history of full manic or major depressive episodes or any psychotic symptoms. Which diagnosis best fits her presentation?

a) A. Bipolar II Disorder

b) B. Cyclothymic Disorder

c) C. Persistent Depressive Disorder

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: B. Cyclothymic Disorder

Rationale:

The correct answer is B. Cyclothymic Disorder. Cyclothymic Disorder is characterized by chronic fluctuations between subclinical hypomanic and depressive symptoms lasting for at least two years in adults (or one year in children and adolescents), which do not meet the full criteria for a hypomanic episode or major depressive disorder. In this case, the patient's mood episodes involve hypomanic symptoms that do not meet the duration or severity for a hypomanic episode, and depressive symptoms do not meet the criteria for major depressive disorder, aligning with Cyclothymic Disorder.   
  
Option A is incorrect as Bipolar II Disorder requires at least one hypomanic episode and one major depressive episode, neither of which are present here. Option C is incorrect because Persistent Depressive Disorder requires a chronic state of depression lasting for at least two years, while the patient experiences cycles of mood elevation and depression. Option D is incorrect because the symptoms fit well into a cyclothymic pattern rather than not otherwise specified split criteria.

## Topic: Major Depressive Disorders and Associated Disorders

21. A 33-year-old man presents with a persistent low mood, fatigue, and difficulty concentrating for the past eight months. He reports a decrease in appetite and sleep disturbances, often waking up early and unable to return to sleep. The patient denies any history of manic or hypomanic episodes, substance use, or significant medical problems. He states that he feels worthless and has occasional thoughts of death, but no suicidal plans. Upon evaluation, his symptoms are impacting his work performance significantly. Which of the following steps should be prioritized next in managing this patient?

a) A. Initiate cognitive behavioral therapy (CBT)

b) B. Prescribe a selective serotonin reuptake inhibitor (SSRI)

c) C. Conduct a thorough suicide risk assessment

d) D. Advise lifestyle modifications including exercise and diet

Correct Answer: C. Conduct a thorough suicide risk assessment

Rationale:

The correct answer is C. Conduct a thorough suicide risk assessment.   
  
Rationale:  
- C. Conduct a thorough suicide risk assessment: Given his feelings of worthlessness and occasional thoughts of death, assessing the risk of suicide is critical, even in the absence of current suicidal plans. Suicide risk assessment can guide the urgency and type of interventions needed.  
  
- A. Initiate cognitive behavioral therapy (CBT): While effective for depression, initiating CBT should come after ensuring the patient's immediate safety.  
  
- B. Prescribe a selective serotonin reuptake inhibitor (SSRI): SSRI medication is a common treatment for depression but should follow after assessing and addressing any suicide risk.  
  
- D. Advise lifestyle modifications including exercise and diet: These are beneficial in the long-term management of depression but are not immediate priorities in the context of potential suicidality.

## Topic: Bipolar Disorders and Related Disorders

22. A 47-year-old man with a history of bipolar disorder presents to the clinic with concerns about his recent mood changes. He describes experiencing episodes of elevated mood, increased energy, and racing thoughts that last about three days. He denies significant impairment in daily functioning and states he has not engaged in risky behavior during these episodes. However, he also reports feeling intensely anxious and irritable during these periods. In between these episodes, he experiences persistent, mild depressive symptoms but does not meet the full criteria for a major depressive episode. The patient is worried about his fluctuating moods and how they might impact his relationships and work. What is the most likely diagnosis based on the DSM-5 criteria?

a) A. Bipolar I Disorder with rapid cycling

b) B. Bipolar II Disorder

c) C. Cyclothymic Disorder

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: C. Cyclothymic Disorder

Rationale:

The correct answer is C. Cyclothymic Disorder. Cyclothymic disorder is characterized by periods of hypomanic symptoms and periods of depressive symptoms that are not severe enough to meet the full criteria for hypomanic episodes or major depressive episodes, respectively. In this case, the patient's elevated mood episodes last about three days without significant impairment or risky behavior, which does not fulfill the hypomanic episode criteria necessary for Bipolar I or II Disorder. The presence of persistent mild depressive symptoms also fits cyclothymic disorder, as neither full manic nor major depressive episodes are present.   
  
Option A is incorrect because Bipolar I Disorder with rapid cycling requires full manic episodes and does not align with the described hypomanic symptoms lacking significant impairment.   
  
Option B is incorrect because Bipolar II Disorder involves at least one major depressive episode and one hypomanic episode, while this patient does not meet the criteria for either.  
  
Option D is incorrect, as the symptoms fit the recognized criteria for Cyclothymic Disorder rather than requiring a less specific diagnosis.

## Topic: Major Depressive Disorders and Associated Disorders

23. A 38-year-old woman presents to the clinic with a two-month history of low mood, anhedonia, and fatigue. She reports significant weight loss without trying and describes frequent early morning awakenings. Her medical history includes hypothyroidism, which is well-controlled with medication. She denies any suicidal thoughts. Recently, her performance at work has declined due to difficulty concentrating. Considering her symptoms and medical history, which of the following is the most appropriate next step in management to confirm a diagnosis of Major Depressive Disorder?

a) A. Initiate a trial of antidepressant medication

b) B. Conduct a comprehensive psychiatric evaluation including a mental status exam

c) C. Order thyroid function tests to reassess her hypothyroidism management

d) D. Enroll her in a cognitive behavioral therapy program

Correct Answer: B. Conduct a comprehensive psychiatric evaluation including a mental status exam

Rationale:

The correct answer is B. Conduct a comprehensive psychiatric evaluation including a mental status exam. This step is crucial in confirming the presence of Major Depressive Disorder as it allows the clinician to thoroughly assess the patient's mental state, rule out other psychiatric conditions, and gather sufficient information to support the diagnosis based on DSM-5 criteria. While thyroid dysfunction can mimic depressive symptoms, her hypothyroidism is reportedly well-controlled, thus ordering thyroid function tests isn't the immediate priority. Initiating antidepressant medication or enrolling in cognitive behavioral therapy may be appropriate after confirming the diagnosis but not before a comprehensive assessment.

## Topic: Bipolar Disorders and Related Disorders

24. A 40-year-old teacher comes to the psychiatric clinic with concerns about mood fluctuations. Over the past year, he has experienced several periods lasting 3-5 days during which he feels unusually energetic, sleeps less, is more talkative, and has grandiose ideas. These episodes are interspersed with times where he feels mildly sad and fatigued but he is still able to maintain his daily responsibilities. He denies any severe depressive episodes or full-blown manic episodes. There is no history of psychosis or hospitalization related to mood issues. What is the most likely diagnosis according to DSM-5 criteria?

a) A. Persistent Depressive Disorder

b) B. Bipolar I Disorder, Current Episode Hypomanic

c) C. Cyclothymic Disorder

d) D. Major Depressive Disorder, Recurrent, Mild

Correct Answer: C. Cyclothymic Disorder

Rationale:

The correct answer is C. Cyclothymic Disorder. Cyclothymic Disorder is characterized by chronic, fluctuating mood disturbances involving periods of hypomanic symptoms that do not meet the full criteria for a hypomanic episode, and periods of depressive symptoms that do not meet the full criteria for a major depressive episode. The patient's symptoms of mild mood depressions interspersed with hypomanic periods, none of which fully meet the criteria for major depression or mania, fit this diagnosis.   
  
Option A is incorrect because Persistent Depressive Disorder involves chronic depression rather than cycling mood states. Option B is incorrect because Bipolar I Disorder requires a full manic episode, which this patient has not experienced. Option D is incorrect because Major Depressive Disorder requires more severe depressive episodes than those described.

## Topic: Major Depressive Disorders and Associated Disorders

25. A 50-year-old man is brought to the emergency department by his wife due to concerns about his behavior. Over the past month, he has been experiencing significant sadness, fatigue, and feelings of worthlessness. Recently, he has started giving away his prized possessions, claiming he won't need them where he's going. He also mentions hearing a voice telling him that he is useless and confirming his plans. His medical history is significant for chronic back pain, managed with oxycodone. Which of the following is the most appropriate next step in managing this patient?

a) A. Initiate electroconvulsive therapy (ECT)

b) B. Hospitalize the patient for safety and further evaluation

c) C. Start an antipsychotic medication

d) D. Adjust his oxycodone dosage

Correct Answer: B. Hospitalize the patient for safety and further evaluation

Rationale:

The correct answer is B. Hospitalize the patient for safety and further evaluation. The patient is showing signs of severe depression with suicidal ideation, as evidenced by giving away possessions and having auditory hallucinations. Immediate hospitalization is necessary to ensure his safety and provide an environment for further assessment and treatment. Option A, initiating ECT, while effective for severe depression and psychotic features, is not the immediate next step without ensuring safety. Option C, starting an antipsychotic, might be considered but the priority is addressing the acute risk of self-harm. Option D, adjusting oxycodone, does not address the psychiatric emergency presented by suicidal ideation and hallucinations.

## Topic: Bipolar Disorders and Related Disorders

26. During her psychiatric evaluation, a 28-year-old artist with no significant psychiatric history reports extreme mood variability. She recounts periods lasting about four days where she feels euphoric, overly productive, needing only three hours of sleep, and taking on numerous projects that often don't reach completion. These episodes are followed by days of feeling sad, unmotivated, and fatigued, though her depressive symptoms never meet the full criteria for a major depressive episode. She denies any psychotic features and has never been hospitalized for her mood symptoms. What is the most likely diagnosis?

a) A. Hypomanic Episode

b) B. Adjustment Disorder with Depressed Mood

c) C. Cyclothymic Disorder

d) D. Major Depressive Disorder, Recurrent, Moderate

Correct Answer: C. Cyclothymic Disorder

Rationale:

The correct diagnosis for this scenario is Cyclothymic Disorder (C). Cyclothymic disorder is characterized by numerous periods of hypomanic symptoms that do not meet full criteria for a hypomanic episode and numerous periods of depressive symptoms that do not meet the full criteria for a major depressive episode, persisting over at least two years. The patient's history of mood fluctuations, with both elevated and decreased mood episodes, aligns with this condition.   
  
Option A, Hypomanic Episode, is incorrect because the patient's symptoms also include depressive episodes, although subthreshold for MDD, indicating a broader disorder than a stand-alone hypomanic episode.  
  
Option B, Adjustment Disorder with Depressed Mood, is not applicable since the mood fluctuations do not coincide with an identifiable stressor, and the patient experiences both elevated and depressive symptoms.  
  
Option D, Major Depressive Disorder, Recurrent, Moderate, is incorrect because the patient has not met the full criteria for major depressive episodes, and the mood elevation periods suggest a bipolar spectrum disorder.

## Topic: Major Depressive Disorders and Associated Disorders

27. A 45-year-old man comes to the clinic with complaints of a pervasive low mood, feelings of worthlessness, and marked fatigue over the past nine months. He reports significant weight gain, hypersomnia, and has withdrawn from social activities. His medical history includes a family history of depression and his grandfather was diagnosed with Bipolar I disorder. On examination, there are no manic or hypomanic episodes reported. Despite these symptoms, he has maintained his job performance with great effort. Which of the following interventions would be most appropriate to address both the depressive symptoms and the patient's weight gain according to current clinical guidelines?

a) A. Bupropion

b) B. Olanzapine

c) C. Paroxetine

d) D. Lithium

Correct Answer: A. Bupropion

Rationale:

The correct answer is A. Bupropion. Bupropion is an atypical antidepressant that is effective in treating depressive symptoms and is less likely to cause weight gain, and it may even contribute to weight loss in some patients. It is a norepinephrine-dopamine reuptake inhibitor, which can also help counteract fatigue and improve motivation.   
  
Option B, Olanzapine, is an atypical antipsychotic often associated with weight gain and is not typically used as first-line therapy for major depressive disorder unless in combination with an antidepressant for treatment-resistant cases.   
  
Option C, Paroxetine, is a selective serotonin reuptake inhibitor (SSRI) known to cause weight gain in some patients and would not address the patient's weight concerns effectively.  
  
Option D, Lithium, is primarily used as a mood stabilizer in bipolar disorder and would not specifically target depressive symptoms and weight gain in this patient without a known history of bipolar disorder.

## Topic: Bipolar Disorders and Related Disorders

28. During a psychiatric consultation, a 26-year-old graduate student describes experiencing mood instability over the past year. She reports episodes lasting about 3-4 days where she feels excessively energetic and confident, engaging in multiple creative projects, but often becomes irritable and easily distracted. These phases are followed by periods of feeling down, with poor concentration and low self-esteem, although she denies feeling hopeless or suicidal. She has never experienced symptoms severe enough to require hospitalization, and her mood swings do not impair her academic performance. There is no history of psychosis. Which diagnosis best fits her presentation?

a) A. Major Depressive Disorder

b) B. Other Specified Bipolar and Related Disorder

c) C. Bipolar I Disorder with Hypomanic Episodes

d) D. Cyclothymic Disorder

Correct Answer: D. Cyclothymic Disorder

Rationale:

The correct answer is D. Cyclothymic Disorder. Cyclothymic Disorder is characterized by numerous periods of hypomanic symptoms that do not meet the full criteria for a hypomanic episode and periods of depressive symptoms that do not meet the full criteria for a major depressive episode over at least two years (or one year for children and adolescents). The symptoms cause distress but not significant impairment. In this case, the patient's mood swings are described as hypomanic and depressive symptoms without meeting the full criteria for either, fitting the criteria for Cyclothymic Disorder.   
  
Option A is incorrect because Major Depressive Disorder requires at least two weeks of depressive symptoms significant enough to impair functioning, which this patient does not describe. Option B is incorrect because Other Specified Bipolar and Related Disorder is a catch-all for subthreshold conditions that don't fit the other categories. Option C is incorrect because Bipolar I Disorder requires full manic episodes, which are not described in this case.

## Topic: Major Depressive Disorders and Associated Disorders

29. A patient is seen in a psychiatric clinic with complaints of chronic low mood, difficulty sleeping, and a sense of hopelessness lasting for over two years. The patient reports a past diagnosis of Generalized Anxiety Disorder and notes experiencing four depressive episodes in the past year, each lasting about three weeks. The patient's symptoms have caused significant impairment in work performance. Past treatments include selective serotonin reuptake inhibitors (SSRIs) and benzodiazepines, with partial relief. The patient denies any history of manic episodes. Based on DSM-5 criteria, which of the following is the most likely diagnosis?

a) A. Major Depressive Disorder, Recurrent

b) B. Persistent Depressive Disorder (Dysthymia)

c) C. Double Depression

d) D. Cyclothymic Disorder

Correct Answer: C. Double Depression

Rationale:

The correct answer is C: Double Depression. Double Depression indicates the presence of both Persistent Depressive Disorder (Dysthymia) and Major Depressive Disorder (MDD). In this scenario, the patient has chronic depressive symptoms lasting over two years (indicative of Dysthymia) and has experienced chronic episodes of Major Depressive Disorder.   
  
Option A, Major Depressive Disorder, Recurrent, is incorrect as it doesn't account for the chronic nature of low mood over two years. Option B, Persistent Depressive Disorder, is partially correct but does not fully capture the episodic worsening of symptoms. Option D, Cyclothymic Disorder, is characterized by alternating periods of hypomanic and depressive symptoms, which is not present in this patient who denies history of manic episodes.

## Topic: Bipolar Disorders and Related Disorders

30. A 34-year-old man presents to the clinic with mood fluctuations that have been occurring for over a year. He experiences episodes where he feels extremely cheerful and enters a 'creative rush,' completing numerous art pieces, sleeping only a few hours per night, and socializing excessively. These episodes last about four days and occur every few months. In between these periods, he feels mildly depressed, with low energy and slight irritability but no significant impairment in daily functioning or major depressive episodes. He has no history of psychosis or hospitalization for his mood symptoms. What is the most appropriate diagnosis according to DSM-5 criteria?

a) A. Other Specified Bipolar and Related Disorder

b) B. Cyclothymic Disorder

c) C. Bipolar I Disorder with Hypomanic Episodes

d) D. Major Depressive Disorder with Hypomanic Features

Correct Answer: A. Other Specified Bipolar and Related Disorder

Rationale:

The correct diagnosis for this patient is 'A. Other Specified Bipolar and Related Disorder.' This condition applies when symptoms characteristic of bipolar disorder cause clinically significant distress or impairment but do not meet the full criteria for any specific bipolar disorder. In this case, the patient experiences hypomanic symptoms and minor depressive episodes but does not have full manic or major depressive episodes, nor does he meet the 'Cyclothymic Disorder' criteria, as his mild depression does not persist for the majority of two years.  
  
Option B ('Cyclothymic Disorder') is incorrect because, while this diagnosis involves fluctuating mood disturbances, they must persist for at least two years without a break of more than two months.  
  
Option C ('Bipolar I Disorder with Hypomanic Episodes') is incorrect because Bipolar I requires at least one full manic episode, which this patient does not have.  
  
Option D ('Major Depressive Disorder with Hypomanic Features') is incorrect because the patient does not have major depressive episodes. Instead, he has mild depressive states in between his hypomanic episodes.

## Topic: Major Depressive Disorders and Associated Disorders

31. A 34-year-old woman reports experiencing recurrent depressive episodes characterized by sadness, insomnia, and loss of interest in daily activities. These episodes have occurred several times over the past three years, each lasting for a few weeks, and are interspersed with periods of feeling at her baseline. She denies any history of manic or hypomanic episodes. She has tried various SSRIs with limited success. During evaluation, she expresses concerns about her ability to maintain relationships and her job due to the frequent mood dips. Which of the following is the most likely diagnosis according to DSM-5 criteria?

a) A. Major Depressive Disorder, Recurrent

b) B. Persistent Depressive Disorder with Intermittent Major Depressive Episodes

c) C. Bipolar II Disorder

d) D. Cyclothymic Disorder

Correct Answer: A. Major Depressive Disorder, Recurrent

Rationale:

The correct answer is A. Major Depressive Disorder, Recurrent. This diagnosis is supported by the recurrent episodes of depression without any history of manic or hypomanic episodes, as noted in the DSM-5 criteria.   
  
Option B, Persistent Depressive Disorder with Intermittent Major Depressive Episodes, requires a persistent depressive state for at least two years with superimposed major depressive episodes, which is not described here.   
  
Option C, Bipolar II Disorder, involves episodes of hypomania, which the patient denies experiencing.   
  
Option D, Cyclothymic Disorder, is characterized by alternating periods of hypomanic symptoms and depressive symptoms that are not severe enough to meet criteria for mania or major depression, not matching the patient's condition.

## Topic: Bipolar Disorders and Related Disorders

32. A 33-year-old woman comes to the psychiatric clinic complaining of severe mood swings. She describes episodes of feeling overly energetic, talking rapidly, and having racing thoughts. These episodes last about three days and are followed by periods of feeling deeply depressed, lacking energy, and experiencing significant sleep disturbances. She denies any history of manic episodes requiring hospitalization or psychotic symptoms. She has had difficulty maintaining her job due to these mood fluctuations and feels her personal relationships are suffering. She has a family history of mood disorders. What is the most likely diagnosis based on the DSM-5 criteria?

a) A. Other Specified Bipolar and Related Disorder

b) B. Major Depressive Disorder with Hypomanic Features

c) C. Adjustment Disorder with Depressed Mood

d) D. Cyclothymic Disorder

Correct Answer: A. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is A. Other Specified Bipolar and Related Disorder. This diagnosis is appropriate when the individual's symptoms do not fully meet the criteria for any specific bipolar disorder, such as Bipolar I or II, but there are clinically significant mood disturbances. In this case, the patient's hypomanic-like episodes last less than four days, which precludes a Bipolar II diagnosis as hypomanic episodes in Bipolar II should last at least four days. Also, her depressive episodes, though impactful, do not meet the full criteria for a Major Depressive Episode, ruling out a Bipolar II Disorder diagnosis.   
Option B, Major Depressive Disorder with Hypomanic Features, is incorrect as the DSM-5 does not recognize this as a formal diagnosis, and the patient's hypomanic symptoms would not typically be categorized under Major Depressive Disorder.   
Option C, Adjustment Disorder with Depressed Mood, is inappropriate here because her symptoms are not tied to a specific stressor and show a pattern typical of a mood disorder.   
Option D, Cyclothymic Disorder, is incorrect because though this involves mood fluctuations, the patient's episodes are more severe and have caused significant life impairment, which is not typical for Cyclothymic Disorder.

## Topic: Major Depressive Disorders and Associated Disorders

33. A 50-year-old woman reports a history of recurrent depressive episodes starting in her early 30s, characterized by low mood, weight changes, and insomnia. Her condition improved briefly each time she started a new medication, but relapses occurred after a few months. She denies any mood elevation. Her family history includes depression and bipolar disorder. Currently, she experiences persistent low mood, fatigue, and anhedonia despite taking an SSRI and engaging in psychotherapy. What is the best next step in managing her treatment-resistant depression?

a) A. Increase the current SSRI dose

b) B. Switch to a different class of antidepressant

c) C. Augment the SSRI with lithium

d) D. Refer for electroconvulsive therapy (ECT)

Correct Answer: C. Augment the SSRI with lithium

Rationale:

The correct answer is C. Augment the SSRI with lithium. In cases of treatment-resistant depression, where the patient does not respond adequately to standard antidepressants and psychotherapy, augmentation strategies are considered. Lithium augmentation has a robust evidence base for enhancing the effects of antidepressants, particularly SSRIs, and may also address any underlying bipolar disorder component that could be complicating the depressive episodes, given the family history.   
  
A. Increasing the current SSRI dose might be insufficient if there's persistent treatment resistance.  
B. Switching to a different class of antidepressant may not address the treatment resistance and underlying issues, especially with a significant family history of bipolar disorder.  
D. ECT is an effective treatment for severe or refractory depression, but it's typically considered after augmentation strategies have been tried and when there's a need for rapid improvement, which is not indicated in this scenario.

## Topic: Bipolar Disorders and Related Disorders

34. A 31-year-old teacher is referred to a psychiatrist after a colleague noticed her rapid mood swings that impact her work environment. She describes episodes characterized by elevated mood, increased talkativeness, reduced need for sleep, and engaging in risky behavior such as overspending, which last about 5 to 7 days. These are interspersed with depressive episodes that meet the criteria for a major depressive episode, including significant weight loss, insomnia, fatigue, and feelings of worthlessness, lasting more than two weeks. She denies any psychotic symptoms or substance abuse. What's the most likely diagnosis?

a) A. Bipolar I Disorder

b) B. Major Depressive Disorder with Mania

c) C. Bipolar II Disorder

d) D. Cyclothymic Disorder

Correct Answer: A. Bipolar I Disorder

Rationale:

The correct answer is A. Bipolar I Disorder. The scenario describes episodes of elevated mood lasting 5 to 7 days, meeting the criteria for mania as outlined in DSM-5, criteria for Bipolar I disorder. The presence of major depressive episodes further supports this diagnosis. Bipolar II Disorder is incorrect, as it involves hypomanic episodes, which are less severe than manic episodes and do not cause marked impairment in social or occupational functioning, nor require hospitalization. Major Depressive Disorder with Mania is not a recognized diagnosis; mania qualifies the mood disorder as bipolar, not unipolar depression. Cyclothymic Disorder is characterized by numerous periods of hypomanic symptoms and depressive symptoms that do not meet full criteria for a hypomanic or major depressive episode for at least two years, which is not the case here.

## Topic: Major Depressive Disorders and Associated Disorders

35. A 40-year-old woman with a history of Major Depressive Disorder presents to the clinic with worsening depressive symptoms despite adherence to her current SSRI medication. She reports profound fatigue, difficulty making decisions, and social withdrawal. Her husband notes that she spends most of her time lying in bed and has lost interest in family activities. She denies any manic or hypomanic episodes, but mentions a new symptom of joint aches and muscle pain. Which of the following steps should be considered next in managing her treatment?

a) A. Add cognitive behavioral therapy (CBT) to her treatment plan

b) B. Switch to a tricyclic antidepressant (TCA)

c) C. Evaluate for fibromyalgia and adjust her treatment plan accordingly

d) D. Increase the SSRI dose

Correct Answer: C. Evaluate for fibromyalgia and adjust her treatment plan accordingly

Rationale:

The correct answer is C. Evaluate for fibromyalgia and adjust her treatment plan accordingly. The patient's presentation includes symptoms of major depressive disorder along with new-onset joint aches and muscle pain, which could indicate fibromyalgia, a condition commonly comorbid with depression. Identifying fibromyalgia is important because it requires specific management strategies, such as medication or physical therapy, that differ from typical treatments for depression alone.  
  
Option A, adding CBT, may help with depression but doesn't address the new symptoms, which need evaluation. Option B, switching to a TCA, could be considered for depression but may not relieve joint pain and could introduce side effects. Option D, increasing the SSRI dose, might address the depressive symptoms but doesn’t tackle the potential fibromyalgia.

## Topic: Bipolar Disorders and Related Disorders

36. A 38-year-old writer presents to the psychiatric clinic experiencing extreme mood variations. She describes periods of feeling intensely creative, with racing thoughts, decreased need for sleep, and engaging in risky business ventures lasting about three to four days. These episodes are followed by days of feeling down, lacking energy and interest but not meeting criteria for major depressive episodes. She denies any history of psychosis or prolonged hospitalizations. Her mood symptoms cause some interpersonal difficulties but do not significantly impair her occupational functioning. Considering the DSM-5 criteria, what is the most likely diagnosis?

a) A. Cyclothymic Disorder

b) B. Persistent Depressive Disorder

c) C. Hypomanic Episode

d) D. Major Depressive Episode

Correct Answer: A. Cyclothymic Disorder

Rationale:

The correct answer is A. Cyclothymic Disorder. Cyclothymic Disorder is characterized by chronic fluctuating mood disturbances involving numerous periods of hypomanic symptoms and periods of depressive symptoms that do not meet the full criteria for a major depressive episode. This condition persists for at least two years in adults and causes distress or impairment in social, occupational, or other areas of functioning.   
  
Option B, Persistent Depressive Disorder, involves a long-term depressive mood but lacks hypomanic episodes. Option C, Hypomanic Episode, describes a single episode rather than a pattern of mood fluctuations. Option D, Major Depressive Episode, involves more severe and prolonged depressive symptoms and does not feature hypomanic symptoms.

## Topic: Major Depressive Disorders and Associated Disorders

37. A 32-year-old man is brought to the emergency department by his partner because he has been talking about feeling worthless and has been giving away personal items, saying he won't need them soon. He has a history of major depressive episodes but denies experiencing mania or hypomania. He has a family history of bipolar disorder. His current depressive symptoms have been present for the past three months. Which of the following interventions is most appropriate in the initial management of this patient?

a) A. Begin cognitive behavioral therapy (CBT)

b) B. Prescribe lithium

c) C. Administer electroconvulsive therapy (ECT)

d) D. Hospitalize the patient for safety and further evaluation

Correct Answer: D. Hospitalize the patient for safety and further evaluation

Rationale:

The correct answer is D. Hospitalize the patient for safety and further evaluation.  
  
Rationale:  
This patient's presentation of giving away possessions and feelings of worthlessness, combined with a history of major depressive episodes and a family history of bipolar disorder, poses a significant risk of self-harm or suicide. Immediate hospitalization is crucial to ensure his safety and allow for comprehensive evaluation and stabilization. While CBT (A) and lithium (B) are potential components of long-term management, they do not provide immediate safety. ECT (C) might be considered once the patient is safe, but it is not the first step without ensuring his immediate safety through hospitalization.

## Topic: Bipolar Disorders and Related Disorders

38. A 34-year-old woman is evaluated for frequent mood swings. She reports episodes where she feels unusually energetic, becomes extremely talkative, and feels like she has 'a million ideas.' These periods last around 4-6 days and occur almost monthly. In between, she experiences depressive symptoms like fatigue and sadness, though they don't fully meet the criteria for major depressive disorder. Her functioning at work is largely unchanged, but her personal relationships have suffered due to her erratic behavior. She has no history of psychosis or hospitalization, and there's a family history of mental illness. What is the most likely diagnosis based on DSM-5 criteria?

a) A. Other Specified Bipolar and Related Disorder

b) B. Borderline Personality Disorder

c) C. Major Depressive Disorder with Mood Incongruent Psychotic Features

d) D. Unspecified Mood Disorder

Correct Answer: A. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is A. Other Specified Bipolar and Related Disorder.   
  
Rationale:   
- The episodic nature of her symptoms, including periods of increased energy and talkativeness, alongside depressive symptoms, suggests a bipolar spectrum disorder.   
- The episodes are shorter than those typically required for bipolar I or II disorder, and her depressive episodes do not fully meet major depression criteria, aligning with a diagnosis of 'Other Specified Bipolar and Related Disorder'.   
- Option B, Borderline Personality Disorder, while presenting with mood instability, involves chronic interpersonal and self-image issues, not episodic mood changes as described here.  
- Option C, Major Depressive Disorder with Mood Incongruent Psychotic Features, is incorrect as there's no presence of psychotic symptoms.  
- Option D, Unspecified Mood Disorder, is less specific; the description closely aligns with a specified bipolar-related disorder due to the pattern of symptoms.

## Topic: Major Depressive Disorders and Associated Disorders

39. Following a sudden breakup, a 27-year-old man experiences profound sadness, hypersomnia, and overeating. Over the next month, his symptoms persist but he also begins to experience excessive guilt, indecisiveness, and psychomotor retardation. He denies any history of manic or hypomanic episodes and has never been diagnosed with a mental health disorder before. Considering the persistence and nature of his symptoms, what is the most likely diagnosis according to the DSM-5?

a) A. Major Depressive Disorder with atypical features

b) B. Adjustment Disorder with Depressed Mood

c) C. Major Depressive Episode triggered by a stressor

d) D. Persistent Depressive Disorder

Correct Answer: A. Major Depressive Disorder with atypical features

Rationale:

The correct answer is A. Major Depressive Disorder with atypical features. This diagnosis is supported by the presence of mood reactivity (sadness following a stressor), hyperphagia (overeating), hypersomnia, and leaden paralysis, which align with atypical features specifier in MDD. Typical features of major depression are sadness, hypersomnia, excessive guilt, and psychomotor retardation. The other options are incorrect because:  
  
B. Adjustment Disorder with Depressed Mood typically resolves within six months once the stressor has been removed. Given the persistent and severe symptoms, this diagnosis is less likely.  
  
C. While a Major Depressive Episode can be triggered by a stressor, the presence of atypical features specifically requires the MDD with atypical features specifier.  
  
D. Persistent Depressive Disorder (Dysthymia) involves a chronic depressive mood for at least two years, which does not fit the timeline of this case.

## Topic: Bipolar Disorders and Related Disorders

40. John, a 24-year-old college student, reports experiencing episodes of extreme increases in energy and productivity, lasting about 3-4 days. He stays awake most nights, feels overly confident, and makes plans to start multiple new clubs on campus. His friends report noticing a dramatic increase in his talkativeness and goal-oriented activities during these times. However, he has also experienced periods of feeling intensely sad and hopeless, which have lasted for several weeks, leading him to skip classes and avoid social interactions. He denies any hallucinations or substance use, and there are no records of hospitalizations or severe functional impairment. What is the most likely diagnosis according to DSM-5 criteria?

a) A. Bipolar II Disorder

b) B. Major Depressive Disorder with Hypomanic Features

c) C. Cyclothymic Disorder

d) D. Bipolar I Disorder with Hypomanic Episode

Correct Answer: A. Bipolar II Disorder

Rationale:

The correct answer is A. Bipolar II Disorder. This diagnosis is characterized by at least one hypomanic episode and one or more major depressive episodes. John’s elevated mood episodes, lasting 3-4 days with increased energy and productivity, fit the criteria for hypomanic episodes. The intense sadness, hopelessness, and impact on his academic performance are indicative of major depressive episodes. Major Depressive Disorder with Hypomanic Features (B) is not recognized as a formal diagnosis in DSM-5. Cyclothymic Disorder (C) involves mood swings that do not meet full criteria for hypomanic and depressive episodes. Bipolar I Disorder (D) requires at least one manic episode, which John's symptoms do not fulfill.

## Topic: Major Depressive Disorders and Associated Disorders

41. A 37-year-old female reports to the clinic with constant low mood, fatigue, and difficulty concentrating for over a year. She experiences hypersomnia, significant weight gain, and has withdrawn socially. She has prior history of hypothyroidism, controlled on medication. Her mother had episodes of mood elevation. On examination, she denies any manic episodes but does acknowledge longer periods of feeling down in the past. She has tried SSRIs and SNRIs with minimal relief. Based on this information, which condition should be considered in differential diagnosis for her prolonged depressive symptoms?

a) A. Bipolar II Disorder

b) B. Persistent Depressive Disorder (Dysthymia)

c) C. Major Depressive Disorder with atypical features

d) D. Cyclothymic Disorder

Correct Answer: C. Major Depressive Disorder with atypical features

Rationale:

The patient's symptoms align most closely with Major Depressive Disorder (MDD) with atypical features. Her hypersomnia and weight gain are consistent with atypical depression. The family history of mood elevation suggests a bipolar spectrum, but she denies any manic episodes, making Bipolar II Disorder less likely. Persistent Depressive Disorder would be considered if she had a chronic low mood for at least two years, but the question implies her severe symptoms have lasted over a year. Cyclothymic Disorder involves mood swings without full depressive or manic episodes, which doesn't fit her symptom profile.

## Topic: Bipolar Disorders and Related Disorders

42. Jess, a 28-year-old software engineer, describes experiencing prolonged periods of depression for over a year. These depressive episodes last weeks and are debilitating, affecting her ability to work. She reports she has also had phases where she feels slightly more energized and confident, but these periods are short-lived and never require medical intervention. She has never experienced full manic or hypomanic episodes. She denies any substance use or significant medical history. What is the most likely diagnosis according to DSM-5 criteria?

a) A. Major Depressive Disorder, Recurrent

b) B. Persistent Depressive Disorder (Dysthymia)

c) C. Rapid Cycling Bipolar Disorder

d) D. Schizoaffective Disorder, Depressive Type

Correct Answer: A. Major Depressive Disorder, Recurrent

Rationale:

The correct answer is A. Major Depressive Disorder, Recurrent. Jess experiences prolonged depressive episodes that are severe and recurrent, which aligns with Major Depressive Disorder. The brief periods of increased energy do not meet the criteria for hypomania or mania, ruling out bipolar disorders, and there's no evidence of the chronicity needed for Persistent Depressive Disorder. Option C, Rapid Cycling Bipolar Disorder, requires multiple manic or hypomanic episodes, which she lacks. D, Schizoaffective Disorder, involves mood episodes with concurrent psychotic symptoms, which are not reported in this case.

## Topic: Major Depressive Disorders and Associated Disorders

43. A 32-year-old teacher reports experiencing low mood, feelings of worthlessness, and difficulty concentrating for the past seven months. She mentions waking up several hours before the alarm and being unable to fall back asleep. Her appetite has decreased significantly, leading to noticeable weight loss. She denies any history of manic or hypomanic episodes. However, she describes hearing her late father's voice encouraging her during her low moments, which she finds comforting rather than distressing. Her medical history is unremarkable, and she is not on any medications. Which of the following differential diagnoses should be considered first in managing this patient's condition?

a) A. Schizoaffective Disorder, Depressive Type

b) B. Major Depressive Disorder with psychotic features

c) C. Persistent Depressive Disorder (Dysthymia)

d) D. Adjustment Disorder with Depressed Mood

Correct Answer: B. Major Depressive Disorder with psychotic features

Rationale:

The correct answer is B. Major Depressive Disorder with psychotic features. This diagnosis is considered when a patient meets the criteria for a Major Depressive Episode and also experiences psychotic symptoms, such as hallucinations or delusions. In this scenario, the patient hears her late father's voice, which suggests the presence of psychotic features within the depressive episode.  
  
Option A, Schizoaffective Disorder, Depressive Type, requires the presence of a mood disorder concurrent with the criteria of schizophrenia. However, there is no evidence of schizophrenia's required symptoms, such as delusions (other than the depressive type) or disorganized speech.  
  
Option C, Persistent Depressive Disorder (Dysthymia), involves chronic depression lasting for at least two years and does not typically include psychotic features.  
  
Option D, Adjustment Disorder with Depressed Mood, is characterized by the development of emotional or behavioral symptoms in response to an identifiable stressor within three months. It would not include psychotic symptoms and would not meet the criteria for a Major Depressive Episode.

## Topic: Bipolar Disorders and Related Disorders

44. During a session, a 33-year-old woman recounts experiencing periods of feeling very energetic, needing little sleep, and engaging in risky behaviors, such as unprotected sexual encounters and impulsive purchases, lasting about four days. These episodes occur approximately every few months. In between, she describes feeling mildly depressed, fatigued, and having trouble concentrating, but these symptoms do not reach the criteria for a major depressive episode. There is no history of full manic episodes or hospitalizations. Which diagnosis best fits her symptoms according to DSM-5 criteria?

a) A. Bipolar II Disorder

b) B. Cyclothymic Disorder

c) C. Other Specified Bipolar and Related Disorder

d) D. Major Depressive Disorder with Atypical Features

Correct Answer: C. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is C. Other Specified Bipolar and Related Disorder. This diagnosis is appropriate when an individual exhibits hypomanic episodes that do not meet the full duration or symptom criteria for Bipolar II Disorder, with depressive symptoms that are also subthreshold for major depressive episodes. The patient's described mood fluctuations are consistent with hypomanic episodes, but since the depressive symptoms are not severe enough to meet the criteria for major depressive episodes, and the hypomanic episodes do not necessarily meet full criteria for Bipolar II Disorder, "Other Specified Bipolar and Related Disorder" is the best fit. Option A, Bipolar II Disorder, requires at least one major depressive episode, which is not present. Option B, Cyclothymic Disorder, involves a chronic pattern of hypomanic and depressive symptoms lasting at least two years, which is not the case here. Option D, Major Depressive Disorder with Atypical Features, is incorrect as the primary issue is mood elevation patterns, not depressive features alone.

## Topic: Major Depressive Disorders and Associated Disorders

45. A 40-year-old woman presents with symptoms of low mood, fatigue, hypersomnia, and increased appetite for the past year, leading to significant weight gain. She reports decreased energy and a feeling of heaviness in her limbs. Her symptoms have caused distress and impairment in her social life. Although she denies periods of manic or hypomanic symptoms, she notes her mood improves when positive events occur. She has a family history of major depressive disorder. Which feature should guide the likely diagnosis according to DSM-5 criteria?

a) A. Seasonal pattern of symptoms

b) B. Atypical features

c) C. Melancholic features

d) D. Peripartum onset

Correct Answer: B. Atypical features

Rationale:

The correct answer is B: Atypical features. According to DSM-5, a major depressive episode with atypical features is characterized by mood reactivity (mood improvement in response to positive events), significant weight gain or increase in appetite, hypersomnia, leaden paralysis (feeling of heaviness in limbs), and a long-standing pattern of interpersonal rejection sensitivity. This patient's presentation matches with atypical depressive features.  
  
- A. Seasonal pattern: would include symptoms occurring at a specific time of year and remitting in another.  
- C. Melancholic features: are characterized by a lack of mood reactivity, significant weight loss, early morning awakening, and pervasive anhedonia.  
- D. Peripartum onset: involves symptoms occurring during pregnancy or within four weeks postpartum.

## Topic: Bipolar Disorders and Related Disorders

46. Lisa, a 23-year-old college student, expresses concern over her mood shifts. She reports feeling extremely joyful, energetic, and experiencing racing thoughts for 2-3 days every month. In these periods, she requires very little sleep, engages in risky activities like reckless driving, and has increased talkativeness. These are followed by weeks of normal mood. Lisa mentions occasional sadness but denies depressive episodes, psychotic symptoms, or significant distress impacting her academic performance. Her medical history is unremarkable. What is the most appropriate diagnosis according to DSM-5 criteria?

a) A. Cyclothymic Disorder

b) B. Bipolar I Disorder

c) C. Other Specified Bipolar and Related Disorder

d) D. Bipolar II Disorder

Correct Answer: C. Other Specified Bipolar and Related Disorder

Rationale:

The correct answer is C, Other Specified Bipolar and Related Disorder. DSM-5 allows for this diagnosis when recurrent mood episodes don't meet the duration or criteria for other specified bipolar disorders. Lisa's mood episodes are brief, around 2-3 days, and don't cause significant impairment. Bipolar I and II require longer-lasting episodes or significant impairment. Cyclothymic Disorder involves fluctuating mood over years, typically including both hypomanic and mild depressive episodes, whereas Lisa does not report depressive symptoms frequently. Since Lisa's episodes are short and lack depressive features, they fit best under Other Specified Bipolar and Related Disorder.

## Topic: Major Depressive Disorders and Associated Disorders

47. A patient is evaluated for persistent low mood, anhedonia, feelings of worthlessness, and cognitive impairment persisting for seven months. The individual has no history of manic or hypomanic episodes and reports a significant weight change and sleep disturbances. During the assessment, the patient notes a constant belief that they are being punished by the universe for past mistakes. A past diagnosis of Major Depressive Disorder was noted, but previous treatments, including SSRIs and SNRIs, have failed to provide relief. Given the presentation and history, which of the following is the most appropriate next step in managing this patient's treatment-resistant depression?

a) A. Switch to a monoamine oxidase inhibitor (MAOI)

b) B. Augment current treatment with a low-dose atypical antipsychotic

c) C. Initiate a trial of transcranial magnetic stimulation (TMS)

d) D. Enroll in a cognitive therapy-focused rehabilitation program

Correct Answer: B. Augment current treatment with a low-dose atypical antipsychotic

Rationale:

The best next step is to augment current treatment with a low-dose atypical antipsychotic (Option B). This strategy can be effective for treatment-resistant depression, especially when delusional beliefs are present, as atypical antipsychotics can help address mood symptoms and any psychotic features. MAOIs (Option A) are generally reserved for cases unresponsive to other treatment options due to their dietary restrictions and side effect profiles. TMS (Option C) is a valid treatment option but is typically considered after augmentation strategies have been attempted. Cognitive therapy-focused rehabilitation (Option D) might help with coping skills but is unlikely to address the biological basis of treatment-resistant depression effectively.

## Topic: Bipolar Disorders and Related Disorders

48. A 22-year-old college student presents with mood swings that have been persistent for the past two years. He describes experiencing periods of elevated mood lasting for two to three days, characterized by increased energy, decreased need for sleep, and engaging in risky behaviors such as gambling. These episodes are followed by periods of depression with low energy, feelings of hopelessness, and withdrawal from social activities, though they do not meet the criteria for major depressive episodes. There is no history of psychotic symptoms or hospitalizations. What is the most likely diagnosis according to DSM-5 criteria?

a) A. Bipolar I Disorder

b) B. Cyclothymic Disorder

c) C. Major Depressive Disorder with Mixed Features

d) D. Borderline Personality Disorder

Correct Answer: B. Cyclothymic Disorder

Rationale:

The correct answer is B. Cyclothymic Disorder. Cyclothymic Disorder is characterized by numerous periods of hypomanic symptoms and depressive symptoms that do not meet the full criteria for hypomanic or major depressive episodes over a duration of at least two years. In this scenario, the patient's mood swings have been ongoing for two years and consist of hypomanic and depressive symptoms, which align with Cyclothymic Disorder.  
  
- A. Bipolar I Disorder is incorrect because Bipolar I includes full manic episodes, and the patient does not report experiencing any episodes meeting the full criteria for mania.  
  
- C. Major Depressive Disorder with Mixed Features is incorrect because the patient’s depressive episodes do not meet the full criteria for major depressive disorder, and the occurrence of hypomanic symptoms rules this out.  
  
- D. Borderline Personality Disorder is also incorrect, as it is primarily characterized by a pervasive pattern of instability in interpersonal relationships, self-image, and affects, along with marked impulsivity, which does not fully describe the patient's presentation.

## Topic: Major Depressive Disorders and Associated Disorders

49. A 45-year-old male has been experiencing persistent low mood, fatigue, and difficulty concentrating for the past six months. He describes anhedonia and hypersomnia and has gained significant weight. The patient reports feeling hopeless and having recurrent thoughts of suicide, although he denies any active plan or intent. He has a family history of depression and his older brother is diagnosed with bipolar disorder. Which of the following is the most appropriate medication to initiate for this patient's symptoms, considering the family history?

a) A. Sertraline

b) B. Lamotrigine

c) C. Venlafaxine

d) D. Aripiprazole

Correct Answer: B. Lamotrigine

Rationale:

The correct answer is B. Lamotrigine. Given the patient's family history of bipolar disorder, careful consideration is needed to avoid antidepressants as they may induce a manic episode in individuals with undiagnosed bipolar disorder. Lamotrigine is a mood stabilizer effective in preventing depressive episodes in bipolar disorder and is a safer initial choice than standard antidepressants.   
  
Option A (Sertraline) and C (Venlafaxine) are antidepressants, which may not be appropriate given the risk of inducing mania in a patient with a family history of bipolar disorder. Option D (Aripiprazole) is an atypical antipsychotic that can be used in bipolar disorder but is not first-line for someone presenting primarily with depressive symptoms and no current mania or psychosis. Therefore, Lamotrigine is the most suitable initial treatment option.

## Topic: Bipolar Disorders and Related Disorders

50. A 50-year-old woman, recently divorced, presents to your clinic with complaints of fluctuating mood over the last year. She reports episodes when she feels overly energetic, talks quickly, and has an increased interest in various projects, though they rarely get completed. These episodes last around 5 days. In between, she experiences feelings of exhaustion, sadness, and hopelessness, lasting several weeks, that result in frequent absenteeism from work. She has never experienced hallucinations or required hospitalization but notes that these mood swings are beginning to affect her job and relationships. Which diagnosis best aligns with her symptoms according to DSM-5 criteria?

a) A. Bipolar II Disorder

b) B. Cyclothymic Disorder

c) C. Major Depressive Disorder, Recurrent

d) D. Other Specified Bipolar and Related Disorder

Correct Answer: A. Bipolar II Disorder

Rationale:

The correct answer is A. Bipolar II Disorder. According to DSM-5 criteria, Bipolar II Disorder is characterized by the presence of at least one hypomanic episode and one major depressive episode. The patient's symptoms of mood elevation lasting around five days align with a hypomanic episode, while her long periods of sadness and hopelessness suggest major depressive episodes. Cyclothymic Disorder (B), involves numerous periods of hypomanic and depressive symptoms that do not meet full criteria for a hypomanic or major depressive episode. Major Depressive Disorder, Recurrent (C), would not explain the hypomanic symptoms. Other Specified Bipolar and Related Disorder (D) would be a consideration if the full criteria for Bipolar II were not met, but in this case, they are.