

Chapter 2. Drug Classification and Behavioral Assessment

Essay questions.

Q. Why is heroin classified as a Schedule I drug by the DEA branch of the Federal Government?

A (p. 26-27). Because it is presumed to have a high potential for abuse, has no accepted medical use in the U.S., and lacks accepted safety for use under medical supervision.

Q. How can a drug approved by the Food and Drug Administration (FDA) for one condition also be prescribed by a physician for a non-approved condition?

A (p. 25). The FDA does not have any authority over the practice of medicine. There is no federal law that prohibits physicians from prescribing an approved drug for anything they choose, although some states may place restrictions on what certain drugs can be prescribed for. For instance, a drug approved as an anti-seizure medication may be prescribed as a mood stabilizer for a person suffering from bipolar disorder.

Q. What information does the Physicians' Desk Reference (PDR) provide?

A (p. 25). The PDR provides product descriptions, explanations of the drug's chemical structure, the mechanism of action, conditions for which they have been approved for use, dosage, and administration. There are also warnings, possible adverse reactions or drug interactions, and indications to whom the drug can be used for (children, elderly, nursing or pregnant mothers, etc.)

Q. What are some of the fundamental problems with drug classification?

A (p. 21). In many cases no sharp distinctions can be made between drugs. Drugs with almost identical molecular structures may induce entirely different effects, while other drugs whose molecular structures are quite different may induce almost identical effects. Some drugs may have one effect at one dose and an entirely different effect at another. A drug may have multiple psychological effects in a certain dose range, and depending on the population taking it, some of these effects may be viewed as desirable in one person and undesirable in another. Furthermore, there is no universal agreement on how to classify drugs.

Q. Controlled substances are categorized by the DEA into five schedules. What differentiates drugs placed into these schedules?

A (p. 25-26). The degree to which the drugs have accepted medical use in the U.S., their accepted safety for use under medical supervision and the degree to which they have potential abuse liability. Schedule I drugs have no accepted medical use in the U.S. and high abuse potential, whereas Schedule II - V drugs have accepted medical use and progressively have less abuse potential.

Multiple choice questions

1. Prozac is classified as an antidepressant in the *Physician's Desk Reference* because
 - a. it has been approved by the FDA for use in the treatment of major depression
 - b. it shares a molecular structure similar to most drugs used in the treatment of depression
 - c. it induces effects that are opposite to depressant drugs
 - d. the Controlled Substances Act requires that it be classified as an antidepressant
2. Drugs that are classed as _____ blunt the florid symptoms of schizophrenia and are also useful for treating mania.

- a. antipsychotics
 - b. anxiolytics
 - c. antidepressants
 - d. stimulants
3. The name “fluoxetine,” which is a common antidepressant drug, is
 - a. a nonproprietary (generic) name
 - b. a proprietary (brand) name
 - c. an approved Food and Drug Administration name
 - d. a chemical name
 4. The name “Serafem,” used for premenstrual dysphoric disorder, is
 - a. a nonproprietary (generic) name
 - b. an approved Food and Drug Administration name
 - c. a proprietary (brand) name
 - d. a chemical name
 5. According to the DEA, because heroin and LSD are drugs with a high potential for abuse but have no accepted medical use in the U.S., they are classified as Schedule _____ drugs.
 - a. I
 - b. II
 - c. III
 - d. IV
 6. The legal, official, or nonproprietary name of a drug is referred to as its _____ name.
 - a. chemical
 - b. generic
 - c. brand
 - d. structural
 7. Because Valium and Librium have a medical use in the U.S. with low abuse potential, they are classified as Schedule _____ drugs.
 - a. I
 - b. A
 - c. B
 - d. IV
 8. Designer drugs that are analogues of controlled substances are classified as Schedule _____ drugs according to the U.S. government.
 - a. I
 - b. II
 - c. III
 - d. IV
 9. Sally is taking Xanax for occasional panic attacks. Xanax is classified as a Schedule _____ drug.
 - a. I
 - b. II
 - c. III
 - d. IV
 10. Drugs commonly referred to as stimulants, are classified as a Schedule _____ drug.
 - a. I
 - b. II
 - c. III
 - d. IV
 11. The Food and Drug Administration (FDA) has recently approved the drug Abilify as a treatment for schizophrenia. This means that
 - a. Abilify may be used for any symptoms that are related to schizophrenia
 - b. physicians, in most instances, may prescribe Abilify for any medical condition that they believe is appropriate
 - c. only adults may be prescribed Abilify
 - d. physicians will need to confirm with the FDA each time they want to prescribe the medication.
 12. The function of the Food and Drug Administration is to approve
 - a. the cost that a manufacturer may charge for the drug
 - b. what physicians may prescribe a drug for
 - c. a drug’s acceptability for use in medical practice
 - d. which clinical trials the manufacturer should or should not disclose
 13. The federal government has classified psychoactive drugs for legal purposes ever since the passage of the Harrison Narcotic Act of _____.

- a. 1904
 - b. 1914
 - c. 1924
 - d. 1934
14. If a drug is categorized as a Controlled Substance by the Drug Enforcement Administration, it means that
- a. the drug may only be obtained legally by getting a prescription for it
 - b. the drug has been determined to be potentially dangerous and has potential for abuse
 - c. it is illegal to possess
 - d. it is legal to possess once you give it a different name
15. The latest drug classification scheme came from the Controlled Substances Act of _____.
- a. 1960
 - b. 1970
 - c. 1980
 - d. 1990
16. Controlled substances are divided into five schedules. The schedules
- a. reflect the abuse potential of a drug
 - b. are used by M.D.s to determine the relative effectiveness of drugs
 - c. are used by pharmacists to determine the appropriateness of a prescribed drug for a particular disorder
 - d. reflect the marketability of the drug
17. Placement of a drug in one of the five controlled substance schedule categories is dependent upon the drug's
- a. potential for abuse
 - b. acceptability for medical use in the U.S.
 - c. both of these
 - d. overall market share
18. If the Food and Drug Administration approves a drug for use as an antidepressant, it means that the drug
- a. may only be prescribed for the treatment of major depression
 - b. may only be prescribed for any condition for which the symptoms of depression are present
 - c. may be prescribed by physicians for conditions other than those in which depression symptoms are present
 - d. is not a schedule controlled substance

Chapter 7. Answers to multiple choice questions and page numbers from which questions are derived.

- 1. a, p 25
- 2. a, p 22
- 3. a, p 24
- 4. c, p 24-25
- 5. a, p 26-27
- 6. b, p 24
- 7. d, p 27
- 8. a, p 26-27
- 9. d, p 27
- 10. b, p 27
- 11. b, p 25
- 12. c, p 25

13. b, p 25

14. b, p 26

15. b, p 26

16. a, p 26

17. c, p 26

18. c, p 25