C. Discontinue the drug treatment immediately, and initiate treatment with ethosuximide.
D. Prescribe hydrocortisone cream for the skin lesions.
E. No action is needed, as the rash is common with anticonvulsant therapy.

25. A patient taking thioridazine has xerostomia (dry mouth), tachycardia, dry skin, and urinary hesitancy. In what capacity is thioridazine acting that brings about these effects?
A. As an agonist at muscarinic receptors
B. As an antagonist at muscarinic receptors
C. As an agonist at dopamine receptors
D. As an antagonist at dopamine receptors
E. As a mixed agonist-antagonist at opioid receptors

26. The therapeutic actions of an antipsychotic drug such as chlorpromazine are most likely due to its action as an
A. antagonist at dopamine receptors on cells receiving mesolimbic innervation.
B. antagonist at dopamine receptors on cells receiving nigrostriatal innervation.
C. antagonist of muscarinic receptors.
D. agonist at opioid receptors.
E. antagonist at adenosine receptors.

27. A 20-year-old male college student is brought to the clinic by his parents. He has recently stopped attending classes and has refused to answer his cell phone. When questioned, he says that he is afraid that he is being watched and that his classmates are out to get him. He doesn’t want them to track him through his phone, but they can call him without using the phone. He has not been showering or eating regularly. Organic and substance abuse disorders are ruled out, and a diagnosis of schizophrenia is made. You must decide whether to treat him with haloperidol or thioridazine. Which statement correctly compares the effectiveness of the drugs and their propensity for producing acute extrapyramidal neurotoxicities?
A. Haloperidol is more likely to be effective, but it is also more likely to produce extrapyramidal neurotoxicities.
B. Thioridazine is more likely to be effective, but it is also more likely to produce extrapyramidal neurotoxicities.
C. The likelihood of effective treatment is equal, but haloperidol is more likely to cause extrapyramidal neurotoxicities.
D. The likelihood of effective treatment is equal, but thioridazine is more likely to cause extrapyramidal neurotoxicities.
E. The likelihood of effective treatment is equal, and so is the likelihood of extrapyramidal neurotoxicities.

28. A patient undergoing chronic treatment for schizophrenia, first with a typical antipsychotic and then with an atypical agent, continues to experience episodes of paranoia and hallucinations. It is decided to use clozapine as therapy. Patients being treated with clozapine must have a baseline white blood cell count (WBC) and absolute neutrophil count (ANC) before initiation of treatment, as well as regular WBCs and ANCs during treatment and for at least 4 weeks after discontinuation of treatment. Which of the following may be caused by clozapine, thus necessitating these blood tests?
A. Agranulocytosis
B. Weight gain
C. Orthostatic hypotension
D. Anticholinergic side effects
E. Neuroleptic malignant syndrome

29. At 2 weeks of treatment with clozapine, the blood test reveals an elevated creatine kinase (CK) and white blood cell count (WCC). This could be associated with the development of which of the following?
A. Akathisia
B. Acute dystonia
C. Tardive dyskinesia
D. Extrapyramidal symptoms
E. Neuroleptic malignant syndrome

30. Drug-induced parkinsonism may occur during treatment with typical antipsychotic agents. The parkinsonian symptoms can be treated with
A. anticholinergic drugs.
B. levodopa.
C. chlorpromazine.
D. haloperidol.

31. k(κ) opiate receptors mediate
A. supraspinal analgesia.
B. respiratory depression.
C. euphoria.
D. dependence.
E. spinal analgesia.

32. Which of the following is converted to a metabolite that is capable of inducing stimulation of the central nervous system (CNS), especially in patients with renal failure?
A. Acetaminophen
B. Meperidine
C. Pentazocine
D. Naloxone
E. Naltrexone