

Mindful Continuing Education

Classifying Drugs of Abuse

1. According to The Controlled Substances Act (CSA), each of the following are indicators that a drug or other substance has a potential for abuse EXCEPT:

- A. There is evidence that individuals are taking the drug or other substance in amounts sufficient to create a hazard to their health, to the safety of other individuals, or to the community
 - B. There is significant diversion of the drug or other substance from legitimate drug channels
 - C. Individuals are taking the drug or other substance on their own initiative rather than on the basis of medical advice from a practitioner
 - D. Elicit use of the substance represents significant threats to public health, law enforcement, and national security in the United States
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2. Substances that are not formally controlled substances but may be found in illicit trafficking, are structurally or pharmacologically similar to Schedule I or II controlled substances, and that have no legitimate medical use are known as:

- A. Correlates
 - B. Analogues
 - C. Cognates
 - D. Counterparts
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Penalties-Personal Use Amount

3. The Anti-Drug Abuse Act of 1988 allows the government to punish minor drug offenders without giving them a criminal record if the offender is in possession of only a small amount of drugs, which is intended to impact the “user” of illicit drugs, while simultaneously:

- A. Saving the government the costs of a full-blown criminal investigation
 - B. Reducing mass incarceration rates
 - C. Redirecting law reinforcement resources to prevent serious and violent crimes
 - D. Focusing services on health and well-being rather than criminalization
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Drug Scheduling

4. Schedule I narcotics include alpha-methyltryptamine, bufotenine, fenethylamine, and pentylone.

- A. True**
 - B. False**
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Federal Trafficking Penalties

5. Federal trafficking penalties for a first offense of cocaine (500–4999 grams mixture) or fentanyl (40–399 grams mixture) include:

- A. Not less than 10 yrs, and not more than life**
 - B. A fine of not more than \$10 million if an individual, \$50 million if not an individual**
 - C. If death or serious injury, not less than 30 years or more than life**
 - D. Not less than 5 yrs, and not more than 40 yrs**
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U.S. Chemical Control

6. During the 1980s there was a tremendous increase in the clandestine production of controlled substances, particularly:

- A. Cocaine**
 - B. Methamphetamine**
 - C. Heroin**
 - D. Fentanyl**
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Introduction to Drug Classes

7. Controlled substances are abused to alter mood, thought, and feeling through their actions on the central nervous system, with the exception of:

- A. Anticonvulsants**
 - B. Muscle relaxants**
 - C. Cough suppressants**
 - D. Anabolic steroids**
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Addiction

8. Which of the following is NOT one of the characteristics of addiction?

- A. It is defined as compulsive drug-seeking behavior where acquiring and using a drug becomes the most important activity in the user's life**
 - B. With addiction, changes that have occurred in the body after repeated use of a drug necessitate the continued administration of the drug to prevent a withdrawal syndrome**
 - C. The individual experiences a loss of control regarding drug use**
 - D. The person with a substance use disorder will continue to use a drug despite serious medical and/or social consequences**
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Narcotics-What is the Effect on the Mind?

9. According to the authors, narcotics/opioids produce a general sense of well-being by reducing tension, anxiety, and aggression , and they come with a variety of unwanted effects, including:

- A. Drowsiness, inability to concentrate, and apathy**
 - B. Headache, lethargy, and dry mouth**
 - C. Increased body temperature, respiratory depression, and tremors**
 - D. Seizures, muscle rigidity, and abdominal pain**
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Physical Dependence and Withdrawal

10. The intensity and character of the physical symptoms experienced during opioid withdrawal are directly related to the particular drug used, the total daily dose, the interval between doses, the duration of use, and the health and personality of the user.

- A. True**
 - B. False**
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Fentanyl

11. Fentanyl has been approved by the Food and Drug Administration for use as an analgesic and anesthetic, and it is approximately 50 times more potent than morphine and 20 times more potent than heroin as an analgesic.

- A. True**
 - B. False**
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Heroin

12. Although purer heroin is becoming more common, most street heroin is “cut” with other drugs or with substances such as baby powder, boric acid, and iodine.

- A. True**
 - B. False**
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Methadone

13. As of January 1, 2008, manufacturers of methadone hydrochloride tablets 40 mg (dispersible) have voluntarily agreed to restrict distribution of this formulation to only those facilities authorized for detoxification and maintenance treatment of opioid addiction and to hospitals.

- A. True**
 - B. False**
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Opium

14. Each of the following is an accurate statement about Opium EXCEPT:

- A. The poppy plant is the source of opium and milky fluid that seeps from its incisions in the unripe seed pod of this poppy has been scraped by hand and air-dried to produce what is known as opium**
 - B. Opium can be a liquid, solid, or powder, but most poppy straw concentrate is available commercially as a chalky white powder**
 - C. It can be smoked, intravenously injected, or taken in pill form, and it may be abused in combination with other drugs**
 - D. An opium “high” is very similar to a heroin “high”, with users experiencing a euphoric rush, followed by relaxation and the relief of physical pain**
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Oxycodone

15. The most common effects of oxycodone on the brain are sedation and reductions in the subjective experience of pain, which explains its high potential for abuse.

- A. True**
 - B. False**
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Stimulants

16. Chronic, high-dose use of stimulants is frequently associated with agitation, hostility, panic, aggression, and:

- A. Decreased mental and physical performance**
 - B. Muscle deterioration and chronic exhaustion**
 - C. Suicidal or homicidal tendencies**
 - D. Seizure and strike**
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Amphetamines and Cocaine

17. Similarities and differences between amphetamines and cocaine include:

- A. The effects of amphetamines and methamphetamine are similar to cocaine, but their onset is quicker and their duration is shorter**
 - B. In contrast to cocaine, methamphetamine remains in the central nervous system longer, and a larger percentage of the drug remains unchanged in the body, producing prolonged stimulant effects**
 - C. Chronic abuse of cocaine produces a psychosis that resembles schizophrenia and is characterized by paranoia and preoccupation with one's own thoughts, while chronic amphetamine use causes unique respiratory syndromes and ischemic heart conditions**
 - D. Overdose effects of cocaine include agitation, increased body temperature, hallucinations and convulsions, while amphetamine overdose generally causes cardiac arrhythmias, extreme irritability, and tremors**
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Khat

18. Which of the following is an accurate statement about Khat, a flowering evergreen shrub that is abused for its stimulant-like effect?

- A. It can induce manic behavior with grandiose delusions, paranoia, nightmares, hallucinations, and hyperactivity**
 - B. Longer term effects include an immediate decrease in blood pressure and heart rate**
 - C. Chronic abuse of Khat can cause gastrointestinal tract problems and inhibitory impaired control**
 - D. The only accepted medical use for Khat is as a topical local anesthetic**
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Depressants

19. Depressants are used with other drugs to add to the other drugs' high or to deal with their side effects, and individuals abuse depressants to experience:

- A. Escape**
 - B. Decreased agitation or anxiety**
 - C. Euphoria**
 - D. Sleep inducing effects**
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Barbiturates

20. While lower doses of barbiturates cause mild euphoria, lack of inhibition, relief of anxiety, and sleepiness, higher doses cause impairment of memory, judgment, and coordination, as well as irritability and:

- A. Difficulty breathing**
 - B. Coma**
 - C. Body weakness**
 - D. Paranoid and suicidal ideation**
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Rohypnol

21. Rohypnol is used in combination with alcohol to produce an exaggerated intoxication and abuse of Rohypnol may be associated with:

- A. Severe respiratory distress**
 - B. Multiple-substance abuse**
 - C. Memory loss**
 - D. Nerve damage**
-

Hallucinogens

22. Weeks or even months after some hallucinogens have been taken, the user may experience flashbacks or fragmentary recurrences of certain aspects of the drug experience in the absence of actually taking the drug.

- A. True**
 - B. False**
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Ecstasy/MDMA

23. Which of the following is NOT a correct statement about MDMA's effect on the mind?

- A. Clinical studies suggest that MDMA may increase the risk of long-term, perhaps permanent, problems with memory and learning**
 - B. MDMA causes changes in perception, including euphoria and increased sensitivity to touch, energy, sensual and sexual arousal, need to be touched, and need for stimulation**
 - C. MDMA mainly affects brain cells that use the chemical dopamine to communicate with each other**
 - D. Unwanted psychological effects may include confusion, anxiety, depression, paranoia, sleep problems, and drug craving**
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Ketamine

24. Ketamine may be used to help individuals feel detached from their pain and environment, and as such it is referred to as a "disaffiliated analgesic."

- A. True**
 - B. False**
-

LSD, Peyote, and Mescaline

25. Characteristics of LSD, peyote, and mescaline include:

- A. Flashbacks have been reported for days, and even months, after taking the last dose of mescaline and peyote**
 - B. Users of LSD may experience euphoria, which is sometimes followed by periods of amnesia**
 - C. LSD is an odorless and colorless substance with a slightly bitter taste that is often added to absorbent paper, while peyote cactus buttons are chewed or soaked in water to produce an intoxicating liquid**
 - D. Physical effects of peyote and mescaline include increased appetite, sleeplessness, and tremors**
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Marijuana/Cannabis

26. Inexperienced marijuana users or those who have taken a large dose may experience:

- A. Time distortions and heightened imagination**

- B. Ataxia and short-term memory impairments**
 - C. Paranoia, confusion, anxiety, and panic attacks**
 - D. Impaired judgment and reduced coordination**
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Steroids

27. In both men and women, anabolic steroid use can cause high blood pressure and metabolic syndrome, which may increase the risk of coronary artery disease, strokes, and heart attacks.

- A. True**
 - B. False**
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Drugs of Concern-DMX

28. Behavioral effects of the “4th plateau” of DMX abuse include:

- A. Euphoria and hallucinations**
 - B. Distorted visual perceptions**
 - C. Loss of motor coordination**
 - D. Out of body sensations**
-

Designer Drugs

29. Recently, the abuse of clandestinely synthesized drugs has re-emerged as a major worldwide problem, and these drugs are illicitly produced with the intent of developing substances that differ slightly from controlled substances in their chemical structure, while retaining their pharmacological effects.

- A. True**
 - B. False**
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K2/Spice

30. Overdose deaths attributed to the abuse of synthetic cannabinoids are generally caused by kidney and liver failure.

- A. True**
 - B. False**
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