


Psychotropic Medication

Comprehensive Community Services



Medication Overview

- Medications can be used to treat mental health symptoms
- Often medications need to be used in conjunction with other therapies to be most effective
- Medications can be used "off label"
- Types of medication
 - Pills or capsules
 - Liquids
 - Injections
 - Tablet that dissolve in the mouth
- Medications can be titrated (increased) or tapered (decreased)



Medication Classifications: Antipsychotics

- Treat symptoms of psychosis by affecting dopamine levels
- 1st generation (typical) – developed mid-20th century
 - Treats symptoms of Schizophrenia and Schizoaffective Disorder
 - Side effects: movement disorders (tardive dyskinesia)
- 2nd generation (atypical)
 - Can also treat acute mania, bipolar disorder, treatment-resistant depression
 - Side effects: weight gain
- Long-acting injectable antipsychotic medication (LAI)



Medication Classifications: Antidepressant

- Treats symptoms of depression by affecting: serotonin, norepinephrine, and/or dopamine
- May be used to treat depression with anxiety, PTSD, OCD, generalized anxiety disorder (may require higher doses for these disorders)
- Careful assessment if using to treat bipolar as may worsen risk of mania
- 4-6 weeks to be at therapeutic level
- Side effects often happen quickly and then get better/go away

Medication Classifications: Antidepressant

- Older: tricyclics and Monoamine oxidase inhibitors (MAOI)
 - Side effects tricyclics: dry mouth, blurred vision, constipation, urinary retention, drowsiness, increased appetite leading to weight gain, drop in blood pressure which causes lightheadedness, sweating
 - MAOI least prescribed – can cause dangerously low blood pressure if combined with certain foods or medications
 - Foods: cheese, sauerkraut, cured meats, draft beer, miso, tofu, soy sauce
- Newer: Selective Serotonin Reuptake Inhibitors (SSRI) and Selective Norepinephrine Reuptake Inhibitors (SNRI) and Bupropion (affects dopamine)
 - Side effects: nausea; nervousness, agitation, or restlessness; dizziness; reduced sexual desire or difficulty reaching orgasm or inability to maintain an erection; drowsiness; insomnia; weight gain or loss; headache; dry mouth; vomiting; diarrhea

Medication Classifications: Anti-Anxiety

- Reduce emotional and physical symptoms of anxiety
- Benzodiazepines (alprazolam or Xanax)
 - Treat social phobia, panic disorder, generalized anxiety
 - Fast acting, short-term
 - Tolerance and withdrawal concerns
 - Side effects: low blood pressure, decreased sex drive, nausea, lack of coordination, disinhibition, depression, unusual emotional dysfunction, memory loss, difficulty thinking
- Beta-Blockers (heart medication)
 - "off label" for trembling, sweating (symptoms of phobias)

Medication Classifications: Mood Stabilizers

- Treat mood swings of Bipolar Disorder
- Older: Lithium (Bipolar Disorder I)
 - Need frequent blood draws
 - Damaging to kidneys and liver
 - .6-.8 is therapeutic level
 - Water soluble so need to drink plenty of fluids
- Newer: Anticonvulsants – "off label"

Special Groups:

Children

- Medications are not always researched for both children and adults so given to children as "off label"
- Concerns about effects on growth of body and brain
- Side effects may be different
 - Antidepressants – increase suicidal tendencies in children

Older Adults

- Lower doses needed since body metabolizers slower
- If taking multiple medications increases risk of drug interactions
- Memory concerns may cause medications to be taken improperly
- Side effects can be more common
 - Antipsychotic – tardive dyskinesia



Special Groups:

Pregnant Women

- ▶ Some medications may be transmitted to the infant through placenta or breastfeeding
 - ▶ Many medications not researched on pregnant women
- ▶ Concerns around medicating for postpartum depression if breastfeeding

Culture

- ▶ Biological differences cause different response to medications:
 - ▶ Africans and Asians metabolize some medications slower than Caucasians so may benefit from lower doses
- ▶ Barriers: language, stigma, socio-economic stressors, health care access



Teaming with prescribers

- ▶ Know general classifications
- ▶ Know your beliefs about medications
- ▶ Share what you are observing and what the consumer is reporting
 - ▶ Listen for consumer complaints
 - ▶ Know general course of side effects and what to do
- ▶ Ask prescribers about the options – DO NOT TALK TO THE CONSUMER ABOUT SUGGESTIONS OR OPTIONS



Additional things to know

- Anticholinergic (most psychotropics)
 - Will dehydrate quickly and be heat sensitive
 - Encourage drinking water and using sunscreen
 - Causes: 1) constipation and dry mouth, 2) confusion, 3) seizures
- Not only are diagnoses genetic but reactions to medications are also genetic (1st generation relative)
- Consumers tend to be 40-50% compliant with medical medications and even less compliant with psychotropics
- Can have bad side effects if abruptly start and stop taking some medications (antidepressant, antipsychotic, and anti-anxiety)
- 10% of psychotropic medications are prescribed by a psychiatrist
 - Less than 50% of antipsychotics are prescribed by a psychiatrist