

# ASSOCIATION FOR THE CHRONICALLY MENTALLY ILL

AUGUST 19<sup>TH</sup>, 2020

- Please mute your lines
- Send your questions in chat
- To see the speakers, go to speaker view
- The doctors will be glad to answer questions on medication topics
- No specific patient treatment questions (e.g. why is my son taking Abilify and not Risperdal? Or why is he taking 30mg & not 60 mg of Risperdal?)
- We will begin promptly at 5:00PM
- The educational session is being recorded and webinar will be available on htpps://acmionline.com

# OVERVIEW OF PSYCHIATRIC MEDICATIONS

ALICIA COWDREY, MD & BETH DARLING, DO
DISTRICT MEDICAL GROUP PSYCHIATRY
VALLEYWISE HEALTH – OUTPATIENT BEHAVIORAL HEALTH

L HEALTH

AUGUST 19, 2020
PRESENTATION FOR ACMI



### ALICIA COWDREY, MD

- Medical Director, Outpatient
   Behavioral Health
- Associate Program Director, Adult Psychiatry Residency Training Program



## BETH DARLING, DO

Medical Director, Mesa Riverview
 Assertive Community Treatment (ACT)
 Team



### **OBJECTIVES**

- Provide information about how psychiatrists use the art and science of psychiatry to prescribe medications
- Provide information about the classes of medications generally prescribed by psychiatrists, the reasons for prescribing, and common side effects
- Discuss challenges commonly faced in psychiatric medication management
- Provide resources for patients and families about medications

# OVERVIEW OF PSYCHIATRIST ROLE WITH MEDS

Medications can play a role in treating many psychiatric health conditions

• Choosing the right treatment plan should be based on a person's individual needs and medical situation, and under the care of a mental health professional, with experience with the medical condition being treated

- Routine medical assessment and management of whole patient with focused physical exams and tests
  - Body-Mass Index, abdominal girth, blood pressure, heart rate, basic neurological exam, detection of problems with the thyroid or lymph nodes, assessment of rashes, listening to the heart, and assessment of fluid volumes
  - General labs, EKG, Urine Drug Screen

 Physicians recognize and appreciate the risks and benefits of available treatment options relative to alternative treatments – or no treatment

• All therapies, including placebo, involve hazards that could worsen a clinical condition directly (think side effects) or indirectly (think worsen the disease)

Balance of this is gained through knowledge and experience

Active collaboration with PCPs and specialists

• Particularly because psychiatric conditions often co-occur with health problems related to lifestyle (obesity, hypertension, STDs) or caused by the treatment itself, such as medication-induced weight gain or changes in metabolism)

- Example: Substantial importance to be able to balance the lifesaving effects of clozapine for a person who is obese, prediabetic, chronically suicidal with significant psychosis
  - Specialists often look to psychiatrists to manage the physical health care

- Differentiating adverse drug reactions from primary illness symptoms can be really challenging
  - Akathisia (a movement disorder) from antipsychotics vs anxiety or hypomania (restlessness, pacing)
  - Side effects of antidepressants versus some of the symptoms of depression
  - Timelines are really important!
  - History of treatments with specifics causes and effects
  - Nocebo effects
    - Nonspecific, correlate with patient's expectations, past experiences, predisposition to somatization

# **Antidepressant adverse effects**

Nausea
Headache
Diarrhea
Constipation
Dry mouth
Tremor
Gl upset
Sweating

Appetite Changes
Weight changes
Fatigue
Insomnia or
hypersomnia
Loss of interest in sex
Poor concentration
Psychomotor
Retardation
Agitation
Anger
Suicidality

### **Depression**

Depressed
mood
Anhedonia
Helplessness
Hopelessness
Indecisiveness
Tearfulness

- Recognizing the natural course of illness
- Effects of discontinuing precious medications
- Interactions between medications
- Potential for poor or erratic treatment adherence
- Medical comorbidities
- Presence of substance use

- Considerations:
  - Change only one thing at a time
  - Allow for medications to reach steady state before forming conclusions
  - Impose a method for systematically tracking target symptoms and potential side effects
  - Inquire about missed medication dosages in an inquisitive, nonjudgmental manner
    - Don't take treatment adherence for granted nor routinely assume its absence

- Paradoxical adverse effects
  - Could virtually any side effect happen with a drug at any time????
  - Unambiguous worsening of a symptom in response to a medication that should be helping
  - Coincidences
  - Still emerging incidences
  - Frankly implausible side effects, little value in challenging the validity of self report, just assure the patient that the phenomenon poses no medical hazard

- Extrapolating "evidence based research findings" to "real world" patients
  - Randomized Controlled Trials (RCTs) that are FDA approved take place in highly idealized circumstances, so effects may not quite generalize in more complicated settings
  - FDA regulation usually in acute episodes of illness, maybe not looking at more low lying symptomatology
  - Low reported rates of adverse effects in RCTs with much higher rates of adverse effects under routine conditions
    - Ex: low incidence rate of sexual dysfunction in clinical trials with SSRIs versus what we see more often in clinical practices

- Risk-benefit analysis
  - Shared decision making
  - Person centered care
  - Recovery principles
  - Known versus unknown drug risks
  - Watchful waiting
  - Deciding when to pursue antidotes and when to switch medicines
  - Person's own history of treatment, as well as other members of family's treatment history

## TYPES OF MEDICATIONS USED IN PSYCHIATRY

- Anti-depressants
- Anti-anxiety medications
- Stimulants
- Anti-psychotic medications
- Mood stabilizers
- Medications to address side effects

### OANTI-DEPRESSANTS

- Commonly used to treat depression
  - Also used for anxiety, pain and insomnia
  - Antidepressants are not FDAapproved specifically to treat ADHD, but are sometimes used to treat ADHD in adults.
- The most popular types of antidepressants are called selective serotonin reuptake inhibitors (SSRIs). Examples of SSRIs include:
  - Fluoxetine / Prozac
  - Citalopram / Celexa
  - Sertraline / Zoloft
  - Paroxetine / Paxil
  - Escitalopram / Lexapro

- Other types of antidepressants are serotonin and norepinephrine reuptake inhibitors (SNRIs). SNRIs are similar to SSRIs and include venlafaxine / Effexor and duloxetine. / Cymbalta
- ➤ <u>Bupropion</u> / Wellbutrin is a third type of which works differently than either SSRIs or SNRIs.
  - Can treat seasonal affective disorder and to help people stop smoking.
- ➤ SSRIs, SNRIs, and bupropion are popular because they do not cause as many side effects as older classes of antidepressants, and seem to help a broader group of depressive and anxiety disorders.
- Older antidepressant medications include tricyclics, tetracyclics, and monoamine oxidase inhibitors (MAOIs).
- Newer options, less often used: Pristiq, Spravato, Ketamine, etc

### HOW DO PEOPLE RESPOND TO ANTIDEPRESSANTS?

- All antidepressant medications work about as well as each other
- For reasons not yet well understood, some people respond better to some antidepressant medications than to others.
- Therefore, it is important to know that some people may not feel better with the first medicine they try and may need to try several medicines to find the one that works for them.
- Others may find that a medicine helped for a while, but their symptoms came back.

#### HOW DO PEOPLE RESPOND TO ANTIDEPRESSANTS?

- It is important to carefully follow the doctor's directions for taking medications at an adequate dose and time (often 4 to 6 weeks) for it to work correctly
- lis important to NOT stop taking them without the help of a doctor.
- Sometimes people taking antidepressants feel better and stop taking the medication too soon, and the depression may return.
- When it is time to stop the medication, the doctor will help the person slowly and safely decrease the dose. It's important to give the body time to adjust to the change.
- People don't get addicted (or "hooked") on these medications, but stopping them abruptly may also cause withdrawal symptoms or re-emergence of previous symptoms

#### WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTIDEPRESSANTS?

- Some antidepressants may cause more side effects than others.
- You may need to try several different antidepressant medications before finding the right one
- The most common side effects listed by the FDA include:
  - Nausea and vomiting
  - Weight gain
  - Diarrhea
  - Sleepiness
  - Sexual problems
- Combining SSRI or SNRIs with one of the commonly-used "triptan" medications used to treat migraine headaches could cause a life-threatening illness called "serotonin syndrome."
  - Symptoms include: agitation, hallucinations, fever, and changes in blood pressure
  - Usually occurs with older antidepressants such as MAOIs, but can still occur with newer antidepressants if mixed with the wrong medications

# WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTIDEPRESSANTS?

- Call your doctor right away if you have any of the following symptoms, especially if they are new, worsening, or worry you
  - Thoughts about suicide or dying
  - Attempts to commit suicide
  - New or worsening depression
  - New or worsening anxiety
  - Feeling very agitated or restless
  - Panic attacks
  - Trouble sleeping (insomnia)
  - New or worsening irritability
  - Acting aggressively, being angry, or violent
  - Acting on dangerous impulses
  - An extreme increase in activity and talking (mania)
  - Other unusual changes in behavior or mood

### DANTI-ANXIETY MEDICATIONS

- Help reduce the symptoms of anxiety, such as panic attacks, or extreme fear and worry.
- Taking these medications for a short period of time can help the person keep physical symptoms under control and can be used "as needed" to reduce acute anxiety.
- The most common acute anti-anxiety medications are called benzodiazepines.
- In the case of panic disorder or social phobia (social anxiety disorder), benzodiazepines are usually second-line treatments, behind SSRIs or other antidepressants.
- Benzodiazepines include:
  - Clonazepam / Klonopin
  - Alprazolam / Xanax
  - Lorazepam / Ativan
- Beta-blockers help manage physical symptoms of anxiety, such as trembling, rapid heartbeat, and sweating that people with phobias that people experience in difficult situations. (Metoprolol / Lopressor, Propranolol / Inderal)

#### HOW DO PEOPLE RESPOND TO ANTI-ANXIETY MEDICATIONS?

- Benzodiazepines are effective in relieving anxiety and take effect more quickly than the antidepressant medications (or buspirone) often prescribed for anxiety.
- However, people can build up a tolerance to benzodiazepines if they are taken over a long period of time and may need higher and higher doses to get the same effect. Some people may even become dependent on them.
- To avoid these problems, doctors usually prescribe benzodiazepines for short periods, a practice that is especially helpful for older adults, people who have substance abuse problems and people who become dependent on medication easily.
- If people suddenly stop taking benzodiazepines, they may have withdrawal symptoms or their anxiety may return. Therefore, benzodiazepines should be tapered off slowly.

### OTHER ANTI-ANXIETY MEDICATIONS

- **Buspirone** / **Buspar** is sometimes used for the long-term treatment of chronic anxiety. In contrast to the benzodiazepines, buspirone must be taken every day for a few weeks to reach its full effect. It is not useful on an "as-needed" basis.
- Hydroxyzine / Vistaril like Benadryl, anti-histamine, can be used regularly or as needed
- Trazodone / Desyrl small dose is often used in older adults, can be used regularly or as needed
- Gabapentin / Neurontin can help with anxiety when taken regularly
- SSRIs/SNRIs/Buproprion

#### WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTI-ANXIETY MEDICATIONS?

- Nausea
- Blurred vision
- Headache
- Confusion
- Tiredness
- Nightmares

- Tell your doctor if any of these symptoms are severe or do not go away:
  - Drowsiness
  - Dizziness
  - Unsteadiness
  - Problems with coordination
  - Difficulty thinking or remembering
  - Increased saliva
  - Muscle or joint pain
  - Frequent urination
  - Blurred vision
  - Difficulty breathing

# WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTI-ANXIETY MEDICATIONS?

- Beta-blockers generally are not recommended for people with asthma or diabetes because they may worsen symptoms related to both.
- Common side effects of beta-blockers include:
  - Fatigue
  - Cold hands
  - Dizziness or light-headedness
  - Weakness

- Possible side effects from buspirone include:
  - Dizziness
  - Headaches
  - Nausea
  - Nervousness
  - Lightheadedness
  - Excitement
  - Trouble sleeping

### STIMULANTS

- Increase alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration
- Treat children, adolescents, or adults diagnosed with ADHD.
- Stimulants used to treat ADHD include:
  - Methylphenidate / Ritalin / Concerta
  - Amphetamine / Adderall
  - Dextroamphetamine / Dexedrine
  - Lisdexamfetamine / Vyvanse
- Two other non-stimulant antihypertensive medications, clonidine / Catapres/Kapvay and guanfacine
   / Tenex / Intuniv
  - Often tried first in a young person with ADHD, and if response is insufficient, then a stimulant is prescribed.
- Stimulants are also prescribed to treat other health conditions, including narcolepsy, and occasionally depression (especially in older or chronically medically ill people and in those who have not responded to other treatments).

### STIMULANTS

• Prescription stimulants have a calming and "focusing" effect on individuals with ADHD. Stimulant medications are safe when given under a doctor's supervision. Some children taking them may feel slightly different or "funny."

• Some parents worry that stimulant medications may lead to drug abuse or dependence, but there is little evidence of this when they are used properly as prescribed. Additionally, research shows that teens with ADHD who took stimulant medications were less likely to abuse drugs than those who did not take stimulant medications.

### WHAT ARE THE POSSIBLE SIDE EFFECTS OF STIMULANTS?

- Most side effects are minor and disappear when dosage levels are lowered.
- The most common side effects include:
  - Difficulty falling asleep or staying asleep
  - Loss of appetite
  - Stomach pain
  - Headache
  - Less common side effects include:
    - Motor tics or verbal tics (sudden, repetitive movements or sounds)
    - Personality changes, such as appearing "flat" or without emotion

### ANTIPSYCHOTIC MEDICATIONS

- Antipsychotic medicines are primarily used to manage psychosis. used to help relieve symptoms and improve quality of life.
- It can be a symptom of substance use or a mental health condition such as schizophrenia, bipolar disorder, or very severe depression
- Antipsychotic medications are often used in combination with other medications to treat delirium, dementia, and mental health conditions, including:
  - Attention-Deficit Hyperactivity Disorder (ADHD)
  - Severe Depression
  - Eating Disorders
  - Post-traumatic Stress Disorder (PTSD)
  - Obsessive Compulsive Disorder (OCD)
  - Generalized Anxiety Disorder

### ANTI-PSYCHOTIC MEDICATIONS

- Older or first-generation

   antipsychotic medications are also
   called conventional "typical"
   antipsychotics or "neuroleptics".
- Some of the common typical antipsychotics include:
  - Chlorpromazine / Thorazine
  - Haloperidol / Haldol
  - Perphenazine / Trilafon
  - Fluphenazine / Prolixin

- Newer or second generation medications are also called "atypical" antipsychotics.
- Some of the common atypical antipsychotics include:
  - Risperidone / Risperdal
  - Olanzapine / Zyprexa
  - Quetiapine / Seroquel
  - Ziprasidone / Geodon
  - Aripiprazole / Abilify
  - Paliperidone / Invega
  - Lurasidone / Latuda
  - Clozapine / Clozaril

### ANTIPSYCHOTIC MEDICATIONS

- Certain symptoms, such as feeling agitated and having hallucinations, usually go away within days of starting an antipsychotic medication.
- Symptoms like delusions usually go away within a few weeks, but the full effects of the medication may not be seen for up to six weeks.
- Every patient responds differently, so it may take several trials of different antipsychotic medications to find the one that works best.
- Some people may have a relapse—meaning their symptoms come back or get worse. Usually relapses happen when people stop taking their medication, or when they only take it sometimes. Some people stop taking the medication because they feel better or they may feel they don't need it anymore, but no one should stop taking an antipsychotic medication without talking to his or her doctor.
- When a doctor says it is okay to stop taking a medication, it should be gradually tapered off— never stopped suddenly. Many people must stay on an antipsychotic continuously for months or years in order to stay well; treatment should be personalized for each individual

# LONG ACTING INJECTABLE (LAI) ANTI-PSYCHOTIC MEDICATIONS

- Options outside of oral medications with very good results.
- Its good to present the options for medications, versus making LAIs a punishment or forcing them if people don't see the need to take oral meds or if they take them inconsistently
- Ex: the options to treat include a daily regimen, a monthly regimen, a 2-3 month regimen, which one of those would best fit with your life?

# LONG ACTING INJECTABLE (LAI) ANTI-PSYCHOTIC MEDICATIONS

- First-generation LAI antipsychotics include:
  - haloperidol decanoate / Haldol Dec
  - fluphenazine decanoate /
     Prolixin Dec

- Second-generation atypical antipsychotics available for long-acting injection include:
  - risperidone / Risperdal Consta
  - olanzapine / Zyprexa Relprevv
  - paliperidone palmitate Invega
     Sustenna / Invega Trinza
  - aripiprazole / Abilify Maintena /Aristada, / Initio

### NEWER ANTIPSYCHOTIC MEDICATIONS

- Not as widely used due to still being branded and not available in generic form and not covered on many insurance benefits
- Asenapine / Saphris
- Ilioperidone / Fanapt
- Brexpiprazole / Rexaulti
- Cariprazine / Vraylar

#### WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTIPSYCHOTIC MEDICATIONS?

- Antipsychotics have many side effects (or adverse events) and risks.
  - Drowsiness
  - Dizziness
  - Restlessness
  - Weight gain (the risk is higher with some atypical antipsychotic medicines)
  - Dry mouth
  - Constipation
  - Nausea
  - Vomiting
  - Blurred vision
  - Low blood pressure

- Uncontrollable movements, such as tics and tremors (the risk is higher with typical antipsychotic medicines)
- Seizures
- A low number of white blood cells, which fight infections
- A person taking an atypical antipsychotic medication should have his or her weight, glucose levels, and lipid levels monitored regularly by a doctor.

# WHAT ARE THE POSSIBLE SIDE EFFECTS OF ANTIPSYCHOTIC MEDICATIONS?

- Typical antipsychotic medications can also cause additional side effects related to physical movement, such as:
  - Rigidity
  - Persistent muscle spasms
  - Tremors
  - Restlessness

#### Tardive Dyskinesia

• Muscle movements, commonly around the mouth, that a person can't control. TD can range from mild to severe, and in some people, the problem cannot be cured. Sometimes people with TD recover partially or fully after they stop taking typical antipsychotic medication. People who think that they might have TD should check with their doctor before stopping their medication. TD rarely occurs while taking atypical antipsychotics.

### MOOD STABILIZERS

- Primarily to treat bipolar disorder
- Lithium is approved for the treatment of mania and the maintenance treatment of bipolar disorder. A number of cohort studies describe anti-suicide benefits of lithium for individuals on long-term maintenance. Mood stabilizers work by decreasing abnormal activity in the brain and are also sometimes used to treat:
  - Depression (usually along with an antidepressant)
  - Schizoaffective Disorder
  - Disorders of impulse control
  - Certain mental illnesses in children
- Anticonvulsant medications are also used as mood stabilizers. They were originally developed to treat seizures, but they
  were found to help control unstable moods as well.
  - valproic acid / divalproex sodium / Depakote / Depakene "mixed" symptoms of mania and depression or those with rapid-cycling bipolar disorder, valproic acid may work better than lithium.
  - Other anticonvulsants used as mood stabilizers include:
    - Carbamazepine
    - Lamotrigine
    - Oxcarbazepine

#### WHAT ARE THE POSSIBLE SIDE EFFECTS OF MOOD STABILIZERS?

- Mood stabilizers can cause several side effects, and some of them may become serious, especially at excessively high blood levels.
  - Itching, rash
  - Excessive thirst
  - Frequent urination
  - Tremor (shakiness) of the hands
  - Nausea and vomiting
  - Slurred speech
  - Fast, slow, irregular, or pounding heartbeat
  - Blackouts
  - Changes in vision
  - Seizures
  - Hallucinations (seeing things or hearing voices that do not exist)
  - Loss of coordination
  - Swelling of the eyes, face, lips, tongue, throat, hands, feet, ankles, or lower legs.

# WHAT ARE THE POSSIBLE SIDE EFFECTS OF MOOD STABILIZERS?

- If a person with bipolar disorder is being treated with lithium, he or she should visit the doctor regularly to check the lithium levels his or her blood, and make sure the kidneys and the thyroid are working normally.
- Lithium is eliminated from the body through the kidney, so the dose may need to be lowered in older people with reduced kidney function.
- Loss of water from the body, such as through sweating or diarrhea, can cause the lithium level to rise, requiring a temporary lowering of the daily dose.
- Kidney functions are checked periodically during lithium treatment, actual damage of the kidney is uncommon in people whose blood levels of lithium have stayed within the therapeutic range.

#### WHAT ARE THE POSSIBLE SIDE EFFECTS OF MOOD STABILIZERS?

- Some possible side effects linked anticonvulsants (such as valproic acid) include:
  - Drowsiness
  - Dizziness
  - Headache
  - Diarrhea
  - Constipation
  - Changes in appetite
  - Weight changes
  - Back pain
  - Agitation
  - Mood swings
  - Abnormal thinking
  - Uncontrollable shaking of a part of the body
  - Loss of coordination
  - Uncontrollable movements of the eyes
  - Blurred or double vision
  - Ringing in the ears
  - Hair loss

- These medications may also:
  - Cause damage to the liver or pancreas, so people taking it should see their doctors regularly
  - Increase testosterone (a male hormone) levels in teenage girls and lead to a condition called polycystic ovarian syndrome (a disease that can affect fertility and make the menstrual cycle become irregular)
- Medications for common adult health problems, such as diabetes, high blood pressure, anxiety, and depression may interact badly with anticonvulsants. In this case, a doctor can offer other medication options.

#### MEDICATIONS TO TREAT THE SIDE EFFECTS OF PRESCRIBED MEDICATIONS

- Antipsychotics Side Effects
  - Benztropine / Cogentin
  - Diphenhydramine / Benadryl
  - Propranolol /Inderal
  - Benzodiazepines
  - Atropine drops
  - Glycopyrrolate / Glycate
  - Metformin / Glucophage
  - Topiramate/ Topamax

- Tardive Dyskinesia
  - •Deutetrabenazine / Austedo
  - Valbenazine / Ingrezza

#### SPECIAL POPULATIONS - CHILDREN & ADOLESCENTS

- Many medications used to treat children and adolescents with mental illness are safe and effective.
- However, some medications have not been studied or approved for use with children or adolescents.
- Still, a doctor can give a young person an FDA-approved medication on an "off-label" basis. This means that the doctor prescribes the medication to help the patient even though the medicine is not approved for the specific mental condition that is being treated or for use by patients under a certain age.
- Children may have different reactions and side effects than adults.
- Some medications have current FDA warnings about potentially dangerous side effects for younger patients.
- Other treatments for children and adolescents should be considered, either to be tried first, with medication added later if necessary, or to be provided along with medication. Psychotherapy, family therapy, educational courses, and behavior management techniques can help everyone involved cope with disorders that affect a child's mental health

## SPECIAL POPULATIONS — PEOPLE OVER 65

- People over 65 have to be careful when taking medications, especially when they're taking many different drugs.
- A higher risk for experiencing bad drug interactions, missing doses, or overdosing.
- Older adults also tend to be more sensitive to medications because people's bodies process and eliminate medications more slowly.
- Older people and their family members should talk carefully with a physician about whether a medication can affect alertness, memory, or coordination, and how to help ensure that prescribed medications do not increase the risk of falls.
- Sometimes memory problems affect older people who take medications for mental disorders. An older adult may forget his or her regular dose and take too much or not enough.
- A good way to keep track of medicine is to use a seven-day pill box, which can be bought at any pharmacy.

#### SPECIAL POPULATIONS — PREGNANCY AND POST-PREGNANCY

- Decisions on treatment during pregnancy should be based on each woman's needs and circumstances, and based on a careful weighing of the likely benefits and risks of all available options, including psychotherapy, medication, or a combination of the two.
  - While no medication is considered perfectly safe for all women at all stages of pregnancy, this must be balanced for each woman against the fact that untreated serious mental disorders themselves can pose a risk to a pregnant woman and her developing fetus.
  - Medications should be selected based on available scientific research, and should be taken at the lowest possible dose, with a medical professional who will watch them closely throughout their pregnancy and after delivery.
- Most women should avoid certain medications during pregnancy. For example:
  - Mood stabilizers are known to cause birth defects.
  - Benzodiazepines and lithium have been shown to cause "floppy baby syndrome," in which a baby is drowsy and limp, and cannot breathe or feed well.
  - Benzodiazepines may cause birth defects or other infant problems, especially if taken during the first trimester.

#### SPECIAL POPULATIONS – PREGNANCY AND POST-PREGNANCY

......

#### • Antipsychotic medications

- O Can lead to birth defects, especially during the first trimester and in combination with other drugs, but the risks vary widely and depend on the antipsychotic taken.
- Haloperidol has been studied more than others, and has been found not to cause birth defects. Research on the newer atypical antipsychotics is ongoing and lurasidone / Latuda is used often

#### Antidepressants

- Most SSRIs are considered to be safe during pregnancy. Birth defects or other problems are possible, but are very rare.
- O Babies exposed to SSRIs during the third trimester may be born with "withdrawal" symptoms such as breathing problems, jitteriness, irritability, trouble feeding, or hypoglycemia (low blood sugar). These symptoms are generally mild and short-lived, and no deaths have been reported.
- After the baby is born, women should watch for postpartum depression, especially if a mother stopped taking her medication during pregnancy.
- O Small amounts of the medication may pass into the breast milk. However, it may or may not affect the baby depending on the medication and when it is taken.

## CHALLENGES WITH PSYCHIATRIC MEDICATIONS

- People in general, do not always take their medications regularly
  - People forget, or do not make it a habit or priority
  - People may take the medications inconsistently
  - People feel better and stop the medications
- Insight varies
- Buy in varies
- Court ordered treatment can have an influence, both positive and negative
- People wanting an immediate fix for something that didn't happen overnight
- More and more research is needed in mental health to advance treatments, including medications, therapies, neurostimulation
- Medications aren't the only answer! They are part of the treatment and must be combined with the many various modalities of therapy, support, exercise, nutrition, etc in a customized approach to meet the person's need

## CHALLENGES WITH PSYCHIATRIC MEDICATIONS

• The treatment environment dictates the speed at which we can initiate and adjust treatment

- Inpatient treat faster in a controlled and safe environment, but usually means more side effects up front (sedation) as bodies adjust to meds
- Outpatient treat slower in an uncontrolled environment, so slower titration usually means less side effects, but takes time, person may still exhibit symptoms

## PATIENT RESPONSIBILITY

• If you are prescribed a medication, be sure that you:

- Tell the doctor about all medications and vitamin supplements you are already taking.
- Remind your doctor about any allergies and any problems you have had with medicines.
- Understand how to take the medicine before you start using it and take your medicine as instructed.
- Don't take medicines prescribed for another person or given for someone else.
- Call your doctor right away if you have any problems with your medicine or if you are worried that it might be doing more harm than good. Your doctor may be able to adjust the dose or change your prescription to a different one that may work better for you.

## RESOURCES FOR PATIENTS AND FAMILIES

- National Institute of Mental Health
- https://www.nimh.nih.gov/health/topics/mental-health-medications/index.shtml
- Information about medications changes frequently. Check the <u>U.S. Food and Drug</u>

  <u>Administration (FDA) website</u> for the latest warnings, patient medication guides, or newly approved medications. Brand names are not referenced on this page, but you can search by brand name on <u>MedlinePlus Drugs</u>, <u>Herbs and Supplements Drugs</u> website.

## REFERENCES

- National Institute of Mental Health
- https://www.nimh.nih.gov/health/topics/mental-healthmedications/index.shtml