Chapter 17

Drugs Used for Mood Disorders

Learning Objectives

Discuss the mood swings associated with bipolar disorder

Differentiate between the physiologic and psychologic therapeutic responses seen with antidepressant therapy

Compare drug therapy used during the treatment of the manic phase and depressive phase of bipolar disorder

Learning Objectives (cont’d)

Describe the essential components of a baseline assessment of a patient with depression or bipolar disorder

Identify the premedication assessments necessary before administration of MAOIs, SSRIs, tricyclic antidepressants, and antimanic agents

Learning Objectives (cont’d)

Cite monitoring parameters used for patients taking monoamine oxidase inhibitors (MAOIs), selective serotonin reuptake inhibitors (SSRIs), or tricyclic antidepressants

Mood Disorders

Present when certain symptoms impair a person’s ability to function for a time

Abnormal feelings of depression or euphoria

Underlying causes still unknown

Changes in brain neurotransmitters

Negative life events

Endocrine abnormalities

Genetic factors

Depression

Emotional symptoms

Sadness, no enjoyment of usual activities

Physical symptoms
- Fatigue, sleep disturbances, appetite disturbances, stomach complaints, heart palpitations
- Cognitive symptoms
  - Inability to concentrate, slowed thinking, poor memory, confusion
- Psychomotor symptoms
  - Slowed movements, agitation
- Bipolar Disorder
  - Episodes of mania (euphoria) and depression, separated by intervals without mood disturbances
  - Paranoid or grandiose delusions during manic phase
- Drug treatment includes mood stabilizing agents
  - Lithium
  - Anticonvulsant drugs
- Treatment of Mood Disorders
  - Acute phase: 6 to 8 weeks
    - Symptoms monitored
    - Doses adjusted
    - Psychotherapy initiated
  - Continuation phase
    - Prevent relapse
    - Consolidate initial response into complete recovery
- Treatment of Mood Disorders (cont’d)
  - Maintenance phase
    - Recommended for individuals with history of three or more depressive episodes, chronic depression, or bipolar disorder
    - Goal: prevent recurrence
- Antidepressants
  - MAOIs
  - SSRIs
Tricyclic antidepressants

Miscellaneous agents

Selecting Therapy

Two factors

- Patient’s history of response to previously prescribed antidepressants
- Potential for adverse effects associated with different antidepressants

- No difference in overall efficacy, but differences in adverse effects
- Physiologic manifestations alleviated within first week of therapy
- Psychological symptoms improve after 2 to 4 weeks

Nursing Process for Mood Disorder Therapy

Assessment

- History of mood disorder, basic mental status, interpersonal relationships, mood, clarity of thought, thoughts of death, psychomotor function, sleep pattern, dietary history, nonadherence

Planning

Therapeutic outcomes

Nursing Process for Mood Disorder Therapy (cont’d)

Implementation

- Individualized interventions
- Environment of acceptance
- Remain calm and firm
- Provide safety for suicidal patients
- Use physical restraints within guidelines
- Provide for nutritional needs
- Handle manipulative behavior consistently

MAOIs

- Block the metabolic destruction of norepinephrine, dopamine, and serotonin neurotransmitters by the enzyme monoamine oxidase
MAOIs
- Phenelzine (Nardil)
- Tranylcypromine (Parnate)
- Isocarboxazid (Marplan)

MAOIs (cont’d)

Premedication assessment
- Obtain blood pressure and pulse rate
- Ensure patient has not recently ingested meals with a high tyramine content
- Check for medications taken before initiation of therapy
- Monitor blood glucose of diabetic patients

Evaluation
- Side effects, drug interactions

Learning Objectives
- Compare the mechanism of action of SSRIs to that of other antidepressant agents
- Cite the advantages of SSRIs over other antidepressant agents
- Examine the drug monograph for SSRIs to identify significant drug interactions
- Prepare a teaching plan for an individual receiving tricyclic antidepressants
- Identify the premedication assessments necessary before administration of MAOIs, SSRIs, tricyclic antidepressants, and antimanic agents

SSRIs
- Inhibit the reuptake and destruction of serotonin from the synaptic cleft, prolonging the action of the neurotransmitter
- Most widely used class of antidepressants
- Advantage: do not have anticholinergic or cardiovascular side effects

SSRIs (cont’d)

Premedication assessment
- Obtain baseline blood pressures
- Obtain baseline weight
- Note GI and central nervous system symptoms
- Check hepatic studies

- Evaluation
  - Side effects, drug interactions

- Tricyclic Antidepressants
  - Prolong the action of norepinephrine, dopamine, and serotonin by blocking reuptake

- Premedication assessment
  - Constipation, blood pressure, cardiac symptoms, history of seizures

- Evaluation
  - Side effects, drug interactions

- Other Agents
  - Bupropion hydrochloride (Wellbutrin)
  - Maprotiline hydrochloride
  - Mirtazapine (Remeron)
  - Nefazodone (Serzone)
  - Trazodone hydrochloride (Desyrel)
  - Venlafaxine (Efflexor)

- Antimanic agent: lithium carbonate