

Psychotherapeutic Drug Therapy

Chapter 7

Learning Objectives

Lesson 7.1: Psychotherapeutic Drug Therapy

(Slide 1 of 2)

1. Briefly explain how psychotherapeutic medications affect human beings.
2. Identify four classifications of psychotherapeutic medications.
3. Discuss three classes of antianxiety agents and the side effects associated with each.
4. Prepare a list of three teaching points for clients who are beginning antidepressant therapy.
5. Explain the three major guidelines for care of clients taking lithium.

Learning Objectives

Lesson 7.1: Psychotherapeutic Drug Therapy

(Slide 1 of 2)

- 6. Identify one central nervous system and three peripheral nervous system side effects of antipsychotic (neuroleptic) drug therapy.
- 7. Describe five care guidelines for clients receiving psychotherapeutic drugs.
- 8. Discuss three topics for teaching clients about their medications.
- 9. Explain how informed consent and noncompliance relate to psychotherapeutic medications.

How Psychotherapeutic Drug Therapy Works

- Psychiatric medications act on the body's nervous system primarily by altering the delicate chemical balances within that system
- Most interrupt the chemical messenger (neurotransmitter) pathways within the brain
- A primary responsibility of health care providers, especially nurses, is to differentiate therapeutic from unwanted effects

Classifications of Psychotherapeutic Drugs

- Four classes of psychotherapeutic drugs
 - Antianxiety agents
 - Antidepressants
 - Mood stabilizers
 - Antipsychotics
- People who are receiving medications must be monitored routinely for effectiveness, side effects, and life-threatening adverse reactions

Antianxiety Medications

(Slide 1 of 4)

- Antianxiety agents are drugs that reduce the psychic tension of stress
 - Anxiolytics or “minor tranquilizers”
- Medications in the antianxiety group are divided by their chemical formulas into categories

Antianxiety Medications

(Slide 2 of 4)

- Benzodiazepines

- Mainly used to decrease anxiety
- Act by increasing gamma-aminobutyric acid (GABA) activity, which results in decreased anxiety
- Because long-term use of antianxiety drugs can result in dependence, therapy for clients usually is limited to a few months

Antianxiety Medications

(Slide 3 of 4)

- Buspirone (BuSpar)

- Belongs to the azaspirone drug class
- Does not cause the sleepiness or muscle relaxation associated with benzodiazepines
- Therapeutic effects not seen for 3 to 6 weeks after treatment initiation

- Pregabalin (Lyrica)

- Side effects are fewer than those of other antianxiety drugs, so patients are more likely to comply with treatment

Antianxiety Medications

(Slide 4 of 4)

● Interactions

- Central nervous system (CNS) depression when combined with CNS depressants
- Increased concentrations of the cardiac drug digoxin
- Interfere with absorption into the bloodstream when taken with antacids

Antidepressant Medications

(Slide 1 of 2)

- Antidepressant medications act on the body by increasing certain neurotransmitter activities
- The physician's first choice for the treatment of depression is often an antidepressant
- Antidepressants are divided into categories
 - Tricyclic antidepressants
 - Monoamine oxidase inhibitors (MAOIs)
 - Selective serotonin reuptake inhibitors (SSRIs)
 - Atypical antidepressants
 - Selective serotonin/norepinephrine reuptake inhibitors (SSNRIs)

Antidepressant Medications

(Slide 2 of 2)

- Antidepressant medications may be taken 1 to 4 weeks before symptom relief is noted
- Side effects include dry mouth, nose, and eyes; urinary retention; and hypertensive crisis
 - These discomforts can be so bothersome that some people refuse to take their medications regularly
- MAOIs have many drug and food interactions

Mood Stabilizer Medications

●Lithium

- Naturally occurring salt used to treat the manic phase of bipolar disorder
- Well-absorbed into the bloodstream and excreted faster than sodium by the kidneys
 - Important for clients to balance their salt intake, fluid intake, and activity
- Interacts with a variety of other drugs
- Levels higher than 1.5 mEq/L are considered toxic
- Clinical improvement commonly takes as long as 3 weeks

Antipsychotic Medications

(Slide 1 of 2)

- Antipsychotics also are called *major tranquilizers* or *neuroleptics*.
 - Used to treat the symptoms of major mental disorders (schizophrenia, acute mania, and organic mental illnesses) and resistant bipolar (manic-depressive), paranoid, and movement disorders

Antipsychotic Medications

(Slide 2 of 2)

● Interactions

➤ Antacids

- Hinder the absorption of antipsychotics into the bloodstream

➤ Alcohol

➤ Antianxiety medications

➤ Antihistamines

➤ Antidepressants

➤ Barbiturates

➤ Meperidine (Demerol) and morphine

- Produce severe CNS depression when mixed with antipsychotics

Other Psychotropic Medications

- SSRI antidepressants are often used to treat obsessive-compulsive disorders
- Examples
 - Clomipramine (Anafranil)
 - Fluvoxamine (Luvox)
 - Paroxetine (Paxil)
 - Fluoxetine (Prozac)
 - Sertraline (Zoloft)
- Stimulants are used to treat people with ADHD

Client Care Guidelines

- For nurses and those who administer psychotherapeutic drugs:

- Assess the client
- Coordinate care
- Administer the medication
- Monitor and evaluate responses
- Provide client teaching

Client Teaching

- Every client has a right to be informed of his or her diagnosis and treatment plan
 - Nurses should explain in terms the client will understand
 - Nurses should provide information in writing

Adverse Reactions

- Health care providers, especially nurses, must constantly remain vigilant for the effects of psychotherapeutic medications
- Clients who are taking psychotropic drugs are at risk for developing serious problems of neuroleptic malignant syndrome and tardive dyskinesia

Noncompliance

- Noncompliance is an informed decision made by a client not to follow a prescribed treatment program
 - The physician should be notified
 - Work with your clients to find and eliminate the factors that lead to noncompliance

Informed Consent

- Presenting clients with information about the benefits, risks, and side effects of specific treatments
 - Enabling them to make voluntary and knowledgeable decisions about their care
- Patient Self-Determination Act
 - States that clients have the right to accept or refuse care and cannot be pushed, coerced, or talked into following a certain course

Questions?