Overview of Psychiatric Medications
Overview:

Psychiatric medications are some of the most common (and most profitable) medications in existence. For law enforcement, it can be helpful to have a basic understanding of these medications. Knowledge of medications, both their benefits and drawbacks, can help establish rapport with people living with mental illnesses. Rapport leads to safety, and by being conversant in psychiatric medications; you can show people that you have an understanding that mental illnesses are medical illnesses.

Medications are often divided into different classes based on what they are designed to treat.

**Antipsychotics**: used to treat psychosis and psychotic symptoms that go along with major mental illnesses such as Schizophrenia, psychotic depression, and bipolar with psychotic features.

**Anxiolytics (aka Anti-anxiety or “anxiety meds”)**: Used to treat anxiety and anxiety disorders such as social anxiety disorder, panic disorder, and generalized anxiety disorders.

**Antidepressants**: used to treat major depression and other illnesses such as Post Traumatic Stress Disorder, and anxiety.

**Mood stabilizers (aka medications for Bipolar)**: Used to treat mania, depression associated with bipolar disorder, and to help keep moods stable to avoid becoming manic or depressed.
Medication Side Effects

Side effects of Lexapro and other medications:

Lexapro, a very common medication used for depression is noted to have the following potential side effects. All medications, including aspirin have potentially serious side effects. In fact, by most measures, Lexapro is safer than aspirin.

Side Effects for Lexapro:

Rare
- Coma
- confusion
- convulsions
- decreased urine output
- dizziness
- fast or irregular heartbeat
- headache
- increased thirst
- muscle pain or cramps
- nausea or vomiting
- shortness of breath
- swelling of the face, ankles, or hands
- unusual tiredness or weakness

More common
- Constipation
- decreased interest in sexual intercourse
- diarrhea
- dry mouth
- ejaculation delay
- gas in the stomach
- heartburn
- inability to have or keep an erection
- loss in sexual ability, desire, drive, or performance
- sleepiness or unusual drowsiness
- trouble sleeping

Less common
- Bloated or full feeling
- burning, crawling, itching, numbness, prickling, "pins and needles", or tingling feelings
- chills
- cough
- decreased appetite
- excess air or gas in the stomach or intestines
- fever
- general feeling of discomfort or illness
- increased sweating
- joint pain
- muscle aches and pains
- not able to have an orgasm
- pain in the neck or shoulders
- pain or tenderness around the eyes and cheekbones
- passing gas
- runny nose
- shivering
- sneezing
- sore throat
- stuffy nose
- tightness of the chest
- tooth problems
- trouble breathing
- unusual dreams
- unusual drowsiness, dullness, tiredness, weakness or feeling of sluggishness
- yawning

(From Drugs.com)

**Nervous system side effects of Aspirin**

Central nervous system side effects have included agitation, cerebral edema, coma, confusion, dizziness, headache, cranial hemorrhage, lethargy and seizures. Tinnitus and subjective hearing loss (or both) may occur. Some investigators have reported that modest doses may result in decreased frequency selectivity and may therefore impair hearing performance, particularly in the setting of background noise.

"Product Information. Bayer aspirin (aspirin)." Bayer, West Haven, CT.
Important medications to remember by class/symptom:

**Psychosis:** Haldol, Risperdal, Zyprexa

Other common medications: Geodon, Saphris, Abilify, Seroquel, Asinipine, Prolixin

**Depression:** Prozac, Lexapro, Paxil, Zoloft

Other common medications:_________________________________________________

**Bipolar:** Lithium, Depakote, Tegretol

Other medications used for bipolar:___________________________________________

**Anxiety:** Ativan, Klonopin, Xanax

Other medications used for anxiety:___________________________________________

Notes:
Psychosis and medications for psychosis:

What Is Psychosis?

Psychosis (psyche = mind, osis = illness) is defined as the experience of loss of contact with reality, and is not part of the person’s cultural group belief system or experience. Psychosis typically involves one of two major experiences:

A. **Hallucinations** can take the form of auditory experiences (such as hearing voices); less commonly, visual experiences; or, more rarely, smelling things that others cannot perceive. The experience of hearing voices has been matched to increased activity in the auditory cortex of the brain through neuroimaging studies. While the experience of hearing voices is very real to the person experiencing it, it may be very confusing for a loved one to witness. The voices can often be critical (i.e. “you are fat and stupid”) or even threatening. Voices also may be neutral (i.e. “the radio is on”) and may involve people that are known or unknown to the person hearing the voices. The cultural context is also important. For example, in some Native American cultures, hearing the voice of a deceased relative is part of a healthy grieving process.

B. **Delusions** are fixed false beliefs. Delusions could take the shape of paranoia (“I am being chased by the FBI”) or of mistaken identity (a young woman may say to her mother, “You are an imposter—not my mother”). What makes these beliefs delusional is that these beliefs do not change or modify when the person is presented with new ideas or facts. Thus, the beliefs remain fixed even when presented with contradicting information (the young woman continues to believe her mother is an imposter, even when presented with her mother’s birth certificate and pictures of her mother holding her as a baby). Delusions often are associated with other cognitive issues such as problems with concentration, confused thinking and a sense that one’s thoughts are blocked. These experiences can be short lived (e.g. after surgery or after sleep deprivation) or periodic (as when associated with a psychiatric condition or persistent like bipolar disorder or major depression).

- [http://www.nami-pw.org/Psychosis.html](http://www.nami-pw.org/Psychosis.html)
Antipsychotics

These medications reduce or eliminate the symptoms of psychosis (delusions and hallucinations) by impacting the brain chemical called dopamine. Antipsychotics play an important role in treating schizophrenia and schizoaffective disorder.

Newer, or second-generation or atypical, antipsychotics can also treat acute mania, bipolar disorder and treatment-resistant depression. The antipsychotics developed in the middle of the 20th century are often referred to as first-generation or typical antipsychotics. Second-generation antipsychotics are known as atypical antipsychotics.

Second-generation drugs aren't necessarily better or worse than first-generation, but do have different side effects. First-generation antipsychotics are more likely to cause movement disorders. For example, tardive dyskinesia. This is an uncomfortable, potentially embarrassing condition in which the brain misfires and causes random, uncontrollable muscle movements or tics. These most typically affect the arms, fingers, legs, toes or facial muscles. Second-generation antipsychotics are more likely to result in weight gain. This increase in weight to other health complications such as metabolic syndrome.

-A http://www.nami.org/Learn-More/Treatment/Medications

Akathesia is one of the most common side effects to antipsychotics. It is a rhythmic and uncontrollable movement caused by a feeling of internal restlessness.

Mania

With mania, people may feel extremely irritable or euphoric. People living with bipolar may experience several extremes in the shape of agitation, sleeplessness and talkativeness or sadness and hopelessness. They may also have extreme pleasure-seeking or risk-taking behaviors. - See more at: http://www.nami.org/Learn-More/Mental-Health-Conditions/Bipolar-Disorder#sthash.Bs1zPJIn.dpuf

-M http://www.nami.org/Learn-More/Mental-Health-Conditions/Bipolar-Disorder

Mood Stabilizers

Mood stabilizers are the most common medications for treating the mood swings of bipolar disorder. The oldest of them, Lithium, has been in use for over 50 years and has proven very effective, particularly for bipolar I disorder. However, regular blood tests are a requirement if you're taking Lithium, which has potential serious side effects to the kidneys and thyroid.

There are also newer mood stabilizers originally created as anticonvulsants that may work better than Lithium for some people. Mood stabilizers can prevent highs (manic or hypomanic episodes) and lows (depressive episodes). All have important side effects to know about and monitor.

-M http://www.nami.org/Learn-More/Treatment/Medications
**Lithium**

**What are possible side effects of lithium?**

Common Side effects: Sedation, nausea, loss of appetite, mild diarrhea, dizziness, fine hand tremors, increased production of urine and excessive thirst are common side effects.

Rare, but important: lithium may lead to a reversible condition known as diabetes insipidus. If this occurs you would notice a drastic increase in thirst and how much fluid you drink as well as how much you urinate.

Long term risks: Hypothyroidism and other thyroid conditions may occur with long term lithium use.

- See more at: https://www.nami.org/Learn-More/Treatment/Mental-Health-Medications/Lithium#sthash.IOv0x5NQ.dpuf

**Depakote**

**Common Side Effects** Nausea, diarrhea, weight gain, feeling drowsy or dizzy

**Rare Side Effects** Hair loss, liver problems; Low platelets (platelets help the blood to clot. Bruising easier than normal is a symptom of low platelets; Pancreatitis (inflammation of the pancreas). Symptoms of pancreatitis include severe stomach pain, nausea, vomiting, and not feeling hungry; Increased ammonia levels. If this happens, you may get confused, disoriented, or have difficulty thinking.

**Serious Side Effects** Studies have found that individuals who take anticonvulsant medications including valproate have suicidal thoughts or behaviors up to 2 times more often than individuals who take placebo (inactive medication). These thoughts or behaviors occurred in approximately 1 in 550 patients taking the anticonvulsant class of medications.

- See more at: https://www.nami.org/Learn-More/Treatment/Mental-Health-Medications/Valproate-(Depakote)#sthash.41hhJl6s.dpuf
Anxiety Disorders

Everyone experiences anxiety. Speaking in front of a group makes most of us anxious, but that motivates us to prepare and do well. Driving in heavy traffic is a common source of anxiety, but it keeps us alert and cautious to better avoid accidents. However, when feelings of intense fear and distress are overwhelming and prevent us from doing everyday things, an anxiety disorder may be the cause.

Anxiety disorders are the most common mental health concern in the United States. An estimated 40 million adults in the U.S., or 18%, have an anxiety disorder. Approximately 8% of children and teenagers experience the negative impact of an anxiety disorder at school and at home. Most people develop symptoms of anxiety disorders before age 21 and women are 60% more likely to be diagnosed with an anxiety disorder than men.

- See more at: https://www.nami.org/Learn-More/Mental-Health-Conditions/Anxiety-Disorders#sthash.YYbY37h8.dpuf

Medications For Anxiety

Antidepressants are often the first choice of clinicians for the treatment of anxiety, as these medications have little potential for addiction or abuse, moreover, they are effective and relatively safe medications.

Certain medications work solely to reduce the emotional and physical symptoms of anxiety. Benzodiazepines such as alprazolam (Xanax) can treat social phobia, generalized anxiety disorder and panic disorder. Heart medications known as beta-blockers are also effective at treating the physical trembling and sweating that people with phobias experience in difficult situations.

Benzodiazepines work quickly and are very effective in the short-term. People prone to substance abuse may become dependent on them, however. It also may be necessary to increase the dosage over time. The body becomes accustomed to these medications over time and may require larger doses for the same therapeutic effect. People who stop taking benzodiazepines abruptly may experience unpleasant withdrawal symptoms.

- See more at: https://www.nami.org/Learn-More/Treatment/Mental-Health-Medications#sthash.eqlk85zL.dpuf

Medications have multiple names and multiple uses.

- **Antidepressants**: are first line treatments for Panic Attacks and PTSD. They are often used as sleep aids or for pain control.
- **Antipsychotics**: are used for anxiety, mania, bipolar, sleep, and even depression.
- **Anti-anxiety medications**: can be used for sleep, seizures, and even muscle relaxation.
- **Blood pressure medications**: are used for PTSD and anxiety.
- **Anti-seizure medications**: are used for bipolar disorder.
Medication Compliance

Almost no one takes medications as prescribed!

In its 2003 report on medication adherence, the World Health Organization (WHO) quoted the statement by Haynes that “increasing the effectiveness of adherence interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments.” Among patients with chronic illness, approximately 50% do not take medications as prescribed. This poor adherence to medication leads to increased morbidity and death and is estimated to incur costs of approximately $100 billion per year. Thus, Hippocrates’ exhortation to the physician to “not only be prepared to do what is right himself, but also to make the patient…cooperate” has consistently failed for more than 2000 years. Today’s ever more complicated medical regimens make it even less likely that physicians will be able to compel compliance and more important that they partner with patients in doing what is right together.

This guide was created by Nils Rosenbaum, MD with assistance from Matthew Tinney. If you find an error or would like to update the material please contact Matthew Tinney at mtinney@cabq.gov or 505-553-2229.