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Hypomania

- Milder form of bipolar mania
- Euphoria and Increased productivity
- Not severe enough to cause marked impairment in social or occupational functioning or to require hospitalization
- Does not include psychotic features

Contd...

Acute Mania

- Mood is elevated, expansive, or irritable.
- Disturbance is sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others.
- May require hospitalization to prevent harm to self or others.
- Motor activity is increased.
- Psychotic features may be present.

Chronic mania – Persistence of symptoms for longer duration.

Delirious Mania

- Extreme hyper activity
- Dehydration
- Severe Weight loss
- Decreased immunity and Fever
- May even lead to death if not treated

Treatment

Mood Stabilizers:

- **Lithium : 900-2100 mg/day.**
- **Carbamazepine-600-1800mg\day**
- **Sodium Valporate- 600- 2600mg\day**

Mood Stabilizers

- Sodium Valporate
 - Check liver functions Can cause hepatic failure/life threatening pancreatitis
- Carbamazepine (Tegretol)
 - Can cause aplastic anemia & agranulocytosis

Contd....

Blood Lithium Level:

- **Therapeutic Blood Lithium: 0.8-1.2 mEq/L**
- **Prophylactic Blood Lithium: 0.6-1.2 mEq/L**

Lithium Toxicity (> 2 mEq/L)

Neurological:

- Tremor
- Muscular weakness
- Rigidity
- Seizures
- Neurotoxicity

Renal:

- Polyuria , Polydipsia
- Tubular changes

Contd...

- Nephrotic syndrome

Cardio- Vascular:

- T- wave depression

Endocrine:

- Goitre
- Hypothyroidism
- Abnormal thyroid function
- Weight gain

Gastro-intestinal

- Nausea
- Vomiting
- Diarrhoea
- Metallic taste
- Abdominal pain

Dermatological:

- Acneiform eruptions
- Papular eruptions
- Exacerbation of psoriasis

Side Effects During Pregnancy and Lactation

- **Teratogenic**
- **Ebstein's anomaly**

Other Drugs:

- **Carbamazepine : 600- 1600 mg/day.**
- **Sodium Valproate: 1000- 3000 mg/day.**

Use of Antipsychotics

To control delusions, agitation, psychotic behaviors include:

- ❖ Haloperidol(haldol)
- ❖ Risperidone(risperdol)
- ❖ Perphenazine(trilifon)
- ❖ Quitipine(seroquel)
- ❖ Olanzapine(zyprexa)

Psychosocial Treatment and Rehabilitation

**Individual Psychotherapy - Supportive Psychotherapy.
Psychoanalytic Psychotherapy is NOT much useful.**

**Group Psychotherapy – To improve problem solving and
Communication skills**

Family therapy

Milieu therapy (Therapeutic community)

Psychoeducation of Patient and family members.

Psychosocial Treatment and Rehabilitation- Cond..

Psychosocial Rehabilitation

Training

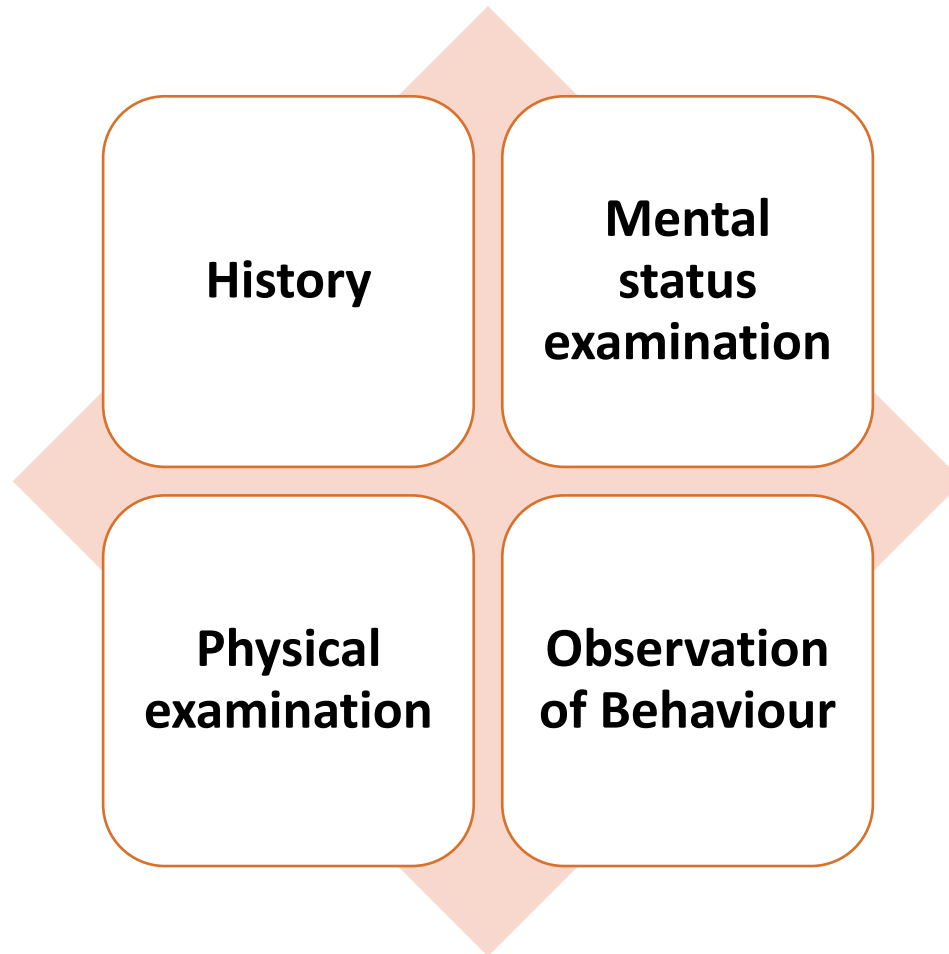
Recreational therapy

Vocational guidance

Work habits

Assisting in job placement

Nursing Assessment



Nursing Management-nursing Diagnosis

- **High risk for injury** related to extreme hyper-activity and impulsive behavior, as evidenced by lack of control over purposeless and potentially injurious movements.
- **High- risk for violence;** self-directed or directed at others related to manic excitement

Contd.....

- **Altered nutrition** , less than body requirements related to refusal or inability to sit still long enough to eat, evidenced by weight loss.
- **Impaired social interaction** related to egocentric and narcissistic behavior, evidenced by inability to develop satisfying relationships.



**Nursing
Interventions**

Risk for Injury

- Provide quiet, non-stimulating environment
- Stay with client only when required
- Use silence as needed
- Remove harmful objects (*prevent injuries*)
- Accept hostility-do not argue/challenge client
- Engage in some activities- Drawing, writing , gardening etc.

Contd...

- Administer medications
- Use restraints when required and observe carefully.
- Don't keep 2 manic patients together or manic and Depressive patients.
- Watch carefully

Impaired Nutrition

- Offer High protein, high calorie finger foods/boxed, canned - fluids, foods, banana, bread etc which can be consumed on the run.
- Consider patient's likes and dislikes
- Maintain fluid intake
- Check weight periodically and record it.

Impaired Social Interaction

- Determine what client is attempting to say
- Help client to maintain focus.
- Set limits
- Stay with client/use silence as needed
- Ignore when required
- Don't reinforce
- Reinforce non- manipulative and adaptive behavior
- Divert and engage in activities.
- Assist with ADL'S as needed,

Knowledge Deficit- Patients and Family Members

Psycho Education on

- Nature of illness
- Drug Compliance
- Healthy relationships among family members
- Maintenance of work habits etc

Geriatric Consideration

- Teach the patient about the nature of disorder
- Help him/her to understand the importance of medication adherence
- Maintenance therapy is important to prevent relapse
- Encourage for regular check up and follow up

Home Care Management

Teach the client & family about

- Bipolar illness and ways to manage disorder
- Medication management & management of side effects
- Signs & symptoms of toxicity
- Avoid risk taking behavior
- behavioral signs of relapse and how to seek treatment in early stages.

Summary

- **Introduction**
- **Definition**
- **ICD-10 Classification**
- **Incidence**
- **Types**
- **Etiology**

Contd....

- **Psychopathology**
- **Signs and symptoms**
- **Treatment**
- **Lithium toxicity**
- **Nursing Management**

Conclusion

Understanding the nature of illness and empowering the family members to manage the patients are very essential for better prognosis and coping of family members.

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Any questions ?



THANK YOU

