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Diploma in Pharmacy 2nd Year Pharmacotherapeutics Chapter 2 (j): Psychiatric Disorders

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PHARMACOTHERAPEUTICS **Chapter 2 (j)**Psychiatric Disorders

- → Psychiatric disorder also called mental health disorders, refers to a wide range of mental health conditions
- → Disorders that affect your mood, thinking and behaviour.
- → It includes as
 - Depression.
 - Anxiety disorders.
 - Psychosis

Depression

→ According to WHO depression is a common mental disorder characterized by sadness, loss of interest or pleasure, feeling of guilt or Low self worth, disturbed sleep or appetite, feeling of tiredness and poor concentration



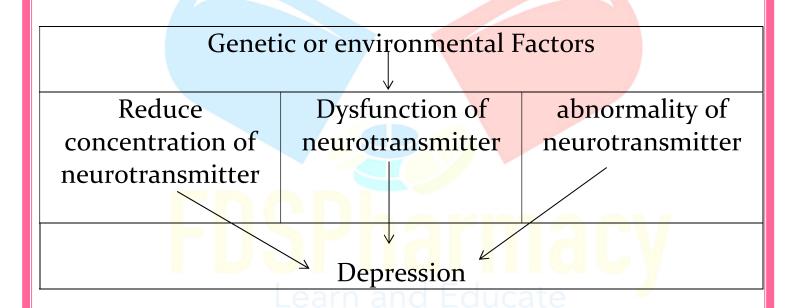
Types of depression

- **Exogenous depression :** This type of depression occurs due to external causes in response to a trauma or emotional stress (may be due to life event like death of any relative , loss of money etc).
- > **Endogenous or major or unipolar depression :** This type of depression occurs in response to genetic or biochemical imbalance.

Etiology

- Genetic factors
- Biochemical factors: deficiency of neurotransmitter adrenalin, nor adrenalin, serotonin, dopamine.
- External causes
- Hormone imbalance (in menopause, pregnancy, postpartum condition).

Pathogenesis



Clinical Manifestations

- Epilepsy (repeated, unpredictable seizures)
- Appetite or weight changes.
- **♣** Sleep changes (Insomnia or hypersomnia).
- Anger or irritability.
- **↓** Loss of strength, feeling fatigued, sluggish, and physically drained.
- ♣ Reckless behaviour.
- **♣** Concentration problem.
- Unexplained aches and pains.



Non Pharmacological Managements

- ❖ Follow the diet rules and pattern because any disturbance in the digestive activity leads to the mental manifestations.
- ❖ Visit the religious and graceful places and try to spending much time on that place.
- ❖ Multimedia, internet etc. are one among the cause of the psychiatric disorder, so try to use those such things with proper time and need.
- ❖ Avoid the overthinking and bad habits and try to always indulges with your own work, which makes you pleasant.
- Regular practice of yoga and meditation it is the most important factor for managing the psychiatric disorders.

Pharmacological Management

- Monoamine Oxidase Inhibitors (MAOIs): Phenelzine is an effective antidepressant which inhibit Monoamine Oxidase Enzyme (this enzyme prevents Neurotransmitters to bind with their receptors)
- **♦** Tricyclic Antidepressant (TCAs)
 - Nor adrenaline and Serotonin reuptake inhibitors: Amitriptaline,
 Imipramine.
 - Non adrenaline reuptake inhibitors: Amoxapine.
- Serotonin reuptake inhibitors: Fluoxatine, Citalopram, escitalopram.
- ♦ Atypical Antidepressant : Trazodone , mianserin.



Anxiety

- → Anxiety is a feeling of fear, dread, and uneasiness (as a normal reaction to stress) that might make an individual sweat, feel restless, tense, and have a rapid heartbeat.
- → For example, an individual might feel anxious in case of a difficult problem at work, before taking a test, or before making an important decision. This however can help the individual to handle the situation as anxiety may give a boost of energy or help to focus. But in patients of anxiety disorders, fear is not temporary and can be irresistible.



Types of Anxiety

- Panic disorder
- Phobia
- Social anxiety disorder
- Separation anxiety disorder
- Illness anxiety disorder
- Post Traumatic stress disorder (PTSD)

Etiology

- Chemical imbalance
- Environment factor
- Heredity



Pathogenesis

Any etiological factor (chemical imbalance)

abnormal function of Neurotransmitters (Nor epinephrine , serotonin dopamine etc.)

Hippocampus and Cingulate Gyrus induce threat (fear)

Amigdala Detects the threat

Activation of Hypothalamus - Pituitary -adrenal cortex axis

Activation of autonomic nervous system and adrenal medulla

Increase cortisol release

Increase epinephrine release

Stress hormones interact with brain and other body parts

Clinical Manifestation

- Cold or sweat hands
- Dry mouth
- Rapid heartbeat
- ♣ Feeling of fear and uneasy
- Difficulty in sleep
- Nausea.



Non Pharmacological Management

- Exercise
- Sleeping enough
- **❖** Meditation
- Healthy died
- ❖ Avoiding alcohol cigarette and caffeine substance
- Cognitive behavioural therapy

Pharmacological Management

- ♦ Anti anxiety drugs: Benzodiazepines like Alprazolam, diazepam, Nitrazepam clonazepam.
- ♦ Anti-depressant drugs : Amitriptaline , fluoxatine
- **Beta blockers like :** Propranolol This is used to reduce some physical symptoms of anxiety disorder like rapid heartbeat shaking and trembling.



Psychosis

- → Psychosis refers to loss of contact with reality, including delusions (false ideas about what is happening or one's own personality) and hallucinations (seeing or hearing things that do not exist), and thus affecting the way brain processes information.
- → Psychosis patients may hear, see, feel, or believe unreal things.



Types

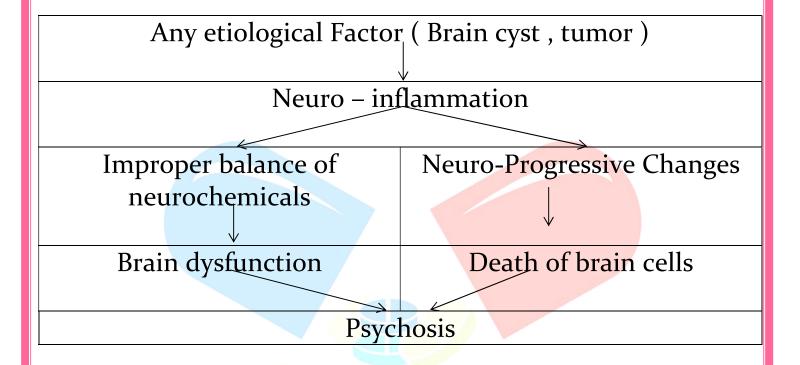
- Bipolar Disorder
- Brief Psychotic Disorder
- Drug-induced Psychosis
- Schizophrenia etc.

Etiology

- Brain cysts or trauma .
- Certain type of epilepsy
- Alcohol and methamphetamine
- Stroke
- Genetic
- Brain injury
- Certain drugs (steroids , stimulant)



Pathogenesis



Clinical Manifestations

- Unusual and extremely slowed movements.
- Incoherent or disorganised speaking.
- **4** Hallucinations, usually related to hearing voices or strange sounds.
- Isolating behaviour.
- ♣ Feeling suspicious paranoid or afraid.
- ♣ Not caring about their hygiene and appearance.
- ♣ Depression anxiety and suicidal thought.

Non Pharmacological Managements

- Changing the environment
- Proper caring by family members
- Exercise



Pharmacological Managements

- \diamondsuit Typical antipsychotics:
 - Haloperidol,
 - Chlorpromazine,
 - Thiothixen,
 - Fluphenazine
- **Atypical antipsychotics:**
 - Clozapine
 - Olanzapine
 - Risperidone
 - Aripiprazole





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