

#### Bipolar and Related Disorders

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#### **Clinical Picture**

- Bipolar I disorder
- Bipolar II disorder
- Cyclothymia



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# **Case Study**

- A patient was just admitted to your unit with bipolar disorder I and is in the manic state.
- What symptoms might you expect to see?



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## **Epidemiology**

- Lifetime prevalence of bipolar disorder in the United States is 5.1%
- Bipolar I -
- Bipolar II -
- Cyclothymia –



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## Etiology

- Biological factors
  - Genetic
  - Neurobiological
  - Neuroendocrine
- Psychological factors
- Environmental factors



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#### **Assessment**

- Mood
- Behavior
- Thought processes and speech patterns
  - Flight of ideas
  - Clang associations
  - Grandiosity
- Cognitive functioning



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#### Case Study (Cont.)

■ What are some problems that can be avoided if your manic patient gets proper treatment?



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**Self-Assessment** 

- Manic patient
  - Manipulative
  - Demanding
  - Splitting
- Staff member actions
  - Frequent staff meetings to deal with patient behavior and staff response
  - Set limits consistently

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#### Assessment Guidelines Bipolar Disorder

- Danger to self or others
- Need for protection from uninhibited behaviors
- Need for hospitalization
- Medical status
- Coexisting medical conditions
- Family's understanding

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#### **Nursing Diagnosis**

- Risk for injury
- Risk for violence
  - Other-directed
  - Self-directed
- Ineffective coping







**Outcomes Identification** 

- Acute phase
  - Prevent injury
- Continuation phase
  - Relapse prevention





• Limit severity and duration of future episodes

**Planning** 

- Acute phase
  - Medical stabilization
  - Maintaining safety
  - Self-care needs
- Continuation phase
  - Maintain medication adherence
  - Psychoeducational teaching
  - ullet Referrals
- Maintenance phase
  - Prevent relapse



#### **Implementation**

- Acute phase
  - Depressive episodes
  - Manic episodes
- Continuation phase
  - Prevent relapse with follow-up care
- Maintenance phase
  - Prevent recurrence



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12

#### **Pharmacological Interventions**

- Lithium carbonate
  - Indications
  - Therapeutic and toxic levels
    - Therapeutic blood level:
    - Maintenance blood level:
    - Toxic blood level:
  - Maintenance therapy
  - Contraindications



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## Case Study (Cont.)

- Your patient with mania has been started on lithium.
- What patient teaching about this medication should the nurse provide before the patient is discharged?



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#### **Anticonvulsant Drugs**

- Valproate (Depakote)
- Carbamazepine (Tegretol)
- Lamotrigine (Lamictal)



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# Antianxiety & Antipsychotic Use in Bipolar Treatment

- □ Clonazepam (Klonopin)
- Lorazepam (Ativan)
- Atypical antipsychotics
- Olanzapine (Zyprexa)
- Risperidone (Risperdal)





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#### **Other Treatments**

- Electroconvulsive therapy (ECT)
- Teamwork and safety
- Support groups
- Health teaching and health promotion





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#### **Advanced Practice Interventions**

- Psychotherapy
  - Cognitive-behavioral therapy (CBT)
  - Interpersonal and social rhythm therapy



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#### **Evaluation**

- Evaluate outcome criteria
- Reassess care plan
- Revise care plan if indicated



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#### **Audience Response Questions**

- 1. Which anticonvulsant medication might be prescribed for a patient with bipolar disorder?
  - A.Divalproex sodium (Depakote)
  - B. Clonazepam (Klonopin)
  - C. Olanzapine (Zyprexa)
  - D. Lithium (Lithobid)

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21