Elizabeth McCloy

Learning Activity 4.1.

Psychotropic Medication Quiz

1. **What is the mechanism of action by which antidepressant medications achieve the desired effect (regardless of the different physiological processes by which this action is accomplished)?**

   By inhibition or by blocking the reuptake of norepinephrine, dopamine, and serotonin in the brain.

2. **For what must the nurse be on the alert with the client who is receiving antidepressant medication?**

   Suicidal ideation and serotonin syndrome

3. **As the nurse, when would you expect the client to begin showing signs of symptomatic relief after the initiation of antidepressant therapy?**

   4 weeks

4. **Name an example of a tricyclic antidepressant:** anafranil, doxepin**.**

   Name an example of an MAOI: nardil, parnate.

   Name an example of an SSRI: prozac, lexapro, celexa.

5. **Describe some common side effects and nursing implications for tricyclic antidepressants.**

   Orthostatic hypotension, have the patient rise slowly from a sitting to standing position. Drowsiness, confusion, lethargy, instruct patient not to drive or operate dangerous machinery while taking this

medication. Antianxiety agents may aggravate symptoms of depression, assess the patients' mood, and assess for suicide risk. Instruct patient to never abruptly stop medication as it can be life threatening.

6. Hypertensive Crisis **is the most potentially life-threatening adverse effect of MAOIs. Symptoms for which the nurse and client must be on the alert include:** severe occipital headache, increase in blood pressure, chest pain and coma**. What must be done to prevent these symptoms from occurring? (Your answer must include some examples.)** Avoid foods with tyramine such as chocolates, wines, aged cheeses and soy sauce.

7. **Lithium carbonate is commonly prescribed for _____. Many times when these individuals are started on lithium therapy, the physician also orders an antipsychotic medication. Why might he or she do so?**

   Bipolar Disorder/Mania. The patient may also have psychosis and be delusional so it can help aid in promoting sleep, decreasing agitation and anxiety while promoting mood stabilization.

8. **There is a narrow margin between the therapeutic and toxic serum levels of lithium carbonate. What is the therapeutic range? List the initial signs and symptoms of lithium toxicity.**

   Therapeutic range 0.6-1.2 mEq/L. Early s/s of lithium toxicity is vomiting, diarrhea.

9. **Describe some nursing implications for the client on lithium therapy.**

   Instruct patient to report all medications herbals, and caffeine use to physician to evaluate for drug interventions. Encourage patient to maintain fluid intake at 2,000-3,000mL/day and to avoid activities that cause excessive sweating or fluid loss because decreases in sodium levels increase lithium

absorption and the potential for lithium toxicity. Instruct the patient about the importance of regular monitoring of serum lithium levels. Blood levels should be drawn 12hrs after the last dose.

10. **What is the mechanism of action for anxiolytics (with the exception of buspirone)?**

    Enhance inhibitory effects of GABA in the CNS for anxiety relief.

11. **What is the most commonly used group of anxiolytics? Give two examples.**

    Benzodiazepines; clonazepam, diazepam.

12. **What are the most common side effects of anxiolytics?**

    Sedation, light headedness, decreased cognitive function, ataxia.

13. **What must the client on long-term anxiolytic therapy be instructed in order to prevent a potentially life-threatening situation?**

    Do not ever stop medication abruptly.

14. **What is thought to be the mechanism of action that produces the desired effect with antipsychotic medications?**

    Blocking postsynaptic dopamine receptors in the basal ganglia, hypothalamus, limbic system, brainstem, and medulla.

15. **Phenothiazines are an example of a "typical" antipsychotic group. Give two examples of phenothiazines and two examples of the newer "atypical" antipsychotics.**

    Chlorpromazine, Thiothixene. Risperidone, Clozapine.

16. **Describe potential adverse hormonal effects associated with antipsychotic therapy.**

    Gynecomastia, breast enlargement, galactorrhea, and menstrual irregularities.

17. **Agranulocytosis is a potentially very serious side effect of antipsychotic therapy. The nurse and client should be on the alert for symptoms of _____, _____, and _____.**

    Sore throat, low WBC, Fever

18. **Neuroleptic malignant syndrome (NMS) is a rare but potentially fatal side effect of antipsychotic drugs. List symptoms for which the nurse must be on the alert when assessing for NMS.**

    Sudden fever, BP fluctuations, dysrhythmias, muscle rigidity, diaphoresis, drooling, LOC into coma.

19. **Describe the symptoms of extrapyramidal side effects associated with antipsychotic therapy.**

    Pseudo parkinsonism: tremor, shuffling gait, drooling, rigidity. 1-5 days after starting medication.

    Akinesia: absence or impairment in voluntary movement

    Akathisia: continuous restlessness and fidgeting. 50-60 days after starting medication.

    Acute dystonia: patient may experience severe spasms of the tongue, neck, face, or back. This is a crisis and requires rapid emergency treatment.

    Oculogyric crisis: uncontrolled rolling back of the eyes

    Tardive dyskinesia: bizarre facial and tongue movements, stick neck, and difficulty swallowing.

20. **What is the classification of medication that is commonly prescribed for drug-induced extrapyramidal reactions? Give two examples of these medications.**

Anticholinergic agents. Benztropine, diphenhydramine.

21. **Describe a potentially life-threatening situation that could occur in the client who abruptly withdraws from long-term use of CNS stimulants.**

    Nausea, vomiting, abdominal cramping, headache, fatigue, weakness, mental depression, SI, increased dreaming, and psychotic behavior.

<u>This part is optional but encouraged!!</u>

Homework Assignment Questions and Answers

Please read the chapter and answer the following questions:

1. **Identify three priority safety concerns for each class of psychotropic medications.**

   Antianxiety Agents

   Antipsychotics (novel)

   Antipsychotics (phenothiazines and haloperidol)

   MAO Inhibitors

   SSNRIs

   SSRIs

Tricyclic antidepressants

2. **Differentiate primary actions and side effects for traditional versus atypical antipsychotics.**

3. **Differentiate primary actions and side effects for tricyclic versus SSRI antidepressants.**