

Mood Stabilizers

Approach: This mood stabilizer talk mainly focuses on Lithium and Depakote, especially side effects and fetal abnormalities which are heavily tested on the Shelf exam. If possible, try to frame this discussion around patients that you are treating with these medications.

Hook: While not the sexiest topic, mood stabilizers are critically important in psychiatry, and a tested topic on the shelf exam. You will also see them used heavily on the inpatient unit.

What are the two most effective mood stabilization treatment options for acute mania?

Lithium:

- Narrow therapeutic range, so you must monitor blood lithium levels. Most effective, but lots of side effects to watch for:
- Renal: Polyuria with secondary polydipsia. Results from lithium antagonism to ADH. Diabetes insipidus. Over time can get interstitial fibrosis and even renal failure.
- CNS: Tremor (postural tremor noted in outstretched hands). GI: appetite loss, nausea, vomiting, diarrhea. Cardiac: benign t-wave flattening. Thyroid: causes a benign and often transient dec in concentrations of circulating thyroid hormone.
- Toxicity/Overdose: coarse tremor, ataxia, vomiting, abd pain, renal dysfunction are signs of acute lithium toxicity. Can lead to impaired consciousness, myoclonus, seizures, coma, death.
- Fetal abnormality: Ebstein's abnormality (tricuspid valve displacement); not absolutely contraindicated in pregnancy
- Labs to monitor: Li, Cr, TSH

Valproic Acid (Depakote):

- Common side effects of valproate include weight gain, nausea, vomiting, hair loss, easy bruising, and tremor.
- Serious side effects(rare) - hepatic failure and thrombocytopenia
- Fetal Abnormality: 1-2% of fetuses exposed to depakote in utero develop neural--tube defects (spina bifida aperta, open lumbosacral myelocoele), a 10- to 20-fold increase over the general population: contradicted in pregnancy.
- **Labs**: VPA, LFTs, NH3, Plt

What about maintenance mood stabilization?

- Lithium and Depakote as above
- Another first line option? **Lamotrigine** – cannot use acute mania due to risk of SJS with fast titration
- **Carbamazepine/Oxcarbazepine** - associated with SIADH, lessen efficacy of birth control
- **Topiramate** - associated with weight loss, also causes cognitive dulling (“Dope-a-max”)

What has FDA approval for Bipolar Depression?

1. Quetiapine
 2. Lurasidone
 3. Symbiax (Fluoxetine/Olanzapine combo pill)
- * Lamotrigine is often used off-label for this