

Zaporozhe State University MEDITSINSY
Department of Psychiatry, psychotherapy, general and medical psychology,
narcology and sexology



THERAPY

Mental illness

TREATMENT OF MENTAL DISORDERS

OPTIONS

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graph TD; A[OPTIONS] --> B[■ Biological therapy]; A --> C[■ Psychotherapy]; A --> D[■ Social rehabilitation]; B --> E[- Methods of therapeutic effects on biological processes]; C --> F[- System of psychological methods of therapeutic effects on the psyche]; D --> G[- a set of measures, aimed at maximum adaptation the mentally ill into society and their restoration professional functioning.];
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■ Biological therapy

- Methods of therapeutic effects on biological processes

■ Psychotherapy

- System of psychological methods of therapeutic effects on the psyche

■ Social rehabilitation

- a set of measures, aimed at maximum adaptation the mentally ill into society and their restoration professional functioning.

HISTORY OF THERAPY

Trepanation



Jan van Hemessen (Jan Sanders van Hemessen)? "Removing the stones of stupidity." 1545-1550 gg.

HISTORY OF THERAPY

Straitjackets



HISTORY OF THERAPY

'Shock' methods

Electro-convulsive therapy (ECT)

***The main indications:
resistant depression
Catatonic syndrome
resistant
schizophrenia***



Insulin shock therapy - administration of increasing doses of insulin to the development of hypoglycemic com.

Indications: treatment-resistant schizophrenia.

HISTORY OF THERAPY

Neurosurgical treatment

LOBOTOMY

INDICATIONS:
resistant depression,
anxiety disorders,
aggressive behavior in patients
with schizophrenia.

Stereotactic brain surgery

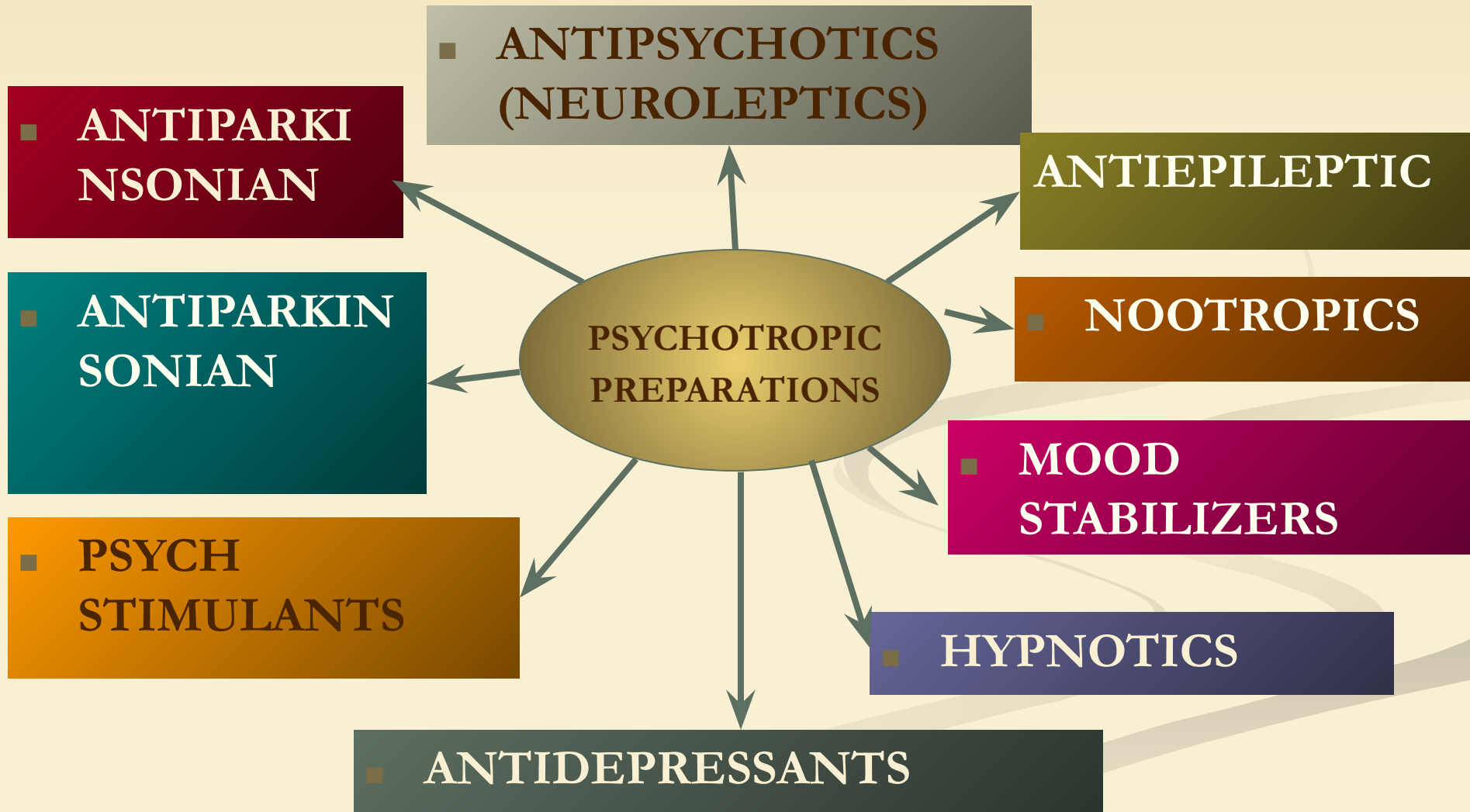
INDICATIONS:
brain tumor
epilepsy,
resistant depression,
obsessive-compulsive disorders,
addiction.

DRUG THERAPY OF MENTAL DISORDERS

PSYCHOTROPIC (Psychopharmacological) FACILITIES

- a group of drugs that have a predominant influence on psychological processes.
- Psychotropic drugs are capable of regulating disturbed mental activity and are used to treat mental illness.

PSYCHOTROPIC DRUGS: CLASSIFICATION



ANTIPSYCHOTICS

- The main action - an antipsychotic (reduction of delusions and hallucinations?)
- The main mechanism of action of antipsychotic drugs - a blockade of postsynaptic dopamine receptors.
- The first neuroleptic - chlorpromazine (chlorpromazine), which is synthesized as an antihistamine in 1950; its efficacy has been found in 1952 year.

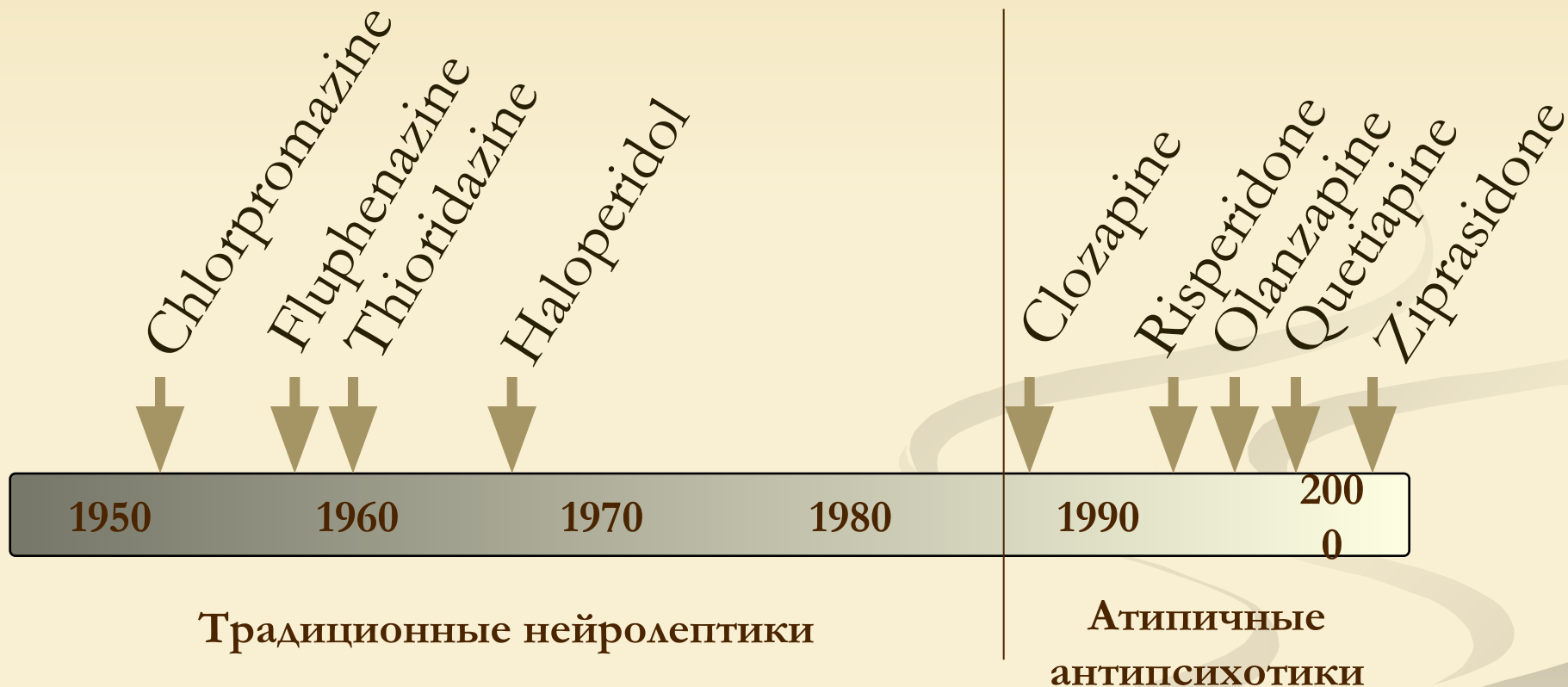
CLASSIFICATION TYPICAL ANTIPSYCHOTIC

MOSTLY WITH SEDATION

**PREFERABLY WITH AN
ANTIPSYCHOTIC
ACTION**

HISTORY

antipsychotics



Jibson MD, Tandon R. *J Psychiatr Res* 1998;32:215–228;
Lehmann HE, Ban TA. *Can J Psychiatry* 1997;42:152–162.

CLASSIFICATION

Antipsychotic

ATYPICAL Antipsychotics

- Have fewer extrapyramidal disorders
- Effectiveness at the negative symptoms of schizophrenia
- They have minimal affinity for dopamine receptor and block the serotonin

for example

Clozapine (azaleptin, leponeks) -

Risperidone (rispolept, speridan)

Olanzapine (Zyprexa)

CLASSIFICATION

Antipsychotic

FEATURE ATYPICAL ANTIPSYCHOTICS

**Do not induce
extrapyramidal
disorders**

sedation

the impact on the
cardiovascular
system

no sex disorders

prolactinemia

weight gain

- efficiency in positive symptoms
- efficiency in negative symptoms
- efficiency resistant cases

PROLONGED FORMS OF ANTIPSYCHOTICS

Specific dosage forms neuroleptics, which, after the / m is gradually released from the depot in the muscle and blood have a therapeutic effect for a long time (up to 1 month)

Preparations:

Haloperidol decanoate

Klopiksol depot

Rispolept-Consta

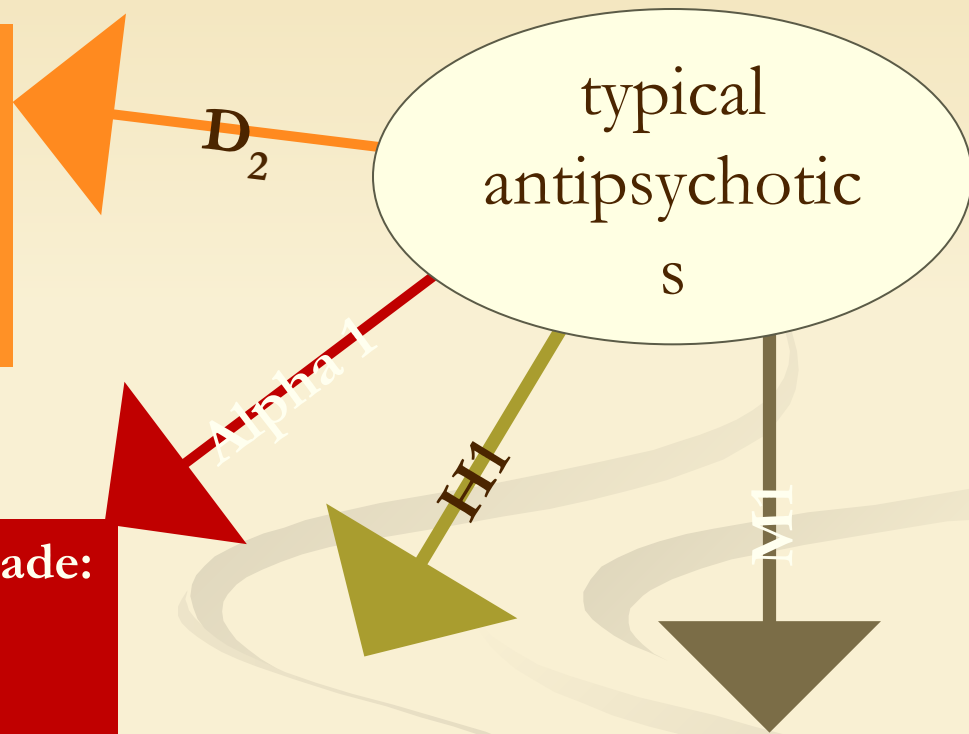
SIDE EFFECTS TYPICAL ANTIPSYCHOTICS

Blockade of dopamine receptors:
antipsychotic effect.
hyperprolactinemia
negative symptoms
tardive dyskinesia

Alpha1-adrenergic receptors - the blockade:
Lowering blood pressure
Dizziness
Drowsiness

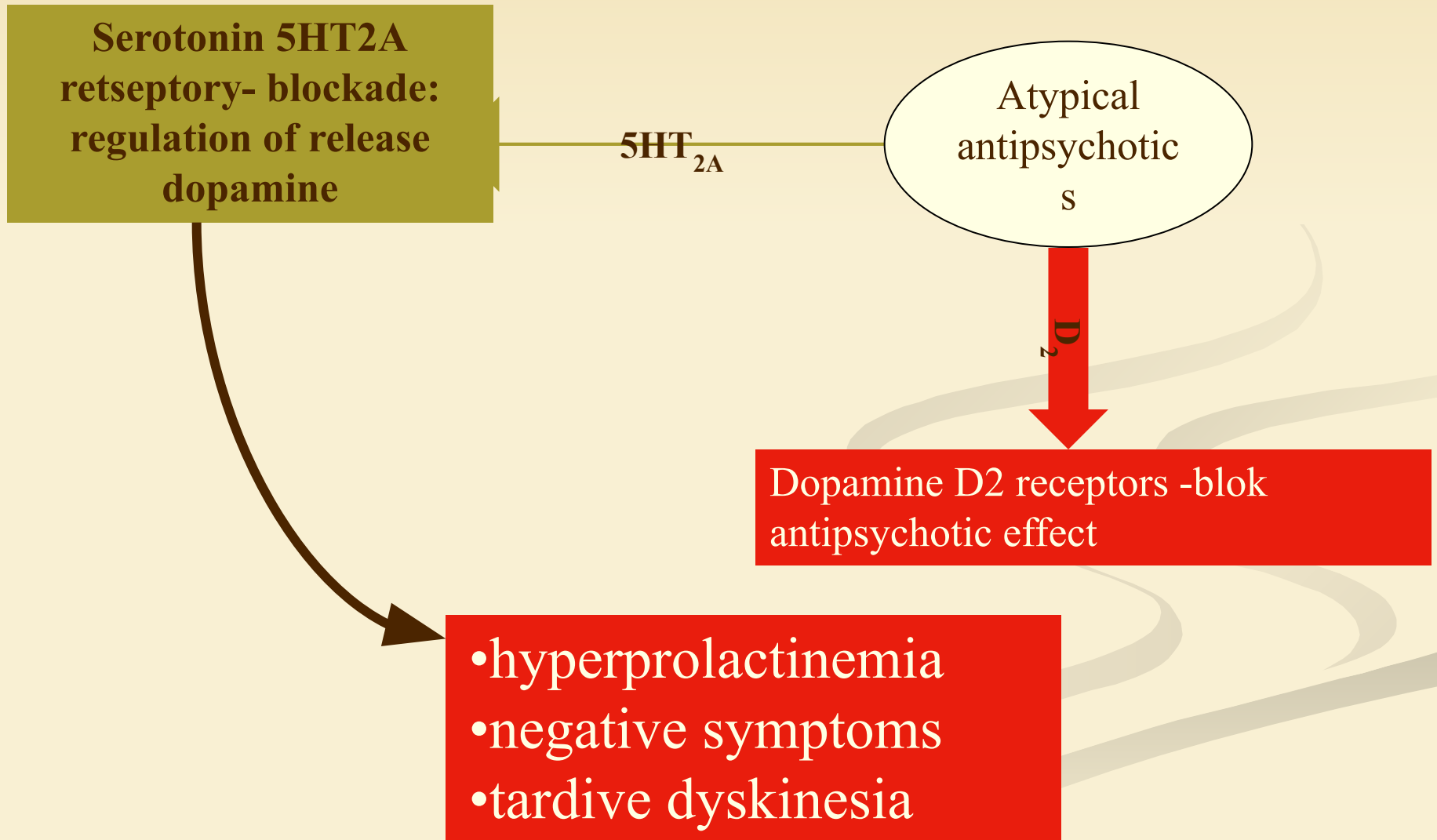
H1-histamine receptors - the blockade:
Weight gain
Drowsiness

M1 receptors - the blockade:
Constipation
Dry mouth
Drowsiness
The narrowing of visual fields



SIDE EFFECTS

ATYPICAL ANTIPSYCHOTICS



ADVERSE EFFECTS

antipsychotics

MALIGNANT neuroleptic syndrome

SYMPTOMS:
muscle rigidity
temperature rise
trophic changes
stupor.

**A LIFE-THREATENING
CONDITION OF THE
PATIENT!**

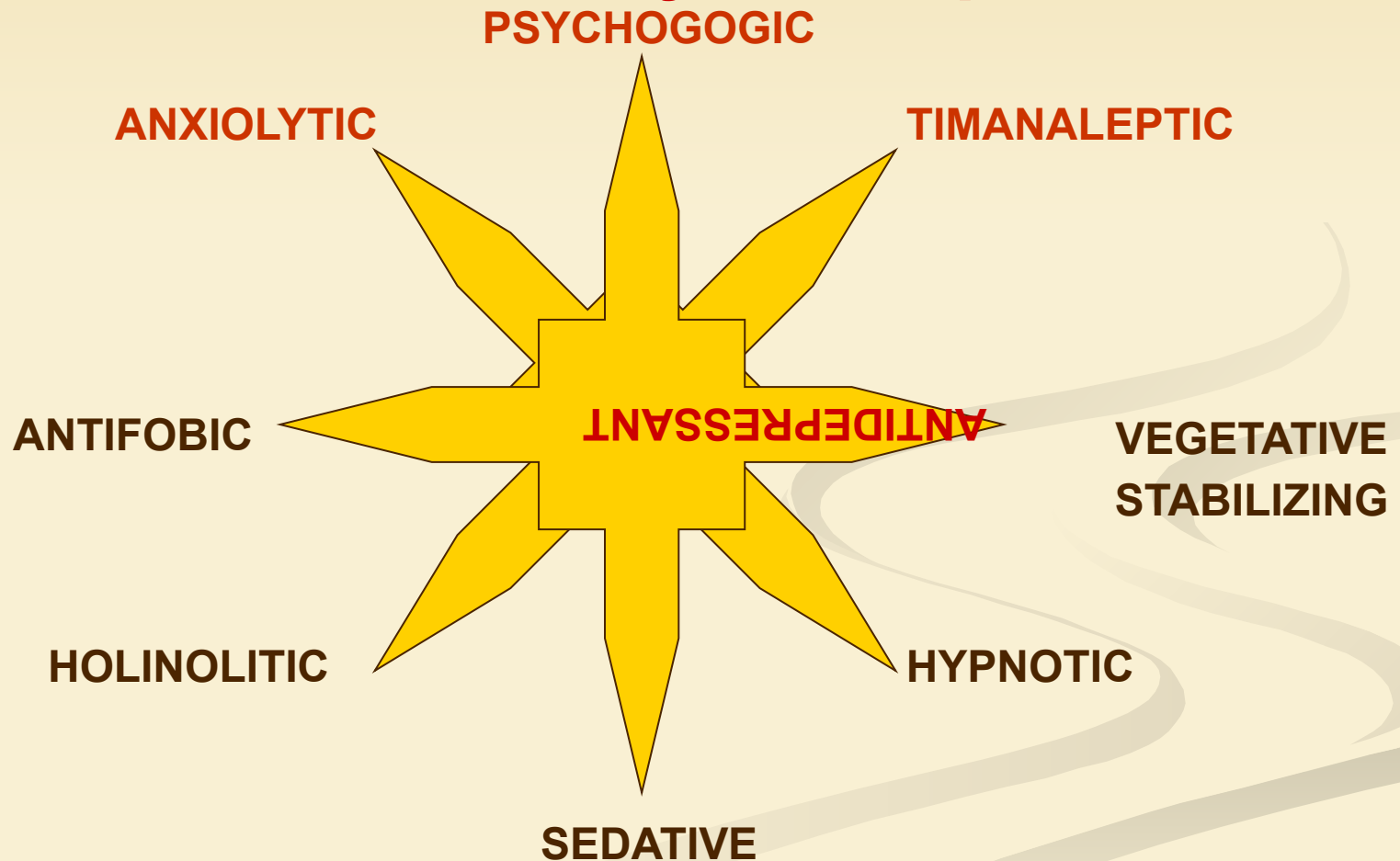
TREATMENT:
hospitalization in an intensive care unit
cancellation of neuroleptics
infusion therapy and so forth.

USE OF NEUROLEPTICS IN MEDICAL PRACTICE

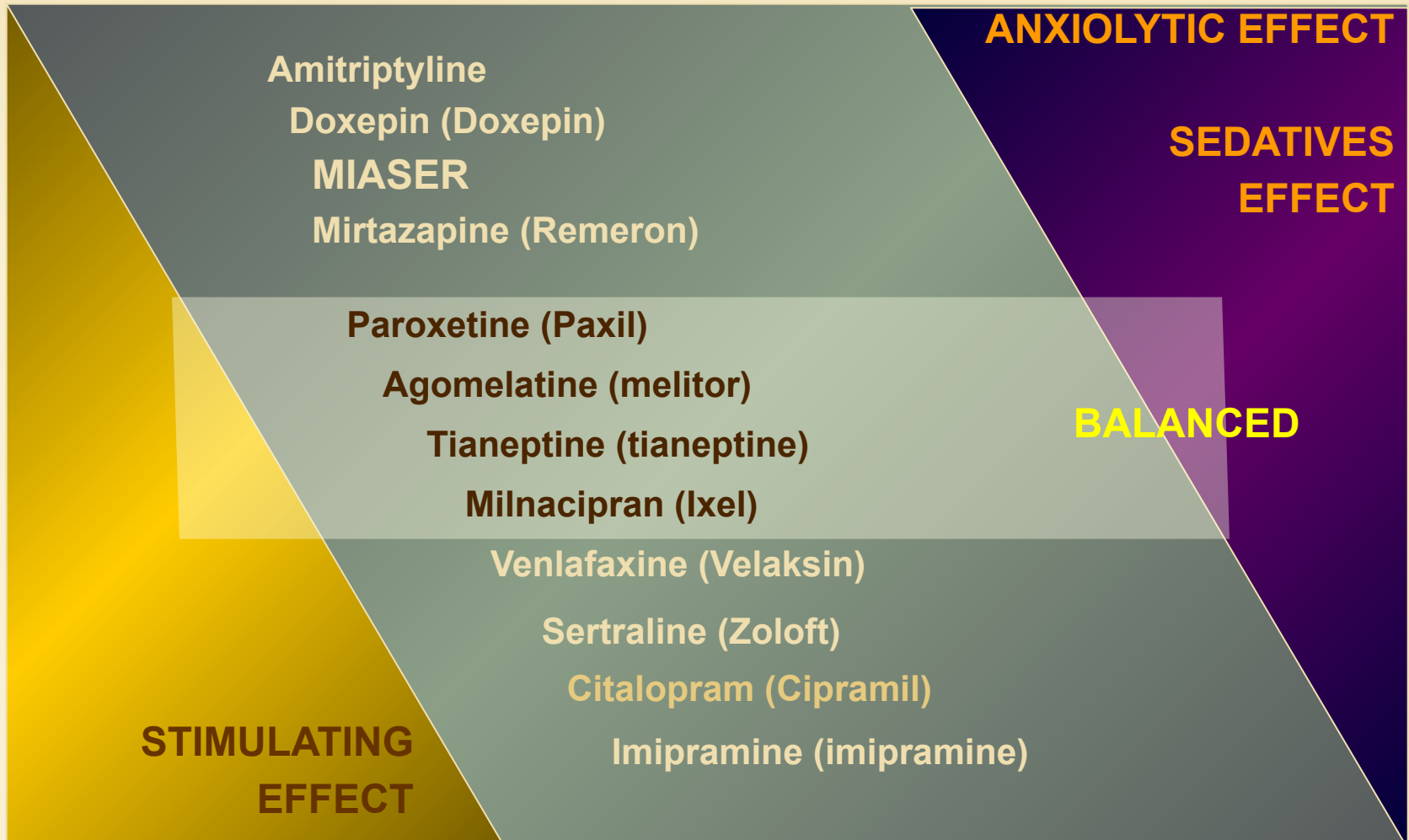
- The surgery - consisting of mixtures for artificial hypothermia (chlorpromazine).
- In anesthesiology and resuscitation - leptoanalgesia (droperidol), as part of some "political" mixtures.
- In dermatology - for the treatment of neurodermatitis, itching dermatoses (Tisercinum, sonapaks, etaperazin).
- In therapy - treatment of hiccups, nausea and vomiting due to inhibition of the vomiting center at the blockade of dopamine receptors (etaperazin).

ANTIDEPRESSANTS

effects caused by antidepressants

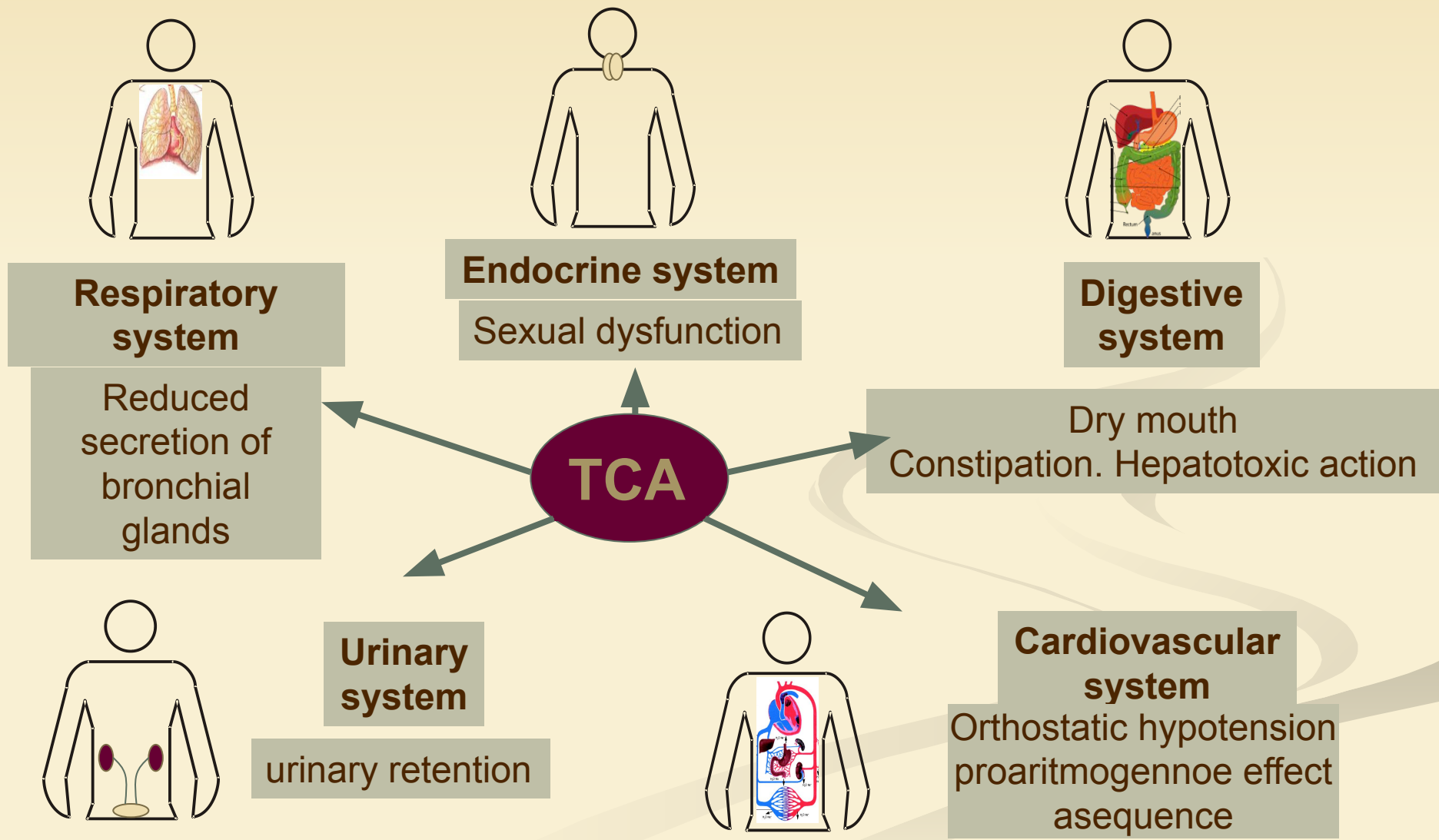


CLASSIFICATION ANTIDEPRESSANTS DEPENDING ON THE CLINICAL EFFECT



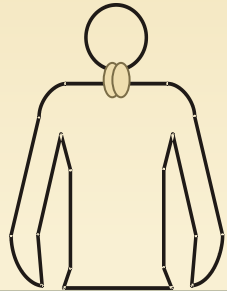
STH EFFECTS

TRICYCLIC ANTIDEPRESSANTS



STH EFFECTS

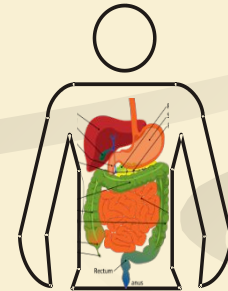
SELECTIVE SEROTONIN REUPTAKE INHIBITOR



Endocrine system

Sexual dysfunction

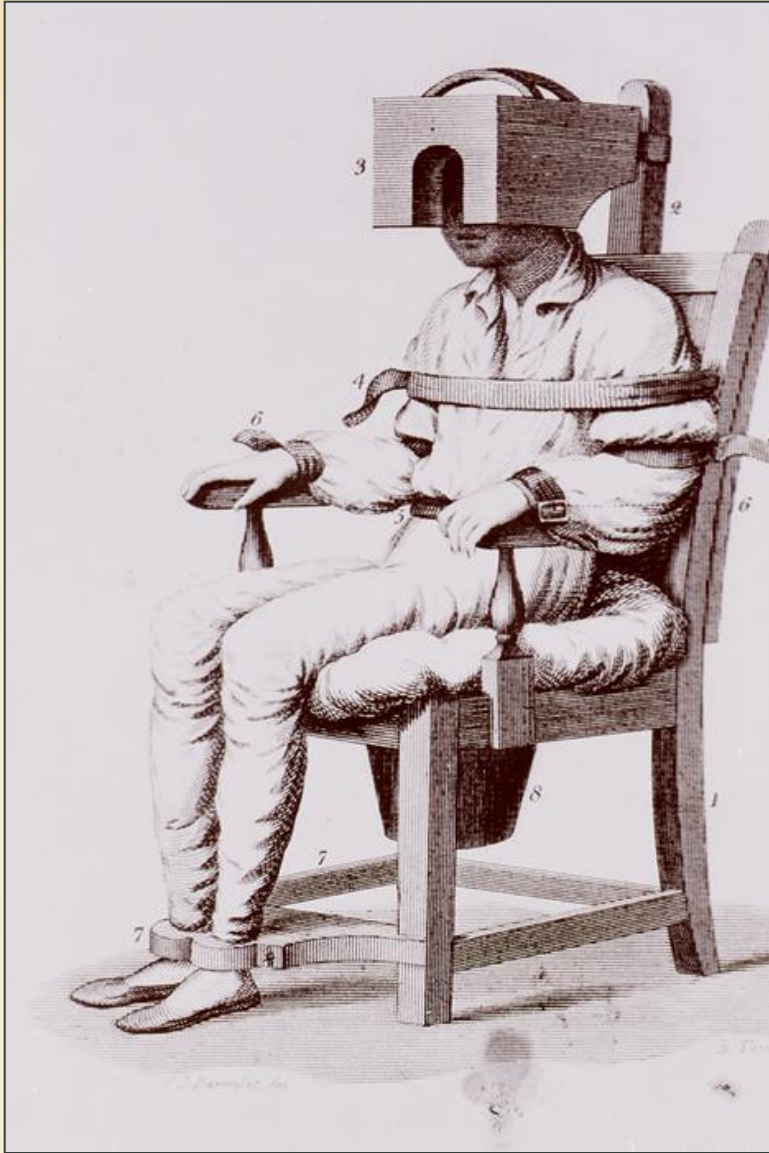
SSRI



Digestive system

Weight loss
Reduced secretion of salivary glands
Diarrhea
Nausea

TRANQUILIZER



The term "tranquilizer" (from the Latin tranquille -. To do a calm, serene) introduced the American psychiatrist C. Rush in 1810, naming them so designed wooden chair strait.

The main effect of tranquilizers

- anxiolytic
- tranquilizing

The first tranquilizers:

- chlordiazepoxide - 1959,
- diazepam - 1961.

TRANQUILIZERS: CLINICAL CLASSIFICATION

TRANQUILIZER

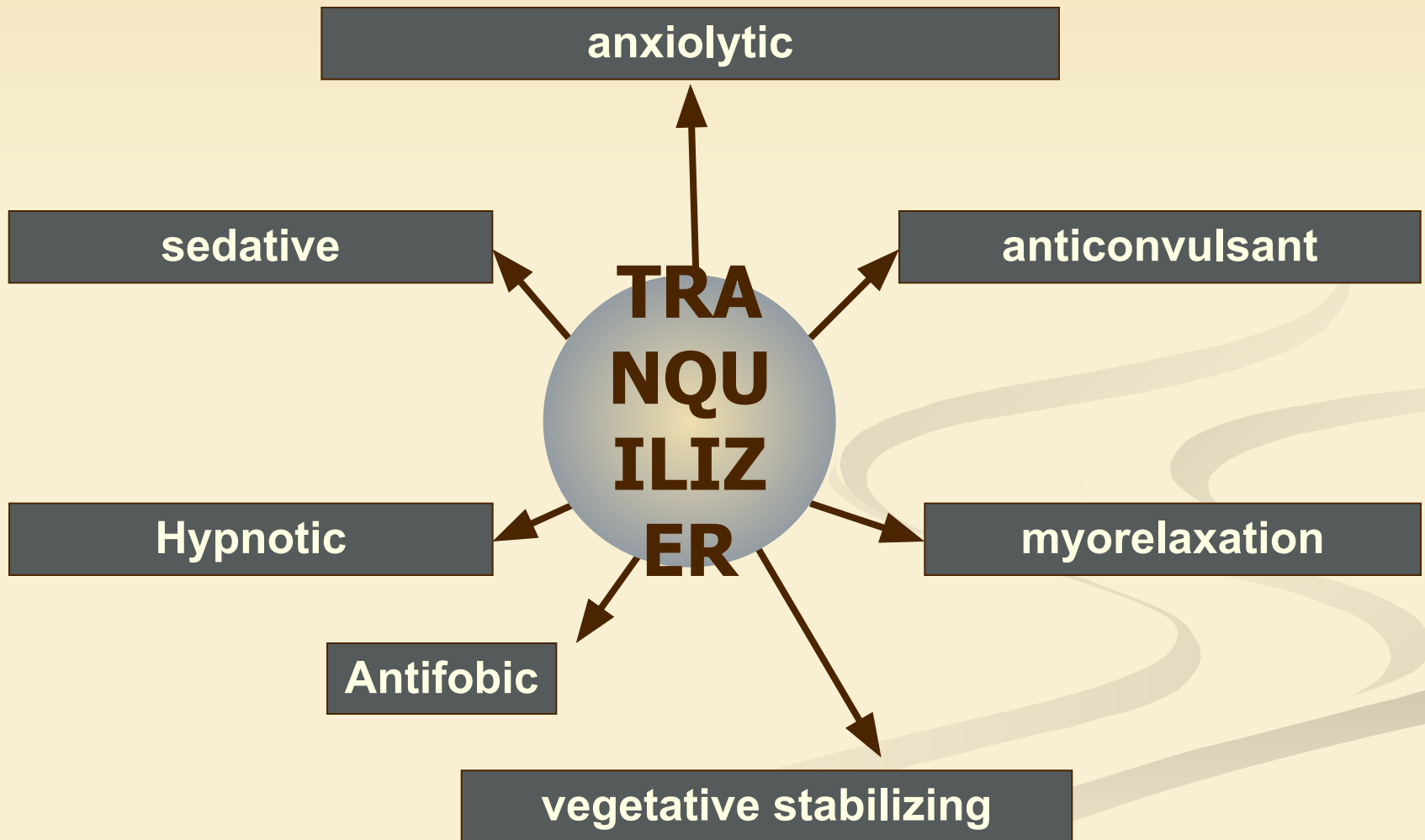
with challenging
EFFECT
("Day"
tranquilizers)
Tofisopam (Grandaxinum)

With sedation

short-acting
($T_{1/2}$ 2-10 hours)
Lorazepam
Oxazepam
Alprazolam (Xanax)

long-acting
($T_{1/2}$ 20-60 hours)
Phenazepam
Diazepam
Nitrazepam

TRANQUILIZERS: THERAPEUTIC EFFECTS



TRANQUILIZERS TESTIMONY

Neurotic disorders

Personality disorder in the period of decompensation

Withdrawal symptoms and metaalkogol psychosis (on the background of detoxification therapy)

Sleep disorders (oxazepam, nitrazepam)

Spastic syndrome (clonazepam)

TRANQUILIZERS

SIDE EFFECTS

Violation of attention, memory, speed reduction reaction, coordination of movements.

Drowsiness for drugs with a sedative effect.

Muscular weakness

Formation of dependence - according to WHO recommendations tranquilizers therapy should not exceed 2 weeks!

Sleeping pills (Hypnotic)

1 GENERATION

- Barbiturates (phenobarbital contained in korvalola, valokordin?)
- Antihistamines, drugs containing bromine

2 GENERATION

- Benzodiazepines (oxazepam, nitrazepam)

3 Generation

Zolpidem (Ivadal) and zopiclone (imovan)
quick effect, short duration of action, few side effects.

GENERAL PRINCIPLES OF DRUG THERAPY

SLEEP DISORDERS:

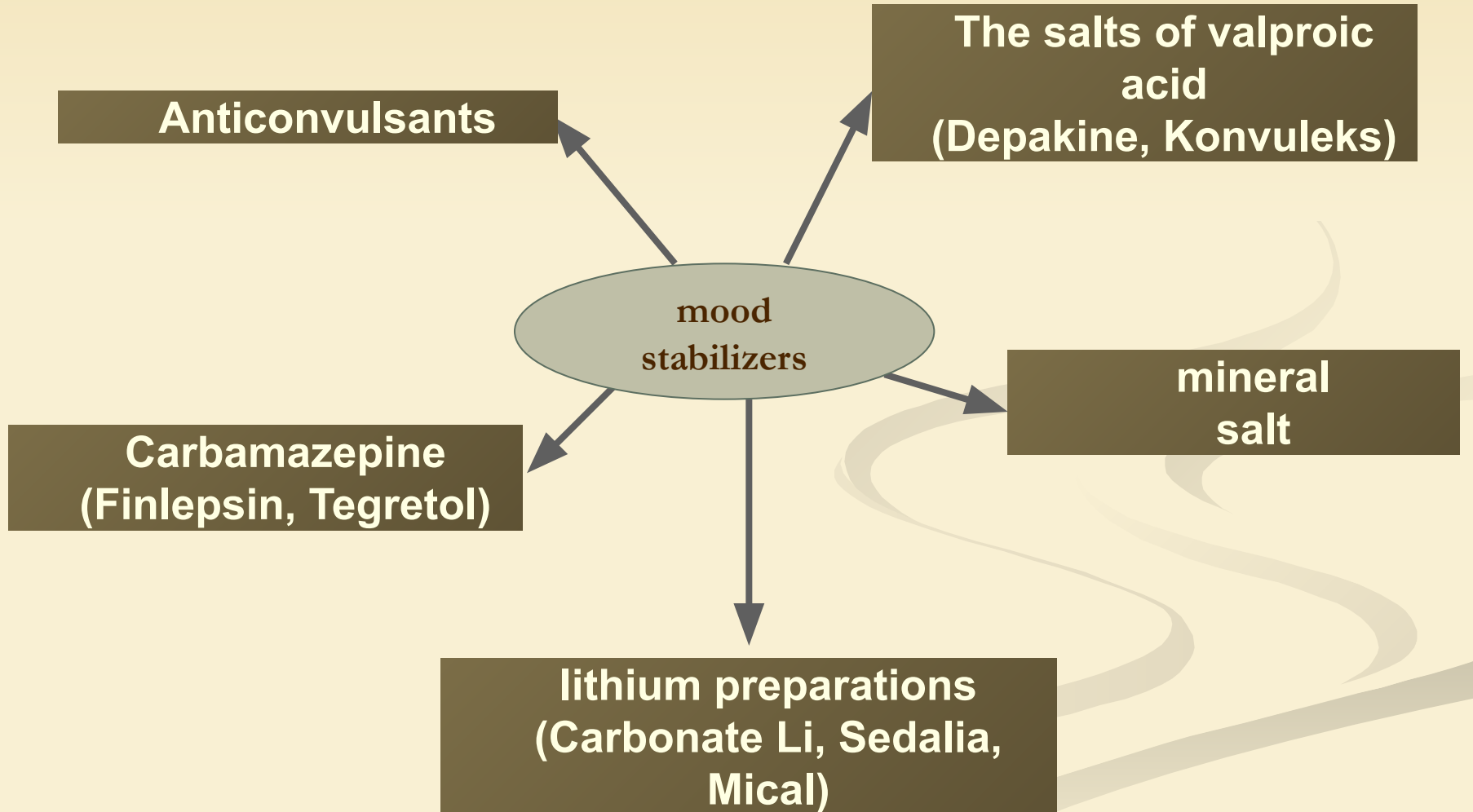
- Application of the minimum effective dose

- Short courses (no more than 2-3 weeks)

- Intermittent procedure (2-4 times per week)

- Phasing-out

MOOD STABILIZERS



PSYCHOSTIMULANTS

Improve mediator transmission at synapses

It stimulates the central nervous system activity
Take off drowsiness
Strengthen mental and physical performance
(briefly)
Improve the ability to concentrate

improve storage
Facilitate thinking and speech
Increases activity, vigor
Reduce the need for food
Reduce the need for sleep

PSYCHOSTIMULANTS

**CAFFEINE
SIDNOKARB
SIDNOFEN**

side effects

■ **Increased anxiety, fear**

■ **sleep disturbances**

■ **The dependence**

■ **In case of overdose - to the development of:**

■ **intoxication delirium,**

■ **mania,**

■ **depression**

■ **hyperkinesis**

NOOTROPICS

Nootropics or stimulants neyrometabolitic - have a specific effect on the higher integrative brain function, stimulate learning and memory, im prove mental performance (efficiency) and increase resistance to brain damaging factors (stress tolerance), without the typical side effects of psychostimulants.

NOOTROPICS

CLINICAL EFFECTS

Nootropic effect (effect on the higher cortical functions).

Mnemotropnoe effect (effect on memory, learning).

Raising the level of consciousness, mental clarity.

Adaptogenic effect (effect on tolerance to various exogenous factors, including drugs, increasing the overall resistance of the organism to extreme factors).

Antiastenic effects (effects on fatigue, weakness, exhaustion, mental and physical effects of fatigue).

Psychoactive effects (impact on apathy, hypobulia, aspontannost poverty motives, mental inertia, psychomotor retardation).

The antidepressant action.

Sedation, reducing irritability and emotional excitability.

Vegetative effects (effect on headache, dizziness).

NOOTROPIL: TESTIMONY

- Psycho-organic syndrome and dementia of various origins
- asthenic conditions
- Chronic intoxication
- Neurological diseases
- To improve mental performance

**In pediatric practice:
delayed speech and mental
development,
mental retardation,
the effects of perinatal CNS,
cerebral palsy,
attention deficit disorder in children.**

**Side effects:
sleep disorders,
anxiety**

CLASSIFICATION PSYCHOTHERAPEUTIC METHODS

PSYCHOTHERAPY is a system of complex therapeutic effects using psychological tools on the patient's psyche

CLASSICAL METHODS

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graph TD; A[CLASSICAL METHODS] --> B[suggestive]; A --> C[RATIONAL PSYCHOTHERAPY]; A --> D[PSYCHOANALYSIS]; A --> E[Behavioural]
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suggestive

suggestion
Hypnotherapy
self-suggestion
Emotional stress
Placebo-therapy

RATIONAL PSYCHOTHERAPY

PSYCHOANALYSIS

Behavioural

**THANK YOU FOR
ATTENTION**