

Team**Solutions**



# Understanding Your Treatment

By Kay Johnson McCrary, EdD

## About the Author

**Kay Johnson McCrary, EdD**, developed, directed, and taught in patient and family education programs for the South Carolina Department of Mental Health from 1984 until she retired in 2007 from the position of Director of Patient and Family Education at Bryan Psychiatric Hospital in Columbia, South Carolina. She has given numerous national presentations on the topic of mental health education for consumers

## Lead Editor

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Dr. Puskar was elected a Fellow of the National Academics of Practice, the American Academy of Nursing and is a Past President of The American Psychiatric Nurses Association (APNA). She is a recipient of the Pennsylvania Nightingale Award for Research and the American Psychiatric Nurses Association Research Award. She has received funds from the National Institutes of Health, National Institute of Nursing Research, Eli Lilly and Company and The Staunton Farm Foundation to study mental health, stress, coping mechanisms and medication adherence.

This educational program was developed solely for the benefit of the patient, and is not intended to provide individual financial gain.

## Contributing Editors

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Ms. Tugrul has lectured nationally and internationally and has authored or coauthored more than 30 articles on the treatment of bipolar disorder, schizophrenia, and schizoaffective disorder. She has served on the Editorial Boards of *Directions in Psychiatric Nursing* and *Bipolar Disorders* and as an independent consultant for 15 years.

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## Reviewers

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Robert John McCrary, Ph.D., psychologist and my husband for 38 years, who has regularly processed whatever project I'm on with me, sharing his considerable experience, wisdom, and kind-hearted values, making my work better.

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**Contents****Workbook Goals**

<b>Session 1</b>	Introduction: Treatment Can Help	4
<b>Session 2</b>	Range of Treatments	12
<b>Session 3</b>	How Messages Are Sent in the Brain	23
<b>Session 4</b>	Brain Chemical Imbalance	33
<b>Session 5</b>	How Medicine for Mental Illness Works	43
<b>Session 6</b>	How Medicine Can Work Best for You	53
<b>Session 7</b>	Side Effects	63
 <b>Session 8</b>	Watching for Medicine Side Effects	73
 <b>Session 9</b>	Serious Side Effects	85
<b>Session 10</b>	Drug Interactions	94
<b>Session 11</b>	Test Your Knowledge Regarding Medicines for Mental Illness	103

**Content Objectives:**

After completing this workbook, participants will be familiar with:

1. The role medication plays in treatment.
2. How medications work.
3. Possible side effects of medication.
4. What to do if side effects occur.

**Treatment Plan Objectives:**

1. Participants will gain knowledge during each session as evidenced by improving at least 25% from pre- to post-knowledge assessment.
2. Participants will choose and use knowledge as evidenced by selecting and attaining one personal practice goal per session.
3. Participants will demonstrate skill acquisition as evidenced by correctly completing a monitoring form and/or by role-playing at least one coping skill after completing the workbook.



**Family Friendly Session** – good for use in family sessions or groups

## 1

**Introduction: Treatment Can Help**  
Facilitator Notes**Main Learning Points:**

This is the first session. Every session except this one will begin with a review of the Main Learning Points from the last session.

**Tips for this Session**

1. Give each participant his or her own personal set of handouts for this session, with a folder or notebook for saving all *Understanding Your Treatment* workbook materials.
2. When you pass out the handouts let participants know that the session will be interactive, with reading aloud. Inform them you will all take turns and that it is okay to say “I pass” if they don’t want to read aloud. However, let them know everyone values their participation and input and you hope they will participate.
3. Stop and discuss the handouts frequently, especially where indicated. You’ll greatly increase participants’ chances of making behavioral changes if you can focus the discussion, and allow the participants to process the information, say it in their own words, link it to personal experiences, and clarify any unclear information.
4. When you get to a main learning point in the reading, stop and discuss it. Call on participants to say in their own words what it means. Have participants give an example based on personal experience.

**Suggestion for Topic Introduction  
and Relevance to Participants**

*“Just as we’ve introduced ourselves to each other, the first class is an introduction too. The handouts for this first session introduce us to the topic of our workbook, ‘Understanding Your Treatment.’ It’s important to me that your goals for studying this workbook are met. Please tell me what you hope to get out of this workbook.”*

(Write on the board: What do I hope to get out of studying *Understanding Your Treatment*?)

(Give everyone a chance to respond but do not pressure them—allow participants to say)

*“I pass.”*

Schedule those who pass for the first one-on-one conferences, if that is part of your agency’s routine. Acknowledge all responses.)

*“Thank you. This is your group, and we’re here to help you find the answers to your questions about this topic and meet your needs.”*

*“Let’s answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”*

**Topic Assessment Answer Key**

1. B    2. B    3. A    4. A

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

**Topic Assessment**

Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

**Directions:**

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. Symptoms of mental illness will clear up with time even if there’s no treatment.**

A. True    B. False

**2. Some mental disorders, including schizophrenia and bipolar disorder, do not usually appear until people reach their 30’s or 40’s.**

A. True    B. False

**3. New treatment choices are now available because:**

- A. There are new discoveries in medicine.
- B. I have better treatment team members to help me with my symptoms.
- C. I have more money to pay for medications that help.
- D. I’m not as ill as I was in the past.

**4. Without treatment, symptoms are likely to stay the same or worsen over time.**

A. True    B. False

**5. I am confident I understand my treatment.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

## Topic Assessment



6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. How this session could have been better for me: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Introduction: Treatment Can Help

**Objectives for this Session**

1. State 1 way brain research and new medications have improved treatment.
2. Give 1 reason why someone might seek treatment for bipolar disorder or schizophrenia.
3. State 3 ways medicine can help you reach your goals for your life.

**Newer Treatments Are Helping People Get Better**

For many years, treatment for mental illness didn't change much. But at the end of the 20th century, doctors discovered many new facts about these illnesses—and a lot more information is now available on how to treat them. Brain research has found comfortable new ways, such as scans, to look at a living brain as it functions. Because of this, we now know a great deal about what happens with these disorders. New medicines have been discovered, giving people more treatment choices to help them get better.

This workbook was written to help you understand different treatment choices. It describes the medicines used to manage symptoms, what to expect from these medicines, and how to manage unwanted side effects from medicine if they happen.

**Main Learning Point #1**

**Because of recent discoveries in medicine, people have more treatment choices and are getting better.**



Can you name some ways treatment for mental illness has improved in the past century?

\_\_\_\_\_

In your own experience, have you seen improvements in treatments for mental illness?

\_\_\_\_\_

## At First, Most People Don't Know Why They're Not Feeling Right

Some mental disorders, including schizophrenia and bipolar disorder, do not usually appear until people reach their teens or twenties. At first, many people don't understand why they're not feeling right. They don't know their symptoms are being caused by a medical illness.

Without treatment, symptoms are likely to get worse over time. It might be hard to remember when a person started having symptoms, such as having trouble concentrating or feeling sad. Over several months or years, the person may have felt worse but couldn't understand why.

Most people are not diagnosed with schizophrenia or bipolar disorder until something serious happens. They may have a crisis situation, such as becoming a threat to themselves or to others. Or they may not be able to care for themselves. When they are put in the hospital, they find out they have an illness. They learn that treatment can help them feel better. Some people have a harder time than others accepting their diagnosis. They may go into the hospital several times before they realize they have an illness, and that they can help themselves feel better with treatment.



How old were you when your symptoms started?

---

What diagnosis have you and your prescriber talked about?

---

Did a crisis cause you to seek treatment?

---

### Main Learning Point #2

Symptoms get worse without treatment. Treatment can help.

## How Treatment Can Help

Medicine may help relieve symptoms such as anxiety, fear, suspicion, and sleeplessness. As treatment continues, it may be easier to focus on activities. You may feel less distracted by things going on around you. You may feel more relaxed and more willing to make plans for recovery with your treatment team.

Most people have goals. They may want to be able to live on their own or to go back to school or work. If these are things you want to do, medicine is one part of treatment that can help you reach your goals.

Medicine can:

1. Relieve or lessen your symptoms.
2. Help you feel more relaxed.
3. Help you concentrate better.



### Main Learning Point #3

Medicine is one tool that can help you reach your life goals.



If you've ever been treated with medicine for a mental illness, can you explain what it was like?

---

Which medication helped you the most? How did it help you?

---

Were there any problems with your last medication?

---

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support network. I will ask \_\_\_\_\_ to read it and talk with me about my treatment.
- ☐ **3. ORGANIZE.** I will find out my diagnosis and the names of my medicines before the next session. I will write down my medicines to keep in my wallet.
- ☐ **4. OTHER:** \_\_\_\_\_

If there is time left before the end of the session, you might talk about your personal practice goals. How will you **remember** and **complete** your goal by the next session?

# 2

## Range of Treatments Facilitator Notes

### Main Learning Points from last session: *Treatment Can Help*

1. Because of recent discoveries in medicine, people have more treatment choices and are getting better
2. Symptoms get worse without treatment. Treatment can help.
3. Medicine is one tool that can help you reach your life goals.

### Review Personal Practice Options from last session.

#### Remember

It's important to acknowledge and discuss participants' successes, progress and challenges.

#### Materials Needed to Accompany Participant

**Handout:** *About Evidence-Based Practices:  
Shaping Mental Health Services Toward Recovery.*

#### Tips for this Session

1. This is the second session. You are still bonding with participants, so focus on their needs. Keep the session supportive and encouraging.
2. Take time to process the information, pausing frequently to discuss it with the participants, give examples from their experiences. Facilitate discussion if they want to process if and how they may apply the principles to their lives.

#### General Tip

While the information participants learn from this session is important, the emotional tone they get from it is just as vital. People may not always care about the scientific or technical language used to explain symptoms, treatment, or relay complex health information. Use everyday language that describes their real experiences. Alter your language selection to match their needs, but respect the fact you are working with adults. Always maintain a respectful, adult-to-adult tone.

### Suggestion for Topic Introduction and Relevance to Participants

*"Have any of you traveled to a place you'd never been before? Have you ever been the driver when you went to a new place?"*

*"How helpful is it to have a map when you drive to an unfamiliar place?"*

(React to their responses.)

*"Yes, I want a map!"*

*"When you get an unexpected illness, it's a bit like traveling to that unfamiliar place. You don't know what to expect. Wouldn't a map be good to have?"*

*"Today we'll talk about having a road map for your recovery journey—the treatment plan and all the options that may be available if you need them."*

*"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."*

**Topic Assessment Answer Key**  
1. A    2. A    3. C    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 1: Treatment Can Help



### Main Learning Points of Session 1

What were the main learning points of Session 1? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Because of recent discoveries in medicine, people have more  
t \_\_\_\_\_ t choices and are getting better.
2. S \_\_\_\_\_ s get worse without treatment. Treatment can help.
3. M \_\_\_\_\_ e is one tool that can help you reach your life goals.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?

\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

**Directions:**

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. I need to discuss my symptoms with my prescriber every time I see him or her.**

A. True   B. False

**2. My symptoms will likely return if I stop taking my prescribed medicine.**

A. True   B. False

**3. Once I start to notice that my medicine is working, I:**

- A. Can decide if I want to keep taking it or not.
- B. Will be more anxious and nervous than before.
- C. Will begin to use other kinds of treatment along with medicine.
- D. Will not need to have as much sleep as before.

**4. I can get better with medicine alone.**

A. True   B. False

**5. I am confident I understand the different types of treatment.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

**6. This information is important for me to know.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

## Topic Assessment



**At the end of the session, answer these questions before turning in this paper:**

**7. This session helped me.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

**8. What I liked about this session:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. How this session could have been better for me:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Ranges of Treatment

### Objectives for this Session

1. Recognize 2 types of treatment that are available, based on your needs, to help you get better.
2. Identify 1 role of medicine in treatment.
3. Provide 2 reasons why it's important to continue treatment.

### What Overall Treatment May Include

Depending on a person's own needs, overall treatment may include some of the following:

1. **One or more medicines**—to improve concentration and relieve symptoms such as insomnia, nervousness, depression, fear, hearing voices, feelings of suspicion, racing thoughts, irritation, and confused thinking.
2. **Counseling sessions**—for regular emotional support. Counseling can help you learn how to cope with problems caused by your illness, how to solve problems you are concerned about, and how to structure your time and activities.
3. **Therapeutic recreation**—to help you learn how to keep from getting too stressed, communicate better, improve your skills in forming friendships, and find activities to enjoy in your free time.
4. **Rehabilitation**—to help you learn skills to be successful at home, work or school.
5. **Support groups**—to talk with, learn from, and enjoy social activities with others who have similar challenges. Being in groups lets you give support to others and get support from them.
6. **Evidence-based treatment programs**—These programs combine to give you knowledge of several types of treatment that are proven to work well together. They focus on your needs, helping you get the information and skills necessary to reach your goals. *(See handout of evidence-based programs from the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, called SAMHSA.)*

#### Main Learning Point #1

Many types of treatment are available to help you get better.

## Planning My Treatment

The first goal of treatment is safety. If a person is not thinking clearly or not making wise decisions, he or she may put himself, herself, or someone else in harm's way. Treatment can help keep the person safe.

Another major goal of treatment is to make symptoms better or clear them up. As part of your treatment, you will talk about your symptoms with your prescriber. Together you will choose one or more medicines that can help meet your needs. You and your prescriber will keep talking about symptoms and medicines as time goes on and making changes in your treatment if needed.

Medicines play several important roles in your treatment. They can help relieve your symptoms, help you feel better, and help you avoid getting sick again.

As you improve and your symptoms begin to clear up, your prescriber may suggest other types of treatment that may help you. The ones that meet your needs may be added to your treatment plan. Some examples of other types of treatment include counseling, rehabilitation, support groups, evidenced-based programs such as Assertive Community Treatment, and supported employment.

Many people want to know more about their medicine and what results they can expect. They also want to know if they'll have any unwanted side effects from their medicine. The rest of this workbook will focus on medicines—how they can help improve symptoms, how they work, possible side effects, and how to manage them. However, this workbook can't tell you everything you may want to know. If you have questions about your medications or any unwanted side effects, talk to your prescriber.



#### Main Learning Point #2

You and your prescriber are partners in choosing the best treatment for you.

## What to Expect From Your Medicine

Medicine is meant to help manage your symptoms and help you feel better. For example, you may have been bothered by anxiety, fear, insomnia, depression, or frightening sights, voices, sounds, thoughts, or beliefs. With medicine, these symptoms may happen less often or bother you less. They may go away for some people. You may be able to think and focus more clearly. You may find you have more energy. Relating to others may be easier.

But all of this won't happen overnight! Treating symptoms such as these takes time. Symptoms usually improve gradually. It may take several weeks before you notice a difference in the way you feel. Remember, every person's body is different, and the time it takes medicine to work will be different, too. It's important to be patient and give your medicine time to work.

### Main Learning Point #3

**Medicine helps symptoms  
improve gradually.**

Once you start to feel better, it's important to keep taking your medicine. Staying on treatment is the most important thing you can do to keep your symptoms from coming back.

Sometimes when people start to get better, they think they don't need the medicine any more and it's okay to stop taking it. Your brain disorder, like many other medical illnesses, needs regular treatment to keep symptoms under control and help you avoid a medical crisis. You don't want illness to keep you from reaching your life goals.

### Main Learning Point #4

**Taking your medicine every day  
can help you reach your life goals.**

## Review & Moving Forward



**The main learning points of this session are:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support network. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ **3. WRITE.** I will write down my experiences with treatment. I will discuss what has worked best for me and explain why, so I can help others.
- ☐ **4. OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- ☐ **5. ASSESS.** I will study the SAMHSA handout and choose a program I think will help me. I'll discuss it with my treatment team.

## About Evidence-Based Practices: Shaping Mental Health Services Toward Recovery

### **Illness Management and Recovery**

The Illness Management and Recovery program strongly emphasizes helping people to set and pursue personal goals and to implement action strategies in their everyday lives. The information and skills taught in the program include:

- Recovery strategies
- Practical facts about mental illness.
- The Stress-Vulnerability Model and strategies for treatment
- Building social support
- Using medication effectively
- Reducing relapses and coping with stress
- Coping with problems and symptoms
- Getting needs met in the mental health system

### **Assertive Community Treatment**

The goal of Assertive Community Treatment is to help people stay out of the hospital and to develop skills for living in the community, so that their mental illness is not the driving force in their lives. Assertive community treatment offers services that are customized to the individual needs of the consumer, delivered by a team of practitioners, and available 24 hours a day. The program addresses needs related to:

- |                      |                            |
|----------------------|----------------------------|
| • Symptom management | • Housing                  |
| • Finances           | • Employment               |
| • Medical care       | • Substance abuse          |
| • Family life        | • Activities of daily life |

### **Family Psychoeducation**

Family Psychoeducation involves a partnership among consumers, families and supporters, and practitioners. Through relationship building, education, collaboration, problem solving, and an atmosphere of hope and cooperation, family psychoeducation helps consumers and their families and supporters to:

- Learn about mental illness
- Master new ways of managing their mental illness
- Reduce tension and stress within the family
- Provide social support and encouragement to each other
- Focus on the future
- Find ways for families and supporters to help consumers in their recovery

## About Evidence-Based Practices: Shaping Mental Health Services Toward Recovery

### **Supported Employment**

Supported Employment is a well-defined approach to helping people with mental illness find and keep competitive employment within their communities. Supported employment programs are staffed by employment specialists who have frequent meetings with treatment providers to integrate supported employment with mental health services. The core principles of this program include:

- Eligibility based on consumer choices and preferences
- Supported employment as an integrated treatment
- Continuous follow-along supports
- Help with moving beyond the patient role and developing new employment-related roles as part of the recovery process

### **Co-occurring Disorders: Integrated Dual Diagnosis Treatment**

Integrated Dual Diagnosis Treatment is for people who have co-occurring disorders: mental illness and a substance abuse addiction. This treatment approach helps people recover by offering both mental health and substance abuse services at the same time and in one setting. This approach includes:

- Individualized treatment, based on a person's current stage of recovery
- Education about the illness
- Case management
- Help with housing
- Money management
- Relationships and social support
- Counseling designed especially for people with co-occurring disorders

Source: United States Department of Health and Human Services—  
Substance Abuse and Mental Health Services Administration

# 3

## How Messages Are Sent in the Brain Facilitator Notes

### Main Learning Points from last session: *Range of Treatments*

1. Many types of treatment are available to help you get better.
2. You and your prescriber are partners in choosing the best treatment for you.
3. Medicine helps symptoms improve gradually.
4. Taking your medicine every day can help you reach your life goals.

### Review Personal Practice Options from last session.

#### Remember

You can refer to the two-sided laminated “Facilitator’s Delivery Checklist” when using Team Solutions materials as a reminder of important facilitator tips.

#### Tips for this Session

**Multi-sensory demonstration:** You may want to make this session more concrete and fun by bringing in “Neuron Cookies.” (You can experiment to find your favorite low-sugar cookie recipe on the Internet). Chocolate chips can represent receptors, white raisins can represent synaptic vesicles, and dark raisins can be neurotransmitters.

First, give the participants a quick hand sanitation lesson, with everyone using a liquid hand sanitizer. When you reach page 3 in the lesson, pass out the “Neuron Cookies,” cautioning participants to not eat them yet. Then draw the equivalent neuron on the board and name the parts as you read page 3 together. When you get to the explanatory diagrams on pages 4 and 5, read them aloud and then do the demonstration. Line the participants up in rows of three, putting the “Neuron Cookies” near each other to form a pathway. Demonstrate how the message is delivered and received: Dark raisin “neurotransmitters” come out of the white raisin “synaptic vesicle” (little chemical factory) and across the space (synapse) into the chocolate chip “receptor” of a neighbor’s cookie. After every group of three performs a correct demonstration, celebrate their new knowledge by eating the cookies.

Making it fun and interactive makes this session more memorable. Laughing together helps everyone feel more hopeful. Challenge yourself to have creative presentations!

#### Potential Problem

After all your extra work, the “Neuron Cookies” arrive at the session in broken pieces.

#### Possible Responses

1. Buy a portable hard plastic storage container to transport the cookies—it’s a good investment.
2. Pass out the cookie pieces brought for today’s session. Laugh about it together. Reconstruct how they looked using the diagram on the board.
3. Enjoy eating the cookie pieces.

## Suggestion for Topic Introduction and Relevance to Participants

“Does anyone here really enjoy detective stories or mysteries? I sure do! Is it fascinating to you to see mysteries solved? All the folks who enjoy seeing a good mystery solved, raise your hands.”

“Today we’re going to begin solving the mystery of brain chemistry—how it works, how it gets out of balance and how medicine corrects the imbalance. Very fascinating stuff! Today’s session is about how messages are sent in the brain.”

“Who in the group thinks they understand how medicine works in our brains?”

(Acknowledge responses.)

“Is this something you’d like to understand better?”

“Let’s review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”

#### Topic Assessment Answer Key

1. A    2. A    3. A    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 2: Range of Treatments



### Main Learning Points of Session 2

What were the main learning points of Session 2? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Many types of treatment are available to help you get b\_\_\_\_\_r.
2. You and your prescriber are p\_\_\_\_\_s in choosing the best treatment for you.
2. Medicine helps symptoms improve g\_\_\_\_\_y.
3. Taking your medicine e\_\_\_\_\_y day can help you reach your life goals.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. If a person's brain chemistry is out of balance, his or her brain might not process messages from the five senses correctly.**

A. True B. False

**2. If a person's brain chemistry is out of balance, messages might not match up correctly with memories.**

A. True B. False

**3. Neurotransmitters are:**

- A. Chemicals that help carry messages between brain cells.
- B. Brain nerve cells that form communication pathways in the brain.
- C. Receptors in the brain.
- D. Connective tissue in the brain.

**4. Medicines work by making new chemicals in the brain.**

A. True B. False

**5. I am confident I understand how messages are transmitted in the brain.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly	Disagree	Neither Agree	Agree	Strongly	Unsure
Disagree		Nor Disagree		Agree	

## Topic Assessment



6. This information is important for me to know.

- |                          |                          |                            |                          |                          |
|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly Disagree        | Disagree                 | Neither Agree Nor Disagree | Agree                    | Strongly Agree           |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- |                          |                          |                            |                          |                          |
|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly Disagree        | Disagree                 | Neither Agree Nor Disagree | Agree                    | Strongly Agree           |

8. What I liked about this session: \_\_\_\_\_

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9. How this session could have been better for me: \_\_\_\_\_

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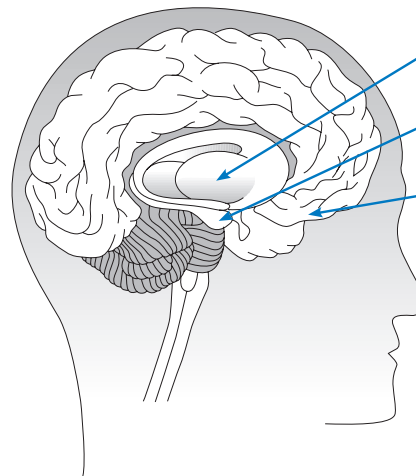
## How Messages Are Sent in the Brain

### Objectives for this Session

1. Identify the 3 steps of how information is processed in the healthy brain.
2. Understand what a “neurotransmitter” is and its role in the brain.
3. Identify 1 thing that can happen when neurotransmitters get out of balance.
4. Recognize 1 way imbalanced brain chemistry is put back into balance.

### How Do Medicines Work to Relieve Symptoms?

Medicines work by changing the imbalance of chemicals in the brain. Brain chemicals are needed to carry messages from one brain nerve cell to the next so you can:



1. **Receive** information from your senses (what you see, hear, taste, touch, and smell).
2. **Recognize** the information, be able to process it, make sense of it, and compare it to your memory banks.
3. **React** and make decisions based on the information you receive and process.

## How Messages Are Sent in the Brain (continued)

When brain chemicals get out of balance, messages from the world may not be the same messages received by the brain. Depending on which chemical is out of balance, a person's brain may receive only bits and pieces of information, like pieces of a puzzle. The person may have to struggle to fit those pieces together so the message makes sense. Sometimes the brain may process information too fast or too slow, which can cause important parts of the message to be lost.

### Main Learning Point #1

**When brain chemicals get out of balance, it is harder to receive and process information.**

### Messages Travel on Nerve Pathways

There are billions of nerve pathways in the brain. Information and messages travel on these nerve pathways to get to different areas of the brain. Each nerve pathway is made up of small brain nerve cells.

### Brain Chemicals Carry Messages from One Nerve Cell to the Next

Nerve cells on a nerve pathway are lined up so that they can pass the message from one nerve cell to the next. Nerve cells don't touch each other, so they can't pass the message directly. Brain chemicals are needed to help carry the message across the spaces between nerve cells. These brain chemicals are called **neurotransmitters**. They are stored in the vesicles (little chemical factories) of the nerve endings. When the brain chemicals are released from one nerve cell, the neurotransmitters carry the message to the next nerve cell.

### What Does It Mean?

Brain chemicals, known as **neurotransmitters**, are responsible for carrying information from one nerve cell to another nerve cell. "Neuro-" means nerve, and "-transmitters" refers to carrying messages. Neurotransmitters are stored in vesicles (little chemical factories) in the nerve endings of the nerve cells.

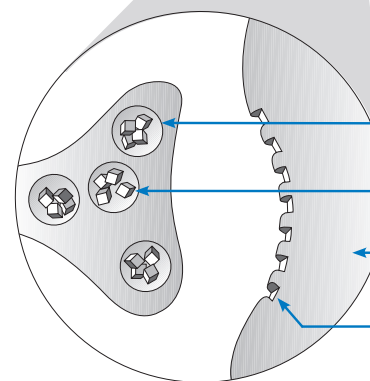
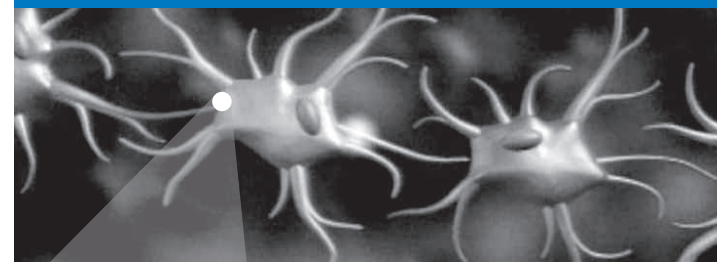
### Main Learning Point #2

**Brain chemicals called "neurotransmitters" carry messages between brain nerve cells.**

## How Messages Are Sent in the Brain (continued)

### Messages Are Carried Along Pathways of Brain Nerve Cells

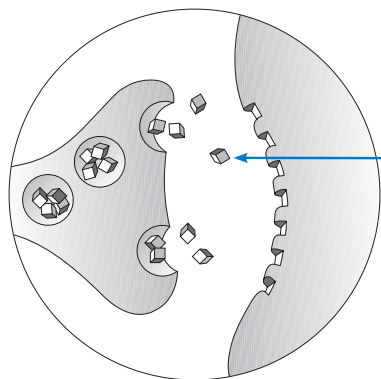
*A pathway of brain nerve cells*



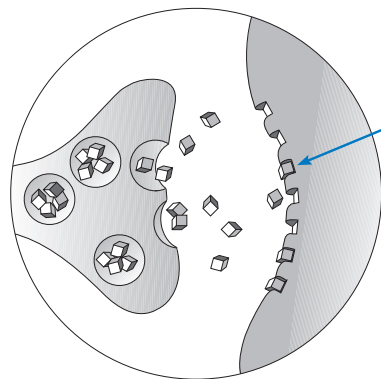
1. Brain chemicals are stored in the vesicles at the brain nerve cell endings, ready to carry a message.
2. Brain chemicals.
3. This brain nerve cell is ready to receive the message.
4. "Receptors" are ready to receive the brain chemicals.

## How Messages Are Sent in the Brain (continued)

### How Messages Are Carried From One Brain Nerve Cell to Another



Brain chemicals leave their brain nerve cell ending to carry a message to the next brain nerve cell.



The message is sent when brain chemicals connect with their receptors.

#### Main Learning Point #3

Brain chemicals have to connect with their receptors to send the right message at the right time.

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ **3. DISCUSS.** I will talk to \_\_\_\_\_ about whether my decisions seem to have been affected by my illness at times. I'll hear what he or she remembers.
- ☐ **4. OTHER:** \_\_\_\_\_

### Take an "Extra Step Forward" (optional)

- ☐ **5. WRITE.** I will write down the answers to one or more of these questions:

1. What helps my wellness?
2. What makes things worse for me?
3. What do I need to make my life better?
4. What are my plans to get my needs met?

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### Motivation to Practice.

How will practicing help you?



# 4

## Brain Chemical Imbalance Facilitator Notes

### Main Learning Points from last session: *How Messages Are Sent in the Brain*

1. When brain chemicals get out of balance, it is harder to receive and process correct information.
2. Brain chemicals called neurotransmitters carry messages between brain nerve cells.
3. Brain chemicals have to connect with their receptors to send the right message at the right time.

### Review Personal Practice Options from last session.

#### Remember

You can refer to the two-sided laminated *"Facilitator's Delivery Checklist"* when using Team Solutions materials as a reminder of important facilitator tips.

#### Tip for this Session

**Learning aids that can be manipulated.** Have each participant (and facilitator) cut out a neuron and label each part. Put your neurons together in a chain and use paper circles from a hole puncher as neurotransmitter messenger chemicals. Together you can figure out how to demonstrate too much neurotransmitter, too little neurotransmitter, storage problems, and leaky membrane problems.

## Suggestion for Topic Introduction and Relevance to Participants

*"At the last session, we talked about being detectives to understand the "three R's" of how messages are delivered and processed in our brain—the information is **Received**, **Recognized** (matched up with our memories) and **Reacted** to. Today we have the thrill of again being detectives to figure out what goes wrong—how those message-delivering brain chemicals get out of balance. Why is that important? Why is it important to understand how something is broken?"*

(Take ideas from participants. You are hoping that someone will say, figuring out how it's broken is the first step in figuring out how to fix it—how to put it back right. Guide the participants toward this if possible. Reinforce all participation by acknowledging it positively. When you hear something close to the desired answer)

*"That's right! Figuring out how something is broken is the first step in figuring out how to fix it—how to put it back right."*

*"The brain is very complex. Our discussions will be a 'ballpark explanation'—just enough information to give us the general idea without overwhelming us. My hope is that one day these illnesses, including schizophrenia and bipolar disorder, will have cures. The only way to reach that is by figuring out what went wrong and how to fix it."*

*"Our session today explores how brain chemicals get out of balance. What would you hope to get out of attending a session about this?"*

*"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."*

#### Topic Assessment Answer Key

1. B    2. A    3. A    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 3: How Messages Are Sent Through the Brain



### Main Learning Points of Session 3

What were the main learning points of Session 3? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. When brain chemicals get out of balance, it is harder to receive and process correct information.
2. Brain chemicals called neurotransmitters carry messages between brain nerve cells.
3. Brain chemicals have to connect with their receptors to send the right message at the right time.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### 1. Brain chemical imbalance is limited to too high or too low levels of neurotransmitters.

A. True B. False

### 2. Having leaky membranes in the brain's nerve pathways can affect moods.

A. True B. False

### 3. Hyperactivity in the front part of the brain might result in unstable moods.

A. True B. False

### 4. If brain chemicals get out of balance, you might have the following symptoms:

- A. Sound sleep and waking up rested.
- B. Nervousness and/or anxiety.
- C. Clear thoughts and understanding of communication.
- D. Energy.

### 5. I am confident I understand how brain chemicals work.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly	Disagree	Neither Agree	Agree	Strongly	Unsure
Disagree		Nor Disagree		Agree	

## Topic Assessment



### 6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

### 7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

### 8. What I liked about this session: \_\_\_\_\_

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### 9. How this session could have been better for me: \_\_\_\_\_

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## Brain Chemical Imbalance

### Objectives for this Session

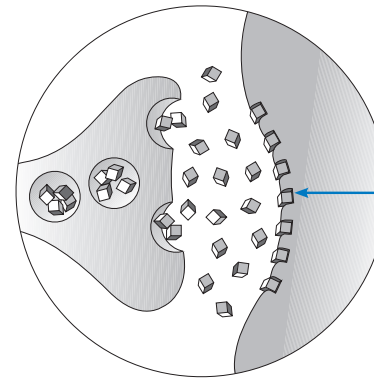
1. Identify 2 ways that brain chemicals may get out of balance.
2. Describe 2 responses (symptoms) to certain kinds of brain chemistry imbalance.
3. Recognize how neurotransmitter imbalance affects mental health.

### When Brain Chemicals Get Out of Balance

Nobody knows for sure, but it is thought that symptoms of mental disorder may happen when brain chemicals get out of balance. There are many ideas as to what may cause this imbalance in the brain. Here's a look of four of these ideas:

#### 1. Too many brain chemicals may be released.

Only a certain number of brain chemicals may be needed to carry the message to the next brain nerve cell. If too many brain chemicals are released, they may flood the nerve cell. This flood of chemicals might confuse the message that was already sent.

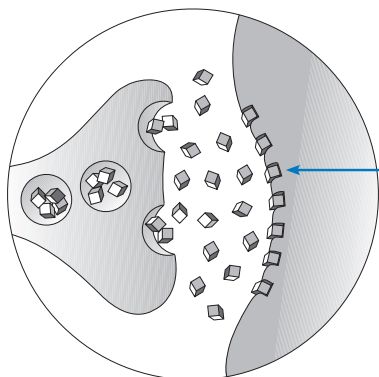


Too many brain chemicals flood the nerve cell with the message.

## Brain Chemical Imbalance (continued)

### 2. Brain chemicals may stay too long at the next nerve cell and keep sending the message over and over again.

Usually, brain chemicals carry a message to the next nerve cell, where they send their message. Afterwards, they may go back to their own brain nerve cell for storage, or they may get broken down and flushed into the blood stream and out of the body. If they don't go back to storage, or get broken down, they may stay in the space between the brain nerve cells and keep sending the message.



Too many brain chemicals flood the nerve cell with the message.

## Brain Chemical Imbalance (continued)

### 3. The brain may not be making enough of one or more of the brain chemicals.

There are not enough chemical messengers, so the message cannot be delivered correctly. In other words, the message gets changed. This chemical balance is especially important to help your moods match the events going on around you.

### 4. Conditions in the central nervous system (brain and spinal cord) affect how many brain chemicals are made, causing an imbalance.

- A. There may be “leaky membranes” that result in brain chemicals getting out of balance.
- B. There may be too much activity (hyperactivity) in the central nervous system, especially in the front area of the brain known as the frontal cortex. This hyperactivity results in brain chemistry imbalance.

#### Main Learning Point #1

Brain chemistry may get out of balance when too many or too few neurotransmitters are released.

#### Main Learning Point #2

Brain chemistry may get out of balance when brain chemicals stay too long at the next nerve cell and send the message over and over again.

## Brain Chemical Imbalance (continued)

### Main Learning Point #3

**Brain chemistry may get out of balance because of “leaky membranes” or hyperactivity in the central nervous system.**

It is very important for neurotransmitters, the brain chemicals that carry messages, to be in balance so that a person can think clearly and have normal emotional reactions.

If brain chemicals get out of balance, the person may have unusual sensations, such as hearing or seeing things that aren't really there. These sensations can confuse the message that's supposed to get through. The real message may get broken up—and the person may not receive the entire message.

The message may not make sense, so the person may be confused and nervous. He or she may also be exhausted from struggling to block out the other sensations so he or she can understand the real message. Or the person's thoughts may seem like they're “racing.” Thoughts may be misleading, and he or she may be too overwhelmed to get out of bed some mornings.

Likewise, brain chemicals can get out of balance and cause the person to slow down and get depressed. The person may only pay attention to negative things, and not be able to notice positive things. It's almost as if the person with this imbalance puts on sunglasses that screen out the sunshine which could brighten his or her life and lift his or her attitude and hope. Getting the brain chemicals back into normal balance takes off those “sunglasses.”

### Main Learning Point #4

**Symptoms happen when neurotransmitters, the brain chemicals that carry messages, get out of balance.**

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about brain chemical imbalance.
- ☐ **3. REVIEW.** I will talk to \_\_\_\_\_ about my past relapses and hear what he or she remembers about my symptoms.
- ☐ **4. OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- ☐ **5. CREATE.** I will build a model of a brain nerve cell, also called a neuron (for example, using dough or modeling clay). I'll label its parts, and make a poster explaining its importance.

## 5

**How Medicine for Mental Illness Works**  
Facilitator Notes**Main Learning Points from last session:**  
**Brain Chemical Imbalance**

1. Brain chemistry may get out of balance when too many or too few neurotransmitters are released.
2. Brain chemistry may get out of balance when brain chemicals stay too long at the next nerve cell and send the message over and over again.
3. Brain chemistry may get out of balance because of “leaky membranes” or hyperactivity in the central nervous system.
4. Symptoms happen when neurotransmitters, the brain chemicals that carry messages, get out of balance.

**Review Personal Practice Options from last session.****Tips for this Session**

The participants have saved their labeled cut-out neurons from the last session. You can get them out and again form chains of three-person “neuron pathways.” You can use more paper circles from a hole puncher as neurotransmitter messenger chemicals. Together, you can figure out how to demonstrate the five ways medicines can correct imbalanced brain chemicals. (Hint: it’s easy to do—use the illustrations.) Reward each participant with a small well-chosen treat at the end of the session (for example, a deck of cards, bag of healthy microwave popcorn to pop at break, or a coupon to use at the canteen) to acknowledge their participation and extra effort.

**General Tip**

Consumers may not always care about the scientific or technical language used to explain symptoms, treatment, or relay complex health information. Use everyday language that describes their real experiences. Alter your language selection to match their needs, but respect the fact you are working with adults. Always maintain a respectful, adult-to-adult tone.

When a more complex term is used in the material, give participants an opportunity to explain it. This can empower individuals who are familiar with more complex terminology or concepts.

**Suggestion for Topic Introduction**  
**and Relevance to Participants**

*“We have used good detective work to solve:*  
*1. How brain chemicals deliver messages*  
*in the healthy brain.*  
*2. Ways the brain chemistry can get out*  
*of balance.”*

*“Today we will try to solve how medicines*  
*work to restore balance in brain chemicals.*  
*What would you hope to get out of attending*  
*a session about this?”*

*“Let’s review the main points from our*  
*last session and answer the first six*  
*questions on the Topic Assessment before*  
*we start, just to see how familiar we are*  
*with this topic.”*

**Topic Assessment Answer Key**

**1. B    2. A    3. B    4. D**

T – topic introduction  
 R – relevance to participant  
 I – identify objectives  
 M – materials for session  
 M – motivate to use

## Review of Session 4: Brain Chemical Imbalance



### Main Learning Points of Session 4

What were the main learning points of Session 4? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Brain c\_\_\_\_\_y may get out of balance when too many or too few neurotransmitters are released.
2. Brain chemistry may get out of balance when brain chemicals stay too long at the next nerve cell and send the m\_\_\_\_\_e over and over again.
3. Brain chemistry may get out of balance because of “leaky m\_\_\_\_\_s” or hyperactivity in the Central Nervous System
4. Symptoms happen when n\_\_\_\_\_, the brain chemicals that carry messages, get out of balance.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. Laboratory tests are available to help you decide which medication(s) will work best for you.**

A. True B. False

**2. It's common to have to try more than one type of medicine to get best symptom relief.**

A. True B. False

**3. Medicine for mental disorders will always work very quickly.**

A. True B. False

**4. As long as you have medicine in your system:**

- A. You will not experience any symptoms.
- B. You can test the neurotransmitter levels in your blood.
- C. You shouldn't complain to your prescriber.
- D. It can keep working to bring brain chemicals back into balance.

**5. I am confident I understand how medicine works in my brain.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

## Topic Assessment



### 6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

### 7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

### 8. What I liked about this session: \_\_\_\_\_

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### 9. How this session could have been better for me: \_\_\_\_\_

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## How Medicine for Mental Illness Works

### Objectives for this Session

1. State 1 reason it is good to have so many choices in medicines for mental illness.
2. Explain 2 reasons it is important to work as a partner with your prescriber.
3. Identify 2 ways that medicine may bring brain chemicals back into balance.

There are many medicines available to treat symptoms of psychiatric illness. Why do we need so many to choose from? Because different medicines work in different ways to adjust the brain chemicals and relieve symptoms. That's why if one medicine doesn't work for a person, another medicine might work better. It's important for the person and the prescriber to work together to find the best medicine and dosage to treat symptoms.

#### Main Learning Point #1

**It's good to have so many choices of medicine, so that you and your prescriber can find the best medicine for you.**

There are no laboratory tests or measures of neurotransmitter levels in the blood that can tell which medicine is best for you. It's important for your prescriber to know as much as possible about your symptoms so he or she can help you make the best choice.

It's very common for a person to have to try more than one type of medicine to get the best possible relief from symptoms. Give your medicine enough time to see how well it works for you. Work with your treatment team to carefully decide if a medicine is working well for you, or if it would be better to try a different medicine or a combination of medicines.

#### Main Learning Point #2

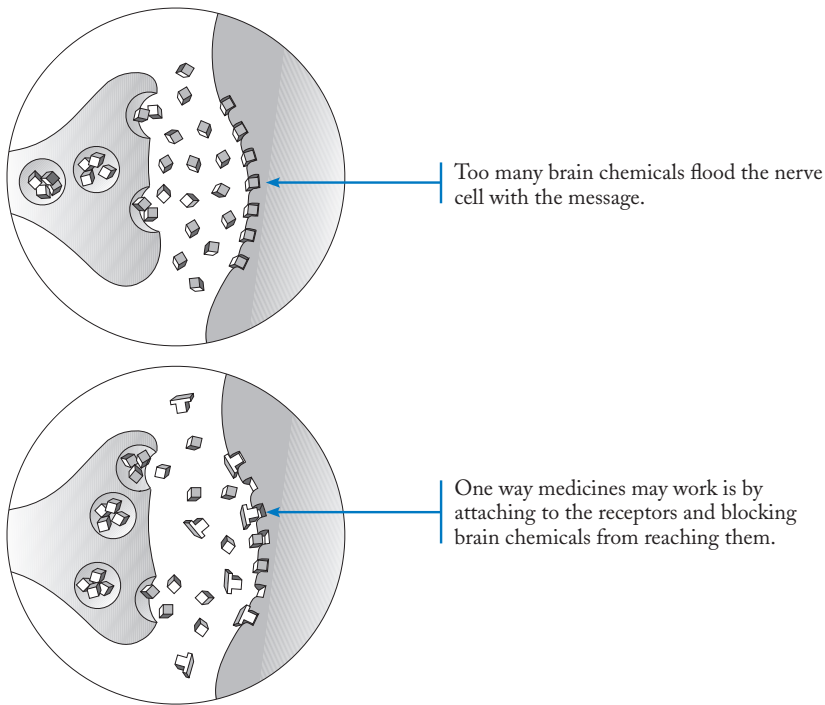
**It's very common to have to try more than one type of medicine to get the best possible relief. It is common to take two or more medicines together.**



## How Medicine for Mental Illness Works (continued)

*Why is it so important for me to work as a partner with my prescriber?  
Why is it good that there are so many different choices in medicines for mental illness?*

There are several ways medicines may work to help relieve symptoms. One way may be to block too many brain chemicals from connecting with the next brain nerve cell. When the brain chemicals are blocked, they can't send confusing messages.



## How Medicine for Mental Illness Works (continued)

Another way medicines may help is by sending the brain chemicals back to their own brain nerve cells once they've completed delivering their messages.

In general, medicines may help by adjusting the balance of brain chemicals. This is thought to improve your symptoms. However, when you start a new medicine or new dosage, it takes time for the balance of brain chemicals to change. It may take several weeks before you notice a difference in your symptoms. You will get the best results from your medicine by being patient and giving it time to work.

Everyone responds to medicines a little differently. Some people notice positive changes right away, while others may need a little more time.

Your prescriber is your partner in treatment. You will get the best results from your medicine if you work with him or her to decide whether your medicine is working as well as it should.

### Main Learning Point #3

**Medicines may work quickly or take several weeks to work.**

One type of medicine helps correct the brain chemistry imbalance caused by "leaky membranes." This medicine tightens the membranes so they won't be so leaky. This helps to bring neurotransmitters back to a normal balance.

Other medicines are able to help stabilize moods by reducing over-activity (hyperactivity) in the central nervous system. These medicines are also used to treat epilepsy and migraine headaches.

Another way medicine can help relieve symptoms is by making more of a neurotransmitter available when the person is ill from not having enough of it. Some medicines are able to block certain unused neurotransmitters from going back into storage in the synaptic vesicles (called "reuptake"). This makes these neurotransmitters available longer to attach to receptors. It restores the balance of chemical activity to a normal level.

## How Medicine for Mental Illness Works (continued)

### What Happens When Someone Stops Taking Medicine?

With every dose, medicine works to improve symptoms and help keep symptoms from returning. So, if a person stops taking the medicine as prescribed, symptoms will probably return. The person may have a relapse and might have to go to the hospital.

Medicine can't cure the problem that's causing the imbalance. Medicine can only help to bring the brain chemicals back into balance.

It's important to continue taking medicine exactly as prescribed every day, for as long as your prescriber recommends. Remember: If you have any questions about your medication or unwanted side effects, **always** talk about them with your prescriber.

#### Main Learning Point #4

**As long as your medicine is in your system, it can keep working to bring brain chemicals back into balance.**

#### Complete this sentence:

Taking medicine helps with symptoms by \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Review & Moving Forward



### The main learning points of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ 3. **EXPLORE.** I will talk to \_\_\_\_\_ about my response to my prescribed medicines and hear what he or she thinks about this.
- ☐ 4. **OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- ☐ 5. **JOURNAL.** I'm going to write down my memories, thoughts, and feelings about taking medicine and what I hope will happen.

If there is time left before the end of the session, you might talk about your personal practice goal. How will you **remember** and **reach** your goal by the next session?

## 6

**How Medicine Can Work Best for You**  
Facilitator Notes**Main Learning Points from last session:**  
***How Medicine for Mental Illness Works***

1. It's good to have so many choices of medicines, so that you and your prescriber can find the best medicine for you.
2. It's very common to have to try more than one type of medicine to get the best possible relief. It's common to take two or more medicines together.
3. Medicines may work quickly or take several weeks to work.
4. As long as your medicine is in your system, it can keep working to bring brain chemicals back into balance.

**Review Personal Practice Options from last session.****Tips for this Session**

The class covers five tips. Assign one tip to each of five people, or consider having two people work together on one tip. The participants can read the tip and lead the group to restate the tip in their own words. You may want to ask them to give an example of the tip.

**Suggestion for Topic Introduction  
and Relevance to Participants**

*"Have you ever cooked something or worked on a computer or car when someone was giving you tips based on their knowledge? For instance, if you were baking a pie, would you want someone sharing their knowledge of all the things that could go wrong?"*

*"Do you like tips about medicine based on other people's knowledge about medications? Might they help you avoid problems if you know ahead of time what types of things to expect?"*

*"I want to be given more than just a list of tips to read. I think the tips are more useful if they're explained to me. I like to be told why. I want to be told how. The better I understand the medication, the more useful that information is for me, and the better I will remember it. But that's me. How do you like to get information?"*

*"Today we'll talk about 'How Medicine Can Work Best for You.' We're going to get some good tips based on a lot of experience. And we'll get the 'why' and 'how' explanations, too."*

*"What would you hope to get out of attending a session about this?"*

*"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."*

**Topic Assessment Answer Key****1. B    2. A    3. B    4. B**

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 5: How Medicine for Mental illness Works



### Main Learning Points of Session 5

What were the main learning points of Session 5? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. It's good to have so many c\_\_\_\_\_s of medicine, so that you and your prescriber can find the best medicine for you.
2. It's very common to have to try more than one type of medicine to get the best possible r\_\_\_\_\_. It's common to take two or more medicines together.
3. Medicines may work quickly or take s\_\_\_\_\_l weeks to work.
4. As long as your medicine is in your system, it can keep working to bring brain chemicals back into b\_\_\_\_\_e.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?

\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### 1. The higher the dosage of medicine, the better off I am.

A. True B. False

### 2. It's important to take medicine exactly as prescribed.

A. True B. False

### 3. Herbal medicines are natural, so they can be added on without concern.

A. True B. False

### 4. An important way to be responsible for my treatment and medication is to:

- A. Ask advice from my friends about my medicines and theirs.
- B. Carry a list of my current medicines and doses in my wallet.
- C. Make the decision when it's best to take my medicine.
- D. Change the dose myself if symptoms are getting worse.

### 5. I am confident I know how to get the best effect from my medicine.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly	Disagree	Neither Agree	Agree	Strongly	Unsure
Disagree		Nor Disagree		Agree	

## Topic Assessment



6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. How this session could have been better for me: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## About Your Medicine

### Objectives for this Session

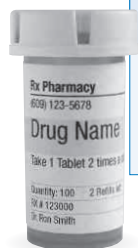
1. Recognize 2 reasons to take medicine “as directed.”
2. Talk about 1 reason why you should be careful about mixing over-the-counter and herbal medicines with prescription medication.
3. Explain 1 good thing about being a partner with your prescriber.
4. Write out a medicine card for your wallet.

Your prescriber may tell you to take your medicine a certain way, such as at bedtime. It's important to follow your prescriber's instructions exactly to get the best results from your treatment. Here's why:

1. For your medicine to work the right way, there must be enough of it in your body. If the dosage is too low, or if you miss doses, there may not be enough medicine to keep the brain chemicals balanced. Your symptoms may not get better. If they've gotten better and you stop taking your medicine the right way, your symptoms could come back again or get worse.
2. Your prescriber might be coordinating medicine times (for example, “take with meals” or “take on an empty stomach”) to keep you from having uncomfortable side effects, such as upset stomach or nausea. Taking your medicine at the right times helps you have the best chance of getting positive results, with nothing else getting in the way to make it less strong or less effective.

## About Your Medicine (continued)

3. It might be very helpful to make a routine to help you remember to take your medicine as prescribed. For instance, if the doctor says “take this with food,” you may want to take it every day at mealtime. If you are to take a medicine at bedtime or every morning, you may want to take it when you wash your face or brush your teeth. Having a routine can help you stay on track!



### Main Learning Point #1

**Take medicine exactly as prescribed to keep the right amount in your system so that brain chemicals stay balanced.**

4. If your dosage is too high, you may get unwanted side effects from your medicine. (Some unwanted side effects can happen even at the right dosage.)

### Main Learning Point #2

**The right dosage of medicine can help avoid unwanted side effects.**

5. It's a mistake to think, “If one is good, two may be even better!” That idea could cause you to accidentally overdose, which can be a problem. Medicine should be taken exactly as directed by your prescriber.

## About Your Medicine (continued)

6. Some medicines that you can get without a prescription, including over-the-counter and herbal remedies, can keep the other medicine you are taking from working right. Some can make your illness and symptoms worse. If you need to take a medicine for another health problem, such as a cold, your prescriber or pharmacist can help you find one that won't interfere with your other medicines.

### Main Learning Point #3

**Alert: Over-the-counter or herbal medicines can interact with medicine for mental illness.**

Many people don't want to depend on medicine. They want to take it only as long as it's needed. It's understandable that a person may not like taking medicine regularly over a long time.

Your prescriber is your partner in your efforts to stay well. If you are concerned about your medicines or about any side effects from them, talk with your prescriber about them.

Together, you can make sure the positive reasons to stay on your medicine outweigh the negative. Your prescriber will help you understand the pros (advantages) and cons (disadvantages) so that you can make healthy decisions.

## Medicines You Are Taking at This Time



It's smart to keep a list of the medicines you are taking in your pocket. In the spaces below, write the names of your medicine(s), the dosage(s), and when you take each one. Remember to redo this list whenever any changes are made.

Name of medicine: \_\_\_\_\_

Dosage: \_\_\_\_\_

When I take it: \_\_\_\_\_

Name of medicine: \_\_\_\_\_

Dosage: \_\_\_\_\_

When I take it: \_\_\_\_\_

Name of medicine: \_\_\_\_\_

Dosage: \_\_\_\_\_

When I take it: \_\_\_\_\_

Name of medicine: \_\_\_\_\_

Dosage: \_\_\_\_\_

When I take it: \_\_\_\_\_

### Main Learning Point #4

Carrying a list of current medicines and dosages in your wallet with your ID is a good idea.

Why is it a good idea to carry a list of your medications with you? Come up with a list of reasons.

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## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ **3. EXPLORE.** I will look up my medicine on the Internet or ask my prescriber or pharmacist for information about it.
- ☐ **4. OTHER:** \_\_\_\_\_

Take an “Extra Step Forward” (optional)

- ☐ **5. HELP OTHERS.** I'll write down what I will say to a friend in a support group, so what I've learned from my experiences can help others who are taking medicine for mental illness.

# 7

## Side Effects Facilitator Notes

### Main Learning Points from last session: *How Medicine Can Work Best for You*

1. Take medicine exactly as prescribed to keep the right amount in your system so that brain chemicals stay balanced.
2. The right dosage of medicine can help avoid unwanted side effects.
3. Alert: Over-the-counter or herbal medicines can interact with medicines for mental illness.
4. Carrying a list of your current medicines and dosages in your wallet with your ID is a good idea.

### Review Personal Practice Options from last session.

#### Tips for this Session

1. Be sensitive to participants' concerns in the next sessions on side effects. Be confident that continuing to take medicine is essential for mental health, and that side effects can be recognized and managed.
2. One of the tenets of recovery is for each participant to become an informed partner in his or her own treatment—one who can weigh the pros and cons of treatments. This session will help participants learn to recognize and manage medication side effects should they occur.
3. To be effective in this session, be willing to confront fear—yours and theirs.

#### General Tips

Make a conscious effort to acknowledge all relevant input from participants—both verbal and non-verbal. Use words, such as *“Great observation”* or *“Very useful”* and thank participants for contributions such as reading aloud, passing out handouts, assisting other participants, sharing their thoughts and feelings, and attending the session. Use non-verbal gestures including making eye contact, smiling, and nodding your head to make sure that participants know that you hear their opinions and thoughts.

## Suggestion for Topic Introduction and Relevance to Participants

*“Have you ever had anyone tell you, ‘I have some good news and some bad news—which do you want to hear first?’”*

(Wait to hear their accounts of this. Reinforce responses.)

*“We’ve been talking together about medications. You’ve heard the good news that there are some good choices of medicines that give relief from symptoms. Good news: They can benefit you. But then there’s the bad news: They can annoy and bother you sometimes with unwanted side effects. Rarely, because medicines wouldn’t be allowed to be used if they weren’t considered to be generally safe, some more serious unwanted effects can happen. So, there’s good news and bad news. What do you think about that?”*

(Encourage discussion. When closure is needed, summarize.)

*“Of course it’s reasonable to have concerns and to be cautious, but we want to be informed. Today, we’re going to learn what to watch for and what to do if unwanted side effects do happen. As informed partners in treatment, you’re going to be able to weigh the pros and the cons—the benefits and the disadvantages—and make decisions about your wellness.”*

*“Today we will talk about medicine’s unwanted side effects.”*

*“Let’s review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”*

#### Topic Assessment Answer Key

1. B    2. B    3. A    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use



## Review of Session 6: How Medicine Can Work Best for You



### Main Learning Points of Session 6

What were the main learning points of Session 6? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Take medicine exactly as prescribed to keep the right amount in your body so that b\_\_\_\_\_n chemicals stay balanced.
2. The right dosage of medicine can help avoid u\_\_\_\_\_d side effects.
3. Alert: Over-the-counter or h\_\_\_\_\_l medicines can interact with medicine for mental illness.
4. Carrying a list of your current m\_\_\_\_\_s and dosages in your wallet with your ID is a good idea.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. Side effects are a part of taking medicine, so there's nothing I can do about them.**

A. True B. False

**2. The way my body reacts to medicine can be affected by:**

- A. My hair color.  
B. Caffeine and nicotine.  
C. Where I sleep.  
D. My prescriber.

**3. There are lab tests to screen for some side effects that I might not be aware of.**

A. True B. False

**4. If I have a side effect, I should stop taking the medicine.**

A. True B. False

**5. I am confident I know how to recognize and manage side effects.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly	Disagree	Neither Agree	Agree	Strongly	Unsure
Disagree		Nor Disagree		Agree	

## Topic Assessment



### 6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

### 7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

### 8. What I liked about this session: \_\_\_\_\_

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### 9. How this session could have been better for me: \_\_\_\_\_

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## Knowing About Medicine's Unwanted Effects

### Objectives for this Session

1. Understand what is reasonable to expect about side effects with your medicine.
2. Identify 3 or more things that affect the way a person reacts to a medicine.
3. Develop a plan to cope with side effects.

Every medicine, even aspirin, may have side effects. We decide with our prescriber's advice to take certain medicines because we want that medicine to help us feel better. We also need to know about the medicine's possible unwanted side effects.

Many side effects can be annoying but are not necessarily serious. There may be ways you can work with your prescriber to manage these side effects so they either clear up or don't bother you too much.

Some side effects can be more serious. Most of these are rare, but your treatment team can help you recognize the more serious side effects that are possible with your medicine. It's important to get medical help right away if any of these serious side effects happen.

Sometimes it may seem like the problems, or side effects, outweigh the benefits of the medication. It's very important to discuss this with your prescriber. Together, your prescriber and you can work to make a change. This might mean changing the dose, adding a new medicine, making some healthy lifestyle changes, or changing to a different medicine.

#### Main Learning Point #1

**All medicines can have side effects.**

Sometimes people think they should stop their medicine if they get a side effect. Most of the time, stopping the medication is not the best solution. Stopping a medicine can sometimes cause other unwanted effects. Individuals who think they are having a medication side effect should talk to their prescriber as soon as possible.

## Is Your Medicine Likely to Cause Side Effects?

People often wonder if they'll have side effects from their medicine. Some people may have only a few side effects from their medicine. Some people may have a side effect that goes away over time, or they learn how to manage it so it doesn't bother them. Others may not notice any side effects, even if they are taking the same medicine in the same dosage. That's because medicines affect people in different ways.

The way you react to your medicine depends on many things. It may be affected by your age, weight, gender (male or female), ethnic background, or the way your body breaks the medicine down. Also, the amount of medicine you are taking (dosage) and any other medicines or drugs (including tobacco and caffeine) you're taking can affect the way you react. Having side effects doesn't mean you are taking too much medicine. There are many possible reasons.

### Main Learning Point #2

**Many things can affect the way you react to medicine.**

There are some possible side effects that you may not notice. Your prescriber may be able to take certain measurements (such as your weight and the size of your waist) or order lab tests (such as blood tests, an EKG, etc.) to screen for these. Some of these side effects include changes in blood sugar, blood platelets, cholesterol level, and the way your liver, kidney, and thyroid are working.

If you ever think you may be having a side effect from your medicine, tell your prescriber. It can also help to talk with a nurse or pharmacist on your treatment team. In some cases, a change in dosage can reduce side effects. Sometimes your prescriber can give you an extra medicine to reduce certain side effects. Sometimes he or she will advise you to change your medicine. But trying to make any of these changes on your own could cause you to get worse. You are a partner with your prescriber in your treatment. You can use his or her medical training and skills to find the treatment that's right for you.

### Main Learning Point #3

**Staying on your medicine and working with your treatment team is the best way to solve problems with your medicine.**

## The Five Steps to Coping with Side Effects

**1. Contact the Treatment Team:** I will talk with my prescriber, nurse, or a member of my treatment team I can reach quickly and easily. To solve the problem, I will probably need to talk to my prescriber. However, I may need to talk to someone else on my treatment team first. It's best to be prepared and keep a list of treatment team members' names and contact numbers.

**2. Describe the Problem:** I will tell my team member about the trouble I'm having and how much it bothers me.

**A. What Bothers Me:** I will explain the problem I'm having.

**B. How Much It Bothers Me:** I will explain whether this is a problem that bothers me just a little or one that bothers me so much that I don't want to keep taking the medicine.

*Example (1):* "This problem is annoying, but I'll put up with it if the medicine does a good job of controlling my symptoms."

*Example (2):* "This problem really bothers me a lot. I'm not sure I want to keep taking the medicine if we can't fix this problem."

**3. Ask Questions:** I will find out what I need to know to understand this problem better.

**A. Side Effects?** Is this problem a medication side effect or is it caused by something else?

**B. Serious?** Is this a serious problem, or is it just bothersome or annoying?

**C. Temporary?** Will this problem go away with time, or is it likely to keep happening if nothing is done about it?

## The Five Steps to Coping with Side Effects (continued)

- 4. Ask for Solutions:** I will find out what can be done to fix this problem. Depending on what my prescriber thinks might be best, I can decide if I might be able to:
- A. Cope.** Is there something I can do to deal with the problem?
  - B. Decrease.** Would it help to lower the dosage of medicine without making my symptoms worse?
  - C. Add.** Is there another medicine that could be added that will keep the problem from happening?
  - D. Switch.** Is there a different medicine I could take instead, that is less likely to cause this problem?
- 5. Come to an Agreement:** I will work with my treatment team to agree about what can be done, and keep my part of the agreement.

### Main Learning Point #4

Using the Five Steps to Coping with Side Effects can help fix problems you may have with your medicine.

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ **3. ASK.** I will talk to \_\_\_\_\_ about side effects from my medicine and hear what he or she has to say about it.
- ☐ **4. OTHER:** \_\_\_\_\_

Take an “Extra Step Forward” (optional)

- ☐ **5. WRITE.** I'm going to write down my memories, thoughts, feelings, and/or plans about medicine side effects.

# 8

## Watching for Medicine Side Effects Facilitator Notes

### Main Learning Points from last session: Side Effects

1. All medicines can have side effects.
2. Many things can affect the way you react to medicine.
3. Staying on your medicine and working with your treatment team is the best way to solve problems with your medicine.
4. Using the Five Steps to Coping with Side Effects can help fix problems you may have with your medicine.

### Review Personal Practice Options from last session.



#### Note

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

#### Tips for this Session

1. There is no pre- or post-Knowledge Assessment for this session, but have the participants complete the confidence scale at the beginning of the session, and the confidence scale and evaluation at the end of the session.
2. If possible, invite a prescriber or pharmacist to co-facilitate or lead this session. The benefits of this are:
  - a. The depth of expertise in your guest facilitator's responses to any questions and discussion.
  - b. The opportunity for a nice change of pace for participants in the group. However, if no speaker can be arranged, you have all the information you need in the class materials to lead a successful session.
3. Watch the time. You have some extra time because there is no pre- and post-Knowledge Assessment, but you'll want to pace the session so all information is covered and discussed. If you have a guest facilitator, discuss timing as you advance plan for the session together. Depending on your speaker, you may want to consider dividing this information into two sessions.

#### General Tip

**Trash Can Quality Indicator.** Check the “quality indicators” for your program to see how it's received. Some obvious examples are pre- to post-session Topic Assessment score changes, number of referrals, participant feedback, etc. Don't forget the trash can—it's an excellent quality indicator. If participant handouts are thrown away as participants leave the room, it's an indication they weren't engaged. It should also tell you something if diplomas and/or reinforcers are also thrown away. Watch for signs of disengagement and modify your sessions accordingly. Accepting and using feedback helps you grow professionally.

## Suggestion for Topic Introduction and Relevance to Participants

*“Has anybody ever heard the old saying,  
‘What you don't know won't hurt you?’”*

(Acknowledge and positively reinforce responses.)

*“We've been learning about medication side effects. Does that old saying fit side effects—what we don't know won't hurt us?”*

*“No, it doesn't apply to this subject. It's helpful to be able to recognize and know about medication side effects—you don't want them to be a problem for you.”*

*“Today we'll talk about bothersome side effects of medications for mental illness. We'll also learn how to recognize and monitor them for ourselves.”*

*“Do you think that learning more about side effects and how to manage them would be helpful to you?”*

#### Topic Assessment

There is no pre-/post-Topic Assessment for this session, but still answer questions 1-2 before the session and 1-5 after the session.

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 7: Side Effects



### Main Learning Points of Session 7

What were the main learning points of Session 7? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. All m\_\_\_\_\_s can have side effects.
2. Many things can affect the way you r\_\_\_\_\_t to medicine.
3. Staying on your medicine and working with your t\_\_\_\_\_t team is the best way to solve problems with your medicine.
4. Using the Five Steps to Coping with Side Effects can help f\_\_\_\_x problems you may have with your medicine.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



**This session will be spent completing a self-evaluation of medicine side effects. There is no pre- or post-Topic Assessment.**

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### 1. I am confident I know how to monitor my medicine for side effects.

☐ Strongly Disagree    ☐ Disagree    ☐ Neither Agree Nor Disagree    ☐ Agree    ☐ Strongly Agree    ☐ Unsure

### 2. This information is important for me to know.

☐ Strongly Disagree    ☐ Disagree    ☐ Neither Agree Nor Disagree    ☐ Agree    ☐ Strongly Agree

**At the end of the session, answer these questions before turning in this paper:**

### 3. This session helped me.

☐ Strongly Disagree    ☐ Disagree    ☐ Neither Agree Nor Disagree    ☐ Agree    ☐ Strongly Agree

4. What I liked about this session: \_\_\_\_\_  
\_\_\_\_\_

5. How this session could have been better for me: \_\_\_\_\_  
\_\_\_\_\_

## Watching for Medicine Side Effects

### Objectives for this Session

1. Recognize 3 side effects that may happen with medicines for mental illness.
2. Identify 1 thing you should do if a side effect happens.
3. Explain 1 reason to keep watching for side effects.

This session provides education about side effects that may happen when a person takes medicine for psychiatric disorders. Many side effects are mild. Many common ones get better or go away after the first few weeks of treatment. Other side effects may bother or annoy you more. You may not have any side effects from your medicine. However, if they do happen, you want to be able to recognize that you are having a medication side effect and to know how to deal with it.

You know it's important to work with your prescriber to deal with any medication side effects instead of stopping your medicine or making medicine changes on your own.

Sometimes, people may think they're having a side effect (such as hair loss) that is really caused by something else (such as the chemicals in a recent hair treatment or the normal aging process). It's important to talk with your prescriber about any problem you're having. That way, you can figure out the cause together and decide what to do about it.

In this session, you're also learning how to watch for medication side effects. If you're having a side effect that's described in the list below, put a checkmark in the box. Then you can work with your prescriber to deal with each side effect you checked. **You may want to save this checklist to use again as you watch for side effects with your medicine.**

### Important, please note:

This list talks about some side effects. It does not talk about all possible side effects, and it does not include more serious medication side effects. The more serious side effects will be discussed in the next session.

## Watching for Medicine Side Effects

(continued)

### 1. Skin and hair side effects

- ☐ **A. Skin rash:** Skin rash can happen while taking any medicine. It may be caused by an allergy to the medicine. If you get a skin rash, call your prescriber or nurse right away. Some rashes are just annoying and go away on their own. But with certain medicines, some rashes may be more serious. Your prescriber may want to change your medicine.
- ☐ **B. Increased sensitivity to the sun (sunburn):** Some medicines can make you more sensitive to heat and to the sun. Ask your prescriber or nurse if this is a side effect of your medicine. If so, you will want to stay in the shade when you go outdoors. You should use clothing or a sunscreen to protect your skin, also, even if you plan to stay in the shade. (This is good advice for all of us!)
- ☐ **C. Hair loss:** This is not a common side effect. It can happen for other reasons besides taking medicine. Talk to your prescriber or nurse if you start losing hair. He or she may want you to use a vitamin supplement or may change your medicine.

### 2. Mouth Side Effects

- ☐ **A. Dry mouth:** When a person starts a new medicine, his or her mouth may get dry. This side effect may go away or get better as treatment continues. For relief, sucking on sugar-free, hard, sour candy may help. Chewing sugarless gum, eating ice chips or sipping water (but not too much) may also help. Brushing your teeth daily may help. If dry mouth does not improve or if it really bothers you, talk to your prescriber or nurse. Your prescriber may want to adjust your treatment.

You do want to ensure you don't drink too much. Some people drink too many fluids because their brains don't tell them when to stop. This can be serious because it can change the levels of important chemicals (called electrolytes) in the body. Electrolytes help the body organs work properly. When electrolytes are out of balance, a person may feel faint or become very ill.

Drinking too much water or other liquids is not always a side effect of a medication. Because this is a serious problem, whether it's a side effect or not, it's important to talk to your prescriber if you think you drink too much.

## Watching for Medicine Side Effects (continued)

- ☐ **B. Drooling:** A person may start having too much saliva (spit) because the medicine is affecting the level of moisture in the body. Saliva may dribble out of the sides of the mouth. Your prescriber may correct this with another medication or by giving you a few tips about how to cope with it. Sometimes this side effect goes away on its own, depending on the medicine.

### 3. Muscle/Nervous System Side Effects

- ☐ **A. Being forced to look upward:** A person's eyes may roll upward in the head and the person isn't able to control it. This is called "oculogyric crisis." This can be frightening and uncomfortable. If it happens to you, call your prescriber or nurse right away for help. This side effect goes away quickly when another medicine is given. Adding another medicine may keep this side effect from happening again.
- ☐ **B. Muscle spasms, neck spasms:** Rarely, muscles may twist and spasm. This is uncomfortable and needs attention right away. If this happens to you, call your prescriber or nurse. This side effect responds when another medicine is given. Adding another medicine may prevent this side effect from happening again.
- ☐ **C. Muscle stiffness, tremor (shaking), or feeling slowed down:** This side effect is also called "medication-induced parkinsonism." People who have this side effect may have tightness in their muscles. They may appear to move slowly or be slowed down, or have tremors (shaking) in their hands. They may walk with very short steps and may not swing their arms much when walking. If you notice any of these side effects, tell your prescriber or nurse. Your prescriber may suggest a change in the medicine dosage or add another medicine to manage these side effects. Don't make any changes to your medicine on your own. Instead, partner with your prescriber to make changes.
- ☐ **D. Tremors (trembling, shaking):** If you start having tremors (for example, if your hands tremble or shake), let your prescriber or nurse know right away. Tremors are a bothersome side effect, but they aren't serious. They usually happen when a person starts treatment or increases their dosage.

## Watching for Medicine Side Effects (continued)

### 4. Gastrointestinal Side Effects

- ☐ **A. Constipation:** Some people may have fewer bowel movements or have hard stools. If this becomes uncomfortable for you, tell your prescriber or nurse. If you become constipated, your prescriber, nurse or pharmacist can recommend an over-the-counter laxative. Constipation can often be prevented by eating foods high in fiber (like fruit and vegetables).

The following tips can help prevent or lessen constipation:

- Drink 6-8 glasses of water or other beverage daily. Remember to choose water or other sugar-free drinks over regular pop or juice.
- Eat more high-fiber foods, such as bran cereals, fruits, and vegetables.
- Avoid constipating foods (such as rice or bananas).
- Get more exercise.

- ☐ **B. Trouble urinating:** This could include having trouble starting or completing urination. If you have this side effect, you may have the urge to urinate but may not be able to empty your bladder completely. You may be able to pass only small amounts of urine at a time, so you will have the urge to go to the bathroom more often than usual. If you have trouble urinating, call your prescriber or nurse as soon as possible.

### 5. Sexual Function Side Effects:

Some people may have less sexual desire and fewer orgasms. Some men may have trouble with erections or ejaculation. Some women may miss menstrual periods or leak milk from the breasts. While this may seem like a very personal topic, if you think you may be having any of these side effects, it's very important to talk about it with your prescriber. Your prescriber has been trained to know how to discuss and manage these side effects. He or she will work with you, possibly changing the dosage of your medicine or putting you on a different medication. You may need to have a laboratory test that measures a hormone in the body called prolactin. Partner with your prescriber to find a solution.



## Watching for Medicine Side Effects (continued)

This checklist can help you report any sexual side effects you might be having.

- ☐ **A. Less sexual desire** (men and women)
- ☐ **B. Trouble having orgasm** (men and women)
- ☐ **C. Trouble with erections or ejaculating** (men)
- ☐ **D. Developing breast tissue that is not wanted** (men)
- ☐ **E. Leaking milk from breasts** (usually women, but sometimes men)
- ☐ **F. Missed menstrual periods** (women)

### 6. General

- ☐ **A. Restlessness:** You may feel like you have to keep moving and find it hard to sit still. You may have a very strong urge to move different parts of your body. This uncomfortable side effect is sometimes called “akathisia.” Akathisia may be managed with other medicines or by lowering the medication dose.

If you get a lot of energy soon after starting a new medicine, or you are talking and moving faster, you may have a side effect called “activation.” Tell your prescriber about this right away because it could mean a change in your symptoms that needs to be managed. Make sure your prescriber knows if this side effect is bothering you. Sometimes it may be hard to tell whether someone is having a side effect from a medication or is having a symptom (agitation) from the illness. It’s important to work with your prescriber to figure out what the problem is and how to deal with it.

- ☐ **B. Feeling slowed down:** Some people describe this side effect as “feeling like a zombie.” If this side effect happens to you, tell your prescriber or nurse. They will work with you to find out if this feeling is being caused by the illness or if it’s a side effect of your medicine. If it’s a side effect, it may go away over time. Your prescriber may suggest a change in your dosage or switch you to a different medicine. Once again, this is an opportunity to partner with your prescriber to find solutions.

## Watching for Medicine Side Effects (continued)

- ☐ **C. Dizziness:** If you are lying on your bed or the couch and sit up or stand up too quickly, you may get very dizzy. To prevent dizziness, get up slowly. If you are lying on your bed, put your feet over the edge of the bed, then sit up slowly. Wait a minute before standing up. This side effect usually gets better the longer you stay on your treatment. Making sure you drink enough fluids also helps.
- ☐ **D. Drowsiness:** Some medicines may make you drowsy. It’s a good idea to see how a new medicine affects you before you participate in any activity that requires you to be alert. Another good idea is to start your medicine on a day that you are going to be at home, just to see how you react to it. This side effect is usually temporary, so you are likely to be less drowsy as you stay on your treatment.
- ☐ **E. Blurry vision:** If your vision gets blurry, contact your prescriber or nurse right away. He or she may want to change your dosage or give you another medicine to correct the problem. If this happens soon after you start taking a new medicine, it may be a temporary side effect. Until this side effect clears up, it might be helpful to buy a pair of reading glasses. You can get these without a prescription as most pharmacies sell reading glasses. If you haven’t had an eye exam in the past year, ask a family member or someone on your treatment team to help you get one scheduled.
- ☐ **F. Increased appetite and weight gain:** Some people may be hungrier during treatment. Some medicines can cause an increase in appetite. If you eat more, or drink beverages with sugar, you will probably gain weight. However, you can make some adjustments in your habits to get the best results from your medicine and avoid gaining weight. If you are concerned about your weight, ask your nurse to recommend a balanced, low-calorie eating plan that will give you healthy nutrition and keep you from gaining weight.

Regular physical exercise can also help you prevent weight gain. Walking quickly for 30 minutes, three times a week, may be enough to keep your weight stable—and will help you feel better too! You don’t have to get the 30 minutes all at once; you can break it down into three 10-minute walks a day. It is easiest to **prevent** weight gain, but it is also possible to lose weight. Talk to your prescriber or nurse before starting an exercise program.

## Watching for Medicine Side Effects (continued)

### The following tips can help prevent weight gain:

- Choose water or sugar free beverages instead of regular pop or juice.
- Stay away from high-calorie fatty foods, such as cakes and potato chips. Instead, snack on fruit or vegetables.
- Watch less TV and add more exercise to your day (such as walking or gardening).

Check with your treatment team. They may know of healthy living or activity groups that you could join.

**If you think you may be having a medication side effect**, even if it is not talked about in this workbook, call your prescriber as soon as possible and tell him or her about it.

## Review & Moving Forward



There is not a list of Main Learning Points for this lesson. This lesson introduced a lot of information that you might want to review several times.

### Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below (Don't choose #3 or #5 if you chose it last time.):

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ **3. EXPLORE.** I will talk to \_\_\_\_\_ about side effects from my medicine and hear what he or she has to say about it.
- ☐ **4. OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- ☐ **5. WRITE.** I am going to write down my memories, thoughts, feelings, and/or plans about medicine side effects.

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# 9

## Serious Side Effects Facilitator Notes

### Main Learning Points from last session: *Watching for Medicine Side Effects*

There were no Main Learning Points given during the last session. Session 8 was a self-evaluation that included a tool clients can use to watch for side effects.

### Review Personal Practice Options from last session.



#### Note

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

#### Tips for this Session

Well-chosen portions of media presentations that show someone having the side effects being discussed can make this a powerful session. Several places to locate such media are a nearby medical school library, the Nursing Education Department, your pharmacy, or a library. NAMI also has presentations that you can use.

#### Potential Problem for this Session

A participant states that he or she is so alarmed by learning all the difficult possible side effects that he or she thinks it would be best if all medication was discontinued.

#### Possible Responses

1. Listen to all concerns.
2. Validate concerns and encourage that the best solution is to be well informed. Offer to be available to accompany the participant to set up an appointment or speak with his or her prescriber as soon as possible. Relay that this session covered side effects of all medications for mental illness, and that a positive next step would be to discuss the participant's specific medications with the prescriber before any decisions are made about changes.
3. Be available if the participant wants further assistance.

## Suggestion for Topic Introduction and Relevance to Participants

*"Does the word 'serious' get your attention?"*  
(Wait for and acknowledge responses.)

*"When we get on a four- or six-lane highway to drive someplace during rush hour, and cars are merging into traffic and some cars are driving maybe up to 70 miles per hour, do you think we are putting ourselves at risk? Are those situations serious or challenging?"*

(Encourage responses and acknowledge it's a challenging situation.)

*"So if it's challenging, why do so many people do it every morning and every evening?"*

(Encourage participation. Call on a quiet person by name. Positively reinforce all responses. Then summarize.)

*"Well, I do it because I need to get to work. And I'm a good driver, a defensive driver. And I think it's an acceptable degree of risk to drive on the highway—not too challenging for me. I believe I can manage it okay."*

*"Today we will talk about serious or challenging side effects of medications."*

*"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."*

#### Topic Assessment Answer Key

1. C    2. D    3. B    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 8: Monitoring Medication Side Effects



There were no Main Learning Points given during the last session. Session 8 was a self-evaluation that included a tool to help you watch for medicine side effects.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_

\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?

\_\_\_\_\_

\_\_\_\_\_

If you still plan to complete your practice, when will you do it?

\_\_\_\_\_

\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

### 1. Dystonia is recognized by:

- A. Low red blood cell count.
- B. Low white blood cell count.
- C. Muscle spasm that feels like a charley horse.
- D. Chewing, sucking, lip-smacking tongue and mouth motions that are done without realizing it.

### 2. A way to recognize tardive dyskinesia is by:

- A. Low red blood cell count.
- B. Low white blood cell count.
- C. Muscle spasm that feels like a charley horse.
- D. Chewing, sucking, lip-smacking tongue and mouth motions that are done without realizing it.

### 3. Agranulocytosis means “low red blood cell count.”

A. True    B. False

### 4. Anyone who's having a serious side effect will know it.

A. True    B. False

## Topic Assessment



### 5. I am confident I can recognize serious side effects.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

### 6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

### 7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

### 8. What I liked about this session: \_\_\_\_\_

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### 9. How this session could have been better for me: \_\_\_\_\_

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## Serious Side Effects

### Objectives for this Session

1. Recognize 2 serious side effects of medicines for mental illness.
2. Identify 1 way to minimize risk of having a serious side effect.

The side effects in this section can be challenging. They happen at different rates with different medicines and in different people. These side effects are rare, but it's important to know about them so you'll know what to do if you ever have one.

It's also important that you help your family members, friends, and coworkers recognize any serious side effect you might have, so they know how to help you deal with it.

#### Main Learning Point #1

**While serious side effects are rare, it is important to take action if they happen.**

Reviewing the list on the next page can help you remember if you've ever had any of these side effects in the past. Your prescriber and other members of your treatment team need to know, so they can flag it in your medical record.

Keep in mind that your medicine will not cause all of the side effects listed in this section. Check with your prescriber, pharmacist, or nurse to find out which side effects may happen with the medicine you are taking. You can find out about those side effects in the information sheets you get from the pharmacy when you pick up your medicine. You may also get these sheets from your prescriber or nurse.

**Serious Side Effects**

(continued)

**1. Low White Blood Cell Count (Agranulocytosis)**

Agranulocytosis is a rare but serious side effect with certain medicines. Agranulocytosis means “low white blood cell count.” White blood cells help fight infection. Without enough white blood cells, a person’s body may not be able to fight infection. This side effect can be serious, so you may need regular blood tests to make sure your white blood cell count is what it should be. No matter what medicine you are taking, you should always report high fevers and painful sore throats to your prescriber as soon as possible. High fevers and painful sore throats could mean you have an infection.

**2. Uncontrollable Muscle Spasms (Dystonia)**

Dystonia, also called a “dystonic reaction,” feels like a charley horse or writer’s cramp. It may start with a neck spasm that leads to a stiff neck and tongue. If the eye muscles are involved, the eyes may roll up and back. This reaction can be stopped quickly with another medicine. If this side effect happens, call your prescriber **right away** or go to the emergency room. You may need another medicine to prevent this reaction from happening again.

**3. Overheating (Hyperthermia)**

Some medicines can cause a person to get too hot, especially in warm weather or during exercise. Drinking plenty of water (about 6-8 glasses each day) can help you avoid getting too hot. Stay in the shade if possible. When you exercise, take lots of breaks. Do outside activities in the early morning or early evening when it’s cooler. Try to wear clothing that keeps you cool (for example, a hat and light-colored, lightweight clothing). Becoming too hot is a serious side effect, so be careful. If you start to get hot, dizzy, and weak, go inside a building that has air conditioning or cool yourself by taking a cold shower or bath.

**4. Neuroleptic Malignant Syndrome**

This side effect is rare, but very serious. Muscles get very stiff over a few days, and you may become very confused or start thinking differently. You get a high fever. If you start to experience these symptoms, get medical help right away. Go to the emergency room if you can’t reach your prescriber or nurse.

**5. Rash**

A rash may mean you’re having a serious side effect from your medicine, or it may just be annoying. Report any rash to your prescriber or go to the emergency room, and they can decide what treatment is needed.

**Serious Side Effects**

(continued)

**6. Seizures**

Some medicines make people more likely to have seizures. This is especially true for people who already have seizure problems and for those who are taking certain medicines. If you have a seizure, get medical help **right away**.

**7. Muscle Movements You Can’t Control (Tardive Dyskinesia)**

This side effect can happen anytime after starting medicines that change the level of a chemical called dopamine in your body. Tardive dyskinesia usually happens after months or years of taking the medicine. A person who starts to have tardive dyskinesia might notice parts of their body moving on their own. This is called involuntary movement, meaning you are not trying to make the body part move. This side effect might cause involuntary movements of the tongue and mouth, such as chewing and sucking motions, lip smacking, and puckering of the cheeks. Sometimes the arms and legs can be affected. If you have any of these side effects, tell your prescriber. Quick and early action can help keep the movements from getting worse.

**8. Confusion, Fever, Vomiting, Diarrhea**

If you have diarrhea, vomiting, fever, slurred speech, mental confusion, unsteady walking, fainting, and rapid heartbeat, you may be having a serious medication side effect. Tell your prescriber as soon as possible.

**Laboratory Tests**

You may not notice some side effects right away, so your prescriber might order lab work to make sure your body is reacting well to the medicine.

**REMEMBER:** If you have a side effect, DO NOT STOP taking your medicine on your own. Contact your prescriber. Many side effects get better or go away with time, and most side effects can be managed.

## Review & Moving Forward



The *main learning point* of this session is:

1. \_\_\_\_\_

### Move Forward—Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me it.
- ☐ **3. PLAN AHEAD.** I will talk to \_\_\_\_\_ about possible serious side effects that I might have and what to do to help myself if it happens.
- ☐ **4. OTHER:** \_\_\_\_\_

Take an “Extra Step Forward” (optional)

- ☐ **5. WRITE.** When I talk to my prescriber, I'll write down the serious side effects of my medicine and bring it to the next session.

# 10

## Drug Interactions Facilitator Notes

### Main Learning Point from last session:

#### *Serious Side Effects*

1. While serious side effects are rare, it is important to take action if they happen.

### Review Personal Practice Options from last session.

#### Tips for this Session

1. This would be a good session for a pharmacist to be present as co-facilitator.
2. If you are unable to arrange for a pharmacist to co-facilitate, break this session into four assignments:
  - Two prescription medicines interacting.
  - Over-the-counter drugs interacting with a medicine for mental illness.
  - The effects of caffeine, alcohol and street drugs on medicine
  - Pregnancy and medicines for psychiatric disorder (for teams of two to present). Have participants read the materials, clarify any unclear information, summarize in their own words, and give an example from personal experience if possible. Be encouraging. Give small rewards for a job well done.

#### Note

For more information on drug interactions, you may want to refer to *Team Solutions, Workbook 7: Making Choices: Substances and You*.

**Suggestion for Topic Introduction  
and Relevance to Participants**

*"There is a science experiment that uses raisins and a clear bubbly drink soft drink. If you drop raisins into the bottom of a glass of soda, the bubbles from the drink will attach to the raisins. After a while, they will rise to the top of the glass. This science project is sometimes called dancing raisins, and it shows how two things can interact with each other to cause a reaction."*

*"Sometimes, different things may cause interactions with medications. Today we're going to look at some of the things that could interact with medicines."*

*"Do you think this information is something that may be helpful to you?"*

*"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."*

**Topic Assessment Answer Key**

**1. B    2. A    3. A    4. A**

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

**Review of Session 9:  
Serious Side Effects****Main Learning Points of Session 9**

What were the main learning points of Session 9? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. While serious side effects are rare, it is important to take a \_\_\_\_\_n if they happen.

**Personal Practice Option Review:**

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

- ☐ **1. Yes.** How did it go? \_\_\_\_\_

- ☐ **2. No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

- ☐ **3. I didn't choose a personal practice option.**



## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

**Directions:**

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. Over-the-counter medicines are mild and can be taken without concern.**

A. True B. False

**2. An example of a drug interaction when using alcohol and medicine is:**

- A. Lethargy.
- B. Improved symptom control.
- C. Clearer thinking.
- D. Increased blood pressure.

**3. Women of child-bearing age should talk to their prescribers about risks associated with medicines for mental disabilities.**

A. True B. False

**4. When someone gets medicines from more than one prescriber, each one needs to know all the medicines, and dosages, that the person is taking.**

A. True B. False

**5. I am confident I understand drug interactions and how to avoid them.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

## Topic Assessment



**6. This information is important for me to know.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

**At the end of the session, answer these questions before turning in this paper:**

**7. This session helped me.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

**8. What I liked about this session:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. How this session could have been better for me:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Drug Interactions

### Objectives for this Session

1. Explain 2 ways to avoid serious drug interactions between prescription medicines.
2. Identify 1 way to avoid drug interactions between your medicine and over-the-counter medicines and herbal remedies.
3. Recognize 1 effect of alcohol or illegal drugs on medicines for mental illness.

One of the problems that can happen with medicine is when someone takes two or more drugs at the same time and has a bad reaction. There is usually no need to worry about this if you are taking the medicine the way your prescriber has told you to take them. But problems can happen when people start taking medicines their prescriber **didn't** tell them to take. If you are getting medicine from more than one prescriber (such as your psychiatrist **and** your family doctor), be sure to tell each one about all of the medicines you're taking.

Making a medicine card, like the one talked about in Session 6, can help you keep your medicine list up to date.



#### Main Learning Point #1

**Show each prescriber an up-to-date list of all your medicines and their dosages.**

## Drug Interactions (continued)

*Did you already know that prescription medicines can interact with each other?*

*If this was new to you, what will you do differently now that you know it?*

Over-the-counter medicine and herbs can be bought without a prescription and may interact with your prescribed medicine. They can affect the way your medicine works. This can happen even with mild over-the-counter medicines or herbs—those sold in the supermarket, such as decongestants, memory aids, “male performance” aids and diet aids. Be sure to talk to your prescriber, nurse, or pharmacist before taking any over-the-counter medicine or herbs along with your medicine.



#### Main Learning Point #2

**Check with your prescriber before taking any over-the-counter medicine or herbs.**

*Did you already know that over-the-counter medicine or herbs can interact with prescription medicines?*

*If this was new to you, what will you do differently now that you know it?*

A person taking medicine for mental illness also needs to know that caffeine can interact harmfully with their medicine. Caffeine can even trigger relapse. Caffeine is found in coffee, tea, cola drinks, chocolate, and many cold medicines (read the labels!). Choosing to avoid caffeine is a very good idea.



## Drug Interactions (continued)

### Drug Interactions with Alcohol and Illegal Drugs

Alcohol and illegal drugs are especially harmful when combined with medicines for psychiatric condition. They not only block the way the medicine works, but they can cause bad side effects, such as:

- Extreme drowsiness, no energy, and not alert (lethargy).
- Tremors (shaking), spasms, and involuntary muscle movements (moving of the body muscles when you are not trying to move them).
- Very low blood pressure, leading to dizziness and fainting.
- Symptoms that come back or get worse (because alcohol and illegal drugs can stop medicine from working).



#### Main Learning Point #3

**Avoid serious interactions with your medicine—avoid using alcohol or illegal drugs.**

*Did you already know that alcohol and illegal drugs can cause harmful interactions with your medicine?*

*If this was new to you, what will you do differently now that you know it?*

### About Pregnancy and Medicine

Some of the medicines used to treat mental illness can cause birth defects in a developing baby. It's important for sexually active women of childbearing age to talk about possible pregnancy risks with their prescriber.

#### Main Learning Point #4

**A woman of childbearing age who's taking medicine for a mental illness needs to talk about possible pregnancy risks with her prescriber.**

*Did you already know that medicines a pregnant women takes can affect her baby?*

*If this was new to you, what will you do differently now that you know it?*

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward—Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about it.
- ☐ 3. **WRITE.** I am going to write my personal story about avoiding or dealing with side effects.
- ☐ 4. **OTHER:** \_\_\_\_\_

### Take an “Extra Step Forward” (optional)

- ☐ 5. **PLAN AHEAD.** I will make a card for my wallet that lists all of my prescribed medicines and over-the-counter medicines, including herbs and vitamins. I'll include dosages for each. I'll be very careful to keep it up-to-date and to show it to each prescriber when I have an appointment.

# 11

## Test Your Knowledge About Medicines for Mental Illness Facilitator Notes

### Main Learning Points from last session: *Drug Interactions*

1. Show each prescriber an up-to-date list of all your medicines and their dosages.
2. Check with your prescriber before taking any over-the-counter medicines or herbs.
3. Avoid serious interactions with your medicine—avoid using alcohol or illegal drugs.
4. A woman of childbearing age who's taking medicine for mental illness needs to talk about possible pregnancy risks with her prescriber

### Review Personal Practice Options from last session.

#### Tips for this Session

1. This is the last session of this workbook. Extend your best effort to make this a special event. If possible, invite a former participant who has moved his or her life forward and is a role model of successful recovery to make a brief speech and award certificates of completion. You may want to have the participants arrange for refreshments. If you have a way to give each participant a small gift, you may want to do so.
2. Involve the participants who are completing the workbook in the process of how they want to celebrate the achievement. Would they like to discuss what they found helpful in these materials or what was most meaningful to them? Maybe they would like to each make a short speech when they accept certificates of completion.

3. For the content in this session, you may want to make the “Test Yourself” into a “Family Feud”-like competition between two teams. Since graduation deserves extra time, you may want to have a small “contest” (no teams), with small prizes and applause going to the person getting the most correct answers.

## Facilitator Notes

(continued)

### General Tip

If you are interested in an outcomes measurement for this workbook, you may want to consider using the Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998) or the COOP Chart for Primary Care Practices (Eugene C. Nelson, 1987).

The Short-Form-12 Health Survey (John E. Ware, Jr., 1994, revised 1998) is an abbreviated version of the Short-Form-36 Health Survey. This survey has 7 questions (using Likert scales from 1-5) regarding the person's views about their own health in the last four weeks. It addresses general health and how health affects the person's physical activities and daily activities. It also addresses emotional issues and feelings and whether either physical or emotional health has interfered with social activities. The Short-Form correlates extremely well with the longer, 36 health survey and offers a good way to gauge physical and emotional health. Cultural differences can create potential challenges in regards to the interpretation of questions and, ultimately, answers. A heightened

awareness by clinicians can increase the reliability of results.

The COOP scales (The Dartmouth/Northern New England Primary Care Cooperative Information Project) was developed to create a system to measure health status in physicians' offices. One of the basic tenets of the charts is that the functioning of the person as a whole is more important than that of separate organ systems. You may have seen some of the graphic charts (e.g., the “face” charts to measure feelings). Other graphic charts measure daily activity levels, social activities, physical fitness, change in health, overall health, social support, and quality of life. These charts are widely used in studies and are found to have good reliability and high validity. They are rated as useful by high numbers of office staff and clients.

The editors believe these scales fit the content of this workbook well. These and other health measures can be found in McDowell, (2006).

## Suggestion for Topic Introduction and Relevance to Participants

*“Have you ever been misled by wrong information that you believed? Raise your hands if you have.”*

*“Unfortunately, people can make unwise choices by following ‘old wives’ tales’ that seem to be common knowledge but are wrong. Just to give you one example [use your own or the following]:”*

*“I know of a young woman who was told she should put her baby's bottle under her pillow at night to have it easily available and at the right temperature for the middle-of-the-night feeding. The baby became very sick because the formula had grown bacteria. The baby got better, and that young mother learned from her doctor it was wrong information—an ‘old wives’ tale.’ This is an example that shows us that it is much better and safer to know the facts, not believe the myths.”*

*“Are there any myths about mental disorders? I see some heads nodding. There sure are! Today we'll talk about some truths and some myths about mental illnesses. We're going to do it an interesting way by taking a challenge to see if we can figure out what's truth and what's myth.”*

*“Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”*

### Topic Assessment Answer Key

1. A    2. A    3. B    4. B

T – topic introduction  
R – relevance to participant  
I – identify objectives  
M – materials for session  
M – motivate to use

## Review of Session 10: Drug Interactions



### Main Learning Points of Session 10

What were the main learning points of Session 10? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Show each prescriber an up-to-date list of all your medicines and their d\_\_\_\_s.
2. Check with your prescriber before taking any over-the-c\_\_\_\_\_r medicines or herbs.
3. Avoid serious interactions with your medicine—avoid using a\_\_\_\_\_l or illegal drugs.
4. A woman of childbearing age who's taking medicine for a mental disorder needs to talk about possible p\_\_\_\_\_y risks with her prescriber.

### Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? \_\_\_\_\_  
\_\_\_\_\_

☐ 2. **No.** What got in the way of completing your practice?  
\_\_\_\_\_  
\_\_\_\_\_

If you still plan to complete your practice, when will you do it?  
\_\_\_\_\_  
\_\_\_\_\_

☐ 3. **I didn't choose a personal practice option.**

## Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:  
+ \_\_\_\_ out of 4

### Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**1. Medicine can usually relieve or make symptoms better if a person is willing to keep trying different kinds of medicines until he or she finds the right one.**

A. True B. False

**2. For the best chance of getting better, I need to be a partner with my prescriber, reporting my symptoms and side effects.**

A. True B. False

**3. If I take my medicine as prescribed, there is no chance I will ever have a relapse.**

A. True B. False

**4. I can have psychotherapy (talk therapy) instead of taking medicine.**

A. True B. False

**5. I am confident I am able to recognize myths about mental illness that are not really true.**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

## Topic Assessment



6. This information is important for me to know.

- |                          |                          |                               |                          |                          |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>      | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly<br>Disagree     | Disagree                 | Neither Agree<br>Nor Disagree | Agree                    | Strongly<br>Agree        |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- |                          |                          |                               |                          |                          |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>      | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly<br>Disagree     | Disagree                 | Neither Agree<br>Nor Disagree | Agree                    | Strongly<br>Agree        |

8. What I liked about this session: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. How this session could have been better for me: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Test Your Knowledge About Medicines

Objectives for this Session

1. Identify 2 myths about mental illness.
2. Explain 2 or more important truths about mental illness.



**Instructions:**

Circle the best answer, either True or False. Be prepared to discuss your answer.

**1. If you were taking a medicine in the past, and it didn't help your symptoms, nothing else can be done.**

A. True   B. False

**2. People who stop their medicine often end up back in the hospital.**

A. True   B. False

**3. You shouldn't need to take medicine if you are taking vitamins or seeing a therapist for psychotherapy, such as "talk therapy."**

A. True   B. False

**4. Even if you take your medicine every day, you might still have symptoms.**

A. True   B. False

## Test Your Knowledge About Medicines (continued)

**Q1. If you were taking a medicine in the past, and it didn't help your symptoms, nothing else can be done.**

**1. Answer: False.** Even if one medicine has not worked for you, there is still hope. Many medicines are available, and research is being done all the time, offering more answers and hope. People respond differently to different medicines. Your prescriber may be able to suggest another medicine that may help you.



### Main Learning Point #1

Consider trying as many different medicines as it takes for you to feel your best.

**Q2. People who stop their medicine often end up back in the hospital.**

**2. Answer: True.** Unfortunately, this happens quite often. People who recover and even go back to work or school may think they've recovered completely, and they stop taking their medicine. Slowly, their symptoms return, but they don't notice their symptoms in time. They become very sick and must go back to the hospital. You're much less likely to relapse when you take your medicine every day as prescribed.

### Main Learning Point #2

It's best to keep taking your medicine to keep from getting sick again.

## Test Your Knowledge About Medicines (continued)

**Q3. You shouldn't need to take medicine if you are taking vitamins or seeing a therapist for psychotherapy, such as "talk therapy."**

**3. Answer: False.** Even if you're taking vitamins or seeing a therapist, you still need to take your medicine every day. Without your medicine, the brain chemicals may get out of balance. And your symptoms will probably come back within a few weeks.

### Main Learning Point #3

People who go to "talk therapy" still need to take their medicine as prescribed.

**Q4. Even if you take your medicine every day, you might still have symptoms.**

**4. Answer: True.** You may have some symptoms that just won't disappear (called "residual symptoms") even when you take your medicine the right way. Sometimes you may need to go to the hospital even though you've taken your medicine correctly. Although this is disappointing, know that your symptoms would have been worse if you hadn't taken your medicine. If this has happened to you, talk to your prescriber about whether you should consider using a different medicine. If you are having symptoms that don't go away, be sure to tell your prescriber about them. There may be other ways to manage these symptoms—ways you and your prescriber may not have talked about yet.

### Main Learning Point #4

Taking medicine will give you the best chance to stay in recovery.

## Test Your Knowledge About Medicines (continued)

### Finding the Medicine and Dosage That's Best for You

Many medicines used to treat mental illness are similar to each other. They work in similar ways. However, each person may react differently to medicines. One medicine may work better for your symptoms than another. One medicine may cause fewer side effects for you compared to other medicines you've tried in the past.

Keep working with your prescriber. Let him or her know if you're feeling better, or if you're having problems with your medicine. Together, you and your prescriber can make the best possible decisions for your treatment—so you can feel your best.

**Best wishes to you as you continue your recovery journey!**

## Review & Moving Forward



The *main learning points* of this session are:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Move Forward—Choose a Personal Practice Option

It's important to practice new knowledge and skills. Although this is the last session in this workbook, you may still want to practice this important subject. Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask \_\_\_\_\_ to read it and talk with me about hobbies.
- ☐ **3. DISCUSS.** I have decided to talk with my prescriber about my residual symptoms.
- ☐ **4. OTHER:** \_\_\_\_\_

Take an “Extra Step Forward” (optional)

- ☐ **5. WRITE.** I am going to write down how I plan to stay in recovery.

***Celebrate the completion of this workbook.***



Team Solutions

# Certificate of Achievement

is presented to

for completion of  
**Understanding Your Treatment**

Facilitator

Date

## References

Bellenir, K. (2005). *Mental Health Disorders Sourcebook* (3rd ed.). Detroit: Omnigraphics.

*Bipolar disorder guide.* (n.d.) Retrieved November 11, 2007, from [www.webmd.com/bipolar-disorder/guide/default.htm](http://www.webmd.com/bipolar-disorder/guide/default.htm)

Burgess, W. (2006). *The Bipolar Handbook: Real-Life Questions with Up-to-Date Answers*. New York: Penguin Group.

Hyde, A. (1982). *Living with Schizophrenia*. Chicago: Contemporary Books.

Long, P. (n.d.) *Internet Mental Health*. Retrieved 11/11/07, from <http://www.mentalhealth.com>.

McDowell, (2006). *Measuring health: A guide to rating scales and questionnaires*, 3rd Edition. Oxford, NY: Oxford University Press.

Miklowitz, D. (2002). *The Bipolar Disorder Survival Guide: What You and Your Family Need to Know*. New York: Guilford Press.

Miller, R & Mason, S. (2002). *Diagnosis Schizophrenia: A Comprehensive Resource for Patients, Families, and Helping Professionals*. New York: Columbia University Press.

Mondimore, F M. (1999). *Bipolar Disorder: A Guide for Patients and Families*. Baltimore: Johns Hopkins Press.

Noll, R. (2000). *The Encyclopedia of Schizophrenia and Other Psychotic Disorders* (2nd ed.). New York: Facts on File, Inc.

*Schizophrenia guide.* (n.d.) Retrieved November 11, 2007, from [www.webmd.com/schizophrenia/guide/default.htm](http://www.webmd.com/schizophrenia/guide/default.htm)

Torrey, F & Knable, M. (2002). *Surviving Manic Depression: A Manual on Bipolar Disorder for Patients, Families and Providers*. New York: Basic Books.

Torrey, F. (2001). *Surviving Schizophrenia: A Manual for Families, Consumers, and Providers* (4th ed.). New York: HarperCollins Publishers, Inc.

Walsh, M. (1985). *Schizophrenia: Straight Talk for Family and Friends*. New York: William Morrow & Co, Inc.

Waltz, M. (2002). *Adult Bipolar Disorders: Understanding Your Diagnosis and Getting Help*. Sebastopol, CA: O'Reilly & Associates.

Weinberger, D R. (1995) *Research on Schizophrenia and Schizoaffective Disorder, National Alliance for the Mentally Ill 15th Annual Convention*. Washington, D.C.

Weinberger, D R. (1986). *The Pathogenesis of Schizophrenia: A Neurodevelopmental Theory*. H.A. Nasrallah and D.R. Weinberger (Eds.), In *The Neurology of Schizophrenia*, (pp. 397 –406). Amsterdam: Elsevier.