Antipsychotic drugs

- Antipsychotic drugs (also called neuroleptics or major tranquilizers) are used primarily to treat schizophrenia (a biologic illness), but they are also effective in other psychotic states, including manic states with psychotic symptoms such as grandiosity, paranoia, and hallucinations, and delusions.
- Antipsychotic drugs are not curative and do not eliminate
 the chronic thought disorder, but they often decrease the
 intensity of hallucinations and delusions and permit the
 person with schizophrenia to function in a supportive
 environment.

History of antipsychotic drugs

- Antipsychotic drugs have been used in Western medicine for more than 50 years.
- Chlorpromazine (1952) and Reserpine were the first drugs found to be useful in schizophrenia.
- Tricyclic and MOA inhibitor antidepressant in 1957-58.
- Major novel antipsychotics are selective serotonin reuptake inhibitor and it has been introduced in 1980s.
- Little attention was paid to Cade's report in 1949 that Lithium could be used for excitement and mania: its effective use started in the 1960s and now it has a unique place in psychiatry.

Psychoses

• <u>Psychoses:</u> These are severe psychiatric illness with serious distortion of thought, behaviour, capacity to recognise reality and of perception (delusions and hallucinations). There is inexplicable misperception and misevaluation; the patient is unable to meet the ordinary demands of life.

Types:

- Acute and chronic organic brain syndromes (cognitive disorders)
- Functional disorders
 - Schizophrenia
 - Paranoid states
- Mood (affective) disorders
 - Mania
 - Depression

Psychoses

Acute and chronic organic brain syndromes

- Delirium and dementia.
- Cases: Exposure to toxic substances or pathological changes.
- Prominent features are confusion, disorientation, defective memory and disorganized behaviour.

Functional disorders

- Causes: No underlying cause can be defined.
- Memory and orientation are mostly retained but emotion,
 thought, reasoning and behaviour are seriously altered.

Psychoses - Schizophrenia and Paranoid states

- Schizophrenia is a particular type of psychosis (that is, a mental disorder caused by some inherent dysfunction of the brain). It is characterized by delusions, hallucinations (often in the form of voices), and thinking or speech disturbances. This mental disorder is a common affliction, occurring in about 1 percent of the population.
- Paranoid states with marked persecutory or other kinds of fixed delusions (false beliefs) and loss of insight into the abnormality.

Psychoses - Affective disorders

 Mania- elation or irritable mood, reduced sleep, hyperactivity, uncontrollable thought and speech, may be associated with reckless or violent behaviour,

or

- Depression

 sadness, loss of interest and pleasure, worthlessness, guilt, physical and mental slowing, melancholia, self-destructive ideation.
- A common form of mood disorders is bipolar disorder with cyclically alternating manic and depressive phase. The relapsing mood disorder may be unipolar (mania or depression) with waxing and waning course.

Neuroses

- less serious, depending on the predominant feature
 - Anxiety (unpleasant emotional state with worry, tension)
 - Phobic states (fear of unknown)
 - Obsessive-compulsive disorder (limited abnormality of through or behaviour)
 - Reactive depression (due to physical illness, loss, blow to self-esteem or bereavement)
 - Post-traumatic stress disorder (varied symptoms following distressing experiences like war, riots, earthquakes, etc..)
 - Hysterical (Dramatic symptoms resembling serious physical illness)