

Club News

Summer Garden Party

Saturday 11th June is our Annual Garden Party at Birdbrook Hall. Dress is informal. The Party starts at 12 noon and goes on until about 4.00pm. Please come and enjoy the food, drink, music and a chance to meet other patients and carers. Please complete the enclosed invitation slip.

Concert

The Concert is to be held at St Augustine's Church, Birdbrook on Saturday 1st October. The reception will be at Moyns Park, Birdbrook. Tickets are £15 each for members of the public, free to members and can be booked by contacting The Lithium Club office on 01440 785 727.

Competition

The Dingbats competition in the last newsletter was won by Arthur and Susie Ward. Do try this month's Wordsearch and you could win a prize!

Newsletters

In future newsletters will be issued four times a year instead of six times a year.

Taking medication is a sign of personal weakness, sickness and lack of control

"For me, it's all about control. I have always had trouble with authority figures and medication feels like just one more authority figure. Someone comes along and says, 'Here, just take this salt and you'll feel better and be like the rest of us.' I think it's garbage, and it makes me realise the person doesn't know me very well. I can handle things by myself just fine, thank you.

A 19 year old man shortly after his hospitalisation for mania

Many people feel that taking medication is a sign of personal weakness. It feels like admitting that you're sick, defective or mentally ill. Certainly taking medication daily can remind you of your troubles and make you resent the illness even more than you do already. But many people take this perspective further and claim that they can get along without medication just by exerting self-control. If you are in a hypomanic phase you're particularly likely to feel this way. Unfortunately, bipolar disorder cannot be controlled by sheer will power. Neither can other biologically based illnesses.

"I can't remember to take my medication"

This is a very real problem and one that physicians often underestimate. In fact, one factor that predisposes people with bipolar disorder to nonconcordance is having to remember a greater number of medication dosages. Sometimes people forget whether they have taken a morning dosage and then end up taking an extra dose in the evening, which can increase their chances of getting too much of a medication.

If you are using alcohol or street drugs regularly you're going to have particular problems remembering to take your medication.

If you are having trouble remembering to take your tablets ask your physician where you can be given the medication in its least complex dosing pattern. Some medication, including lithium, can be taken all in one dosage. Sometimes

the regime can be simplified to morning and evening dosages only. Don't be ashamed of forgetting – it's a more common problem than you think.

There are also ways to remind yourself. Some people use pill boxes with morning, afternoon and evening doses laid out at the beginning of the day. Some people have key chains with an attached container with room for a day's dosage. Other people use watch alarms or palm pilots to alert them when they need another dose. Others try to time their dosages around events that will 'cue' them, like meals or waking up/bedtime routines. Some people keep spare pills in their desk drawers at work in case they forget to bring them. Others acquaint their spouse with the medication routines and ask for reminders. If you are comfortable with your spouse taking this role it may be helpful to you in staying on schedule.

Notes for new patients

Lithium has been widely used for many mental health problems, but its strength lies in its role as a mood stabiliser treating mania. Its main purpose has been to prevent relapse in cases of manic depression (bipolar disorder), and in recurring depression (unipolar depression). It's also licensed for schizoaffective disorder, managing aggression and self-harm. It was found to help people with mania, almost by chance, when it was given, experimentally, to a group of people in a psychiatric hospital, in 1949. Later studies confirmed that it worked well as a mood stabiliser, and tended to reduce the number of manic and depressive episodes people were having, or even to suppress them altogether. Lithium is not prescribed for children.

One advantage that lithium has over other drugs is that it doesn't act as a sedative, even though it stabilises mood. On the whole, people cope very well with taking lithium in the long term. But users have complained that it makes them less able to express themselves and that it dampens down their imagination. It can also be dangerous under certain circumstances, and people need to be aware of this.

If lithium is recommended, ask for as much information as you feel you need about using it, and about any potential problems of the treatment. Lithium clinics are usually very good at providing guidelines and advice.

When someone is diagnosed with manic depression, one of the doctor's first considerations is likely to be "Is it appropriate to treat the condition with lithium? Is this treatment safe in this case?" Lithium is a dangerous drug, which can cause brain damage or have fatal consequences if the dose is too high. In particular, people who have a history of heart disease or kidney disease, and women in early pregnancy, are advised not to take lithium.

*Making sense of lithium
Mind (National Association for Mental Health)*

What dose of Lithium should I be on?

There can be no standard dose of lithium, because the amount of lithium in the blood depends on kidney function, which varies from person to person. Doses are adjusted to keep the blood level within a range of 0.4 – 1 millimole (mmol) of

lithium per litre of serum, which is considered to be the appropriate therapeutic range. (The millimole is a unit of measurement used by biochemists.)

For most people, the appropriate range to maximise benefits and minimise side effects should be 0.5 – 0.8 mmol lithium per litre of blood serum. Some doctors believe a higher level is acceptable, though adverse effects may increase. Serum levels over 1.5 mmol lithium per litre of blood serum are toxic and may be fatal.

Manufacturers recommend a startling daily dose of 0.4 – 1.5g lithium carbonate, or 1 – 3g lithium citrate for treating acute mania. This dose will then have to be adjusted according to the results of blood tests. For preventing relapse in mania or depression, they suggest a starting daily dose of 0.3 – 1.2g lithium carbonate or 1 – 3g lithium citrate. In practice, the starting dose used by specialists is commonly the equivalent of 0.4 – 0.8g lithium carbonate daily. If you have any questions about dosage instructions, check them with the pharmacist.

Because drugs are eliminated more slowly in elderly people, they are particularly susceptible to lithium toxicity. Lower doses are usually given, and the aim is for a lower serum level. Elderly patients usually have half the normal dose.

Some people take their lithium in divided doses, several times a day. Others take a modified-release formulation as a single dose, usually at night. All the tablets, except Camcolit 250mg, are marketed as modified-release formulations. One of the effects of taking lithium is to make people need the toilet more often, but this may happen less with the once-daily dose.

You may need to discuss with your doctor which type is best for you, depending on your symptoms, side effects and any other medicines you may be taking. It's important to see your doctor, regularly to discuss any side effects and possible changes in dose. Don't change your prescribed dosage without consultation. Always contact your doctor immediately if you think your lithium level may be too high.

Don't double up a dose of lithium if you forget a prescribed dose. If you have missed your regular time by three hours, or less, take your normal dose. If you have missed your normal dose by over three hours, skip the missed dose and resume your lithium medication at the next regularly scheduled time.

Comment by J A J Rook

The lower the dose that produces a therapeutic level for you is the best dose. A blood serum level of 0.6mmol or less is a particularly safe level. It gives you a wide margin below toxic levels of 1.0 and above.

We love to hear from patients, carers or other supporters of our charity on any topic relating to either the newsletter or matters concerning the work we do. So please do take part in our competition as well as writing to us on any topic that particularly interests you. We are always happy to publish articles sent into us when requested to do so by the author.

*Compiled by J A J Rook
21.04.05
Edited by Dr A D Broadhurst*

COMPETITION WORD SEARCH

Can you discover these dogs hidden in the grid?

R	O	U	G	S	S	T	E	P	P	I	H	W	A	D
I	J	N	E	S	A	B	R	I	A	R	D	E	R	A
E	V	I	Z	S	L	A	T	H	E	W	S	H	E	L
R	T	E	R	R	U	K	E	L	E	M	D	R	R	M
R	A	I	L	E	E	I	L	I	O	N	A	E	B	A
E	G	G	U	L	L	T	M	L	A	V	V	T	E	T
T	A	R	D	L	T	A	A	L	N	E	S	N	A	I
P	R	O	O	F	R	B	D	A	I	I	A	I	G	A
A	O	C	I	A	R	N	O	R	K	X	L	O	L	N
P	U	G	N	A	U	D	T	J	E	P	S	P	E	S
I	L	E	D	O	O	E	D	R	A	T	A	L	I	A
L	R	O	F	I	R	O	N	O	U	T	T	B	N	L
L	R	W	A	E	O	U	U	N	I	T	I	A	A	U
O	E	S	R	R	E	X	O	B	E	E	A	U	P	K
N	O	D	N	U	H	S	H	C	A	D	N	L	S	I

AKITA
ALSATIAN
BASENJI
BEAGLE
BOXER
BRIARD
COLLIE
CORGI

DACHSHUND
DALMATIAN
HOUND
LABRADOR
NEWFOUNDLAND
PAPILLON
PATTERDALE
POINTER

POODLE
PUG
RETRIEVER
SALUKI
TERRIER
VIZSLA
WEIMARANER
WHIPPET

Which dog is in the grid but not on the list?

Answer:

Please complete with your name and address and send to The Lithium Club
Competition, Birdbrook Hall, Birdbrook, Halstead, Essex CO9 4BJ

Name:

Address:

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