

Chapter Five

MEDICATION & THERAPY

Combining medication with therapy is important for the effective treatment of mental illness: (1) Medication focuses on managing biological symptoms; while (2) therapy offers long-term coping strategies and addresses underlying issues, resulting in faster relief and lower relapse rates.

“Medicine” originates from Latin words meaning “healing art” and “physician.” “Therapy” comes from Greek and Latin roots for “healing,” once referring broadly to holistic care, but now mostly used for psychotherapy.

HEZEKIAH’S TREATMENT (2 KINGS 20:1-7)

- Hezekiah was a faithful and respected king.
- He developed a deadly skin ulcer, possibly bubonic plague.
- He prayed; Isaiah advised a fig poultice for treatment.
- Figs contain compounds that may help fight infections.
- Following prayer and treatment, Hezekiah recovered and lived 15 more years.
- The story shows integration of prayer and medicine fostering healing-recovery.

Hezekiah’s story reminds us not to lose hope even when things seem uncertain; healing-recovery can come through a combination of resources.

WHY IS THERE RESISTANCE TO MEDICATION & THERAPY?

- Stigma or skepticism about treatment
- Side effects from medication
- Limited access to care
- Emotional difficulty confronting trauma
- Co-occurring issues, like substance misuse or relapse
- Mania reducing perceived need for medication
- Depression/anxiety limiting motivation and hope

- Fear of change despite possible benefits
- Anosognosia (“lack of insight”), common in bipolar disorder (40%) > sounds like: “Anna’s Agnosia”

GOOGLE: Anosognosia: A Big Word for a Surprising Condition (NAMI)

NOTE: To Google using an Apple phone (iPhone), simply use the Google app or the Safari web browser. To use the Google app, download it from the “App Store.” You can also use “Safari” by visiting “google.com” or setting Google as your default search engine in the iPhone’s settings.

REFLECTIVE PAUSE PROJECTS

TIMEOUT

Taking medication for mental or physical health is not a sign of weak faith. Medicine can serve as a means of relief and reflects trust in God’s provision.

Overcoming Survivors: *Describe why it might be challenging to believe that there are professional resources, like medications, that God can use to provide relief.*

Support Partners: *Describe why it might be challenging to believe that there are professional resources, like medications, that God can use to provide your loved one relief. — or why you think your loved one might find the idea challenging.*

TIMEOUT

Medications for mental health challenges help manage symptoms but are not a cure-all. They should be seen as one part of a broader recovery process. These medications work by changing how neurons in the brain function, which can reduce symptoms and support stability.

Overcoming Survivors: *Describe your view of mental health medications and whether you have felt like these medications should be a complete cure or “fix.”*

Support Partners: *Describe your feeling about taking mental health medications as a person of faith.*

TIMEOUT

When someone has a prescription for mental illness, a common first question from family or support givers is, “Did you take your medication?”

Overcoming Survivors: *What is your typical response to that often-asked question? Why do you think they are asking this question?*

Support Partner: *Describe which situations (i.e., what signs) cause you to ask, “Did you take your medication?” Describe how your loved one typically responds to being asked this question and, if they get upset, why do you think they react that way?*

TIMEOUT

Because everyone's brain and body are different, medications affect us in unique ways. It's common that several medications have to be tried in order to find the one or combination (“cocktail”) that works best.

Overcoming Survivor: *Where are you in the process of searching for the right medication(s)? If an effective medication(s) has been found, what helped the most in the search?*

Support Partner: *Where is your loved one in the process of searching for the right medication(s)? If an effective medication(s) has been found, what helped the most in the search?*

RED ALERT WARNING

Use this information to build self-awareness around the medication experience — not for self-diagnosis nor prescribing.

Do not play doctor with your health by trusting your research. Discuss all discoveries and prompted questions with professional care providers, including a reputable

pharmacist. Do not make any changes to medication(s) without consulting with the doctor.

MEDICATION AWARENESS

Finding effective medication(s) takes time. Understanding how each one affects symptoms helps you choose what works best.

- Below “circle” all the medications presently being taken.
- Place an “X” over the ones tried that did not work.
- Use this project to better inform conversations with your healthcare providers.

Antipsychotics (often used to treat schizophrenia and bipolar disorder)

- **Typical** (older meds) Haldol, Loxitane, Mellaril, Moban, Navane, Orap, Prolixin, Stelazine, Thorazine, Trilafon
- **Atypical** (newer meds) Abilify, Clozaril, Fanapt, Geodon, Invega, Latuda, Risperdal, Seroquel, Zyprexa

Mood Stabilizers (often used to treat bipolar disorder and other mood disorders)
Tegretol, Depakene, Depakote, Lamictal, Lithobid (Lithium), Trileptal, Topamax

Benzodiazepines (often used to treat anxiety disorders) Ativan, Klonopin, Librium, Valium, Xanax

Psychostimulants (often used to treat ADHD) Adderall, Concerta, Dexedrine, Ritalin, Vyvanse

Antidepressants (often used to treat depression, bipolar disorder, and anxiety disorders — should not be used with bipolar disorder without the presence of mood stabilizer, especially BDI, due to the risk of triggering manic or hypomanic episodes, or causing rapid cycling)

- **Tricyclic Antidepressants (TCA)** Adapin/Sinequan, Anafranil, Asendin, Elavil, Norpramin, Pamelor, Vivactil
- **Selective Serotonin Reuptake Inhibitors (SSRI)** Celexa, Prozac, Lexapro, Luvox, Paxil, Zoloft, Serotonin and Norepinephrine Reuptake Inhibitors (SNRI) Cymbalta, Effexor, Pristiq

- **Monoamine Oxidase Inhibitors (MAOI)** Emsam, Marplan, Nardil, Parnate
- **Atypical Antidepressants** BuSpar, Remeron, Wellbutrin, Brintellix/Trintellix, Viibryd

EVIDENCED-BASED / THERAPIES & SOURCES

DEFINITION: Essentially, **evidence-based practice** uses what has been proven effective through research, and **best practice** ensures this is delivered in a way that is most effective for a specific person.

Evidence-based therapies for bipolar disorder, anxiety, and depression can be found by way of internet searches; however, you want reliable sources like the:

National Institute of Mental Health (NIMH), American Psychological Association (APA), Anxiety & Depression Association of America (ADAA), UK's National Health Service (NICE), National Alliance on Mental Illness (NAMI), Depression and Bipolar Support Alliance (DBSA), and academic research databases like those from the **National Institutes of Health (NIH).**

Best practice psychotherapies for bipolar disorders

- **Cognitive Behavioral Therapy (CBT):** Focuses on identifying and changing negative thought patterns and behaviors that contribute to mood episodes.
- **Family-Focused Therapy (FFT):** Involves family members to improve communication, address problems, and recognize early warning signs of mood episodes.
- **Interpersonal and Social Rhythm Therapy (IPSRT):** Helps individuals stabilize their daily routines and sleep schedules, which can regulate mood.
- **Psychoeducation:** Educates the person and their family about bipolar disorder, treatment, and strategies for managing the condition.
- **Dialectical Behavior Therapy (DBT):** A form of CBT that helps with emotion regulation and distress tolerance.

Best practice psychotherapies for anxiety disorders

- **Cognitive Behavioral Therapy (CBT):** A first-line, empirically supported treatment for anxiety disorders. It helps people manage anxiety by changing their thinking and behavior.
- **Exposure Therapy:** A component of CBT where a person is gradually and safely exposed to the anxiety trigger until the fear diminishes.
- **Acceptance and Commitment Therapy (ACT):** Encourages mindfulness and focusing on personal values while tolerating difficult thoughts and feelings.
- **Christian Acceptance and Commitment Therapy (ACT):** A faith-based approach that integrates the principles of traditional Acceptance and Commitment Therapy with a Christian worldview to help clients live a meaningful life while navigating psychological distress.
- **Applied Relaxation (AR):** Teaches relaxation techniques to help a person interrupt or prevent anxiety symptoms.

Best practice psychotherapies for depression

- **Cognitive Behavioral Therapy (CBT):** Helps patients identify and manage negative thought and behavior patterns to alleviate depressive symptoms.
- **Behavioral Activation (BA):** Encourages patients to engage in pleasurable and meaningful activities to improve their mood.
- **Interpersonal Psychotherapy (IPT):** Focuses on improving a person's relationships to address the interpersonal conflicts that may contribute to depression.
- **Mindfulness-Based Cognitive Therapy (MBCT):** Combines CBT with mindfulness meditation to help prevent depressive relapse.

MEDICATION RESEARCH RESOURCES:

- **GOOGLE: Drugs.com**
 - This online pharmaceutical encyclopedia offers drug information for consumers and healthcare professionals in the United States. It claims to be accurate and independent, but notes its content is for educational use only and not for medical advice or treatment.
 - I recommend that you put “Drugs.com” in your phone to serve your quick access to information needs.
- **GOOGLE: Drugs.com Medication Guide - Apps on Google Play**
 - Easily find drug details, manage your medication list, identify pills, check interactions, and compare prices. Access peer-reviewed information on more than 24,000 prescription drugs, OTC, and natural products.
- **GOOGLE: What to Avoid with Psychiatric Medications | NAMI**
 - This article discusses how substances, herbs, and diet choices interact with medications, emphasizing the need to inform your healthcare providers about all the medicines you take.
- **GOOGLE: How can different drugs and medications affect each other? – Mind**
 - Is it wise to drink alcohol and use recreational drugs while taking our medications? What about water? Etc.

HOW TO EXPLAIN / HOW TO HELP

(As you Google search, be sure to scroll down and find the “wikiHow Health” source.)

Google: **How to Explain Bipolar Disorder to Others – wikiHow Health**

Google: **How to Help Someone with Bipolar Disorder – wikiHow Health**

Google: **How to Tell Your Best Friend You Are Depressed – wikiHow Health**

Google: **How to Help Someone with Depression – wikiHow Health**

Google: **How to Tell Your Friends About Your Anxiety Disorder – wikiHow Health**

Google: **How to Help People With Anxiety – wikiHow Health**

MENTAL HEALTH VIRTUAL TOOLBOXES

Virtual toolboxes are digital resources using CBT techniques to support emotional and mental health. They include guided meditation(s), mood trackers, coping exercises, educational materials, and links to therapy or support groups.

CHECK OUT TOOLBOX APPS AT “GOOGLE PLAY STORE” OR “APPLE APP STORE” LIKE: Virtual Hope Box, MindShift CBT, Happify, Calm, Headspace, MoodTools, and What's Up?

HOW DO THEY HELP?

- These are not replacements for professional help; they are complementary coping tools.
- They can help with stopping negative thought patterns and emotional upset.
- They can help to activate reasons for living and disrupt cycles of despair.

FINAL WORD: The healing-recovery process is a collaborative affair.

“Do you not know that your bodies are temples of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought at a price. Therefore, honor God with your bodies.”

— 1 Corinthians 6:19-20 NIV

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