

# Mood stabilizers

Group of drugs principally used for the treatment of bipolar disorders → stabilize the mood → eliminate/reduce acute manic phases/act prophylactically to "stabilize" the mood

## Principal mood stabilizers and their MoA

*See pharmacology section for more details*

- First-line agent for long-term treatment of mania and its prophylaxis
  - Lithium
    - MoA: **Inhibition** of the **phosphoinositol cascade?**, unclear
    - Steady state after 4-5 days (not acute treatment)
    - Besides bipolar disease: also **augmentation in the treatment of depression**
    - narrow therapeutic range
    - Cave:
      - Drug interactions: NSAIDs, hydrochlorothiazide -> reduce the GFR and can cause increased lithium levels
      - Side effects:
        - Nephrotoxicity (nephrogenic diabetes insipidus)
        - Hypothyroidism
        - Teratogenic: can cause Ebstein anomaly (rare heart defect in which the tricuspid valve — the valve between the upper right chamber (right atrium) and the lower right chamber (right ventricle) of the heart — isn't formed properly. As a result, blood leaks back through the valve and into the right atrium)
        - Acute intoxication: CNS (tremor, confusion), GI upset
  - Valproic acid: In patients with bad renal function (i.e. increased creatinine levels)
  - Others
    - Lamotrigine: especially useful for severe bipolar depression
    - Carbamazepine
  - Antipsychotics: Quetiapine- can be given in combination with lithium or valproic acid in refractory cases