

ASSESSING ABNORMAL BEHAVIORS

CHRIS HEIMERL, MSSW 5-27-11

Pharmacologic Supports of Brain Activities in Persons with I/DD

OVERVIEW

- Contextual factors
- Importance of observations
- Choice of determining abnormal-ness
- Impact of labeling or naming
- Activities and observations
- Identification of where the problem lies

CONTEXT!

Quality of Life

Wellness

Relationships

Context...

Coping

Symptom Management

Observe - what do you see?

- Systematic method
- There are many ways to do this.

- Observer bias
 - Are you expecting a "problem"?
 - Avoid: always and never...
- Counter-transference

AB-normal?...

•Normal for whom?

Cultural context

Adaptation

Impairment of function

Dangerousness

Labels

•What is the purpose?

•Is there connection with the individual?

We all have human behavior.

J: problem-solving decision making

awareness of danger care of self/setting

0: hallucinations

delusions

sense of self

M2: short/long term

forgetful

obsessive about past

A2: nervousness

handle stress/stimulation

emotional response change leisure/recreation

C: attention span,

learning capacity/style-cues, prompts

C: communication-nature, content, quantity

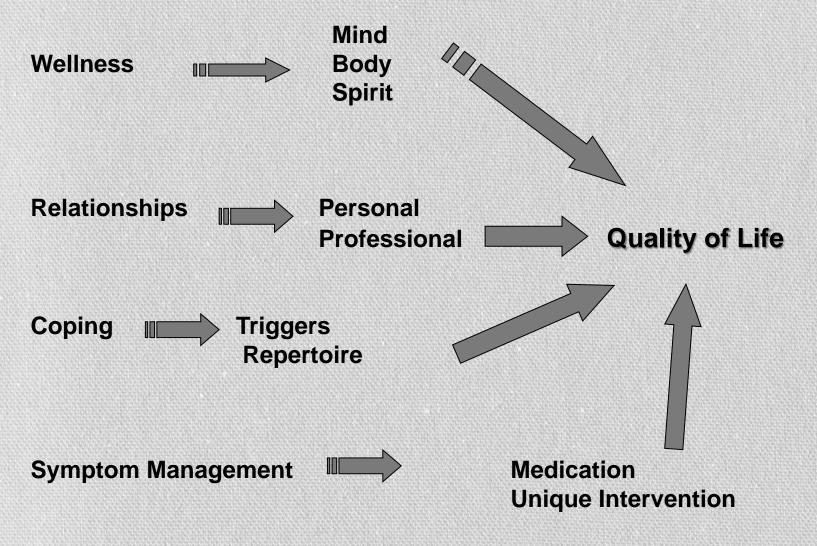
S: Sleep-awake, snore/apnea eating-preferences, routines, nightmares weight

servation

Whose problem...

- Safety concerns
- Noise and disruption
 - standards within the current living context
- Uncovering bias in caregivers and providers
- Challenging the habit of learned behavior
 - individual with I/DD and provider.

Mental Health Concerns



Principles of Behavioral Monitoring

- Shared decision making
- Defined target symptoms
- Objective measurement procedures
 - Frequency counts
 - Time samples
 - Rating scales
- Other clinical indicators
 - Staff responses
 - Performance information
 - Increased attention
 - Increased concentration
- Defined outcome criteria
- Multi-setting data collection

Sovner and Hurley

Saboteurs of Effective Monitoring

- Monitoring is seen as a burden
- Crisis response and band aids
- Monitoring system is too complicated
- Data is not organized or analyzed

Let's explore further...





Principles of Psychopharmacology

Alya Reeve, MD, MPH

5-27-11

GOOD & BAD
USES OF
PRESCRIBED
MEDICATIONS

OVERVIEW

- Valid uses of medications
- Poor use of medications
- Link symptoms and medication
- Classes of psychotropic medications
- Side effects
 - Uncomfortable
 - Potentially lethal

Reasonable use of meds

- Safety
- Improved functioning
- Ameliorate symptoms
- Treat a specific disorder
- Prevent decline in functioning
- Adjunctive therapy
 - Prior to specific procedures

Poor Choices to Use Meds

- Convenience
 - Whose definition of convenience
- Restraint
 - Issues of respect, choice
 - Safety documentation
- Lack of review
 - The need for medication should be documented
- Adding on blindly

General Considerations

- All medications have intended and unintended effects.
- Everyone reacts uniquely to medication.
- There are general responses to expect ~
 - The more medication an individual takes, the more likely interactions will occur.
 - Concurrent medical conditions will affect medication effects.

General Considerations

- Factors affecting efficacy:
 - Potency,
 - Bioavailability,
 - Compliance,
 - Onset of action,
 - Duration of action.

Physician/Professional Evaluation Steps

- Establish and maintain safety and trust
- Identify reliable, available, varied sources of information
- Clarify purpose-presenting questions and problems
 - Extent of distress, discomfort
- Learn specific behavioral/symptom changes
- Direct contact and observation
 - rhythms of movement
 - personal space
 - desire for intimacy

- -- communication
- -- emotional expression
- -- trust and comfort

Link $Sx \longleftrightarrow Meds$

Accuracy of assessment

Determine competence

Off-label uses of medications

Bioavailability

- Pharmacokinetics –
 what the body does
 with the drug.
- Absorption
- Distribution
- Metabolism
- Elimination

- Pharmacodynamics what the drug does in/to the body.
- Mechanism of action
- Individual response
- Onset
- Therapeutic vs. toxic

Indications to Use Psychotropic Medications

| Diagnostic indication | Neuroleptic (Anti- psychotic) | Anti- depressant | Mood Stabilizer | Anti- anxiety | Stimulant | Anti- Parkinson's |
|-----------------------|------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------|------------------------|------------------------|
| Primary | Psychosis, Schizoaffective Disorder, Delusional Disorder, Atypical psychosis | Depressive Disorders, Anxiety disorders | Bipolar Disorder, Depression, Schizoaffective disorder | Anxiety Disorders, (OCD, PTSD, Panic, Generalized) | Attention Disorders | Extrapyramidal effects |
| Other: | Conditions and symptoms | may not be | FDA approved | but may | be clinically | warranted. |

Medication Classes

- Anxiolytic: cut through anxiety...
 - Benzodiazepine
 - Buspirone
 - Tricyclics
 - Beta-blockers
 - SSRI'
 - SNRI

Antidepressants

- Tricyclics (three-ring compounds)
- •SSRI (selective serotonin reuptake inhibitor)
- **SNRI** (serotonin norepinephrine reuptake inhibitor)
- •MAOI (monoamine oxidase inhibitor)

Antipsychotics

- Typical
 - "neuroleptic"
 - Based on animal model of motor stiffness

- Atypical
 - ? Lower risk of involuntary movements
 - Metabolic syndrome

Mood Stabilizers

- Lithium: the gold standard
- Anti-Epileptic Drugs
 - Tegretol (carbamazepine)
 - Lamictal (lamotrigine)
 - Depakote (valproic acid)
 - Neurontin (gabapentin) less effective
- Calcium-channel blocker
 - Calan (verapamil)

Sedative-Hypnotics

- Sleep aides
 - Restoril; Lunesta; Ambien
 - •{Benzodiazepines}
 - •{Trazodone}
- Antihistamine
 - Benadryl
 - Atarax

Pain-relief

- Non-pharmacologic
 - Gabapentin
 - Lyrica
 - Ibuprofen

Symptoms of **MEDICALLY DANGEROUS** Effects

- Acute Renal Failure
- Anaphylaxis
- Grand Mal Seizures (or Convulsions)
- Status epilepticus
- Neuroleptic Malignant
 Syndrome

- Pancreatitis
- QT Prolongation
- Rhabdomyolysis
- Serotonin Syndrome
- Thrombocytopenia

- Polypharmacy
 - Drug-drug interactions
 - Masked toxicity
 - Enhanced or slowed metabolism
- Acute dystonia
 - Sustained; painful; interferes with function
 - May involve any muscle group
 - Tx: BZD quickly; benadryl

- Akasthisia
 - Internal restlessness.
 - Acute or delayed onset (Tardive Akasthisa).
 - May be interpreted as agitation.
 - Generally reversible:
 - stop the medication, supportive measures, BZDs.

- NMS (neuroleptic malignant syndrome)
 - Dehydration
 - Confusion/delerium
 - Increased temperature
 - Muscle breakdown

Potentially fatal !!!

- Tardive Dyskinesia
 - Slow onset
 - Involuntary movement; should fall asleep
 - Fast contraction followed by relaxation
 - Repeated rating scale(s)
 - AIMS
 - DISCUS
 - SIMAS

Almost time for a break...

- · Questions?
- · Commenty?

You mean there's more?!?!?



Cases

- Stepwise diagnostic determination.
- Simply relying on "behavior" is a great way to get into trouble!

Symptoms of **MENTAL AND EMOTIONAL** Effects

- Dreaming (Abnormal)
- Emotional Lability
- Excitability
- Feeling Unreal
- Forgetfulness
- Insomnia
- Irritability
- Jitteriness
- Lethargy

- Libido changes
- Panic Reaction
- Somnolence
- Thoughts and actions related to self harm
- Tremulousness
- Yawning
- Food cravings

Symptoms of **MENTAL AND EMOTIONAL** Effects

- Aggravated Nervousness
- Agitation
- Amnesia
- Anxiety Attack
- Apathy
- Decreased Appetite
- Increased Appetite
- Auditory Hallucination

- Bruxism
- Carbohydrate Craving
- Concentration Impaired
- Confusion
- Crying (abnormal)
- Depersonalization
- Depressive mood
- Disorientation

Symptoms of **CARDIOVASCULAR** Effects

- Palpitation
- Hypertension
- Bradycardia
- Tachycardia
- ECG Abnormal Flushing
- Varicose Veins

Symptoms of **GASTROINTESTINAL** Effects

- Abdominal Cramp/Pain
- Belching
- Bloating
- Constipation.
- Diarrhea
- Dyspepsia/Indigestion
- Flatulence
- Gagging
- Gastritis
- Gastroenteritis
- Gastrointestinal Hemorrhage

- Gastro Esophageal Reflux -GERD
- Heartburn
- Hemorrhoids
- Increased Stool Frequency
- Indigestion
- Nausea
- Swallowing Difficulty
- Vomiting

Symptoms of Eyes, Ears, and Mouth Effects

- Conjunctivitis
- Dry Eyes
- Abnormal Vision
- Blurred Vision
- Eye Irritation
- Pupils Dilated

- Toothache
- Bruxism
- Taste Alteration
 - Metallic taste

- Tinnitus
- Earache

Symptoms of **SKIN** Effects

- Acne
- Alopecia
- Angioedema
- Dermatitis
- Dry Lips
- Dry Skin

- Folliculitis
- Furunculosis
- Pruritus
- Rash
- Epidermal Necrolysis

Symptoms of **GENERAL BODY** Effects

- Dry Mouth
- Sweating Increased
- Allergy
- Asthenia
- Chest Pains
- Chills
- Edema of Extremities
- Falls
- Fatigue

- Fever
- Hot Flashes
- Influenza (Flu)-like
 Symptoms
- Leg Pain
- Malaise
- Pain in Limb
- Syncope
- Tightness of Chest

Symptoms of **UROGENITAL** Effects

- Blood in Urine (hematuria)
- Pain on urination (dysuria)
- Urinary Frequency
- Urinary TractInfection
- Urinary Urgency

- Anorgasmia (male and female)
- Ejaculation Disorder

Menstrual Disorder

Kidney Stone (nephrolithiasis)

Symptoms of <u>UROGENITAL</u> Effects (Women)

- Menorrhagia
- Menstrual Cramps
- Menstrual Disorder
- Pelvic Inflammation
- Premenstrual Syndrome
- Spotting Between Menses
- Pregnancy

Symptoms of **RESPIRATORY SYSTEM** Effects

- Asthma
- Shortness of breath
- Coughing
- Laryngitis
- Nasal Congestion
- Rhinitis
- Sinus Congestion
- Sinus Headache

Symptoms of **NERVOUS SYSTEM** Effects

- Coordination Abnormal
- Dizziness
- Vertigo
- Disequilibrium
- Headache
- Migraine
- Paresthesia
- Sluggishness

- Involuntary muscle
 Contractions
- Increased muscular tone
- Restlessness
- Tics
- Tremor/shaking
- Twitching

Symptoms of **HEMATOPOEITIC** Effects

- Anemia (RBCs)
- Granulocytopenia (WBCs)
- Thrombocytopenia (platelets)
- Bruises
- Nosebleeds

Symptoms of **METABOLIC & NUTRITIONAL** Effects

- Arthralgia
- Arthropathy
- Arthritis
- Back Discomfort
- Gout
- Hepatic Enzymes Increased
- Bilirubin Increased
- Hypercholesterolemia

- Increased Weight
- Decreased Weight
- Muscle Cramp
- Muscle Stiffness
- Muscle Weakness
- Myalgia (ache)
- Thirst
- Thyroid changes
- Hyperglycemia

Symptoms of **SKELETAL** Effects

- Torticollis
- Osteopenia
- Dystonia
- Jaw pain
- Jaw stiffness
- Joint stiffness



INTEGRATION OF MEDICATIONS, BEHAVIOR, AND ENVIRONMENT(S)

Integration

- Holistic
 - · Whole person, whole environment
- Multiple etiologies in same person
 - Agitation: medication, worry, vulnerability, shortness of breath, dementia (some examples)
- Emotional triggers
 - · Anxiety; anticipation

Information Before Health Consult

- Personal information
- Reason for seeking consultation
- presenting problem(s)
- Concise history
- social
- family
- Medical status
 - diagnostic history
- Medication history and response
- Behavior, symptom baselines
- data based!

Questions During Health Consult

- ✓ Are target signs and symptoms consistent with diagnosis?
- ✓ What is the rationale for selected medication/treatment intervention?
- ✓ What are the expected benefits?
- ✓ What are the potential consequences -with and without use of this treatment?
- ✓ When should the effect of the medication/treatment intervention become apparent?
- ✓ Does the physician suggest complementary support/treatment?
- ✓ How often does the physician want updates or to see person?

Obstacles to Effective Treatment

- Intellectual ability and self reporting
- Baseline exaggeration
- Paradoxical changes
- Complex, multi-determinate nature of behavior
- Physician attitudes and assumptions

Sovner and Hurley

The Four Questions +

Michael Smull

- What have we tried?
- •What have we learned?
- •What are we pleased with?
- What are we concerned with?
 The fifth question and its questions:
- Now what?
 - -what will we continue to do?
 - -what will we do less of or stop doing?
 - -what will we begin or return to doing?

Differentiating Mental Illness from Behavioral Issues

 Medications and psychotherapy (attentive intention) change brain physiology and neuronal patterns

 All mind-brain experiences are expressed through behavior and communication

Overall: Strive for BEST Outcomes

- Is quality of life
 - •Improved?
 - •Sustained?

- Are there other "things" that could be done?
 - Activities
 - Attitudes
 - Opportunities

"... it takes a community"







Thank you for your attention and participation

Evaluations

•Please fill out your evaluations ... for CEUs and to provide feedback