Faculty Disclosure

Jane Marie Sulzle, MSN, RN, CNS has disclosed no actual or potential conflicts of interest in relation to this educational activity.

During this presentation, the speaker refers to off-label uses of medication related to possible side effects and nursing care interventions.

Adolescent Mental Health: Nursing Care and Intervention

Jane Marie Sulzle, MSN, RN, CNS

A lecture on mental health illnesses among adolescents, including medications, side effects and nursing interventions involved in the treatment of adolescent mental illnesses.

Program Objectives

Upon completion of this program, participants should be able to:

• Identify why psychiatry is more an art than a science
• List four mental health illnesses in adolescents and the medications used to treat them
• Identify side effects of different classes of psychotropic medications
• List nursing interventions for each discussed diagnosis
• List five secondary effects of untreated mental illness in adolescents

Accreditation

Children’s Hospitals and Clinics of Minnesota is accredited as a provider of continuing nursing education by the American Nurses Credentialing Commission on Accreditation. Children’s Hospitals and Clinics of Minnesota designates this educational activity for 1 continuing education hour.

This activity meets the requirements of the Minnesota Board of Social Work for continuing education of Social Workers.

This activity meets the requirements of the Child Life Council for continuing education for Child Life Specialists.

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Adolescent Mental Health: Nursing Care and Interventions
Jane Marie Sulzle, RN, CNS, MS

Clinical Nurse Specialist
- Masters’ level preparation
- National certification
- 5 areas of competency: research, direct care, education, leadership and consultation
- Scope of practice: is to diagnosis and treat, both medication and therapy, children with mental health disorders

Objectives for presentation
- Identify why psychiatry is more an art than a science.
- List 4 mental health illnesses in adolescents and medications used to treat them.
- Identify side effects of different classes of psychotropic medications.
- List nursing interventions for each discussed diagnosis.
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Outline
- Influences on children’s mental health
  - Biology and Environment
- Psychiatry, more an art than science

Common diagnoses in adolescents and nursing interventions
- Chemical abuse
- Eating disorders
- Depression
- Anxiety
- Bi-polar
- ADHD

Influences on Children
Lack of measuring tools
- No thermometers, B/P cuffs, lab draws
- Use Spect scans
- Use interview
  - What parents say
  - Adolescents tell you
  - Observation
  - School, primary MD
  - Intuition/experience

A Science or an Art
- If you met a patient/client whose mother told you (s)he:
  - Couldn’t sit still
  - Couldn’t focus
  - Wasn’t sleeping
  - Was fidgety
  - Was disorganized

Which Medication
- 6 different SSRI’s, 3 others (SNRI’s & NDRI’s) commonly used, at least 14 other antidepressants
- 4 different families of stimulants, with 13 different preparations
- 5 different atypical antipsychotics
- 9 different Lithiums
- 6 different anti-convulsants
- Which to choose?

Facts about Children and Mental Health
- 1 in 5 kids have a mental illness
  - Fewer than 1 in 5 receive help
- Comorbidity is very high (33%)
- Anxiety most common (9-21%)
- Depression (15%)
- Suicide 3rd leading cause of death

Secondary effects
- Untreated
  - School failure
  - Family conflicts
  - Substance abuse
  - Violence
  - Suicide
  - May increase risk of juvenile justice

Chemical Abuse
- 25% have experimented with illegal drugs before age 14 years
- 53% by 18 years
- Often “self-medicating”
- Difficult to assess which was 1st, MI or chemical abuse
- Treated by sub-specialty

Which of these factors are most critical in developing mental health disorders in children?
**Nursing interventions**
- Ask the questions?
- Normalize, not judge.
- Refer for chemical evaluation.

**Eating Disorder**
- Anorexia (1-4%)
- Bulimia (1-4%)
- Binge eating (0.5% 11-14 year olds)
- Biology/Environment
- High co morbidity, depression, anxiety, OCD

**Nursing Interventions**
- Refer to specialist
  - Inpatient: Methodist Hospital, St. Louis Park
  - and MeritCare in Fargo, N.D.
  - Various outpatient: Above and Fairview University, Emily program
- Support family and adolescent
- Offer what information is known

**Depression**
- Symptoms
  - Sad/irritable
  - Change in sleep
  - Change in eating
  - Lack of energy
  - Isolative
  - Worthlessness
  - Hopelessness
  - Suicidal

**Medications**
- Selective Serotonin Reuptake Inhibitors (SSRI’s)
  - Zoloft, Celexa, Paxil, Prozac, Lexapro, Luvox
- Norepinephrine Dopamine Reuptake Inhibitors (NDRI)
  - Wellbutrin
- Selective Serotonin Norepinephrine Reuptake Inhibitors (SNRI’s)
  - Effexor and Cymbalta

**Medication side effects**
- Stomach upset
- Increase agitation
- Increase sleep
- Mania
- Increase suicide ideation
- Serotonin syndrome: fever, inc B/P and HR, restless, myoclonus
- Take w food
- Give time
- Immediate intervention
- Immediate intervention
- Immediate intervention
Nursing interventions

- Know side effects of medication and what to do
- Know biology
- Ask the question: Are you suicidal?
- There is hope; medication, therapy, community resources.
- Support

Community Resources

- Insurance companies
- Therapists
- Schools
- Hospitals who treat children and adolescents:
  - Abbott: children and adolescents
  - Fairview Riverside: children and adolescents
  - United: adolescents
  - Rochester: St. Mary's children and adolescents
  - St. Cloud: adolescents
  - Fargo: Prairie Psychiatric center: children and adolescents
  - Mankato: Immanuel St. Joseph's Hospital: adolescents
  - Sioux Falls, SD: McKennan: adolescents

Anxiety Diagnoses

- Separation Anxiety
- Generalized Anxiety
- Social Anxiety
- Specific Phobias
- Panic
- Post-traumatic syndrome (PTSD)
- Obsessive-compulsive Disorder

Anxiety

- Symptoms:
  - Irritable
  - Reactive
  - Fatigue
  - Sleep disturbance
  - Worrying
  - Parents often don't realize

Medications

- Selective Serotonin Reuptake Inhibitors (SSRIs):
  - Zoloft, Celexa, Paxil, Prozac, Lexapro, Luvox
- Norepinephrine Dopamine Reuptake Inhibitors (NDRI)
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- Selective Serotonin Norepinephrine Reuptake Inhibitors (SNRIs):
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- Give time
- Immediate intervention

Clinical Handbook of Psychotropic Drugs for Children and Adolescents, 2004
Nursing Interventions

- Therapy is very effective
- Know side effects of medications
- Know biological influence
- Understand anxious brain

Support

Bipolar Disorder (BP)

- Symptoms
  - Mania
    - Grandiosity
    - Decrease sleep
    - Risk taking
    - Rapid speech/thought
    - “ADHD on speed”
  - Depression

Bipolar Disorder

- Prevalence 1.3% onset between 15-17 yrs
- More typical presentation than younger children
- Increase risk (3 x) if parent has BP
- Lack of consensus in field
- Often presents with depression first

Medications

- Atypical antipsychotics
  - Risperdal
  - Abilify
  - Seroquel
  - Zyprexa
  - Geodon

- Side effects
  - Wt gain
  - Dulling
  - Diabetes, type II
  - High prolactin
  - Extrapyramidal side effects (EPS)
  - Rarely Tardive Dyskensia

Medications

- Mood stabilizers
  - Anticonvulsant
    - Depakote
    - Tegretol
    - Lamictal
    - Trileptal
    - Neurontin
    - Topamax

- Side effects
  - Sedation
  - Agitation
  - Headache
  - Weight gain
  - Nausea and vomiting
  - Stevens-Johnson syndrome-life threatening rash

Medications

- Mood stabilizer
  - Lithium

- Side effects
  - Very narrow window for therapeutic range
  - Dulling
  - Weakness/fatigue
  - Nausea/vomiting
  - Weight gain
  - Hypothyroidism
  - Polyuria
  - Rash
  - Leukocytosis
Nursing Interventions

- Educate nutrition and exercise
- Monitor for movement disorder
- Educate parents on s/s of diabetes
- Know biology

Support

Attention Deficit Hyperactive Disorder (ADHD)

- Most common to diagnosis inattentive type in adolescents
- Usually present school failure
- Have co-morbid anxiety and/or depression
- Poor self-esteem
- Co-morbid learning disabilities

Autistic Spectrum Disorder

- Autism
- Asperger’s syndrome
- Pervasive Developmental Disorder, NOS (PDD)

what can you do?

- De-stigmatize mental illness.
- Be supportive to children and families.
- Be understanding and compassionate.
- Know local resources.

Websites and Organizations

- www.nimh.nih.gov
  National Institute for Mental Health

- www.samhsa.gov
  Substance Abuse and Mental Health Services Administration

- www.surgeongeneral.gov/library/mentalhealth/chap16777.html
  Report of the Surgeon General on Mental Health

- www.nami.org
  National Alliance for the Mentally Ill (NAMI)

- www.chadd.org
  Children and Adults with Attention Deficit Disorder

- www.aacap.org
  American Academy of Child and Adolescent Psychiatry
**Question:** What is the research about the biology of the brain? Are there deficiencies in certain minerals in the brains of some patients who have mental illness?

**Question:** To what degree are mental illnesses due to chemical and environmental factors such as red dyes or the lack of certain minerals in the diets of these young people?

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**References**

- [Fast Facts about Children and Mental Health](http://www.mentalhealth.samhsa.gov)
Websites for Adolescent Mental Health: Nursing Care and Interventions
Jane Marie Sulzle, MSN, RN, CNS

Federal run sites, excellent sources for free literature for both professionals and families:

www.nimh.nih.gov
National Institute for Mental Health
“Reducing the burden of mental illness and behavioral disorders through research on mind, brain, and behavior.”

www.samhsa.gov
Substance Abuse and Mental Health Services Administration
“The Substance Abuse and Mental Health Services Administration (SAMHSA) has established a clear vision for its work -- a life in the community for everyone. To realize this vision, the Agency has sharply focused its mission on building resilience and facilitating recovery for people with or at risk for mental or substance use disorders. SAMHSA is gearing all of its resources -- programs, policies and grants -- toward that outcome.”

www.surgeongeneral.gov/gov/library/mentalhealth/chapter3
“This Report of the Surgeon General on Mental Health is the product of an invigorating collaboration between two Federal agencies. The Substance Abuse and Mental Health Services Administration (SAMHSA), which provides national leadership and funding to the states and many professional and citizen organizations that are striving to improve the availability, accessibility, and quality of mental health services, was assigned lead responsibility for coordinating the development of the report. The National Institutes of Health (NIH), which supports and conducts research on mental illness and mental health through it’s National Institute of Mental Health (NIMH), was pleased to be a partner in this effort.”

Other sources of information:

www.nami.org
National Alliance for the Mentally Ill (NAMI)
“Is the nation’s largest grassroots mental health organization dedicated to improving the lives of persons living with serious mental illness and their families.”
www.chadd.org
Children and Adults with Attention Deficit Disorder
“Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD), is a national non-profit, tax-exempt (Section 501 (c) (3)) organization providing education, advocacy and support for individuals with AD/HD.”

www.aacap.org
American Academy of Child and Adolescent Psychiatry
“The AACAP developed Facts for Families to provide concise and up-to-date information on issues that affect children, teenagers, and their families.”

www.kidshealth.org
A website with information for parents, teens and kids. The focus of information is on physical and mental health.

www.connectforkids.org
Guidance for adults.
A virtual encyclopedia for children’s issues.

www.parentingisprevention.org
A website with information for parents on the use of alcohol, tobacco and other drugs by children.

Local resources:

www.pacer.org
Parent Advocacy Coalition for Education
“Our mission is to expand opportunities and enhance the quality of life of children and young adults with disabilities and their families, based on the concept of parents helping parents.”
www.macmh.org
Minnesota Association for Children’s Mental Health
“To enhance the quality of life for children with mental health disorders and their families. Our objectives are to —
• Educate the public to remove the stigma and barriers associated with children's mental health disorders.
• Educate families about the multiple systems that serve children with mental health disorders and help them navigate these complex systems.
• Provide opportunities for parents and caregivers to develop the skills required to effectively care for and advocate for their children.
• Inform and educate professionals about children's mental health.
• Advocate for the timely and appropriate delivery of services to children with mental health disorders.
• Provide programs and advocate for services that meet the unique needs of parents from culturally specific communities.”

www.firstcall-mn.org
First Call for Help
A resource directory of available services