

Medication Information

Lithium

Lithium carbonate is used to treat bipolar disorder (manic depression). It effectively controls and prevents manic episodes and has been helpful in treating depression as well. Sometimes it is added to an antidepressant in the treatment of resistant unipolar depression. Lithium has also been used, along with antipsychotics, in the treatment of schizophrenia accompanied by a change in mood that mimics either mania or depression. The usual daily dose is 600-1,800 mg.

Precautions: Lithium must be taken on a regular basis to be of benefit and should not be discontinued suddenly. Since it may impair renal function, patients with kidney disease should not be treated with Lithium. Also, hypothyroidism may develop in patients taking this medication. Drug interactions may occur with ibuprofen, acetazolamide, antihypertensives, anti-inflammatory drugs, calcium channel blockers, carbamazepine, diuretics, and muscle relaxants. While on lithium, a patient's blood level must be monitored. If the level is too low, symptoms will not be relieved; if it is too high, there is a danger of a toxic reaction. It is very important not to become dehydrated or to start a low salt diet. Tell your doctor immediately if you develop nausea, vomiting, diarrhea, confusion, or an increase in tremulousness (possible symptoms of toxicity). Because this medication causes dizziness, do not drive or operate heavy machinery until you know how you will be affected.

Are there concerns about lithium and pregnancy? Exposure to lithium during the first trimester of pregnancy may be associated with the increased risk of a rare cardiac malformation or high birth weight. But recently, scientists have come to doubt that lithium produces adverse effects on the fetus, and psychiatrists are increasingly willing to prescribe it to pregnant women with bipolar disorder.

Common side effects include: nausea, loss of appetite, mild diarrhea, dizziness, tremors, increased urination, excessive thirst, weight gain, increased white blood cell count, and rash. Other adverse effects not listed here may occur. Contact your physician if you develop any unusual or disturbing symptoms.

Alternate Treatments: Other mood stabilizers include: Depakote, Tegretol, Trileptal, Topomax, Lamictal, Neurontin, Gabitril, and atypical antipsychotics. Supplementary omega 3 fatty acids have been found helpful in some people with milder mood swings. Various forms of psychotherapy are also beneficial. Left untreated, bipolar disorder tends to become more severe and chronic.

