



RAMA UNIVERSITY

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FACULTY OF NURSING
CHAPTER –VII
MENTAL HEALTH NURSING

MOOD DISORDERS

DEFINITION: Mood Disorder are characterized by a disturbance of mood, accompanied by a full or partial manic or depressive syndrome, which is not due to any physical or mental disorder. Prevalence rate of Mood Disorder is 1.5% and it uniform through out world



Mood

Disorders

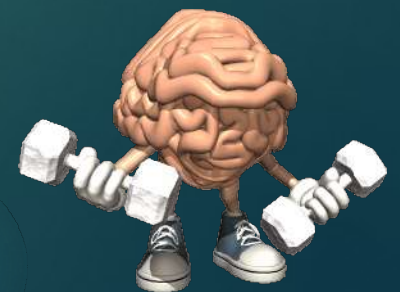
- Definition
- Etiology
- Classification
- Symptoms
- Classification



Definitio

n

- Mood disorders, or affective disorders, are mental health problems such as depression, bipolar disorder, and mania.





Etiolog

y

Brain chemical imbalance

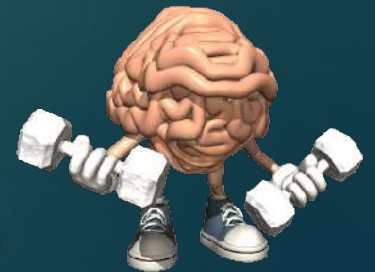
Medical condition

Substance abuse



Hereditary factors

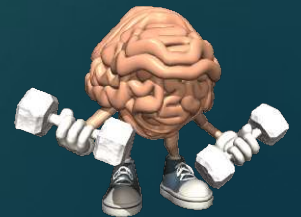
Life events





Symptom

- Common symptoms of mood disorders
- Symptoms of heightened mood that may accompany mood disorders
- Serious symptoms that might indicate a life-threatening condition



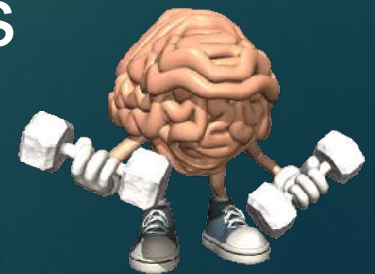



Common symptoms of mood disorders

- Body aches
- Changes in appetite
- Difficulty concentrating
- Difficulty sleeping
- Fatigue
- Feelings of sadness, hopelessness, helplessness or inadequacy

Common symptoms of mood disorders

- Guilt
- Hostility or aggression
- Irritability and mood changes
- Loss of interest in daily life
- Problems interacting with loved ones
- Unexplained weight gain or loss





Symptoms of heightened mood that

may accompany mood disorders

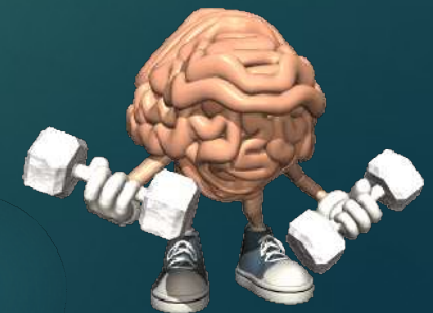
- Abnormally high energy level
- Decreased sleep
- Feelings of omnipotence
- Impulsive behaviors such as spending
sprees

Symptoms of heightened

mood that

may accompany mood disorders

- Poor judgment
- Racing thoughts
- Talking fast or switching conversational topics rapidly





Serious symptoms that might
indicate

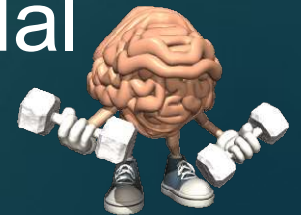
a life-threatening condition

- Being a danger to yourself or others, including threatening, irrational or suicidal behavior.
- Feelings of wanting to die

Serious symptoms that might indicate

a life-threatening condition

- Hearing voices or seeing things that do not exist
- Inability to care for your basic needs
- Suicidal thoughts or expression of suicidal thoughts





Classifications



- Depression
- Bipolar Disorder
- Mania



Depression

- Major Depressive Disorder (MDD)
- Depressive Disorder (DD)

ICD-10 CLASSIFICATION

- ▶ F32 Depressive episode
- ▶ F32.0 Mild depressive episode
- ▶ F32.1 Moderate depressive episode
- ▶ F32.2 Severe depressive episode without psychotic symptoms
- ▶ F32.3 severe depressive episode with psychotic symptoms
- ▶ F32.8 Other depressive episodes –
- ▶ F32.9 Atypical
- ▶ F33 - depressive episode, unspecified - Recurrent depressive disorder



Major Depressive Disorder (MDD)

- Individuals with a major depressive episode or major depressive disorder are at increased risk for suicide.
- Seeking help and treatment from a health professional dramatically reduces the individual's risk for suicide.



Depressive

Disorder

- Atypical Depression (AD)

- is characterized by mood reactivity (paradoxical anhedonia) and positivity, significant weight gain or increased appetite, excessive sleep or somnolence.



Depressive

Disorder

- Melancholic Depression
- Psychotic Major Depression (PMD)
 - melancholic in nature
 - characterized by delusion and hallucinations.
- Non-melancholic Depression
 - Most common sub-type of depression
 - non-biological in nature



Depressive Disorder

- Catatonic Depression

- is a rare and severe form of major depression involving disturbances of motor behavior and other symptoms.

- the person is mute and almost stuporose, and either is immobile or exhibits purposeless or even bizarre movements.



Depressive

Disorder

- Post Partum Depression (PPD)

-it refers to the intense, sustained and sometimes disabling depression experienced by women after giving birth.

- Seasonal Affective Disorder (SAD)

- Dysthymia

-physical and cognitive problems are evident



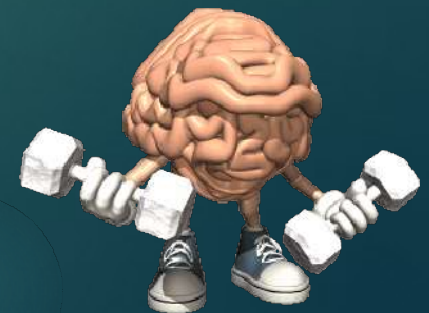
Depressive Disorder

- Double Depression
 - fairly depressed mood (dysthymia)
- Depressive Personality Disorder (DPD)
 - is characterized by an ongoing and inescapable array of depressive thoughts and actions.

Depressive Disorder

- Recurrent Brief Depression (RBD)

- characterized by frequently occurring brief depressive episodes, lasting less than two weeks.



INCIDENCE

- ▶ INCIDENCE is in the range of 10%-15%. about 10% in men, 20% in women

ETIOLOGY

▶ BIOLOGIC THEORIES

- ▶ Neurochemical (decreased nor epinephrine and serotonin and dysregulation of acetyl choline and GABA). Genetic Endocrine
 - HPA axis Circadian rhythm Changes in brain anatomy

▶ PSYCHOSOCIAL THEORIES

- ▶ – Psychoanalytic theory
- ▶ – loss of loved object

ETIOLOGY

- ▶ . Behavioral theory
- ▶ – experience of uncontrollable events
- ▶ Cognitive theory – negative expectations
- ▶ SOCIOLOGICAL THEORY
- ▶ - Stressful life events



Bipolar Disorder

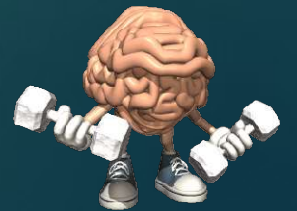
an unstable emotional condition characterized by cycles of persistent abnormal, and low high mood (mania) mood (depression), which was formerly known as "manic depression".



Bipolar Disorder

Sub-types:

- Bipolar I
- Bipolar II
- Cyclothemia
- Bipolar Disorder Not Otherwise Specified (BD-NOS)





Mania

a

- is a state of abnormally elevated or irritable mood, arousal, and/or energy levels.

CLASSIFICATION OF MOOD (AFFECTIVE DISORDER)

- ▶ F30 - Manic Episode
- ▶ F31 - Bipolar Affective Disorder F32 - Depressive Episode
- ▶ F33 - Recurrent Depressive Disorder
- ▶ F34 - Persistent Mood Disorder (cyclothymia and dysthymia)
- ▶ F30 – other mood disorders
- ▶ F30 – unspecified mood disorder

Potential Complications

- Alcohol abuse
- Attempted suicide
- Drug abuse
- Harm to self or others
- Increased risk of illness or infection





Dietary Management

- Nutrient – dense food products
- Essential Anti-oxidant
- Eat “smart” carbs for calming effect
- Eat protein-rich foods for mental alertness



Preventive Measures

- Preventive measures to reduce the incidence of mood disorders are not known at this time. However, early detection and intervention can reduce the severity of symptoms, enhance the individual's normal growth and development, and improve the quality of life experienced by persons with mood disorders.

END

