

## Foundational Seminar in Mental Health

Preliminary program

#### Self-paced learning package: Available from date 22 April 2022

Presentation title	Learning objectives
Mental Health reflective questionnaire submission	<ul> <li>Identify personal learning needs related to Mental Health conditions and Mental Health pharmacy practice</li> <li>Reflect upon common stigmas associated with Mental Health</li> <li>Analyse own confidence levels and attitudes about interacting with Mental Health consumers and carers</li> </ul>
Schizophrenia and related psychoses Viandro Borja, Lead Pharmacist – Alfred Mental and Addiction Health (AMAH), SHPA Mental Health Leadership Committee	<ul> <li>Describe signs and symptoms of schizophrenia and related psychoses</li> <li>Define and provide examples of positive, negative and cognitive signs and symptoms of schizophrenia</li> <li>Identify key features of schizoaffective disorder, substance-induced psychosis and delusional disorder</li> <li>Define common types of delusions such as grandiose, somatic, capgras and persecutory</li> <li>Provide an overview of pharmacological management options for schizophrenia and related psychoses in both acute management and maintenance therapy</li> <li>Briefly describe the mechanism of action and known receptor activity profiles for different antipsychotic agents</li> <li>List some key clinical monitoring requirements for different antipsychotics and explain the rationale behind these</li> <li>Identify and compare key features of different antipsychotic agents, particularly in relation to adverse effect profiles and important counselling points</li> <li>Discuss medication adherence issues in consumers with psychosis</li> </ul>
<b>Bipolar</b> <b>disorder</b> <b>Alistair</b> <b>Meldrum,</b> Senior Pharmacist, Mental Health, Rockhampton Hospital	<ul> <li>Define key terms relating to bipolar disorder including acute mania, hypomania, depressive episode, mixed features and rapid cycling</li> <li>Differentiate between Bipolar I disorder and Bipolar II disorder</li> <li>Name different pharmacological agents used in the treatment of bipolar disorder and broadly explain when each would be most appropriately used; for example in prophylaxis, acute mania</li> <li>Describe the principles of prophylaxis for bipolar disorder</li> <li>Summarise precautions, contraindications, potential adverse effects and important counselling points for lithium therapy</li> <li>Explain therapeutic drug monitoring for lithium in depth</li> <li>Outline the different types of lithium toxicity, describe potential signs and symptoms and identify which consumers are most at risk of this</li> </ul>

# FOUNDATION SEMINAR IN MENTAL HEALTH

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	<ul> <li>Identify precautions, contraindications, adverse effects, counselling points and therapeutic drug monitoring principles for sodium valproate in bipolar disorder</li> <li>Discuss the use of other mood stabilising agents such as lamotrigine and carbamazepine in bipolar disorder</li> </ul>
Depressive and anxiety disorders Alice Wisdom, Senior Pharmacist- Community Mental Health, Northern Adelaide Local Health Network	<ul> <li>Describe in detail typical signs and symptoms of major depression. Compare and contrast mild, moderate and severe classifications of major depression</li> <li>Differentiate between and describe key features of psychotic depression, depression and premenstrual dysphoric disorder</li> <li>Briefly describe features of grief and adjustment disorder</li> <li>Identify co-morbid medical conditions which may contribute to depressive signs/symptoms</li> <li>Discuss a range of non-pharmacological management strategies for depressive disorders</li> <li>Describe in detail typical signs and symptoms of generalised anxiety disorder, obsessive compulsive disorder, posttraumatic stress disorder and panic disorder</li> <li>Differentiate between and describe key features of agoraphobia, separation anxiety disorder, hoarding disorder</li> <li>Discuss a range of non-pharmacological management strategies for and panic disorder</li> <li>Differentiate between and describe key features of agoraphobia, separation anxiety disorder, hoarding disorder</li> <li>Discuss a range of non-pharmacological management strategies for anxiety disorder, barding disorder</li> <li>Discuss a range of non-pharmacological management strategies for anxiety disorders</li> <li>Compare principles of use of antidepressant medications in depressive and anxiety disorders</li> <li>Outline key principles for safe and optimal antidepressant medication use in general including important counselling points for consumers and appropriate cessation or switching of agents</li> <li>Name a range of drugs which may contribute to serotonin toxicity. Describe signs, symptoms and management of serotonin toxicity</li> <li>Describe mechanism of action, indications, precautions, contraindications, adverse effects, appropriate dose ranges, counselling points, interactions and clinical monitoring for the different classes of antidepressants</li> <li>Analyse utility, risks, advantages and disadvantages of benzodiazepines in anxiety disorders</li> </ul>
Personality disorders Sathya Rao, Director, Spectrum	<ul> <li>Describe 'cluster A', 'cluster B' and 'cluster C' in the context of personality disorders and give examples of each of these</li> <li>Describe key features of borderline personality disorder and outline principles for treatment and management</li> <li>Consider stigmas associated with personality disorders</li> <li>Analyse the limited role of pharmacotherapy for different personality disorders and give a brief overview of the general non-pharmacological management for them</li> </ul>
Depots in depth Stewart Bailey, Senior	<ul> <li>Analyse and compare specific risks and benefits associated with different LAIs, as well as advantages and disadvantages of LAIs in general</li> <li>Describe initiation dosing regimens, and dose ranges and frequencies for different LAIs</li> <li>Describe in detail and compare the pharmacokinetic properties of different LAIs</li> </ul>

## FOUNDATION SEMINAR IN MENTAL HEALTH

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Pharmacist,	<ul> <li>Describe the physicochemical properties of different LAI formulations and</li></ul>
Mental Health,	understand how these relate to their pharmacokinetics and clinical effects <li>Describe the pharmacodynamic properties and receptor activity profiles of different</li>
Toowoomba	LAI formulations and understand how these relate to their pharmacokinetics,
Hospital,	clinical effects and adverse effect profiles <li>Outline principles and rationales for oral antipsychotic supplementation with</li>
Darling Downs	different LAIs <li>Summarise administration particulars for different LAIs including injection sites and</li>
Health, Qld	medication handling/storage <li>Discuss strategies for managing missed LAI doses</li> <li>Discuss strategies for switching between different LAIs</li> <li>Identify monitoring for different LAIs. Describe olanzapine post-injection syndrome</li> <li>Explain why antipsychotic long acting injections (LAIs) are high risk medications</li>
Finding Mental Health information	<ul> <li>Identify appropriate information resources for Mental Health medications and critically evaluate their utility and quality</li> </ul>
<b>Clozapine</b>	<ul> <li>Outline the indication and rationale for clozapine use</li> <li>Describe the pharmacology of clozapine and relate this to its therapeutic effects</li></ul>
<b>Amy Sieff,</b>	and side effects <li>Identify key components of a clozapine pre-treatment workup and necessary</li>
Senior	baseline blood tests, acknowledging that clinical guidelines in different jurisdictions
Pharmacist -	differ somewhat <li>Discuss cardiac risks of clozapine, particularly myocarditis and cardiomyopathy,</li>
Medication	detailing appropriate monitoring and screening for these <li>Describe required haematological monitoring for clozapine therapy and registration</li>
Safety and	with monitoring databases and explain the rationale for this <li>Explain how clozapine is typically initiated and discuss the rationale for this,</li>
Antimicrobial	including dose titration and clinical monitoring (again noting some guidelines may
Stewardship,	differ) <li>List significant side effects of clozapine and risks associated with these, including</li>
Mental Health,	but not limited to constipation, hypersalivation and sedation <li>Discuss physical and metabolic health and risks in relation to clozapine and</li>
South Western	recommended monitoring and management strategies <li>Describe the significance and utility of clozapine and norclozapine levels</li> <li>Explain how clozapine cessation should be managed, whether as part of a</li>
Sydney Local	treatment plan or an unplanned treatment interruption <li>Identify and describe clinically significant interactions with clozapine, including</li>
Health District	caffeine, smoking and prescription medications



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### **Foundational Seminar in Mental Health**

#### **Preliminary program**

All times listed are in AEST

### Saturday 4<sup>th</sup> June 2022

Time (AEST)	Session
0920-0930	Online login available
0930-0940	Welcome, introduction, housekeeping
0940-1025	<ul> <li>Open Q&amp;A and panel discussion: lived experience of Mental Health conditions and our own perceptions</li> <li>Panel members: Rita Brown, Carer Consultant, Spectrum – Personality Disorder Service for Victoria Tash Swingler, Lived Experience Lead, Mental Health Program, The Royal Children's Hospital, Dr Claire O'Reilly, Senior Lecturer, The University of Sydney School of Pharmacy Viandro Borja, Lead Pharmacist - Mental and Addiction Health, Alfred Health</li> </ul>
1025-1130	Session title: Finding Mental Health information Presented by Dr Chris Alderman, A/Prof Pharmacy Practice, University of South Australia
1130-1150	Break
1150-1200	Case session introduction
1200-1315	Case session 1: Unresponsive on the Mental Health unit and headed to ICU – what went wrong? Led by Amy Sieff, Senior Pharmacist - Medication Safety and Antimicrobial Stewardship, Mental Health, South Western Sydney Local Health District Tutors: Katie Ho, Philippa Scott, George Ma, Julian Tran
1315-1345	Presentation: Same, same but different Presented by Julian Tran, Advanced Resident Pharmacist, Mental Health, Alfred Health
1345-1415	Break
1415-1545	Case session 2: 'Chronic' and 'complex'; how can pharmacists help? Led by Michael Hudson, Acting Senior Pharmacist - Concord Centre for Mental Health Tutors: Amy Sieff, Katie Ho, Philippa Scott, George Ma
1545-1600	Break
1600-1730	Case session 3: When the pharmacist can relate Led by Lil Vrklevski, Principal Clinical Psychologist and Director of Psychology, Sydney Local Health District. Tutors: Amy Sieff, Philippa Scott, Katie Ho
1730-1745	Open Q&A
1745	Close of live virtual seminar

Please note: presentation recordings from the live virtual seminar will not be available.