

Foundation Seminar in Mental Health

Preliminary program

This seminar will be delivered by a combination of a 6-week self-paced learning package followed by a live one-day seminar

Self-paced learning package: available from Friday 21 March 2025

The self-paced learning package comprises approximately 6.5 hours of learning materials. The self-paced learning package materials must be completed prior to attending the live virtual seminar.

Area	Topics covered	Presenters
Mental Health reflective questionnaire submission	<ul style="list-style-type: none"> Identify personal learning needs related to Mental Health conditions and Mental Health pharmacy practice Reflect upon common stigmas associated with Mental Health Analyse own confidence levels and attitudes about interacting with Mental Health consumers and carers 	
Schizophrenia and related psychoses	<ul style="list-style-type: none"> Describe signs and symptoms of schizophrenia and related psychoses Define and provide examples of positive, negative and cognitive signs and symptoms of schizophrenia Identify key features of schizoaffective disorder, substance-induced psychosis and delusional disorder Define common types of delusions such as grandiose, somatic, capgras and persecutory Provide an overview of pharmacological management options for schizophrenia and related psychoses in both acute management and maintenance therapy 	<p>Viandro Borja, Lead Pharmacist – Alfred Mental and Addiction Health (AMAH), SHPA Mental Health Leadership Committee</p> <p>Jake Bromley, Senior Pharmacist – Psychotropic Stewardship, The Alfred Hospital, Melbourne, Vic</p>

	<ul style="list-style-type: none"> • Briefly describe the mechanism of action and known receptor activity profiles for different antipsychotic agents • List some key clinical monitoring requirements for different antipsychotics and explain the rationale behind these • Identify and compare key features of different antipsychotic agents, particularly in relation to adverse effect profiles and important counselling points • Discuss medication adherence issues in consumers with psychosis 	
Bipolar disorder	<ul style="list-style-type: none"> • Define key terms relating to bipolar disorder including acute mania, hypomania, depressive episode, mixed features and rapid cycling • Differentiate between Bipolar I disorder and Bipolar II disorder • 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 • Describe the principles of prophylaxis for bipolar disorder • Summarise precautions, contraindications, potential adverse effects and important counselling points for lithium therapy • Explain therapeutic drug monitoring for lithium in depth • Outline the different types of lithium toxicity, describe potential signs and symptoms 	Alistair Meldrum, Senior Pharmacist, Mental Health, Rockhampton Hospital

	<p>and identify which consumers are most at risk of this</p> <ul style="list-style-type: none"> • Identify precautions, contraindications, adverse effects, counselling points and therapeutic drug monitoring principles for sodium valproate in bipolar disorder • Discuss the use of other mood stabilising agents such as lamotrigine and carbamazepine in bipolar disorder 	
<p>Depressive and anxiety disorders</p>	<ul style="list-style-type: none"> • Describe in detail typical signs and symptoms of major depression. Compare and contrast mild, moderate and severe classifications of major depression • Differentiate between and describe key features of psychotic depression, depression with melancholic features, seasonal affective disorder, substance-induced depression and premenstrual dysphoric disorder • Briefly describe features of grief and adjustment disorder • Identify co-morbid medical conditions which may contribute to depressive signs/symptoms • Discuss a range of non-pharmacological management strategies for depressive disorders • Describe in detail typical signs and symptoms of generalised anxiety disorder, obsessive compulsive disorder, posttraumatic stress disorder and panic disorder • Differentiate between and describe key features of agoraphobia, separation anxiety 	<p>Alice Wisdom, Senior Pharmacist-Community Mental Health, Northern Adelaide Local Health Network</p>

	<p>disorder, social anxiety disorder, common specific phobias, body dysmorphic disorder, hoarding disorder</p> <ul style="list-style-type: none"> • Discuss a range of non-pharmacological management strategies for anxiety disorders • Compare principles of use of antidepressant medications in depressive and anxiety disorders • 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 • Name a range of drugs which may contribute to serotonin toxicity. Describe signs, symptoms and management of serotonin toxicity • Describe mechanism of action, indications, precautions, contraindications, adverse effects, appropriate dose ranges, counselling points, interactions and clinical monitoring for the different classes of antidepressants • Analyse utility, risks, advantages and disadvantages of benzodiazepines in anxiety disorders 	
Clozapine	<ul style="list-style-type: none"> • Outline the indication and rationale for clozapine use • Describe the pharmacology of clozapine and relate this to its therapeutic effects and side effects • Identify key components of a clozapine pre-treatment workup and necessary baseline blood tests, acknowledging that clinical 	<p>Amy Sieff, Senior Pharmacist - Medication Safety and Antimicrobial Stewardship, Mental Health, South Western Sydney Local Health District</p>

	<p>guidelines in different jurisdictions differ somewhat</p> <ul style="list-style-type: none"> • Discuss cardiac risks of clozapine, particularly myocarditis and cardiomyopathy, detailing appropriate monitoring and screening for these • Describe required haematological monitoring for clozapine therapy and registration with monitoring databases and explain the rationale for this • Explain how clozapine is typically initiated and discuss the rationale for this, including dose titration and clinical monitoring (again noting some guidelines may differ) • List significant side effects of clozapine and risks associated with these, including but not limited to constipation, hypersalivation and sedation • Discuss physical and metabolic health and risks in relation to clozapine and recommended monitoring and management strategies • Describe the significance and utility of clozapine and norclozapine levels • Explain how clozapine cessation should be managed, whether as part of a treatment plan or an unplanned treatment interruption • Identify and describe clinically significant interactions with clozapine, including caffeine, smoking and prescription medications 	
--	---	--

<p>Managing Metabolic Side Effects of Psychotropics</p>	<ul style="list-style-type: none"> • Describe the metabolic risks associated with psychotropic medications • Outline recommendations for physical health monitoring for these medications • Develop strategies and interventions to manage associated physical health conditions • Describe lifestyle modifications and resource that can improve physical health • Explain the role of interdisciplinary collaboration in managing metabolic side effects of psychotropics 	<p>Cathy Ngo, Senior Pharmacist, Eastern Health, Melbourne, Vic</p>
--	--	--

Live virtual seminar: Saturday 3 May 2025

All times are listed in AEDT. The below may be subject to change

Time (AEDT)	Session
0920-0930	Online login and registration available
0930-0940	Welcome, introductions & housekeeping
0940-1000	Review of self-paced learning package content with open Q&A
1000-1030	Same, same but different
1030-1050	Break
1050-1055	Case session introduction
1055-1155	Case session 1: Unresponsive on the Mental Health unit and headed to ICU – what went wrong?
1155-1220	Break
1220-1320	Case session 2: 'Chronic' and 'complex'; how can pharmacists help?
1320-1335	Break
1335-1435	Case session 3: Bipolar disorder
1435-1505	Panel discussion and open Q&A
1505	Seminar close

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