A PATIENT'S JOURNEY Consequences of Antidepressants/Benzodiazepines

LIFE CRISIS AND/OR TRAUMA FEELING OVERWHELMED

Insomnia, anxiety, panic, anger, depressed, not coping

VISIT EFFECTIVE THERAPIST

TELL STORY - FEEL HEARD & VALIDATED

Psychoeducation, understanding

Breathing, Guided Imagery

Trauma recognised/healing

PATIENT RETURNS TO LIFE - NEEDS MET

VISIT GP

Started on antidepressants (AD) or benzodiazepines (BZ) GP advises: Stay on ADs for **AT LEAST SIX MONTHS**

> Patient wishes to stop GP advises rapid taper Withdrawal symptoms

Doctor misdiagnoses relapse, puts patient back on ADs/BZs

No response or adverse effects = dosage increased or other drugs added

Patient unable to stop, seeks help elsewhere

SLOW TAPER

Patient may or may not get off the drugs

Withdrawal problems Protracted syndrome

Multiple physical symptoms

Patient seeks medical advice

GP blames underlying condition Patient undergoes extensive

and costly tests

GP/Specialist diagnoses Medically Unexplained Symptoms (MUS)

Functional Somatic Syndromes Treated with CBT/Graded exercise Potentially given ADs

Patient disabled with no understanding and little support

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"Clinicians need to add SSRI to the list of drugs potentially inducing withdrawal symptoms upon discontinuation, together with benzodiazepines, barbiturates and other psychotropic drugs" (Fava G. A. et al 2015)

SIGNS AND SYMPTOMS OF WITHDRAWAL FROM SSRI

(www.karger.com/Article/FullText/370338)

SYSTEM INVOLVED	SYMPTOMS
General	Flu-like symptoms, fatigue, weakness, tiredness, headache, tachycardia, dyspnea
Balance	Gait instability, ataxia, dizziness, light headedness, vertigo
Sensory	Paraesthesias, electric-shock sensations, myalgias, neuralgias, tinnitus, altered taste, pruritus
Visual	Visual changes, blurred vision
Neuromotor	Tremor, myoclonus, ataxia, muscle rigidity, jerkiness, muscle aches, facial numbness
Vasomotor	Sweating, flushing, chills
Sleep	Insomnia, vivid dreams, nightmares, hypersomnia, lethargy
Gastrointestinal	Nausea, vomiting, diarrhea, anorexia, abdominal pain
Affective	Anxiety, agitation, tension, panic, depression, intensification of suicidal ideation, irritability, impulsiveness, aggression, anger, bouts of crying, mood swings, derealization and depersonalization
Psychotic	Visual and auditory hallucinations
Cognitive	Confusion, decreased concentration, amnesia
Sexual	Genital hypersensitivity, premature ejaculation

what is MUS?

"Medically Unexplained Symptoms (MUS) refers to persistent bodily complaints for which adequate examination does not reveal sufficiently explanatory structural or other specified pathology. MUS are common, with a spectrum of severity, and patients are found in all areas of the healthcare system.

Patients with MUS are more likely to attribute their illness to physical causes rather than lifestyle factors. This can include symptoms such as pain in different parts of the body, functional disturbance of organ systems and complaints of fatigue or exhaustion."

FUNCTIONAL SOMATIC SYNDROMES			
SYMPTOMS (COMBINATION OF)	SYNDROME		
Bloating, constipation, loose stools, abdominal pain	Irritable Bowel Syndrome		
Fatigue (particularly post-exertional and long recovery) pain, sensitivity to smell	Chronic Fatigue Syndrome, Myalgic Encephalomyelitis		
Headache, vomiting, dizziness	Post Concussion Syndrome		
Pelvic pain, painful sex, painful periods	Chronic pelvic pain		
Pain and tender joints, fatigue	Fibromyalgia/Chronic widespread pain		
Chest pain, palpitations, shortness of breath	Non cardiac chest pain		
Shortness of breath	Hyperventilation		
Jaw pain, teeth grinding	Temporo-mandibular Joint Dysfunction		
Reaction to smells, light	Multiple Chemical Sensitivity		
Source: Joint Commissioning Panel for mental health, Guidance MUS, Feb 2017, www.jcpmh.info			

NOTE THE CLEAR SIMILARITIES IN THE SYMPTOMS OF WITHDRAWAL AND 'UNEXPLAINED' SYMPTOMS