Medication decisions are best discussed and decided by a patient and their mental health care provider. Information included in this fact sheet may be included in those discussions.

Medications can be an important part of a treatment plan. However, medications may work better for one person than for another. Doctors usually review clinical records and see if there is an evidence base for recommending one type of medicine over another. Family history and side effects also come into play when prescribing medication.

It can take time and trying different medication or combinations of medications to find what works best for you. If you feel a medication doesn't work, or you are having side effects, consult with a provider to adjust the treatment plan.

Some medications can be prescribed “off-label,” which means they haven’t been approved by the FDA for a given condition. A doctor should justify his thinking in recommending any treatment as well as be clear about the limits of the research around that medication.

NAMI has brief summaries of mental health medications provided by the American College of Psychiatric and Neurologic Pharmacists.

**Types of Medications**

Psychiatric medications work by influencing the brain chemicals regulating emotions and thought patterns. Following your doctor’s instructions will reduce side effects and discomfort. Whenever stopping a medication, it’s necessary to work with a doctor to taper off the dosage while brain chemicals get used to the change.

**Antipsychotics**

These medications reduce or eliminate the symptoms of psychosis (delusions and hallucinations) by impacting the brain chemical called dopamine. Antipsychotics play an important role in treating schizophrenia and schizoaffective disorder.

Antipsychotics are divided into two groups—first generation and second generation antipsychotics. The main differences between the two groups are the areas of the brain that they affect and their side effects. Second-generation antipsychotics aren’t necessarily better or worse than first-generation, but do have different side effects. First-generation medications may cause a side effect known as *tardive dyskinesia*. This is an uncomfortable, potentially embarrassing condition in which the brain misfires and causes random, uncontrollable muscle movements or tics. Second-generation antipsychotics are more likely to result in weight gain. The important thing is to find the medication that works best for you.

People who have difficulty remembering to take daily pills, or people who have a history of discontinuing medication, may have better results by taking medication as a shot at the doctor’s office once or twice a month. This shot is called a long-acting injectable antipsychotic medication (LAI) and it has the same effects as medication taken in pill form.
**Antidepressants**
These medications improve the symptoms of depression by impacting the brain chemicals associated with emotion, such as serotonin, norepinephrine and dopamine.

Newer medications, SSRIs and SNRIs (selective serotonin reuptake inhibitors and selective norepinephrine reuptake inhibitors), have fewer side effects than older drugs, but no medication is free from side effects. Many people won't experience these side effects, or will see them go away within a few weeks.

Older types of antidepressants, which include tricyclics and MAOIs (monoamine oxidase inhibitors), may be prescribed by a mental health professional if newer medications do not seem to be effective. Monoamine oxidase inhibitors (MAOIs) are the least prescribed antidepressants because they can cause dangerously high blood pressure if combined with certain foods or medications.

Many antidepressants may also be useful for treating depression that is mixed with anxiety. Some antidepressants may be useful for PTSD, generalized anxiety disorder and OCD, but may require higher doses. Depression that is part of bipolar disorder requires more careful assessment, as antidepressants may worsen the risk of mania and provide little help for depression associated with bipolar disorder.

**Anti-Anxiety Medications**
Certain medications work solely to reduce the emotional and physical symptoms of anxiety. Benzodiazepines such as alprazolam (Xanax) can treat social phobia, generalized anxiety disorder and panic disorder. Heart medications known as beta-blockers are also effective at treating the physical trembling and sweating that people with phobias experience in difficult situations.

Benzodiazepines work quickly and are very effective in the short-term. People prone to substance abuse may become dependent on them, however. It also may be necessary to increase the dosage over time.

**Mood Stabilizers**
Mood stabilizers are the most common medications for treating the mood swings of bipolar disorder. The oldest of them, Lithium, has been in use for over 50 years and has proven very effective, particularly for bipolar I disorder. However, regular blood tests are a requirement if you’re taking Lithium, which has potential serious side effects to the kidneys and thyroid. Mood stabilizers can prevent highs (manic or hypomanic episodes) and lows (depressive episodes). All have important side effects to know about and monitor.

See more at [http://www.nami.org/Learn-More/Treatment/Mental-Health-Medications](http://www.nami.org/Learn-More/Treatment/Mental-Health-Medications)

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