Affective disorders - Mood disorders
Zoltán Hidasi
Definitions

• Affect: Observed expression of emotion

• Mood: Pervasive and sustained emotion subjectively experienced and reported by the patient and observed by others
Mood disorders

- Syndromes
- Classification
- Epidemiology
- Diagnosis
- Etiology
- Therapy
Syndromes: Depression

• General description: psychomotor retardation, stooped posture, no spontaneous movements, awerted gaze
• Mood-affect: depressed mood, loss of energy, interest
• Speech: decreased rate and volume, delayed answers
• Perception: hallucinations
• Thought: negative thoughts (worthlessness, loss, guilt, death, suicide - delusions)
• Memory: impaired
• Somatic: loss of appetite, insomnia, hypossexualitiy
Syndromes: Mania (hypomania)

- General description: Excited, talkative, hyperactive
- Mood-affect: elevated mood, euphoria, irritability, low frustration tolerance (anger, hostility)
- Speech: increased rate and volume, difficult to interrupt
- Thought: flight of ideas, loosened associations, increased self confidence, grandiosity, delusions (great wealth, extraordinary abilities, power)
- Judgment: impaired, disinhibition, impulsivity, no insight
- Somatic: loss or increased appetite, insomnia, hypersexualitiy
Classification

- long term course
- etiology
- severity
  - mild
  - moderate
  - severe without psychotic features
  - severe with psychotic features
Classification - epidemiology

• Depressive disorders  lifetime prevalence
  – Major depressive disorder  10-25% w, 5-12% m
  – Dysthymic disorder  6%

• Bipolar disorders
  – Bipolar I.  0.4-1.6%
  – Bipolar II.  0.5%
  – Cyclothymic disorder  0.4-1.0%
Etiology

- **Primary depression (incl. „endogenous”)**
  - major depressive disorder
  - dysthymic disorder
  - bipolar disorder
  - cyclothymia
- **Secondary depression**
- **Other mental disorders with depressive features**
Etiology - Primary mood disorders

• Biological factors
  – Biogenic amines (norepinephrine, serotonin, dopamine, etc)
  – Neuroendocrine regulation (adrenal axis, thyroid axis, etc)
  – neuroimmun regulation, brain imaging, neuroanatomy, etc.

• Genetic factors

• Psychosocial factors (life events and stress, personality factors, psychodynamic factors)
Etiology - secondary mood disorders

• Mood disorders due to a general medical condition
  – neurological cause (tumor, trauma, neurodegenerative disease, cerebrovascular, infection, multiple sclerosis, etc)
  – extraneurological or systemic cause (neoplasm, infection, cardiovascular disease, metabolic changes, endocrine dysfunction, etc.

• Substance induced mood disorders
  – pharmacological cause (antihypertensives, steroids, analgetics, anxiolitics, etc.)
  – drug intoxication and withdrawal (alcohol, sedatives, cocaine, amphetamines, etc.)
Other mental disorders with depressive features

- Anxiety disorders (generalized anxiety, mixed anxiety-depressive disorder, panic disorder, etc.)
- Eating disorders
- Schizophrenia - schizoaffective disorder
- Somatoform disorders (somatization disorder)
- Alcohol use disorders
- Adjustment disorder
mood

time
Consequences

- Disability
- Alcohol, sedative, drug abuse
- Dependence
- Suicide (15%)
Therapy

- Pharmacotherapy
- Psychotherapy
  - cognitive - behavior therapy
  - interpersonal approach
  - psychodynamic approach
  - family therapy
- Combination
Pharmacotherapy

• Depression
  – antidepressants (tricylic, tetracyclic, SSRI, MAOI, double action, dopaminergic)
  – anxiolytics (e.g. BZD)
  – ECT (electroconvulsive therapy)

• Mania
  – antimanic treatment (lithium, valproate, CBZ, BZD, antipsychotics)

• Bipolar disorder
  – mood stabilizer (lithium, valproate, CBZ, other anticonvulsants)