

# Psychiatric medications remain a mystery

As trial medications flood campuses, students cope with substance dependence issues before they are old enough to buy a drink.

The precise function of bipolar and depression medications is unclear. An exact biological explanation for these disorders continues to elude modern science.

With numerous expectations weighing down the shoulders of youths and college students, many find the load too heavy to bear without professional help. According to the National Institute of Mental Health, doctors and psychiatrists diagnosed more students with bipolar disorder and depression this year than ever before.

Psychiatric treatment for these disorders, some students report, initially makes life harder instead of easier.

"My treatment is more like chemotherapy than any other medical process I can imagine," said Robert Uhren, senior at Asheville High School. Diagnosed with a nonspecific mood disorder and depression last year, Uhren said he has high hopes for long-term success, but that former short-term goals now seem unrealistic.

Prior to seeking help, Uhren competed for Asheville High's valedictorian position. Since his diagnosis, treating the disorder is his primary concern and school is on the back burner, he said.

"My psychiatrist admits my disorder is not very well understood, nor the medications used to treat it," Uhren said. "Treatment for my disorders seems an experimental process. When I get too manic, my uppers get reduced or my downers increased until the medicine balances my personality."

During the nine months since his diagnosis, psychiatrists tried more than 15 prescription medications to treat Uhren's disorder, which included Lithium, Depakote, Abilify and Ambien. Currently, Uhren takes six medications several times a day.

"Lately, I have been experiencing some side effects, I think from Abilify," Uhren said.



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Increased levels of energy are a common side effect of Abilify, according to officials. Instead of feeling lethargic all the time, Uhren said now he feels like he has ADHD and cannot sit still or concentrate. "I am jittery pretty much all of the time," he said.

Under the varied effects of these drugs, passing classes requires additional effort from Uhren, his teachers and even his psychiatrist, who often writes notes excusing Uhren from class. Currently, Uhren attends an average of three days of school per week. Being valedictorian is no longer an option for this student, whose transcript is now full of Bs and Cs.

Uhren's process is a medical trial and it takes longer for some than others. Medical trials are used to treat conditions or disorders with unclear biological causes. After two failed trial periods, psychiatrists usually reassess their initial diagnosis and adjust the prescription path accordingly.

Patients exposed to this experimental process often find help. However, as many of the drugs are poorly understood, individuals run the risk of serious adverse side effects.

"I've been diagnosed as bipolar and depressed. Also, doctors tell me I have generalized anxiety disorder with social anxiety," Alex Clymer said. The Asheville native, now 24 and in college, first sought help in high school. During her treatment, Clymer visited more than 12 doctors for psychiatric aid.

"A few told me I was just going through a rough period in life, but my diagnoses varied with every new doctor," she said.

Medical trials are also necessary because many patients, like Clymer and Uhren, experience co-morbidity,

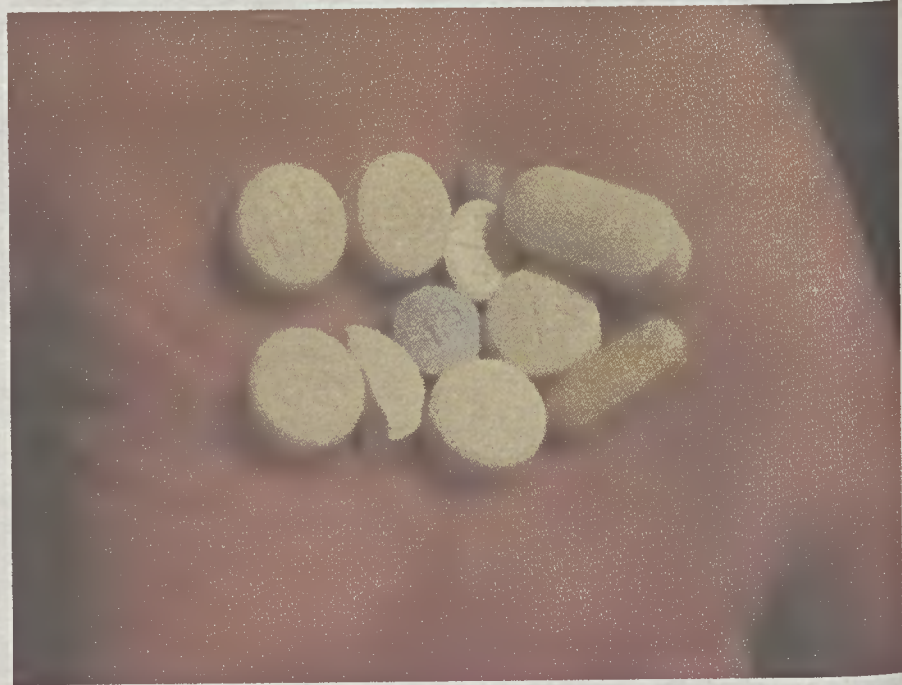


Photo Courtesy of Robert Uhren

**Robert Uhren, a local high school senior, holds his daily medication.**

which means they have more than one condition or disorder at the same time. People diagnosed with bipolar disorder, for instance, may face social or occupational repercussions resulting in mild depression. Seeking psychiatric treatment would mean a prescription for bipolar medication as well as depression medications.

Another problem with these diagnoses is psychiatrists do not fully understand the biological origin or dysfunction of these disorders, or the function of many drugs used to treat them. Also, most of these drugs, aside from Lithium, are relatively new, and long-term side effects have yet to be determined.

"I got tired of all the trial and error, all the ups and downs. I eventually lost hope and stopped taking my medications," Clymer said. Diagnosed as a teen, doctors prescribed Clymer more medications than she cares to count, she said. Now, several years after her last trial, she no longer takes any medications. Instead, Clymer looks inward to find a solution for her problems.

Many medications treating these mental disorders come with risk of dependency and side effects. Addiction to any substance is hard to overcome. For teenagers in high school

or college, battling addiction puts the odds of excelling against them.

"Withdrawing from these drugs is very hard. All of the emotions come back, positive and negative, which is overwhelming after a long time of the nothingness produced by medications. It's hard to figure out how to handle life again," Clymer said.

On the advice of her psychiatrist, she weaned herself off the drugs rather than quitting abruptly. However, Clymer said the process is difficult and sometimes painful.

"At times I was so dizzy I could hardly drive. I got 'brain zaps,' I don't know what they are exactly. I looked them up and found out they are a common withdrawal symptom from Lexapro," Clymer said.

Therapy combined with medications is the best form of treatment, according to NIMH. "I'm not putting all my faith in the medications, which is why I am also seeing a psychologist," Uhren said.

As students encounter difficulty, mood swings or sadness, it's important to consider both short-term and long-term implications when seeking medication. While medications sometimes work, others may find better, faster or longer-lasting solutions within themselves.