



## Clinical Psychiatric Disorders and Medications Involved in Psychotherapy

Marmar Gaines\*

Department of Psychiatry, University of Toronto, Toronto, USA

### DESCRIPTION

Psychiatric drugs are prescribed to treat various mental health problems when they significantly interfere with healthy functioning. Psychotropic drugs usually work by altering or balancing levels of important chemicals in the brain called neurotransmitters. An increase or decrease in neurotransmitters such as dopamine, serotonin, and norepinephrine ameliorate some mental health problems. Psychiatric medications are usually prescribed by a psychiatrist, psychiatric nurse, or family physician. In some areas, clinical psychologists may also have prescribing privileges. A drug that works for one person may not work for another. It is important to thoroughly discuss with the patient's medical history, symptoms, diagnosis, and treatment with the doctor before starting any psychiatric medication. Psychiatric drugs cannot be purchased legally without a prescription.

Psychotherapy with a mental health professional allows learning more about the condition and talking about the patient's moods, feelings, thoughts and behaviors. The patient can learn how to manage stress and manage disability. Psychotherapy can be provided in individual sessions, group therapy, or sessions involving family and friends. There are many different types of psychotherapy. Psychotherapists can identify and treat patients. Family therapy provides support and education to families dealing with families with personality disorders. In some cases, the personality disorder is so severe that it requires hospitalization for psychiatric treatment. This is generally recommended only if they were unable to properly care or are in imminent danger of harming themselves or others. Neurotransmitters are chemicals that allow brain cells to communicate with each other. It's a messenger that lets the patient weak or overactive neurotransmitters can trigger unwanted chemical reactions that lead to mental illness. They

can treat mental disorders alone and are sometimes most effective when combined with psychotherapy. These drugs can be used to treat panic attacks, phobias, generalized anxiety, and various anxiety-related symptoms. Antianxiety medications include beta-blockers and help treat physical symptoms of anxiety, such as increased heart rate, nausea, sweating, and tremors. Because they usually cause drowsiness, some sedatives and sleep aids are also used to treat anxiety and insomnia. These are usually prescribed for short periods only to avoid addiction. Psychosis describes several conditions that affect the mind. It is often manifested by a person experiencing delusions or hallucinations, disconnected from reality. Antipsychotics help people with psychosis think more clearly, feel calmer, sleep better, and communicate more effectively. Older people tend to take more medications and are at higher risk of adverse drug interactions, missed doses, or overdoses. They also tend to be more sensitive to the drug, so proper dosage and frequency is important for risk management.

Current approaches to understanding neuropsychiatric disorders face a variety of psychological and philosophical challenges. Psychological challenges challenge the assumption that the sum of individual parts (that is, discrete actions) is sufficient to fully explain and understand the larger behavioral complex. And philosophically, some have suggested that psychological processes, including the conscious experiences essential to psychiatric disorders, are related to and arise from the complexity of brain function. Psychotropic drugs carry the risk of neurotoxic side effects. The development of neurotoxic effects can reduce drug compliance. Some side effects can be treated symptomatically with adjunctive drugs, such as anticholinergic (antimuscarinic) drugs. Some rebound or withdrawal symptoms such as Sudden or severe onset or recurrence of the psychosis associated with antipsychotic drug withdrawal can occur if the drug is discontinued or discontinued too quickly.

**Correspondence to:** Marmar Gaines, Department of Psychiatry, University of Toronto, Toronto, USA, E-mail: Gaines\_m@edu.com

**Received:** 11-Nov-2022, Manuscript No. JP-22-19389; **Editor assigned:** 14-Nov-2022, PreQC No. JP-22-19389 (PQ); **Reviewed:** 02-Dec-2022, QCNo. JP-22-19389; **Revised:** 13-Dec-2022, Manuscript No. JP-22-19389 (R); **Published:** 22-Dec-2022, DOI: 10.35248/2329-6887.22.10.407.

**Citation:** Gaines M (2022) Clinical Psychiatric Disorders and Medications Involved in Psychotherapy. J Pharmacovigil. 10:407.

**Copyright:** © 2022 Gaines M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.