

# Mood stabilisers

This factsheet gives information about mood stabilising medication, which can balance out the highs and lows of your mood. It can help if you live with mood swings linked to mental illness or a personality disorder. This information is for adults affected by mental illness in England. It's also for their carers, friends and relatives and anyone interested in this subject.

## Key Points.

- You may experience mood swings if you live with some mental illnesses, including bipolar disorder, schizoaffective disorder and some personality disorders.
- Mood swings can mean that you have extreme high moods or mania and low moods or depression. If you have a mood disorder, you may be given mood stabilising medication. It can help to even out the highs and the lows of your mood.
- There are different types of medication that can help stabilise mood.
- Everyone reacts differently to medication and there can be side effects. You can speak to your doctor about your medication if get bad side effects.
- Mood stabilisers can affect you if you're pregnant or are breast feeding. They can affect driving too. Other medication and alcohol might affect you if you take mood stabilisers. Your doctor can advise you on these things.

### This factsheet covers:

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## 1. What are mood stabilisers?

Mood stabilisers are a type of medication that can help if you have mood swings such as mania, hypomania and depression. They help to control and even out these mood swings.

Although antidepressants can help to lift your mood, they aren't in the group of drugs medical professionals call mood stabilisers.<sup>1</sup>

You can be offered either an antidepressant or a mood stabiliser on their own. Or sometimes you can be offered an antidepressant together with a mood stabiliser.<sup>2</sup>

You can find more information about '**Antidepressants**' at [www.rethink.org](http://www.rethink.org) or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

### **What is mania?**<sup>3</sup>

Symptoms of mania can include:

- Feeling happy or excited, even if things are not going well for you
- Being full of new and exciting ideas
- Moving quickly from one idea to another
- Being more irritable than normal
- Feeling more important than usual
- Talking very quickly, jumping from one idea to another, racing thoughts
- Being easily distracted and struggling to focus on one topic
- Being over familiar with people
- Not being able to sleep, or feeling that you don't want to sleep
- Thinking you can do much more than you can
- Making unusual, or big decisions without thinking them through
- Hearing voices that other people can't hear
- Doing things you normally wouldn't which can cause problems, such as:
  - spending a lot of money,
  - being more interested in sex,
  - using drugs or alcohol,
  - gambling, or
  - making unwise business or other decisions.

### **What is hypomania?**

Hypomania is like mania, but you will have milder symptoms. Treatment for hypomania is similar to the treatment for mania.<sup>4</sup>

## What are the symptoms of depression?<sup>5</sup>

Symptoms of depression can include:

- Low mood
- Having less energy and feeling tired
- Feeling hopeless or negative
- Feeling guilty, worthless, or helpless
- Being less interested in things you normally like doing or enjoying them less
- Difficulty concentrating, remembering, or making decisions
- Feeling restless or irritable
- Sleeping too much or not being able to sleep
- Feeling more hungry than usual, or less
- Losing or gaining weight when you do not mean to
- Thoughts of death or suicide, or suicide attempts.

Your mood may change quickly between mania and depression.

Your doctor may offer you mood stabilisers if you have an episode of mania, hypomania or depression that changes or gets worse suddenly. This is called an acute episode. Some people need to take mood stabilisers as a long-term treatment to stop this from happening.

You may experience mania or depression if you have a condition such as bipolar disorder, schizoaffective disorder, depression, or personality disorder.

You can find more information about:

- Bipolar disorder
- Schizoaffective disorder
- Depression
- Personality disorders

at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## 2. Are there different types of mood stabilisers?

There are different types of medication that can help stabilise your mood.

The National Institute of Health and Care Excellence (NICE) produce guidelines for the assessment and treatment of mental illnesses. This includes bipolar disorder, schizoaffective disorder, personality disorders and depression.

The NICE guidelines for different mental health conditions can be found on their website here: [www.nice.org.uk](http://www.nice.org.uk)

Your doctor should use these guidelines to decide which medication to offer you.

The most common mood stabilisers are listed below.

### **Lithium**

Lithium is used for the long-term treatment of mania. It can reduce how often you get an episode and how severe they are.<sup>6</sup> It has been found to reduce the risk of suicide.<sup>7</sup>

NICE guidance for bipolar disorder recommends lithium as a first choice, long-term treatment to treat episodes of mania.<sup>8</sup>

Your doctor should make sure that the lithium is working properly and is not at a dangerous level. You should have regular blood and other tests to make sure you are taking lithium safely.<sup>9</sup>

Lithium comes in 2 forms, a tablet and a liquid.<sup>10</sup>

The tablets are made from lithium carbonate. There are different brand names for the tablets. Some of these are:<sup>11</sup>

- Camcolit,
- Priadel, and
- Liskonum.

The liquid is made from lithium citrate. The main brand names for the liquid are:<sup>12</sup>

- Priadel liquid, and
- Li-liquid.

### **Valproate**

Lithium might not work or be suitable for you to treat mania as part of bipolar disorder. If that's the case, NICE guidance recommends valproate as a long-term treatment.<sup>13</sup>

Valproate is used to treat epilepsy as well as mania.<sup>14</sup> There are different forms of valproate. Valproic acid comes in the form of tablets and capsules.

The main brand names for valproic acid are:<sup>15</sup>

- Belvo
- Depakote, and
- Convulex.

Sodium valproate can be given by injection, tablets and granules. The main brand names for sodium valproate are:<sup>16</sup>

- Episenta,
- Dyzantil, and
- Epilim.

### **Lamotrigine**

Lamotrigine can treat bipolar disorder when depression is the main problem.<sup>17</sup>

NICE guidance does not recommend it to treat episodes of mania, or as a first choice for long-term treatment of bipolar disorder.<sup>18</sup>

It can come in the form of a tablet or a dispersible tablet. Which means that you dissolve it in water before taking it.<sup>19</sup>

It is sometimes called Lamictal. It is also used to treat epilepsy.<sup>20</sup>

### **Antipsychotics**

Antipsychotic medication can help to stabilise mood.<sup>21</sup> This type of medication is normally used to treat symptoms of psychosis.

Psychosis is a term used to describe when people lose some contact with reality. Common symptoms are hearing voices or having strong beliefs that aren't shared by most people or paranoia.

NICE guidelines recommend some antipsychotics to treat bipolar disorder. You might be offered the following medication:<sup>22</sup>

- Olanzapine
- Risperidone
- Haloperidol
- Quetiapine

You can find more information about:

- Antipsychotics
- Psychosis

at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

### **Can I choose my medication?**

The best treatment for you should be based on what you and your doctor or healthcare team agree to.

When advising you about your medication choices they should think about:

- your symptoms and diagnosis,
- any other health problems you might have, and

- other medications you might be taking.

You might be having issues with medical professionals or feel you are not being listened to. You can try and get help from an advocate.

Advocates can:

- help you to make your voice heard, and
- talk to professionals to help you get the right support and treatment.

You can find more information about:

- Advocacy
- Medication – Choice and managing problems

at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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### **3. Are there any side effects?**

If you take mood stabilisers, you may find that you get side effects. Some side effects may only last for a short time or become easier to cope with.

If you have issues with the side effects of your medication, you can speak to your doctor. Sometimes a lower dose or changing your medication will reduce side effects.

#### **What are the side effects of lithium?<sup>23</sup>**

Most side effects are directly related to how much lithium is in the blood stream. These are some side effects of lithium:

- stomach pain,
- feeling sick,
- shaking,
- a taste of metal in your mouth,
- feeling thirstier and needing to wee more frequently, and
- weight gain.

Your doctor should arrange regular blood tests to make sure you have a safe level of lithium in your blood.<sup>24</sup>

Taking lithium can change the amount of sodium in your body.<sup>25</sup> This can lead to higher levels of lithium which can cause poisoning.<sup>26</sup> This can be made worse by diarrhoea or vomiting, not drinking enough water or other medications.<sup>27</sup> If you would like more advice about this, speak to your doctor.

#### **What are the side effects of valproate?**

Valproate can cause:<sup>28</sup>

- Stomach upset and feeling sick
- Hair loss
- Memory loss
- Problems concentrating
- Headaches
- Dizziness
- Confusion
- Deafness
- Feeling sleepy
- Hallucinations
- Tremors

In women, valproate can cause increased testosterone levels.<sup>29</sup> This can lead to delayed or missed periods<sup>30</sup> and abnormal hair growth.<sup>31</sup>

Valproate may be linked to a condition called polycystic ovaries in women.<sup>32</sup> This can affect how the ovaries work. This can cause symptoms including excessive body hair, irregular periods, problems getting pregnant or acne.<sup>33</sup>

If you are pregnant, valproate can cause problems with the unborn baby. If you can have children, your doctor must not offer you valproate unless you are on the pregnancy prevention programme.<sup>34</sup> See [section 8](#) of this factsheet for more information.

Valproate can affect how your liver works,<sup>35</sup> so you will need regular tests. NICE guidance says to test your liver at the start of treatment and every 6 months after that.<sup>36</sup>

### **What are the side effects of lamotrigine?**

Common side effects of lamotrigine include: <sup>37</sup>

- aggression,
- joint pain,
- becoming agitated,
- vomiting and diarrhoea,
- drowsiness,
- dizziness,
- dry mouth,
- tiredness,
- irritability,
- headaches,
- tremors,
- rashes, and
- sleep problems.

A rare side effect of lamotrigine could be Stevens-Johnson syndrome.<sup>38</sup> This causes flu like symptoms followed by a red or purple rash that can form blisters. It's more common in the first 8 weeks of starting lamotrigine.<sup>39</sup>

It can also happen if you stop taking lamotrigine suddenly then start again after a few days.<sup>40</sup>

You can to help reduce the chance of getting a rash that could be confused with Stevens-Johnson syndrome. You could avoid any new medicines or foods in the first 3 months of treatment.<sup>41</sup>

### **What are the side effects of antipsychotics?**

The side effects of antipsychotics can be different depending on which type of antipsychotic you take.

You can find more information about '**Antipsychotics**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquires team on 0121 522 7007 and ask them to send you a copy of our factsheet.

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## **4. What if I want to stop taking mood stabilisers?**

It's best to not stop taking your mood stabiliser without first talking to your doctor. That's because you may get withdrawal symptoms or side effects if you stop taking your medication suddenly. These symptoms depend on the medication you are taking.

If you need to stop, your doctor can draw up a plan for you to come off the medication. This usually involves reducing the dose slowly over a few weeks.

You should look out for signs of your illness returning if you are stopping or reducing your medication.<sup>42</sup> You can:

- ask your doctor for advice on how to spot relapses, and
- use a mood diary to monitor how you feel. Online mood diaries include [www.moodpanda.com](http://www.moodpanda.com).

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## **5. Do mood stabilisers affect other medication?**

You should tell your doctor:

- about other medication if you're about to start taking mood stabilisers, or
- if you take mood stabilisers and are offered medication for another issue.

This includes herbal or complementary medication, such as St Johns Wort.<sup>43</sup>



There are also some common over-the-counter medications which can cause effects when taken with mood stabilisers. Some of these effects can be severe. These include:

- codeine,<sup>44</sup>
- paracetamol,<sup>45</sup> and
- Ibuprofen.<sup>46</sup>

Your doctor can give you advice on whether:

- your mood stabiliser will affect any other medication, and
- any other medication will affect your mood stabiliser.

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## **6. Does alcohol affect my mood stabiliser?**

Alcohol is not recommended when using some mood stabilisers. You can ask your doctor for advice on this.

Drinking alcohol whilst taking:

- valproate can increase your risk of liver damage,<sup>47</sup> and
- lamotrigine can affect your ability to perform skilled tasks, such as driving.<sup>48</sup>

Your doctor should talk to you about how alcohol may affect your medication.<sup>49</sup>

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## **7. Can mood stabilisers affect driving or operating machinery?**

Some mood stabilisers may make you drowsy, which can affect your reaction time if you're driving.<sup>50, 51</sup> If you feel this way, you shouldn't drive.

For more information you can:

- check with your doctor, and
- read the patient information leaflet that comes with the medication.

You should tell the DVLA if:

- you're taking medication that may affect your driving, or
- you have a medical condition that could affect your driving.

If your mood stabilisers make you sleepy or slow down your reactions, you shouldn't operate machinery.

You can find out more about '**Driving and mental illness**' at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask for a copy to be sent to you.

## 8. What else should I consider before taking mood stabilisers?

### Can I take mood stabilisers if I'm pregnant?

If you take a mood stabiliser it's important you talk to your doctor if:

- you are thinking of becoming pregnant, or
- you become pregnant.

Your doctor should give you information about the effects that medications can have during pregnancy.

Some mood stabilisers can cause problems if you take them whilst you are pregnant.<sup>52</sup> It is important your doctor explains to you any risks about the treatment during pregnancy. If you're not clear about something, ask your doctor about it.

#### Lithium

Taking lithium during pregnancy can cause heart problems in the foetus.<sup>53</sup> If possible, lithium should be not be taken when you are pregnant.

You can click on the following link from the Royal College of Psychiatrists website for more information about taking lithium while pregnant or breastfeeding [www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/lithium-in-pregnancy-and-breastfeeding](http://www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/lithium-in-pregnancy-and-breastfeeding).

#### Valproate<sup>54</sup>

If you are pregnant, valproate can cause problems with the unborn baby. If you can have children, your doctor must not offer you valproate unless you are on the pregnancy prevention programme.<sup>55</sup>

It can cause birth defects such as:

- spina bifida,
- problems with forming the face and skull, and
- problems forming the limbs, heart, kidney, urinary tract and sexual organs.

It can also cause developmental and learning problems such as:

- being late in learning to walk and talk,
- lower intelligence than other children of the same age,
- poor speech and language skills, and
- memory problems.

Children are also more likely to have autism or autistic spectrum disorders and signs of attention deficit hyperactivity disorder (ADHD).

## Lamotrigine

NICE guidelines say that you should tell your doctor if you are pregnant and taking lamotrigine.<sup>56</sup>

The NHS say:<sup>57</sup>

- Do not stop taking lamotrigine if you become pregnant but talk to your doctor, as they may want to review your medicine, and
- If you're trying to get pregnant or have become pregnant while taking lamotrigine, you should take 5mg of folic acid daily. You can speak to your doctor or midwife about this.

## Antipsychotics

NICE guidelines say antipsychotics are better than other mood stabilisers if you are pregnant.<sup>58</sup>

You can find out more about antipsychotics and pregnancy in our '**Antipsychotics**' factsheet at [www.rethink.org](http://www.rethink.org). Or call our General Enquiries team on 0121 522 7007 and ask for a copy to be sent to you.

## **Can I take mood stabilisers if I want to breast feed?**

There are risks with taking some mood stabilisers if you breastfeed.

If you take mood stabilisers and you want to breast feed speak to your doctor.

NICE guidelines recommend that antipsychotics are used as mood stabilisers if you are breast feeding.<sup>59</sup>

You can get more information about taking mood stabilisers during pregnancy or while breastfeeding on Mind's website here: [www.mind.org.uk/information-support/drugs-and-treatments/lithium-and-other-mood-stabilisers/mood-stabilisers-in-pregnancy/#LithiumDuringPregnancyAndBreastfeeding](http://www.mind.org.uk/information-support/drugs-and-treatments/lithium-and-other-mood-stabilisers/mood-stabilisers-in-pregnancy/#LithiumDuringPregnancyAndBreastfeeding)

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Antenatal and postnatal mental health: clinical management and service guidance.  
London: Para 1.8.19.



This factsheet is available in large print.

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## Rethink Mental Illness Advice Service

**Phone 0808 801 0525**  
**Monday to Friday, 9:30am to 4pm**  
**(excluding bank holidays)**

**Email [advice@rethink.org](mailto:advice@rethink.org)**

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### Did this help?

We'd love to know if this Information helped you

**Drop us a line at:** [feedback@rethink.org](mailto:feedback@rethink.org)

**or write to us at Rethink Mental Illness:**

RAIS  
PO Box 18252  
Solihull  
B91 9BA

**or call us on 0808 801 0525**

We're open 9:30am to 4pm

Monday to Friday (excluding bank holidays)



**Equality, rights, fair treatment, and the maximum quality of life for all those severely affected by mental illness.**

For further information on Rethink Mental Illness Phone 0121 522 7007  
Email [info@rethink.org](mailto:info@rethink.org)



**[rethink.org](https://rethink.org)**



**Patient Information Forum**

### Need more help?

Go to [rethink.org](https://rethink.org) for information on symptoms, treatments, money and benefits and your rights.

### Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

### Need to talk to an adviser?

If you need practical advice, call us on: 0808 801 0525 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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