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Working with the client with a mood disorder

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# Karina Lovell and Sarah Kendal Working with specific issues and concerns (People with a mood disorder).

The term 'mood disorder' usually means depression or bipolar disorder. Biological, psychological, and social stressors increase a person's risk of developing a mood disorder. Stressors are not always identified, but include:

- physical problems, such as chronic pain or illness
- mood-altering drugs and alcohol
- loss (e.g. of role, health, or youth)
- adverse life experiences leading to low self-esteem and poor coping mechanisms
- acute personal crisis
- ongoing difficulties (e.g. with relationships, school, work, or money).

Extreme or very rapid changes in mood that are causing a deteriorating quality of life, or presenting a risk to self or others, may require intervention.

## Key points for intervention

The same range of treatments should be offered to adults of all ages. Ongoing monitoring is always required.

#### Mild depression

- This is often self-limiting.
- Consider psychological treatments.

## Moderate and severe depression, psychotic depression, and bipolar disorder

- Consider medication.
- Consider psychological treatments.

# **Nursing role**

General aspects

- Be knowledgeable and competent in your role.
- Continually assess mood and risk.
- Establish a therapeutic alliance, with the service user as an equal partner.
- Whenever possible, involve the service user's family and friends.
- Maintain professional boundaries.
- Provide accurate information in a clear and sensitive way.

## **Psychological factors**

There is a risk of reduction in motivation, self-esteem, and confidence.

- Encourage self-management—through a better understanding of the impact of triggers, their prevention, and treatment.
- Encourage anxiety management.
- Give positive reinforcement.

## **Social factors**

There is a risk of social isolation.

- Collaborate with the service user on structured goal setting to encourage social activity