

CASE REPORT

CHRONIC MANIA: PSYCHOSOCIAL IMPACT TO THE FAMILY AND ROLE OF COMMUNITY MENTAL HEALTH TEAM IN PROVIDING CARE

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Abstract

Objective: This case report highlights the psychosocial complications of chronic mania in a mother and the role of CMHT in improving the condition's outcome. **Methods:** We report a case of a Malay mother who had underlying chronic mania for 20 years. **Results:** She was aggressive and abusive towards her children causing tremendous trauma in them, had lost her child custody and almost lost her husband to another woman. Lithium with multiple psychosocial interventions delivered to the patient and her family had improved her mood symptoms significantly and improved the family's quality of life. **Conclusion:** Chronic mania causes tremendously high illness burdens, and with extra care, the outcome of the condition can be improved. *ASEAN Journal of Psychiatry, Vol. 15 (2): July – December 2014: 217-219.*

Keywords: Chronic Mania, Psychosocial Impact, Lithium, Aggression, Community Mental Health Team (CMHT)

Introduction

Chronic mania is rather uncommonly seen in these modern days where more advanced treatment for psychiatric conditions is available. In fact, its existence as a clinical entity is being debated [1,2]. It is defined by some authors as the presence of manic symptoms for more than 2 years without any remission [1-4]. A few case reports have been published highlighting its clinical picture [1-3]. In a study in 1995 on 155 patients with mania [4], 13% of the patients had chronic mania with typical symptoms of constant euphoria, grandiose delusion and other related delusions. Sleep disturbance, psychomotor agitation and hypersexuality were found to be occurring at a low rate in this study [4].

There has been no study focussing exclusively on the magnitude of the burdens accompanying chronic mania in terms of psychosocial impact to the patients and their

families. This paper highlights the psychosocial impact of chronic mania to the family in a mother suffering from this condition and the role of Community Mental Health Team (CMHT) in providing treatment and care for the whole family.

Case Report

Madam Y is a 41-year-old Malay housewife married with 5 children and had underlying diabetes mellitus and hypertension. She was diagnosed to have bipolar I disorder 20 years ago and has had multiple admissions to the psychiatric ward since then for exacerbation of manic symptoms and aggression towards family members. She came for follow-up at the psychiatric clinic quite regularly, but unfortunately had never achieved a complete remission. This was partly due to her poor adherence to treatment. Over the recent years, she had been treated with a mood stabilizer, sodium valproate up till 800mg twice daily.