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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