ALICE W. LEE, MD, ABIHM

Informed Consent for Tapering Psychotropic Medications

Managing levels and use of psychiatric medications: If desired by the patient and his or her family, and it is medically feasible and indicated, Dr. Lee will provide a medically supervised therapeutic trial to reduce or eliminate medications that appear to be ineffective, causing side effects or excessive by replacing them with clinically appropriate nutraceutical supplements.

While the scientific literature for psychiatric medications most clearly supports short-term use, the long-term use of psychiatric medications, including antidepressants (such as Celexa, Prozac or Zoloft), antipsychotic medications (such as Risperdal or Seroquel), bipolar treatments (such as Lithium or Depakote) or antianxiety medications (benzodiazepines such as Xanax, Klonopin, and Valium) has become accepted practice in the psychiatric community though it may not be the optimal approach for all patients.

The following may all be legitimate reasons to consider changes in psychiatric medication:

- Unpleasant side effects
- An interest in nutritional or other holistic means of treatment
- A managed course of withdrawal to determine continuing necessity for medication
- Tolerance to the medications from long-term use and loss of effectiveness
- An effort to better determine what more limited medications may be sufficient

Withdrawal from medication can cause significant adverse medical and psychiatric reactions and must be done under close medical supervision. It is important that patients follow Dr. Lee's instructions with regard both to the phased withdrawal of medication, not stop any medication abruptly without an instruction to do so, take nutraceutical supplements as recommended, follow the prescribed dietary recommendations, maintain regular weekly appointments and keep Dr. Lee informed about any medical or psychiatric symptoms experienced during and after the transition.

Though the long-term use of psychiatric medications presents its own risk, the standards of practice that have evolved tend to favor long-term use because of concern about the effectiveness of non-pharmaceutical management of many psychiatric conditions. Some physicians practicing holistic, complementary, alternative or integrative medicine use of nutraceutical, herbal, and other holistic means to support mental, emotional and neurological function, but this is not widely accepted as having been demonstrated in the scientific literature as a safe and effective means of therapy.

Potential Adverse Effects from Medication Withdrawal

On the next page is a list of potential side-effects. Generally, they are well-managed during medical supervised reduction or withdrawal of medication, but patients should be aware of possible side-effects and the importance of making changes as directed.

Antidepressant Medications: Withdrawal from antidepressants, particularly when too abrupt, can cause headaches, dissociation, dizziness, electric shock-like sensations in the head, sweating, nausea, insomnia, tremor, confusion, nightmares, vertigo and areas of the skin that seem numb. There may also be a rare problems with decreased libido or problems with sexual function in both men and women. Patients may also experience exacerbation of their condition(s) or relapse, including insomnia, depression, manic or suicidal thoughts or anxiety, and can cause psychotic symptoms that are generally short-lived duration.

Antipsychotic/Bipolar Medications: Withdrawal symptoms from antipsychotics/bipolar medications can occur during dosage reduction and discontinuation. Withdrawal effects can occur when switching from one antipsychotic/bipolar medication to another, and can include nausea, emesis, anorexia, diarrhea, sinus problems, excessive sweating, muscle pains, numbness, anxiety, paranoia, agitation, aggression, emotional withdrawal, mood swings, restlessness, and insomnia. Symptoms can include psychosis, which can be mistaken for a relapse of the underlying disorder. Conversely, the withdrawal syndrome may also be a trigger for relapse, including depression, mania, anxiety, or psychosis. Symptoms can emerge suddenly and may gradually abate during the withdrawal phase or become persistent. Side effects can include physical manifestations such as tardive dyskinesia, dry mouth, constipation, urinary retention, bowel obstruction, dilated pupils, blurred vision, increased heart rate, and decreased sweating, and mental symptoms such as concentration, confusion, attention deficit, and memory impairment.

Antianxiety Medications: Benzodiazepines are meant for short-term use. Long-term use can lead to physical dependence. Drug tolerance is also common, with increasingly larger doses needed to get the same anxiety relief as before. Withdrawal symptoms may include anxiety, shakiness, headache, dizziness, sleeplessness, loss of appetite and in severe cases, fever, seizures and psychosis.

Informed Consent/Agreement:

I understand the above information regarding possible changes in my psychiatric medications, understand and agree to assume the risks as explained to me, and to follow medical advice in the event that Alice W. Lee, MD, ABIHM and I decide together to make medication changes. I have discussed this decision with family members and other important people in my life who might be affected by this decision, as appropriate, and have enlisted their support in this transition.

Patient/Guardian Printed Name/Signature/Date	
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