

INTRODUCTION

Drug therapy is not a quick fix or a miracle pill. Chronicity of mental illness requires more than just a brief medical intervention, several months, years, or even life-long medication regimen is hence necessary. Furthermore, maintaining the medication regimen is vital to successful psychiatric treatment outcomes. The regular use of medications is usually effective as a mainstay in reducing the risk of relapse and hospitalization (*Rosack, 2004*).

While the treatment of chronic mental health problems involves more than just medications, antipsychotic medications remain a primary strategy for the management of illness and the prevention of relapse (*Kane, 2003*). Antipsychotic agents have been widely used since the 1950s; when they revolutionized the care of patients with severe psychiatric disorders (*Saltz et al., 2004*).

The original drugs used to treat psychosis are called "typical " or conventional antipsychotic drugs and the newer or second-generation, are called "atypical" or novel antipsychotic drugs this over a different pharmacological mechanism of action, an expanded spectrum of therapeutic effectiveness, and a more acceptable side effect profile (*Stuart, 2009*). Most of these drugs are given in tablet form, some are liquids and others are given as injections. Some are available as long-acting (depot) injections, which may be given anywhere from once a week to once a month (*Center for Addiction and Mental Health [CAMH], 2009*).

Moreover, *Shives (2007)* stated that, antipsychotic drugs are used primarily to treat most forms of psychosis, such as schizophrenia, schizoaffective disorder, delusional disorder, mood disorder with psychosis and psychosis associated with delirium and dementia, Small doses may be used to treat anxiety, tension, agitation, dizziness, intractable hiccups, nausea and vomiting, and to control pain when combined with other drugs. *Uretsky (2010)* added that antipsychotics are effective in controlling the symptoms of other disorders that lead to psychosis, including bipolar mood disorder.

Unfortunately, antipsychotics are associated with adverse effects. The most common CNS effects are sedation, weakness, tremors, drowsiness, and extrapyramidal side effects (EPSs) are pseudoparkinsonism, dystonia, akathisia, tarditive dyskinesia, and potentially irreversible neuroleptic malignant syndrome, anticholinergic effects, and cardiovascular effects (*Varcarolis & Halter, 2009*). All antipsychotic medications are associated with an increased likelihood of sedation, sexual dysfunction (*Muench & Hamer, 2010*).

The attitude of mental health professionals especially nurses towards medication plays a crucial and influential role in patient outcomes (*Besenius et al., 2010*). Concerning the nurses have relatively frequent and consistent contact with patients receiving antipsychotic medications and their families. They are also knowledgeable about such medications and their side effects and knowing their attitudes about this medication. Therefore, it would seem appropriate for nurses to take on the responsibility for making sure that patient know about the nature of medications and their potential side effects (*Fretwell & Felce, 2007*).

Rebinson et al., (2006) reported that, there is a link between health care providers' knowledge and patients' medication adherence. To provide effective medication relied on a sound knowledge base, nurses felt that increased knowledge about psychiatric medications also enhanced their ability to evaluate medication effectiveness and recognize potential drug interaction. Additional benefits of increased nurse's medication knowledge included more effective medication planning, increased recognition of noncompliance and increased confidence in medication management (*Sabra, 2008*). In addition, knowledge is an important factor in the development of positive attitudes (*Economou et al., 2009*).

The practice of psychopharmacology requires those nurses' competencies in diagnosis and biological assessment, as well as knowledge of available drugs and the design of medication regimens. Other important components of the psychiatric nurse's role are the ability to provide patient education regarding medications and the ability to identify side effects (*Stuart, 2009*).