

This workbook reinforces the importance of medication compliance and provides techniques to prevent relapse and possible hospitalization.

Lilly

TEAM SOLUTIONS™

Helping Yourself Prevent Relapse

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INSTRUCTOR'S GUIDE

This instructor's guide and the corresponding workbook have been prepared in consultation with a number of leading authorities in the field of treatment of schizophrenia. They are designed and intended to be used with patients being treated for symptoms of schizophrenia as educational materials to supplement information provided by the patient's physician. This instructor's guide does not substitute for appropriate medical treatment and counseling. The material may be useful in answering questions about schizophrenia or medications. It may not answer all questions. Remember to remind patients that if they should have questions about their medications or particular treatment, or if they think they are having any possible unwanted effects, they should consult with their physician.

Instructor's Notes

Goals for This Workbook

After completing this workbook, individuals will be familiar with:

1. Some common causes of relapse
2. The importance of identifying and responding to early warning symptoms
3. The five steps to managing a relapse
4. How to reduce the risk of relapse

Note to Instructor

Duplicate the Knowledge Assessment (pre- and post-test) and have your clients complete it before starting this workbook. This will help you identify the subject areas in which your clients may need more help. When you've completed the workbook, have your clients complete the same Knowledge Assessment once again, so that you can measure how much they've learned and can identify subject areas that may require review. You will find the Knowledge Assessment at the end of these Instructor's Notes.

Page 2 – What Does “Relapse” Mean?

Objectives for This Section:

After completing this section, individuals will be able to:

1. Accurately define “relapse” in their own words
2. Express an understanding that they can do things to reduce their risk of relapse
3. Describe at least one potential consequence of relapse

Suggested Approach:

After reading this page, encourage individuals to:

- Discuss the meaning of the word “relapse”
- Complete the written exercise
- State whether or not they’ve ever experienced a relapse

Potential Problem:

An individual gives irrelevant, incorrect, or no answer to the written exercise.

Suggested Response:

1. Provide some verbal support
2. Re-focus their attention to the examples in the workbook
3. Ask which example sounds most like them
4. Instruct them to copy that example in the space provided
5. If you still get irrelevant, incorrect, or no answer, move on

Page 3 – Relapse Can Often Be Prevented

Suggested Approach:

Before reading this page, ask the group to predict what may happen if they ignore relapse symptoms; ask for personal experiences.

After reading this page, facilitate discussion about:

- What’s likely to happen if they ignore relapse symptoms
- Why it isn’t possible to stop a relapse on their own
- The importance of learning how to reduce their chances of relapse

Page 4—Reasons Why a Relapse Can Happen

Objectives for This Section:

After reading this section, individuals will be able to:

1. Recognize some of the most common causes of relapse
2. Explain what steps they should take when a relapse begins
3. Define “symptom cycle” in their own words



Suggested Approach:

Before reading this page, facilitate discussion about the many potential causes of relapse.

After reading this page, facilitate discussion about:

- Out of balance brain chemistry causing a return of symptoms
- Return of symptoms signaling relapse
- Ignoring signs of relapse, possibly resulting in hospitalization

Page 5—Changes in Your Treatment Can Cause a Relapse

Suggested Approach:

After reading this page, facilitate discussion about:

- Experiences people have had with each of the medication changes listed
- Why changing from one medicine to another may cause a relapse
 - the dose of the new medicine may be too low
 - the new medicine may not have had time to work
 - the new medicine may not be effective for that person no matter what dose is used or for how long
- When medicine changes are a good idea in spite of the risk of relapse
 - if side effects can't be controlled or tolerated
 - if the medicine isn't working well at a high dose
- Examples of nonprescription medicines that could cause a relapse (e.g., diet pills, stimulants taken to help people stay awake, some cold medicines)
- The importance of working with the doctor to find a medicine and dose that manages symptoms with the least amount of side effects—and taking it correctly every day



Page 6—Some People May Not Understand the Way Their Medicine Works, Some People Are Bothered by Side Effects

Suggested Approach:

Before reading these two sections, facilitate discussion about why some people stop taking their medication.



After reading these two sections, facilitate discussion about:

- Not being able to “feel” the medicine working
- People’s experiences with side effects
- The importance of **not** changing their dose on their own
- The importance of talking to their doctor about any side effects or changes in medication

Page 6—Many People Don’t Know That Other Drugs or Alcohol Might Interfere

Suggested Approach:

After reading this section, facilitate discussion about:



- How caffeine, nicotine, and nonprescription drugs may change their brain chemistry and keep medicine from working effectively
- Why some people use street drugs and alcohol
- How street drugs and alcohol upset the balance of brain chemistry and increase symptoms

Page 7—Too Much Stress Can Lead to Relapse

Suggested Approach:

After reading this page, encourage individuals to:

- Discuss personal experiences with “good stress” triggering relapse
- Complete the written exercise

Page 8—Keep Your Stress Level Low—Make Only One Change at a Time, Changes You’d Like to Make in the Future

Suggested Approach:

After reading this page, encourage individuals to:

- Discuss personal dreams and goals
- Complete the written exercise

Potential Problem:

An individual says they don't have any dreams, goals, or plans for the future.

Suggested Response:

1. Agree that it's okay to be content with your life
2. Direct their attention to the examples on page 7
3. Ask them to select two goals other people might want to achieve
4. Ask which goal would be easiest or best to achieve first
5. Tell them that the main point is to make one change at a time
6. Do not instruct them to write these goals on page 8 (that would imply ownership)

Page 9—Bad Stress**Suggested Approach:**

After reading this page, encourage individuals to:

- Discuss personal experiences with “bad stress”
- Complete the written exercise

Page 10**Suggested Approach:**

Before reading this page, encourage individuals to:

- Share ideas about why doing enjoyable activities relieves stress
- Discuss the activities they've enjoyed doing in the past week

After completing this page, encourage individuals to identify one activity they plan to enjoy this week.

Page 11—Other Reasons for Relapse**Suggested Approach:**

After reading the first paragraph, encourage individuals to:

- Discuss personal experiences with other health problems that may make the symptoms of their mental illness worse
- Complete the written exercise

After completing this page, encourage individuals to define “symptom cycle” in their own words.

Page 12**Suggested Approach:**

After reading the first paragraph, encourage individuals to:

- Discuss if they have ever kept track of their symptoms by recording them every day
- Explain whether or not they think they have a symptom cycle
- Complete the written exercise

After completing this page, encourage individuals to:

- State whether or not they want to start recording their symptoms daily
- Discuss their answers to the written exercises

Page 13—Ways You Can Reduce the Risk of Relapse**Objectives for This Section:**

After reading this section, individuals will be able to:

1. Identify ways they can reduce their risk of relapse
2. Define “residual symptoms” in their own words
3. Explain what “early warning symptoms” are

Suggested Approach:

Before reading this page, encourage individuals to:

- Share ideas about what people can do to reduce the risk of relapse
- Discuss the connection between taking care of themselves and reducing the risk of relapse

After completing this page, encourage individuals to:

- Mention personal examples of using the tips listed
- Discuss other things they do that help them stay healthy
- Identify things they’d like to start doing, or do more often, to help themselves feel better

Page 14—Watching Your Symptoms Every Day**Suggested Approach:**

After reading the first paragraph, encourage individuals to:

- Define “residual symptoms” in their own words
- Describe personal examples of residual symptoms

After reading this page, encourage individuals to:

- Define “early warning symptoms” in their own words
- Give personal examples of early warning symptoms
- Discuss the connection between early warning symptoms and relapse

Page 15 – Knowing Your Early Warning Symptoms

Objectives for This Section:

After completing this section, individuals will be able to:

1. Identify personal examples of early warning symptoms
2. Verbalize the importance of recognizing early warning symptoms

Suggested Approach:

After reading the first paragraph, encourage individuals to:

- Discuss what could happen if they don’t recognize early warning symptoms

After completing this page, encourage individuals to:

- Talk about the early warning symptoms they marked
- Mention other early warning symptoms they’ve experienced

Potential Problem:

An individual says they don’t remember any early warning symptoms or none of the ones on the list apply.

Suggested Response:

1. Normalize their experience. Some people don’t have good recall of relapse experiences
2. Suggest that they get input from family, friends, and other members of their treatment team
3. Remind them that when people are really ill, they may not remember everything that happens to them

Page 16

Suggested Approach:

After completing this page, encourage individuals to:

- Talk about what’s happened in the past when they **didn’t** notice early warning symptoms
- Talk about times when they **have** noticed early warning symptoms



Page 17—The Dangers of Ignoring Early Warning Symptoms

Objectives for This Section:

After reading this section, individuals will be able to:

1. Identify some reasons why people ignore early warning symptoms
2. Verbalize the disadvantages of ignoring early warning symptoms
3. Describe the advantages of taking action to stop relapse

Suggested Approach:

Before reading this section, encourage individuals to talk about why people might ignore early warning symptoms.

Page 17—Which Path Will You Choose?

Suggested Approach:

After reading this page, encourage individuals to:

- Discuss other disadvantages of ignoring early warning symptoms
- Identify other advantages of taking action as soon as they notice early warning symptoms
- Describe what the picture illustrates

Page 18—Five Steps to Managing a Relapse

Objectives for This Section:

After completing this section, individuals will be able to:

1. Verbalize an understanding of the five steps to managing a relapse
2. Demonstrate the ability to apply each step to their personal situation



Page 19—Step 1, Step 2

Potential Problem:

An individual has trouble thinking of anything to write for the written exercises on this page.

Suggested Response:

1. Refer back to pages 15 and 16
2. Suggest that they select answers from those two pages

Page 20—Step 3, Step 4**Suggested Approach:**

Emphasize the importance of contacting their doctor or other treatment team member if they feel they are starting to relapse.

Potential Problem:

An individual has trouble thinking of why it is best not to ignore early warning symptoms.

Suggested Response:

1. Refer back to page 17
2. Suggest they select at least two answers from that page and write them on page 20 (in their own words if possible)

Potential Problem:

An individual has trouble thinking of what to write for **Step 4**.

Suggested Response:

1. Role-play the situation with them
2. Suggest they write down something similar to what they said during role-play

Page 21—Step 5**Potential Problem:**

An individual has trouble thinking of what to write for **Step 5**.

Suggested Response:

1. Refer back to page 18
2. Suggest they select some of the things listed that would be helpful to them and write them down on page 21



Page 22—Answers to Common Questions About Preventing Relapse**Suggested Approach:**

After reading the first question, encourage individuals to:

- Discuss personal experiences with restarting medication on their own
- Identify the problems that could occur if they restart medicine on their own

After reading the second question, encourage individuals to suggest answers to the question about drinking alcohol.

Pages 22-24**Suggested Approach:**

After reading each answer, encourage individuals to talk about personal experiences that relate to the topic.

After completing these pages, reinforce that medicine should not be skipped without speaking with the doctor first.

Page 25—When You're Feeling Your Best!**Suggested Approach:**

After reading the first paragraph, encourage individuals to:

- Identify reasons someone might do all the things needed to get better and then stop once they're feeling better
- Identify reasons someone might keep doing all the things needed to get better even though they're feeling better

Options for Getting Closure at the End of the Workbook:

- Help the person summarize the main points of the workbook
- Ask the person what parts of the workbook were most helpful
- Ask the person to identify two things they learned from the workbook
- Turn to the Contents page and help them identify one main point for each topic

It's time to complete the Knowledge Assessment. Please note that the Knowledge Assessment that follows is an original document that will need to be duplicated for your use.

Knowledge Assessment

For each question or statement, circle the best answer:

1. **Relapse means:** (pg. 2)
 - a. Being cured
 - b. Eating healthy food
 - c. Having another lapse of resonance
 - d. Getting sick again

2. **When a person starts to relapse:** (pg. 3)
 - a. They can probably stop the relapse without any help from anyone
 - b. They should keep quiet and hope it goes away
 - c. They'll probably get very sick if they don't do anything about it
 - d. They can't do anything but let the relapse happen

3. **Relapse can be caused by taking medication for a different health problem.** (pg. 4)
 - a. True b. False

4. **Relapse can be caused by drinking alcohol or using street drugs.** (pg. 4)
 - a. True b. False

5. **Stress never causes a relapse.** (pg. 4)
 - a. True b. False

6. **If you notice that your symptoms are starting to come back, you shouldn't tell anyone so you won't have to go to the hospital.** (pg. 4)
 - a. True b. False

7. **Not taking your medicine or skipping doses could cause a relapse.** (pg. 5)
- a. True
 - b. False
8. **When your medicine is working:** (pg. 6)
- a. You should be able to “feel” it work
 - b. You can feel the chemicals in your brain changing
 - c. You probably can’t really “feel” it work
 - d. You can skip it on the days you feel your best
9. **If you’re bothered by side effects, the best thing to do is:** (pg. 6)
- a. Talk with your doctor or other members of your treatment team
 - b. Take fewer pills in the morning
 - c. Ignore it
 - d. Stop taking the medicine
10. **Caffeine can interfere with your medicine.** (pg. 6)
- a. True
 - b. False
11. **Taking street drugs and drinking alcohol won’t make your symptoms worse.** (pg. 6)
- a. True
 - b. False
12. **Some common drugs you can buy without a prescription at the supermarket or drugstore could make the symptoms of your mental illness worse.** (pg. 6)
- a. True
 - b. False

13. **Only bad stress (something bad happening to you) can cause a relapse. Good kinds of stress (positive changes in your life) don't ever cause a relapse.** (pg. 7)
- a. True b. False
14. **Making more than one change in your life at a time (like starting a job and moving into an apartment) can cause a relapse.** (pg. 8)
- a. True b. False
15. **Having problems on the job, in a relationship, or at home can make your symptoms worse.** (pg. 9)
- a. True b. False
16. **One thing you can do to handle stress better and help yourself prevent a relapse is:** (pg. 10)
- a. Drink lots of coffee or soda
- b. Do things you enjoy
- c. Get drunk or high
- d. Stay in bed
17. **Health problems such as a toothache, the flu, or a cold can make the symptoms of your mental illness worse.** (pg. 11)
- a. True b. False

- 18. Having a symptom cycle means:** (pg. 11)
- a. Your symptoms seem the same every day
 - b. Your thinking goes in circles
 - c. You hurt yourself while jogging around an outdoor track
 - d. Your symptoms appear and disappear in a pattern that repeats itself
- 19. Everyone has a symptom cycle.** (pg. 12)
- a. True b. False
- 20. Taking good care of yourself, eating right, exercising, and avoiding drugs and alcohol can help you prevent relapse.** (pg. 13)
- a. True b. False
- 21. Early warning symptoms are:** (pg. 14)
- a. Signs that your medicine is working well
 - b. Signs that you're having side effects from your medicine
 - c. Signs that your brain chemistry is in balance
 - d. Symptoms that get worse or suddenly appear that warn you a relapse is starting
- 22. Suddenly having trouble sleeping, having trouble thinking clearly, or hearing voices:** (pg. 15)
- a. Are normal and no cause for alarm
 - b. Mean you're a bad person
 - c. Are examples of early warning symptoms
 - d. Will probably go away if you just ignore them

- 23. Recording or keeping track of your symptoms can help you catch a relapse before it catches you.** (pg. 16)
- a. True b. False
- 24. Taking quick action and asking for help to stop a relapse as soon as the early warning symptoms appear:** (pg. 17)
- a. Can help you feel better sooner and help you stay in control
- b. Is a waste of time; once a relapse has started there's nothing anyone can do
- c. Is stupid because if you just wait you'll always wake up feeling lots better the next day
- d. Means you're weak, otherwise you wouldn't have gotten into this fix to start with
- 25. Knowing what your early warning symptoms are is the first step to managing relapse.** (pg. 18)
- a. True b. False
- 26. To manage a relapse it's important to recognize the early warning symptoms starting and:** (pg. 18)
- a. Cut down on the amount of medicine you take because it isn't really helping anyway
- b. Take an extra pill at bedtime and hope it will help you feel better
- c. Drink more coffee so you'll have more energy and feel like doing things
- d. Call your doctor, case manager, nurse, or therapist and take action to stop the relapse

27. **If you stopped taking your medicine and you feel a relapse coming on, you should start taking your medicine again.** (pg. 22)
- a. True b. False
28. **You should skip a couple doses of medicine if you plan to go drinking or you decide to get high.** (pg. 22)
- a. True b. False
29. **If you have trouble remembering to take your medicine, just try harder; there's nothing else you can do that will help.** (pg. 23)
- a. True b. False
30. **When you're feeling great and you don't have symptoms:** (pg. 25)
- a. You're cured and you can stop taking your medicine
- b. You can drink or use drugs again and it won't cause any problems for you
- c. You know your medicine is working and you should keep taking it regularly
- d. It's time to cut back on your medicine because you don't really need so much of it now

Answer Key

1. d	11. b	21. d
2. c	12. a	22. c
3. a	13. b	23. a
4. a	14. a	24. a
5. b	15. a	25. a
6. b	16. b	26. d
7. a	17. a	27. b
8. c	18. d	28. b
9. a	19. b	29. b
10. a	20. a	30. c

