Memorandum

To: All physicians

From: Henry Olders, MD

Date: 2008-4-29

Subject: Lithium monitoring

At a recent CMDP meeting, protocols or guidelines for several psychotropic medications were discussed. One of the guidelines was for lithium treatment; this calls for lithium levels and TSH to be obtained yearly for stable patients. I made the recommendation that for our elderly hospitalized patients, once stable on lithium, we should obtain lithium levels every 3 months and TSH every 6 months. These time intervals are frequently recommended even for younger, non-hospitalized patients, as the summary here demonstrates:

Setting	lithium	TSH	reference
A specialized lithium clinic in Dublin's inner city to monitor patients on lithium	3 months	6 months	Fahy S, Lawlor BA. Lithium use in octogenarians. Int J Geriatr Psychiatry. 2001;16:1000-1003.
literature search from Jan 1970 to Dec 1999 on lithium intoxication	3 months	3-12 months	Delva NJ, Hawken ER. Preventing lithium intoxication. Guide for physicians. Can Fam Physician. 2001;47:1595-1600.
Tasman Textbook of Psychiatry, p1977	3 months	6 months	Tasman A, Kay J, Lieberman JA. Psychiatry 2nd edition. Wiley; 2003:2 v.
Recommendations by the British National Formulary (British Medical Association & Royal Pharmaceutical Society	3 months	6 months	Ryman A. Lithium monitoring in hospital and general practice. Psychiatr Bull. 1997;21:570-572.
Shared care protocol for Lithium, Lancashire Care NHS Trust	3 months; more frequently in elderly	3 months	www.elmmb.nhs.uk/EasySiteWeb/ GatewayLink.aspx?alld=9856
Textbook on manic- depressive illness, p671	4-8 weeks (can be reduced over time, especially with reliable patients)	6 months	Goodwin FK, Jamison KR. Manic- depressive illness. New York: Oxford University Press; 1990
Compendium of Pharmaceuticals and Specialties, 2008, p1257	at least every 2 months	6-12 months	Canadian Pharmacists Association, Ottawa ON 2008

Setting	lithium	TSH	reference
American Psychiatric Press Textbook of Psychiatry, p821-2	2-3 months	6 months	Silver JM, Yudofsky SC. Psy- chopharmacology and electrocon- vulsive therapy. In: Talbott JA, Hales RE, Yudofsky SC, editors. American Psychiatric Press Text- book of Psychiatry. Washington, DC: American Psychiatric Press; 1988. p. 767-855.
Introductory Textbook of Psychiatry, pp506-7	3 months	6 months	Andreasen NC, Black DW. Intro- ductory textbook of psychiatry. Washington, DC: American Psychi- atric Publishing, Inc.; 2006

Many sources also make the point that for the elderly, for patients with impaired kidney function, in the presence of intercurrent illness, or when there are dosage adjustments of diuretics or ACE inhibitors, lithium levels may need closer monitoring.

It is also important to keep in mind that suggested lithium levels are based on bloods being drawn 12 hours after the last lithium dose. This usually means that your prescription for lithium should include the time that the evening dose is to be given.

Thank you for your attention to this matter.