

Clinical Pearls

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Clinical Pearl 11/05/21

Each week we will aim to bring out a concise email that provides 4-5 key pieces of information addressing a specific issue in clinical therapeutics.

Alternative Treatment Options for Behavioural and Psychological Symptoms of Dementia

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There have been several meta-analyses of studies conducted investigating pharmacological treatments for BPSD to provide evidence-based options when treating patients with dementia.

Due to the increased risk associated with the use of antipsychotics in the treatment of BPSD, further studies have been carried out to explore the use of antidepressants in managing BPSD.

Citalopram consistently showed improvement in BPSD (specifically agitation and lability) however often higher doses (>20mg) were required which may limit its use in the elderly due to its effect on prolonging the QTc interval at higher doses.

However, given its relatively safe side effect profile compared with antipsychotics, a trial of citalopram could be beneficial starting at lower doses.

Usual starting dose is 10 mg once daily (preferably in the morning), gradually increasing after 2–4 weeks if necessary, to a maximum of 20 mg once daily.

There is limited evidence in the use of mirtazapine for BPSD in dementia. In one study, mirtazapine showed efficacy in treatment of BPSD, however, this was limited by the trial design which was an open-label pilot study with no active comparator.

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Mirtazapine has shown some benefit in the treatment of psychotic symptoms associated with Parkinson's disease patients. In a limited number of reported cases, mirtazapine has been shown to improve persistent psychotic symptoms, including visual hallucinations, without exacerbating motor symptoms.

As the primary purpose of administering these antidepressant medications in this setting is to subdue or control the behaviour of the person in the absence of a diagnosed mental health disorder, then they are deemed chemical restraint and as such, require consent from the Enduring Power of Attorney and regular review for efficacy and side effects.

References:

[Medications for BPSD - Dementia Pathways Tool](#)

Dementia Support Australia: Psychotropic medication in the management of behaviours

[Psychotropic medication in the management of behaviours.pdf \(dementia.com.au\)](#)

Young, J. (2019). Evidence Based Pharmacological Management and Treatment of Behavioural and Psychological Symptoms of Dementia. *The American Journal of Psychiatry Residents' Journal*

Buterbaugh, W. Jamrose, T. , Lazzara, J., Honaker, L., Thomas, C. (2014). Review of antidepressants in the treatment of behavioral and psychiatric symptoms in dementia (BPSD). *Mental Health Clinician*, 4 (4): 183-188

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