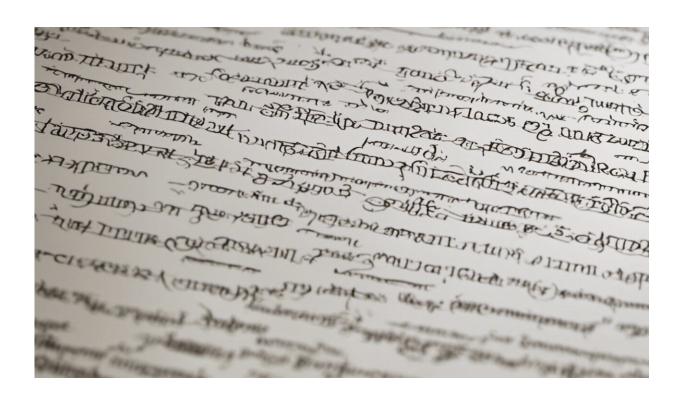


Widespread antipsychotic use in nursing homes unnecessary, trial shows

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Credit: AI-generated image (disclaimer)

Despite minimal evidence supporting their effectiveness to manage symptoms of dementia, the use of antipsychotic drugs in Australian nursing homes is widespread. Studies showing the drugs increase the risk of stroke, cognitive decline and death have also been largely ignored.



Now UNSW Australia-led researchers have shown their use could be drastically reduced by creating awareness about these risks and training nursing staff to use alternative approaches to manage the symptoms of dementia.

The results of the innovative Dementia Collaborative Research Centre (DCRC) project are being presented this week by UNSW Scientia Professor Henry Brodaty at the Alzheimer's Association International Conference (AAIC) in Toronto, Canada.

The Halting Antipsychotic use in Long Term care (HALT) project successfully eliminated regular antipsychotic medication from the treatment plan in 75% of study participants after six months, following an initial reduction of antipsychotics.

In the trial—which involved 140 residents across 23 NSW care facilities—deprescribing was achieved through training <u>long-term care</u> facility nurses to recognise potential causes of BPSD and encourage the use of non-pharmacological and person-centred approaches to managing BPSD, such as environmental modifications.

In Australia, up to 50% of long term nursing home residents have a dementia-related illness, with many experiencing behavioural and psychological symptoms (BPSD) including delusions, aggression and agitation. This poses major challenges for both residents and nursing facility staff.

Compounding this issue are significant workforce shortages in the aged care sector preventing individualised approaches to care and specifically, a lack of staff trained in dementia care.

GPs and geriatricians often feel pressure to prescribe antipsychotics to manage BPSD in nursing home residents, despite guidelines suggesting



antipsychotic drugs should be a last resort.

DCRC Director Professor Henry Brodaty said the HALT trial showed deprescribing of antipsychotics in long-term care residents with previous BPSD was feasible, however major challenges must be overcome including sustainability and the prevailing culture of prescribing in aged care.

"Often there can be cultural, funding and logistical barriers to moving away from antipsychotics in aged care settings, but we hope the results of this project will serve as a positive example towards a more personcentred approach in Australia and globally," said Professor Brodaty, who is also Co-Director of UNSW's Centre for Healthy Brain Ageing (CHeBA).

Provided by University of New South Wales

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