

Opioid analgesics reduce use of antipsychotics in persons with Alzheimer's disease

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Initiating an opioid analgesic reduced the use of antipsychotics and benzodiazepines in persons with Alzheimer's disease, a recent study from the University of Eastern Finland shows. These drugs are frequently prescribed to treat behavioural and psychiatric symptoms of dementia, which can be worsened by other symptoms, such as pain. The results were published in International Psychogeriatrics.

The researchers analysed the use of antipsychotics and <u>benzodiazepines</u> six months before and six months after persons with Alzheimer's disease begun using an opioid. These results were then compared to persons with Alzheimer's disease who did not initiate opioid use. After the initiation of an opioid, the researchers found a downward trend in the prevalence of both antipsychotics and benzodiazepines, with the prevalence of antipsychotics reducing more.

The use of antipsychotics and benzodiazepines is very frequent in persons with Alzheimer's disease, but it carries a risk for severe adverse effects, and long-term treatment is generally not recommended. Previous studies have found a decrease in behavioural and psychiatric symptoms of dementia when patients are treated for pain, but this new study now shows, for the first time, a decrease in symptomatic drug use. The study is also the world's first nationwide study on the subject. The results provide further evidence on the importance of proper diagnosis and treatment of pain among persons with dementia.



The study is part of the MEDALZ cohort, which included 3,327 persons with Alzheimer's disease diagnosed during 2010–2011. Each person initiating opioid use was matched with a comparison person with Alzheimer's disease who did not initiate opioid use but was of the same age, gender and region of residence. Data for the study were derived from Finnish nationwide registers.

More information: Aleksi Hamina et al. Impact of opioid initiation on antipsychotic and benzodiazepine and related drug use among persons with Alzheimer's disease, *International Psychogeriatrics* (2018). DOI: 10.1017/S1041610217002897

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