

Antipsychotic prescriptions haven't budged in 10+ years despite recommendations to curb use

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The number of antipsychotic drugs prescribed to patients with intellectual disabilities has hardly changed in over a decade despite official recommendations for clinicians to stop using them due to side effects, finds research published in the online journal *BMJ Open*.

And there's been a sharp rise in antidepressant prescriptions over the same period.

Mental ill health is common in people with intellectual disabilities, with the prevalence of psychosis estimated to be around 4%. But antipsychotics are sometimes prescribed for adults with intellectual disabilities who don't have a record of severe mental ill health—often for problem behaviours—despite limited evidence to back their use beyond short-term sedation.

Experts have voiced concerns over the use of antipsychotics in people with intellectual disabilities because the drugs have various disabling, painful and disfiguring side effects, some of which can be life threatening, such as tardive dyskinesia (which causes stiff, jerky and uncontrollable movements of the face and body), [cardiac arrhythmias](#), and sudden cardiac death.

In 2016, a national campaign was launched by NHS England and various royal colleges to get clinicians to reduce or stop prescribing antipsychotics for people with intellectual disabilities who don't have psychosis, where appropriate.

To find out whether antipsychotic prescribing patterns have changed, the researchers looked at the number of [psychotropic drugs](#) prescribed to people with intellectual disabilities living in Greater Glasgow, and associated mental ill health diagnoses, over a period of 10 years. Psychotropic drugs include antipsychotics, antidepressants, mood stabilisers, stimulants, and anti-anxiety agents.

The researchers drew on data for 1190 adults living in the NHS Greater Glasgow area who had agreed to be on a [primary care](#) intellectual disabilities register and take part in the study between 2002 and 2004. And they extracted data from primary care records for 3,906 patients on the register and living in the health board area in 2014.

Around half (51%; 603) of the adults in 2002-04 and a similar proportion (48%; 1,881) in 2014 were prescribed at least one psychotropic drug.

Around one in four (24.5%; 292 out of 1,190) in 2002-4 and nearly 17% (653 out of 3,906) in 2014 were being treated with antipsychotics, while around one in 10 (11%; 133) in 2002-4 and one in five (19%; 746) in 2014 were being treated with antidepressants.

Around a fifth (21%; 62 out of 292) of those prescribed antipsychotics in the earlier time period had psychosis or [bipolar disorder](#). A similar proportion (20.5%; 60) had problem behaviours but no psychosis or bipolar disorder. But a third (33%; 97) had no mental ill health or problem behaviours.

From the initial group of 1190 patients in 2002-4, 545 were still alive and their records linked to prescribing data for 2014. These data showed that psychotropic [drug](#) use had increased from 47% (256 out of 545) in 2002-4 to 58% (315) in 2014.

Use of antipsychotics didn't change significantly, but there was an increase in the use of antidepressants, hypnotics/anxiolytics, and antiepileptic drugs prescribed to this group.

Over the decade, prescriptions for antidepressants rose sharply—from 11% in 2002-4 to 19% in 2014—but this was even greater among the 545 people for whom data were available for both time periods, rising from 10% to 22%.

Although fewer new antipsychotic prescriptions were issued in 2014, patients prescribed these drugs in 2002-4 were unlikely to have them withdrawn over the next decade.

The researchers acknowledge that not all general practices agreed to the use of their data, and there were different methods of data collection between the two time periods which meant a large amount of information was missing. Nevertheless, the study is large and the groups representative, making the results generalisable, they say.

"Despite numerous calls and guidelines in the UK for the withdrawal of antipsychotic drugs from people with intellectual [disabilities](#) who do not have psychosis/bipolar disorders, our longitudinal, linked cohort analysis shows no progress over a decade," they write.

While fewer prescriptions were issued for antipsychotics in 2014, people prescribed these drugs in 2002-4 were still likely to be taking them 10 years later, they point out, adding: "Adults with [intellectual disabilities](#) need frequent and careful medication reviews."

More information: Changes over a decade in psychotropic prescribing for people with intellectual disabilities: prospective cohort study, *BMJ Open* (2020). [DOI: 10.1136/bmjopen-2020-036862](https://doi.org/10.1136/bmjopen-2020-036862)

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