Antipsychotic drugs likely overprescribed to homebound patients with dementia, study finds

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New research published in the *Journal of the American Geriatrics Society* indicates that antipsychotics are likely overprescribed and used inappropriately among patients with Alzheimer's disease and related
dementias (ADRD) receiving home health care, and such use is linked to worse patient outcomes.

Antipsychotic drugs are not approved for the treatment of dementia—they are mostly used off-label to manage the symptoms that many people with ADRD experience, such as agitation, aggression, and psychosis that are called "behavioral and psychological symptoms of dementia." In addition, antipsychotics carry considerable risks of serious drug-related adverse events, especially stroke and sudden cardiac death among older adults with ADRD.

When investigators examined information on 6,684 adults aged 65 years and older who were receiving care from a home health care agency in New York in 2019, they found that patients with ADRD were more than twice as likely to use antipsychotics than patients without ADRD (17.2% versus 6.6%). The most commonly used antipsychotic was quetiapine, a drug approved to help manage conditions including schizophrenia, bipolar disorder, and major depressive disorder.

Among patients living with ADRD, predictors of antipsychotic use included having greater limitations in activities of daily living, taking more medications, having behavioral and psychological symptoms, and living alone. Among patients living with ADRD, antipsychotic use was linked with having less improvement in activities of daily living when discharged from home health care.

"Antipsychotic use in persons with dementia is a serious patient safety issue, and it should be regularly reviewed for opportunities of deprescribing—such as dose reduction until discontinuation—whenever possible," said corresponding author Jinjiao Wang, Ph.D., RN, of the University of Rochester.

More information: Antipsychotic use among older patients with

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