

Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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“Dementia Drugs require Caution”

A new study reports that nearly three-quarters of older adults with dementia have filled prescriptions for medicines that act on their brain and nervous system but aren't designed for dementia. That's despite the potentially harmful risks that such drugs carry for older adults and the lack of evidence that they actually ease the dementia-related behavior problems that often prompt a doctor's prescription in patients with Alzheimer's disease and related disorders. In fact, some of the drugs have been linked to a worsening of cognitive symptoms in old adults. The study was published in the journal *JAMA* and based on data from 737,839 people with dementia and was the first large-scale study of prescription-filling patterns for psychoactive medications outside of nursing homes and other long-term care facilities. Nearly half of those in the study received an antidepressant, which might be prescribed to try to counteract the withdrawal and apathy often seen in dementia, but antidepressants don't treat this aspect of dementia. Even so, the study shows antidepressant prescribing at nearly triple the rate for older adults overall. The new study suggests a need to reduce prescribing to people in nursing homes and those living at home with dementia, too. In all, 73.5% of the study's community-based population filled at least one prescription for an antidepressant, opioid painkiller, epilepsy drug, anxiety medication or antipsychotic drug in a one-year period. None of the drug classes studied has received U.S. Food and Drug Administration approval for use in dementia, and evidence for their off-label use is slim. But all of the drugs are associated with special risks to people in their 60s and older, including falls or dependence that could lead to withdrawal. Most are included on the list known as the Beers criteria, which identifies medications with extra risks for all older adults, not just those with dementia. And while there is little evidence of benefit, all these medications have side effects. For example, some people starting a new antidepressant can experience nausea or feel a little "jittery." Taking these drugs for months on end is especially risky and if we add a psychotropic medication into the mix it may not be a helpful thing—and it comes with risks. Donovan Maust, M.D., M.S., a geriatric psychiatrist at the University of Michigan and VA Ann Arbor Healthcare System, said, “Apathy and withdrawal, and a tendency to get agitated, are common symptoms of dementia. And as much as health care providers want to help these patients and their family caregivers, these medications are just not helpful enough to justify this amount of prescribing.”

In the America that I love, please be incredibly careful with all anti-dementia drugs. Care givers and clinicians should exercise caution.

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