Dementia Care Without Drugs

Why a Least Medicating Approach Leads to the Best Dementia Care

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This is Reggie and Cal
The Intro

- Behavioral challenges associated with dementia are expression of need, not “symptoms.”
- Medicalizing the problem means medicalizing the response: 60% of nursing home residents receive a psychoactive drug.
- A least medicating approach is superior for health, safety, and quality of life.
“Doctor, what can you do for Pop?”

Deeply involved in the problem of the hostile, agitated senile are all members of the family... and you, their physician.

In discussing the use of ‘Thorazine’, Pollack observes: “Older persons with such disorders can be treated at home by the general practitioner with much benefit and with great relief to the family.”

With ‘Thorazine’, senile patients become calm, agreeable and sociable. They begin to eat and sleep better, often gain weight and improve physically.

for prompt control of the agitated, belligerent senile...

THORAZINE*

Ampules for immediate effect—carry them in your bag.

Also available: Tablets, Syrup and Suppositories

Smith, Kline & French Laboratories, Philadelphia

What Are We Talking About, Willis?

Four Classes of Psychoactive Drugs:

1) Anti-Depressants (e.g. Zoloft, Prozac)
2) Hypnotics (e.g. Halcion, Restoril)
3) Anti-Anxieties (e.g. Ativan, Valium)
4) Anti-Psychotics (e.g. Zyprexa, Risperdal, Seroquel, Haldol)
Why Give These Drugs?

- Defensible reason: to treat underlying mental illness, based on clinical evidence, after all alternative therapies have failed.
- Indefensible reasons: control, convenience, or as first response to behavioral challenge.
Why Do We Really Give These Drugs?

We don’t know what else to do.
Antipsychotics: Risks Galore, Including DEATH

- Side Effects: too many to name - strokes, falls, dizziness, weakness, headache, tardive diskinesia
- Some side effects are the symptoms the drugs are supposed to treat: agitation, restlessness, confusion, delirium, cognitive decline, seizures
- Double risk of death for elderly with dementia (FDA Black Box warning)
Define the Problem

LTC providers perceive explainable actions/reactions of residents with dementia as a “behavioral and psychological symptom of dementia.”

When behavior is a symptom, it becomes medicalized. Instead of a human problem, it becomes a medical problem necessitating medical intervention.

(what do you do when a baby cries?)
Least Medicating Approach - Principles

- Behavior is communication.
- Know the care recipient (relationships as the new medicine).
- Meet them where they are.
Least Medicating Approach Principles (cont’d)

- Almost all behavior has a discernible cause – you have to think it through.
- Team Approach: use staff, family, and experts to find the right intervention.
- Agitation is easier to prevent than to treat.
- Drugs only as last resort
CMS is leading an effort in all nursing homes highlighted by goal to reduce antipsychotic use by 15%. (California’s goal: 30% reduction by June 30)

Education focused on least medicating approach
Informed Consent

- Informed: risks, benefits, and alternatives (failure is negligence)
- Consent: all treatment requires agreement from the patients or surrogate (failure is battery).
- Regardless of capacity, all people have right to refuse.
Informed Consent?

<table>
<thead>
<tr>
<th>BRAND NAME (GENERIC NAME)</th>
<th>(\text{INFORMED CONSENT - ANTI-PHYCHOTICS})</th>
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<tbody>
<tr>
<td>JMPAZINE (drochlorperazone)</td>
<td>HALDOL (Fluphenazine)</td>
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<tr>
<td>OXITANE (loxapine)</td>
<td>MELLARIL (thioridazine)</td>
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<td>AVANE (thiothixene)</td>
<td>ORAP (pirimozine)</td>
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<td>JERENTIL (mesoridazine)</td>
<td>SPARINE (promazine)</td>
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<td>TARACTAN (chlorprothixene)</td>
<td>THORAZINE (chlorpromazine)</td>
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<td>TINDAL (acetophenazine)</td>
<td>VESPRIN (thioridazine)</td>
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<td>MOBAR (melperone)</td>
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<td>STELAZINE (thioridazine)</td>
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<td>TRILAFON (perphenazine)</td>
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<td>RISPERD (risperidone)</td>
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It is recommended that you take the medication named ________________ for the treatment of ____________.

ADVANTAGES: The medication is designed to relieve you of your symptoms. Research & clinical experiences have shown that it is safe & effective. The benefits from taking the medications usually outweigh the risks. Resident & or responsible party always retain the right to revoke this decision.

SIDE EFFECTS: Any medication may produce unwanted side effects along with the desired results. Some effects may appear even before benefit from the medicine is experienced. If side effects do appear, consult your physician. Side effects usually disappear with continued treatment, although some side effects will persist, even after stopping the medication.

COMMON SIDE EFFECTS: Sedation, drowsiness, dry mouth, constipation, blurred vision, extrapyramidal reaction, weight gain, edema, postural hypotension, sweating, loss of appetite, urinary retention.

SOCIAL ATTENTION FOR: Tardive dyskinesia, seizure disorder, chronic constipation, glaucoma, skin pigmentation.

When you consent to treatment with this medication, you will have been informed as to the amount of medication, how often it will be given to you, whether or not it is available on request (PDR), how it will be given and how long you may expect to take it. Often different medications within this group may be given, or adjustment made to dosage. You have been informed of the common side effects of all listed medications, however some side effects are more likely to occur with one or more medications than others. Also, some reactions are more prone to side effects. For this reason, you should notify your doctor if you think you are having side effects.

I hereby give consent to start treatment with ________________ because I believe my emotional problem represents a greater danger to my health and wellbeing than any possible side effects.

Signature: ______________________ Date: __/__/____ Relationship: ________________

The information above has been discussed with the resident & responsible party who reports having read & understood it except for comments listed.

Physician Signature: ______________________

WEE MEMORIAL HOSPITAL
Illinois Nursing Unit
Battery?
Assisted Living Liability

- Facility initiates the prescription
- Pattern of using drugs to sedate
- Continued administration despite obvious deleterious effects
- Drug given despite refusal
Alternatives - Resources

http://www.alzheimers-illinois.org/pti/comfort_care_guide.asp
The CANHR Campaign

www.canhr.org/stop-drugging
Thank you!

For all that you do, for all that you’ve done, and for continuing to try to do better.