

Drug use evaluation of antipsychotic use for behavioural and psychological symptoms of dementia

Everything you need to complete the drug use evaluation (DUE) can be found here

Staff in aged care facilities involved in medicine usage can use these resources to undertake the DUE. An accredited pharmacist, a GP or a nursing staff member may lead the project and collect the initial data. A multidisciplinary team approach is ideal for successfully carrying out the DUE, preferably with an advisory team appointed to assist and advise during the program.

This activity is recognised by a number of health professional bodies as contributing to continuing education and professional development. To be eligible for professional development points on completion of this activity you must:

- Provide you details on the DUE access page on the NPS website, including your professional membership number (where applicable). If you did not do so before downloading this kit, please call Claire Green at NPS on 02 8217 8700 (select option 2).
- Notify the NPS that you have completed this activity by submitting the evaluation survey 'What did you think about the DUE kit?' on the NPS website (www.nps.org.au/DUE).

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The information contained in this material is derived from a critical analysis of a wide range of authoritative evidence.

Any treatment decision based on this information should be made in the context of the clinical circumstances of each patient.

Before you start

How this DUE can help in your aged care facility

DUE promotes optimal drug therapy. It involves:

- monitoring drug use
- comparing drug use with specific predefined standards or best practice
- initiating appropriate actions when medicines use is inconsistent with predefined standards.¹

Completing this DUE will allow you to:

- Determine the appropriateness of the use of antipsychotic medicines for managing behavioural and psychological symptoms of dementia within your aged care facility.
- Identify opportunities for improving quality use of these medicines, and act on them.
- Assist your aged care facility meet components of the *Residential Care Standards* issued by the Aged Care Standards and Accreditation Agency, in particular
 - Standard 2.1 relating to continuous improvement activities
 - Standard 2.7 where residents' medicines are managed safely and correctly
 - Standard 2.13 Behavioural management.²
- Comply with the Australian Pharmaceutical Advisory Council *Guidelines for Medication Management in Residential Aged Care Facilities*, in particular Recommendation 3 – Medication Review where residents' medications should be reviewed by members of the health professional team.³
- Assist pharmacists to provide facility focused activities to promote the quality use of medicines (in line with Pharmaceutical Society of Australia Guidelines and Standards).⁴

Where to start

1. Read the following before starting the DUE:
 - Best practice criteria for managing behavioural and psychological symptoms of dementia in aged care facilities (page 5).
 - Role of antipsychotics in managing behavioural and psychological symptoms of dementia. *Prescribing Practice Review* No.37, April 2007 (also available from the NPS website: www.nps.org.au).
2. Follow the steps in each phase of the DUE cycle shown on page 4.

DUE is a cyclical process with a number of phases. It is most effective if all phases in the cycle are completed sequentially, rather than separate activities being performed in isolation.¹

Professional development

This activity is recognised by a number of health professional bodies as contributing to continuing education and professional development. To be eligible for professional development points you must:

- Provide your details on the DUE access page on the NPS website, including your professional membership number (where relevant). If you did not do so before downloading this kit, please call Claire Green at NPS on 02 8217 8700 (option 2).
- Notify NPS that you have completed this activity by submitting the evaluation survey 'What did you think about the DUE kit?' on the NPS website (www.nps.org.au/DUE).

Pharmacists

This activity has been accredited for Group 3 CPD suitable for inclusion in an individual pharmacist's CPD plan. Once completed, please self-record the DUE activity in your CPD record quoting the accreditation number. The number of credits awarded will depend on the number of hours spent engaged in learning as part of the activity. To be eligible for Group 3 credits you will need to document a structured reflection on practice to identify learning needs, the time spent accessing information in preparation for the DUE and an evaluation of how practice has improved e.g. repeated data collection after changes have been implemented.



Accreditation No: CX110010a

Nurses

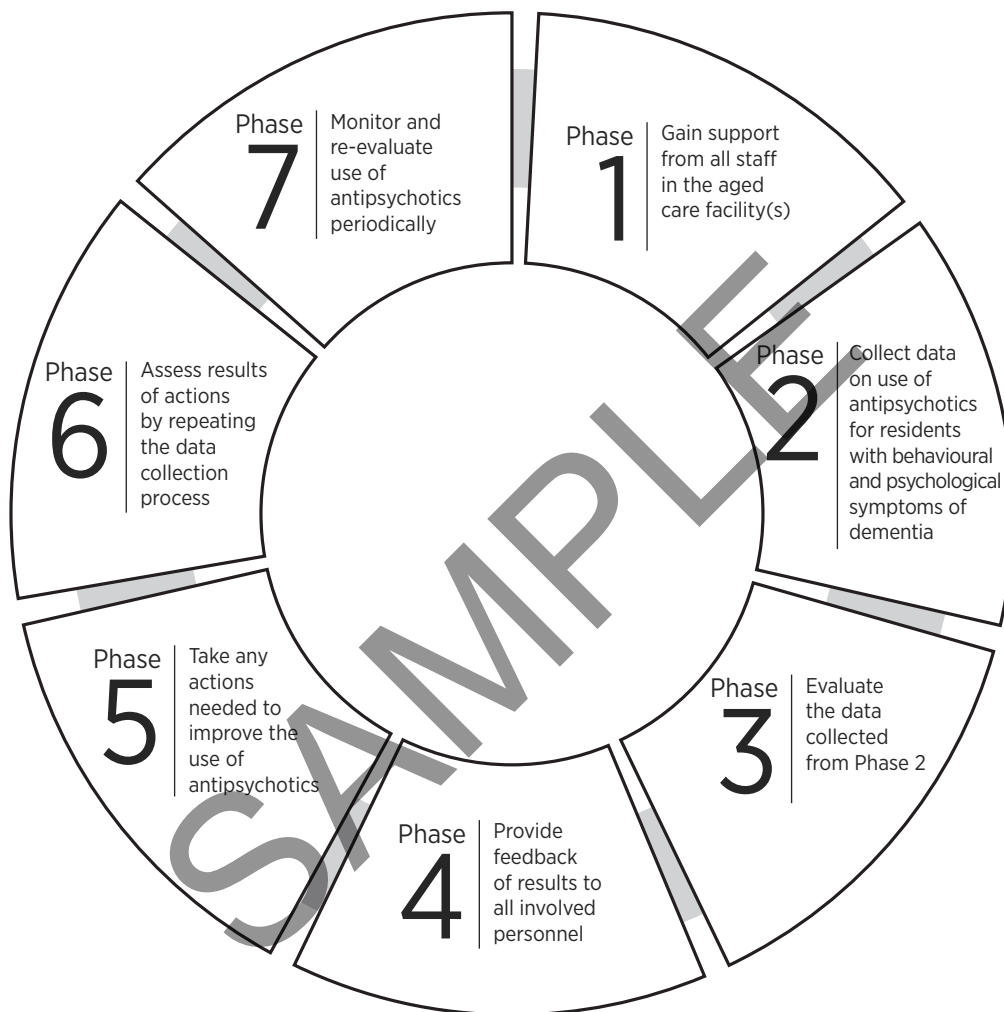
This activity has been endorsed by APEC number 061110344 as authorised by Royal College of Nursing, Australia according to approved criteria, and attracts 15 Continuing Nurse Education points.



Note this DUE does not include evaluation of the use of antipsychotics in managing psychiatric disorders outside the behavioural and psychological symptoms of dementia.

DUE: A phased approach

(Adapted from the Australian Drug Usage Evaluation Starter Kit¹)



Helpful hints¹

- The DUE process involves cooperation, coordination and consideration.
- Good public relations will minimise antagonism.
- Avoid personal bias in determining actual patterns of use.
- Avoid a 'Pass/Fail' method of evaluation to prevent a defensive attitude among practitioners.
- Present facts and suggested modifications with supporting evidence.
- Present data that do not openly identify a 'guilty' individual.
- Use personal contacts to promote the protocol you are suggesting.

Why do this DUE?

Current guidelines recommend treating behavioural and psychological symptoms in people with dementia using non-drug strategies, and medicines with demonstrated efficacy only when necessary.

Pharmacological treatment should target only those symptoms or behaviours which respond to medicines. This approach minimises unnecessary medicines and reduces adverse outcomes.

Antipsychotic medicines are frequently used to manage behavioural and psychological symptoms of dementia but their benefits are small while the adverse effects are significant. Excessive or inappropriate use of

antipsychotics in older people is a concern, as this group is more susceptible to serious adverse effects, including increased mortality overall, falls, confusion, and memory impairment.

Best practice criteria are stated standards that are fulfilled when drug use is optimal. Below is a set of best practice criteria based on current evidence for managing behavioural and psychological symptoms of dementia. You may need to modify these so that they suit the needs in your aged care facility. Evidence for these criteria is discussed on pages 6–11.

Best practice criteria

- Assess and manage underlying causes of behavioural disturbances and try non-drug strategies. Combinations of non-drug strategies tailored to the needs of individuals and carers appear to be most helpful.
- Reserve antipsychotic medicines for distressing behavioural disturbances that do not respond adequately to non-drug strategies; antipsychotics have only modest benefits and may cause serious adverse effects.
- Select an antipsychotic medicine that has proven efficacy and the least potential for adverse effects.
- Use the lowest effective doses of antipsychotic medicines.
- Document the frequency and severity of the target behaviour as well as response to therapy and adverse effects.
- Antipsychotic medicines should be reviewed early and the ongoing need for a medicine should be regularly re-assessed with an individual risk-benefit analysis.