

ECHO IDAHO

Alzheimer's Disease and
Related Dementias

Medication Use for Psychiatric Concerns in Individuals with Dementia

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University of Idaho
School of Health and Medical
Professions



Learning Objectives

- What is BPSD?
- Algorithm for treatment of BPSD
- Case Presentations
- What's NOT on the algorithm for BPSD?

BPSD: Behavioral and Psychosocial Symptoms of Dementia

- Aggression, verbal and physical
- Agitation
- Psychosis
- “Mood Symptoms”
- Screaming, Calling Out
- Sexual Disinhibition
- Defiance
- Wandering
- Hostility, Intrusiveness
- Repetitive Behavior/Vocalization
- Hoarding
- Nocturnal restlessness
- Emotional lability
- Paranoid behaviors
- Psychosis, Hallucinations, Delusions

Algorithm for treatment for BPSD

**First line is OPTIMIZATION OF NONPHARMACOLOGIC INTERVENTIONS*

- 1) Decrease Anticholinergic Burden (*acbcalc.com*)
- 2) Optimize treatment for dementia
 - Cholinesterase Inhibitor
 - Memantine
- 3) Sleep Optimization // Nocturnal/Circadian Agitation
 - Consider Trazodone*
 - Some say DORA (like suvorexant, “Belsomra”)**

International Psychogeriatrics (2024),36:4,251-262.

Psychiatry Research 295 (2021) 113641

Algorithm for treatment for BPSD

4) SSRI for Mild-Moderate Agitation

- First Line: Citalopram (max 20-30 mg) ... from the CIT-AD trial
- Second Line: Escitalopram (max 20 mg)
- Third Line: Sertraline (max 150 mg)

Algorithm for treatment for BPSD

5) Moderate-Severe Agitation

- Second Generation Antipsychotic
 - First Line: Risperidone (max 2 mg daily)
 - Second Line: Aripiprazole (max 10 mg daily)
 - Last Line: Olanzapine
 - Brexpiprazole (Rexulti, but no one can afford)
- Prazosin (max 2 mg in the morning, 4 mg at bedtime)
- Anticonvulsant
 - Carbamazepine (max 400 mg daily)
 - Oxcarbazepine
 - Gabapentin
- Dextromethorphan-Quinidine (Nudexta, no one can afford)
- Nabilone (synthetic cannabinoid, but no one can afford)

Pain is Undertreated . . . Right?

83 yo Female

- MoCA 18/30 in February 2025 (9 months prior)
- TSH 5.79 on 2/5/2025

Request to refill opioid

Pertinent Medications:

- Diphenhydramine-Acetaminophen (“Tylenol PM”), ½ tablet every evening
- Escitalopram (Lexapro) 5 mg daily
- Gabapentin 100 mg nightly PRN of Insomnia or Pain (takes most nights)
- Hydrocodone-Acetaminophen (Norco) 10-325 mg every 6 hours PRN Pain*
- Naproxen (Naprosyn) 500 mg 2 times every day PRN Pain (takes “sometimes”)

Pain is Undertreated . . . Right?

Pharmacist Recommendation:

- Evaluate if patient is misidentifying pain
 - This is common in dementia
 - Does pain decrease when distracted?
 - Notice that pain does not decrease with an increase in strength

Sleep Worsens Cognition . . . Should We Use a Medication For Sleep?

78 yo Female

- MoCA 18/30 in October 2024 (16 months prior)
- TSH 2.36 seven years ago (PCP outside our hospital system)

Request for medication for sleep

Pertinent Medications:

- Bupropion (Wellbutrin) 150 mg XL daily
- Sertraline (Zoloft) 100 mg daily

Sleep Worsens Cognition . . . Should We Use a Medication For Sleep?

Our Recommendations:

- Minimize daytime napping. Obtain physical activity during the day.
- Regarding sleep medications, pharmacist believes risk outweighs benefits.
- Optimize bedtime ritual (sleepy time tea, warm milk)
- Trial melatonin
- Stop Bupropion

Sedating Medication for Air Travel?

72 yo Female

- MoCA 9/30 in October 2025 (5 months prior)
- TSH 1.23 in December 2023

Request (over the phone) for a medication for agitation associated with travel

Pertinent Medications:

- Memantine (Namenda) 10 mg twice daily

Sedating Medication for Air Travel?

Our Social Worker Recommended:

- In the car, keep the patient and the husband as separated as possible
- Use child locks, to prevent the patient from leaving the car on her own
- Have distractions ready
 - Snacks, movies, calming music, books
- May contact Alzheimer Association Crisis hotline

Alzheimer Dementia Medications Should Be Optimized Before Other Meds . . . Right?

79 yo Female

- MoCA 16/30 in December 2023 (9 months prior)

Primary concern for years is anxiety/agitation . . . Previously had prescription for Diazepam (Valium) at bedtime

Pertinent Medications:

- Donepezil (Aricept) 10 mg daily
- Memantine (Namenda) 5 mg twice daily
- Sertraline (Zoloft) 50 mg daily

What's NOT on the algorithm for BPSD?

Benzodiazepines

- Alprazolam (Xanax)
- Lorazepam (Ativan)

Most Antipsychotics

- Quetiapine (Seroquel)
- Haloperidol (Haldol)

Valproic acid (Depakote)

Hydroxyzine (Atarax, Vistaril)

Hormones

- Testosterone
- Estrogens, Medroxyprogesterone

Mirtazapine (Remeron)

Clonidine

Sleep Medications

- Z-Hypnotics
- Doxepin
- OTCs

Stimulants

Bupropion (Wellbutrin)

Dextromethorphan-Bupropion (Auvelity)

“Skeletal Muscle Relaxants”

- Tizanidine (Zanaflex)
- Methocarbamol (Robaxin)
- Cyclobenzaprine (Flexeril)

Other SSRIs

- Fluoxetine (Prozac)
- Paroxetine (Paxil)