



The Better Alternative to Antipsychotic Medications

A recent research study from Great Britain suggests that the use of antipsychotic drugs to manage difficult behaviors associated with Alzheimer's disease and other related dementias may double the patient's risk for death.

In 2005 the FDA issued a "black box" warning of all atypical antipsychotics used in those patients with dementia. The FDA initiated the warning after studies in the United States discovered a higher risk of sudden death in patients with an Alzheimer's diagnosis after 180 days use of these medications. In 2008, this warning was extended to include first generation antipsychotics as well.

Most eldercare experts who specialize in the care of those with dementia agree that the use of antipsychotic medications is not necessary to manage difficult behavioral challenges in those with dementia. Many times these medications have a variety of side effects that cause additional concerns for caregivers. These medications may cause the person with dementia to become dozy, lethargic, and apathetic. When a person with dementia sleeps all day as a result of medication, caregivers may see them having difficulty sleeping at night. Caregivers often also find that the person with dementia may develop an unsteady gait and an increase in saliva which can cause difficulty in swallowing.

The key to managing difficult behaviors is in how the caregiver perceives the person with dementia. The caregiver must be able to separate the person from the disease and remember that all care performed is for a "person" and not a "disease." All behaviors are a form of communication. Often when a person with dementia is becoming frustrated the first step to resolving this frustration is to find out what unmet need they may have. Ultimately all people yearn to be safe and to have their core psychological needs met.

Caregivers must provide a means to ensure that the person with dementia has a personally meaningful day and night. This means that throughout the course of the day they are engaged in activities or projects that are familiar, meaningful, and purposeful. For example, Helen's caregiver knows that Helen is a mother of three children. Helen is pacing her home waiting for her "kids" to get home from school. Knowing that the children are now grown and will not be "walking through the door at 3:15pm" her caregiver has discovered that Helen's afternoon routine was to make a snack for the children before they came home from school. Her caregiver

Alzheimer's Care Group
12400 North Meridian Street, Suite 170
Carmel, IN 46032
317-218-5111
www.AlzCareGroup.com

sets up a snack for Helen to make and begins to validate her feelings of motherhood and her desire to keep her children safe. The caregiver also begins to reminisce during this time about her children and her routine as a mother. Through this process her “unmet” need is resolved and she now is feeling safe and content.

This is not a simple process that occurs quickly. To effectively communicate and reminisce with a person with dementia, a caregiver must have a good understanding of the life story of the person.

A stressed out caregiver may feel that antipsychotic medication is the best and only option; however, after weighing the side effects of this type of medication and researching other alternatives, they may find there are better, more effective, ways to help manage the stress of challenging behaviors. As these studies have shown, the risk of sudden death is high, and the improvement in the quality of life is not a guaranty.

For more information the alternative to antipsychotic medication to resolve challenging behaviors, please contact Alzheimer’s Care Group at 317-218-5111 or www.alzcaregroup.com.

Alzheimer’s Care Group
12400 North Meridian Street, Suite 170
Carmel, IN 46032
317-218-5111
www.AlzCareGroup.com