

NKR 55 demens og medicin PICO 2 seponering af antipsykotisk medicin versus forsæt behandling

Review information

Authors

Sundhedsstyrelsen¹

¹[Empty affiliation]

Citation example: S. NKR 55 demens og medicin PICO 2 seponering af antipsykotisk medicin versus forsæt behandling. Cochrane Database of Systematic Reviews [Year], Issue [Issue].

Characteristics of studies

Characteristics of included studies

Ballard 2004

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Ballard 2008

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Bridges Parlet 1997

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Devanand 2011

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Devanand 2012

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Findlay 1989

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

Ruths 2004

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermai M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

vanReekum 2002

Methods	
Participants	
Interventions	
Outcomes	
Identification	
Notes	Data obtained from: Declercq T.; Petrovic M.; Azermi M.; Vander, Stichele R.; De, Sutter A.; van, Driel M.; Christiaens T. Withdrawal versus continuation of chronic antipsychotic drugs for behavioural and psychological symptoms in older people with dementiaThe Cochrane database of systematic reviews 2013;3(Journal Article):CD007726United Kingdom 2013

Risk of bias table

*Footnotes***Characteristics of excluded studies****Cohen Mansfield 1999**

Reason for exclusion	Wrong patient population
-----------------------------	--------------------------

Footnotes

Characteristics of studies awaiting classification

Footnotes

Characteristics of ongoing studies

Footnotes

References to studies

Included studies

Ballard 2004

Ballard, C. G.; Thomas, A.; Fossey, J.; Lee, L.; Jacoby, R.; Lana, M. M.; Bannister, C.; McShane, R.; Swann, A.; Juszczak, E.; O'Brien, J. T.. A 3-month, randomized, placebo-controlled, neuroleptic discontinuation study in 100 people with dementia: the neuropsychiatric inventory median cutoff is a predictor of clinical outcome. *The Journal of clinical psychiatry* 2004;65(1):114-119. [DOI:]

Ballard 2008

Ballard, C.; Hanney, M. L.; Theodoulou, M.; Douglas, S.; McShane, R.; Kossakowski, K.; Gill, R.; Juszczak, E.; Yu, L. M.; Jacoby, R.; DART-AD investigators. The dementia antipsychotic withdrawal trial (DART-AD): long-term follow-up of a randomised placebo-controlled trial. *The Lancet.Neurology* 2009;8(2):151-157. [DOI: 10.1016/S1474-4422(08)70295-3 [doi]]

Ballard, C.; Lana, M. M.; Theodoulou, M.; Douglas, S.; McShane, R.; Jacoby, R.; Kossakowski, K.; Yu, L. M.; Juszczak, E.; Investigators DART AD. A randomised, blinded, placebo-controlled trial in dementia patients continuing or stopping neuroleptics (the DART-AD trial). *PLoS medicine* 2008;5(4):e76. [DOI: 10.1371/journal.pmed.0050076 [doi]]

Bridges Parlet 1997

Bridges-Parlet, S.; Knopman, D.; Steffes, S.. Withdrawal of neuroleptic medications from institutionalized dementia patients: results of a double-blind, baseline-treatment-controlled pilot study. *Journal of geriatric psychiatry and neurology* 1997;10(3):119-126. [DOI: 10.1177/089198879701000306 [doi]]

Devanand 2011

Devanand, D. P.; Pelton, G. H.; Cunqueiro, K.; Sackeim, H. A.; Marder, K.. A 6-month, randomized, double-blind, placebo-controlled pilot discontinuation trial following response to haloperidol treatment of psychosis and agitation in Alzheimer's disease. *International journal of geriatric psychiatry* 2011;26(9):937-943. [DOI: 10.1002/gps.2630 [doi]]

Devanand 2012

Devanand, D. P.; Mintzer, J.; Schultz, S. K.; Andrews, H. F.; Sultzer, D. L.; de la Pena, D.; Gupta, S.; Colon, S.; Schimming, C.; Pelton, G. H.; Levin, B.. Relapse risk after discontinuation of risperidone in Alzheimer's disease. *The New England journal of medicine* 2012;367(16):1497-1507. [DOI: 10.1056/NEJMoa1114058 [doi]]

Findlay 1989

Findlay, D. J.; Sharma, J.; McEwen, J.; Ballinger, B. R.; MaClennan, W. J.; McHarg, A. M.. Double-blind controlled withdrawal of thioridazine treatment in elderly female inpatients with senile dementia. *International journal of geriatric psychiatry* 1989;4(2):115-120. [DOI: 10.1002/gps.930040210]

Ruths 2004

Ruths, S.; Straand, J.; Nygaard, H. A.; Bjorvatn, B.; Pallesen, S.. Effect of antipsychotic withdrawal on behavior and sleep/wake activity in nursing home residents with dementia: a randomized, placebo-controlled, double-blinded study. *The Bergen District Nursing Home Study. Journal of the American Geriatrics Society* 2004;52(10):1737-1743. [DOI: 10.1111/j.1532-5415.2004.52470.x [doi]]

vanReekum 2002

van Reekum, R.; Clarke, D.; Conn, D.; Herrmann, N.; Eryavec, G.; Cohen, T.; Ostrander, L.. A randomized, placebo-controlled trial of the discontinuation of long-term antipsychotics in dementia. *International psychogeriatrics* 2002;14(2):197-210. [DOI:]

Excluded studies***Cohen Mansfield 1999***

Cohen-Mansfield, J.; Lipson, S.; Werner, P.; Billig, N.; Taylor, L.; Woosley, R.. Withdrawal of haloperidol, thioridazine, and lorazepam in the nursing home: a controlled, double-blind study. *Archives of Internal Medicine* 1999;159(15):1733-1740. [DOI:]

Other references

Additional references

Other published versions of this review

Classification pending references

Data and analyses

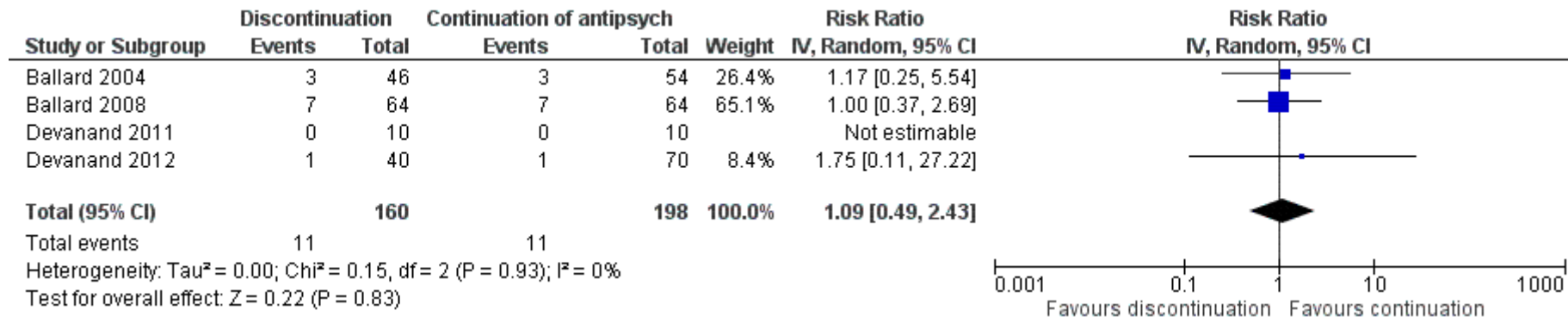
1 Discontinuation versus continuation of antipsychotic medication

Outcome or Subgroup	Studies	Participants	Statistical Method	Effect Estimate
1.1 Mortality_after the intervention	4	358	Risk Ratio (IV, Random, 95% CI)	1.09 [0.49, 2.43]
1.2 Restart on antipsychotic medication due to withdrawel symptoms during the intervention period	1	110	Risk Ratio (M-H, Fixed, 95% CI)	1.83 [1.18, 2.83]
1.3 BPSD < 3 mo after the intervention	2	112	Std. Mean Difference (IV, Random, 95% CI)	0.25 [-0.60, 1.09]
1.5 Cognitive function_ < 4 wk after the interventionen	1	84	Mean Difference (IV, Random, 95% CI)	0.80 [-0.88, 2.48]
1.6 ADL_after the interventionen	1	106	Mean Difference (IV, Fixed, 95% CI)	-1.60 [-4.68, 1.48]
1.7 BPSD > 3 mo after the intervention	2	142	Std. Mean Difference (IV, Random, 95% CI)	-0.05 [-0.66, 0.55]
1.8 Aggitation_up until 4 wk after the interventior	1	82	Mean Difference (IV, Fixed, 95% CI)	0.00 [-2.26, 2.26]
1.10 Aggitation number of patients_up until 4 wk after the intervention	2	146	Risk Ratio (IV, Random, 95% CI)	4.42 [0.74, 26.27]
1.12 Insomnia/sleep problems number of patients _up until 4 wk after the intervention	2	140	Risk Ratio (IV, Random, 95% CI)	0.37 [0.08, 1.69]

1.14 Dropout due to worsening in BPSD symptoms during the intervention	3	299	Risk Ratio (IV, Random, 95% CI)	1.26 [0.61, 2.60]
--	---	-----	---------------------------------	-------------------

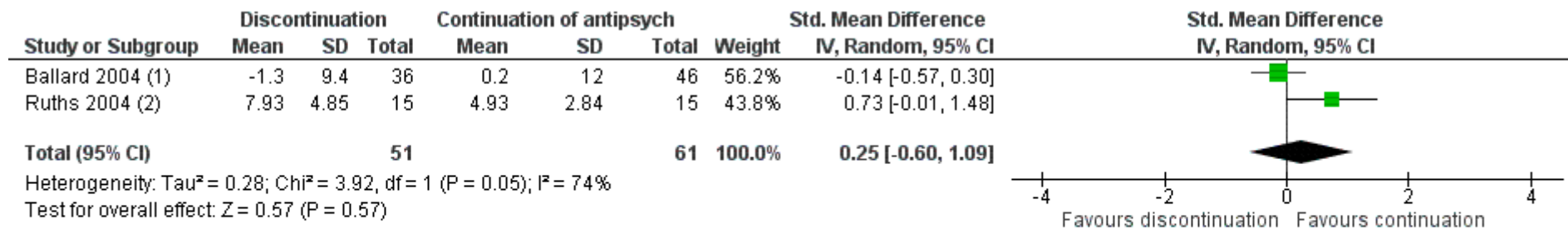
Figures

Figure 1 (Analysis 1.1)



Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.1 Mortality_after the intervention.

Figure 2 (Analysis 1.3)

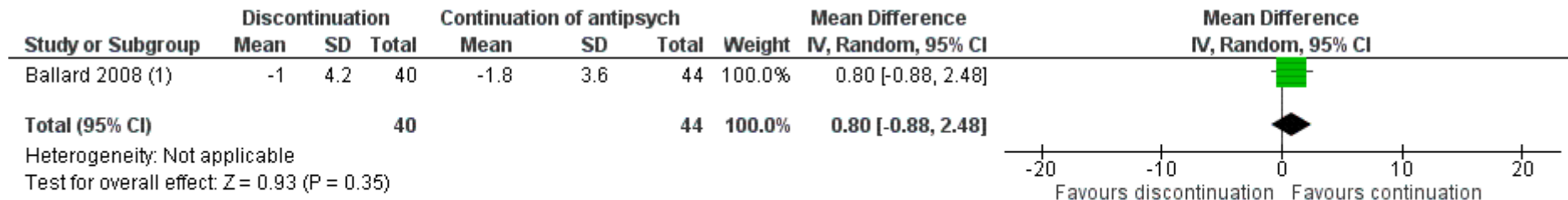


Footnotes

- (1) NPI
- (2) NPI-Q sumscore

Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.3 BPSD < 3 mo after the intervention.

Figure 3 (Analysis 1.5)

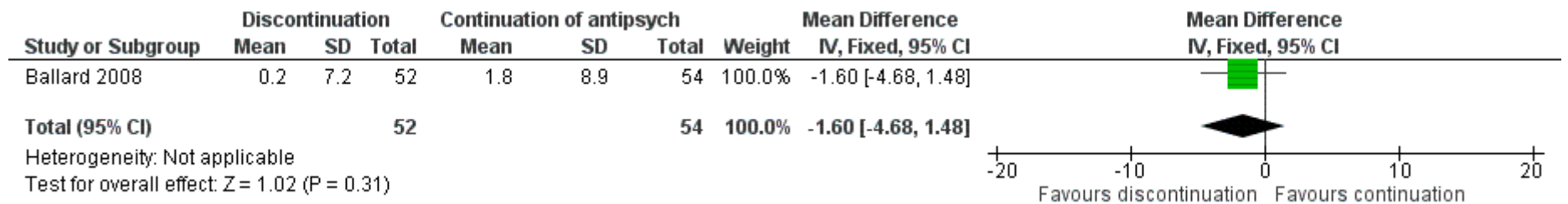


Footnotes

(1) MMSE

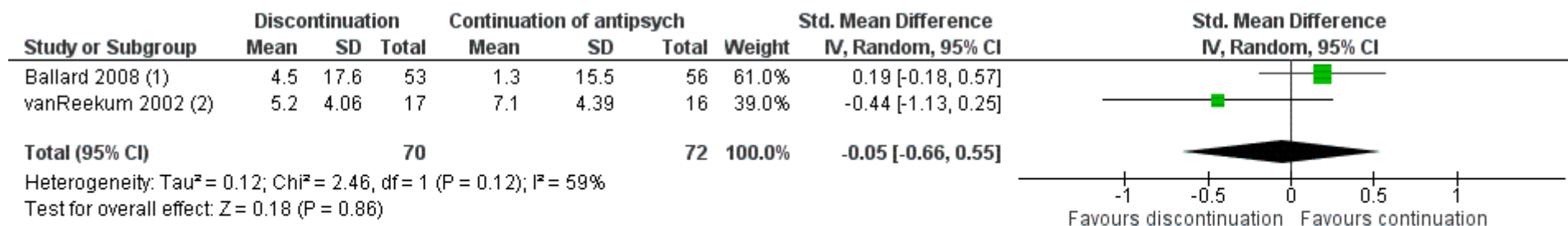
Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.5 Cognitive function_ < 4 wk after the interventionen.

Figure 4 (Analysis 1.6)



Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.6 ADL_ after the interventionen.

Figure 5 (Analysis 1.7)



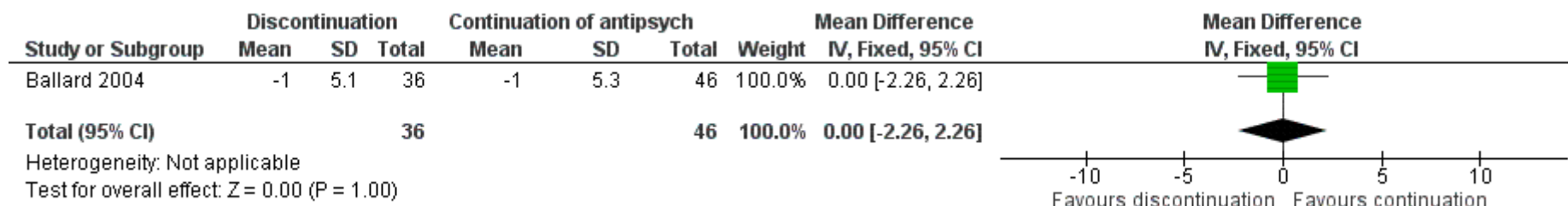
Footnotes

(1) Ballard 2008: NPI

(2) BEHAVE AD. Aflæst på graf. Missing SD: obtained SD from Kovach et al. American J Alzheimer's dis 2006.4.06.

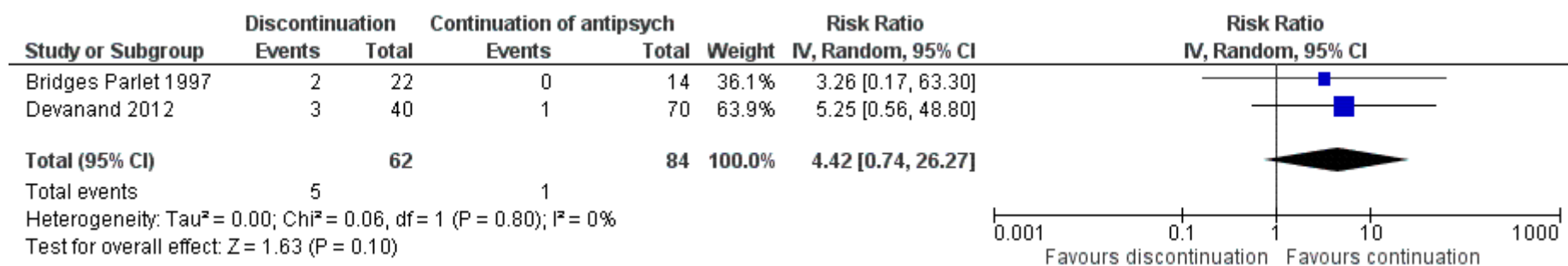
Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.7 BPSD > 3 mo after the intervention.

Figure 6 (Analysis 1.8)



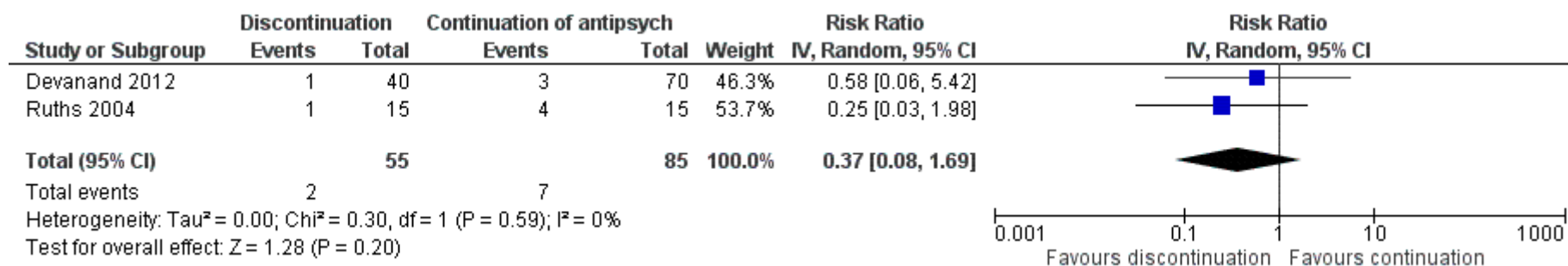
Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.8 Agitation_up until 4 wk after the intervention.

Figure 7 (Analysis 1.10)



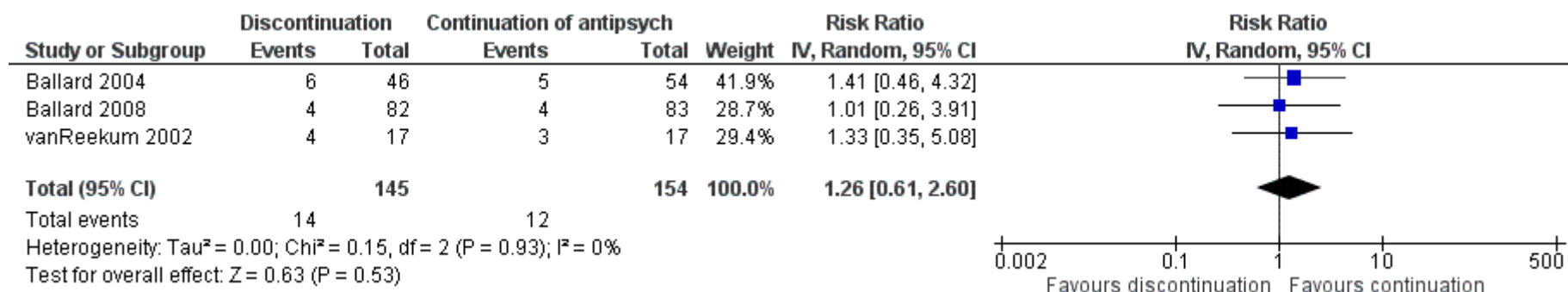
Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.10 Agitation number of patients_up until 4 wk after the intervention.

Figure 8 (Analysis 1.12)



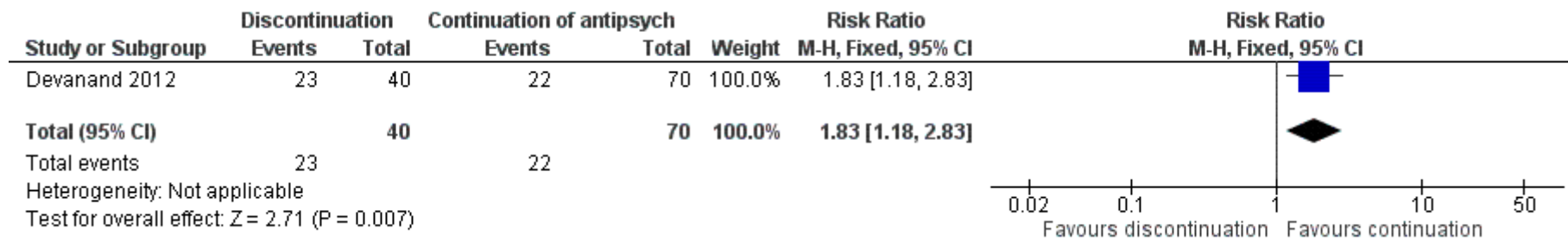
Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.12 Insomnia/sleep problems number of patients _up until 4 wk after the intervention.

Figure 9 (Analysis 1.14)



Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.14 Dropout due to worsening in BPSD symptoms during the intervention.

Figure 10 (Analysis 1.2)



Forest plot of comparison: 1 Discontinuation versus continuation of antipsychotic medication, outcome: 1.2 Restart on antipsychotic medication due to withdrawal symptoms during the intervention period.