



MEDICATIONS and ALZHEIMER'S DISEASE

To effectively treat and manage persons with dementia, it is necessary to focus on improved care, nutrition, environment and physical health. Problems may also arise from lack of mobility, lack of stimulation (boredom), and social isolation.

There are four medications approved by the FDA for the treatment of Alzheimer's Disease (Cognex, Aricept, Exelon, and Reminyl). These medications are recommended for the early stages of Alzheimer's and do not stop or cure the disease, but have been shown to slow the progression of the symptoms.

To date, no truly successful drug therapy has been designed to improve the functional state of patients with Alzheimer's Disease. Medications may be of significant help, but the benefits must be compared to the potential risks. For this reason, medications of "chemical restraints" should be the treatment of last resort for Alzheimer patients. Here is a list of drugs most commonly used to manage the symptoms of dementia.

Antipsychotic agents or major tranquilizers (Risperdone, Thorazine, Mellaril, Haldol, etc.) These drugs help to alleviate psychotic symptoms, whether the behavior is functional (due to mental causes) or organic (due to physical causes). They can control agitation and irritability, and may help clarify thought and improve self-care. These drugs will decrease hostility, hyperactivity and combativeness. They can also help control delusions, hallucinations, paranoid symptoms, and emotional and social withdrawal.

ADVERSE EFFECTS: Sedation, postural hypertension (dizziness on change of position), anticholinergic effects (dry mouth, constipation, rapid heartbeat, blurred vision, urinary retention).

They also cause what are called extrapyramidal reactions. These include akathisia (agitation or restlessness), acute dystonias (muscle spasms, especially head and neck), Parkinsonism-like symptoms (tremor, shuffling gait, rigid muscles, excessive drooling, pillrolling movements). The drugs most likely to cause the first set of reactions (sedation's, etc.) such as Thorazine and Mellaril, are less likely to cause the extrapyramidal reactions. The less sedating agents such as Haldol are more likely to cause the extrapyramidal reactions.

These drugs may also impair the body's thermoregulatory mechanisms. That is, they may make a person unable to keep warm in cold weather or cool in hot weather.



All of these drugs are long acting and can usually be given once daily. Sometimes Mellaril and Haldol are both used, with Haldol given during the day and Mellaril at night.

Antidepressants (Paxil, Prozac, Effesor, Elavil, Tofranil, Desyrel, Ludiomil, etc.)

These agents elevate mood, increase mental alertness and physical activity, improve appetite and sleep patterns. They may also have some sedative effects and some antianxiety properties.

ADVERSE EFFECTS: Dry mouth, constipation, rapid heartbeat, blurred vision, urinary retention, and dizziness on change of position. These effects may be very prominent. In some persons with heart conditions, certain of these drugs may aggravate the condition. These drugs are long acting and can usually be dosed once daily.

Antianxiety Drugs or minor tranquilizers (Valium, Librium, Serx, Antivan, Xanax)

These drugs will control moderate to severe daytime anxiety and tension in patients with neuroses and mild depression. They produce mild sedation without impairing daily activities. There are both long and short acting drugs. Many agents used for sleep (Dalmine, Ambien, Restoril) are similar drugs.

ADVERSE EFFECTS: Drowsiness, dizziness, unsteady gait, and weakness. High doses may cause confusion and other symptoms of organic brain syndrome. In elderly patients, paradoxical excitation is a possibility. These drugs may be beneficial to some dementia patients. However, there is an increased chance of paradoxical excitation.

Miscellaneous agents

Busprone (Buspar) is an antianxiety agent which does not cause sedation or dependency. It's been used to treat anxiety disorders, but its high safety profile is making it attractive for AD patients.

Benadryl is an antihistamine used as a sedative which has high anticholinergic effects (dry mouth, constipation, rapid heart beat, blurred vision, urinary retention) and is long acting.

Halcion is used to induce sleep and is similar to the antianxiety agents. It can cause anterograde amnesia and nightmares in dementia patients.

Hydergine is an ergot alkaloid which may improve some cognition in early stage, but long term benefits are unknown.



Vasodilators improve circulation and brain oxygenation. Alzheimer's Disease is not a vascular dementia, however.

Caregivers need to monitor the effects of any medication and communicate with their physician any side effects, concerns or questions.

(From Bradley R. Williams, Pharm, D., and Dr. Patricia Blanchette) 3/92; 4/00