

Background

Antipsychotic drugs are used to treat severe agitation and psychosis in dementia when other strategies have failed. But importance of monitoring to be kept in mind. Antipsychotics should be commenced at the lowest possible dose, titrated carefully and reviewed within the first four weeks and after 6-12 weeks. At review, discontinuation of the antipsychotic should be considered unless there is ongoing significant risk and/or distress. The antipsychotic prescribing in dementia initiation and review form should be used when commencing treatment and for review throughout treatment. These forms seem to have been forgotten over the years.

Aims

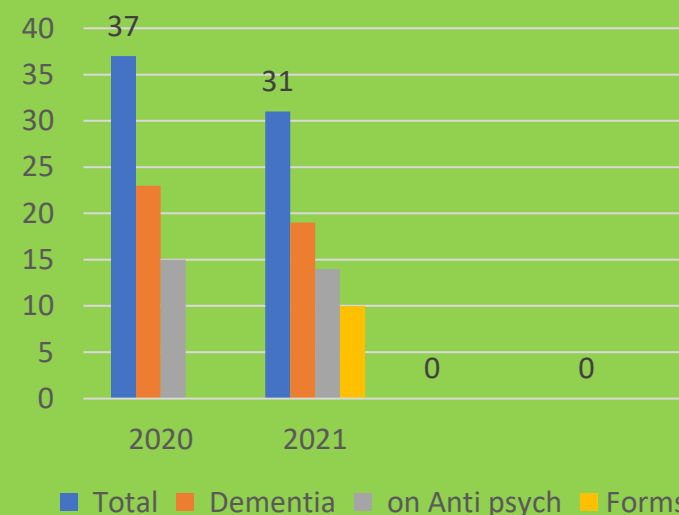
To monitor the use of antipsychotic monitoring Review forms in Dementia patients in old age wards.

Methods

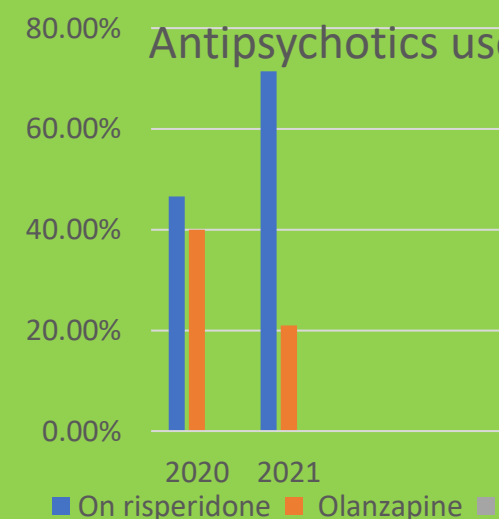
All inpatients in Old age wards in Leverndale Hospital identified, from a period between October 2020 to January 2021. Patients diagnosed with dementia shortlisted. Those started or switched to an antipsychotic medication were identified. All documentation (handwritten and computerised- Emis) were examined.

Results

Antipsychotic monitoring forms nil in Oct.20, increased to 71% in Jan 2021



Most common Antipsychotics used



Discussion

Initially none of the patients who were on Antipsychotic medication had the prescription form in place. When forms were kept with Kardex's, monitoring became more robust. This reflected when forms were easy to find, more monitoring became possible.

Conclusion

Initially all information about antipsychotics was at different places, No organised method of finding the information but once the monitoring form placed with Kardex compliance of using the monitoring improved although still room for improvement.

References

- 1)GGC Antipsychotic monitoring
- 2)<https://www.nice.org.uk/advice/ktt7/resources/antipsychotics-in-people>
- 3)<https://bmjopenquality.bmj.com/content/bmjopenquality/9/1/e000778.full.pdf>