3 STOMP: A review 2 years after a Medication Reduction initiative in a Community Learning Disability Service

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 AIMS AND HYPOTHESIS To review the outcome of a medication reduction initiative carried out two years previously on a cohort of patients with Learning Disability in Coventry. They had all been prescribed antipsychotic medication to help in the management of behavioural disorders.   The purpose was to assess if the patients' had:-   1) Needed to recommence or increase the original medication 2) Required further MDT input to support their behaviour 3) Required increased support from increased staffing levels or a move to more supported accommodation 4) Required inpatient hospital care 5) Commenced alternative medication 6) Remained stable or were discharged

BACKGROUND Over the past few years, there have been two National drivers as part of the Transforming Care Agenda. One has focused on the prevention of unnecessary hospital admissions and the other, the stopping of over prescription of psychotropic medication. It is imperative to evaluate what potential effect medication reduction can have on the behaviour and consequent support requirements.

METHODS The cohort's progress was followed up by via clinical records and letters held on electronic systems.

RESULTS Of the 32 clients who either had medication stopped or reduced, 4 had either restarted antipsychotic medication or another form of psychotropic medication Of the 32 clients, 0 have needed additional input through the MDT. Of the 32 clients, 1 needed increased input from their support package or a move of accommodation   Of the 32 clients, 1 required hospital care.

CONCLUSIONS This review at 2 years suggests that reductions in psychotropic medication prescribed as an adjunct in the management of behavioural disorders can be made without the risk of significantly destabilising patients.