

Antipsychotic Deprescribing Algorithm

Why is patient taking an antipsychotic?

- Psychosis, aggression, agitation (behavioral and psychological symptoms of dementia) treated ≥ 3 months (symptoms controlled, or no response to therapy)

- Primary insomnia treated for any duration or secondary insomnia where underlying comorbidities are managed

- Schizophrenia
- Schizo-affective disorder
- Bipolar disorder
- Acute delirium
- Tourette's syndrome
- Tic disorders
- Autism
- Less than 3 months duration of psychosis in dementia

- Intellectual disability
- Developmental delay
- Obsessive-compulsive disorder
- Alcoholism
- Parkinson's disease psychosis
- Adjunct treatment of Major Depressive Disorder

Recommend deprescribing

Taper and stop antipsychotic

Slowly in collaboration with patient and/or caregiver; e.g., 25%-50% dose reduction every 1-2 weeks

Stop antipsychotic

Good practice recommendation

Continue antipsychotic

Or consult psychiatrist if considering deprescribing

Monitor every 1-2 weeks for duration of tapering

Expected benefits:

- May improve alertness, gait, reduce falls, or extrapyramidal symptoms

Adverse drug withdrawal events (closer monitoring for those with more severe baseline symptoms):

- Psychosis, aggression, agitation, delusions, hallucinations

If behavioral and psychological symptoms of dementia relapse:

Consider:

- Non-drug approaches (e.g. music therapy, behavioral management strategies)

Restart an antipsychotic drug:

- Restart antipsychotic at lowest dose possible if resurgence of behavioral and psychological symptoms of dementia with re-trial of deprescribing in 3 months
- At least 2 attempts to stop should be made

If insomnia relapses, recommend non-drug approaches to patients:

1. Go to bed only when sleepy
2. Do not use bed or bedroom for anything but sleep (or intimacy)
3. If not asleep within about 20-30 min at the beginning of the night or after an awakening, exit the bedroom
4. If not asleep within 20-30 min on returning to bed, repeat #3
5. Use alarm to awaken at the same time every morning
6. Do not nap
7. Avoid caffeine after noon
8. Avoid exercise, nicotine, alcohol, and big meals within 2 hrs of bedtime