

GPS URGED TO ROUTINELY ASSESS BENEFITS AND HARMS FOR PATIENTS TAKING ANTIPSYCHOTICS

Psychotic disorders affect 4% of Australians. Those taking antipsychotic medicines to treat their condition not only bear the burden of disease, but also a significant burden of side effects from the medicines they take. Balancing the benefits and harms of these medicines for each individual represents a constant challenge for GPs.

An Australian survey found that about 80% of people with a psychotic illness taking risperidone or olanzapine reported one or more troublesome side effects and worsened quality of life. Another study found that more than half of those tested had significant risk factors for cardiovascular disease or diabetes.

The latest NPS education program, *Balancing benefits and harms of antipsychotic therapy*, promotes the safe and effective use of antipsychotic therapy and facilitates GP decision-making about antipsychotics in three conditions: schizophrenia, bipolar disorder and behavioural and psychological symptoms of dementia.

NPS Clinical Adviser, Dr Danielle Stowasser, says GPs need to feel confident to weigh up the benefits and harms of antipsychotic treatment in various conditions, so they can achieve a favourable balance of clinical benefits and adverse effects for each individual.

"The safety and tolerability profile for each person differs. An individual assessment is key in determining if benefits are being achieved in line with anticipated treatment goals, and that any side effects are not outweighing benefits or affecting adherence," says Dr Stowasser

Assessments should encompass a range of symptoms and risk factors for serious adverse effects, including cardiovascular and metabolic risks, and extrapyramidal symptoms.

"It's also very beneficial to engage patients and their families or carers in recognising and managing adverse effects. These kinds of conversations often translate into a better patient-clinician relationship and may help improve adherence to therapy," says Dr Stowasser.

However, for people experiencing behavioural and psychological symptoms of dementia, ensuring clinical effectiveness involves a different set of considerations.

"Antipsychotic prescribing is widespread for people with dementia, yet many of the troublesome symptoms such as wandering, shouting and insomnia don't respond well to treatment with these medicines and the improvements, if any, are often counterbalanced by significant adverse effects. Not only is tolerability often a problem, but there is evidence of an increased risk of stroke and pneumonia," says Dr Stowasser.

"This NPS program encourages GPs treating people with behavioural and psychological symptoms of dementia to use non-pharmacological therapies as first line whenever possible, and when antipsychotics are prescribed, to review their ongoing need regularly."

NPS provides the following resources and activities for health professionals:

- NPS News (74): *Balancing benefits and harms of antipsychotic therapy*
- Prescribing Practice Review (55): *Balancing benefits and harms of antipsychotic therapy*
- GP and GP registrar clinical audit: *Safe and effective use of antipsychotic therapy*
- Case study (70)
- One-on-one educational visits by NPS facilitators
- Small group discussions led by NPS facilitators (including case scenarios for GPs, pharmacists and nurses)
- Residential aged care facility drug use evaluation – *Antipsychotic use for behavioural and psychological symptoms of dementia in aged care facilities*

To book a one-on-one visit or small group discussion, contact the facilitator at your local division of general practice or Medicare Local.

For more information on antipsychotics, and to access the relevant resources for health professionals, visit www.nps.org.au/antipsychotics

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