

Improving the Management of Behaviour that Challenges associated with dementia in Care Homes: protocol for pharmacy-health psychology intervention feasibility study.

Ian Maidment, Rachel Shaw, Niyah Campbell, Nichola Seare (Aston); Sarah Damery (University B'ham); Andrea Hilton (Hull); Jane Wilcock, Steve Iliffe (UCL); Nigel Barnes, Graeme Brown, Emma Randle (BSMHFT); Sarah Gillespie (Oxford Brookes); Chris Fox, Garry Barton (UEA).

Presenting author contact details: Senior Lecturer, Pharmacy, School of Life and Health Sciences, Aston University, Birmingham, B4 7ET; i.maidment@aston.ac.uk; 0121 204 3002

ABSTRACT

Reducing the inappropriate use of anti-psychotics is an international and national priority. This study aims to assess the feasibility of an inter-disciplinary intervention involving a medication review delivered by a specialist pharmacist and a behavioural intervention delivered by a health psychologist. If feasibility is demonstrated we plan to apply for funding to test the efficacy of the intervention using a cluster randomised trial design.

KEY POINTS

This is the first study to assess the feasibility of an inter-disciplinary intervention involving a medication review and a behavioural intervention.

The study uses a mixed methods approach and will also collect health economic data.

The feasibility study is conducted in a single location; a future planned cluster RCT (CRCT) will be extended to cover other areas.

INTRODUCTION

The National Dementia Strategy estimated that 180,000 people with dementia receive anti-psychotics, yet only 20% of those prescribed are likely to benefit and the usage of such anti-psychotics is implicated in the death of 1,800 people with dementia annually. The Department of Health targeted a two-thirds reduction in such inappropriate usage. However, solely focusing on anti-psychotics may transfer prescribing to other equally dangerous other psychotropics such as benzodiazepines. Little is known about the role of pharmacists, including specialist secondary care pharmacists, in the management of psychotropics used to treat behaviours that challenge particularly in primary care.

This research aims to determine whether it is feasible to implement and measure the effectiveness of a combined pharmacy-health psychology intervention incorporating a medication review and staff training package to limit the prescription of psychotropics to manage behaviour that challenges in care home residents.

METHOD/ANALYSIS:

Study Design: This feasibility study is set within the MRC framework for developing complex interventions. The full protocol is available on the project web-site (<http://www.aston.ac.uk/medrev/>).

Recruitment: Up to six care homes within the West Midlands will be recruited. People with dementia receiving medication for behaviour that challenges, or their personal consultee will be approached regarding participation.

Intervention: Medication used to treat behaviour that challenges will be reviewed by the pharmacist, in collaboration with the GP, person with dementia and carer. The behavioural intervention consists of a training package for care home staff and GPs promoting person-centred care and treating behaviours that challenge as an expression of unmet need.

Outcome Measures: The primary outcome measure is the Neuropsychiatric Inventory Nursing Home version (NPI-NH) at 3 months. Other outcomes include quality of life (EQ-5D and DEMQoL), cognition (sMMSE), health economic (CSRI) and prescribed medication including whether recommendations were implemented. Outcome data will be collected at 6 weeks, and 3 and 6 months.

Qualitative Evaluation: Pre- and post-training interviews with key stakeholders will have two functions: to explore the context, acceptability, fidelity of the intervention and feasibility of the medication review to be tested in a definitive CRCT; and to examine the change process in care homes and evaluate the quality and acceptability of the training package for care staff and GPs.

Analysis: will be primarily descriptive and consider recruitment and retention of homes and individuals. The data will be used to estimate the numbers that need to be approached in a definitive trial in order to meet the required sample size.

Cost-effectiveness: The main purpose is to inform how data on costs and effects would be collected within a definitive study. We will estimate completion rates and seek to identify big cost drivers, in order to inform this decision.

Ethics: project has received a favourable opinion from East Midlands REC (15/EM/3014).

RESULTS:

It appears possible to implement the intervention; three care homes out of 82 initially contacted have been recruited. Another four care homes have expressed an interest. The intervention has been delivered in one 52-bed care home; 17 residents met the inclusion criteria and of these 10 were successfully consented (conversation rate=58.8%). Outcome data has been collected up to 8 weeks after the intervention was implemented.

A screening tool in the other two recruited care homes identified 27 and 30 potential participants. Most frequently used medication in these two homes was anti-depressants (n=34); 19 residents were prescribed anti-psychotics.

DISCUSSION:

Our results show that people with dementia resident in care homes continue to be prescribed psychotropics including anti-depressants. Limitations include that the feasibility is conducted in a single geographical area. The intervention developed in MEDREV appears feasible based on initial results.

FUNDERS:

This publication presents independent research funded by the National Institute for Health Research (NIHR) Research for Patient Benefit programme (reference number: PB-PG-0613-31071). The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the DH.

KEY REFERENCES

Child et al. A pharmacy led program to review anti-psychotic prescribing for people with dementia. BMC Psychiatry 2012, 12:155

Department of Health. The use of antipsychotic medication for people with dementia: Time for action Living well with dementia: National Dementia Strategy. 2009.

Maidment et al. The role of community pharmacists in the use of antipsychotics for BPSD. BMJ Open 2016

Maidment et al. Improving the Management of BPSD in Care Homes: protocol for pharmacy-health psychology intervention feasibility study. BMJ Open 2016