1-143 Lewy Body Treatment

TIPS Question:

I have a client who may have Lewy Body Disease. She is currently being treated with Aricept 5mg and Olanzapine 7.5 mg daily. She has had illusions since January, and these have decreased somewhat. The medication was initiated 3 months ago. She continues to see cats in her home, on the walls, furniture etc. These illusions bother her, and family have requested assistance with helping to rid her of these. Is she on the appropriate medication? I had wondered about the benefits of Exelon for LBD, and had heard that Seroquel might be a better choice of antipsychotic. What is your opinion, and is any research available to suggest type of meds for treating LBD?

Response:

The characteristics of Lewy Body are visual hallucinations, fluctuating symptoms, dementia, mild Parkinson's, and extreme sensitivity to neuroleptics. One of the biological deficits in the Lewy Body Disease is choline deficiency. In fact, even greater deficits have been found in Lewy Body Disease in comparison to Alzheimer's.

This is why theoretically and now has been tested in research in terms of looking at Cholinergics as being a possible effective modality in Lewy Body dementia.

The most extensive studies have been with Exelon, however there is to date no reason to believe that other Cholinergics may not be as effective. We just do not have the research at this juncture.

You might consider increasing the Aricept in this particular situation. Also a switch might be considered. However, nausea and vomiting are much more common with Exelon. It is therefore important obviously that you look at balancing the benefits and risks.

As for your antipsychotic choice, Olanzapine is one of the newer neuroleptics and along with Risperidone and Seroquel are increasingly being used in the older population.

Theoretically, if we look at the three newer antipsychotics now being used in the elderly, they do differ in terms of Parkinson's side effects. With Risperidone having the highest, Olanzapine middle, and Seroquel less. However, this is very much individual specific and is dose dependent.

The key here may be more to look at mirroring drug used against STEPS for your individual patient, i.e. the safety, tolerance, efficacy, price, and simplicity.

Please note: *TIPS information should be used similar to the way you would use information from a text book! TIPS is not intended to serve as an individual consultation service! P.I.E.C.E.S. participants should use this information in context and always work closely with the family physician involved in the care of the resident or client and with other Partners In Care to find solutions to individual resident/client issues.*