3-314 Using antipsychotics PRN

TIPS Question:

Is it effective/beneficial to use antipsychotics such as Zyprexia/Risperdal as a PRN to agitated residents?
What is the goal of treatment, is it to maintain a normal behaviour or to use it as a chemical restraint during agitation?

What are the significant factors you have learned as a result of working through the six-question template?

- Drugs have varied effects on different Residents
- Knowing the possible cause of the behaviour will help you in judging whether to give the resident PRN drugs
- Knowing the side effects will aid in identifying the possible reaction of the resident

Response:

It is best to look at treatment of agitation, particularly in individuals with dementia, as a comprehensive approach. It is problematic to have only one type of intervention as an approach but more of a comprehensive approach that looks at psychosocial, environmental, behavioural, and pharmacological options, and titrating these as appropriate. General best practice guidelines suggest trying to use a non-pharmacological approach and then look at pharmacological subsequent to that. However, often it is critical that even if one is using pharmacological approaches, that one does this in the context of an overall comprehensive approach that identifies possible interventions from going through the P.I.E.C.E.S. framework.

In terms of your specific question, Zyprexa and Risperdal often can be used on a prn basis for specific agitated behaviour such as bathing. Physicians also at times will use prn's to begin with to identify both whether the medication is going to be helpful or to find the right dose for that particular person.

There are also some situations where prn's are perhaps the most helpful prior to a particular episode or a particular time of day. It is, however, good practice to identify, perhaps through a prn basis initially, but to go to more definitive treatment on a consistent basis once one has identified the benefits and risks of a particular medication.

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.*