In Alberta – and around the world – many long term care centres are now working to reduce the use of antipsychotic medicines. Alberta Health Services is supporting this, through the Seniors Health Strategic Clinical Network.

Antipsychotics are often prescribed to manage behaviours of those with dementia. Although there can be good reasons for prescribing this medicine, their use should be limited due to side effects and adverse events. These include: sleepiness, restlessness, agitation, confusion, insomnia, and an increased risk of falls, strokes, pneumonia and sudden death.

Research shows that antipsychotics are not effective for most behaviours in people with dementia, such as agitation, wandering and calling out.

Our care team, which includes [insert names or roles] will review each resident currently taking antipsychotics. We will look for reasons they were started on the medication, if their condition has changed and if there might be better ways to respond to the behaviour. Decreasing or stopping the antipsychotic will be considered.

If we make changes to the antipsychotic medications, we will ask your help to monitor the resident closely. We will also need your help to discover possible reasons for their behaviours, such as pain, the need to go to the toilet, overstimulation, fatigue, hunger or thirst.

We will contact the residents' family/alternate decision makers to discuss the risks and side-effects of antipsychotics and whether it may be appropriate to try to reduce or stop this medication. We will also ask families and staff for ideas to help residents cope with their dementia – without the use of antipsychotics.

Please see the [brochure, poster] that includes more information about the use of antipsychotics. More information (videos, tip sheets and other resources) can be found in the Appropriate Use of Antipsychotics (AUA) Toolkit.

If you have any questions about this project, please feel free to contact [insert the name].