



Office of A.N.D. Older People and Palliative Care - Strategy
Services for Older People
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29th September 2020

Deputy David Cullinane
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

Dear Deputy Cullinane,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the following Parliamentary Question, which was submitted to this Department for response.

PQ Ref: PQ26503/20

PQ: To ask the Minister for Health the protocols for giving sedatives to persons with dementia; and if he will make a statement on the matter

There is national guidance specifically on the use of benzodiazepines and hypnotics in the treatment of anxiety and insomnia (not specifically in people with dementia), published by the HSE's Medicines Management Programme in 2018: (<https://www.hse.ie/eng/about/who/cspd/ncps/medicines-management/bzra-for-anxiety-insomnia/bzraguidancemmpfeb18.pdf>).

This advises caution with the use of benzodiazepines especially in older aged populations, due to the risks associated with them, including sedation, drowsiness, and lethargy. This guidance relates to the use of these medications in any person, regardless of dementia status, and states:

- *“Benzodiazepines should be prescribed for the shortest possible duration and to a maximum period of two to four weeks for the treatment of anxiety”.*
- *“Benzodiazepines and Z drugs (hypnotics) should only be prescribed for a period of a few days to two weeks for insomnia”.*

This guidance contains useful information on deprescribing benzodiazepines following short-term and long-term use (Medicines Management Programme, 2018; section 11, page 25), including a sample letter to patients (appendix E), a patient information leaflet (Appendix F), and two user guides on sleep and relaxation and sleep (appendix B and C)

In addition, the Department of Health in December 2019 launched a National Clinical Guideline for the “Appropriate Prescribing of Psychotropic Medication for non-cognitive symptoms in people with Dementia”.

Non-cognitive symptoms include symptoms like anxiety, poor sleeping, hallucinations, low mood and agitation. This NCG was developed by a national multidisciplinary expert group, including people living with dementia and their families, and led by the National Dementia Office.

<https://www.gov.ie/en/collection/ac0046-appropriate-prescribing-of-psychotropic-medication-for-non-cognitive/>

This guideline includes recommendations for healthcare professionals, specifically for a person with dementia, on the appropriate prescribing of benzodiazepines and hypnotics, based on the MMP guidance and also international evidence:

- *“Due to the very limited evidence to support the use of Benzodiazepines in the management of non-cognitive symptoms in a person with dementia, and their significant adverse effects, they should be avoided for the treatment of non-cognitive symptoms, and usage strictly limited to the management of short term severe anxiety episodes”.*
 - *“A personalised sleep management regimen may be considered for sleep disorders in a person with dementia”.*
 - *“Melatonin should NOT be used for sleep disorders in people with dementia”.*
- The NCG also contains a “good practice point” (based on expert opinion as robust evidence is lacking):
- *“There are no studies of Z type hypnotics for sleep disorders in people with dementia. Due to their significant side effects, if Z type hypnotics are considered, it should be for the shortest period possible (or as specified by medication license)”.*

The NCG also contains specific recommendations on antipsychotic medication, antidepressants, and anticonvulsants (together classified as “psychotropic medications”- or medications that can alter how the brain works). Of note, only hypnotics are primarily aimed at “sedation”, but all these psychotropic medications can cause sedation.

This NCG is supported by two documents developed by the guideline development group:

- a one-page clinical algorithm - a quick reference guide for healthcare professionals:
- a leaflet for People with Dementia, Families and Caregivers: with key points from the guideline in an easier to understand format

The NCG is further supported by a national guidance document on alternatives to medications for non-cognitive symptoms of dementia, published by the National Dementia Office “Guidance on Non-pharmacological Interventions for Healthcare and Social Care Practitioners”:

<https://dementiaphways.ie/resources-for-practice/non-cognitive-symptoms-of-dementia/non-cognitive-symptoms-of-dementia-guidance-document>

Finally, there is specific guidance for GPs available from the ICGP Quality and Safety Practice Committee (2019): “Guidance for Improving the Care of People with Behavioural and Psychological Symptoms of Dementia (BPSD) in the Residential Care Home Setting”:

<https://www.icgp.ie/speck/properties/asset/asset.cfm?type=LibraryAsset&id=B9FA70A1%2DC5B0%2D4F63%2D950B22DEFA00A806&property=asset&revision=tip&disposition=inline&app=icgp&filename=BPSD%5FQRG%5F14%2E08%2E2019%2Epdf>

Yours sincerely,

A handwritten signature in black ink, appearing to be 'A.N.D.', is positioned above a solid horizontal line.

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