

# LONG TERM CARE COMMUNITY COALITION

*Advancing Quality, Dignity & Justice*

## PSYCHOTROPIC DRUGS: RISKS, BENEFITS, AND QUESTIONS TO ASK FACT SHEET FOR INDIVIDUALS LIVING AT HOME OR IN ASSISTED LIVING

When someone is living with dementia, they or their family may be told that psychotropic drugs – such as antipsychotics, antidepressants, or sedatives – can help manage so-called “challenging behaviors” like agitation, wandering, or resistance to care. But while these medications may seem like a quick solution, they often come with serious risks and rarely address the underlying cause of the behavior.

This fact sheet is designed to help families, caregivers, and advocates better understand the role of psychotropic medications in dementia care. It explains the potential benefits and dangers of these drugs, especially antipsychotics, which are frequently overprescribed despite warnings from health authorities. It also offers critical questions to ask when medication is recommended. For additional resources and information, visit <https://nursinghome411.org/dementia-care-in-the-community>.

### What Are Psychotropic Medications?

Psychotropic medications are drugs that alter brain function and can affect a person’s thoughts, emotions, or behavior. In dementia care, these medications are sometimes prescribed to try to manage behavioral expressions or emotional changes, such as:

- Aggression or agitation
- Anxiety or depression
- Hallucinations or delusions
- Sleep disturbances

While these drugs may sometimes offer short-term relief, they do not treat the root causes of “challenging behaviors” and carry significant risks.

### Common Types of Psychotropic Medications

Type	Why It’s Prescribed	Common Risks
Antipsychotics	To manage aggression, severe agitation, hallucinations	Sedation, stroke, Parkinsonism, higher risk of death
Benzodiazepines	For anxiety or sleep problems	Falls, confusion
Antidepressants	For mood symptoms or depression	Confusion, dizziness, falls
Mood Stabilizers	For mood swings or irritability	Drowsiness, worsened cognition

### Weighing the Benefits and Risks

#### Potential Benefits

While psychotropic medications are not a first-line treatment for most dementia-related behaviors, there are limited situations where they may offer relief or support:

- **Managing Severe Distress or Safety Risks:** There may be times when these medications may be used temporarily to help de-escalate a crisis when an individual poses an immediate risk to themselves or others. Once the crisis is over, the standard of practice is to implement non-

pharmacological approaches to address the individual's symptoms and undertake gradual dose reduction of the medications.

- **Supporting Sleep in Specific Cases:** Certain medications can help reduce severe sleep disturbances or nighttime agitation when non-drug approaches have not been effective.
- **Treating Coexisting Mental Health Conditions:** For individuals with pre-existing conditions such as depression or anxiety, psychotropic medications – particularly antidepressants or anxiolytics – may continue to play a helpful role under close supervision.

### Risks to Consider

- **Increased Risk of Falls:** Psychotropic drugs can cause side effects like dizziness, sedation, and impaired coordination, significantly raising the risk of falls and related injuries in older adults.
- **Worsened Cognitive Function:** These medications may contribute to or worsen confusion, disorientation, and memory loss. This can impair a person's ability to walk safely and navigate their surroundings, further increasing the risk of accidents.
- **Higher Risk of Stroke:** Certain antipsychotic medications have been linked to an increased risk of stroke, particularly in older adults with dementia.
- **Aggravation of Behavioral Symptoms:** While intended to reduce behaviors like agitation or aggression, psychotropic medications can sometimes intensify these symptoms or trigger new behavioral issues.
- **Increased Risk of Death:** Some psychotropic drugs—especially antipsychotics—carry the FDA's most serious warning, a **black box warning**, due to their association with higher mortality rates in older adults with dementia.

### Questions to Ask the Doctor:

- Why is this medication being recommended?
- What specific symptom or behavior are we trying to address?
- Have non-drug approaches been tried first? What were the results?
- What are the alternative treatments?
- What are the potential side effects, and what should we watch for?
- How will we know if the medication is working?
- What is the planned duration of use?
- When will we review its effectiveness and safety?
- Is there a plan to reduce or stop the medication over time (tapering)?

### What You Can Do as a Caregiver:

- **Trust your instincts.** Speak up if something doesn't feel right or if you notice concerning changes.
- **Stay organized.** Keep an up-to-date medication list, including doses and reasons for use.
- **Observe closely.** Monitor for any changes in mood, behavior, movement, or alertness and share your observations with the care team.
- **Advocate for regular reviews** to assess whether the drug is still effective, monitor for side effects, and determine if continued use is necessary.
- **Explore alternatives.** Learn about non-drug strategies and ask for support in implementing person-centered approaches to care.